

CITY OF PASS CHRISTIAN  
REGULAR MEETING OF THE  
MAYOR AND BOARD OF ALDERMAN  
March 17, 2026, at 6:00 P.M.

1. Call to Order
2. Roll Call
3. Prayer and Pledge

**PUBLIC COMMENT**

THE MAYOR AND BOARD OF ALDERMAN WILL ALLOW RESIDENTS AN OPPORTUNITY TO SPEAK WITH A THREE-MINUTE TIME LIMIT ON EACH SPEAKER. NO PUBLIC QUESTIONING COMMENTS ARE ALLOWED DURING THE MEETING, UNLESS THE MAYOR RECOGNIZES SUCH PERSON

- Consider adoption of the agenda for Tuesday, March 17, 2026, Board of Alderman Meeting
- Special Presentation - Fire Department
- Open bids for the Leovy Avenue Drainage Improvements

*ADMINISTRATIVE*

1. Consider hearing from PCHS students concerning a community event, as requested by Jennifer Frye, Family and Consumer Sciences Teacher.
2. Consider approving budget modification for the Gulf Coast Restoration Fund grant 22-38 which will allow for the continued improvements to the infrastructure of the West Harbor Bulkhead Wall, as requested by Marian Governor. (exhibit will be emailed on Monday afternoon)
3. Consider approving Change Order No. 3 to Gill's Crane and Dozer Service for West Bulkhead Wall Repair – Phase II to increase the contract price by \$628,155.00 which will be funded through the Gulf

Coast Restoration Grant 22-38 and will allow for the completion of the new concrete bulkhead wall for the remaining 27 linear feet on the South end of the existing bulkhead wall and for stabilizing approximately 106 linear feet of existing bulkhead wall north of the point at the intersection of the Charter Boat Fishing Area and Shaggy's restaurant., as requested by City Engineer, Bob Escher. A-

3

4. Consider approving Amendment No. 1 to the Engineering Services Agreement for additional services related to proposed change order no. 3 for the Phase II West Bulkhead Wall Replacement funded through the Gulf Coast Restoration Grant 22-38, as requested by City Engineer, Bob Escher. A-4
5. Consider approving Engineering Services Agreement for Phase III of the West Bulkhead Wall Repairs funded through the Gulf Coast Restoration Grant 22-38, as requested by City Engineer, Bob Escher. A-5
6. Consider approving the Engineering Services Agreement for Phase II of the 2024 GOMESA Project - Highway 90 Mitigation Project for extending the pedestrian pathway across the north side of the West Small Craft Harbor, as requested by City Engineer, Bob Escher. A-6
7. Consider approving a revision to the lease between the City of Pass Christian and B and W Seafood, L.L.C. William (Fat Man) Scarborough in West Harbor. Previously, the City agreed to a lease of 2 Slips when only one is being used for "a bait shop on a floating barge". The revision to section 1. First paragraph shall read: (As requested by Alderman Barry Dreyfus) A-7

Lessor hereby leases to Lessee, and Lessee hereby accepts leases from Lessor, approximately 1,100 square feet of space located at; Slip No. \_\_\_ inclusive, on the Skiff Pier. The leased premises shall be used for the placement and operation of a floating barge to function as a bait and tackle shop, along with the adjacent slip to provide water access for Lessee's customers. Additionally, Lessee shall have the non-exclusive right to use the area described below along the North Wall of the West Harbor for the placement and maintenance of portable ice boxes, all subject to the terms and conditions set forth in this Lease.

## *EVENTS*

1. Consider approving the waiving of fees and allowing the Pass Christian Library to use War Memorial Park for the Butterflies in the Pass Monarch Festival on Saturday, October 3, 2026, from 10am-1pm, this bringing favorable notice of the resources and opportunities of the City, as requested by Denise Saucier, Head Librarian. E-1
2. Consider approving sponsoring the Pass Christian Historical Society's 2026 Tour of Homes on May 3, 2026, and making a \$125 contribution to be paid out of the Community Promotions budget, this bringing favorable notice to the resources and opportunities of the City, as requested by Amy Steiner, Chair. E-2
3. Consider approving use of War Memorial Park by Ochsner Health April 18, 2026, from 10am to 1:00 pm. This Coast wide event is to honor Doctors and Gulf Coast Administrators for their commitment, dedication and hard work in the Health industry. All concerning Department Heads have granted permission, this bringing favorable notice to the resources and opportunities of the City, as requested by Alderman Kimball. E-3
4. Consider allowing the Pass Christian Volunteer Fire Department to conduct its annual Kids' fishing tournament in the Pass Christian Harbor on May 23rd, with a rain-out day on May 24<sup>th</sup>. This will bring favorable notice of the resources and opportunities of the City, as requested by Fire Chief Woodman. E-4
5. Consider approving revised request from Mississippi Gulf Coast Marathon to hold their 11<sup>th</sup> Anniversary run on Sunday, December 13, 2026, starting at 7:30 a.m. The run begins in Henderson Park, continues along Highway 90 and ends at Keesler Federal Credit Union parking lot in Biloxi, MS. The following City resources are requested, this bringing favorable notice to the resources and opportunities of the City, as requested by Doug Cain, FRESHJUNKIE Racing. E-5

- Police Department Assistance for Highway 90 traffic Control while in the City
- Anything deemed necessary by the Mayor

### *CONSENT*

1. Administrative: Consider authorizing the Mayor and Board of Aldermen to attend the MML 95<sup>TH</sup> Annual Conference from June 29, 2026 – July 1, 2026, in Biloxi, MS., with registration fee of \$350 each, as requested by Mayor Torgeson. CA-1
2. Administrative - Consider approving transfer of the Gulf Coast Restoration Fund reimbursement in the amount of \$523,457.30 from the Depository bank account to the Gulf Coast Restoration Fund account, as requested by Marian Governor, City Clerk.
3. Administrative: Consider approving Payment Application No. 2 for the ARPA/MCWI Project No. 220 for Lift Station No. 31 Relocation in the amount of \$134,995.00 payable to DNA Underground LLC, as requested by City Engineer, Bob Escher, P.E. CA-3
4. Administrative: Consider approving Payment Application No. 2 for the ARPA/MCWI Project No. 234 for Elevate and Replace Electrical and Controls at City Lift Stations in the amount of \$78,315.63 payable to Krol Electric, Inc, as requested by City Engineer, Bob Escher, P.E. CA-4
5. Court – Consider approving refund request of \$105.75 to David Cohen, Sr. Mr. Cohen, Sr. paid a \$500.00 bond at PCPD on December 6, 2025 for David Cohen, Jr. Mr. Cohen, Jr. was heard on his charges February 25, 2026, and was ordered to pay \$394.25 leaving a balance of \$105.75 to be refunded, as requested by Judge Negrotto. CA-5
6. Fire – Consider approving renewal of the VFIS policy in the amount of \$36,035.00, as requested by Marian Governor, City Clerk. CA-6

7. Harbor - Consider approving hiring Dylan Fuson as Harbor Service employee at a rate of \$13.46, pending background checks and physical/drug screens, as requested by Harbormaster James Butcher.
8. Harbor - Consider approving hiring Steven Munn as Harbor Service employee at a rate of \$13.46, pending background checks and physical/drug screens, as requested by Harbormaster James Butcher.
9. Planning - Consider approving request to send Melodie Hayes to the Managing Floodplain Development Class on March 23-26, 2026, in Gulfport, MS at the Harrison County Code Administration building. No registration fee and use of City vehicle is required, as requested by Community Development Director, Billy Dauphin. CA-9
10. Planning - Consider motion to approve the merging of three adjoining lots; tax parcel number 0312N-02-065.000, 0312N-02-064.000 and 0312N-02-083.000 into one lot, with the address to be 423 Royal Oak Blvd. Current zone is T3R, as requested by Melodie Hayes, City Planner. CA-10
11. Planning - Consider motion to approve a simple and by right, merge of two lots parcel# 0212P-02-076.006 & 0212P-02-076.007 into one lot located at approximately 0 Poinsettia Loop, Current zoning is T3R, as requested by Melodie Hayes, City Planner. CA- 11
12. Police – Consider, accepting Oath of Office from Officer Kristy Boyd and Officer John Saltarelli, as requested by Police Chief Freeman. CA-12
13. Police – Consider ratifying request to send Sue Young to mandatory FY25 (Grant) Task Force Meeting held March 17, 2026, in Canton, MS and use of a City vehicle or mileage reimbursement if City vehicle unavailable, as requested by Police Chief Freeman.
14. Police – Consider approving request to apply for Mississippi Office of Homeland Security Grant FY26 in the amount of up to \$15,000 which will pay for five (5) portable radios with programming with the City assuming any balance to be paid for from department budget, as requested by Police Chief Freeman. CA-14

15. Police – Consider approving budget amendment to move \$10,000 from 001-200-491 (Worker's Comp) to 001-200-600 (Contractual), as requested by Police Chief Freeman.
16. Police – Consider ratifying request for transfer of Haley Entrekin from CSO to Evidence Technician within the Police Department, effective September 1, 2025, with no changes to salary or classification, as requested by Police Chief Freeman.
17. Police – Consider approving request for Deputy Chief Chris Williams new membership to Mississippi Association of Chiefs of Police (MACP), membership fee \$100 annually, as requested by Police Chief Freeman. CA- 17
18. Police – Consider approving request to send Chief Daren Freeman and Deputy Chief Chris Williams to 2026 MACP Summer Educational Conference June 16-19, 2026, held in Biloxi, MS. Registration is \$375 each (Chief Freeman's registration fee will be reimbursed by State). No lodging required and use of a City vehicle is requested. as requested by Police Chief Freeman. CA-18
19. Police – Consider accepting donation of ballistic vest for K9 Officer Scout from Special Agent-US Department of War Office of Inspector General (DCMA) Terry Davis and Cheatham County, Tennessee Deputy Samuel Gregory, as requested by Police Chief Freeman. CA- 19
20. Police – Consider ratifying acceptance of \$20,000 appropriation from US Customs and Border Protection (USBP) for the FY26 Treasury Forfeiture Fund for the reimbursement of overtime expenses performed March 1, 2026, through July 31, 2026, and amend budget accordingly. The current MOU is still valid, as requested by Police Chief Freeman. CA-20
21. Police – Consider adding Ivana Williams to part-time list of officers at \$25.00 per hour, pending psychological and urinalysis effective March 18, 2026, as requested by Police Chief Freeman. CA- 21
22. Police – Consider accepting resignation from full time Officer Rony Polizzi effective March 29, 2026, and placing him on part-time list of reserves at the rate of \$25.00 per hour with no benefits or Civil Service protection, as requested by Police Chief Freeman. CA-22

23. Police – Consider approving reimbursement of \$207.35 (286 miles \* 72.5 cents) to Haley Entrekin for Evidence Training class held in Pearl, MS on March 10, 2026, as requested by Police Chief Freeman.
24. Consider approving the minutes of March 3, 2026, Regular Mayor and Board of Aldermen meeting, with changes, as requested by Deputy City Clerk, Dawn Sanders. CA-24
25. Consider accepting the February 2026 Budget Report, as requested by City Clerk, Marian Governor. CA-25 (To be provided prior to BOA)

### *CLAIMS DOCKET*

Motion to approve the Claims Docket in the amount of \$130,919.94. CD-1

**ADJOURN**

A-3  
3-17-26



March 11, 2026

City of Pass Christian  
200 West Scenic Drive  
Pass Christian, MS 39571

Attn: Mayor and Board of Alderpersons

Re: Recommendation of Change Order No. 3  
City of Pass Christian  
2023 GOMESA Project  
West Bulkhead Wall Repair – Phase II

Dear Mayor and Board of Alderpersons:

This change order represents completing the remaining 27 linear feet of concrete sheetpile wall on the south end of the west bulkhead and for stabilizing approximately 106 linear feet of existing bulkhead wall north of the point of beginning for the current project, which is at the intersection of the Charter Boat Fishing Area and Shaggy's Restaurant. The existing concrete bulkhead wall has not yet begun to rotate and we believe that if a new tie-back system can be installed to resist any rotational movement, the existing concrete bulkhead wall will continue to provide stability along the harbor for many years to come.

In an effort to minimize any further inconvenience to Shaggy's operations, we feel that installing a new tie-back system across the front section of the restaurant north to the end point of the Phase I project will allow for continued safe operation for years to come without the inconvenience of closing the establishment for an extended period of time for concrete sheetpile installation. The tie-back system will consist of the same anchoring system as is currently being used in addition to a hot-dipped galvanized steel waler system on the water-side of the existing wall to provide an opposing force to prevent rotation. This work can be reimbursed using available Gulf Coast Restoration Funds.

While the contractor is mobilized, it is our recommendation that this change order be approved to take advantage of the contractor's ability to complete the work without having to incur the costs of an additional mobilization.

If you have any questions, please do not hesitate to contact me.

Sincerely,  
  
COVINGTON CIVIL & ENVIRONMENTAL, LLC  
Bob Escher, P.E.

# CHANGE ORDER

No. 3

Dated 3/11/2026

Owner's Project No. \_\_\_\_\_

Engineer's Project No. 16524.08

Project West Bulkhead Wall Repair - Phase II

Owner City of Pass Christian

Contractor Gill's Crane & Dozer Service

Contract Date 5/1/2025

Contract For West Bulkhead Wall Repair - Phase II

To: Gill's Crane & Dozer Service

Contractor:

Your are directed to make the changes noted below in the subject contract:

Owner City of Pass Christian

By \_\_\_\_\_  
Mayor

Date \_\_\_\_\_

## Nature of the Change

This change order will allow for the completion of the new concrete bulkhead wall for the remaining 27 linear feet on the south end of the existing west bulkhead wall and for the stabilization of approximately 109 linear feet of existing bulkhead wall adjacent to Shaggy's Restaurant. Stabilizing the existing wall adjacent to Shaggy's will be accomplished by installing additional drilled anchors through the existing bulkhead wall followed by a hot-dipped galvanized water to prevent any future rotation of the wall at the ground surface. This work will complete the replacement/restoration of the bulkhead wall from the location of the Crab Unloading Pier south to the terminal end of the existing bulkhead wall.

Enclosures:

The changes result in the following adjustment of Contract Price and Contract Time:

|  |                        |
|--|------------------------|
| Original Contract Price                            | \$ <u>2,195,895.00</u> |
| Contract Price Prior to This Change Order          | \$ <u>2,243,470.00</u> |
| Net Increase Resulting from this Change Order      | \$ <u>628,155.00</u>   |
| Current Contract Price Including This Change Order | \$ <u>2,871,625.00</u> |

Contract Time Prior to This Change Order

328

Calendar Days.

Net Increase Resulting From This Change Order 90 Calendar Days.

Current Contract Time Including This Change Order 418 Calendar Days.

The Above Changes Are Approved:

Covington Civil and Environmental, Inc.  
ENGINEER

by Robert A. Archer

Date 3/11/2026

The Above Changes Are Accepted:

Gill's Crane & Dozer Service  
CONTRACTOR

by Brett J. Anderson

Date 3/11/2026

| Base Bid Items of Work |   |        |       |               |                 |                    |               |                     |                           |                            |
|------------------------|---|--------|-------|---------------|-----------------|--------------------|---------------|---------------------|---------------------------|----------------------------|
| Item No.               | Description   | Qty    | Units | Unit Price    | Ext. Total      | Quantity this C.O. | Unit Price    | Extension this C.O. | Revised Contract Quantity | Revised Contract Extension |
| 1-A                    | MOBILIZATION  | 1      | LS    | \$ 200,000.00 | \$ 200,000.00   | 0                  | \$ 200,000.00 | \$ -                | 1                         | \$ 200,000.00              |
| 2-A - CO #2            | DEMOLITION  | 1      | LS    | \$ 95,000.00  | \$ 95,000.00    | 0                  | \$ 95,000.00  | \$ -                | 1.14                      | \$ 107,825.00              |
| 2-B                    | REMOVAL OF BURIED DEBRIS  | 326    | CY    | \$ 20.00      | \$ 6,520.00     | 0                  | \$ 20.00      | \$ -                | 326                       | \$ 6,520.00                |
| 3-A                    | CLEAN GRANULAR FILL   | 675    | CY    | \$ 30.00      | \$ 20,250.00    | 0                  | \$ 30.00      | \$ -                | 675                       | \$ 20,250.00               |
| 4-A                    | PERMANENT WALL ANCHORS  | 1      | LS    | \$ 252,375.00 | \$ 252,375.00   | 0                  | \$ 252,375.00 | \$ -                | 1                         | \$ 252,375.00              |
| 5-A                    | 12" x 12" PRESTRESSED CONCRETE WALER  | 326    | L.F.  | \$ 100.00     | \$ 32,600.00    | 0                  | \$ 100.00     | \$ -                | 326                       | \$ 32,600.00               |
| 5-B                    | PRESTRESSED CONCRETE SHEET PILING   | 10,560 | S.F.  | \$ 110.00     | \$ 1,161,600.00 | 0                  | \$ 110.00     | \$ -                | 10,560                    | \$ 1,161,600.00            |
| 5-C                    | FLOWABLE FILL   | 320    | C.Y.  | \$ 250.00     | \$ 80,000.00    | 0                  | \$ 250.00     | \$ -                | 320                       | \$ 80,000.00               |
| 6-A                    | CONCRETE CAP  | 320    | L.F.  | \$ 250.00     | \$ 80,000.00    | 0                  | \$ 250.00     | \$ -                | 320                       | \$ 80,000.00               |
| 6-B                    | SIDEWALK PAVING WITH DRAINS   | 295    | S.Y.  | \$ 350.00     | \$ 103,250.00   | 0                  | \$ 350.00     | \$ -                | 295                       | \$ 103,250.00              |
| 8-A                    | PIER RESTORATION - PIER P-2   | 1      | EA.   | \$ 10,000.00  | \$ 10,000.00    | 0                  | \$ 10,000.00  | \$ -                | 1                         | \$ 10,000.00               |
| 8-B                    | PIER RESTORATION - CHARTER FISHING AREA   | 1      | L.S.  | \$ 15,000.00  | \$ 15,000.00    | 0                  | \$ 15,000.00  | \$ -                | 1                         | \$ 15,000.00               |
| 8-C                    | PIER RESTORATION - PIER P-3   | 0      | L.S.  | \$ 10,000.00  | \$ -            | 1                  | \$ 10,000.00  | \$ 10,000.00        | 1                         | \$ 10,000.00               |
| 9-A                    | UTILITY RESTORATION - PIER P-2  | 1      | L.S.  | \$ 15,000.00  | \$ 15,000.00    | 0                  | \$ 15,000.00  | \$ -                | 1                         | \$ 15,000.00               |
| 9-B                    | UTILITY RESTORATION - CHARTER FISHING AREA  | 1      | L.S.  | \$ 5,000.00   | \$ 5,000.00     | 0                  | \$ 5,000.00   | \$ -                | 1                         | \$ 5,000.00                |
| 9-C                    | UTILITY RESTORATION - PIER P-3  | 1      | L.S.  | \$ 15,000.00  | \$ 15,000.00    | 0                  | \$ 15,000.00  | \$ -                | 1                         | \$ 15,000.00               |
| 10-A - CO #2           | 3" ASPHALT PATCHING   | 1,175  | S.Y.  | \$ 50.00      | \$ 58,750.00    | 0                  | \$ 50.00      | \$ -                | 1,175                     | \$ 58,750.00               |
| 10-B - CO #2           | 8" LIMESTONE BASE   | 820    | S.Y.  | \$ 50.00      | \$ 41,000.00    | 0                  | \$ 50.00      | \$ -                | 820                       | \$ 41,000.00               |
| 11-A                   | 6' VINYL-COATED CHAIN LINK FENCE  | 210    | LF    | \$ 80.00      | \$ 16,800.00    | 0                  | \$ 80.00      | \$ -                | 210                       | \$ 16,800.00               |
| 11-B                   | FENCE/GATE ASSEMBLY - PIER P-2 W/SIGNAGE  | 1      | LS    | \$ 5,000.00   | \$ 5,000.00     | 0                  | \$ 5,000.00   | \$ -                | 1                         | \$ 5,000.00                |
| 11-C                   | FENCE/GATE ASSEMBLY - EXCURSION PIER W/SIGNAGE  | 1      | LS    | \$ 5,000.00   | \$ 5,000.00     | 0                  | \$ 5,000.00   | \$ -                | 1                         | \$ 5,000.00                |
| 11-D                   | FENCE/GATE ASSEMBLY - PIER P-3 W/SIGNAGE  | 1      | LS    | \$ 5,000.00   | \$ 5,000.00     | 0                  | \$ 5,000.00   | \$ -                | 1                         | \$ 5,000.00                |
|                        | <b>CHANGE ORDER NO. 1</b>   |        |       |               |                 |                    |               |                     |                           |                            |
| CO#1&2                 | REMOVE AND DISPOSE OF EXISTING TIMBER PILES THAT WERE LOCATED BENEATH THE CHARTER FISHING AREA AND WERE NOT READILY VISIBLE AT THE TIME OF BIDDING. | 10     | EA    | \$ 750.00     | \$ 7,500.00     | 2                  | \$ 750.00     | \$ 1,500.00         | 12                        | \$ 9,000.00                |
|                        | <b>SUBTOTAL CHANGE ORDER NO. 1</b>  |        |       |               | \$ (2,500.00)   |                    |               |                     |                           |                            |

| CHANGE ORDER NO.3             |   |  |      |               |      |     |               |               |     |                |
|-------------------------------|---|--|------|---------------|------|-----|---------------|---------------|-----|----------------|
| 1-A                           | REMOBILIZATION OF WALL ANCHOR SUBCONTRACTOR |  | LS   | \$ 35,000.00  | \$ - | 1   | \$ 35,000.00  | \$ 35,000.00  | 1   | \$ 35,000.00   |
| 2-A                           | DEMOLITION                                  |  | LS   | \$ 15,000.00  | \$ - | 1   | \$ 15,000.00  | \$ 15,000.00  | 1   | \$ 15,000.00   |
| 2-B                           | REMOVAL OF BURIED DEBRIS                    |  | CY   | \$ 20.00      | \$ - | 27  | \$ 20.00      | \$ 540.00     | 27  | \$ 540.00      |
| 3-A                           | CLEAN GRANULAR FILL                         |  | CY   | \$ 30.00      | \$ - | 65  | \$ 30.00      | \$ 1,950.00   | 65  | \$ 1,950.00    |
| 4-A                           | PERMANENT WALL ANCHORS                      |  | LS   | \$ 370,775.00 | \$ - | 1   | \$ 370,775.00 | \$ 370,775.00 | 1   | \$ 370,775.00  |
| 5-A                           | 12" x 12" PRESTRESSED CONCRETE WALER        |  | LF.  | \$ 100.00     | \$ - | 27  | \$ 100.00     | \$ 2,700.00   | 27  | \$ 2,700.00    |
| 5-B                           | PRESTRESSED CONCRETE SHEET PILING           |  | S.F. | \$ 110.00     | \$ - | 864 | \$ 110.00     | \$ 95,040.00  | 864 | \$ 95,040.00   |
| 5-C                           | FLOWABLE FILL                               |  | C.Y. | \$ 250.00     | \$ - | 27  | \$ 250.00     | \$ 6,750.00   | 27  | \$ 6,750.00    |
| 5-D                           | GALVANIZED STEEL WALER                      |  | LF.  | \$ 650.00     | \$ - | 109 | \$ 650.00     | \$ 70,850.00  | 109 | \$ 70,850.00   |
| 6-A                           | CONCRETE CAP                                |  | LF.  | \$ 250.00     | \$ - | 27  | \$ 250.00     | \$ 6,750.00   | 27  | \$ 6,750.00    |
| 6-B                           | SIDEWALK PAVING WITH DRAINS                 |  | S.Y. | \$ 350.00     | \$ - | 24  | \$ 350.00     | \$ 8,400.00   | 24  | \$ 8,400.00    |
| 10-A                          | 3" ASPHALT PATCHING                         |  | S.Y. | \$ 50.00      | \$ - | 29  | \$ 50.00      | \$ 1,450.00   | 29  | \$ 1,450.00    |
| 10-B                          | 8" LIMESTONE BASE                           |  | S.Y. | \$ 50.00      | \$ - | 29  | \$ 50.00      | \$ 1,450.00   | 29  | \$ 1,450.00    |
| SUBTOTAL CHANGE ORDER NO. 2   |   |  |      |               |      |     |               | \$ 628,155.00 |     |                |
| TOTAL REVISED CONTRACT AMOUNT |   |  |      |               |      |     |               |               |     | \$2,871,625.00 |

A-4  
3.17.26

**SHORT FORM OF AGREEMENT  
BETWEEN OWNER AND ENGINEER  
FOR PROFESSIONAL SERVICES  
Amendment #1**

THIS IS AN AGREEMENT effective as of October 17, 2023 ("Effective Date") between The City of Pass Christian ("Owner") and Covington Civil and Environmental, LLC ("Engineer").

Owner's Project, of which Engineer's services under this Agreement are a part, is generally identified as follows: 2023 GOMESA Project – West Bulkhead Wall Replacement – Phase II ("Project").

Engineer's services under this Agreement are generally identified as follows: Provide design services, including topographic surveying, MDMR/USACE permitting, bidding, award and construction engineering and inspection (CE & I) services, and the preparation of record drawings for the construction of the West Bulkhead Wall Replacement – Phase II ("Services") This amendment will allow for the completion of the new concrete bulkhead wall for the remaining 27 linear feet on the south end of the existing west bulkhead wall and for the stabilization of approximately 109 linear feet of existing bulkhead wall adjacent to Shaggy's Restaurant. Stabilizing the existing wall adjacent to Shaggys will be accomplished by installing additional drilled anchors through the existing bulkhead wall followed by a hot-dipped galvanized waler to prevent any future rotation of the wall at the ground surface.

Owner and Engineer further agree as follows:

**1.01 Basic Agreement and Period of Service**

- A. Engineer shall provide or furnish the Services set forth in this Agreement. If authorized by Owner, or if required because of changes in the Project, Engineer shall furnish services in addition to those set forth above ("Additional Services").

**2.01 Payment Procedures**

- A. *Invoices:* Engineer shall prepare invoices in accordance with its standard invoicing practices and submit the invoices to Owner on a monthly basis. Invoices are due and payable within 30 days of receipt. If Owner fails to make any payment due Engineer for Services, Additional Services, and expenses within 30 days after receipt of Engineer's invoice, then (1) the amounts due Engineer may be increased at the rate of 1.0% per month (or the maximum rate of interest permitted by law, if less) from said thirtieth day, and (2) in addition Engineer may, after giving seven days written notice to Owner, suspend Services under this Agreement until Engineer has been paid in full all amounts due for Services, Additional Services, expenses, and other related charges.
- B. *Payment:* As compensation for Engineer providing or furnishing Services and Additional Services, Owner shall pay Engineer as set forth in Paragraphs 2.01, 2.02 (Services), and 2.03 (Additional Services). If Owner disputes an invoice, either as to amount or entitlement, then Owner shall promptly advise Engineer in writing of the specific basis for doing so, may withhold only that portion so disputed, and must pay the undisputed portion.

## 2.02 *Basis of Payment*

### A. Owner shall pay Engineer for Services as follows:

#### 1. Basic Services.

- a. Basic Services will be lump sum and compensated on the basis of the estimated percentage of completion for the following distribution of compensation:

|   |                     |
|---|---------------------|
| 1) <i>Pre-Construction Phase (Engineering, Design, Survey and Permitting)</i> | <i>\$180,000.00</i> |
| 2) <i>Bidding and Negotiation Phase</i>                                       | <i>\$8,500.00</i>   |
| 3) <i>Construction Phase</i>  | <i>\$52,000.00</i>  |
| 4) <i>Amendment #1 Design Amendment and Construction Phase</i>                | <i>\$61,400.00</i>  |

#### 2. Construction Inspection Services

- a. Resident Project Representative Services and Post Construction Services. For services of ENGINEER's Resident Project Representative, an amount equal to the cumulative hours charged to the project by each class of ENGINEER's employees times Standard Hourly Rates for each applicable billing class for all Resident Project Representative services performed on the Project, plus Reimbursable Expenses and ENGINEER's consultant's charges, if any.
- b. Total fees for construction inspection services are currently estimated at \$60,000.00. This total fee will not be exceeded without prior written authorization from the OWNER.

#### 3. Post Construction Services:

- a. For services of ENGINEER's employees for preparing and furnishing to OWNER Record Drawings showing appropriate record information based on Project annotated record documents received from Contractor. An amount equal to the cumulative hours charged to the project by each class of ENGINEER's employees times Standard Hourly Rates for each applicable billing class for all services performed on the Project, plus Reimbursable Expenses and ENGINEER's consultant's charges, if any. The total compensation under this paragraph is estimated to be \$8,500.00. This total fee will not be exceeded without prior written authorization from the OWNER.

4. ENGINEER may adjust compensation percentages for payment as long as the total fee is not increased.

2.03 *Additional Services:* For Additional Services, Owner shall pay Engineer an amount equal to the cumulative hours charged in providing the Additional Services by each class of Engineer's employees, times standard hourly rates for each applicable billing class; plus reimbursement of expenses incurred in connection with providing the Additional Services and Engineer's consultants' charges, if any. Engineer's standard hourly rates are attached as Appendix 1.

## 3.01 *Termination*

### A. The obligation to continue performance under this Agreement may be terminated:

1. For cause,

- a. By either party upon 30 days written notice in the event of substantial failure by the other party to perform in accordance with the Agreement's terms through no fault of the terminating party. Failure to pay Engineer for its services is a substantial failure to perform and a basis for termination.
- b. By Engineer:
  - 1) upon seven days written notice if Owner demands that Engineer furnish or perform services contrary to Engineer's responsibilities as a licensed professional; or
  - 2) upon seven days written notice if the Engineer's Services are delayed for more than 90 days for reasons beyond Engineer's control, or as the result of the presence at the Site of undisclosed Constituents of Concern, as set forth in Paragraph 5.01.I.
- c. Engineer shall have no liability to Owner on account of a termination for cause by Engineer.
- d. Notwithstanding the foregoing, this Agreement will not terminate as a result of a substantial failure under Paragraph 3.01.A.1.a if the party receiving such notice begins, within seven days of receipt of such notice, to correct its substantial failure to perform and proceeds diligently to cure such failure within no more than 30 days of receipt of notice; provided, however, that if and to the extent such substantial failure cannot be reasonably cured within such 30 day period, and if such party has diligently attempted to cure the same and thereafter continues diligently to cure the same, then the cure period provided for herein shall extend up to, but in no case more than, 60 days after the date of receipt of the notice.

2. For convenience, by either party effective upon receipt of written notice from terminating party.

- B. In the event of any termination under Paragraph 3.01, Engineer will be entitled to invoice Owner and to receive full payment for all Services and Additional Services performed or furnished in accordance with this Agreement, plus reimbursement of expenses incurred through the effective date of termination in connection with providing the Services and Additional Services, and Engineer's consultants' charges, if any.

#### 4.01 *Successors, Assigns, and Beneficiaries*

- A. Owner and Engineer are hereby bound and the successors, executors, administrators, and legal representatives of Owner and Engineer (and to the extent permitted by Paragraph 4.01.B the assigns of Owner and Engineer) are hereby bound to the other party to this Agreement and to the successors, executors, administrators, and legal representatives (and said assigns) of such other party, in respect of all covenants, agreements, and obligations of this Agreement.
- B. Neither Owner nor Engineer may assign, sublet, or transfer any rights under or interest (including, but without limitation, money that is due or may become due) in this Agreement without the written consent of the other party, except to the extent that any assignment, subletting, or transfer is mandated by law. Unless specifically stated to the contrary in any written consent to an assignment, no assignment will release or discharge the assignor from any duty or responsibility under this Agreement.
- C. Unless expressly provided otherwise, nothing in this Agreement shall be construed to create, impose, or give rise to any duty owed by Owner or Engineer to any Constructor, other third-party individual or entity, or to any surety for or employee of any of them. All duties and responsibilities undertaken pursuant to this Agreement will be for the sole and exclusive benefit of Owner and Engineer and not for the benefit of any

other party.

#### 5.01 *General Considerations*

- A. The standard of care for all professional engineering and related services performed or furnished by Engineer under this Agreement will be the care and skill ordinarily used by members of the subject profession practicing under similar circumstances at the same time and in the same locality. Engineer makes no warranties, express or implied, under this Agreement or otherwise, in connection with any services performed or furnished by Engineer. Subject to the foregoing standard of care, Engineer and its consultants may use or rely upon design elements and information ordinarily or customarily furnished by others, including, but not limited to, specialty contractors, manufacturers, suppliers, and the publishers of technical standards.
- B. Engineer shall not at any time supervise, direct, control, or have authority over any Constructor's work, nor shall Engineer have authority over or be responsible for the means, methods, techniques, sequences, or procedures of construction selected or used by any Constructor, or the safety precautions and programs incident thereto, for security or safety at the Project site, nor for any failure of a Constructor to comply with laws and regulations applicable to such Constructor's furnishing and performing of its work. Engineer shall not be responsible for the acts or omissions of any Constructor.
- C. Engineer neither guarantees the performance of any Constructor nor assumes responsibility for any Constructor's failure to furnish and perform its work.
- D. Engineer's opinions (if any) of probable construction cost are to be made on the basis of Engineer's experience, qualifications, and general familiarity with the construction industry. However, because Engineer has no control over the cost of labor, materials, equipment, or services furnished by others, or over contractors' methods of determining prices, or over competitive bidding or market conditions, Engineer cannot and does not guarantee that proposals, bids, or actual construction cost will not vary from opinions of probable construction cost prepared by Engineer. If Owner requires greater assurance as to probable construction cost, then Owner agrees to obtain an independent cost estimate.
- E. Engineer shall not be responsible for any decision made regarding the construction contract requirements, or any application, interpretation, clarification, or modification of the construction contract documents other than those made by Engineer or its consultants.
- F. All documents prepared or furnished by Engineer are instruments of service, and Engineer retains an ownership and property interest (including the copyright and the right of reuse) in such documents, whether or not the Project is completed. Owner shall have a limited license to use the documents on the Project, extensions of the Project, and for related uses of the Owner, subject to receipt by Engineer of full payment due and owing for all Services and Additional Services relating to preparation of the documents and subject to the following limitations:
  - 1. Owner acknowledges that such documents are not intended or represented to be suitable for use on the Project unless completed by Engineer, or for use or reuse by Owner or others on extensions of the Project, on any other project, or for any other use or purpose, without written verification or adaptation by Engineer;
  - 2. any such use or reuse, or any modification of the documents, without written verification, completion, or adaptation by Engineer, as appropriate for the specific purpose intended, will be at Owner's sole

risk and without liability or legal exposure to Engineer or to its officers, directors, members, partners, agents, employees, and consultants;

3. Owner shall indemnify and hold harmless Engineer and its officers, directors, members, partners, agents, employees, and consultants from all claims, damages, losses, and expenses, including attorneys' fees, arising out of or resulting from any use, reuse, or modification of the documents without written verification, completion, or adaptation by Engineer; and
  4. such limited license to Owner shall not create any rights in third parties.
- G. Owner and Engineer may transmit, and shall accept, Project-related correspondence, documents, text, data, drawings, information, and graphics, in electronic media or digital format, either directly, or through access to a secure Project website, in accordance with a mutually agreeable protocol.
  - H. To the fullest extent permitted by law, Owner and Engineer (1) waive against each other, and the other's employees, officers, directors, members, agents, insurers, partners, and consultants, any and all claims for or entitlement to special, incidental, indirect, or consequential damages arising out of, resulting from, or in any way related to this Agreement or the Project, and (2) agree that Engineer's total liability to Owner under this Agreement shall be limited to \$100,000 or the total amount of compensation received by Engineer, whichever is greater.
  - I. The parties acknowledge that Engineer's Services do not include any services related to unknown or undisclosed Constituents of Concern. If Engineer or any other party encounters, uncovers, or reveals an unknown or undisclosed Constituent of Concern, then Engineer may, at its option and without liability for consequential or any other damages, suspend performance of Services on the portion of the Project affected thereby until such portion of the Project is no longer affected, or terminate this Agreement for cause if it is not practical to continue providing Services.
  - J. Owner and Engineer agree to negotiate each dispute between them in good faith during the 30 days after notice of dispute. If negotiations are unsuccessful in resolving the dispute, then the dispute shall be mediated. If mediation is unsuccessful, then the parties may exercise their rights at law.
  - K. This Agreement is to be governed by the law of the state in which the Project is located.
  - L. Engineer's Services and Additional Services do not include: (1) serving as a "municipal advisor" for purposes of the registration requirements of Section 975 of the Dodd-Frank Wall Street Reform and Consumer Protection Act (2010) or the municipal advisor registration rules issued by the Securities and Exchange Commission; (2) advising Owner, or any municipal entity or other person or entity, regarding municipal financial products or the issuance of municipal securities, including advice with respect to the structure, timing, terms, or other similar matters concerning such products or issuances; (3) providing surety bonding or insurance-related advice, recommendations, counseling, or research, or enforcement of construction insurance or surety bonding requirements; or (4) providing legal advice or representation.

#### 6.01 *Total Agreement*

- A. This Agreement (consisting of 8 pages, including any expressly incorporated attachments), constitutes the entire agreement between Owner and Engineer and supersedes all prior written or oral understandings.

This Agreement may only be amended, supplemented, modified, or canceled by a duly executed written instrument.

#### 7.01 *Definitions*

- A. *Constructor*—Any person or entity (not including the Engineer, its employees, agents, representatives, and consultants), performing or supporting construction activities relating to the Project, including but not limited to contractors, subcontractors, suppliers, Owner's work forces, utility companies, construction managers, testing firms, shippers, and truckers, and the employees, agents, and representatives of any or all of them.
- B. *Constituent of Concern*—Asbestos, petroleum, radioactive material, polychlorinated biphenyls (PCBs), hazardous waste, and any substance, product, waste, or other material of any nature whatsoever that is or becomes listed, regulated, or addressed pursuant to (a) the Comprehensive Environmental Response, Compensation and Liability Act, 42 U.S.C. §§9601 et seq. ("CERCLA"); (b) the Hazardous Materials Transportation Act, 49 U.S.C. §§5101 et seq.; (c) the Resource Conservation and Recovery Act, 42 U.S.C. §§6901 et seq. ("RCRA"); (d) the Toxic Substances Control Act, 15 U.S.C. §§2601 et seq.; (e) the Clean Water Act, 33 U.S.C. §§1251 et seq.; (f) the Clean Air Act, 42 U.S.C. §§7401 et seq.; or (g) any other federal, State, or local statute, law, rule, regulation, ordinance, resolution, code, order, or decree regulating, relating to, or imposing liability or standards of conduct concerning, any hazardous, toxic, or dangerous waste, substance, or material.

- 8.01 *Attachments*: Appendix 1, Engineer's Standard Hourly Rates: Overtime pay (i.e., hours of work in excess of 40 hours per week shall be paid at an amount equal to the cumulative overtime hours charged at the corresponding hourly rate for each billing class multiplied by 1.5.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, the Effective Date of which is indicated on page 1.

Owner:  
City of Pass Christian

By: \_\_\_\_\_

Print name: Kenny Torgeson

Title: Mayor

Date Signed: 3/17/2026

Engineer:  
Covington Civil and Environmental, LLC

By:  \_\_\_\_\_

Print name: Ben Benvenuti

Title: Principal

Date Signed: 03/10/2026

Engineer License or Firm's Certificate No. (if required):  
865

State of: Mississippi

Address for Owner's receipt of notices:  
200 West Scenic Drive  
Pass Christian, MS 39571

Address for Engineer's receipt of notices:  
2300 14<sup>th</sup> Street  
Gulfport, MS 39501

This is **Appendix 1, Engineer's Standard Hourly Rates**, referred to in and part of the Short Form of Agreement between Owner and Engineer for Professional Services dated October 17, 2023.

**Engineer's Standard Hourly Rates**

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**A. Standard Hourly Rates:**

1. Standard Hourly Rates are set forth in this Appendix 1 and include salaries and wages paid to personnel in each billing class plus the cost of customary and statutory benefits, general and administrative overhead, non-project operating costs, and operating margin or profit.
2. The Standard Hourly Rates apply only as specified in Paragraphs 2.01, 2.02, and 2.03, and are subject to annual review and adjustment.

**B. Schedule of Hourly Rates:**

| <u>Labor Classification</u>                         | <u>Hourly Rate</u> |
|---|--------------------|
| Project Engineer III                                | \$ 185.00          |
| Project Engineer II                                 | \$ 155.00          |
| Project Engineer I                                  | \$ 135.00          |
| Engineer Intern                                     | \$ 105.00          |
| Environmental Specialist                            | \$ 110.00          |
| Senior Project Manager                              | \$ 140.00          |
| Project Manager                                     | \$ 120.00          |
| Senior Design Technician                            | \$105.00           |
| Design Technician                                   | \$85.00            |
| Resident Project Representative                     | \$105.00           |
| Business Manager                                    | \$100.00           |
| Administrative Assistant                            | \$60.00            |
| Professional Land Surveyor                          | \$130.00           |
| Senior Survey Technician with Equipment             | \$150.00           |
| Survey Technician                                   | \$65.00            |
| Survey Crewman                                      | \$50.00            |
| Drone with Operator (minimum rate up to 90 minutes) | \$200.00           |
| * Hourly rate after 90 minutes                      | \$70.00            |

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**Appendix 1, Standard Hourly Rates Schedule.**

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A-5  
3-17-26

**SHORT FORM OF AGREEMENT  
BETWEEN OWNER AND ENGINEER  
FOR PROFESSIONAL SERVICES**

THIS IS AN AGREEMENT effective as of March 17, 2026 ("Effective Date") between The City of Pass Christian ("Owner") and Covington Civil and Environmental, LLC ("Engineer").

Owner's Project, of which Engineer's services under this Agreement are a part, is generally identified as follows: Phase III West Harbor Bulkhead Wall Repair ("Project").

Engineer's services under this Agreement are generally identified as follows: Provide design services, including topographic surveying, engineering, bidding, award and construction engineering and inspection (CE & I) services for the construction of the Phase III West Harbor Bulkhead Wall Repair ("Services") from the northern terminus of the Phase I Bulkhead Wall Project to the southern boundary of Pier C-3, as funding allows.

Owner and Engineer further agree as follows:

**1.01 Basic Agreement and Period of Service**

- A. Engineer shall provide or furnish the Services set forth in this Agreement. If authorized by Owner, or if required because of changes in the Project, Engineer shall furnish services in addition to those set forth above ("Additional Services").

**2.01 Payment Procedures**

- A. *Invoices:* Engineer shall prepare invoices in accordance with its standard invoicing practices and submit the invoices to Owner on a monthly basis. Invoices are due and payable within 45 days of receipt. If Owner fails to make any payment due Engineer for Services, Additional Services, and expenses within 45 days after receipt of Engineer's invoice, then (1) the amounts due Engineer may be increased at the rate of 1.5% per month (or the maximum rate of interest permitted by law, if less) from said forty-fifth day, and (2) in addition Engineer may, after giving seven days written notice to Owner, suspend Services under this Agreement until Engineer has been paid in full all amounts due for Services, Additional Services, expenses, and other related charges.
- B. *Payment:* As compensation for Engineer providing or furnishing Services and Additional Services, Owner shall pay Engineer as set forth in Paragraphs 2.01, 2.02 (Services), and 2.03 (Additional Services). If Owner disputes an invoice, either as to amount or entitlement, then Owner shall promptly advise Engineer in writing of the specific basis for doing so, may withhold only that portion so disputed, and must pay the undisputed portion.

**2.02 Basis of Payment**

A. Owner shall pay Engineer for Services as follows:

1. Basic Services.

- a. Basic Services will be lump sum and compensated on the basis of the estimated percentage of completion for the following distribution of compensation:

|   |                    |
|---|--------------------|
| 1) <i>Pre-Construction Phase (Engineering, Design, Survey and Permitting)</i> | <i>\$67,000.00</i> |
| 2) <i>Bidding and Negotiation Phase</i>                                       | <i>\$13,500.00</i> |
| 3) <i>Construction Phase (Administration and RPR Services)</i>                | <i>\$84,500.00</i> |

- 2.03 *Additional Services:* For Additional Services, Owner and Engineer shall negotiate an amendment to the contract.

3.01 *Termination*

A. The obligation to continue performance under this Agreement may be terminated:

1. For cause,

- a. By either party upon 30 days written notice in the event of substantial failure by the other party to perform in accordance with the Agreement's terms through no fault of the terminating party. Failure to pay Engineer for its services is a substantial failure to perform and a basis for termination.
- b. By Engineer:
- 1) upon seven days written notice if Owner demands that Engineer furnish or perform services contrary to Engineer's responsibilities as a licensed professional; or
  - 2) upon seven days written notice if the Engineer's Services are delayed for more than 90 days for reasons beyond Engineer's control, or as the result of the presence at the Site of undisclosed Constituents of Concern, as set forth in Paragraph 5.01.I.
- c. Engineer shall have no liability to Owner on account of a termination for cause by Engineer.
- d. Notwithstanding the foregoing, this Agreement will not terminate as a result of a substantial failure under Paragraph 3.01.A.1.a if the party receiving such notice begins, within seven days of receipt of such notice, to correct its substantial failure to perform and proceeds diligently to cure such failure within no more than 30 days of receipt of notice; provided, however, that if and to the extent such substantial failure cannot be reasonably cured within such 30 day period, and if such party has diligently attempted to cure the same and thereafter continues diligently to cure the same, then the cure period provided for herein shall extend up to, but in no case more than, 60 days after the date of receipt of the notice.

2. For convenience, by either party effective upon receipt of written notice from terminating party.

- B. In the event of any termination under Paragraph 3.01, Engineer will be entitled to invoice Owner and to receive full payment for all Services and Additional Services performed or furnished in accordance with this Agreement, plus reimbursement of expenses incurred through the effective date of termination in connection with providing the Services and Additional Services, and Engineer's consultants' charges, if any.

#### 4.01 *Successors, Assigns, and Beneficiaries*

- A. Owner and Engineer are hereby bound and the successors, executors, administrators, and legal representatives of Owner and Engineer (and to the extent permitted by Paragraph 4.01.B the assigns of Owner and Engineer) are hereby bound to the other party to this Agreement and to the successors, executors, administrators, and legal representatives (and said assigns) of such other party, in respect of all covenants, agreements, and obligations of this Agreement.
- B. Neither Owner nor Engineer may assign, sublet, or transfer any rights under or Interest (including, but without limitation, money that is due or may become due) in this Agreement without the written consent of the other party, except to the extent that any assignment, subletting, or transfer is mandated by law. Unless specifically stated to the contrary in any written consent to an assignment, no assignment will release or discharge the assignor from any duty or responsibility under this Agreement.
- C. Unless expressly provided otherwise, nothing in this Agreement shall be construed to create, impose, or give rise to any duty owed by Owner or Engineer to any Constructor, other third-party individual or entity, or to any surety for or employee of any of them. All duties and responsibilities undertaken pursuant to this Agreement will be for the sole and exclusive benefit of Owner and Engineer and not for the benefit of any other party.

#### 5.01 *General Considerations*

- A. The standard of care for all professional engineering and related services performed or furnished by Engineer under this Agreement will be the care and skill ordinarily used by members of the subject profession practicing under similar circumstances at the same time and in the same locality. Engineer makes no warranties, express or implied, under this Agreement or otherwise, in connection with any services performed or furnished by Engineer. Subject to the foregoing standard of care, Engineer and its consultants may use or rely upon design elements and information ordinarily or customarily furnished by others, including, but not limited to, specialty contractors, manufacturers, suppliers, and the publishers of technical standards.
- B. Engineer shall not at any time supervise, direct, control, or have authority over any Constructor's work, nor shall Engineer have authority over or be responsible for the means, methods, techniques, sequences, or procedures of construction selected or used by any Constructor, or the safety precautions and programs incident thereto, for security or safety at the Project site, nor for any failure of a Constructor to comply with laws and regulations applicable to such Constructor's furnishing and performing of its work. Engineer shall not be responsible for the acts or omissions of any Constructor.
- C. Engineer neither guarantees the performance of any Constructor nor assumes responsibility for any Constructor's failure to furnish and perform its work.
- D. Engineer's opinions (if any) of probable construction cost are to be made on the basis of Engineer's

experience, qualifications, and general familiarity with the construction industry. However, because Engineer has no control over the cost of labor, materials, equipment, or services furnished by others, or over contractors' methods of determining prices, or over competitive bidding or market conditions, Engineer cannot and does not guarantee that proposals, bids, or actual construction cost will not vary from opinions of probable construction cost prepared by Engineer. If Owner requires greater assurance as to probable construction cost, then Owner agrees to obtain an independent cost estimate.

- E. Engineer shall not be responsible for any decision made regarding the construction contract requirements, or any application, interpretation, clarification, or modification of the construction contract documents other than those made by Engineer or its consultants.
- F. All documents prepared or furnished by Engineer are instruments of service. Owner shall have a limited license to use the documents on the Project, extensions of the Project, and for related uses of the Owner, subject to receipt by Engineer of full payment due and owing for all Services and Additional Services relating to preparation of the documents and subject to the following limitations:
  - 1. any such use or reuse, or any modification of the documents, without written verification, completion, or adaptation by Engineer, as appropriate for the specific purpose intended, will be at Owner's sole risk and without liability or legal exposure to Engineer or to its officers, directors, members, partners, agents, employees, and consultants;
  - 2. such limited license to Owner shall not create any rights in third parties.
- G. Owner and Engineer may transmit, and shall accept, Project-related correspondence, documents, text, data, drawings, information, and graphics, in electronic media or digital format, either directly, or through access to a secure Project website, in accordance with a mutually agreeable protocol.
- H. The parties acknowledge that Engineer's Services do not include any services related to unknown or undisclosed Constituents of Concern. If Engineer or any other party encounters, uncovers, or reveals an unknown or undisclosed Constituent of Concern, then Engineer may, at its option and without liability for consequential or any other damages, suspend performance of Services on the portion of the Project affected thereby until such portion of the Project is no longer affected, or terminate this Agreement for cause if it is not practical to continue providing Services.
- I. Owner and Engineer agree to negotiate each dispute between them in good faith during the 30 days after notice of dispute. If negotiations are unsuccessful in resolving the dispute, then the dispute shall be mediated. If mediation is unsuccessful, then the parties may exercise their rights at law.
- J. This Agreement is to be governed by the law of the state in which the Project is located.
- K. Engineer's Services and Additional Services do not include: (1) serving as a "municipal advisor" for purposes of the registration requirements of Section 975 of the Dodd-Frank Wall Street Reform and Consumer Protection Act (2010) or the municipal advisor registration rules issued by the Securities and Exchange Commission; (2) advising Owner, or any municipal entity or other person or entity, regarding municipal financial products or the issuance of municipal securities, including advice with respect to the structure, timing, terms, or other similar matters concerning such products or issuances; (3) providing surety bonding or insurance-related advice, recommendations, counseling, or research, or enforcement of

construction insurance or surety bonding requirements; or (4) providing legal advice or representation.

#### 6.01 *Total Agreement*

- A. This Agreement (consisting of 16 pages, including any expressly incorporated attachments), constitutes the entire agreement between Owner and Engineer and supersedes all prior written or oral understandings. This Agreement may only be amended, supplemented, modified, or canceled by a duly executed written instrument.

#### 7.01 *Definitions*

- A. *Constructor*—Any person or entity (not including the Engineer, its employees, agents, representatives, and consultants), performing or supporting construction activities relating to the Project, including but not limited to contractors, subcontractors, suppliers, Owner's work forces, utility companies, construction managers, testing firms, shippers, and truckers, and the employees, agents, and representatives of any or all of them.
- B. *Constituent of Concern*—Asbestos, petroleum, radioactive material, polychlorinated biphenyls (PCBs), hazardous waste, and any substance, product, waste, or other material of any nature whatsoever that is or becomes listed, regulated, or addressed pursuant to (a) the Comprehensive Environmental Response, Compensation and Liability Act, 42 U.S.C. §§9601 et seq. ("CERCLA"); (b) the Hazardous Materials Transportation Act, 49 U.S.C. §§5101 et seq.; (c) the Resource Conservation and Recovery Act, 42 U.S.C. §§6901 et seq. ("RCRA"); (d) the Toxic Substances Control Act, 15 U.S.C. §§2601 et seq.; (e) the Clean Water Act, 33 U.S.C. §§1251 et seq.; (f) the Clean Air Act, 42 U.S.C. §§7401 et seq.; or (g) any other federal, State, or local statute, law, rule, regulation, ordinance, resolution, code, order, or decree regulating, relating to, or imposing liability or standards of conduct concerning, any hazardous, toxic, or dangerous waste, substance, or material.

- 8.01 *Attachments*: Appendix 1, Engineer's Standard Hourly Rates: Overtime pay (i.e., hours of work in excess of 40 hours per week shall be paid at an amount equal to the cumulative overtime hours charged at the corresponding hourly rate for each billing class multiplied by 1.5.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, the Effective Date of which is indicated on page 1.

Owner:

City of Pass Christian

By:

\_\_\_\_\_

Print name: Kenny Torgeson

Title: Mayor

Date Signed: \_\_\_\_\_

Address for Owner's receipt of notices:

200 West Scenic Drive

Pass Christian, MS 39571

Engineer:

Covington Civil and Environmental, LLC

By:

\_\_\_\_\_

Print name: Ben Benvenuti

Title: Principal

Date Signed: 03/10/2026

Engineer License or Firm's Certificate No. (if required):

865

State of: Mississippi

Address for Engineer's receipt of notices:

2300 14<sup>th</sup> Street

Gulfport, MS 39501

This is **Appendix 1, Engineer's Standard Hourly Rates**, referred to in and part of the Short Form of Agreement between Owner and Engineer for Professional Services dated August 6, 2024.

### **Engineer's Standard Hourly Rates**

---

#### **A. Standard Hourly Rates:**

1. Standard Hourly Rates are set forth in this Appendix 1 and include salaries and wages paid to personnel in each billing class plus the cost of customary and statutory benefits, general and administrative overhead, non-project operating costs, and operating margin or profit.
2. The Standard Hourly Rates apply only as specified in Paragraph 2.03 and are subject to annual review and adjustment.

#### **B. Schedule of Hourly Rates:**

| <u>Labor Classification</u>                         | <u>Hourly Rate</u> |
|---|--------------------|
| Project Engineer III                                | \$ 185.00          |
| Project Engineer II                                 | \$ 155.00          |
| Project Engineer I                                  | \$ 135.00          |
| Engineer Intern                                     | \$ 105.00          |
| Environmental Specialist                            | \$ 110.00          |
| Senior Project Manager                              | \$ 140.00          |
| Project Manager                                     | \$ 120.00          |
| Senior Design Technician                            | \$105.00           |
| Design Technician                                   | \$85.00            |
| Resident Project Representative                     | \$105.00           |
| Business Manager                                    | \$100.00           |
| Administrative Assistant                            | \$60.00            |
| Professional Land Surveyor                          | \$130.00           |
| Senior Survey Technician with Equipment             | \$150.00           |
| Survey Technician                                   | \$65.00            |
| Survey Crewman                                      | \$50.00            |
| Drone with Operator (minimum rate up to 90 minutes) | \$200.00           |
| * Hourly rate after 90 minutes                      | \$70.00            |

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Appendix 1, Standard Hourly Rates Schedule.

## **SPECIAL PROVISIONS AND REGULATIONS**

For the purpose of clarification, the Contracted Party shall refer to the firm providing professional services to the City of Pass Christian, Grantee/Subgrantee, as specified in the contract to which this document is attached. Notwithstanding the foregoing provisions of the Agreement, the parties do hereby agree as follows:

### **1. Access of Grantee, State of Mississippi, DMR and Others to Documents, Papers, and Books**

The Contracted Party agrees to allow the Grantee, State of Mississippi, Department of Marine Resources, the Comptroller General of the United States, and any of their duly authorized representatives access to any books, documents, papers, and records of the Contracted Party which are directly pertinent to the Contract for the purpose of making audits, examinations, excerpts, and transcriptions.

### **2. Termination of Contract For Cause**

If, through any cause, the Contracted Party shall fail to fulfill in timely and proper manner, his obligations under this Contract, or if the Engineer shall violate any of the covenants, agreements, or stipulations of this Contract, the Grantee shall thereupon have the right to terminate this Contract by giving written notice to the Contracted Party of such termination and specifying the effective date of such termination. In such event, all finished or unfinished documents, data, studies, and reports prepared by the Contracted Party shall entitle the Contracted Party's receipt of just and equitable compensation for any satisfactory work completed on such documents.

Notwithstanding the above, the Contracted Party shall not be relieved of liability to the Grantee for damages sustained or the Grantee by virtue of any breach of the Contract by the Contracted Party. The Owner may withhold any payments to the Contracted Party for the purpose of set off until such time as the exact amount of damages due the Grantee from the Contracted Party is determined.

### **3. Termination for Convenience of the Grantee**

The Grantee may terminate this Contract any time by a notice in writing from the Grantee to the Contracted Party. If the Contract is terminated by the Owner as provided herein, the Contracted Party will be paid an amount which bears the same ratio to the total compensation as the services actually performed bear to the total services of the Contracted Party covered by this Contract, less payments of compensation previously made provided that if less than sixty percent of the services covered by this Contract have been performed upon the effective date of such termination, the Contracted Party shall be reimbursed (in addition to the above payment) for that portion of actual out-of-pocket

expenses (not otherwise reimbursed under this Contract) incurred by the Contracted Party during the Contract period which are directly attributable to the incomplete portion of the services covered by this Contract.

#### **4. Records**

All records required to be kept on the project shall be maintained for at least three years after final payments and until all other pending matters under the grant are closed.

#### **5. Changes**

The Grantee may, from time to time, request changes in the scope of the services of the Contracted Party to be performed hereunder. Such changes, including any increase or decrease in the amount of the Contracted Party's compensation which are mutually agreed upon by and between the Grantee and the Contracted Party, shall be incorporated in written amendments to this Contract.

#### **6. Personnel**

The Contracted Party represents that it has, or will secure at its own expense, all personnel required in performing the services under this Contract. Such personnel shall not be employees of or have any contractual relationship with the Subgrantee.

All the services required hereunder will be performed by the Contracted Party or under its supervision, and all personnel engaged in the work shall be fully qualified and shall be authorized or permitted under State and local law to perform such services.

No person who is serving sentence in a penal or correctional institution shall be employed on work under this Contract.

#### **7. Withholding of Salaries**

If in the performance of this Contract, there is any underpayment of salaries by the Contracted Party or by any subcontracted thereunder, the SubGrantee shall withhold from the Contracted Party out of payment due to him an amount sufficient to pay to employees underpaid the difference between the salaries required thereby to be paid and the salaries actually paid such employees for the total number of hours worked. The amounts withheld shall be disbursed by the SubGrantee for and on account of the contracted party or subcontractor to the respective employees to whom they are due.

#### **8. Claims and Disputes Pertaining to Salary Rates**

Claims and disputes pertaining to salary rates or to classifications of professional staff or technicians performing work under this Contract shall be promptly reported in writing by the Contracted Party to the SubGrantee for the latter's decision which shall be final with respect thereto.

## **9. Anti-Discrimination Clauses**

The Contracted Party will comply with the following clauses:

1. Title VI of the Civil Rights Act of 1964 (PL 88-352), and the regulations issued pursuant thereto (24 CFR 1), which provides that no person in the United States shall on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance and will immediately take any measures necessary to effectuate this assurance. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended, or for another purpose involving the provision of similar services or benefits;
2. Title VIII of the Civil Rights Act of 1968 (PL 90-284), as amended, administering all programs and activities relating to housing and community development in a manner to affirmatively further fair housing, and taking action to affirmatively further fair housing in the sale or rental of housing, the financing of housing, and the provision of brokerage services; and,
3. Executive Order 11063, as amended by Executive Order 12259, on equal opportunity in housing and nondiscrimination in the sale or rental of housing built with Federal assistance Section 109 of the Housing and Community Development Act of 1974, as amended which requires that no person in the United States shall on the grounds of race, color, national origin, or gender be excluded from participation in, be denied the benefits or be subjected to discrimination under, any program or activities funded in whole or in part with community development funds made available pursuant to the Act. Section 109 further provides that any prohibition against discrimination on the basis of age under the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.) or with respect to an otherwise qualified handicapped individual as provided in Section 504 of the Rehabilitation Act of

1973 (29 U.S.C. 796) shall also apply to any such program or activity.

#### **10. Discrimination Because of Certain Labor Matters**

No person employed on the work covered by this Contract shall be discharged or in any way discriminated against because he has filed any complaint or instituted or caused to be instituted any proceeding or has testified or is about to testify in any proceeding under or relating to the labor standards applicable hereunder to his employer.

#### **11. Compliance with Local Laws**

The Contracted Party shall comply with all applicable laws, ordinances, and codes of the state and local governments, and shall commit no trespass on any public or private property in performing any of the work embraced by this Contract.

#### **12. Subcontracting**

None of the services covered by this Contract shall be subcontracted without prior written consent of the Grantee. The Contracted Party shall be as fully responsible to the SubGrantee for the acts and omissions of his subcontractors and of persons either directly or indirectly employed by him. The Contracted Party shall insert in each subcontract appropriate provisions requiring compliance with the labor standards provisions of this Contract.

#### **13. Assignability**

The Contracted Party shall not assign any interest in this Contract and shall not transfer any interest in the same (whether by assignment or novation) without prior written approval of the SubGrantee provided that claims for money due or to become due the Contracted Party from the SubGrantee under this Contract may be assigned to a bank, trust company, or other financial institution, or to a Trustee in Bankruptcy, without such approval. Notice of any such assignment or transfer shall be furnished promptly to the SubGrantee.

#### **14. Interest of Members of Local Public Agency and Others**

The Contracted Party agrees to establish safeguards to prohibit employees from using positions for a purpose that is or give the appearance of being motivated by a desire for private gain for themselves or others in violation of law, particularly those with whom they have a family, business, or other ties

The Contracted Party will comply with Section 25-4-105, Mississippi Code Annotated (1972), which prohibits any public servant from using his official

position to obtain pecuniary benefits for himself other than compensation provided for by law or for any relative or business with which he is associated and which further provides that a public servant may not be interested, during the term for which he has been chosen, or within one (1) year thereafter, in any contract made or let by the governing authorities of such municipality for the construction or doing of any public work, or for the sale or purchase of any materials, supplies or property of any description, or for any other purpose whatsoever, or in any subcontract arising therefrom or connected therewith, or to receive, either directly or indirectly, any portion or share of any money or other thing paid for the construction or doing of any public work, or for the sale or purchase of any property, or upon any other contract made by the governing authorities of the municipality, or subcontract arising therefore or connected therewith.

The Contracted Party will also be aware of and avoid any violation of Sections 25-4-117 and 25-4-119, Mississippi Code Annotated (1972), which prescribes a criminal penalty for any public servant convicted of a violation of this Ethics in Government section.

#### **15. Interest of Certain Federal Officers**

No member of or delegate to the Congress of the United States and no Resident Commissioner, shall be admitted any share or part of this Contract or to any benefit to arise therefrom.

#### **16. Interest of Contractor**

The Contracted Party covenants that he presently has no interest and shall not acquire any interest direct or indirect in the above described project or any parcels therein or any other interest which would conflict in any manner or degree with the performance of his services hereunder. The Contracted Party further covenants that in the performance of this Contract no person having any such interest shall be employed.

#### **17. Political Activity**

The Contracted Party will comply with the provisions of the Hatch Act (5 U.S.C. 1501 et seq.), which limits the political activity of employees.

#### **18. Uniform Act Requirements**

The Contracted Party will comply with all applicable requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (42 U.S.C. 4630) and applicable State laws.

#### **19. Lead-Based Paint Requirements**

The Contracted Party will comply with Title IV of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4831), which prohibits the use of lead-based paint in residential structures constructed or rehabilitated with Federal assistance in any form.

## **20. Compliance with Office of Management and Budget**

The parties agree to comply with the regulations, policies, guidelines, and requirements of the Office of Management and Budget, Circulars A-95, A- 102, and A-54, or other applicable provisions as they relate to the use of Federal funds under this contract.

## **21. Flood Insurance Purchase Requirements**

Both parties agree to comply with the flood insurance purchase requirements of Section 102(2) of the Flood Disaster Protection Act of 1973, (PL 93-234, 87 Stat. 975) approved December 31, 1976. Section 102 (a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase, "Federal financial assistance," includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.

## **22. Historic Preservation**

Both parties agree to assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 470), Executive Order 11593, and the Archaeological and Historic Preservation Act of 1966 (16 USC 469a-1 *et seq.*) by (a) consulting with the State Historic Preservation officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (CFR Part 600.8) by the activity, and notifying the Federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency and the state grantor agency to avoid or mitigate adverse effects upon such properties.

## **23. Program Monitoring**

Both parties agree to assist and cooperate with the Federal grantor agency and the state grantor agency or their duly designated representatives in the

monitoring of the project or projects to which this grant relates, and to provide in form and manner approved by the state granter agency such monitoring reports, progress reports, and the like as may be required and to provide such reports at the times specified.

#### **24. Discrimination Due to Beliefs**

No person with responsibilities in operation of the project to which this grant relates will discriminate with respect to any program participant or any applicant for participation in such program because of political affiliation or beliefs.

#### **25. Confidential Findings**

All of the reports, information, data, etc., prepared or assembled by the Contracted Party under this Contract are confidential, and the Contracted Party agrees that they shall not be made available to any individual or organization without prior written approval of the SubGrantee unless required by law.

#### **26. Third-Party Contracts**

The Grantee shall include in all contracts with Participating Parties receiving grant funds provisions requiring the following:

1. Each such Participating Party keeps and maintains books, records, and other documents relating directly to the receipt and disbursement of such grant funds; and,
2. Any duly authorized representative of the State of Mississippi, DMR, the City and the Comptroller General of the United States shall, at all reasonable times, have access to and the right to inspect, copy, audit, and examine all such books, records, and other documents of such Participating Party until the completion of all close-out procedures respecting this grant and the final settlement and conclusion of all issues arising out of this grant.

The Grantee shall include in all contracts with Participating Parties a provision that each Participating Party agrees that any duly authorized representative of the State of Mississippi, DMR, the City, and the Comptroller General of the United States shall, at all reasonable times, have access to any portion of the project in which such Participating Party is involved until the completion of all close-out procedures respecting this grant.

#### **27. Excessive Force**

The contracted parties will adopt and enforce a policy of prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any

individuals engaged in nonviolent civil rights demonstrations; and enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such nonviolent civil rights demonstrations within its jurisdiction.

### **28. Architectural Barriers Act and Americans with Disabilities**

The contracted parties will comply with the Architectural Barriers Act and the Americans with Disabilities as described in 24 CFR Sec 487 (e) and applicable State laws.

### **29. Code of Standards of Conduct**

The City has or will establish a written Code of Standards of Conduct to prohibit any of its officers, employees, and agents from using his/her position in any manner or matter, which would have the purpose or effect of a conflict of interest, real or apparent. In order to properly implement this provision, it will fully comply with the requirements of 24 CFR, Part 85.36.

### **30. Use of Influence**

The chief elected official certifies, to the best of his or her knowledge and belief, that:

1. No federally appropriated funds have been paid or will be paid, by or on behalf of the chief elected official, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the chief elected official shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The subgrantee shall require that the language of this certification be included in the award documents for all subawards at all tiers

(including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

31. **Other provisions** Contractor agrees to comply with all other applicable Federal and State laws, regulations or Orders that pertain to the City's receipt of Federal funding of grant proceeds under GOMESA by the U. S. Department of Interior and/or the State Department of Marine Resources.

A-6  
3.17.26

**SHORT FORM OF AGREEMENT  
BETWEEN OWNER AND ENGINEER  
FOR PROFESSIONAL SERVICES**

THIS IS AN AGREEMENT effective as of March 17, 2026 ("Effective Date") between The City of Pass Christian ("Owner") and Covington Civil and Environmental, LLC ("Engineer").

Owner's Project, of which Engineer's services under this Agreement are a part, is generally identified as follows: 2024 GOMESA Project – Highway 90 Mitigation Improvements Phase II ("Project").

Engineer's services under this Agreement are generally identified as follows: Provide design services, including topographic surveying, MDMR/USACE permitting (not including purchase of mitigation credits), bidding, award and construction engineering and inspection (CE & I) services, and the preparation of record drawings for the construction of the Highway 90 Mitigation Improvements Phase II as shown in the attached figure starting at the boat ramp and extending East, as funding allows. ("Services").

Owner and Engineer further agree as follows:

**1.01 Basic Agreement and Period of Service**

- A. Engineer shall provide or furnish the Services set forth in this Agreement. If authorized by Owner, or if required because of changes in the Project, Engineer shall furnish services in addition to those set forth above ("Additional Services").

**2.01 Payment Procedures**

- A. *Invoices:* Engineer shall prepare invoices in accordance with its standard invoicing practices and submit the invoices to Owner on a monthly basis. Invoices are due and payable within 45 days of receipt. If Owner fails to make any payment due Engineer for Services, Additional Services, and expenses within 45 days after receipt of Engineer's invoice, then (1) the amounts due Engineer may be increased at the rate of 1.5% per month (or the maximum rate of interest permitted by law, if less) from said forty-fifth day, and (2) in addition Engineer may, after giving seven days written notice to Owner, suspend Services under this Agreement until Engineer has been paid in full all amounts due for Services, Additional Services, expenses, and other related charges.
- B. *Payment:* As compensation for Engineer providing or furnishing Services and Additional Services, Owner shall pay Engineer as set forth in Paragraphs 2.01, 2.02 (Services), and 2.03 (Additional Services). If Owner disputes an invoice, either as to amount or entitlement, then Owner shall promptly advise Engineer in writing of the specific basis for doing so, may withhold only that portion so disputed, and must pay the undisputed portion.

**2.02 Basis of Payment**

A. Owner shall pay Engineer for Services as follows:

1. Basic Services.

a. Basic Services will be lump sum and compensated on the basis of the estimated percentage of completion for the following distribution of compensation:

|   |              |
|---|--------------|
| 1) <i>Pre-Construction Phase (Engineering, Design, Survey and Permitting)</i> | \$155,500.00 |
| 2) <i>Bidding and Negotiation Phase</i>                                       | \$13,500.00  |
| 3) <i>Construction Phase (Administration and RPR Services)</i>                | \$259,500.00 |

2.03 *Additional Services:* For Additional Services, Owner and Engineer shall negotiate an amendment to the contract.

3.01 *Termination*

A. The obligation to continue performance under this Agreement may be terminated:

1. For cause,

a. By either party upon 30 days written notice in the event of substantial failure by the other party to perform in accordance with the Agreement's terms through no fault of the terminating party. Failure to pay Engineer for its services is a substantial failure to perform and a basis for termination.

b. By Engineer:

- 1) upon seven days written notice if Owner demands that Engineer furnish or perform services contrary to Engineer's responsibilities as a licensed professional; or
- 2) upon seven days written notice if the Engineer's Services are delayed for more than 90 days for reasons beyond Engineer's control, or as the result of the presence at the Site of undisclosed Constituents of Concern, as set forth in Paragraph 5.01.I.

c. Engineer shall have no liability to Owner on account of a termination for cause by Engineer.

d. Notwithstanding the foregoing, this Agreement will not terminate as a result of a substantial failure under Paragraph 3.01.A.1.a if the party receiving such notice begins, within seven days of receipt of such notice, to correct its substantial failure to perform and proceeds diligently to cure such failure within no more than 30 days of receipt of notice; provided, however, that if and to the extent such substantial failure cannot be reasonably cured within such 30 day period, and if such party has diligently attempted to cure the same and thereafter continues diligently to cure the same, then the cure period provided for herein shall extend up to, but in no case more than, 60 days after the date of receipt of the notice.

2. For convenience, by either party effective upon receipt of written notice from terminating party.

- B. In the event of any termination under Paragraph 3.01, Engineer will be entitled to invoice Owner and to receive full payment for all Services and Additional Services performed or furnished in accordance with this Agreement, plus reimbursement of expenses incurred through the effective date of termination in connection with providing the Services and Additional Services, and Engineer's consultants' charges, if any.

#### 4.01 *Successors, Assigns, and Beneficiaries*

- A. Owner and Engineer are hereby bound and the successors, executors, administrators, and legal representatives of Owner and Engineer (and to the extent permitted by Paragraph 4.01.B the assigns of Owner and Engineer) are hereby bound to the other party to this Agreement and to the successors, executors, administrators, and legal representatives (and said assigns) of such other party, in respect of all covenants, agreements, and obligations of this Agreement.
- B. Neither Owner nor Engineer may assign, sublet, or transfer any rights under or interest (including, but without limitation, money that is due or may become due) in this Agreement without the written consent of the other party, except to the extent that any assignment, subletting, or transfer is mandated by law. Unless specifically stated to the contrary in any written consent to an assignment, no assignment will release or discharge the assignor from any duty or responsibility under this Agreement.
- C. Unless expressly provided otherwise, nothing in this Agreement shall be construed to create, impose, or give rise to any duty owed by Owner or Engineer to any Constructor, other third-party individual or entity, or to any surety for or employee of any of them. All duties and responsibilities undertaken pursuant to this Agreement will be for the sole and exclusive benefit of Owner and Engineer and not for the benefit of any other party.

#### 5.01 *General Considerations*

- A. The standard of care for all professional engineering and related services performed or furnished by Engineer under this Agreement will be the care and skill ordinarily used by members of the subject profession practicing under similar circumstances at the same time and in the same locality. Engineer makes no warranties, express or implied, under this Agreement or otherwise, in connection with any services performed or furnished by Engineer. Subject to the foregoing standard of care, Engineer and its consultants may use or rely upon design elements and information ordinarily or customarily furnished by others, including, but not limited to, specialty contractors, manufacturers, suppliers, and the publishers of technical standards.
- B. Engineer shall not at any time supervise, direct, control, or have authority over any Constructor's work, nor shall Engineer have authority over or be responsible for the means, methods, techniques, sequences, or procedures of construction selected or used by any Constructor, or the safety precautions and programs incident thereto, for security or safety at the Project site, nor for any failure of a Constructor to comply with laws and regulations applicable to such Constructor's furnishing and performing of its work. Engineer shall not be responsible for the acts or omissions of any Constructor.
- C. Engineer neither guarantees the performance of any Constructor nor assumes responsibility for any Constructor's failure to furnish and perform its work.
- D. Engineer's opinions (if any) of probable construction cost are to be made on the basis of Engineer's

experience, qualifications, and general familiarity with the construction industry. However, because Engineer has no control over the cost of labor, materials, equipment, or services furnished by others, or over contractors' methods of determining prices, or over competitive bidding or market conditions, Engineer cannot and does not guarantee that proposals, bids, or actual construction cost will not vary from opinions of probable construction cost prepared by Engineer. If Owner requires greater assurance as to probable construction cost, then Owner agrees to obtain an independent cost estimate.

- E. Engineer shall not be responsible for any decision made regarding the construction contract requirements, or any application, interpretation, clarification, or modification of the construction contract documents other than those made by Engineer or its consultants.
- F. All documents prepared or furnished by Engineer are instruments of service. Owner shall have a limited license to use the documents on the Project, extensions of the Project, and for related uses of the Owner, subject to receipt by Engineer of full payment due and owing for all Services and Additional Services relating to preparation of the documents and subject to the following limitations:
  - 1. any such use or reuse, or any modification of the documents, without written verification, completion, or adaptation by Engineer, as appropriate for the specific purpose intended, will be at Owner's sole risk and without liability or legal exposure to Engineer or to its officers, directors, members, partners, agents, employees, and consultants;
  - 2. such limited license to Owner shall not create any rights in third parties.
- G. Owner and Engineer may transmit, and shall accept, Project-related correspondence, documents, text, data, drawings, information, and graphics, in electronic media or digital format, either directly, or through access to a secure Project website, in accordance with a mutually agreeable protocol.
- H. The parties acknowledge that Engineer's Services do not include any services related to unknown or undisclosed Constituents of Concern. If Engineer or any other party encounters, uncovers, or reveals an unknown or undisclosed Constituent of Concern, then Engineer may, at its option and without liability for consequential or any other damages, suspend performance of Services on the portion of the Project affected thereby until such portion of the Project is no longer affected, or terminate this Agreement for cause if it is not practical to continue providing Services.
- I. Owner and Engineer agree to negotiate each dispute between them in good faith during the 30 days after notice of dispute. If negotiations are unsuccessful in resolving the dispute, then the dispute shall be mediated. If mediation is unsuccessful, then the parties may exercise their rights at law.
- J. This Agreement is to be governed by the law of the state in which the Project is located.
- K. Engineer's Services and Additional Services do not include: (1) serving as a "municipal advisor" for purposes of the registration requirements of Section 975 of the Dodd-Frank Wall Street Reform and Consumer Protection Act (2010) or the municipal advisor registration rules issued by the Securities and Exchange Commission; (2) advising Owner, or any municipal entity or other person or entity, regarding municipal financial products or the issuance of municipal securities, including advice with respect to the structure, timing, terms, or other similar matters concerning such products or issuances; (3) providing surety bonding or insurance-related advice, recommendations, counseling, or research, or enforcement of

construction insurance or surety bonding requirements; or (4) providing legal advice or representation.

#### 6.01 *Total Agreement*

- A. This Agreement (consisting of 16 pages, including any expressly incorporated attachments), constitutes the entire agreement between Owner and Engineer and supersedes all prior written or oral understandings. This Agreement may only be amended, supplemented, modified, or canceled by a duly executed written instrument.

#### 7.01 *Definitions*

- A. *Constructor*—Any person or entity (not including the Engineer, its employees, agents, representatives, and consultants), performing or supporting construction activities relating to the Project, including but not limited to contractors, subcontractors, suppliers, Owner's work forces, utility companies, construction managers, testing firms, shippers, and truckers, and the employees, agents, and representatives of any or all of them.
- B. *Constituent of Concern*—Asbestos, petroleum, radioactive material, polychlorinated biphenyls (PCBs), hazardous waste, and any substance, product, waste, or other material of any nature whatsoever that is or becomes listed, regulated, or addressed pursuant to (a) the Comprehensive Environmental Response, Compensation and Liability Act, 42 U.S.C. §§9601 et seq. ("CERCLA"); (b) the Hazardous Materials Transportation Act, 49 U.S.C. §§5101 et seq.; (c) the Resource Conservation and Recovery Act, 42 U.S.C. §§6901 et seq. ("RCRA"); (d) the Toxic Substances Control Act, 15 U.S.C. §§2601 et seq.; (e) the Clean Water Act, 33 U.S.C. §§1251 et seq.; (f) the Clean Air Act, 42 U.S.C. §§7401 et seq.; or (g) any other federal, State, or local statute, law, rule, regulation, ordinance, resolution, code, order, or decree regulating, relating to, or imposing liability or standards of conduct concerning, any hazardous, toxic, or dangerous waste, substance, or material.

- 8.01 *Attachments*: Appendix 1, Engineer's Standard Hourly Rates: Overtime pay (i.e., hours of work in excess of 40 hours per week shall be paid at an amount equal to the cumulative overtime hours charged at the corresponding hourly rate for each billing class multiplied by 1.5.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, the Effective Date of which is indicated on page 1.

Owner:

City of Pass Christian

By:

\_\_\_\_\_

Print name: Kenny Torgeson

Title: Mayor

Date Signed: \_\_\_\_\_

Address for Owner's receipt of notices:

200 West Scenic Drive

Pass Christian, MS 39571

Engineer:

Covington Civil and Environmental, LLC

By:

\_\_\_\_\_

Print name: Ben Benvenuti

Title: Principal

Date Signed: 03/10/2026

Engineer License or Firm's Certificate No. (if required):

865

State of: Mississippi

Address for Engineer's receipt of notices:

2300 14<sup>th</sup> Street

Gulfport, MS 39501

This is **Appendix 1, Engineer's Standard Hourly Rates**, referred to in and part of the Short Form of Agreement between Owner and Engineer for Professional Services dated August 6, 2024.

**Engineer's Standard Hourly Rates**

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**A. Standard Hourly Rates:**

1. Standard Hourly Rates are set forth in this Appendix 1 and include salaries and wages paid to personnel in each billing class plus the cost of customary and statutory benefits, general and administrative overhead, non-project operating costs, and operating margin or profit.
2. The Standard Hourly Rates apply only as specified in Paragraph 2.03 and are subject to annual review and adjustment.

**B. Schedule of Hourly Rates:**

| <u>Labor Classification</u>                         | <u>Hourly Rate</u> |
|---|--------------------|
| Project Engineer III                                | \$ 185.00          |
| Project Engineer II                                 | \$ 155.00          |
| Project Engineer I                                  | \$ 135.00          |
| Engineer Intern                                     | \$ 105.00          |
| Environmental Specialist                            | \$ 110.00          |
| Senior Project Manager                              | \$ 140.00          |
| Project Manager                                     | \$ 120.00          |
| Senior Design Technician                            | \$105.00           |
| Design Technician                                   | \$85.00            |
| Resident Project Representative                     | \$105.00           |
| Business Manager                                    | \$100.00           |
| Administrative Assistant                            | \$60.00            |
| Professional Land Surveyor                          | \$130.00           |
| Senior Survey Technician with Equipment             | \$150.00           |
| Survey Technician                                   | \$65.00            |
| Survey Crewman                                      | \$50.00            |
| Drone with Operator (minimum rate up to 90 minutes) | \$200.00           |
| * Hourly rate after 90 minutes                      | \$70.00            |

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Appendix 1, Standard Hourly Rates Schedule.

## **SPECIAL PROVISIONS AND REGULATIONS**

For the purpose of clarification, the Contracted Party shall refer to the firm providing professional services to the City of Pass Christian, Grantee/Subgrantee, as specified in the contract to which this document is attached. Notwithstanding the foregoing provisions of the Agreement, the parties do hereby agree as follows:

### **1. Access of Grantee, State of Mississippi, DMR and Others to Documents, Papers, and Books**

The Contracted Party agrees to allow the Grantee, State of Mississippi, Department of Marine Resources, the Comptroller General of the United States, and any of their duly authorized representatives access to any books, documents, papers, and records of the Contracted Party which are directly pertinent to the Contract for the purpose of making audits, examinations, excerpts, and transcriptions.

### **2. Termination of Contract For Cause**

If, through any cause, the Contracted Party shall fail to fulfill in timely and proper manner, his obligations under this Contract, or if the Engineer shall violate any of the covenants, agreements, or stipulations of this Contract, the Grantee shall thereupon have the right to terminate this Contract by giving written notice to the Contracted Party of such termination and specifying the effective date of such termination. In such event, all finished or unfinished documents, data, studies, and reports prepared by the Contracted Party shall entitle the Contracted Party's receipt of just and equitable compensation for any satisfactory work completed on such documents.

Notwithstanding the above, the Contracted Party shall not be relieved of liability to the Grantee for damages sustained or the Grantee by virtue of any breach of the Contract by the Contracted Party. The Owner may withhold any payments to the Contracted Party for the purpose of set off until such time as the exact amount of damages due the Grantee from the Contracted Party is determined.

### **3. Termination for Convenience of the Grantee**

The Grantee may terminate this Contract any time by a notice in writing from the Grantee to the Contracted Party. If the Contract is terminated by the Owner as provided herein, the Contracted Party will be paid an amount which bears the same ratio to the total compensation as the services actually performed bear to the total services of the Contracted Party covered by this Contract, less payments of compensation previously made provided that if less than sixty percent of the services covered by this Contract have been performed upon the effective date of such termination, the Contracted Party shall be reimbursed (in addition to the above payment) for that portion of actual out-of-pocket

expenses (not otherwise reimbursed under this Contract) incurred by the Contracted Party during the Contract period which are directly attributable to the incomplete portion of the services covered by this Contract.

#### **4. Records**

All records required to be kept on the project shall be maintained for at least three years after final payments and until all other pending matters under the grant are closed.

#### **5. Changes**

The Grantee may, from time to time, request changes in the scope of the services of the Contracted Party to be performed hereunder. Such changes, including any increase or decrease in the amount of the Contracted Party's compensation which are mutually agreed upon by and between the Grantee and the Contracted Party, shall be incorporated in written amendments to this Contract.

#### **6. Personnel**

The Contracted Party represents that it has, or will secure at its own expense, all personnel required in performing the services under this Contract. Such personnel shall not be employees of or have any contractual relationship with the Subgrantee.

All the services required hereunder will be performed by the Contracted Party or under its supervision, and all personnel engaged in the work shall be fully qualified and shall be authorized or permitted under State and local law to perform such services.

No person who is serving sentence in a penal or correctional institution shall be employed on work under this Contract.

#### **7. Withholding of Salaries**

If in the performance of this Contract, there is any underpayment of salaries by the Contracted Party or by any subcontracted thereunder, the SubGrantee shall withhold from the Contracted Party out of payment due to him an amount sufficient to pay to employees underpaid the difference between the salaries required thereby to be paid and the salaries actually paid such employees for the total number of hours worked. The amounts withheld shall be disbursed by the SubGrantee for and on account of the contracted party or subcontractor to the respective employees to whom they are due.

#### **8. Claims and Disputes Pertaining to Salary Rates**

Claims and disputes pertaining to salary rates or to classifications of professional staff or technicians performing work under this Contract shall be promptly reported in writing by the Contracted Party to the SubGrantee for the latter's decision which shall be final with respect thereto.

#### **9. Anti-Discrimination Clauses**

The Contracted Party will comply with the following clauses:

1. Title VI of the Civil Rights Act of 1964 (PL 88-352), and the regulations issued pursuant thereto (24 CFR 1), which provides that no person in the United States shall on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance and will immediately take any measures necessary to effectuate this assurance. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended, or for another purpose involving the provision of similar services or benefits;
2. Title VIII of the Civil Rights Act of 1968 (PL 90-284), as amended, administering all programs and activities relating to housing and community development in a manner to affirmatively further fair housing, and taking action to affirmatively further fair housing in the sale or rental of housing, the financing of housing, and the provision of brokerage services; and,
3. Executive Order 11063, as amended by Executive Order 12259, on equal opportunity in housing and nondiscrimination in the sale or rental of housing built with Federal assistance Section 109 of the Housing and Community Development Act of 1974, as amended which requires that no person in the United States shall on the grounds of race, color, national origin, or gender be excluded from participation in, be denied the benefits or be subjected to discrimination under, any program or activities funded in whole or in part with community development funds made available pursuant to the Act. Section 109 further provides that any prohibition against discrimination on the basis of age under the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.) or with respect to an otherwise qualified handicapped individual as provided in Section 504 of the Rehabilitation Act of

1973 (29 U.S.C. 796) shall also apply to any such program or activity.

#### **10. Discrimination Because of Certain Labor Matters**

No person employed on the work covered by this Contract shall be discharged or in any way discriminated against because he has filed any complaint or instituted or caused to be instituted any proceeding or has testified or is about to testify in any proceeding under or relating to the labor standards applicable hereunder to his employer.

#### **11. Compliance with Local Laws**

The Contracted Party shall comply with all applicable laws, ordinances, and codes of the state and local governments, and shall commit no trespass on any public or private property in performing any of the work embraced by this Contract.

#### **12. Subcontracting**

None of the services covered by this Contract shall be subcontracted without prior written consent of the Grantee. The Contracted Party shall be as fully responsible to the SubGrantee for the acts and omissions of his subcontractors and of persons either directly or indirectly employed by him. The Contracted Party shall insert in each subcontract appropriate provisions requiring compliance with the labor standards provisions of this Contract.

#### **13. Assignability**

The Contracted Party shall not assign any interest in this Contract and shall not transfer any interest in the same (whether by assignment or novation) without prior written approval of the SubGrantee provided that claims for money due or to become due the Contracted Party from the SubGrantee under this Contract may be assigned to a bank, trust company, or other financial institution, or to a Trustee in Bankruptcy, without such approval. Notice of any such assignment or transfer shall be furnished promptly to the SubGrantee.

#### **14. Interest of Members of Local Public Agency and Others**

The Contracted Party agrees to establish safeguards to prohibit employees from using positions for a purpose that is or give the appearance of being motivated by a desire for private gain for themselves or others in violation of law, particularly those with whom they have a family, business, or other ties

The Contracted Party will comply with Section 25-4-105, Mississippi Code Annotated (1972), which prohibits any public servant from using his official

position to obtain pecuniary benefits for himself other than compensation provided for by law or for any relative or business with which he is associated and which further provides that a public servant may not be interested, during the term for which he has been chosen, or within one (1) year thereafter, in any contract made or let by the governing authorities of such municipality for the construction or doing of any public work, or for the sale or purchase of any materials, supplies or property of any description, or for any other purpose whatsoever, or in any subcontract arising therefrom or connected therewith, or to receive, either directly or indirectly, any portion or share of any money or other thing paid for the construction or doing of any public work, or for the sale or purchase of any property, or upon any other contract made by the governing authorities of the municipality, or subcontract arising therefore or connected therewith.

The Contracted Party will also be aware of and avoid any violation of Sections 25-4-117 and 25-4-119, Mississippi Code Annotated (1972), which prescribes a criminal penalty for any public servant convicted of a violation of this Ethics in Government section.

#### **15. Interest of Certain Federal Officers**

No member of or delegate to the Congress of the United States and no Resident Commissioner, shall be admitted any share or part of this Contract or to any benefit to arise therefrom.

#### **16. Interest of Contractor**

The Contracted Party covenants that he presently has no interest and shall not acquire any interest direct or indirect in the above described project or any parcels therein or any other interest which would conflict in any manner or degree with the performance of his services hereunder. The Contracted Party further covenants that in the performance of this Contract no person having any such interest shall be employed.

#### **17. Political Activity**

The Contracted Party will comply with the provisions of the Hatch Act (5 U.S.C. 1501 et seq.), which limits the political activity of employees.

#### **18. Uniform Act Requirements**

The Contracted Party will comply with all applicable requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (42 U.S.C. 4630) and applicable State laws.

#### **19. Lead-Based Paint Requirements**

The Contracted Party will comply with Title IV of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4831), which prohibits the use of lead-based paint in residential structures constructed or rehabilitated with Federal assistance in any form.

## **20. Compliance with Office of Management and Budget**

The parties agree to comply with the regulations, policies, guidelines, and requirements of the Office of Management and Budget, Circulars A-95, A- 102, and A-54, or other applicable provisions as they relate to the use of Federal funds under this contract.

## **21. Flood Insurance Purchase Requirements**

Both parties agree to comply with the flood insurance purchase requirements of Section 102(2) of the Flood Disaster Protection Act of 1973, (PL 93-234, 87 Stat. 975) approved December 31, 1976. Section 102 (a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase, "Federal financial assistance," includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.

## **22. Historic Preservation**

Both parties agree to assist the Federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 470), Executive Order 11593, and the Archaeological and Historic Preservation Act of 1966 (16 USC 469a-1 et seq.) by (a) consulting with the State Historic Preservation officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (CFR Part 600.8) by the activity, and notifying the Federal granter agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency and the state granter agency to avoid or mitigate adverse effects upon such properties.

## **23. Program Monitoring**

Both parties agree to assist and cooperate with the Federal granter agency and the state granter agency or their duly designated representatives in the

monitoring of the project or projects to which this grant relates, and to provide in form and manner approved by the state granter agency such monitoring reports, progress reports, and the like as may be required and to provide such reports at the times specified.

#### **24. Discrimination Due to Beliefs**

No person with responsibilities in operation of the project to which this grant relates will discriminate with respect to any program participant or any applicant for participation in such program because of political affiliation or beliefs.

#### **25. Confidential Findings**

All of the reports, information, data, etc., prepared or assembled by the Contracted Party under this Contract are confidential, and the Contracted Party agrees that they shall not be made available to any individual or organization without prior written approval of the SubGrantee unless required by law.

#### **26. Third-Party Contracts**

The Grantee shall include in all contracts with Participating Parties receiving grant funds provisions requiring the following:

1. Each such Participating Party keeps and maintains books, records, and other documents relating directly to the receipt and disbursement of such grant funds; and,
2. Any duly authorized representative of the State of Mississippi, DMR, the City and the Comptroller General of the United States shall, at all reasonable times, have access to and the right to inspect, copy, audit, and examine all such books, records, and other documents of such Participating Party until the completion of all close-out procedures respecting this grant and the final settlement and conclusion of all issues arising out of this grant.

The Grantee shall include in all contracts with Participating Parties a provision that each Participating Party agrees that any duly authorized representative of the State of Mississippi, DMR, the City, and the Comptroller General of the United States shall, at all reasonable times, have access to any portion of the roject in which such Participating Party is involved until the completion of all close-out procedures respecting this grant.

#### **27. Excessive Force**

The contracted parties will adopt and enforce a policy of prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any

individuals engaged in nonviolent civil rights demonstrations; and enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such nonviolent civil rights demonstrations within its jurisdiction.

### **28. Architectural Barriers Act and Americans with Disabilities**

The contracted parties will comply with the Architectural Barriers Act and the Americans with Disabilities as described in 24 CFR Sec 487 (e) and applicable State laws.

### **29. Code of Standards of Conduct**

The City has or will establish a written Code of Standards of Conduct to prohibit any of its officers, employees, and agents from using his/her position in any manner or matter, which would have the purpose or effect of a conflict of interest, real or apparent. In order to properly implement this provision, it will fully comply with the requirements of 24 CFR, Part 85.36.

### **30. Use of Influence**

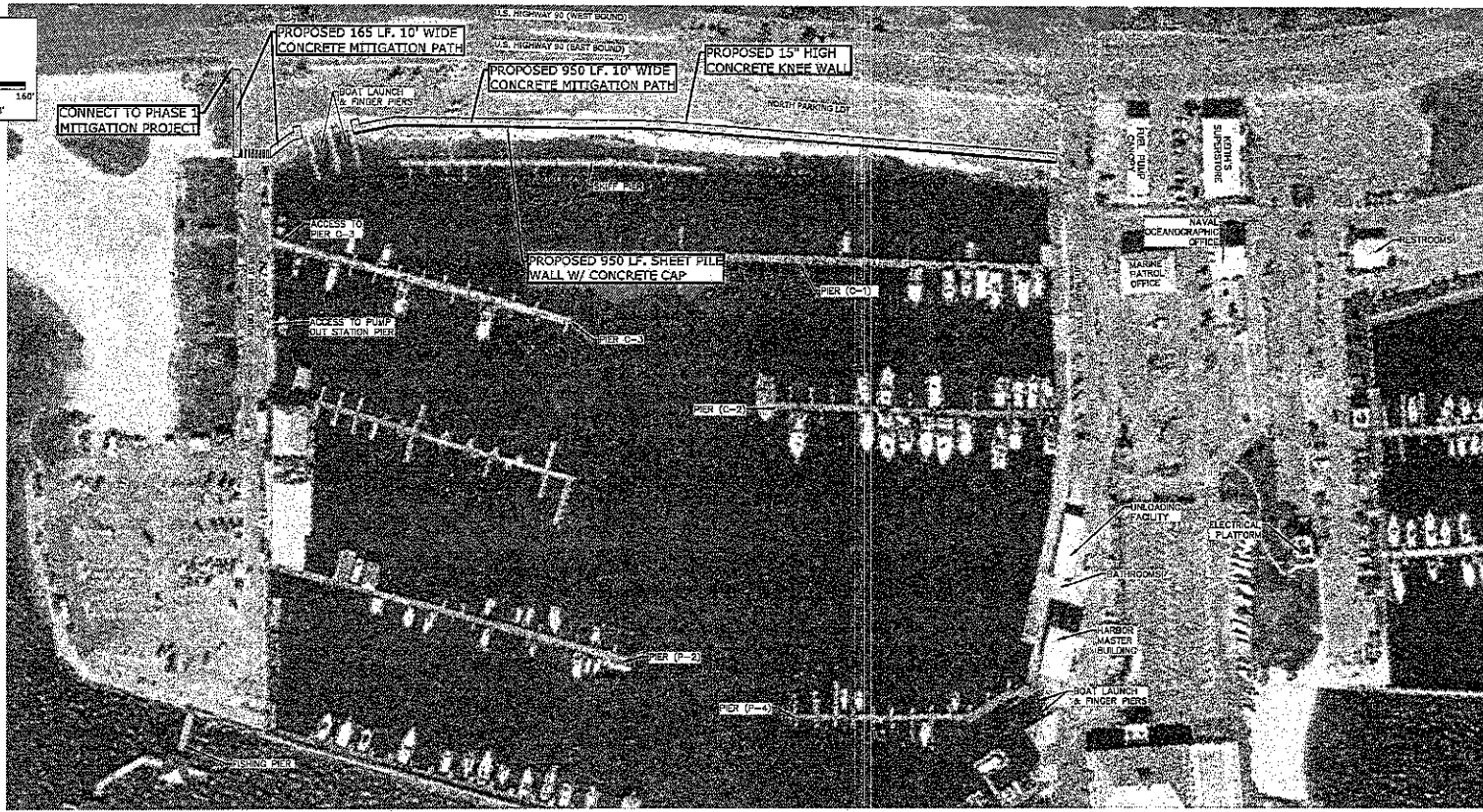
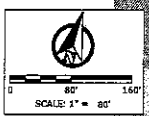
The chief elected official certifies, to the best of his or her knowledge and belief, that:

1. No federally appropriated funds have been paid or will be paid, by or on behalf of the chief elected official, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the chief elected official shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The subgrantee shall require that the language of this certification be included in the award documents for all subawards at all tiers

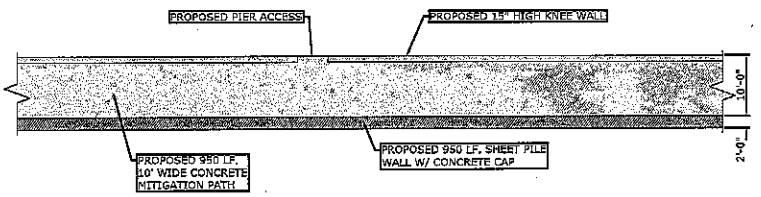
(including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

**31. Other provisions** Contractor agrees to comply with all other applicable Federal and State laws, regulations or Orders that pertain to the City's receipt of Federal funding of grant proceeds under GOMESA by the U. S. Department of Interior and/or the State Department of Marine Resources.

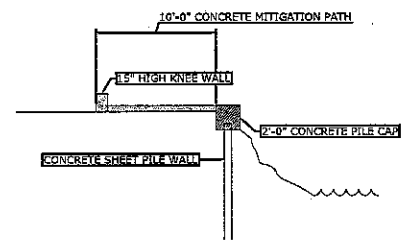
Z:\Shared\Projects\16461.08 - Pass Christian City Engineer Services\Pass Harbor Schematic Exhibit 2025\X1.0 REVISED 2-22-26.dwg, X1.0, 2/22/2026 12:50:53 PM, Tenney Parker



**1** PROPOSED WEST HARBOR HURRICANE MITIGATION PLAN  
 X1.0 SCALE: 1" = 80'



**2** ENLARGED HURRICANE MITIGATION PLAN  
 X1.0 SCALE: NTS



**3** ENLARGED SECTION  
 X1.0 SCALE: NTS



|     |      |                |
|-----|------|----------------|
| NO. | DATE | REVISION/ISSUE |
|     |      |                |
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| NO. | DATE | REVISION/ISSUE |
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CITY OF PASS CHRISTIAN  
 WEST HARBOR HURRICANE MITIGATION PROJECT  
 PROPOSED WEST HARBOR MITIGATION PLAN

|          |             |           |          |
|----------|-------------|-----------|----------|
| DATE     | BY          | CHECKED   | AS NOTED |
| FEB 2026 | T. PARKER   | B. ESCHER |          |
| DRAWN BY | PROJECT NO. | SHEET NO. |          |
|          | 16461.08    |           |          |

X1.0

A-7  
3.17.26

**Agenda Item Request from Alderman Barry Dreyfus Jr.**

**Alderman Meeting Date**                      March 17<sup>th</sup> 2026

**Request #1**

**Agenda Section**                                      Administration

Consider approving a revision to the lease between the City of Pass Christian and B and W Seafood, L.L.C. (William (Fat Man) Scarborough in West Harbor. Previously the City agreed to a lease of 2 Slips when only one is being used for "a bait shop on a floating barge". The revision to section 1. First paragraph shall read:

Lessor hereby leases to Lessee, and Lessee hereby accepts and leases from Lessor, approximately 1,100 square feet of space located at ~~Slip Nos. 24—25—~~, Slip No. \_\_\_ inclusive, on the Skiff Pier. The leased premises shall be used for the placement and operation of a .floating barge to function as a bait and tackle shop, along with the adjacent slip to provide water access for Lessee's customers. Additionally, Lessee shall have the non-exclusive right to use the area described below along the North Wall of the West Harbor for the placement and maintenance of portable ice boxes, all subject to the terms and conditions set forth in this Lease.

Attachment \_\_\_\_\_

STATE OF MISSISSIPPI  
COUNTY OF HARRISON

**LEASE AGREEMENT**

This Lease Agreement ("Lease Agreement") made by and between the City of Pass Christian, a Mississippi municipal corporation (the "City"), herein after sometimes referred to as "Lessor", and B and W Seafood, LLC, hereinafter sometimes referred to as "Lessee".

WHEREAS, the Lessor and Lessee previously entered into a Slip Rental Agreement for a bait shop on a floating barge and for sale of ice on the North wall of the West Harbor; and

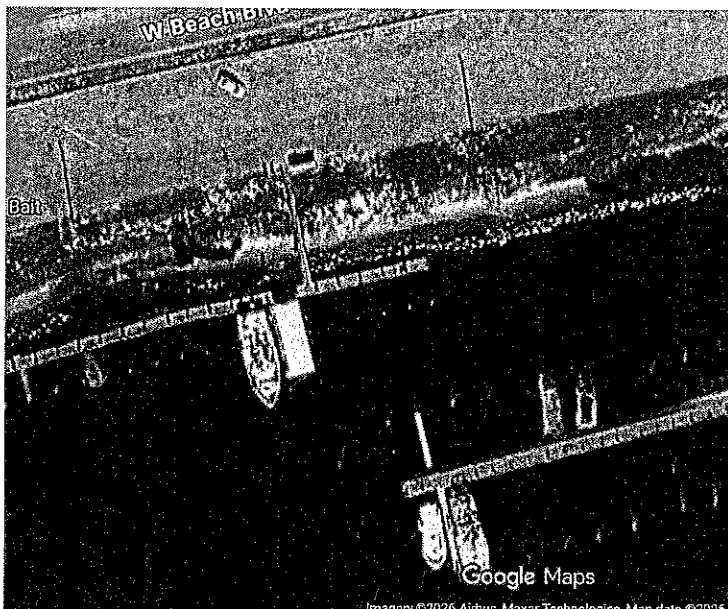
WHEREAS, the City and the State of Mississippi acting through the Secretary of State entered into a Tidelands Lease for the new harbor expansion area East of the existing small craft harbor and the existing West Harbor with an initial term of forty years beginning on January 1, 2010, and ending on December 31, 2049 (the "Tidelands Lease"), with the understanding that the aforementioned lease with Lessee would continue until it was assigned, the lease term ended, or the lease was otherwise terminated with the City and the City as Lessor would continue to receive all such rental income for such time frame (Exhibit "A") ; and

WHEREAS, the City as Lessor and the Lessee wish to enter into a long-term lease for the same space for a bait and tackle shop on a floating barge and to provide for sale of ice on the adjacent North wall of the West Harbor.

NOW, FOR AND IN CONSIDERATION of the mutual benefits and covenants contained herein, the receipt and sufficiency of which is hereby acknowledged, the parties herein do agree as follows:

**1. Lease Term and Rent.**

Lessor hereby leases to Lessee, and Lessee hereby accepts and leases from Lessor, approximately 1,100 square feet of space located at Slip Nos. 24-25, inclusive, on the Skiff Pier. The leased premises shall be used for the placement and operation of a floating barge to function as a bait and tackle shop, along with the adjacent slip to provide water access for Lessee's customers. Additionally, Lessee shall have the non-exclusive right to use the area described below along the North Wall of the West Harbor for the placement and maintenance of portable ice boxes, all subject to the terms and conditions set forth in this Lease.



E-1  
3-17-26



PASS CHRISTIAN  
PUBLIC LIBRARY  
HARRISON COUNTY LIBRARY SYSTEM

111 Hiern Avenue • Pass Christian, MS 39571 • 228.452.4596 • 228.452.1111 Fax

February 24, 2026

Honorable Kenny Torgeson, Mayor  
Alderman Ward 1 Barry Dreyfus  
Alderman Ward 2 Joseph Piernas  
Alderman Ward 3 Kirk Kimball  
Alderman Ward 4 Greg Federico  
Alderman At Large Victor Pickich

City of Pass Christian  
200 W. Scenic Drive  
Pass Christian, MS 39571

Dear Mayor Torgeson and Board of Aldermen,

The Committee for the Butterflies in the Pass Monarch Festival is seeking permission from the City of Pass Christian Mayor and Aldermen to use War Memorial Park for the annual Butterflies in the Pass Monarch Festival. The festival will be held on Saturday, October 3, 2026, from 10:00 am to 1:00 pm.

The Committee is requesting that the City to waive the Park Rental Fee and the liability insurance coverage requirement for this event. The completed Park Use Permit Application; the City of Pass Christian Special Event Application; and the Pass Christian Event Indemnity and Hold Harmless Agreement for this event are attached to this letter.

The goal of the festival is to educate the public about Monarch butterflies and other pollinators and how our community can help preserve and protect them with Monarch Way Stations and other landscaping choices. Pass Christian is located along the migration path for Monarch butterflies both in the spring as they migrate north from Mexico, and again in the fall as they migrate to their winter home in Mexico.

The festival will be located near the gazebo and the Billy Bourdin Butterfly Garden and along the sidewalk north of the gazebo (inside War Memorial Park). The event will feature two (2) educational speakers and educational and “hands on” activities for all ages. There will also be a walking parade through the park to begin the event. Those participating in the parade, including pets, will be in butterfly regalia.

The 2025 Festival brought over 1,000 visitors to the park. Exhibitors at the 2025 event included the Mississippi Forestry Commission, the Mississippi Aquarium, Audubon Coastal Conservation, Infinity Science Center, the Pass Christian Garden Club and others. This festival brings our residents together and brings visitors to our community for a fun, educational, and family friendly event. It brings good publicity and attention to Pass Christian. The festival partners with and coordinates with the weekly Market in the Park. It has been a great collaboration!

The Butterflies in the Pass Monarch Festival is requesting the City to provide the following:

- 8 barricades (to mark an unloading zone for the exhibitors).
- Extra Trash Removal.
- Cleaning and re-stocking of the public restrooms,
- Mowing and fire ant treatment the prior to the event.
- Permissions to place festival signs around the City up to 2 weeks prior to the event;
- Other resources as deemed necessary by the mayor.

If you have any questions or need further information, please do not hesitate to call or email. Thank you for your consideration. Your support is greatly appreciated.

Sincerely,



Denise L. Saucier, Head Librarian  
Pass Christian Public Library

**CITY OF PASS CHRISTIAN  
SPECIAL EVENT APPLICATION**

City Clerk's Office\* 200 West Scenic Drive\*Pass Christian, MS 39571

Date Received By Clerk's Office: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

**Please complete this application in accordance with the City of PASS CHRISTIAN Special Events Policy, and return it to the Office of the City Clerk at least 90 calendar days before the first day of the event.**

Sponsoring Organization's Legal Name: Pass Christian Public Library

Organization Address 111 Hiern Avenue, Pass Christian, MS 39571

Organization Agent: Denise Saucier Title: Head Librarian

Phone: (228) 452-4596 Work Home (228) 860-4209 During event (228) 860-4209

Agent's Address 14287 John Lee Road, Biloxi, MS 39532

Agent's E-Mail Address d.saucier@harrison.lib.ms.us

Event Name: Butterflies in the Pass Monarch Festival

Please give a brief description of the proposed special event: The goal of the event is to educate the public about Monarch butterflies and other pollinators and how our community can help preserve and protect them. The event will feature two (2) educational speakers and "hands on" activities for all ages. There will be a parade in Butterfly Regalia as well.

Event Day(s) & Date(s): Sat., Oct. 3, 2026 Event Time(s): 10:00 am to 1:00 pm

Set-Up Date & Time: 11/3/26; 8:00 am Tear-Down Date & Time: 11/3/26; by 2:00 pm

Event Location: War Memorial Park on Hwy. 90 & Fleitas

**ANNUAL EVENT:** Is this event expected to occur next year?  YES  NO

How many years has this event occurred? Our 1st Festival was in 2019

**MAP:** (a) If your event will use streets or sidewalks (for a parade, run, etc.) or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. (b) Show any streets or parking lots that you are requesting to be blocked off, and location of vendors, if any. A final map, if different, must be provided seven (7) days before the event. (c) Please show an emergency vehicle access lane.

**STREET CLOSURES:** Start Date/ Time: n/a through Date/ Time n/a

**MUNICIPAL STAGE:** Yes  No  See separate stage use policy

Use of stage in War Memorial Park is allowed only in designated area that is located West of Gazebo behind the Hurricane Camille monument.

**RESERVED PARKING:** Are you requesting reserved parking?  YES  NO

If yes, list the number of street spaces, City lots or locations where parking is requested:

Requesting 4 street spaces on the north side of the park at the end of the main walkway for loading

and unloading. Requesting 8 barricades for this purpose.

**VENDORS:** Food Concessions? YES  NO

Other Vendors? YES  NO

**DO YOU PLAN TO HAVE ALCOHOL SOLD/SERVED AT THIS EVENT?** YES  NO

If yes, are liquor license and liquor liability insurance attached? YES NO

If yes, what time? \_\_\_\_\_

Until \_\_\_\_\_

**ENTERTAINMENT:** Are there any entertainment features related to this event? YES  NO

If yes, provide an attachment listing all bands/performers, type of entertainment, and performance schedule.

**ATTENDANCE:** What is the expected (estimated) attendance for this event? 1,000 or more

**AMUSEMENT:** Do you plan to have any amusement or carnival rides? YES  NO

If yes, you are required to obtain a permit through the City Clerk's Office.

**REST ROOMS:** Are you planning to provide portable rest rooms at the event? YES  NO   
If yes, how many? \_\_\_\_\_

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**OTHER REQUESTS:** (i.e., Police Department assistance, Fire Dept., street closures, electrical, etc.) Requesting 8 barricades (see above), extra trash removal, cleaning and restocking of public restrooms, mowing & fire ant treatment prior to the event, permission to put up signs around the city up to two (2) weeks prior to the event, any other resources as deemed necessary by the mayor.

ADOPTED November 21, 2017, Board Action

**INSURANCE:** All sponsors of special events must carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of insurance naming the City of Pass Christian as an additional insured party with subrogation waived on the policy. A sponsor of a Low Hazard event may request that Board of Aldermen waive the insurance requirement and execute a Hold Harmless and Indemnification Agreement. This event qualifies consideration for Low Hazard because:

As this is a library event, we are requesting the fee waiver, i.e., with the City of Pass Christian as insured party.

**CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that: A Certificate of Insurance must be provided which names the City of Pass Christian as an additional named insured party on the policy or I am requesting that Board of Aldermen waive the insurance requirement for this Low Hazard Event as identified in paragraph above related to insurance, and I have executed the Hold Harmless and Indemnification Agreement on behalf of the event sponsor.

All food vendors must be approved by the Harrison County Health Department, and each food or other vendor must provide the City of Pass Christian with a Certificate of Insurance which names the City of Pass Christian as an additional named insured party on the policy.

The approval of this special event may include additional requirements or limitations, based on the City's review of this application. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.


As the duly authorized agent of the sponsoring organization, I am applying for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with the terms of the written confirmation of approval, and all other City requirements, ordinances and other laws, which apply to this Special Event. By signing this Special Event Application, I declare I am 21 years of age or older.

2/24/2026

Date

Denise L. Saucier

Signature of Sponsoring Organization's Agent



**RETURN THIS APPLICATION at least ninety (90) days before the first day of the event to:  
CITY CLERK'S OFFICE – 200 West Scenic Drive, - PASS CHRISTIAN, MS. 39571.**

# Pass Christian Park Use Permit Application

Submit to Pass Christian Parks and Recreation Department. Upon submission of application for use of park facilities, all required fees and proof of liability insurance shall be submitted at least one week prior to event. A copy will be signed by the Park Director of designee and returned to you. This copy must be available for presentation to authorities upon request during use of the facility under the permit. Please **note that failure to clean up after an event will leave the applicant liable for a fine.**

Pursuant to the rules and regulations of the Pass Christian Parks and Recreation Code, the undersigned does hereby apply for a permit to use the following facilities of said park for the times, dates and purposes indicated, and in so doing, does hereby certify that all persons connected with the group or organization authorized to use said facility under this permit, will comply with all rules and regulations of the parks.

## PLEASE COMPLETE ALL SECTIONS (please print or type)

Name of applicant Denise L. Saucier

Name of organization Pass Christian Public Library

Address 111 Hiern Avenue, Pass Christian, MS 39571

Email address d.saucier@harrison.lib.ms.us

Contact phone number(s) (work) (228) 452-4596, (cell) (228) 860-4209

Park facility requested for use: War Memorial Park  Gazebo

Date(s) request for facility use Saturday, October 3, 2026

Times requested: arrival 8:00 am departure 2:00 pm

Description of activity Butterfly Festival, parade, booths, activities, etc. Event time: 10:00 am - 1:00 pm

Expected number of people Aproximately 1,000

I have read the rules and regulations and agree to follow them. Signature 2/24/2020 Date

Print Name Denise L. Saucier

## FOR OFFICE USE ONLY

### Documents received:

Copy of driver's license \_\_\_\_\_

Proof of liability insurance coverage \_\_\_\_\_ Events (more than 50 people)

### Fees - (Cash, Checks or Money Orders only.) (Note all fees are non-refundable)

Gazebo Use Fee (\$50) \_\_\_\_\_

Park Rental (\$25) \_\_\_\_\_

Parks Administration \_\_\_\_\_

Date \_\_\_\_\_

**Event Title:** \_\_\_\_\_

**DEPARTMENTAL USE ONLY: Please contact applicant directly with any questions or concerns. Sign and return to the City Clerk's Office, as soon as possible.**

Approvals noted below, by departments, indicate they have been made aware of the request and the reasonability of their department has been met.

Police Dept.:                      Recommend    Approval: YES    NO    Est. Economic Impact: \$

Fire Dept.:                        Recommend    Approval: YES    NO    Est. Economic Impact: \$

Public Works:                    Recommend    Approval: YES    NO    Est. Economic Impact: \$

Traffic Eng.:                     Recommend    Approval: YES    NO    Est. Economic Impact: \$

Parks/REG:                        Recommend    Approval: YES    NO    Est. Economic Impact: \$

Have businesses been notified for street closures?: YES    NO

Reason for disapproval \_\_\_\_\_

Any special requirements/conditions \_\_\_\_\_

**Insurance /Indemnification Received:** \_\_\_\_\_

**Insurance Approved:** \_\_\_\_\_

**Board of Aldermen Approved:** \_\_\_\_\_ **Denied:** \_\_\_\_\_

**Approval/ Denial Mailed:** \_\_\_\_\_

# Pass Christian Event Indemnity and Hold Harmless Agreement

The undersigned User hereby agrees to defend, indemnify and hold harmless the City of Pass Christian, its director, officers, employees and agents, from and, or against any loss, expense, claim, liability, or asserted liability incurred as a result of any and all claims, proceedings, or actions (whether brought by private party or related to enforcement action or disputed) for bodily injury, death, property damage, abatement or remediation, environmental damage or impairment of any other injury or damage arising or resulting from or relating directly or indirectly from activities the User and the User's members, invitees, or guests may engage in while utilizing any and or all City streets, facilities or adjacent areas in the City of Pass Christian.

Denise L. Saucier

User Name Denise L. Saucier

Date: 2/24/2026

Michael J. [Signature]

Witness

# Scan Log

Email Sent

Date: 03-04-2026-182400

To: d.saucier@harrison.lib.ms.us

Cc:

From:

Reply To:

Subject: event app

Message:

Attachments:

Scan03-04-2026-182400.pdf

E-2  
3-17-26



**PASS CHRISTIAN  
HISTORICAL SOCIETY**  
201 East Scenic Drive  
Pass Christian MS 39571  
Telephone: 228-452-7254

[info@passhistory.org](mailto:info@passhistory.org)

[www.passhistory.org](http://www.passhistory.org)

**President** Robin Rafferty  
**Vice President** Charlotte Zimmerman  
**Treasurer** Don DeMetz  
**Recording Secretary** Catherine Myers  
**Corresponding Secretary** Jena Shepherd  
**Archivist** Bruce Stinson  
**Chairman of the Board** Robert Cutting  
**Trustees** Mark Oehmke, John Saik, Amy Steiner  
George Brooks

Dear Friends of Pass Christian and the Historical Society's Tour of Homes,

As you know, the Pass Christian Historical Society welcomes residents and visitors to learn about our captivating history through our homes, gardens, and stories from the past. We are pleased to announce that the tradition continues with the 2026 Tour of Homes on Sunday May 3rd from 2pm to 5pm showcasing four lovely homes and the Pass Christian Historical Society building celebrating the Pass Christian Historical Society's 60<sup>th</sup> birthday.

- Cliffe and Margaret Laborde, 715 East Scenic Drive
- Bridget and Robert (Bobby) Boies, 723 East Scenic Drive
- Cindy Walker and Dave Dennis, 923 East Scenic Drive
- Phillip Lagrange and Herbert Pursey, 120 West Scenic Drive (2:30-5pm)
- Pass Christian Historical Society building 201 West Scenic Drive

In addition to the tour of the homes and grounds, guests will enjoy complementary beverages and hors d'oeuvres provided by generous friends and members of the Pass Christian Historical Society at the Pass Christian Historical Society building.

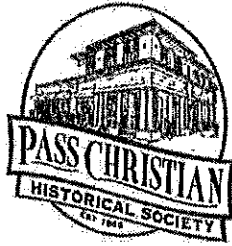
We invite you to show your support for the Pass Christian Historical Society's mission to preserve and share the history of Pass Christian by becoming a Sponsor of the 2026 Tour of Homes. Please complete the enclosed Sponsorship Form and return it along with your check to the letterhead address by April 6<sup>th</sup> to ensure that you are recognized in the event program. We appreciate the generous support of the business community and look forward to another successful tour showcasing the town we all love so much.

Sincerely,

Amy S. Steiner

Mark Oehmke

Chairpersons, 2026 Tour of Homes



Pass Christian Historical Society  
**Tour of Homes 2026**  
Sunday, May 3rd ~ 2pm-5pm



Thank you for your support of this year's event. Please mail payment to  
Pass Christian Historical Society, P.O. Box 58, Pass Christian, MS 39571

**SPONSORSHIP OPPORTUNITIES**

Sponsor Name (please print exactly as you would like it to appear in all printed materials):

\_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**Sponsorship Level (please check one)**

\_\_\_ LIVE OAK ~ \$125 | TWO TICKETS | QUARTER-PAGE AD | RECOGNITION ON SIGNS & PROGRAM

\_\_\_ BEACH HOUSE ~ \$250 | FOUR TICKETS | HALF-PAGE AD | RECOGNITION ON SIGNS & PROGRAM

\_\_\_ CAMELLIA COTTAGE ~ \$500 | SIX TICKETS | FULL-PAGE AD | RECOGNITION ON SIGNS & PROGRAM

\_\_\_ MAGNOLIA MANSION ~ \$1,000 | TWELVE TICKETS | FULL-PAGE COLOR AD | RECOGNITION ON SIGNS & PROGRAM

*Please enclose details for your program ad or email to [info@passhistory.org](mailto:info@passhistory.org)*

Individual tickets may also be purchased online at [www.passhistory.org](http://www.passhistory.org).

Questions? Please call or text Amy Steiner @ 228-341-3994 or Mark Oehmke @ 228-364-2817

E-3  
3-17-26

**CITY OF PASS CHRISTIAN  
SPECIAL EVENT APPLICATION**  
City Clerk's Office\* 200 West Scenic Drive\*Pass Christian, MS 39571

Date Received By Clerk's Office: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

Please complete this application in accordance with the City of PASS CHRISTIAN Special Events Policy, and return it to the Office of the City Clerk at least 90 calendar days before the first day of the event.

Sponsoring Organization's Legal Name: Ochsner Health MS. Gulf Coast

Organization Address 149 Drinkwater Road Bay St. Louis MS, 39520

Organization Agent: Timmy Thrash Title: Administrator

Phone: (228) 337-7777 Work Home 467-8747 During event 228-860-3915

Agent's Address 149 Drinkwater Road Bay St. Louis MS, 39520

Agent's E-Mail Address tthrash@ochsner.org

Event Name: Doctor's Day Celebration

Please give a brief description of the proposed special event: It's A Doctor's

Day Celebration with 40-60 physicians and administrators.

Will also boil crawfish.

Event Day(s) & Date(s): 4/18/2026 Event Time(s): 10am-1pm

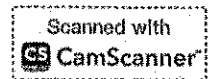
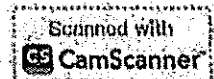
Set-Up Date & Time: 4/18/2026 @8am Tear-Down Date & Time: 4/18/2026 @ 1pm

Event Location: War Memorial Park

ANNUAL EVENT: Is this event expected to occur next year? YES NO

How many years has this event occurred? \_\_\_\_\_

ADOPTED November 21, 2017, Board Action



**MAP:** (a) If your event will use streets or sidewalks (for a parade, run, etc.) or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. (b) Show any streets or parking lots that you are requesting to be blocked off, and location of vendors, if any. A final map, if different, must be provided seven (7) days before the event. (c) Please show an emergency vehicle access lane.

**STREET CLOSURES:** Start Date/ Time: N/A through Date/ Time \_\_\_\_\_

**MUNICIPAL STAGE:** Yes No See separate stage use policy  
Use of stage in War Memorial Park is allowed only in designated area that is located West of Gazebo behind the Hurricane Camille monument.

**RESERVED PARKING:** Are you requesting reserved parking? YES  NO

If yes, list the number of street spaces, City lots or locations where parking is requested:

\_\_\_\_\_  
\_\_\_\_\_

**VENDORS:** Food Concessions? YES  NO  Other Vendors? YES  NO

**DO YOU PLAN TO HAVE ALCOHOL SOLD/SERVED AT THIS EVENT?** YES  NO

If yes, are liquor license and liquor liability insurance attached? YES  NO

If yes, what time? \_\_\_\_\_

Until \_\_\_\_\_

**ENTERTAINMENT:** Are there any entertainment features related to this event? YES  NO

If yes, provide an attachment listing all bands/performers, type of entertainment, and performance schedule.

**ATTENDANCE:** What is the expected (estimated) attendance for this event? 40-60 People

**AMUSEMENT:** Do you plan to have any amusement or carnival rides? YES  NO

If yes, you are required to obtain a permit through the City Clerk's Office.

**REST ROOMS:** Are you planning to provide portable rest rooms at the event? YES  NO   
If yes, how many? \_\_\_\_\_

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**OTHER REQUESTS:** (i.e., Police Department assistance, Fire Dept., street closures, electrical, etc.)

ADOPTED November 21, 2017, Board Action

**INSURANCE:** All sponsors of special events must carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of insurance naming the City of Pass Christian as an additional insured party with subrogation waived on the policy. A sponsor of a Low Hazard event may request that Board of Aldermen waive the insurance requirement and execute a Hold Harmless and Indemnification Agreement. This event qualifies consideration for Low Hazard because:

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**CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that: A Certificate of Insurance must be provided which names the City of Pass Christian as an additional named insured party on the policy or I am requesting that Board of Aldermen waive the insurance requirement for this Low Hazard Event as identified in paragraph above related to insurance, and I have executed the Hold Harmless and Indemnification Agreement on behalf of the event sponsor.


All food vendors must be approved by the Harrison County Health Department, and each food or other vendor must provide the City of Pass Christian with a Certificate of Insurance which names the City of Pass Christian as an additional named insured party on the policy.

The approval of this special event may include additional requirements or limitations, based on the City's review of this application. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.

As the duly authorized agent of the sponsoring organization, I am applying for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with the terms of the written confirmation of approval, and all other City requirements, ordinances and other laws, which apply to this Special Event. By signing this Special Event Application, I declare I am 21 years of age or older.

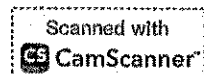
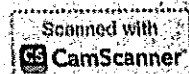
3-11-2026

Date

  
Signature of Sponsoring Organization's Agent

**RETURN THIS APPLICATION** at least ninety (90) days before the first day of the event to:  
**CITY CLERK'S OFFICE - 200 West Scenic Drive, - PASS CHRISTIAN, MS. 39571.**

ADOPTED November 21, 2017, Board Action



Event Title: \_\_\_\_\_

**DEPARTMENTAL USE ONLY: Please contact applicant directly with any questions or concerns. Sign and return to the City Clerk's Office, as soon as possible.**

Approvals noted below, by departments, indicate they have been made aware of the request and the reasonability of their department has been met.

|               |           |           |                                      |                          |                          |
|---------------|-----------|-----------|--------------------------------------|--------------------------|--------------------------|
| Police Dept.: | Recommend | Approval: | <input checked="" type="radio"/> YES | <input type="radio"/> NO | Est. Economic Impact: \$ |
| Fire Dept.:   | Recommend | Approval: | <input checked="" type="radio"/> YES | <input type="radio"/> NO | Est. Economic Impact: \$ |
| Public Works: | Recommend | Approval: | <input checked="" type="radio"/> YES | <input type="radio"/> NO | Est. Economic Impact: \$ |
| Traffic Eng.: | Recommend | Approval: | <input type="radio"/> YES            | <input type="radio"/> NO | Est. Economic Impact: \$ |
| Parks/REG:    | Recommend | Approval: | <input checked="" type="radio"/> YES | <input type="radio"/> NO | Est. Economic Impact: \$ |

Have businesses been notified for street closures?: YES NO

Reason for disapproval \_\_\_\_\_

Any special requirements/conditions \_\_\_\_\_

Insurance /Indemnification Received: \_\_\_\_\_

Insurance Approved: \_\_\_\_\_

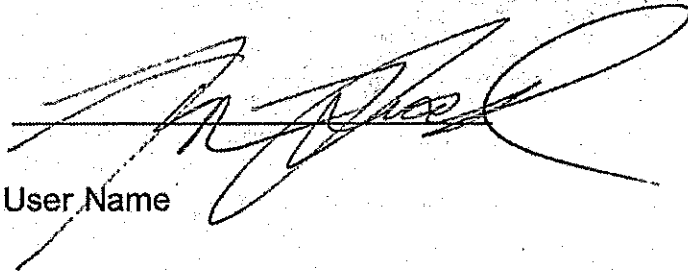
Board of Aldermen Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Approval/ Denial Mailed: \_\_\_\_\_

ADOPTED November 21, 2017, Board Action

**Pass Christian Event  
Indemnity and Hold Harmless  
Agreement**

The undersigned User hereby agrees to defend, indemnify and hold harmless the City of Pass Christian, its director, officers, employees and agents, from and, or against any loss, expense, claim, liability, or asserted liability incurred as a result of any and all claims, proceedings, or actions (whether brought by private party or related to enforcement action or disputed) for bodily injury, death, property damage, abatement or remediation, environmental damage or impairment of any other injury or damage arising or resulting from or relating directly or indirectly from activities the User and the User's members, invitees, or guests may engage in while utilizing any and or all City streets, facilities or adjacent areas in the City of Pass Christian.

  
\_\_\_\_\_

User Name

Date:

3-11-26

\_\_\_\_\_

Witness

The City of Pass Christian appreciates your efforts in contributing to the heart and vitality of the City through your proposed Special Event. We recognize that the City of Pass Christian is fortunate to have many varied and beautiful parks and friendly streets and neighborhoods, all of which provide wonderful venues at which to hold Special Events.

*A special event is defined as one or more of the following situations occur: (1) Outdoor entertainment is being offered; (2) An admission fee is charged; (3) Vendors sell food products/wares; (4) Carnival games/amusement rides are offered; (5) Attendance is double the estimated population in the area where the event is to be held; (6) Purpose of event is a fundraiser; (7) It interferes with parking, safe movement of pedestrians and/or vehicular traffic in the area; (8) Alcoholic beverages are sold; or (9) a sports tournament is involved.*

To preserve the City's natural resources, while still offering enjoyment, the City may permit the temporary use of public properties or roadways for special activities. The City coordinates the review of these events with various City departments to ensure that the events are conducted safely.

The City Clerk's Office will distribute copies of your application to all City departments or agencies affected by your event. These department or agencies will contact you individually only if they have specific questions or concerns about your event.

**PURPOSE:** The purpose of the Special Events Policy is to promote uniform procedures to regulate and permit special event activity at locations under the jurisdiction of the City of Pass Christian. The Special Event Application is a starting point for any group or individual who wishes to hold an event, parade, assembly, festival, or similar affair, within the municipal limits of the City of Pass Christian.

**SPECIAL EVENT APPLICATION REQUIRED:** This Policy Statement on Special Events covers all special events. Any organization wishing to sponsor or hold a Special Event in the City of Pass Christian that takes place on public lands or lands that are controlled by the City of Pass Christian will be required to complete the City of Pass Christian Special Event Application.

A Special Event within the City of Pass Christian that will be conducted on the streets, parks or other public area is required to be approved by the Mayor and Board of Aldermen. Applications to conduct a Special Event must be made in writing to the Office of the City Clerk. **The Mayor and Board of Aldermen meet on the first and third Tuesday of each month; applications must be received no later than noon on Wednesday prior to Tuesday's meeting.** Applications are available from the City Clerk's Office and via the City's website at [www.pass-christian.com](http://www.pass-christian.com).

The City will provide a complete review of any special event application, including consultation with the applicant as may be reasonably necessary to resolve problems and/or concerns.

ADOPTED November 21, 2017, Board Action

Sponsors of Special Events should be aware that noise generated by the event could have an impact on the neighborhoods near the event site. Sponsors must be considerate of the neighborhood and be aware of the City Noise Ordinance.

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

#### **IMPLEMENTATION**

**Eligibility Requirements:** The application or representative of any business, group or organization that seeks approval to conduct a special event, must be 21 years of age or older and officially designated as the agent of the sponsoring business, group, or organization.

**Application Procedure:** A Special Event Application must be received in the City Clerk's Office no later than ninety (90) days before the first day of the event. An incomplete application may result in denial of your request. We ask that applicants begin the process as early as possible in order that proper approvals and deadlines are met.

Please submit the following information:

- Signed application

- Map (sketch) of event site, detailing street closures, parking requirements, etc.

- Schedule of Event

- Proof of insurance/indemnification (naming City of Pass Christian as an additional insured")

#### **Mapped Routes**

A detailed map or diagram indicating the specific locations and layout of the event must be submitted. This should also include any proposed street closures, proposed route and direction of route including all turns and the number of traffic lanes to be used, if applicable.

Routes for special events must be submitted with the license application, regardless of historical precedent. Proposed routes may be altered at the discretion of the Police Department and the Department of Public Works. In the event that the organizer or sponsor of any special event deviates from the route submitted without the approval of the city, the organizer or sponsor of such special event may be denied a permit for any special event for the following calendar year.

**EMERGENCY MEDICAL SERVICES:** Due to the vast number of different types of events, along with the anticipated crowd sizes, at a minimum, all event holders should have knowledge of 911 access and someone who is certified in First Aid/CPR. Also, basic First Aid Stations and/or kits should be on site.

ADOPTED November 21, 2017, Board Action

**LIABILITY INSURANCE REQUIREMENTS:** To comply with the City's insurance liability carrier, the City must require that all sponsors of a special event carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of insurance naming the City of Pass Christian as an additional named insured party on the policy and subrogation waived.

An event sponsor may request that the Mayor and Board of Aldermen waive the insurance coverage for an event classified as Low Hazard. A Low Hazard event is a small gathering or ceremony involving not more than 50 people, who are passively participating in the activity, without any physical activity by participants or severe exposure to spectators, and no City services are required. An event sponsor of a Low Hazard event must sign a Hold Harmless and Indemnification Agreement as part of its application process.

**City Services:** All costs are the responsibility of the permit holder. The Pass Christian Police Department reviews and determines which police services the event requires, and if necessary, the amount of security services for the event. Each City Department will list their cost on the Departmental Use form of the application packet.

**CLEAN UP:** Applicants are responsible for clean up and repairs. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.

**WRITTEN CONFIRMATION OF CITY APPROVAL:** It is expected that the event coordinator or a representative be present at the Board of Aldermen meeting to answer any possible questions that the officials or staff may have regarding your proposed event. Please note, if questions arise at the Board of Aldermen meeting, and a representative is not present, your request may be denied.

Upon approval of the Special Event Application, a written confirmation as to the action of the Board of Aldermen will be forwarded to the individual or organization requesting the event by the City Clerk's Office. This confirmation will outline any special conditions that must be met if the event is to be held.

**PLEASE CONTACT THE CITY CLERKS OFFICE, WITH QUESTIONS REGARDING THIS POLICY AT (228) 452-3311.**

# KIDS FISHING RODEO

EAST SIDE OF THE PASS CHRISTIAN HARBOR

# MAY 23, 2026

**Start: 8:00 am**

**End: 10:00 am**

**Awards: 10:30 am**

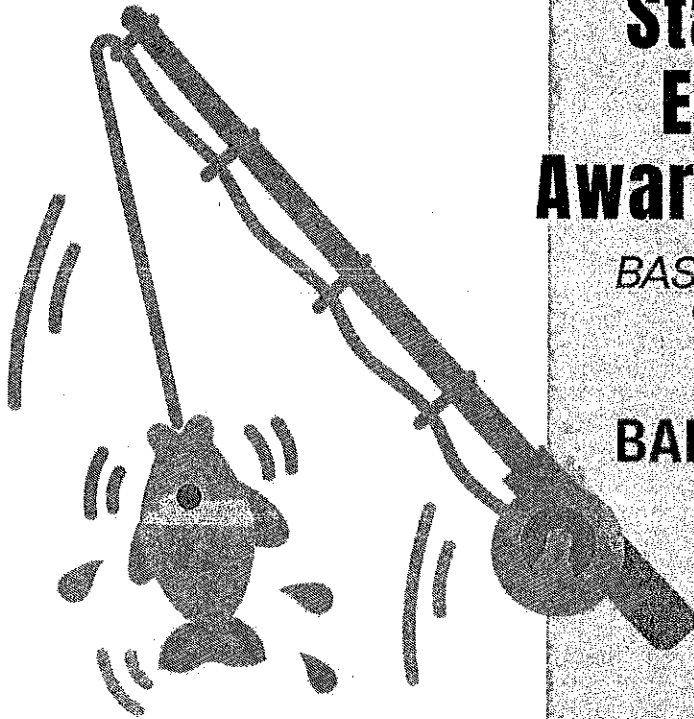
*BASED OFF TOTAL WEIGHT  
OF ALL YOU CATCH*

**BAIT WILL BE SUPPLIED.**

**BRING YOUR OWN  
FISHING GEAR.**

**DONUTS & DRINKS  
PROVIDED.**

**RAIN OUT DAY WILL BE  
SUNDAY, MAY 24TH -  
SAME TIMES.**



SPONSORED BY  
THE PASS  
CHRISTIAN  
VOLUNTEER FIRE  
DEPARTMENT

**OPEN TO AGES 2 TO 16**

**CITY OF PASS CHRISTIAN  
SPECIAL EVENT APPLICATION**

City Clerk's Office\* 200 West Scenic Drive\*Pass Christian, MS 39571

Date Received By Clerk's Office: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

Please complete this application in accordance with the City of PASS CHRISTIAN Special Events Policy, and return it to the Office of the City Clerk at least 90 calendar days before the first day of the event.

Sponsoring Organization's Legal Name: Pass Christian Volunteer Fire Dept

Organization Address: P.O. Box 274, Pass Christian, MS 39571

Organization Agent: J.W. Dedeaux Title: Chief

Phone: 228-216-3753 Work Home \_\_\_\_\_ During event \_\_\_\_\_

Agent's Address 605 Clark Ave, Pass Christian, MS

Agent's E-Mail Address john.w.dedeaux@gmail.com

Event Name: PCVFD Kid's Fishing Tournament

Please give a brief description of the proposed special event: \_\_\_\_\_

Annual kid's fishing tournament for children ages 2-16.

Event Day(s) & Date(s): Sat, May 23 2026 Event Time(s): 0800-1100

Set-Up Date & Time: 23 May @ 0800 Tear-Down Date & Time: 23 May @ 1100

Event Location: Harbor Areas

ANNUAL EVENT: Is this event expected to occur next year?  YES  NO

How many years has this event occurred? 12 Years

**MAP:** (a) If your event will use streets or sidewalks (for a parade, run, etc.) or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. (b) Show any streets or parking lots that you are requesting to be blocked off, and location of vendors, if any. A final map, if different, must be provided seven (7) days before the event. (c) Please show an emergency vehicle access lane.

**STREET CLOSURES:** Start Date/ Time: N/A through Date/ Time N/A

**MUNICIPAL STAGE:** Yes No See separate stage use policy  
Use of stage in War Memorial Park is allowed only in designated area that is located West of Gazebo behind the Hurricane Camille monument.

**RESERVED PARKING:** Are you requesting reserved parking? YES NO

If yes, list the number of street spaces, City lots or locations where parking is requested:

**VENDORS:** Food Concessions? YES  NO

Other Vendors? YES  NO

**DO YOU PLAN TO HAVE ALCOHOL SOLD/SERVED AT THIS EVENT?** YES  NO

If yes, are liquor license and liquor liability insurance attached? YES NO

If yes, what time?

Until \_\_\_\_\_

**ENTERTAINMENT:** Are there any entertainment features related to this event? YES  NO

If yes, provide an attachment listing all bands/performers, type of entertainment, and performance schedule.

**ATTENDANCE:** What is the expected (estimated) attendance for this event? 40 ppl

**AMUSEMENT:** Do you plan to have any amusement or carnival rides? YES  NO

If yes, you are required to obtain a permit through the City Clerk's Office.

**REST ROOMS:** Are you planning to provide portable rest rooms at the event? YES  NO  
If yes, how many? \_\_\_\_\_

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**OTHER REQUESTS:** (i.e., Police Department assistance, Fire Dept., street closures, electrical, etc.) N/A

**INSURANCE:** All sponsors of special events must carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of insurance naming the City of Pass Christian as an additional insured party with subrogation waived on the policy. A sponsor of a Low Hazard event may request that Board of Aldermen waive the insurance requirement and execute a Hold Harmless and Indemnification Agreement. This event qualifies consideration for Low Hazard because:

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**CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that: A Certificate of Insurance must be provided which names the City of Pass Christian as an additional named insured party on the policy or I am requesting that Board of Aldermen waive the insurance requirement for this Low Hazard Event as identified in paragraph above related to insurance, and I have executed the Hold Harmless and Indemnification Agreement on behalf of the event sponsor.

All food vendors must be approved by the Harrison County Health Department, and each food or other vendor must provide the City of Pass Christian with a Certificate of Insurance which names the City of Pass Christian as an additional named insured party on the policy.

The approval of this special event may include additional requirements or limitations, based on the City's review of this application. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.

As the duly authorized agent of the sponsoring organization, I am applying for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with the terms of the written confirmation of approval, and all other City requirements, ordinances and other laws, which apply to this Special Event. By signing this Special Event Application, I declare I am 21 years of age or older.

03-11-2026

Date

John W. DeLeon

Signature of Sponsoring Organization's Agent

**RETURN THIS APPLICATION** at least ninety (90) days before the first day of the event to:  
**CITY CLERK'S OFFICE – 200 West Scenic Drive, - PASS CHRISTIAN, MS. 39571.**

Event Title: Vol. Kid's Fishing Tour.

**DEPARTMENTAL USE ONLY:** Please contact applicant directly with any questions or concerns. Sign and return to the City Clerk's Office, as soon as possible.

Approvals noted below, by departments, indicate they have been made aware of the request and the reasonability of their department has been met.

Police Dept.: Recommend Approval: YES  NO Est. Economic Impact: \$

Fire Dept.: D Recommend Approval: YES  NO Est. Economic Impact: \$

Public Works: Recommend Approval: YES  NO Est. Economic Impact: \$

Traffic Eng.: Recommend Approval: YES  NO Est. Economic Impact: \$

Parks/REG: Recommend Approval: YES NO Est. Economic Impact: \$

Have businesses been notified for street closures?: YES  NO

Reason for disapproval \_\_\_\_\_

Any special requirements/conditions \_\_\_\_\_

Insurance /Indemnification Received: \_\_\_\_\_

Insurance Approved: \_\_\_\_\_

Board of Aldermen Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Approval/ Denial Mailed: \_\_\_\_\_

**Pass Christian Event  
Indemnity and Hold Harmless  
Agreement**

The undersigned User hereby agrees to defend, indemnify and hold harmless the City of Pass Christian, its director, officers, employees and agents, from and, or against any loss, expense, claim, liability, or asserted liability incurred as a result of any and all claims, proceedings, or actions (whether brought by private party or related to enforcement action or disputed) for bodily injury, death, property damage, abatement or remediation, environmental damage or impairment of any other injury or damage arising or resulting from or relating directly or indirectly from activities the User and the User's members, invitees, or guests may engage in while utilizing any and or all City streets, facilities or adjacent areas in the City of Pass Christian.

John W Debeaf

User Name

Date:

3-11-2026

\_\_\_\_\_  
Witness

Event Title: \_\_\_\_\_

**DEPARTMENTAL USE ONLY:** Please contact applicant directly with any questions concerns. Sign and return to the City Clerk's Office, as soon as possible.

Approvals noted below, by departments, indicate they have been made aware of the request and the reasonability of their department has been met.

|               |           |               |    |                       |
|---------------|-----------|---------------|----|-----------------------|
| Police Dept.: | Recommend | Approval: YES | NO | Est. Economic Impact: |
| Fire Dept.:   | Recommend | Approval: YES | NO | Est. Economic Impact: |
| Public Works: | Recommend | Approval: YES | NO | Est. Economic Impact: |
| Traffic Eng.: | Recommend | Approval: YES | NO | Est. Economic Impact: |
| Parks/REG:    | Recommend | Approval: YES | NO | Est. Economic Impact: |

Have businesses been notified for street closures? YES NO

Reason for disapproval \_\_\_\_\_

Any special requirements/conditions \_\_\_\_\_

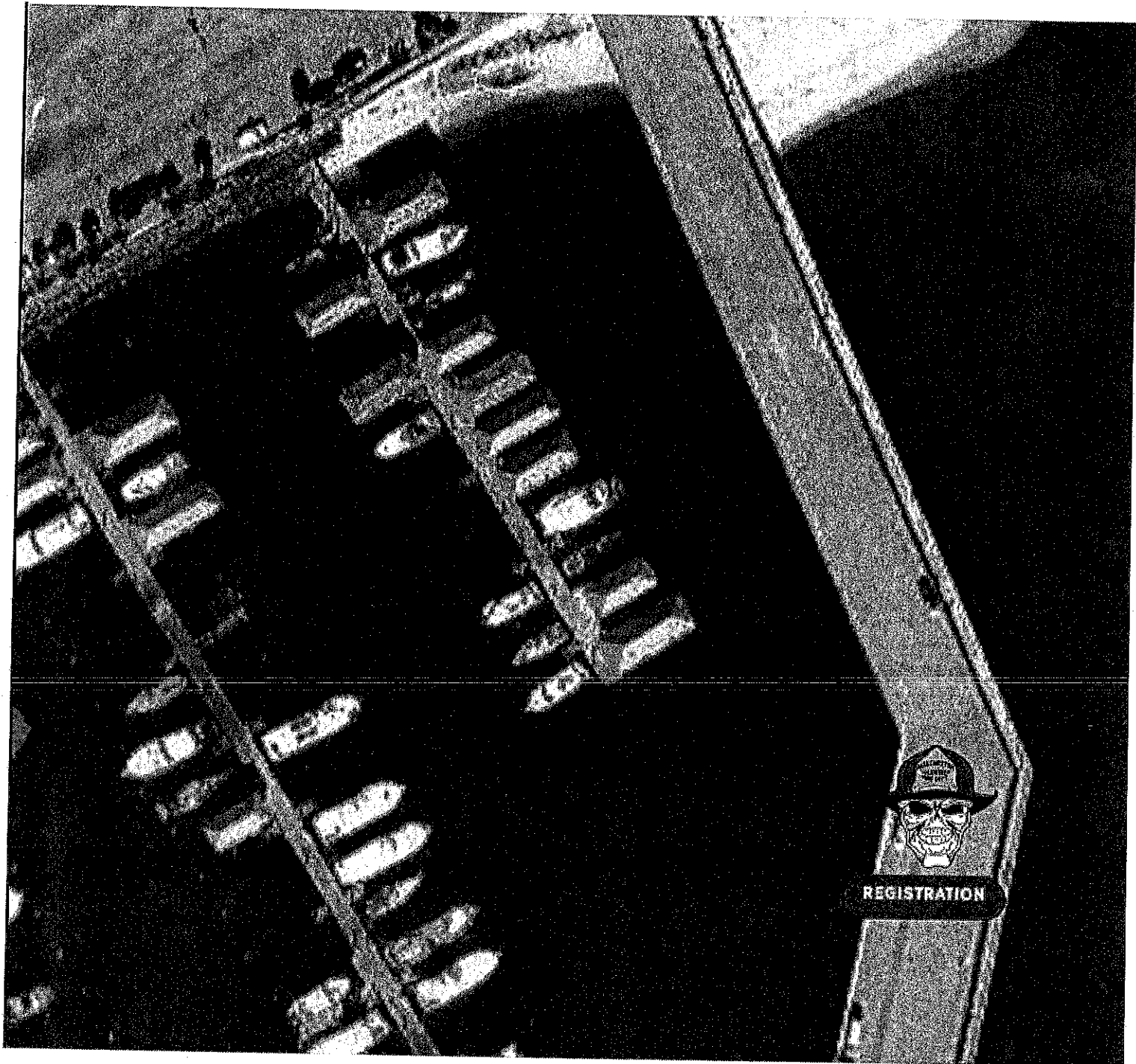
Insurance/Indemnification Received: \_\_\_\_\_

Insurance Approved: \_\_\_\_\_

Board of Aldermen Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Approval/Denial Mailed: \_\_\_\_\_

Harbor - Approved 3-4-2020 *[Signature]*



The City of Pass Christian appreciates your efforts in contributing to the heart and vitality of the City through your proposed Special Event. We recognize that the City of Pass Christian is fortunate to have many varied and beautiful parks and friendly streets and neighborhoods, all of which provide wonderful venues at which to hold Special Events.

*A special event is defined as one or more of the following situations occur: (1) Outdoor entertainment is being offered; (2) An admission fee is charged; (3) Vendors sell food products/wares; (4) Carnival games/amusement rides are offered; (5) Attendance is double the estimated population in the area where the event is to be held; (6) Purpose of event is a fundraiser; (7) It interferes with parking, safe movement of pedestrians and/or vehicular traffic in the area; (8) Alcoholic beverages are sold; or (9) a sports tournament is involved.*

To preserve the City's natural resources, while still offering enjoyment, the City may permit the temporary use of public properties or roadways for special activities. The City coordinates the review of these events with various City departments to ensure that the events are conducted safely.

The City Clerk's Office will distribute copies of your application to all City departments or agencies affected by your event. These department or agencies will contact you individually **only** if they have specific questions or concerns about your event.

**PURPOSE:** The purpose of the Special Events Policy is to promote uniform procedures to regulate and permit special event activity at locations under the jurisdiction of the City of Pass Christian. The Special Event Application is a starting point for any group or individual who wishes to hold an event, parade, assembly, festival, or similar affair, within the municipal limits of the City of Pass Christian.

**SPECIAL EVENT APPLICATION REQUIRED:** This Policy Statement on Special Events covers all special events. Any organization wishing to sponsor or hold a Special Event in the City of Pass Christian that takes place on public lands or lands that are controlled by the City of Pass Christian will be required to complete the City of Pass Christian Special Event Application.

A Special Event within the City of Pass Christian that will be conducted on the streets, parks or other public area is required to be approved by the Mayor and Board of Aldermen. Applications to conduct a Special Event must be made in writing to the Office of the City Clerk. **The Mayor and Board of Aldermen meet on the first and third Tuesday of each month; applications must be received no later than noon on Wednesday prior to Tuesday's meeting.** Applications are available from the City Clerk's Office and via the City's website at [www.pass-christian.com](http://www.pass-christian.com).

The City will provide a complete review of any special event application, including consultation with the applicant as may be reasonably necessary to resolve problems and/or concerns.

Sponsors of Special Events should be aware that noise generated by the event could have an impact on the neighborhoods near the event site. Sponsors must be considerate of the neighborhood and be aware of the City Noise Ordinance.

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

#### **IMPLEMENTATION**

**Eligibility Requirements:** The application or representative of any business, group or organization that seeks approval to conduct a special event, must be 21 years of age or older and officially designated as the agent of the sponsoring business, group, or organization.

**Application Procedure:** A Special Event Application must be received in the City Clerk's Office no later than ninety (90) days before the first day of the event. An incomplete application may result in denial of your request. We ask that applicants begin the process as early as possible in order that proper approvals and deadlines are met.

Please submit the following information:

- Signed application

- Map (sketch) of event site, detailing street closures, parking requirements, etc.

- Schedule of Event

- Proof of insurance/indemnification (naming City of Pass Christian as an additional insured")

#### **Mapped Routes**

A detailed map or diagram indicating the specific locations and layout of the event must be submitted. This should also include any proposed street closures, proposed route and direction of route including all turns and the number of traffic lanes to be used, if applicable.

Routes for special events must be submitted with the license application, regardless of historical precedent. Proposed routes may be altered at the discretion of the Police Department and the Department of Public Works. In the event that the organizer or sponsor of any special event deviates from the route submitted without the approval of the city, the organizer or sponsor of such special event may be denied a permit for any special event for the following calendar year.

**EMERGENCY MEDICAL SERVICES:** Due to the vast number of different types of events, along with the anticipated crowd sizes, at a minimum, all event holders should have knowledge of 911 access and someone who is certified in First Aid/CPR. Also, basic First Aid Stations and/or kits should be on site.

**LIABILITY INSURANCE REQUIREMENTS:** To comply with the City's insurance liability carrier, the City must require that all sponsors of a special event carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of Insurance naming the City of Pass Christian as an additional named insured party on the policy and subrogation waived.

An event sponsor may request that the Mayor and Board of Aldermen waive the insurance coverage for an event classified as Low Hazard. A Low Hazard event is a small gathering or ceremony involving not more than 50 people, who are passively participating in the activity, without any physical activity by participants or severe exposure to spectators, and no City services are required. An event sponsor of a Low Hazard event must sign a Hold Harmless and Indemnification Agreement as part of its application process.

**City Services:** All costs are the responsibility of the permit holder. The Pass Christian Police Department reviews and determines which police services the event requires, and if necessary, the amount of security services for the event. Each City Department will list their cost on the Departmental Use form of the application packet.

**CLEAN UP:** Applicants are responsible for clean up and repairs. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.

**WRITTEN CONFIRMATION OF CITY APPROVAL:** It is expected that the event coordinator or a representative be present at the Board of Aldermen meeting to answer any possible questions that the officials or staff may have regarding your proposed event. **Please note, if questions arise at the Board of Aldermen meeting, and a representative is not present, your request may be denied.**

Upon approval of the Special Event Application, a written confirmation as to the action of the Board of Aldermen will be forwarded to the individual or organization requesting the event by the City Clerk's Office. This confirmation will outline any special conditions that must be met if the event is to be held.

**PLEASE CONTACT THE CITY CLERKS OFFICE, WITH QUESTIONS REGARDING THIS POLICY AT (228) 452-3311.**

E-5  
9.17.26

**CITY OF PASS CHRISTIAN  
SPECIAL EVENT APPLICATION**

City Clerk's Office\* 200 West Scenic Drive\*Pass Christian, MS 39571

Date Received By Clerk's Office: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

**Please complete this application in accordance with the City of PASS CHRISTIAN Special Events Policy, and return it to the Office of the City Clerk at least 90 calendar days before the first day of the event.**

Sponsoring Organization's Legal Name: Freshjunkie Productions, LLC

Organization Address 3736 Perkins Rd, Baton Rouge, LA 70808

Organization Agent: Patrick O'Brien Title: Managing Director

Phone: 225-454-3146 Work Home \_\_\_\_\_ During event 225-454-3146

Agent's Address 3736 Perkins Rd, Baton Rouge, LA 70808

Agent's E-Mail Address pato@freshjunkie.com

Event Name: Mississippi Gulf Coast Marathon

Please give a brief description of the proposed special event: \_\_\_\_\_

11th Anniversary of the MS Gulf Coast Marathon that begins at Henderson Park, runs along Highway 90 and finishes in Keesler Federal Park in Biloxi, MS.

Event Day(s) & Date(s): Sun, 12/13/26 Event Time(s): 7am

Set-Up Date & Time: Sun, 12/13/26 @ 4am Tear-Down Date & Time: 12/13/26 @ 9am

Event Location: Henderson Park, Highway 90

**ANNUAL EVENT:** Is this event expected to occur next year? YES

How many years has this event occurred? 10 years

**MAP:** (a) If your event will use streets or sidewalks (for a parade, run, etc.) or will use multiple locations, please attach a complete map showing the assembly and dispersal locations and the route plan. (b) Show any streets or parking lots that you are requesting to be blocked off, and location of vendors, if any. A final map, if different, must be provided seven (7) days before the event. (c) Please show an emergency vehicle access lane.

**STREET CLOSURES:** Start Date/ Time: 12/13/26 6:30am through Date/ Time 12/13/26 8am

**MUNICIPAL STAGE:** No See separate stage use policy  
Use of stage in War Memorial Park is allowed only in designated area that is located West of Gazebo behind the Hurricane Camille monument.

**RESERVED PARKING:** Are you requesting reserved parking? NO

If yes, list the number of street spaces, City lots or locations where parking is requested:

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**VENDORS:** Food Concessions? NO

Other Vendors? NO

**DO YOU PLAN TO HAVE ALCOHOL SOLD/SERVED AT THIS EVENT?** NO If yes, are liquor license and liquor liability insurance attached? NO  
If yes, what time? Until \_\_\_\_\_

**ENTERTAINMENT:** Are there any entertainment features related to this event? NO

If yes, provide an attachment listing all bands/performers, type of entertainment, and performance schedule.

**ATTENDANCE:** What is the expected (estimated) attendance for this event? 800

**AMUSEMENT:** Do you plan to have any amusement or carnival rides? NO

If yes, you are required to obtain a permit through the City Clerk's Office.

**REST ROOMS:** Are you planning to provide portable rest rooms at the event? YES  
If yes, how many? 14

As an event organizer, you must consider the availability of rest room facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the rest room facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**OTHER REQUESTS:** (i.e., Police Department assistance, Fire Dept., street closures, electrical, etc.)

Police Department Assistance for Highway 90 traffic control in the morning

**INSURANCE:** All sponsors of special events must carry liability insurance with coverage of at least \$500,000. An event sponsor must provide a valid certificate of insurance naming the City of Pass Christian as an additional insured party with subrogation waived on the policy. A sponsor of a Low Hazard event may request that Board of Aldermen waive the insurance requirement and execute a Hold Harmless and Indemnification Agreement. This event qualifies consideration for Low Hazard because:

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**CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that: A Certificate of Insurance must be provided which names the City of Pass Christian as an additional named insured party on the policy or I am requesting that Board of Aldermen waive the insurance requirement for this Low Hazard Event as identified in paragraph above related to insurance, and I have executed the Hold Harmless and Indemnification Agreement on behalf of the event sponsor.

All food vendors must be approved by the Harrison County Health Department, and each food or other vendor must provide the City of Pass Christian with a Certificate of Insurance which names the City of Pass Christian as an additional named insured party on the policy.

The approval of this special event may include additional requirements or limitations, based on the City's review of this application. Applicants who fail to clean up and repair damages to the Event Area may be billed for City services and such failure will be considered for future applications.

As the duly authorized agent of the sponsoring organization, I am applying for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with the terms of the written confirmation of approval, and all other City requirements, ordinances and other laws, which apply to this Special Event. By signing this Special Event Application, I declare I am 21 years of age or older.

March 6, 2026

Date

*Patrick O'Brien*

Signature of Sponsoring Organization's Agent

**RETURN THIS APPLICATION at least ninety (90) days before the first day of the event to:  
CITY CLERK'S OFFICE – 200 West Scenic Drive, - PASS CHRISTIAN, MS. 39571.**

Event Title: \_\_\_\_\_

**DEPARTMENTAL USE ONLY: Please contact applicant directly with any questions or concerns. Sign and return to the City Clerk's Office, as soon as possible.**

Approvals noted below, by departments, indicate they have been made aware of the request and the reasonability of their department has been met.

Police Dept.:                      Recommend    Approval: YES    NO    Est. Economic Impact: \$

Fire Dept.:                        Recommend    Approval: YES    NO    Est. Economic Impact: \$

Public Works:                    Recommend    Approval: YES    NO    Est. Economic Impact: \$

Traffic Eng.:                     Recommend    Approval: YES    NO    Est. Economic Impact: \$

Parks/REG:                        Recommend    Approval: YES    NO    Est. Economic Impact: \$

Have businesses been notified for street closures?: YES    NO

Reason for disapproval \_\_\_\_\_

Any special requirements/conditions \_\_\_\_\_

**Insurance /Indemnification Received:** \_\_\_\_\_

**Insurance Approved:** \_\_\_\_\_

**Board of Aldermen Approved:** \_\_\_\_\_ **Denied:** \_\_\_\_\_

**Approval/ Denial Mailed:** \_\_\_\_\_

**Pass Christian Event  
Indemnity and Hold Harmless  
Agreement**

The undersigned User hereby agrees to defend, indemnify and hold harmless the City of Pass Christian, its director, officers, employees and agents, from and, or against any loss, expense, claim, liability, or asserted liability incurred as a result of any and all claims, proceedings, or actions (whether brought by private party or related to enforcement action or disputed) for bodily injury, death, property damage, abatement or remediation, environmental damage or impairment of any other injury or damage arising or resulting from or relating directly or indirectly from activities the User and the User's members, invitees, or guests may engage in while utilizing any and or all City streets, facilities or adjacent areas in the City of Pass Christian.

Patrick O'Brien

User Name *Patrick O'Brien*

Date:

03/6/26

Malcolm Cain

Witness

**2026 Mississippi Gulf Coast Marathon Proposed Start Relocation**  
**Henderson Park – Pass Christian**  
**December 13, 2026**

**Current Start Location:** The current start location of the full marathon is Henderson Point Beach. Runners Stage on US 90 at 4<sup>th</sup> Avenue and run E/B on US 90 continuing into Long Beach.

**Proposed New Start Location with Map:** The proposed new start location would move to Henderson Park pending City approval. The runners would stage on US 90 and run W/B for a short distance to Cedar Avenue where they would turn back E/B on US 90 continuing into Long Beach.



**Notes:**

- Runners would continue to be shuttled to the new start line at Henderson Park.
- They would stage in Henderson Park where we would provide portable rest rooms (delivered on Friday and picked up on Monday).
- All other race assets would be delivered and removed on race day.
- We will provide hydration for runners.
- Our team would continue to manage trash and ensure Henderson Park is left clean.
- This location would provide a much better space for runners to stage, hydrate, stretch and prepare for the 26.2 miles ahead.
- We anticipate that the impact to W/B US 90 would be approximately 30 minutes.

I passed the proposal by PCPD Captain Ryan Henry who was not opposed pending BOA approval.

## Dawn Sanders

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**From:** Doug Cain <doug@freshjunkie.com>  
**Sent:** Friday, March 6, 2026 1:14 PM  
**To:** Dawn Sanders  
**Cc:** Ryan; Dia'mond Woodman; Patrick O'Brien; Jonathan Dziuba  
**Subject:** Re: 2026 Mississippi Gulf Coast Marathon Proposed Start Location Change  
**Attachments:** 2026 MGC New Start Location Proposal.pdf

**Caution:** THIS IS AN EXTERNAL EMAIL AND MAY BE MALICIOUS. PLEASE TAKE CARE WHEN CLICKING LINKS OR OPENING ATTACHMENTS.

Updated One Pager (E/B and W/B corrected). Sorry for the error.

On Fri, Mar 6, 2026 at 11:44 AM Doug Cain <doug@freshjunkie.com> wrote:

Ms. Sanders,

Thank you for your continued assistance and input on the procedures for this proposed change. I have attached a new permit application and a one-page brief for your review. To recap, we request moving the full marathon start from Henderson Point Beach to Henderson Park. PCPD Captain Henry (cc'd) had no objection pending BOA approval. I have also cc'd PCFD Chief Woodman for situational awareness and input/approval.

Please let me know if you have any questions,

Doug

FRESHJUNKIE Racing  
Mississippi Gulf Coast Marathon  
225-921-4502

The City of Pass Christian appreciates your efforts in contributing to the heart and vitality of the City through your proposed Special Event. We recognize that the City of Pass Christian is fortunate to have many varied and beautiful parks and friendly streets and neighborhoods, all of which provide wonderful venues at which to hold Special Events.

*A special event is defined as one or more of the following situations occur: (1) Outdoor entertainment is being offered; (2) An admission fee is charged; (3) Vendors sell food products/wares; (4) Carnival games/amusement rides are offered; (5) Attendance is double the estimated population in the area where the event is to be held; (6) Purpose of event is a fundraiser; (7) It interferes with parking, safe movement of pedestrians and/or vehicular traffic in the area; (8) Alcoholic beverages are sold; or (9) a sports tournament is involved.*

To preserve the City's natural resources, while still offering enjoyment, the City may permit the temporary use of public properties or roadways for special activities. The City coordinates the review of these events with various City departments to ensure that the events are conducted safely.

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- Signed application

- Map (sketch) of event site, detailing street closures, parking requirements, etc.

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### Mapped Routes

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Upon approval of the Special Event Application, a written confirmation as to the action of the Board of Aldermen will be forwarded to the individual or organization requesting the event by the City Clerk's Office. This confirmation will outline any special conditions that must be met if the event is to be held.

**PLEASE CONTACT THE CITY CLERKS OFFICE, WITH QUESTIONS REGARDING THIS POLICY AT (228) 452-3311.**

CA-1  
3/17/26

Payment due 30 days from receipt

Please make check payments to:

Mississippi Municipal League

600 E Amite Street

Ste 104

Jackson, MS 39201

601-353-5854

## Invoice

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|                  |                  |
|------------------|------------------|
| Reference Number | 65737146         |
| Registered At    | 3/10/26, 1:24 PM |

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## Registrant Details

| Reference Number | Full Name      | Registrant's Email Address   | Registrant Type  |
|------------------|----------------|--|------------------|
| 65737146         | Joseph Piernas | jpiernas@pass-christian.ms.gov (mailto:jpiernas@pass-christian.ms.gov) | Municipal Member |

## Selections

| Selection               | Quantity | Unit Price   | Total           |
|-------------------------|----------|--------------|-----------------|
| Municipal Member        | 1        | \$350.00     | \$350.00        |
| Conference Registration | 1        | \$0.00       | \$0.00          |
|                         |          | <b>Total</b> | <b>\$350.00</b> |

## Billed To

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|                       |                        |
|-----------------------|------------------------|
| Company               | City of Pass Christian |
| Full Name             | Joseph Piernas         |
| Line 1                | 200 W Scenic Dr        |
| City                  | Pass Christian         |
| State/Province/County | MS                     |
| Zip/Postal Code       | 39571                  |
| Country               | United States          |

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Registrant's Email Address    [jpiernas@pass-christian.ms.gov](mailto:jpiernas@pass-christian.ms.gov) (mailto:jpiernas@pass-christian.ms.gov)

## Transactions

| Date           | Transaction Type      | Amount          |
|----------------|-----------------------|-----------------|
| March 10, 2026 | Order Amount          | \$350.00        |
|                | <b>Balance Due</b>    | <b>\$350.00</b> |
|                | <b>Payment Method</b> | <b>Invoice</b>  |

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Registration Questions? - Please contact [questions@american-tradeshow.com](mailto:questions@american-tradeshow.com) (mailto:questions@american-tradeshow.com?Subject=) or 985-240-5511 Hours: M-F 8 AM - 5 PM CST

CA-3  
3.17.26



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March 10, 2026

City of Pass Christian  
200 West Scenic Drive  
Pass Christian, MS 39571

Attn: Mayor and Board of Aldermen

Re: Recommendation of Payment Application No. 2  
City of Pass Christian  
Lift Station No. 31 Relocation  
ARPA/MCWI Project No. 220


Dear Mayor and Board of Aldermen:

Please accept this Payment Application No. 2 for the above-referenced project for processing. We have reviewed this application and recommend payment in the amount of \$134,995.00 payable to DNA Underground, LLC. This invoice can be reimbursed under the ARPA/MCWI program.

If you have any questions, please do not hesitate to contact me.

Sincerely,

COVINGTON CIVIL & ENVIRONMENTAL, LLC

  
Bob Escher, P.E.

**PAYMENT APPLICATION AND CERTIFICATE**

INVOICE NO: 2  
 APPLICATION NO: 2  
 PERIOD: FROM 2/2/2026 TO 2/28/2026  
 PROJECT: Lift Station #31 Relocation  
 CONTRACTOR: DNA Underground, LLC

TAX ID #: \_\_\_\_\_  
 DATE: 2/28/2026  
 SHEET: 1 - 3

|   |                   |                     |
|---|-------------------|---------------------|
| 1. ORIGINAL CONTRACT SUM  | \$                | <u>702,530.00</u>   |
| 2. CONTRACT MODIFICATIONS APPROVED IN PREVIOUS PAY APPLICATIONS:    |                   |                     |
| ADDITIONS: _____  | DEDUCTIONS: \$    | <u>(152,470.00)</u> |
| (List Contract Modification Nos. <u>1</u> )                         |                   |                     |
| 3. CONTRACT MODIFICATIONS APPROVED THIS PERIOD:                     |                   |                     |
| (List Contract Modification Nos. _____ )                            |                   |                     |
| ADDITIONS: _____  | DEDUCTIONS: _____ |                     |
| 4. NET CHANGE BY CONTRACT MODIFICATIONS                             |                   |                     |
| (Sum of Lines 2 & 3)  | \$                | <u>(152,470.00)</u> |
| 5. REVISED CONTRACT AMOUNT: (Sum of Lines 1 & 4)                    | \$                | <u>550,060.00</u>   |
| 6. TOTAL VALUE OF WORK TO DATE (Attached Payment Breakdown)         |                   | <u>\$142,100.00</u> |
| 7. PERCENT PROJECT COMPLETE: (Line 6 ÷ Line 5 x 100)                |                   | <u>26%</u>          |
| 8. PERCENT COMPLETION BY TIME: (Elapsed Days ÷ Contract Days x 100) |                   | <u>22%</u>          |
| 9. MATERIALS ON HAND (Listing Attached)                             | \$                | <u>44,191.00</u>    |
| 10. PARTIAL PAYMENT UNDELIVERED EQUIPMENT                           |                   |                     |
| (Listing Attached)  | \$                | <u>-</u>            |
| 11. SUBTOTAL OF WORK AND MATERIAL (Sum of Lines 6, 9, & 10)         | \$                | <u>186,291.00</u>   |
| 12. LESS AMOUNT RETAINED (5%)                                       | \$                | <u>9,314.55</u>     |
| 13. APPROVED RETAINAGE REDUCTION                                    | \$                | <u>-</u>            |
| 14. TOTAL AMOUNT RETAINED TO DATE (Line 12 - Line 13)               | \$                | <u>9,314.55</u>     |
| 15. SUBTOTAL OF DUE PAYMENT (Line 11 - Line 14)                     | \$                | <u>176,976.45</u>   |
| 16. LESS PREVIOUS CERTIFICATES FOR PAYMENT                          | \$                | <u>41,981.45</u>    |
| (Item 15 from Previous Application)                                 |                   |                     |
| 17. CURRENT PAYMENT DUE: (Line 15 - Line 16)                        | \$                | <u>134,995.00</u>   |

The undersigned Contractor certifies that the Work covered by this application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by him for Work which previous Certificates for Payments were issued and payments received from the Owner, and that the current payments shown herein is now due.

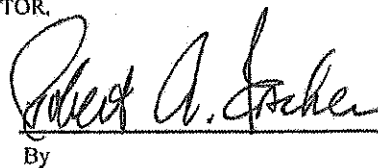
DNA Underground, LLC  
 Contractor

  
 By

3/10/26  
 Date

I HEREBY ACKNOWLEDGE THAT THE MATERIAL AND LABOR INVOLVED ON THE ABOVE ESTIMATE ARE CORRECT AND PAYMENT IS DUE THE CONTRACTOR.

Covington Civil and Environmental, LLC  
 Engineer

  
 By

3-10-26  
 Date

| Item #  | BID SCHEDULE Description   | Qty.  | Units | Bid Amount    |                      | Previous Application |        | Current Application |                      | Total-To-Date |                      | % Complete    | % Complete    |
|---------|--|-------|-------|---------------|----------------------|----------------------|--------|---------------------|----------------------|---------------|----------------------|---------------|---------------|
|         |  |       |       | Unit Price    | Ext. Total           | Qty.                 | Amount | Qty.                | Amount               | Qty.          | Amount               | Current Appl. | Total-To-Date |
| 01505   | MOBILIZATION   | 1     | L.S.  | \$ 65,000.00  | \$ 65,000.00         |                      |        | 1.00                | \$ 65,000.00         | 1.00          | \$ 65,000.00         | 100.00%       | 100.00%       |
| 02050   | DEMOLITION   |       | L.S.  | \$ 15,000.00  | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02050   | CLEARING AND GRUBBING  | 1.89  | LS    | \$ 5,500.00   | \$ 10,960.00         |                      |        | 0.90                | \$ 5,850.00          | 0.90          | \$ 5,850.00          | 53.38%        | 53.38%        |
| 02221-A | SELECT SANDY BACKFILL (LVM)  | 210   | CY    | \$ 23.00      | \$ 4,830.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02221-B | PIPE FOUNDATION MATERIAL (FM, FORCE MAIN)                              | 50    | CY    | \$ 114.00     | \$ 5,700.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02334-A | LIMESTONE GRANULAR BASE (8" COMPACTED THICKNESS, FM)                   | 50    | SY    | \$ 50.00      | \$ 2,500.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02512-A | HOT BITUMINOUS PAVEMENT (MDOT ST, 12.5 mm mb)(2" Thick)                |       | SY    | \$ 60.00      | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02512-B | HOT BITUMINOUS PAVEMENT (MDOT ST, 19 mm mix)(8" Thick, (4) 2-inch #1s) |       | SY    | \$ 160.00     | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02562-A | LIFT STATION STRUCTURES  | 1     | L.S.  | \$ 165,000.00 | \$ 165,000.00        |                      |        | 0.40                | \$ 66,000.00         | 0.40          | \$ 66,000.00         | 40.00%        | 40.00%        |
| 02562-B | LIFT STATION PUMPS AND MECHANICAL                                      | 1     | L.S.  | \$ 175,000.00 | \$ 175,000.00        |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02562-C | LIFT STATION ELECTRICAL AND CONTROLS                                   | 1.14  | L.S.  | \$ 45,000.00  | \$ 51,250.00         |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02562-D | LIFT STATION SITE WORK   | 1     | L.S.  | \$ 11,500.00  | \$ 11,500.00         |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02562-E | CONVERT EXISTING PUMP STATION  |       | L.S.  | \$ 32,000.00  | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02730-A | 15" PVC GRAVITY SEWER PIPE (SDR 26)                                    | 42    | LF    | \$ 185.00     | \$ 7,770.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02730-B | 18" DR9 (14.906" I.D.) HDPE GRAVITY SEWER (HDD BORE ON GRADE)          |       | LF    | \$ 530.00     | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02731-A | 60" DIA. MANHOLE (12'-14')   | 1     | EA    | \$ 10,000.00  | \$ 10,000.00         |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02734-A | 8" DUCTILE IRON FORCE MAIN   | 20    | LF    | \$ 165.00     | \$ 3,300.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02734-B | 8" DR 13.5 HDPE FORCE MAIN (BY HDD METHODS)                            |       | LF    | \$ 90.00      | \$ -                 |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02734-C | DUCTILE IRON FITTINGS (FORCE MAIN)                                     | 1,500 | LBS   | \$ 15.00      | \$ 22,500.00         |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02931-A | PLANT ESTABLISHMENT  | 150   | SY    | \$ 15.00      | \$ 2,250.00          |                      |        |                     | \$ -                 |               | \$ -                 |               |               |
| 02935-A | MAINTENANCE OF TRAFFIC   | 1     | LS    | \$ 25,000.00  | \$ 12,500.00         |                      |        | 0.21                | \$ 5,250.00          | 0.21          | \$ 5,250.00          | 42.00%        | 42.00%        |
|         | <b>Total Revised Contract Amount</b>                                   |       |       |               | <b>\$ 550,060.00</b> |                      |        |                     | <b>\$ 142,100.00</b> |               | <b>\$ 142,100.00</b> | <b>25.83%</b> | <b>25.83%</b> |

|                               |               |
|-------------------------------|---------------|
| VALUE OF COMPLETED WORK       | \$142,100.00  |
| MATERIAL INVENTORY            | \$ 44,191.00  |
| SUBTOTAL                      | \$ 186,291.00 |
| LESS 5% RETAINAGE             | \$ 9,314.55   |
| APPROVED RETAINAGE REDUCTION  | \$ -          |
| TOTAL AMOUNT RETAINED TO-DATE | \$ 9,314.55   |
| NET DUE                       | \$ 176,976.45 |
| LESS PREVIOUS PAYMENTS        | \$ 41,981.45  |
| TOTAL THIS ESTIMATE           | \$ 134,995.00 |



CA-4  
3-17-26



March 10, 2026

City of Pass Christian  
200 West Scenic Drive  
Pass Christian, MS 39571

Attn: Mayor and Board of Aldermen

Re: Recommendation of Payment Application No. 2  
City of Pass Christian  
Elevate and Replace Electrical and Controls at City Lift Stations  
ARPA/MCWI Project No. 234

Dear Mayor and Board of Aldermen:

Please accept this Payment Application No. 2 for the above-referenced project for processing. We have reviewed this application and recommend payment in the amount of \$78,315.63, payable to Krol Electric, Inc. This project can be reimbursed under the ARPA/MCWI program.

If you have any questions, please do not hesitate to contact me.

Sincerely,

  
COVINGTON CIVIL & ENVIRONMENTAL, LLC  
Bob Escher, P.E.

**PAYMENT APPLICATION AND CERTIFICATE**

INVOICE NO: 2

TAX ID #: \_\_\_\_\_

APPLICATION NO: 2

DATE: 3/10/2026

PERIOD: FROM 2/7/2026 TO 3/6/2026

SHEET: 1 - 2

PROJECT: Elevate and Replace Electrical and Controls at City Lift Stations

CONTRACTOR: Krol Electric, Inc.

|   |                      |                   |
|---|----------------------|-------------------|
| 1. ORIGINAL CONTRACT SUM  | \$                   | <u>247,715.00</u> |
| 2. CONTRACT MODIFICATIONS APPROVED IN PREVIOUS PAY APPLICATIONS:    |                      |                   |
| ADDITIONS: \$ _____   | DEDUCTIONS: \$ _____ |                   |
| 3. CONTRACT MODIFICATIONS APPROVED THIS PERIOD:                     |                      |                   |
| (List Contract Modification Nos. <u>1</u> )                         |                      |                   |
| ADDITIONS: \$ <u>11,800.00</u>                                      | DEDUCTIONS: \$ _____ |                   |
| 4. NET CHANGE BY CONTRACT MODIFICATIONS                             |                      |                   |
| (Sum of Lines 2 & 3)  | \$                   | <u>11,800.00</u>  |
| 5. REVISED CONTRACT AMOUNT: (Sum of Lines 1 & 4)                    | \$                   | <u>259,515.00</u> |
| 6. TOTAL VALUE OF WORK TO DATE (Attached Payment Breakdown)         | \$                   | <u>206,496.25</u> |
| 7. PERCENT PROJECT COMPLETE: (Line 6 ÷ Line 5 x 100)                |                      | <u>80%</u>        |
| 8. PERCENT COMPLETION BY TIME: (Elapsed Days ÷ Contract Days x 100) |                      | <u>61%</u>        |
| 9. MATERIALS ON HAND (Listing Attached)                             | \$                   | <u>          </u> |
| 10. PARTIAL PAYMENT UNDELIVERED EQUIPMENT                           |                      |                   |
| (Listing Attached)  | \$                   | <u>          </u> |
| 11. SUBTOTAL OF WORK AND MATERIAL (Sum of Lines 6, 9, & 10)         | \$                   | <u>206,496.25</u> |
| 12. LESS AMOUNT RETAINED (5%)                                       | \$                   | <u>10,324.81</u>  |
| 13. APPROVED RETAINAGE REDUCTION                                    | \$                   | <u>          </u> |
| 14. TOTAL AMOUNT RETAINED TO DATE (Line 12 - Line 13)               | \$                   | <u>10,324.81</u>  |
| 15. SUBTOTAL OF DUE PAYMENT (Line 11 - Line 14)                     | \$                   | <u>196,171.44</u> |
| 16. LESS PREVIOUS CERTIFICATES FOR PAYMENT                          | \$                   | <u>117,855.81</u> |
| (Item 15 from Previous Application)                                 |                      |                   |
| 17. CURRENT PAYMENT DUE: (Line 15 - Line 16)                        | \$                   | <u>78,315.63</u>  |

The undersigned Contractor certifies that the Work covered by this application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by him for Work which previous Certificates for Payments were issued and payments received from the Owner, and that the current payments shown herein is now due.

Krol Electric, Inc.  
Contractor

*[Signature]* 3/10/2026  
By Date

I HEREBY ACKNOWLEDGE THAT THE MATERIAL AND LABOR INVOLVED ON THE ABOVE ESTIMATE ARE CORRECT AND PAYMENT IS DUE THE CONTRACTOR.

Covington Civil and Environmental, LLC  
Engineer

*[Signature]* 3/10/2026  
By Date

| Item #                                | Description  | Units | Qty. | Bid Amount   |               | Previous Application |               | Current Application |              | Total-To-Date |               | % Complete   | % Complete    |
|---------------------------------------|--|-------|------|--------------|---------------|----------------------|---------------|---------------------|--------------|---------------|---------------|--------------|---------------|
|                                       |  |       |      | Unit Price   | Ext. Total    | Qty.                 | Amount        | Qty.                | Amount       | Qty.          | Amount        | Current Appl | Total-To-Date |
| <b>BID ITEMS</b>                      |  |       |      |              |               |                      |               |                     |              |               |               |              |               |
| 01505                                 | MOBILIZATION   | 1     | L.S. | \$ 16,230.00 | \$ 16,230.00  | 1.00                 | \$ 16,230.00  |                     | \$ -         | 1             | \$ 16,230.00  |              | 100.00%       |
| 02935-A                               | MAINTENANCE OF TRAFFIC   | 1     | LS   | \$ 2,500.00  | \$ 2,500.00   | 1.00                 | \$ 2,500.00   |                     | \$ -         | 1             | \$ 2,500.00   |              | 100.00%       |
| 05120-A                               | ELEVATED ACCESS PLATFORM (Basswood Drive)  | 1     | LS   | \$ 12,822.00 | \$ 12,822.00  | 1.00                 | \$ 12,822.00  |                     | \$ -         | 1             | \$ 12,822.00  |              | 100.00%       |
| 05120-B                               | ELEVATED ACCESS PLATFORM (Fairway Drive)   | 1     | LS   | \$ 12,822.00 | \$ 12,822.00  | 1.00                 | \$ 12,822.00  |                     | \$ -         | 1             | \$ 12,822.00  |              | 100.00%       |
| 05120-C                               | ELEVATED ACCESS PLATFORM (Fernwood Drive)  | 1     | LS   | \$ 12,822.00 | \$ 12,822.00  | 1.00                 | \$ 12,822.00  |                     | \$ -         | 1             | \$ 12,822.00  |              | 100.00%       |
| 05120-D                               | ELEVATED ACCESS PLATFORM (Henderson Avenue and U.S. 90)  | 1     | LS   | \$ 12,822.00 | \$ 12,822.00  | 1.00                 | \$ 12,822.00  |                     | \$ -         | 1             | \$ 12,822.00  |              | 100.00%       |
| 05120-E                               | ELEVATED ACCESS PLATFORM (Royal Circle and Henderson Avenue)   | 1     | LS   | \$ 12,822.00 | \$ 12,822.00  | 1.00                 | \$ 12,822.00  |                     | \$ -         | 1             | \$ 12,822.00  |              | 100.00%       |
| 16150-A                               | REMOVE AND REPLACE, WITH NEW, LIFT STATION ELECTRICAL AND CONTROLS, ETC. ON ELEVATED PLATFORM (Basswood - 240V, 3P, 3hp)                           | 1     | L.S. | \$ 32,975.00 | \$ 32,975.00  | 0.25                 | \$ 8,243.75   | 0.50                | \$ 16,487.50 | 0.75          | \$ 24,731.25  | 50.00%       | 75.00%        |
| 16150-B                               | REMOVE AND REPLACE, WITH NEW, LIFT STATION ELECTRICAL AND CONTROLS, ETC. ON ELEVATED STRUCTURE (Fairway Drive- 240V, 3P, 5hp)                      | 1     | L.S. | \$ 32,975.00 | \$ 32,975.00  | 0.25                 | \$ 8,243.75   | 0.50                | \$ 16,487.50 | 0.75          | \$ 24,731.25  | 50.00%       | 75.00%        |
| 16150-C                               | REMOVE AND REPLACE, WITH NEW, LIFT STATION ELECTRICAL AND CONTROLS, ETC. ON ELEVATED STRUCTURE (Fernwood Drive- 240V, 3P, 5hp)                     | 1     | L.S. | \$ 32,975.00 | \$ 32,975.00  | 0.25                 | \$ 8,243.75   | 0.50                | \$ 16,487.50 | 0.75          | \$ 24,731.25  | 50.00%       | 75.00%        |
| 16150-D                               | REMOVE AND REPLACE, WITH NEW, LIFT STATION ELECTRICAL AND CONTROLS, ETC. ON ELEVATED STRUCTURE (Henderson Avenue and Hwy 90 - 240V, 3P, 7.5hp)     | 1     | L.S. | \$ 32,975.00 | \$ 32,975.00  | 0.25                 | \$ 8,243.75   | 0.50                | \$ 16,487.50 | 0.75          | \$ 24,731.25  | 50.00%       | 75.00%        |
| 16150-E                               | REMOVE AND REPLACE, WITH NEW, LIFT STATION ELECTRICAL AND CONTROLS, ETC. ON ELEVATED STRUCTURE (Henderson Avenue and Royal Circle - 240V, 3P, 5hp) | 1     | L.S. | \$ 32,975.00 | \$ 32,975.00  | 0.25                 | \$ 8,243.75   | 0.50                | \$ 16,487.50 | 0.75          | \$ 24,731.25  | 50.00%       | 75.00%        |
| <b>Total Original Contract Amount</b> |  |       |      |              | \$ 247,716.00 |                      | \$ 124,058.75 |                     | \$ 82,437.50 |               | \$ 206,496.25 | 33.28%       | 83.36%        |

**CHANGE ORDER NO. 1**

|                                      |   |   |      |              |               |  |               |  |              |  |               |        |        |
|--------------------------------------|---|---|------|--------------|---------------|--|---------------|--|--------------|--|---------------|--------|--------|
| 1                                    | Providing new wire to five (5) existing lift stations per MPCo. | 1 | L.S. | \$ 11,800.00 | \$ 11,800.00  |  |               |  |              |  |               |        |        |
| <b>Total Change Order No. 1</b>      |   |   |      |              | \$ 11,800.00  |  |               |  |              |  |               |        |        |
| <b>Total Revised Contract Amount</b> |   |   |      |              | \$ 259,515.00 |  | \$ 124,058.75 |  | \$ 82,437.50 |  | \$ 206,496.25 | 31.77% | 79.57% |

|                               |               |
|-------------------------------|---------------|
| VALUE OF COMPLETED WORK       | \$ 206,496.25 |
| MATERIAL INVENTORY            | \$ -          |
| SUBTOTAL                      | \$ 206,496.25 |
| LESS 5% RETAINAGE             | \$ 10,324.81  |
| APPROVED RETAINAGE REDUCTION  | \$ -          |
| TOTAL AMOUNT RETAINED TO DATE | \$ 10,324.81  |
| NET DUE                       | \$ 196,171.44 |
| LESS PREVIOUS PAYMENTS        | \$ 117,855.81 |
| TOTAL THIS ESTIMATE           | \$ 78,315.63  |

CA-5  
3.17.26

PASS CHRISTIAN MUNICIPAL COURT

CERTIFICATE OF ELIGIBILITY

CASE # 2512R-027

DATE: 2.25.26

PAYEE: David Cohen, Sr.

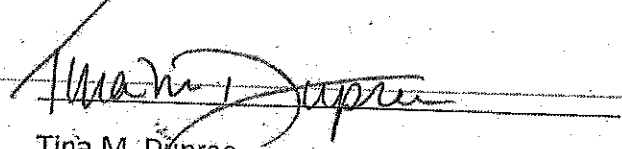
AMOUNT DUE: \$105.75

REASON FOR REFUND:

David Cohen Sr. paid a \$500 cash bond for David Cohen Jr at PCPD on 12/11/25. Cohen Jr. was heard on his charges 2/25/26 and was ordered to pay \$394.25 leaving a balance of \$105.75 to be refunded.

Supporting documents attached.

Submitted by:



Tina M. Dupree  
Court Clerk

# RECEIPT

No. 087154

DATE 12/16/25

FROM David Cohen Sr. \$500.00

#2512R-027 DOLLARS

FOR RENT  
 FOR Bond

|       |  |
|-------|--|
| ACCT. |  |
| PAID  |  |
| DUE   |  |

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM \_\_\_\_\_ TO \_\_\_\_\_  
BY \_\_\_\_\_

A-1152  
T-4181

# RECEIPT

No. 087155

DATE \_\_\_\_\_

FROM \_\_\_\_\_ \$

\_\_\_\_\_ DOLLARS

FOR RENT  
 FOR \_\_\_\_\_

|       |  |
|-------|--|
| ACCT. |  |
| PAID  |  |
| DUE   |  |

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM \_\_\_\_\_ TO \_\_\_\_\_  
BY \_\_\_\_\_

A-1152  
T-4181

State of Mississippi  
Unified Judicial System

**STATE OF Mississippi**  
**ABSTRACT OF COURT RECORD**

Agency  
2405

Case Number  
2512R-027

Court Date  
February 25, 2026

Pass Christian Municipal Court  
105 Hiern Avenue  
Pass Christian, Mississippi 39571  
(228) 452-3307  
County: Harrison

**VIOLATION**

Charge Descript DISORDERLY CONDUCT-FAILURE TO COMPLY  
December 1, 2025 4:50 PM / E BEACH BLVD/MENGE  
Offense Date/Loc. AVE  
Arresting Officer NEGROTTO, LEWIE

Bond Company  
Amount of Bond 0.00 Received  
Type of Bond  
Attorney for Def

**DEFENDANT INFORMATION**

DAVID EDWARD COHEN JR

Social Security # [REDACTED] Eyes  
Driver License # [REDACTED] Hair  
Sex M Weight 300  
Race W Height 6 ft. 3 In.  
Date of Birth [REDACTED] Age @ Offense

**VEHICLE INFORMATION**

Registration (Tag) No. U28935 State Year  
Vehicle Model Year 1994 Make CHEV Type

**JUDGMENT:**

GUILTY: \$250 PLUS COST

Bail Forfeited

Appealed

Fine Paid

Balance

JIM SIMPSON  
Judge / Magistrate

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF MY COURT RECORD AS RECORDED IN:

DOCKET 25MC00674

CASE 2512R-027

SIGNED [Signature]

TITLE MUNICIPAL COURT CLERK

2/27/2026 8:21 AM

Bond Transaction

NCBPOST

Receipt No: B000000058

Citation #: 2512R-027-01

Docket #: 25MC00674

COHEN, DAVID EDWARD JR

DISORDERLY CONDUCT-FAILURE TO COMPLY

Bond No: VX RECEIP

Bond Amount: \$250.00 Bond Applied

Bond Type: Cash

Balance Due: \$144.25

Approved by: \_\_\_\_\_

Received by: \_\_\_\_\_

2/27/2026 8:23 AM

Bond Transaction

NCBPOST

Receipt No: B000000059

Citation #: 2512R-027-01

Docket #: 25MC00674

COHEN, DAVID EDWARD JR

DISORDERLY CONDUCT-FAILURE TO COMPLY

Bond No: VX RECEIP

Bond Amount: \$144.25 Bond Applied

Bond Type: Cash

Balance Due: \*\*\* PAID \*\*\*

Approved by: \_\_\_\_\_

Received by: \_\_\_\_\_

CA-6  
3-17-26

## MISSISSIPPI UNINSURED MOTORISTS COVERAGE SELECTION/REJECTION

|                          |                        |
|--------------------------|------------------------|
| Policy Number:           |                        |
| Applicant/Named Insured: | Policy Effective Date: |
| Company:                 | Producer:              |

Mississippi law permits you to make certain decisions regarding Uninsured Motorists Coverage. This document describes this coverage and the options available.

You should read this document carefully and contact us or your agent if you have any questions regarding Uninsured Motorists Coverage and your options with respect to this coverage.

This document includes general descriptions of coverage. However, no coverage is provided by this document. You should read your policy and review your Declarations page(s) and/or Schedule(s) for complete information on the coverages you are provided.

The following language is derived from Mississippi Insurance Department Bulletin 2014-4, issued May 15, 2014:

*Miss. Code Ann. § 83-11-101 provides that no automobile liability insurance policy shall be issued unless it contains provisions undertaking to pay the insured all sums which the insured shall become legally entitled to recover as damages for (1) bodily injury or death and (2) property damage from the owner or operator of an uninsured motor vehicle, within limits which shall be no less than those set forth in the Mississippi Motor Vehicle Safety Responsibility Law, as amended, under provisions approved by the Commissioner of Insurance.*

*The Code also provides that the insured named in the policy is permitted to reject such coverage in writing, either in its entirety or partially, that is, the damage for bodily injury or death and the property damage coverage may be rejected or the property damage coverage only may be rejected. The law does not allow you to reject the damage for bodily injury or death and elect only the property damage coverage.*

***Uninsured Motorist ("UM") insurance is recoverable by you under your own policy should the owner or operator of an uninsured or underinsured vehicle be found to be legally at fault for injuries or damages sustained by you. Your rejection of UM insurance would mean that you would not be covered by your insurance company for damages sustained by you from an owner or operator of an uninsured or underinsured vehicle. The selection or rejection of this coverage in whole or in part should be made by you after knowingly and intelligently considering the matter.***

*The rejection/selection indicated below shall apply to this policy and all future renewals of such policy. The rejection or selection indicated below shall also apply to all future policies issued to you by the Company because of a change of vehicle or coverage, or because of an Interruption of Coverage, until you notify the Company in writing that you are electing to add UM coverage to your policy. It is your responsibility to notify your Company if it is your intention to change the coverage requirements.*

Unless Uninsured Motorists Coverage is rejected, Uninsured Motorists Coverage will be afforded at limits at least equal to: (1) split limits of \$25,000 for each person, subject to \$50,000 for each accident with respect to bodily injury, and \$25,000 for each accident with respect to property damage; or (2) a single limit of \$75,000 for each accident.

Please indicate one choice from either **A.**, **B.** or **C.** by initialing next to the appropriate item(s) and signing below.

**A. Selection Of Bodily Injury And Property Damage Uninsured Motorists Coverage**

|  |                                   |            |                        |           |                              |
|--|-----------------------------------|------------|------------------------|-----------|------------------------------|
| <p>(Initials) _____</p> <p>I select <b>Bodily Injury and Property Damage Uninsured Motorists Coverage</b> at the following limit(s). (Unless otherwise provided by law, the limit(s) selected cannot exceed the <b>Liability Coverage</b> limit(s) of your policy.)</p> <p>(Choose one <b>Split Limits Bodily Injury</b> option <b>AND</b> one <b>Property Damage</b> limit option, <b>OR</b> one <b>Combined Single Limit</b> option from the following:)</p> |                                   |            |                        |           |                              |
|  | <b>Split Limits Bodily Injury</b> |            | <b>Property Damage</b> | <b>OR</b> | <b>Combined Single Limit</b> |
| (Initials)   |                                   | (Initials) |                        |           | (Initials)                   |
|  | \$ 25,000/50,000                  |            | \$ 25,000              |           | \$ 75,000                    |
|  | 50,000/100,000                    |            | 50,000                 |           | 100,000                      |
|  | 100,000/200,000                   |            | 100,000                |           | 200,000                      |
|  | 100,000/300,000                   |            | 200,000                |           | 250,000                      |
|  | 250,000/500,000                   |            | 300,000                |           | 300,000                      |
|  | 300,000/300,000                   |            | 500,000                |           | 350,000                      |
|  | 500,000/500,000                   |            | 1,000,000              |           | 500,000                      |
|  | 500,000/1,000,000                 |            |                        |           | 1,000,000                    |
|  | 1,000,000/1,000,000               |            |                        |           |                              |
| _____  | \$ _____<br>(Other)               | _____      | \$ _____<br>(Other)    |           | \$ _____<br>(Other)          |

**B. Rejection Of Property Damage Uninsured Motorists Coverage And Selection Of Bodily Injury Uninsured Motorists Coverage Only**

(Initials) \_\_\_\_\_

I reject Property Damage Uninsured Motorists Coverage and select **ONLY** Bodily Injury Uninsured Motorists Coverage at the following limit(s). (Unless otherwise provided by law, the limit(s) selected cannot exceed the Liability Coverage limit(s) of your policy.)

(Choose one Split Limits Bodily Injury option, OR one Combined Single Limit option from the following:)

| (Initials) | Split Limits Bodily Injury | OR | (Initials) | Combined Single Limit |
|------------|----------------------------|----|------------|-----------------------|
|            | \$25,000/50,000            |    |            | \$50,000              |
|            | 50,000/100,000             |    |            | 75,000                |
|            | 100,000/200,000            |    |            | 100,000               |
|            | 100,000/300,000            |    |            | 200,000               |
|            | 250,000/500,000            |    |            | 250,000               |
|            | 300,000/300,000            |    |            | 300,000               |
|            | 500,000/500,000            |    |            | 350,000               |
|            | 500,000/1,000,000          |    |            | 500,000               |
|            | 1,000,000/1,000,000        |    |            | 1,000,000             |
|            | (Other)                    |    |            | (Other)               |

**C. Rejection Of Bodily Injury And Property Damage Uninsured Motorists Coverage**

(Initials) \_\_\_\_\_

I reject Bodily Injury and Property Damage Uninsured Motorists Coverage.

\_\_\_\_\_  
**Applicant's/Named Insured's Signature** \_\_\_\_\_  
**Date**



**COMMERCIAL INSURANCE APPLICATION**  
**APPLICANT INFORMATION SECTION**

HGERALD

DATE (MM/DD/YYYY)  
**03/09/2026**

|   |  |  |   |                                       |                                |
|---|--|--|---|---------------------------------------|--------------------------------|
| <b>AGENCY</b><br>Betz Rosetti & Associates Inc.<br>2304 19th Street, Suite 102<br>Gulfport, MS 39501  |  | <b>CARRIER</b><br>Special Risk Insurance |   | NAIC CODE<br>N/A                      |                                |
|   |  | COMPANY POLICY OR PROGRAM NAME           |   | PROGRAM CODE                          |                                |
|   |  | POLICY NUMBER                            |   |                                       |                                |
| <b>CONTACT NAME:</b> Albert Betz, CIC, ACI<br>PHONE (A/C, No, Ext): (228) 701-0200<br>FAX (A/C, No): (228) 867-2500<br>E-MAIL ADDRESS: info@betzrosetti.com |  | UNDERWRITER                              |   | UNDERWRITER OFFICE                    |                                |
| CODE: _____ SUBCODE: _____<br>AGENCY CUSTOMER ID: PASSCHR-10  |  | STATUS OF TRANSACTION                    | <input type="checkbox"/> QUOTE  | <input type="checkbox"/> ISSUE POLICY | <input type="checkbox"/> RENEW |
|   |  |  | BOUND (Give Date and/or Attach Copy):<br>CHANGE DATE TIME AM PM<br>CANCEL |                                       |                                |

| LINES OF BUSINESS            |         |  |                     |    |         |
|------------------------------|---------|--|---------------------|----|---------|
| INDICATE LINES OF BUSINESS   | PREMIUM |  | PREMIUM             |    | PREMIUM |
| BOILER & MACHINERY           | \$      |  | CYBER AND PRIVACY   | \$ | YACHT   |
| BUSINESS AUTO                | \$      |  | FIDUCIARY LIABILITY | \$ |         |
| BUSINESS OWNERS              | \$      |  | GARAGE AND DEALERS  | \$ |         |
| COMMERCIAL GENERAL LIABILITY | \$      |  | LIQUOR LIABILITY    | \$ |         |
| COMMERCIAL INLAND MARINE     | \$      |  | MOTOR CARRIER       | \$ |         |
| COMMERCIAL PROPERTY          | \$      |  | TRUCKERS            | \$ |         |
| CRIME                        | \$      |  | UMBRELLA            | \$ |         |

| ATTACHMENTS                               |   |                                  |
|---|---|----------------------------------|
| ACCOUNTS RECEIVABLE / VALUABLE PAPERS     | GLASS AND SIGN SECTION                      | STATEMENT / SCHEDULE OF VALUES   |
| ADDITIONAL INTEREST SCHEDULE              | HOTEL / MOTEL SUPPLEMENT                    | STATE SUPPLEMENT (If applicable) |
| ADDITIONAL PREMISES INFORMATION SCHEDULE  | INSTALLATION / BUILDERS RISK SECTION        | VACANT BUILDING SUPPLEMENT       |
| APARTMENT BUILDING SUPPLEMENT             | INTERNATIONAL LIABILITY EXPOSURE SUPPLEMENT | VEHICLE SCHEDULE                 |
| CONDO ASSN BYLAWS (for D&O Coverage only) | INTERNATIONAL PROPERTY EXPOSURE SUPPLEMENT  |                                  |
| CONTRACTORS SUPPLEMENT                    | LOSS SUMMARY                                |                                  |
| COVERAGES SCHEDULE                        | OPEN CARGO SECTION                          |                                  |
| DEALERS SECTION                           | PREMIUM PAYMENT SUPPLEMENT                  |                                  |
| DRIVER INFORMATION SCHEDULE               | PROFESSIONAL LIABILITY SUPPLEMENT           |                                  |
| ELECTRONIC DATA PROCESSING SECTION        | RESTAURANT / TAVERN SUPPLEMENT              |                                  |

| POLICY INFORMATION |                   |                                 |                                 |              |                   |       |         |                 |                |
|--------------------|-------------------|---------------------------------|---------------------------------|--------------|-------------------|-------|---------|-----------------|----------------|
| PROPOSED EFF DATE  | PROPOSED EXP DATE | BILLING PLAN                    |                                 | PAYMENT PLAN | METHOD OF PAYMENT | AUDIT | DEPOSIT | MINIMUM PREMIUM | POLICY PREMIUM |
| 04/10/2026         | 04/10/2027        | <input type="checkbox"/> DIRECT | <input type="checkbox"/> AGENCY |              |                   |       | \$      | \$              | \$             |

| APPLICANT INFORMATION   |  |   |  |  |  |             |                 |                                 |  |
|---|--|---|--|--|--|-------------|-----------------|---------------------------------|--|
| NAME (First Named Insured) AND MAILING ADDRESS (Including ZIP+4)<br>City of Pass Christian Fire & Rescue<br>200 West Scenic Drive<br>Pass Christian, MS 39571 |  |   |  |  | GL CODE<br>43550   | SIC<br>9224 | NAICS<br>922160 | FEIN OR SOC SEC #<br>64-6000951 |  |
|   |  |   |  |  | BUSINESS PHONE #: (228) 452-3325   |             |                 |                                 |  |
|   |  |   |  |  | WEBSITE ADDRESS<br><a href="https://pass-christian.com/departments/fire-rescue/">https://pass-christian.com/departments/fire-rescue/</a> |             |                 |                                 |  |
| <input type="checkbox"/> CORPORATION  | <input type="checkbox"/> JOINT VENTURE | <input type="checkbox"/> NOT FOR PROFIT ORG | <input checked="" type="checkbox"/> SUBCHAPTER "S" CORPORATION |  | <b>Fire Department</b>   |             |                 |                                 |  |
| <input type="checkbox"/> INDIVIDUAL   | <input type="checkbox"/> LLC           | <input type="checkbox"/> PARTNERSHIP        | <input type="checkbox"/> TRUST                                 |  |  |             |                 |                                 |  |
| NAME (Other Named Insured) AND MAILING ADDRESS (Including ZIP+4)  |  |   |  |  | GL CODE  | SIC         | NAICS           | FEIN OR SOC SEC #               |  |
|   |  |   |  |  | BUSINESS PHONE #:  |             |                 |                                 |  |
|   |  |   |  |  | WEBSITE ADDRESS  |             |                 |                                 |  |
| <input type="checkbox"/> CORPORATION  | <input type="checkbox"/> JOINT VENTURE | <input type="checkbox"/> NOT FOR PROFIT ORG | <input type="checkbox"/> SUBCHAPTER "S" CORPORATION            |  |  |             |                 |                                 |  |
| <input type="checkbox"/> INDIVIDUAL   | <input type="checkbox"/> LLC           | <input type="checkbox"/> PARTNERSHIP        | <input type="checkbox"/> TRUST                                 |  |  |             |                 |                                 |  |
| NAME (Other Named Insured) AND MAILING ADDRESS (Including ZIP+4)  |  |   |  |  | GL CODE  | SIC         | NAICS           | FEIN OR SOC SEC #               |  |
|   |  |   |  |  | BUSINESS PHONE #:  |             |                 |                                 |  |
|   |  |   |  |  | WEBSITE ADDRESS  |             |                 |                                 |  |
| <input type="checkbox"/> CORPORATION  | <input type="checkbox"/> JOINT VENTURE | <input type="checkbox"/> NOT FOR PROFIT ORG | <input type="checkbox"/> SUBCHAPTER "S" CORPORATION            |  |  |             |                 |                                 |  |
| <input type="checkbox"/> INDIVIDUAL   | <input type="checkbox"/> LLC           | <input type="checkbox"/> PARTNERSHIP        | <input type="checkbox"/> TRUST                                 |  |  |             |                 |                                 |  |

**CONTACT INFORMATION**

AGENCY CUSTOMER ID: **PASSCHR-10**

**HGERALD**

|   |   |   |   |   |  |   |  |
|---|---|---|---|---|--|---|--|
| CONTACT TYPE: <b>Accounting Contact</b>   |   |   |   | CONTACT TYPE: <b>Inspection Contact</b>                       |  |   |  |
| CONTACT NAME: <b>Dia'mond Woodman</b>   |   |   |   | CONTACT NAME: <b>Dia'mond Woodman</b>                         |  |   |  |
| PRIMARY PHONE # <input type="checkbox"/> HOME <input checked="" type="checkbox"/> BUS <input type="checkbox"/> CELL | SECONDARY PHONE # <input type="checkbox"/> HOME <input type="checkbox"/> BUS <input checked="" type="checkbox"/> CELL | PRIMARY PHONE # <input type="checkbox"/> HOME <input checked="" type="checkbox"/> BUS <input type="checkbox"/> CELL | SECONDARY PHONE # <input type="checkbox"/> HOME <input type="checkbox"/> BUS <input checked="" type="checkbox"/> CELL | PRIMARY E-MAIL ADDRESS: <b>dwoodman@pass-christian.ms.gov</b> |  | PRIMARY E-MAIL ADDRESS: <b>dwoodman@pass-christian.ms.gov</b> |  |
| <b>(228) 452-3325</b>   |   | <b>(228) 216-3325</b>   |   | <b>(228) 452-3325</b>   |  | <b>(228) 216-3325</b>   |  |
| SECONDARY E-MAIL ADDRESS:   |   |   |   | SECONDARY E-MAIL ADDRESS:                                     |  |   |  |

**PREMISES INFORMATION (Attach ACORD 823 for Additional Premises)**

|  |                                      |                                 |   |                  |   |
|--|--------------------------------------|---------------------------------|---|------------------|---|
| LOC # <b>1</b>   | STREET<br><b>808 E Second Street</b> | CITY LIMITS                     | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$                       |
|  |                                      | <input type="checkbox"/> INSIDE | <input checked="" type="checkbox"/> OWNER | <b>24</b>        | OCCUPIED AREA: SQ FT                      |
| BLD # <b>1</b>   | CITY: <b>Pass Christian</b>          | STATE: <b>MS</b>                | <input type="checkbox"/> TENANT           | # PART TIME EMPL | OPEN TO PUBLIC AREA: SQ FT                |
|  | COUNTY: <b>Harrison</b>              | ZIP: <b>39571</b>               |   | <b>17</b>        | TOTAL BUILDING AREA: <b>6,460</b> SQ FT   |
| DESCRIPTION OF OPERATIONS: <b>Fire Department 14 Active Volunteers</b> |                                      |                                 |   |                  | ANY AREA LEASED TO OTHERS? Y / N <b>N</b> |
| LOC # <b>1</b>   | STREET<br><b>808 E Second Street</b> | CITY LIMITS                     | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$                       |
|  |                                      | <input type="checkbox"/> INSIDE | <input checked="" type="checkbox"/> OWNER |                  | OCCUPIED AREA: SQ FT                      |
| BLD # <b>2</b>   | CITY: <b>Pass Christian</b>          | STATE: <b>MS</b>                | <input type="checkbox"/> TENANT           | # PART TIME EMPL | OPEN TO PUBLIC AREA: SQ FT                |
|  | COUNTY: <b>Harrison</b>              | ZIP: <b>39571</b>               |   |                  | TOTAL BUILDING AREA: <b>880</b> SQ FT     |
| DESCRIPTION OF OPERATIONS: <b>Storage</b>                              |                                      |                                 |   |                  | ANY AREA LEASED TO OTHERS? Y / N          |
| LOC # <b>2</b>   | STREET<br><b>707 W North Street</b>  | CITY LIMITS                     | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$                       |
|  |                                      | <input type="checkbox"/> INSIDE | <input checked="" type="checkbox"/> OWNER |                  | OCCUPIED AREA: SQ FT                      |
| BLD # <b>1</b>   | CITY: <b>Pass Christian</b>          | STATE: <b>MS</b>                | <input type="checkbox"/> TENANT           | # PART TIME EMPL | OPEN TO PUBLIC AREA: SQ FT                |
|  | COUNTY: <b>Harrison</b>              | ZIP: <b>39571</b>               |   |                  | TOTAL BUILDING AREA: <b>4,536</b> SQ FT   |
| DESCRIPTION OF OPERATIONS: <b>Fire Department</b>                      |                                      |                                 |   |                  | ANY AREA LEASED TO OTHERS? Y / N          |
| LOC # <b>3</b>   | STREET<br><b>351 Clark Ave</b>       | CITY LIMITS                     | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$                       |
|  |                                      | <input type="checkbox"/> INSIDE | <input checked="" type="checkbox"/> OWNER |                  | OCCUPIED AREA: SQ FT                      |
| BLD # <b>1</b>   | CITY: <b>Pass Christian</b>          | STATE: <b>MS</b>                | <input type="checkbox"/> TENANT           | # PART TIME EMPL | OPEN TO PUBLIC AREA: SQ FT                |
|  | COUNTY: <b>Harrison</b>              | ZIP: <b>39571</b>               |   |                  | TOTAL BUILDING AREA: <b>3,500</b> SQ FT   |
| DESCRIPTION OF OPERATIONS: <b>Fire Dept Smoke Training Building</b>    |                                      |                                 |   |                  | ANY AREA LEASED TO OTHERS? Y / N          |

**NATURE OF BUSINESS**

|                                       |  |  |                                     |                                    |   |                                    |
|---------------------------------------|--|--|-------------------------------------|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> APARTMENTS   | <input type="checkbox"/> CONTRACTOR    | <input type="checkbox"/> MANUFACTURING | <input type="checkbox"/> RESTAURANT | <input type="checkbox"/> SERVICE   | <input checked="" type="checkbox"/> <b>Public</b> | DATE BUSINESS STARTED (MM/DD/YYYY) |
| <input type="checkbox"/> CONDOMINIUMS | <input type="checkbox"/> INSTITUTIONAL | <input type="checkbox"/> OFFICE        | <input type="checkbox"/> RETAIL     | <input type="checkbox"/> WHOLESALE |   |                                    |

DESCRIPTION OF PRIMARY OPERATIONS

**Fire Department**

|   |  |   |
|---|--|---|
| RETAIL STORES OR SERVICE OPERATIONS % OF TOTAL SALES: | INSTALLATION, SERVICE OR REPAIR WORK % | OFF PREMISES INSTALLATION, SERVICE OR REPAIR WORK % |
|---|--|---|

DESCRIPTION OF OPERATIONS OF OTHER NAMED INSURED

**ADDITIONAL INTEREST (Not all fields apply to all scenarios - provide only the necessary data) Attach ACORD 45 for more Additional Interests**

|   |                  |       |                       |             |        |                  |                         |           |
|---|------------------|-------|-----------------------|-------------|--------|------------------|-------------------------|-----------|
| INTEREST<br><input type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> BREACH OF WARRANTY<br><input type="checkbox"/> CO-OWNER<br><input type="checkbox"/> EMPLOYEE AS LESSOR<br><input type="checkbox"/> LEASEBACK OWNER<br><input type="checkbox"/> LENDER'S LOSS PAYABLE<br><input type="checkbox"/> LIENHOLDER<br><input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE<br><input type="checkbox"/> OWNER<br><input type="checkbox"/> REGISTRANT<br><input type="checkbox"/> TRUSTEE | NAME AND ADDRESS | RANK: | EVIDENCE:             | CERTIFICATE | POLICY | SEND BILL        | INTEREST IN ITEM NUMBER |           |
|   |                  |       |                       |             |        |                  | LOCATION:               | BUILDING: |
|   |                  |       |                       |             |        | VEHICLE:         | BOAT:                   |           |
|   |                  |       |                       |             |        | AIRPORT:         | AIRCRAFT:               |           |
|   |                  |       |                       |             |        | ITEM CLASS:      | ITEM:                   |           |
|   |                  |       |                       |             |        | ITEM DESCRIPTION |                         |           |
| REFERENCE / LOAN #:   |                  |       | INTEREST END DATE:    |             |        |                  |                         |           |
| LIEN AMOUNT:  |                  |       | PHONE (A/C, No, Ext): |             |        | FAX (A/C, No):   |                         |           |
| REASON FOR INTEREST:  |                  |       |                       |             |        | E-MAIL ADDRESS:  |                         |           |

**GENERAL INFORMATION**

|   |   |  |  |            |
|---|---|--|--|------------|
| <b>EXPLAIN ALL "YES" RESPONSES</b>  |   |  |  | <b>Y/N</b> |
| 1a. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY?  |   |  |  | <b>N</b>   |
| <input type="text" value="PARENT COMPANY NAME"/>  | <input type="text" value="RELATIONSHIP DESCRIPTION"/>       | <input type="text" value="% OWNED"/>                     |  |            |
| 1b. DOES THE APPLICANT HAVE ANY SUBSIDIARIES?   |   |  |  | <b>N</b>   |
| <input type="text" value="SUBSIDIARY COMPANY NAME"/>  | <input type="text" value="RELATIONSHIP DESCRIPTION"/>       | <input type="text" value="% OWNED"/>                     |  |            |
| 2. IS A FORMAL SAFETY PROGRAM IN OPERATION?   |   |  |  | <b>Y</b>   |
| <input type="checkbox"/> SAFETY MANUAL  | <input type="checkbox"/> SAFETY POSITION                    | <input type="checkbox"/> MONTHLY MEETINGS                | <input type="checkbox"/> OSHA              |            |
| 3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?   |   |  |  | <b>Y</b>   |
| 4. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy numbers)   |   |  |  | <b>N</b>   |
| <input type="text" value="LINE OF BUSINESS"/>   | <input type="text" value="POLICY NUMBER"/>                  | <input type="text" value="LINE OF BUSINESS"/>            | <input type="text" value="POLICY NUMBER"/> |            |
| <input type="text"/>  | <input type="text"/>  | <input type="text"/>                                     | <input type="text"/>                       |            |
| 5. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR THREE (3) YEARS FOR ANY PREMISES OR OPERATIONS? (Missouri Applicants - Do not answer this question)   |   |  |  | <b>N</b>   |
| <input type="checkbox"/> NON-PAYMENT  | <input type="checkbox"/> AGENT NO LONGER REPRESENTS CARRIER | <input type="checkbox"/>                                 |  |            |
| <input type="checkbox"/> NON-RENEWAL  | <input type="checkbox"/> UNDERWRITING                       | <input type="checkbox"/> CONDITION CORRECTED (Describe): |  |            |
| 6. ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING?   |   |  |  | <b>N</b>   |
| 7. DURING THE LAST FIVE YEARS (TEN IN RI), HAS ANY APPLICANT BEEN INDICTED FOR OR CONVICTED OF ANY DEGREE OF THE CRIME OF FRAUD, BRIBERY, ARSON OR ANY OTHER ARSON-RELATED CRIME IN CONNECTION WITH THIS OR ANY OTHER PROPERTY?<br>(In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment). |   |  |  | <b>N</b>   |
| 8. ANY UNCORRECTED FIRE AND/OR SAFETY CODE VIOLATIONS?  |   |  |  | <b>N</b>   |
| <input type="text" value="OCCUR DATE"/>   | <input type="text" value="EXPLANATION"/>                    | <input type="text" value="RESOLUTION"/>                  | <input type="text" value="RESOLVE DATE"/>  |            |
| <input type="text"/>  | <input type="text"/>  | <input type="text"/>                                     | <input type="text"/>                       |            |
| 9. HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION, BANKRUPTCY OR FILED FOR BANKRUPTCY DURING THE LAST FIVE (5) YEARS?  |   |  |  | <b>N</b>   |
| <input type="text" value="OCCUR DATE"/>   | <input type="text" value="EXPLANATION"/>                    | <input type="text" value="RESOLUTION"/>                  | <input type="text" value="RESOLVE DATE"/>  |            |
| <input type="text"/>  | <input type="text"/>  | <input type="text"/>                                     | <input type="text"/>                       |            |
| 10. HAS APPLICANT HAD A JUDGEMENT OR LIEN DURING THE LAST FIVE (5) YEARS?   |   |  |  | <b>N</b>   |
| <input type="text" value="OCCUR DATE"/>   | <input type="text" value="EXPLANATION"/>                    | <input type="text" value="RESOLUTION"/>                  | <input type="text" value="RESOLVE DATE"/>  |            |
| <input type="text"/>  | <input type="text"/>  | <input type="text"/>                                     | <input type="text"/>                       |            |
| 11. HAS BUSINESS BEEN PLACED IN A TRUST? NAME OF TRUST:   |   |  |  | <b>N</b>   |
| 12. ANY FOREIGN OPERATIONS, FOREIGN PRODUCTS DISTRIBUTED IN USA, OR US PRODUCTS SOLD / DISTRIBUTED IN FOREIGN COUNTRIES?<br>(If "YES", attach ACORD 815 for Liability Exposure and/or ACORD 816 for Property Exposure)  |   |  |  | <b>N</b>   |
| 13. DOES APPLICANT HAVE OTHER BUSINESS VENTURES FOR WHICH COVERAGE IS NOT REQUESTED?  |   |  |  | <b>N</b>   |
| 14. DOES APPLICANT OWN / LEASE / OPERATE ANY DRONES? (If "YES", describe use)   |   |  |  | <b>Y</b>   |
| 15. DOES APPLICANT HIRE OTHERS TO OPERATE DRONES? (If "YES", describe use)  |   |  |  | <b>N</b>   |

REMARKS / PROCESSING INSTRUCTIONS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SEE ATTACHED ACORD 101

**PRIOR CARRIER INFORMATION**

| YEAR | CATEGORY        | GENERAL LIABILITY | AUTOMOBILE | PROPERTY | OTHER: |
|------|-----------------|-------------------|------------|----------|--------|
|      | CARRIER         |                   |            |          |        |
|      | POLICY NUMBER   |                   |            |          |        |
|      | PREMIUM         | \$                | \$         | \$       | \$     |
|      | EFFECTIVE DATE  |                   |            |          |        |
|      | EXPIRATION DATE |                   |            |          |        |

**PRIOR CARRIER INFORMATION (continued)**

**AGENCY CUSTOMER ID: PASSCHR-10**

**HGERALD**

| YEAR | CATEGORY        | GENERAL LIABILITY | AUTOMOBILE | PROPERTY | OTHER: |
|------|-----------------|-------------------|------------|----------|--------|
|      | CARRIER         |                   |            |          |        |
|      | POLICY NUMBER   |                   |            |          |        |
|      | PREMIUM         | \$                | \$         | \$       | \$     |
|      | EFFECTIVE DATE  |                   |            |          |        |
|      | EXPIRATION DATE |                   |            |          |        |
|      | CARRIER         |                   |            |          |        |
|      | POLICY NUMBER   |                   |            |          |        |
|      | PREMIUM         | \$                | \$         | \$       | \$     |
|      | EFFECTIVE DATE  |                   |            |          |        |
|      | EXPIRATION DATE |                   |            |          |        |

**LOSS HISTORY**  Check if none (Attach Loss Summary for Additional Loss Information)

| ENTER ALL CLAIMS OR LOSSES (REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCCURRENCES THAT MAY GIVE RISE TO CLAIMS FOR THE LAST YEARS |      |   |               |             |                 | TOTAL LOSSES: \$ | 0              |  |
|--|------|---|---------------|-------------|-----------------|------------------|----------------|--|
| DATE OF OCCURRENCE   | LINE | TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM | DATE OF CLAIM | AMOUNT PAID | AMOUNT RESERVED | SUBROGATION Y/N  | CLAIM OPEN Y/N |  |
|  |      |   |               |             |                 |                  |                |  |
|  |      |   |               |             |                 |                  |                |  |
|  |      |   |               |             |                 |                  |                |  |

**SIGNATURE**

Copy of the Notice of Information Practices (Privacy) has been given to the applicant. (Not required in all states, contact your agent or broker for your state's requirements.)

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT OR OTHER INVESTIGATIVE REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. CREDIT SCORING INFORMATION MAY BE USED TO HELP DETERMINE EITHER YOUR ELIGIBILITY FOR INSURANCE OR THE PREMIUM YOU WILL BE CHARGED. WE MAY USE A THIRD PARTY IN CONNECTION WITH THE DEVELOPMENT OF YOUR SCORE. YOU MAY HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND REQUEST CORRECTION OF ANY INACCURACIES. YOU MAY ALSO HAVE THE RIGHT TO REQUEST IN WRITING THAT WE CONSIDER EXTRAORDINARY LIFE CIRCUMSTANCES IN CONNECTION WITH THE DEVELOPMENT OF YOUR CREDIT SCORE. THESE RIGHTS MAY BE LIMITED IN SOME STATES. PLEASE CONTACT YOUR AGENT OR BROKER TO LEARN HOW THESE RIGHTS MAY APPLY IN YOUR STATE OR FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US FOR A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING PERSONAL INFORMATION. (Not applicable in AZ, CA, DE, KS, MA, MN, ND, NY, OR, VA, or WV. Specific ACORD 38s are available for applicants in these states.) (Applicant's initials):

**Applicable in AL, AR, DC, LA, MD, NM, RI and WV:** Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO:** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK:** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS:** Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)\*. \*Applies in NY Only.


**Applicable in ME, TN, VA and WA:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR:** Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR:** Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

|  |  |  |
|--|--|--|
| PRODUCER'S SIGNATURE  | PRODUCER'S NAME (Please Print)<br><b>Albert Betz, CIC, ACI</b> | STATE PRODUCER LICENSE NO<br>(Required in Florida)<br><b>9600840</b> |
| APPLICANT'S SIGNATURE  | DATE   | NATIONAL PRODUCER NUMBER   |



## ADDITIONAL PREMISES INFORMATION SCHEDULE

|   |  |  |   |                         |
|---|--|--|---|-------------------------|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |  | CARRIER<br><b>Special Risk Insurance</b> |   | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER                                       |  | EFFECTIVE DATE<br><b>04/10/2026</b>      | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |                         |

## PREMISES INFORMATION

|   |                                |                   |   |                  |                                   |
|---|--------------------------------|-------------------|---|------------------|-----------------------------------|
| LOC #<br><b>3</b>   | STREET<br><b>351 Clark Ave</b> | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input checked="" type="checkbox"/> OWNER |                  | OCCUPIED AREA: SQ FT              |
| BLD #<br><b>2</b>   | CITY: <b>Pass Christian</b>    | STATE: <b>MS</b>  | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY: <b>Harrison</b>        | ZIP: <b>39571</b> |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS: <b>Storage 2007 40' Conex Trailer - Model #PAN-22G1-14E, Serial #ZCSV2625750</b> |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |
| LOC #   | STREET                         | CITY LIMITS       | INTEREST                                  | # FULL TIME EMPL | ANNUAL REVENUES: \$               |
|   |                                | INSIDE            | <input type="checkbox"/> OWNER            |                  | OCCUPIED AREA: SQ FT              |
| BLD #   | CITY:                          | STATE:            | OUTSIDE                                   | TENANT           | # PART TIME EMPL                  |
|   | COUNTY:                        | ZIP:              |   |                  | OPEN TO PUBLIC AREA: SQ FT        |
| DESCRIPTION OF OPERATIONS:  |                                |                   |   |                  | ANY AREA LEASED TO OTHERS? Y / N: |

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; In LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.



**ADDITIONAL REMARKS SCHEDULE**

|   |                         |  |  |
|---|-------------------------|--|--|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |                         | NAMED INSURED<br><b>City of Pass Christian Fire &amp; Rescue<br/>200 West Scenic Drive<br/>Pass Christian, MS 39571<br/>Harrison</b> |  |
| POLICY NUMBER                                       |                         |  |  |
| CARRIER<br><b>Special Risk Insurance</b>            | NAIC CODE<br><b>N/A</b> | EFFECTIVE DATE: <b>04/10/2026</b>  |  |

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: **ACORD 125** FORM TITLE: **COMMERCIAL INSURANCE APPLICATION INFORMATION SECTION**

**Notes**

**Formal Training Programs**

- Driver Training
- Patient Care/Handling
- Officer/Leadership
- Safety Program
- Maintenance Program
- Vehicles and Equipment
- Building and Surrounding Premise/Grounds

Estimated Number of Dispatches Made Annually - 1200

- Deductible Waiver Included
- Freezing of Attached Special Equipment Included
- Volunteers' or Employees' Personal Automobiles Reimburse the deductible up to \$1,000 if insurance is carried or actual cash value if no insurance is carried
- Hired, Borrowed or Commandeered Vehicles Included (ACV; Primary)
- Customized Vehicle Extension Included
- Towing and Labor Incurred Cost
- Recertification Included
- Full Glass Coverage Included

Garagekeepers Insurance Included (\$50,000 Primary)  
Garagekeepers Deductibles: Comprehensive \$250/Collision \$500

Removal of Apparatus from Environmentally Included as part of the Sensitive Areas claim adjustment expense

**Property**

- Earthquake Deductible 5%
- Named Storm Deductible 5%
- Business Income/Extra Expense Actual Loss Sustained
- Crisis Incident Response Coverage \$25,000 limit any one crisis incident
- Money & Securities Included / \$30,000 Limit
- Trees Shrubs Plants & Lawns Full Replacement Cost
- Sirens & Antennas Included in Building Amount
- Commandeered Property of Others Full Replacement Cost/Loss of Use
- Computer Software Included/\$250,000 Limit/Computer Virus
- Valuable Papers & Records Actual Incurred Cost
- Accounts Receivable Actual Incurred Cost
- Recharge Costs Incurred Recharge Cost/No Deductible
- Deductible Waiver Included

**General Liability**

- Volunteers and Employees as Insureds Included
- Blanket Additional Insureds Included
- Fellow Member Liability Included
- "Good Samaritan" Liability Included
- Intentional Acts Included



## ADDITIONAL REMARKS SCHEDULE

|   |                         |   |  |
|---|-------------------------|---|--|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |                         | NAMED INSURED<br><b>City of Pass Christian Fire &amp; Rescue</b><br>200 West Scenic Drive<br>Pass Christian, MS 39571<br>Harrison |  |
| POLICY NUMBER                                       |                         |   |  |
| CARRIER<br><b>Special Risk Insurance</b>            | NAIC CODE<br><b>N/A</b> | EFFECTIVE DATE: <b>04/10/2026</b>   |  |

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 125 FORM TITLE: COMMERCIAL INSURANCE APPLICATION INFORMATION SECTION

**Pollution Liability Included**  
**Liquor Liability Included**  
**Contractual Liability Included**  
**Owned Watercraft Liability Included**  
**(boats exceeding 100 horsepower)**  
**Non-Owned Watercraft Liability Included**  
**Owned Personal Watercraft Included**  
**(jet skis and waverunners)**  
**Expanded Aggregate Limit Per Named Insured & Per Location**



## PROPERTY SECTION

DATE (MM/DD/YYYY)  
**03/09/2026**

|  |                                     |   |  |                         |
|--|-------------------------------------|---|--|-------------------------|
| AGENCY NAME<br><b>Betz Rosetti &amp; Associates Inc.</b> |                                     | CARRIER<br><b>Special Risk Insurance</b>                            |  | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER  | EFFECTIVE DATE<br><b>04/10/2026</b> | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |  |                         |

**BLANKET SUMMARY**

| BLKT # | AMOUNT | TYPE | BLKT # | AMOUNT | TYPE |
|--------|--------|------|--------|--------|------|
|        |        |      |        |        |      |

| <b>PREMISES INFORMATION</b>        |           | PREMISES #: <b>1</b> | STREET ADDRESS: <b>808 E Second Street, Pass Christian, MS 39571</b> |                |                   |       |          |        |                               |
|------------------------------------|-----------|----------------------|--|----------------|-------------------|-------|----------|--------|-------------------------------|
|                                    |           | BUILDING #: <b>1</b> | BLDG DESCRIPTION: <b>Fire Department</b>                             |                |                   |       |          |        |                               |
| SUBJECT OF INSURANCE               | AMOUNT    | COINS %              | VALUATION  | CAUSES OF LOSS | INFLATION GUARD % | DED   | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
| Building                           | 1,170,613 |                      | R  | SPECI          | 4.00              | 1,000 |          |        | 5% NS                         |
| Contents                           | 360,190   |                      | R  | SPECI          | 4.00              | 1,000 |          |        | 5% NS                         |
| Flood                              | 1,530,803 |                      | R  | SPECI          |                   | 1,000 |          |        |                               |
| Earthquake                         | 1,530,803 |                      | R  | SPECI          |                   |       |          |        | 5%                            |
| Business Income with Extra Expense |           |                      | L  |                |                   |       |          |        | 24 MONTHS                     |

|                        |  |  |
|------------------------|--|--|
| ADDITIONAL INFORMATION | BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 | VALUE REPORTING INFORMATION - Attach ACORD 811 |
|------------------------|--|--|

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

|  |                                 |                  |  |   |
|--|---------------------------------|------------------|--|---|
| SPOILAGE COVERAGE (Y/N)<br><input type="checkbox"/>                          | DESCRIPTION OF PROPERTY COVERED | LIMIT<br>\$      | REFRIG MAINT AGREEMENT (Y/N)<br><input type="checkbox"/> | OPTIONS   |
|  |                                 | DEDUCTIBLE<br>\$ |  | <input type="checkbox"/> BREAKDOWN OR CONTAMINATION<br><input type="checkbox"/> POWER OUTAGE <input type="checkbox"/> SELLING PRICE |
| SINKHOLE COVERAGE (Required in Florida)                                      |                                 | ACCEPT COVERAGE  | REJECT COVERAGE  | LIMIT: \$   |
| MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV)                     |                                 | ACCEPT COVERAGE  | REJECT COVERAGE  | LIMIT: \$   |
| <input type="checkbox"/> PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK |                                 |                  |  | # OF OPEN SIDES ON STRUCTURE: _____   |

|   |                           |                 |  |             |                     |                       |                       |                         |                            |
|---|---------------------------|-----------------|--|-------------|---------------------|-----------------------|-----------------------|-------------------------|----------------------------|
| CONSTRUCTION TYPE<br><b>Fire Resistive/Superior</b> | DISTANCE TO HYDRANT<br>FT | FIRE STAT<br>MI | FIRE DISTRICT<br><b>Pass Christian</b> | CODE NUMBER | PROT CL<br><b>5</b> | # STORIES<br><b>2</b> | # BASMT'S<br><b>0</b> | YR BUILT<br><b>2008</b> | TOTAL AREA<br><b>6,460</b> |
|---|---------------------------|-----------------|--|-------------|---------------------|-----------------------|-----------------------|-------------------------|----------------------------|

|  |   |                         |                 |   |                       |
|--|---|-------------------------|-----------------|---|-----------------------|
| BUILDING IMPROVEMENTS  |   | BLDG CODE GRADE         | TAX CODE        | ROOF TYPE<br><b>Gable</b>                                 | OTHER OCCUPANCIES     |
| <input checked="" type="checkbox"/> WIRING, YR: <b>2009</b>  | <input checked="" type="checkbox"/> PLUMBING, YR: <b>2025</b> | WIND CLASS<br>RESISTIVE | SEMI- RESISTIVE | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT | DATE INSTALLED: _____ |
| <input checked="" type="checkbox"/> ROOFING, YR: <b>2026</b> | <input checked="" type="checkbox"/> HEATING, YR: <b>2025</b>  |                         |                 |   |                       |
| OTHER: YR: _____   |   | MANUFACTURER: _____     |                 |   |                       |

|  |                                     |  |                                     |
|--|-------------------------------------|--|-------------------------------------|
| PRIMARY HEAT   |                                     | SECONDARY HEAT   |                                     |
| <input type="checkbox"/> BOILER  | <input type="checkbox"/> SOLID FUEL | <input type="checkbox"/> BOILER  | <input type="checkbox"/> SOLID FUEL |
| IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N |                                     | IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N |                                     |

|                           |                          |                           |                          |
|---------------------------|--------------------------|---------------------------|--------------------------|
| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|

|   |               |                 |  |
|---|---------------|-----------------|--|
| BURGLAR ALARM TYPE                      | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
| BURGLAR ALARM INSTALLED AND SERVICED BY |               | EXTENT          | GRADE  |

|   |  |        |       |                     |                                       |
|---|--|--------|-------|---------------------|---------------------------------------|
| BURGLAR ALARM INSTALLED AND SERVICED BY |  | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY <input type="checkbox"/> |
|---|--|--------|-------|---------------------|---------------------------------------|

|   |                       |                         |  |
|---|-----------------------|-------------------------|--|
| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK<br><b>100</b> | FIRE ALARM MANUFACTURER | <input checked="" type="checkbox"/> CENTRAL STATION<br><input type="checkbox"/> LOCAL GONG |
|---|-----------------------|-------------------------|--|

**ADDITIONAL INTEREST** ACORD 45 attached for additional names

|                                     |                     |       |           |             |                         |
|-------------------------------------|---------------------|-------|-----------|-------------|-------------------------|
| INTEREST                            | NAME AND ADDRESS    | RANK: | EVIDENCE: | CERTIFICATE | INTEREST IN ITEM NUMBER |
| <input type="checkbox"/> LOSS PAYEE |                     |       |           |             | LOCATION:               |
| <input type="checkbox"/> MORTGAGEE  |                     |       |           |             | BUILDING:               |
| <input type="checkbox"/>            |                     |       |           |             | ITEM CLASS:             |
|                                     | REFERENCE / LOAN #: |       |           |             | ITEM DESCRIPTION        |

| <b>ADDITIONAL PREMISES INFORMATION</b> |        | PREMISES #: <b>1</b> | STREET ADDRESS: <b>808 E Second Street, Pass Christian, MS 39571</b> |                |                   |       |          |        |                               |
|--|--------|----------------------|--|----------------|-------------------|-------|----------|--------|-------------------------------|
|  |        | BUILDING #: <b>2</b> | BLDG DESCRIPTION: <b>Storage</b>                                     |                |                   |       |          |        |                               |
| SUBJECT OF INSURANCE                   | AMOUNT | COINS %              | VALUATION  | CAUSES OF LOSS | INFLATION GUARD % | DED   | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
| Building                               | 7,020  |                      | R  | SPECI          | 4.00              | 1,000 |          |        | 5% NS                         |
| Contents                               | 29,247 |                      | R  | SPECI          | 4.00              | 1,000 |          |        | 5% NS                         |
| Flood                                  | 36,267 |                      | R  | SPECI          |                   | 1,000 |          |        |                               |
| Earthquake                             | 36,267 |                      | R  | SPECI          |                   |       |          |        | 5%                            |
| Business Income with Extra Expense     |        |                      | L  |                |                   |       |          |        | 24 MONTHS                     |

ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 VALUE REPORTING INFORMATION - Attach ACORD 811

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

| SPOILAGE COVERAGE (Y/N)  | DESCRIPTION OF PROPERTY COVERED | LIMIT \$      | REFRIG MAINT AGREEMENT (Y/N) | OPTIONS  |
|--------------------------|---------------------------------|---------------|------------------------------|--|
| <input type="checkbox"/> |                                 |               | <input type="checkbox"/>     | BREAKDOWN OR CONTAMINATION POWER OUTAGE <input type="checkbox"/> SELLING PRICE |
|                          |                                 | DEDUCTIBLE \$ |                              |  |

SINKHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LIMIT: \$

MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) ACCEPT COVERAGE REJECT COVERAGE LIMIT: \$

PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: \_\_\_\_\_

| CONSTRUCTION TYPE      | DISTANCE TO HYDRANT FT | FIRE STAT MI | FIRE DISTRICT       | CODE NUMBER | PROT CL  | # STORIES | # BASM'TS | YR BUILT    | TOTAL AREA |
|------------------------|------------------------|--------------|---------------------|-------------|----------|-----------|-----------|-------------|------------|
| <b>Non-Combustible</b> |                        |              | <b>City of Pass</b> |             | <b>5</b> | <b>1</b>  | <b>0</b>  | <b>2008</b> | <b>880</b> |

| BUILDING IMPROVEMENTS   | BLDG CODE GRADE | TAX CODE | ROOF TYPE             | OTHER OCCUPANCIES  |
|---|-----------------|----------|-----------------------|--|
| <input type="checkbox"/> WIRING, YR: _____<br><input checked="" type="checkbox"/> ROOFING, YR: <b>2009</b><br><input type="checkbox"/> OTHER: _____ |                 |          | <b>Gable</b>          |  |
| <input type="checkbox"/> PLUMBING, YR: _____<br><input type="checkbox"/> HEATING, YR: _____<br><input type="checkbox"/> HEATING, YR: _____          |                 |          | <b>SEMI-RESISTIVE</b> | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: _____<br>MANUFACTURER: _____ |

| PRIMARY HEAT   | SECONDARY HEAT   |
|--|--|
| <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/><br>IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N | <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/><br>IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N |

| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|
|                           |                          |                           |                          |

| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|--------------------|---------------|-----------------|--|
|                    |               |                 | WITH KEYS  |

| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY |
|---|--------|-------|---------------------|--------------|
|   |        |       |                     |              |

| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK  | FIRE ALARM MANUFACTURER | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|---|----------|-------------------------|--|
|   | <b>0</b> |                         |  |

**ADDITIONAL INTEREST ACORD 45 attached for additional names**

| INTEREST  | NAME AND ADDRESS    | RANK | EVIDENCE | CERTIFICATE | INTEREST IN ITEM NUMBER   |
|---|---------------------|------|----------|-------------|---|
| <input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE |                     |      |          |             | LOCATION: _____ BUILDING: _____<br>ITEM CLASS: _____ ITEM: _____<br>ITEM DESCRIPTION: _____ |
|   | REFERENCE / LOAN #: |      |          |             |   |

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SEE ATTACHED ACORD 101

**Applicable in AL, AR, DC, LA, MD, NM, RI and WV**

Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO**

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK**

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS**

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties\* (not to exceed five thousand dollars and the stated value of the claim for each such violation)\*. \*Applies in NY Only.

**Applicable in ME, TN, VA and WA**

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ**

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR**

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR**

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE



PRODUCER'S NAME (Please Print)

Albert Betz, CIC, ACI

STATE PRODUCER LICENSE NO  
(Required in Florida)  
9600840

APPLICANT'S SIGNATURE

DATE

NATIONAL PRODUCER NUMBER

AGENCY CUSTOMER ID: **PASSCHR-10****HGERALD****PROPERTY SECTION**DATE (MM/DD/YYYY)  
**03/09/2026**

|  |                                     |   |  |                         |
|--|-------------------------------------|---|--|-------------------------|
| AGENCY NAME<br><b>Betz Rosetti &amp; Associates Inc.</b> |                                     | CARRIER<br><b>Special Risk Insurance</b>                            |  | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER  | EFFECTIVE DATE<br><b>04/10/2026</b> | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |  |                         |

**BLANKET SUMMARY**

| BLKT # | AMOUNT | TYPE | BLKT # | AMOUNT | TYPE |
|--------|--------|------|--------|--------|------|
|        |        |      |        |        |      |

| <b>PREMISES INFORMATION</b>               |                  | PREMISES #: <b>2</b> | STREET ADDRESS: <b>707 W North Street, Pass Christian, MS 39571</b> |                |                   |              |          |        |                               |
|---|------------------|----------------------|---|----------------|-------------------|--------------|----------|--------|-------------------------------|
|   |                  | BUILDING #: <b>1</b> | BLDG DESCRIPTION: <b>Fire Department</b>                            |                |                   |              |          |        |                               |
| SUBJECT OF INSURANCE                      | AMOUNT           | COINS %              | VALUATION   | CAUSES OF LOSS | INFLATION GUARD % | DED          | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
| <b>Building</b>                           | <b>1,019,334</b> |                      | <b>R</b>  | <b>SPECI</b>   | <b>4.00</b>       | <b>1,000</b> |          |        | <b>5% NS</b>                  |
| <b>Contents</b>                           | <b>90,048</b>    |                      | <b>R</b>  | <b>SPECI</b>   | <b>4.00</b>       | <b>1,000</b> |          |        | <b>5% NS</b>                  |
| <b>Flood</b>                              | <b>1,109,382</b> |                      | <b>R</b>  | <b>SPECI</b>   |                   | <b>1,000</b> |          |        |                               |
| <b>Earthquake</b>                         | <b>1,109,382</b> |                      | <b>R</b>  | <b>SPECI</b>   |                   |              |          |        | <b>5%</b>                     |
| <b>Business Income with Extra Expense</b> |                  |                      | <b>L</b>  |                |                   |              |          |        | <b>24 MONTHS</b>              |

|                        |  |  |
|------------------------|--|--|
| ADDITIONAL INFORMATION | BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 | VALUE REPORTING INFORMATION - Attach ACORD 811 |
|------------------------|--|--|

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

|   |                                 |                  |  |   |
|---|---------------------------------|------------------|--|---|
| SPOILAGE COVERAGE (Y/N)<br><input type="checkbox"/> | DESCRIPTION OF PROPERTY COVERED | LIMIT<br>\$      | REFRIG MAINT AGREEMENT (Y/N)<br><input type="checkbox"/> | OPTIONS<br>BREAKDOWN OR CONTAMINATION<br>POWER OUTAGE <input type="checkbox"/> SELLING PRICE <input type="checkbox"/> |
|   |                                 | DEDUCTIBLE<br>\$ |  |   |

|  |                 |                 |           |
|--|-----------------|-----------------|-----------|
| SINKHOLE COVERAGE (Required in Florida)                  | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |
| MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |

|  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK | # OF OPEN SIDES ON STRUCTURE: _____ |
|--|-------------------------------------|

|   |                           |                    |                                      |             |                     |                       |                       |                         |                            |
|---|---------------------------|--------------------|--------------------------------------|-------------|---------------------|-----------------------|-----------------------|-------------------------|----------------------------|
| CONSTRUCTION TYPE<br><b>Fire Resistive/Superior</b> | DISTANCE TO HYDRANT<br>FT | FIRE STATION<br>MI | FIRE DISTRICT<br><b>City of Pass</b> | CODE NUMBER | PROT CL<br><b>5</b> | # STORIES<br><b>2</b> | # BASMT'S<br><b>0</b> | YR BUILT<br><b>2009</b> | TOTAL AREA<br><b>4,536</b> |
|---|---------------------------|--------------------|--------------------------------------|-------------|---------------------|-----------------------|-----------------------|-------------------------|----------------------------|

|  |   |          |                                     |   |
|--|---|----------|-------------------------------------|---|
| BUILDING IMPROVEMENTS  | BLDG CODE GRADE   | TAX CODE | ROOF TYPE<br><b>Gable</b>           | OTHER OCCUPANCIES   |
| <input checked="" type="checkbox"/> WIRING, YR: <b>2024</b>  | <input checked="" type="checkbox"/> PLUMBING, YR: <b>2024</b> |          | <input type="checkbox"/> WIND CLASS | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT |
| <input checked="" type="checkbox"/> ROOFING, YR: <b>2009</b> | <input checked="" type="checkbox"/> HEATING, YR: <b>2024</b>  |          | <input type="checkbox"/> RESISTIVE  | DATE INSTALLED: _____                                     |
| OTHER: _____ YR: _____                                       |   |          |                                     | MANUFACTURER: _____                                       |

|  |  |
|--|--|
| PRIMARY HEAT<br><input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> | SECONDARY HEAT<br><input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> |
| IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N                                       | IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N   |

|                           |                          |                           |                          |
|---------------------------|--------------------------|---------------------------|--------------------------|
| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|

|   |               |                 |  |
|---|---------------|-----------------|--|
| BURGLAR ALARM TYPE                      | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
| BURGLAR ALARM INSTALLED AND SERVICED BY |               | EXTENT          | WITH KEYS  |

|   |        |       |                     |                                       |
|---|--------|-------|---------------------|---------------------------------------|
| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY <input type="checkbox"/> |
|---|--------|-------|---------------------|---------------------------------------|

|   |                       |                         |  |
|---|-----------------------|-------------------------|--|
| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK<br><b>100</b> | FIRE ALARM MANUFACTURER | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|---|-----------------------|-------------------------|--|

**ADDITIONAL INTEREST** **ACORD 45 attached for additional names**

|   |  |   |
|---|--|---|
| INTEREST<br><input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE | NAME AND ADDRESS - RANK: _____ EVIDENCE: _____ CERTIFICATE _____ | INTEREST IN ITEM NUMBER<br>LOCATION: _____ BUILDING: _____<br>ITEM CLASS: _____ ITEM: _____<br>ITEM DESCRIPTION |
|   | REFERENCE / LOAN #: _____  |   |

**ADDITIONAL PREMISES INFORMATION**

| PREMISES #: <b>3</b>               |         | STREET ADDRESS: <b>351 Clark Ave, Pass Christian, MS 39571</b> |           |                |                   |       |          |        |                               |
|------------------------------------|---------|--|-----------|----------------|-------------------|-------|----------|--------|-------------------------------|
| BUILDING #: <b>1</b>               |         | BLDG DESCRIPTION: <b>Fire Dept Smoke Training Facility</b>     |           |                |                   |       |          |        |                               |
| SUBJECT OF INSURANCE               | AMOUNT  | COINS %  | VALUATION | CAUSES OF LOSS | INFLATION GUARD % | DED   | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
| Building                           | 291,388 |  | R         | SPECI          | 4.00              | 1,000 |          |        | 5% NS                         |
| Flood                              | 291,388 |  | R         | SPECI          |                   | 1,000 |          |        |                               |
| Earthquake                         | 291,388 |  | R         | SPECI          |                   |       |          |        | 5%                            |
| Business Income with Extra Expense |         |  | L         |                |                   |       |          |        | 24 MONTHS                     |

ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 VALUE REPORTING INFORMATION - Attach ACORD 811

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

|  |                                 |                  |  |  |
|--|---------------------------------|------------------|--|--|
| SPOILAGE COVERAGE (Y/N)<br><input type="checkbox"/>                          | DESCRIPTION OF PROPERTY COVERED | LIMIT<br>\$      | REFRIG MAINT AGREEMENT (Y/N)<br><input type="checkbox"/> | OPTIONS<br><input type="checkbox"/> BREAKDOWN OR CONTAMINATION<br><input type="checkbox"/> POWER OUTAGE <input type="checkbox"/> SELLING PRICE |
|  |                                 | DEDUCTIBLE<br>\$ |  |  |
| SINKHOLE COVERAGE (Required In Florida)                                      |                                 | ACCEPT COVERAGE  | REJECT COVERAGE  | LIMIT: \$  |
| MINE SUBSIDENCE COVERAGE (Required In IL, IN, KY and WV)                     |                                 | ACCEPT COVERAGE  | REJECT COVERAGE  | LIMIT: \$  |
| <input type="checkbox"/> PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK |                                 |                  |  | # OF OPEN SIDES ON STRUCTURE: _____  |

| CONSTRUCTION TYPE | DISTANCE TO HYDRANT | FIRE STAT | FIRE DISTRICT | CODE NUMBER | PROT CL | # STORIES | # BASM'TS | YR BUILT | TOTAL AREA |
|-------------------|---------------------|-----------|---------------|-------------|---------|-----------|-----------|----------|------------|
| Other             |                     |           | City of Pass  |             | 5       | 3         | 0         | 0        | 3,500      |

|  |  |          |                 |   |
|--|--|----------|-----------------|---|
| BUILDING IMPROVEMENTS  | BLDG CODE GRADE                        | TAX CODE | ROOF TYPE       | OTHER OCCUPANCIES   |
| WIRING, YR: <input checked="" type="checkbox"/> ROOFING, YR: <b>2013</b> | PLUMBING, YR: <input type="checkbox"/> |          | Gable           |   |
| HEATING, YR: <input type="checkbox"/>                                    | WIND CLASS                             |          | SEMI- RESISTIVE | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT |
| OTHER: YR: <input type="checkbox"/>                                      | RESISTIVE                              |          |                 | DATE INSTALLED: _____                                     |

|  |  |
|--|--|
| PRIMARY HEAT   | SECONDARY HEAT   |
| <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> | <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> |
| IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N                     | IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N                     |

| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|
|                           |                          |                           |                          |

|                    |               |                 |  |
|--------------------|---------------|-----------------|--|
| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|                    |               |                 | WITH KEYS  |

|   |        |       |                     |              |
|---|--------|-------|---------------------|--------------|
| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY |
|   |        |       |                     |              |

|   |         |                         |  |
|---|---------|-------------------------|--|
| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK | FIRE ALARM MANUFACTURER | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|   | 0       |                         |  |

**ADDITIONAL INTEREST** ACORD 45 attached for additional names

| INTEREST                            | NAME AND ADDRESS    | RANK: | EVIDENCE: | CERTIFICATE | INTEREST IN ITEM NUMBER |
|-------------------------------------|---------------------|-------|-----------|-------------|-------------------------|
| <input type="checkbox"/> LOSS PAYEE |                     |       |           |             | LOCATION: BUILDING:     |
| <input type="checkbox"/> MORTGAGEE  |                     |       |           |             | ITEM CLASS: ITEM:       |
|                                     |                     |       |           |             | ITEM DESCRIPTION        |
|                                     | REFERENCE / LOAN #: |       |           |             |                         |

**REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

**Applicable in AL, AR, DC, LA, MD, NM, RI and WV**

Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO**

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK**

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS**

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties\* (not to exceed five thousand dollars and the stated value of the claim for each such violation)\*. \*Applies in NY Only.

**Applicable in ME, TN, VA and WA**

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ**

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR**

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR**

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE



PRODUCER'S NAME (Please Print)

Albert Betz, CIC, ACI

STATE PRODUCER LICENSE NO  
(Required in Florida)

9600840

APPLICANT'S SIGNATURE

DATE

NATIONAL PRODUCER NUMBER



**PROPERTY SECTION**

DATE (MM/DD/YYYY)  
**03/09/2026**

|  |  |  |   |                         |
|--|--|--|---|-------------------------|
| AGENCY NAME<br><b>Betz Rosetti &amp; Associates Inc.</b> |  | CARRIER<br><b>Special Risk Insurance</b> |   | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER  |  | EFFECTIVE DATE<br><b>04/10/2026</b>      | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |                         |

**BLANKET SUMMARY**

| BLKT # | AMOUNT | TYPE | BLKT # | AMOUNT | TYPE |
|--------|--------|------|--------|--------|------|
|        |        |      |        |        |      |

| <b>PREMISES INFORMATION</b>               |               | PREMISES #: <b>3</b> | STREET ADDRESS: <b>351 Clark Ave, Pass Christian, MS 39571</b> |                |                   |              |          |        |                               |
|---|---------------|----------------------|--|----------------|-------------------|--------------|----------|--------|-------------------------------|
|   |               | BUILDING #: <b>2</b> | BLDG DESCRIPTION: <b>Storage - Conex Trailer</b>               |                |                   |              |          |        |                               |
| SUBJECT OF INSURANCE                      | AMOUNT        | COINS %              | VALUATION  | CAUSES OF LOSS | INFLATION GUARD % | DED          | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
| <b>Building</b>                           | <b>14,038</b> |                      | <b>A</b>   | <b>SPECI</b>   | <b>4.00</b>       | <b>1,000</b> |          |        | <b>5% NS</b>                  |
| <b>Flood</b>                              | <b>14,038</b> |                      | <b>A</b>   | <b>SPECI</b>   |                   | <b>1,000</b> |          |        |                               |
| <b>Earthquake</b>                         | <b>14,038</b> |                      | <b>A</b>   | <b>SPECI</b>   |                   |              |          |        | <b>5%</b>                     |
| <b>Business Income with Extra Expense</b> |               |                      | <b>L</b>   |                |                   |              |          |        | <b>24 MONTHS</b>              |

ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 VALUE REPORTING INFORMATION - Attach ACORD 811

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

|   |                                 |                  |  |   |
|---|---------------------------------|------------------|--|---|
| SPOILAGE COVERAGE (Y/N)<br><input type="checkbox"/> | DESCRIPTION OF PROPERTY COVERED | LIMIT<br>\$      | REFRIG MAINT AGREEMENT (Y/N)<br><input type="checkbox"/> | OPTIONS<br>BREAKDOWN OR CONTAMINATION<br>POWER OUTAGE: <input type="checkbox"/> SELLING PRICE |
|   |                                 | DEDUCTIBLE<br>\$ |  |   |

|  |                 |                 |           |
|--|-----------------|-----------------|-----------|
| SINKHOLE COVERAGE (Required In Florida)                  | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |
| MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |

PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: \_\_\_\_\_

|   |                           |                 |                                      |             |                     |                       |                       |                      |                          |
|---|---------------------------|-----------------|--------------------------------------|-------------|---------------------|-----------------------|-----------------------|----------------------|--------------------------|
| CONSTRUCTION TYPE<br><b>Non-Combustible</b> | DISTANCE TO HYDRANT<br>FT | FIRE STAT<br>MI | FIRE DISTRICT<br><b>City of Pass</b> | CODE NUMBER | PROT CL<br><b>5</b> | # STORIES<br><b>1</b> | # BASMT'S<br><b>0</b> | YR BUILT<br><b>0</b> | TOTAL AREA<br><b>500</b> |
|---|---------------------------|-----------------|--------------------------------------|-------------|---------------------|-----------------------|-----------------------|----------------------|--------------------------|

|                                       |  |          |                                     |  |
|---------------------------------------|--|----------|-------------------------------------|--|
| BUILDING IMPROVEMENTS                 | BLDG CODE GRADE                        | TAX CODE | ROOF TYPE<br><b>Flat w/ Parapet</b> | OTHER OCCUPANCIES  |
| WIRING, YR: <input type="checkbox"/>  | PLUMBING, YR: <input type="checkbox"/> |          | WIND CLASS<br>RESISTIVE             | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT<br>DATE INSTALLED: _____ |
| ROOFING, YR: <input type="checkbox"/> | HEATING, YR: <input type="checkbox"/>  |          | SEMI-RESISTIVE                      | MANUFACTURER:  |
| OTHER: YR: <input type="checkbox"/>   |  |          |                                     |  |

|  |  |
|--|--|
| PRIMARY HEAT<br><input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> | SECONDARY HEAT<br><input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> |
| IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N                                       | IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y/N   |

|                           |                          |                           |                          |
|---------------------------|--------------------------|---------------------------|--------------------------|
| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|

|                    |               |                 |  |
|--------------------|---------------|-----------------|--|
| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|                    |               |                 | WITH KEYS  |

|   |        |       |                     |              |
|---|--------|-------|---------------------|--------------|
| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY |
|---|--------|-------|---------------------|--------------|

|   |                     |                         |  |
|---|---------------------|-------------------------|--|
| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK<br><b>0</b> | FIRE ALARM MANUFACTURER | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|---|---------------------|-------------------------|--|

**ADDITIONAL INTEREST** **ACORD 45 attached for additional names**

|   |  |   |
|---|--|---|
| INTEREST<br><input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE | NAME AND ADDRESS RANK: _____ EVIDENCE: _____ CERTIFICATE _____ | INTEREST IN ITEM NUMBER<br>LOCATION: _____ BUILDING: _____<br>ITEM CLASS: _____ ITEM: _____<br>ITEM DESCRIPTION |
|   | REFERENCE / LOAN #:  |   |

**ADDITIONAL PREMISES INFORMATION**

| PREMISES #:          |        | STREET ADDRESS:   |           |                |                   |     |          |        |                               |
|----------------------|--------|-------------------|-----------|----------------|-------------------|-----|----------|--------|-------------------------------|
| BUILDING #:          |        | BLDG DESCRIPTION: |           |                |                   |     |          |        |                               |
| SUBJECT OF INSURANCE | AMOUNT | COINS %           | VALUATION | CAUSES OF LOSS | INFLATION GUARD % | DED | DED TYPE | BLKT # | FORMS AND CONDITIONS TO APPLY |
|                      |        |                   |           |                |                   |     |          |        |                               |
|                      |        |                   |           |                |                   |     |          |        |                               |
|                      |        |                   |           |                |                   |     |          |        |                               |
|                      |        |                   |           |                |                   |     |          |        |                               |
|                      |        |                   |           |                |                   |     |          |        |                               |

ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810 VALUE REPORTING INFORMATION - Attach ACORD 811

**ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION**

|   |                                 |                  |  |  |
|---|---------------------------------|------------------|--|--|
| SPOILAGE COVERAGE (Y/N)<br><input type="checkbox"/> | DESCRIPTION OF PROPERTY COVERED | LIMIT<br>\$      | REFRIG MAINT AGREEMENT (Y/N)<br><input type="checkbox"/> | OPTIONS<br><input type="checkbox"/> BREAKDOWN OR CONTAMINATION<br><input type="checkbox"/> POWER OUTAGE <input type="checkbox"/> SELLING PRICE |
|   |                                 | DEDUCTIBLE<br>\$ |  |  |

|  |                 |                 |           |
|--|-----------------|-----------------|-----------|
| SINKHOLE COVERAGE (Required in Florida)                  | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |
| MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) | ACCEPT COVERAGE | REJECT COVERAGE | LIMIT: \$ |

PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: \_\_\_\_\_

|                   |                           |                             |               |             |         |           |           |          |            |
|-------------------|---------------------------|-----------------------------|---------------|-------------|---------|-----------|-----------|----------|------------|
| CONSTRUCTION TYPE | DISTANCE TO HYDRANT<br>FT | DISTANCE TO FIRE STAT<br>MI | FIRE DISTRICT | CODE NUMBER | PROT CL | # STORIES | # BASM'TS | YR BUILT | TOTAL AREA |
|-------------------|---------------------------|-----------------------------|---------------|-------------|---------|-----------|-----------|----------|------------|

|                                       |  |            |                 |   |
|---------------------------------------|--|------------|-----------------|---|
| BUILDING IMPROVEMENTS                 | BLDG CODE GRADE                        | TAX CODE   | ROOF TYPE       | OTHER OCCUPANCIES   |
| WIRING, YR: <input type="checkbox"/>  | PLUMBING, YR: <input type="checkbox"/> | WIND CLASS | SEMI- RESISTIVE | HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: _____ |
| ROOFING, YR: <input type="checkbox"/> | HEATING, YR: <input type="checkbox"/>  | RESISTIVE  |                 | MANUFACTURER:   |
| OTHER: YR: <input type="checkbox"/>   |  |            |                 |   |

|  |  |
|--|--|
| PRIMARY HEAT   | SECONDARY HEAT   |
| <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> | <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> |
| IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N                     | IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N                     |

|                           |                          |                           |                          |
|---------------------------|--------------------------|---------------------------|--------------------------|
| RIGHT EXPOSURE & DISTANCE | LEFT EXPOSURE & DISTANCE | FRONT EXPOSURE & DISTANCE | REAR EXPOSURE & DISTANCE |
|---------------------------|--------------------------|---------------------------|--------------------------|

|                    |               |                 |  |
|--------------------|---------------|-----------------|--|
| BURGLAR ALARM TYPE | CERTIFICATE # | EXPIRATION DATE | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|                    |               |                 | WITH KEYS  |

|   |        |       |                     |                                       |
|---|--------|-------|---------------------|---------------------------------------|
| BURGLAR ALARM INSTALLED AND SERVICED BY | EXTENT | GRADE | # GUARDS / WATCHMEN | CLOCK HOURLY <input type="checkbox"/> |
|---|--------|-------|---------------------|---------------------------------------|

|   |         |                         |  |
|---|---------|-------------------------|--|
| PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) | % SPRNK | FIRE ALARM MANUFACTURER | CENTRAL STATION <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> |
|---|---------|-------------------------|--|

**ADDITIONAL INTEREST** ACORD 45 attached for additional names

|   |                           |             |                 |                   |                         |                 |
|---|---------------------------|-------------|-----------------|-------------------|-------------------------|-----------------|
| INTEREST<br><input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE | NAME AND ADDRESS          | RANK: _____ | EVIDENCE: _____ | CERTIFICATE _____ | INTEREST IN ITEM NUMBER |                 |
|   |                           |             |                 |                   | LOCATION: _____         | BUILDING: _____ |
|   |                           |             |                 |                   | ITEM CLASS: _____       | ITEM: _____     |
|   | REFERENCE / LOAN #: _____ |             |                 |                   | ITEM DESCRIPTION        |                 |

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**Applicable in AL, AR, DC, LA, MD, NM, RI and WV**

Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO**

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK**

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS**

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties\* (not to exceed five thousand dollars and the stated value of the claim for each such violation)\*. \*Applies in NY Only.

**Applicable in ME, TN, VA and WA**

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ**

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR**

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR**

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE



PRODUCER'S NAME (Please Print)

Albert Betz, CIC, ACI

STATE PRODUCER LICENSE NO  
(Required in Florida)

9600840

APPLICANT'S SIGNATURE

DATE

NATIONAL PRODUCER NUMBER

\* Code EARTH; Description Earthquake; Option Code 1 5%;

\* Code FLOOD; Description Flood; Deductible \$1,000;

\* Code MISC; Description Money & Securities; Limit 1 \$50,000;

\* Code MISC; Description Software; Limit 1 \$250,000;

\* Code MISC; Description Unintentional E&O; Limit 1 \$500,000;

**ADDITIONAL REMARKS SCHEDULE**

|   |                         |  |  |
|---|-------------------------|--|--|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |                         | NAMED INSURED<br><b>City of Pass Christian Fire &amp; Rescue<br/>200 West Scenic Drive<br/>Pass Christian, MS 39571<br/>Harrison</b> |  |
| POLICY NUMBER                                       |                         |  |  |
| CARRIER<br><b>Special Risk Insurance</b>            | NAIC CODE<br><b>N/A</b> | EFFECTIVE DATE: <b>04/10/2026</b>  |  |

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: **ACORD 140** FORM TITLE: **PROPERTY SECTION**

**Notes****Roof Covering**

- 1-1 - Metal sheathing with CONCEALED fasteners
- 1-2 - Metal sheathing with CONCEALED fasteners
- 2-1 - Metal sheathing with CONCEALED fasteners
- 3-1 - Shingle - 110 mph wind rating
- 3-2 - Metal sheathing with CONCEALED fasteners

**Roof Geometry**

- 1-1 - Gable Roof with Slope  $\leq$  6:12 (26.5°)
- 1-2 - Gable Roof with Slope  $\leq$  6:12 (26.5°)
- 2-1 - Gable Roof with Slope  $\leq$  6:12 (26.5°)
- 3-1 - Gable Roof with Slope  $\leq$  6:12 (26.5°)
- 3-2 - Flat Roof WITH Parapets

**Roof Anchors**

- 1-1 - Structural
- 1-2 - Structural
- 2-1 - Structural
- 3-1 - Clips
- 3-2 -



AGENCY CUSTOMER ID: PASSCHR-10

HGERALD

**COMMERCIAL GENERAL LIABILITY SECTION**DATE (MM/DD/YYYY)  
03/09/2026

|  |                                   |   |
|--|-----------------------------------|---|
| AGENCY<br>Betz Rosettl & Associates Inc. | CARRIER<br>Special Risk Insurance | NAIC CODE<br>N/A  |
| POLICY NUMBER                            | EFFECTIVE DATE<br>04/10/2026      | APPLICANT / FIRST NAMED INSURED<br>City of Pass Christian Fire & Rescue |

**IMPORTANT - If CLAIMS MADE is checked in the COVERAGE / LIMITS section below, this is an application for a claims-made policy.**  
Read all provisions of the policy carefully.

| COVERAGES  |  | LIMITS                                      |  | PREMIUMS                          |                     |
|--|--|---|--|-----------------------------------|---------------------|
| <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY |  | GENERAL AGGREGATE                           | \$   | 3,000,000                         |                     |
| <input type="checkbox"/> CLAIMS MADE                             | <input checked="" type="checkbox"/> OCCURRENCE | LIMIT APPLIES PER:                          | <input checked="" type="checkbox"/> POLICY | <input type="checkbox"/> LOCATION | PREMISES/OPERATIONS |
| <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROTECTIVE       |  |   | <input type="checkbox"/> PROJECT           | <input type="checkbox"/> OTHER:   |                     |
| DEDUCTIBLES  |  | PRODUCTS & COMPLETED OPERATIONS AGGREGATE   | \$   | 3,000,000                         | PRODUCTS            |
| <input type="checkbox"/> PROPERTY DAMAGE                         | \$   | PERSONAL & ADVERTISING INJURY               | \$   | 1,000,000                         | OTHER               |
| <input type="checkbox"/> BODILY INJURY                           | \$   | EACH OCCURRENCE                             | \$   | 1,000,000                         |                     |
|  | \$   | DAMAGE TO RENTED PREMISES (each occurrence) | \$   | 1,000,000                         |                     |
|  | \$   | MEDICAL EXPENSE (Any one person)            | \$   | 5,000                             | TOTAL               |
|  | \$   | EMPLOYEE BENEFITS                           | \$   |                                   |                     |
|  | \$   |   | \$   |                                   |                     |

OTHER COVERAGES, RESTRICTIONS AND/OR ENDORSEMENTS (For hired/non-owned auto coverages attach the applicable state Business Auto Section, ACORD 137)  
See attached Additional Coverages overflow.

APPLICABLE ONLY IN WISCONSIN: IF NON-OWNED ONLY AUTO COVERAGE IS TO BE PROVIDED UNDER THE POLICY:

1. UM / UIM COVERAGE  IS  IS NOT AVAILABLE. 2. MEDICAL PAYMENTS COVERAGE  IS  IS NOT AVAILABLE.

**SCHEDULE OF HAZARDS**

| LOC # | HAZ # | CLASSIFICATION | CLASS CODE | PREMIUM BASIS | EXPOSURE | TERR | RATE     |          | PREMIUM  |          |
|-------|-------|----------------|------------|---------------|----------|------|----------|----------|----------|----------|
|       |       |                |            |               |          |      | PREM/OPS | PRODUCTS | PREM/OPS | PRODUCTS |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |
|       |       |                |            |               |          |      |          |          |          |          |

RATING AND PREMIUM BASIS (S) GROSS SALES - PER \$1,000/SALES (P) PAYROLL - PER \$1,000/PAY (A) AREA - PER 1,000/SQ FT (C) TOTAL COST - PER \$1,000/COST (M) ADMISSIONS - PER 1,000/ADM (U) UNIT - PER UNIT (T) OTHER

**CLAIMS MADE (Explain all "Yes" responses)**

|  |     |
|--|-----|
| EXPLAIN ALL "YES" RESPONSES  | Y/N |
| 1. PROPOSED RETROACTIVE DATE:  |     |
| 2. ENTRY DATE INTO UNINTERRUPTED CLAIMS MADE COVERAGE:   |     |
| 3. HAS ANY PRODUCT, WORK, ACCIDENT, OR LOCATION BEEN EXCLUDED, UNINSURED OR SELF-INSURED FROM ANY PREVIOUS COVERAGE? |     |
| 4. WAS TAIL COVERAGE PURCHASED UNDER ANY PREVIOUS POLICY?  |     |

**EMPLOYEE BENEFITS LIABILITY**

|                             |  |
|-----------------------------|--|
| 1. DEDUCTIBLE PER CLAIM: \$ | 3. NUMBER OF EMPLOYEES COVERED BY EMPLOYEE BENEFITS PLANS: |
| 2. NUMBER OF EMPLOYEES:     | 4. RETROACTIVE DATE:                                       |

ACORD 126 (2014/04)

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**CONTRACTORS**

AGENCY CUSTOMER ID: **PASSCHR-10**

**HGERALD**

|  |                             |                          |                    |                    |     |
|--|-----------------------------|--------------------------|--------------------|--------------------|-----|
| EXPLAIN ALL "YES" RESPONSES (For all past or present operations)                             |                             |                          |                    |                    | Y/N |
| 1. DOES APPLICANT DRAW PLANS, DESIGNS, OR SPECIFICATIONS FOR OTHERS?                         |                             |                          |                    |                    |     |
| 2. DO ANY OPERATIONS INCLUDE BLASTING OR UTILIZE OR STORE EXPLOSIVE MATERIAL?                |                             |                          |                    |                    |     |
| 3. DO ANY OPERATIONS INCLUDE EXCAVATION, TUNNELING, UNDERGROUND WORK OR EARTH MOVING?        |                             |                          |                    |                    |     |
| 4. DO YOUR SUBCONTRACTORS CARRY COVERAGES OR LIMITS LESS THAN YOURS?                         |                             |                          |                    |                    |     |
| 5. ARE SUBCONTRACTORS ALLOWED TO WORK WITHOUT PROVIDING YOU WITH A CERTIFICATE OF INSURANCE? |                             |                          |                    |                    |     |
| 6. DOES APPLICANT LEASE EQUIPMENT TO OTHERS WITH OR WITHOUT OPERATORS?                       |                             |                          |                    |                    |     |
| DESCRIBE THE TYPE OF WORK SUBCONTRACTED  | \$ PAID TO SUB-CONTRACTORS: | % OF WORK SUBCONTRACTED: | # FULL-TIME STAFF: | # PART-TIME STAFF: |     |

**PRODUCTS / COMPLETED OPERATIONS**

| PRODUCTS | ANNUAL GROSS SALES | # OF UNITS | TIME IN MARKET | EXPECTED LIFE | INTENDED USE | PRINCIPAL COMPONENTS |
|----------|--------------------|------------|----------------|---------------|--------------|----------------------|
|          |                    |            |                |               |              |                      |
|          |                    |            |                |               |              |                      |
|          |                    |            |                |               |              |                      |

|  |  |  |  |  |     |
|--|--|--|--|--|-----|
| EXPLAIN ALL "YES" RESPONSES (For all past or present products or operations) PLEASE ATTACH LITERATURE, BROCHURES, LABELS, WARNINGS, ETC. |  |  |  |  | Y/N |
| 1. DOES APPLICANT INSTALL, SERVICE OR DEMONSTRATE PRODUCTS?  |  |  |  |  | N   |
| 2. FOREIGN PRODUCTS SOLD, DISTRIBUTED, USED AS COMPONENTS? (If "YES", attach ACORD 815)  |  |  |  |  | N   |
| 3. RESEARCH AND DEVELOPMENT CONDUCTED OR NEW PRODUCTS PLANNED?   |  |  |  |  | N   |
| 4. GUARANTEES, WARRANTIES, HOLD HARMLESS AGREEMENTS?   |  |  |  |  | N   |
| 5. PRODUCTS RELATED TO AIRCRAFT/SPACE INDUSTRY?  |  |  |  |  | N   |
| 6. PRODUCTS RECALLED, DISCONTINUED, CHANGED?   |  |  |  |  | N   |
| 7. PRODUCTS OF OTHERS SOLD OR RE-PACKAGED UNDER APPLICANT LABEL?   |  |  |  |  | N   |
| 8. PRODUCTS UNDER LABEL OF OTHERS?   |  |  |  |  | N   |
| 9. VENDORS COVERAGE REQUIRED?  |  |  |  |  | N   |
| 10. DOES ANY NAMED INSURED SELL TO OTHER NAMED INSUREDS?   |  |  |  |  | N   |

**ADDITIONAL INTEREST / CERTIFICATE RECIPIENT**

**ACORD 45 attached for additional names**

|  |                  |       |           |             |                         |           |
|--|------------------|-------|-----------|-------------|-------------------------|-----------|
| INTEREST<br><input type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> EMPLOYEE AS LESSOR<br><input type="checkbox"/> LIENHOLDER<br><input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> MORTGAGEE | NAME AND ADDRESS | RANK: | EVIDENCE: | CERTIFICATE | INTEREST IN ITEM NUMBER |           |
|  |                  |       |           |             | LOCATION:               | BUILDING: |
|  |                  |       |           |             | ITEM CLASS:             | ITEM:     |
|  |                  |       |           |             | ITEM DESCRIPTION        |           |
| REFERENCE / LOAN #:  |                  |       |           |             |                         |           |

**GENERAL INFORMATION**

| EXPLAIN ALL "YES" RESPONSES (For all past or present operations)  |                           | Y/N                               |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|---|---------------------------|-----------------------------------|-------------------------|------------------------|-------------------------|---------------|---------------------|---------------|---------------------|------------|---------|------------|---------|--|--|--|--|--|--|--|--|------------------------|--|--|--|------------------------|--|--|--|--|
| 1. ANY MEDICAL FACILITIES PROVIDED OR MEDICAL PROFESSIONALS EMPLOYED OR CONTRACTED?   |                           | Y                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 2. ANY EXPOSURE TO RADIOACTIVE/NUCLEAR MATERIALS?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 3. DO/HAVE PAST, PRESENT OR DISCONTINUED OPERATIONS INVOLVE(D) STORING, TREATING, DISCHARGING, APPLYING, DISPOSING, OR TRANSPORTING OF HAZARDOUS MATERIAL? (e.g. landfills, wastes, fuel tanks, etc)  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 4. ANY OPERATIONS SOLD, ACQUIRED, OR DISCONTINUED IN LAST FIVE (5) YEARS?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 5. DO YOU RENT OR LOAN EQUIPMENT TO OTHERS?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| <table border="1"> <thead> <tr> <th rowspan="2">EQUIPMENT</th> <th colspan="2">TYPE OF EQUIPMENT</th> <th rowspan="2">INSTRUCTION GIVEN (Y/N)</th> </tr> <tr> <th>SMALL TOOLS</th> <th>LARGE EQUIPMENT</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>  |                           | EQUIPMENT                         | TYPE OF EQUIPMENT       |                        | INSTRUCTION GIVEN (Y/N) | SMALL TOOLS   | LARGE EQUIPMENT     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| EQUIPMENT   | TYPE OF EQUIPMENT         |                                   | INSTRUCTION GIVEN (Y/N) |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   | SMALL TOOLS               | LARGE EQUIPMENT                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   |                           |                                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   |                           |                                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 6. ANY WATERCRAFT, DOCKS, FLOATS OWNED, HIRED OR LEASED?  |                           | Y                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 7. ANY PARKING FACILITIES OWNED/RENTED?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 8. IS A FEE CHARGED FOR PARKING?  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 9. RECREATION FACILITIES PROVIDED?  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 10. ARE THERE ANY LODGING OPERATIONS INCLUDING APARTMENTS? (If "YES", answer the following):  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| # APTS  | TOTAL APT AREA<br>Sq. Ft. | DESCRIBE OTHER LODGING OPERATIONS |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   |                           |                                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 11. IS THERE A SWIMMING POOL ON PREMISES? (Check all that apply)  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| <input type="checkbox"/> APPROVED FENCE <input type="checkbox"/> LIMITED ACCESS <input type="checkbox"/> DIVING BOARD <input type="checkbox"/> SLIDE <input type="checkbox"/> ABOVE GROUND <input type="checkbox"/> IN GROUND <input type="checkbox"/> LIFE GUARD   |                           |                                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 12. ARE SOCIAL EVENTS SPONSORED?  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 13. ARE ATHLETIC TEAMS SPONSORED?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| <table border="1"> <thead> <tr> <th rowspan="2">TYPE OF SPORT</th> <th rowspan="2">CONTACT SPORT (Y/N)</th> <th colspan="2">AGE GROUP</th> <th rowspan="2">TYPE OF SPORT</th> <th rowspan="2">CONTACT SPORT (Y/N)</th> <th colspan="2">AGE GROUP</th> </tr> <tr> <th>12 &amp; UNDER</th> <th>13 - 18</th> <th>12 &amp; UNDER</th> <th>13 - 18</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4">EXTENT OF SPONSORSHIP:</td> <td colspan="4">EXTENT OF SPONSORSHIP:</td> </tr> </tbody> </table> |                           | TYPE OF SPORT                     | CONTACT SPORT (Y/N)     | AGE GROUP              |                         | TYPE OF SPORT | CONTACT SPORT (Y/N) | AGE GROUP     |                     | 12 & UNDER | 13 - 18 | 12 & UNDER | 13 - 18 |  |  |  |  |  |  |  |  | EXTENT OF SPONSORSHIP: |  |  |  | EXTENT OF SPONSORSHIP: |  |  |  |  |
| TYPE OF SPORT   | CONTACT SPORT (Y/N)       |                                   |                         | AGE GROUP              |                         |               |                     | TYPE OF SPORT | CONTACT SPORT (Y/N) | AGE GROUP  |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   |                           | 12 & UNDER                        | 13 - 18                 | 12 & UNDER             | 13 - 18                 |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
|   |                           |                                   |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| EXTENT OF SPONSORSHIP:  |                           |                                   |                         | EXTENT OF SPONSORSHIP: |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 14. ANY STRUCTURAL ALTERATIONS CONTEMPLATED?  |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |
| 15. ANY DEMOLITION EXPOSURE CONTEMPLATED?   |                           | N                                 |                         |                        |                         |               |                     |               |                     |            |         |            |         |  |  |  |  |  |  |  |  |                        |  |  |  |                        |  |  |  |  |

**GENERAL INFORMATION (continued)**

| EXPLAIN ALL "YES" RESPONSES (For all past or present operations)   |   |            |   | Y/N |
|--|---|------------|---|-----|
| 16. HAS APPLICANT BEEN ACTIVE IN OR IS CURRENTLY ACTIVE IN JOINT VENTURES?   |   |            |   | N   |
| 17. DO YOU LEASE EMPLOYEES TO OR FROM OTHER EMPLOYERS?   |   |            |   | N   |
| LEASE TO   | WORKERS COMPENSATION COVERAGE CARRIED (Y/N) | LEASE FROM | WORKERS COMPENSATION COVERAGE CARRIED (Y/N) |     |
|  |   |            |   |     |
| 18. IS THERE A LABOR INTERCHANGE WITH ANY OTHER BUSINESS OR SUBSIDIARIES?  |   |            |   | N   |
| 19. ARE DAY CARE FACILITIES OPERATED OR CONTROLLED?  |   |            |   | N   |
| 20. HAVE ANY CRIMES OCCURRED OR BEEN ATTEMPTED ON YOUR PREMISES WITHIN THE LAST THREE (3) YEARS?                       |   |            |   | N   |
| 21. IS THERE A FORMAL, WRITTEN SAFETY AND SECURITY POLICY IN EFFECT?   |   |            |   | Y   |
| 22. DOES THE BUSINESSES' PROMOTIONAL LITERATURE MAKE ANY REPRESENTATIONS ABOUT THE SAFETY OR SECURITY OF THE PREMISES? |   |            |   | N   |

**REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

|  |
|--|
|  |
|--|

**SIGNATURE**

**Applicable in AL, AR, DC, LA, MD, NM, RI and WV:** Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for Insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD Only.

**Applicable in CO:** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include Imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**Applicable in FL and OK:** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)\*. \*Applies in FL Only.

**Applicable in KS:** Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

**Applicable in KY, NY, OH and PA:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)\*. \*Applies in NY Only.


**Applicable in ME, TN, VA and WA:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines and denial of insurance benefits. \*Applies in ME Only.

**Applicable in NJ:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**Applicable in OR:** Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Applicable in PR:** Any person who knowingly and with the intention of defrauding presents false information in an Insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

|  |  |  |
|--|--|--|
| PRODUCER'S SIGNATURE<br> | PRODUCER'S NAME (Please Print)<br><b>Albert Betz, CIC, ACI</b> | STATE PRODUCER LICENSE NO<br>(Required in Florida)<br><b>9600840</b> |
| APPLICANT'S SIGNATURE  | DATE   | NATIONAL PRODUCER NUMBER   |

\* Code MISC; Description Owned Watercraft (boats exceeding 100 horsepower)

\* Code BLAI; Description Blanket Additional Insured



AGENCY CUSTOMER ID: **PASSCHR-10**

**HGERALD**

## EQUIPMENT FLOATER SECTION

DATE (MM/DD/YYYY)  
**03/09/2026**

|   |                                     |  |                         |
|---|-------------------------------------|--|-------------------------|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |                                     | CARRIER<br><b>Special Risk Insurance</b>   | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER                                       | EFFECTIVE DATE<br><b>04/10/2026</b> | APPLICANT / FIRST NAMED INSURED<br><b>City of Pass Christian Fire &amp; Rescue</b> |                         |

|  |   |
|--|---|
| <b>TERRITORY OF OPERATION</b><br>Mississippi | <b>TYPE OF OPERATION</b><br>Fire Department |
|--|---|

**COVERAGE / DEDUCTIBLE**  
 Scheduled;  
 All Risks;  
 Replacement Cost; , Deductible: 250

| EQUIPMENT STORAGE |                |               |         | UNSCHEDULED EQUIPMENT |             |              |                   |         |
|-------------------|----------------|---------------|---------|-----------------------|-------------|--------------|-------------------|---------|
| Loc. #            | MO. IN STORAGE | MAXIMUM VALUE |         | TYPE OF SECURITY      | DESCRIPTION | MAXIMUM ITEM | AMT. OF INSURANCE | % COINS |
|                   |                | IN BUILDING   | OUTSIDE |                       |             |              |                   |         |
|                   |                | \$            | \$      |                       |             |              |                   |         |
|                   |                | \$            | \$      |                       |             |              |                   |         |
|                   |                | \$            | \$      |                       |             |              |                   |         |

**ADDITIONAL INTEREST / CERTIFICATE RECIPIENTS**  **ACORD 45 Attached**

|                          |            |       |                  |              |                      |                         |           |
|--------------------------|------------|-------|------------------|--------------|----------------------|-------------------------|-----------|
| <input type="checkbox"/> | INTEREST   | RANK: | NAME AND ADDRESS | REFERENCE #: | CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |           |
| <input type="checkbox"/> | LOSS PAYEE |       |                  |              |                      | LOCATION:               | BUILDING: |
| <input type="checkbox"/> | LIENHOLDER |       |                  |              |                      | SCHEDULED ITEM NUMBER:  |           |
|                          |            |       |                  |              |                      | OTHER                   |           |
| ITEM DESCRIPTION:        |            |       |                  |              |                      |                         |           |

|                          |            |       |                  |              |                      |                         |           |
|--------------------------|------------|-------|------------------|--------------|----------------------|-------------------------|-----------|
| <input type="checkbox"/> | INTEREST   | RANK: | NAME AND ADDRESS | REFERENCE #: | CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |           |
| <input type="checkbox"/> | LOSS PAYEE |       |                  |              |                      | LOCATION:               | BUILDING: |
| <input type="checkbox"/> | LIENHOLDER |       |                  |              |                      | SCHEDULED ITEM NUMBER:  |           |
|                          |            |       |                  |              |                      | OTHER                   |           |
| ITEM DESCRIPTION:        |            |       |                  |              |                      |                         |           |

|                          |            |       |                  |              |                      |                         |           |
|--------------------------|------------|-------|------------------|--------------|----------------------|-------------------------|-----------|
| <input type="checkbox"/> | INTEREST   | RANK: | NAME AND ADDRESS | REFERENCE #: | CERTIFICATE REQUIRED | INTEREST IN ITEM NUMBER |           |
| <input type="checkbox"/> | LOSS PAYEE |       |                  |              |                      | LOCATION:               | BUILDING: |
| <input type="checkbox"/> | LIENHOLDER |       |                  |              |                      | SCHEDULED ITEM NUMBER:  |           |
|                          |            |       |                  |              |                      | OTHER                   |           |
| ITEM DESCRIPTION:        |            |       |                  |              |                      |                         |           |

**GENERAL INFORMATION**

|  |          |
|--|----------|
| EXPLAIN ALL "YES" RESPONSES  | Y / N    |
| 1. EQUIPMENT RENTED, LOANED TO / FROM OTHERS WITH / WITHOUT OPERATORS? |          |
| 2. IS APPLICANT OPERATING EQUIPMENT NOT LISTED HERE?                   |          |
| 3. PROPERTY USED UNDERGROUND?  | <b>N</b> |
| 4. ANY WORK DONE AFLOAT?   | <b>N</b> |

**SCHEDULED EQUIPMENT**

% COINSURANCE

AGENCY CUSTOMER ID: **PASSCHR-10**

**HGERALD**

| # | TYPE         | DESCRIPTION                     | ID # / SERIAL NO. | NEW / USED | DATE PURCHASED      |
|---|--------------|---------------------------------|-------------------|------------|---------------------|
| 1 |              | 23 ft Open Runabout- Boat       | TJZ2R103J910      | New        | 07/20/2010          |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   | Triton       |                                 | 2010              |            | \$ 39,191           |
| 2 |              | Motor for 2010 Triton           | 342208            |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   | Suzuki       | DF250                           | 2023              |            | \$ 30,000           |
| 3 |              | Misc Equipment attached to boat |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$ 4,000            |
| 4 |              | Utility RTV Tractor             | A5KA1CGACHG047718 | New        | 09/22/2017          |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   | Kubota       | RTV500-H                        | 2017              |            | \$ 11,365           |
| 5 |              | Generator                       | 3001979624        |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   | Generac      |                                 |                   |            | \$ 26,004           |
| 6 |              | 9.8 Outboard                    | 028071XF          |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   | Nissan       |                                 |                   |            | \$ 2,000            |
| 7 |              | Aluminum Boat Hull              | KJG43A761607      |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$ 2,000            |
| 8 |              | 8.78 oz Drone                   | 1581FYC2B30021E2A |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              | DJIMT3PD                        |                   |            | \$ 615              |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |
|   |              |                                 |                   |            |                     |
|   | MANUFACTURER | MODEL                           | MODEL YEAR        | CAPACITY   | AMOUNT OF INSURANCE |
|   |              |                                 |                   |            | \$                  |

**SIGNATURE**

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|  |  |  |
|--|--|--|
| PRODUCER'S SIGNATURE<br> | PRODUCER'S NAME (Please Print)<br><b>Albert Betz, CIC, ACI</b> | STATE PRODUCER LICENSE NO<br>(Required in Florida)<br><b>9600840</b> |
| APPLICANT'S SIGNATURE  | DATE   | NATIONAL PRODUCER NUMBER   |



AGENCY CUSTOMER ID: PASSCHR-10

HGERALD

**BUSINESS AUTO SECTION**DATE (MM/DD/YYYY)  
03/09/2026

|   |                                     |   |  |                         |
|---|-------------------------------------|---|--|-------------------------|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |                                     | CARRIER<br><b>Special Risk Insurance</b>                            |  | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER                                       | EFFECTIVE DATE<br><b>04/10/2026</b> | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |  |                         |

**COVERAGES / LIMITS****USE ACORD 137 FOR YOUR STATE TO PROVIDE COVERAGES / LIMITS INFORMATION****DRIVER INFORMATION**     **ACORD 163 attached for additional drivers**

LIST ALL DRIVERS, INCLUDING FAMILY MEMBERS THAT WILL DRIVE COMPANY VEHICLES, AND EMPLOYEES WHO DRIVE OWN VEHICLES ON COMPANY BUSINESS.

| DRIVER # | NAME (Include address, if required)                              | SEX | MAR STAT | DATE OF BIRTH | YRS EXP | YEAR LIC | DRIVERS LICENSE NUMBER/<br>SOCIAL SECURITY NUMBER | STATE LIC | DATE HIRE | BROADEN<br>NO-FAULT | DOC | USE<br>VEH # | %<br>USE |
|----------|--|-----|----------|---------------|---------|----------|---|-----------|-----------|---------------------|-----|--------------|----------|
| 1        | Aden A Purchner  | M   | U        | 03/30/2004    |         |          | 117908077   | MS        |           |                     |     |              |          |
| 2        | Alberto Moroyoqui  | M   | U        | 11/02/1997    |         |          | 802808869   | MS        |           |                     |     |              |          |
| 3        | Austin Graham  | M   | U        | 02/13/1983    |         |          | 801782676   | MS        |           |                     |     |              |          |
| 4        | Bradley Polk<br>Part Time Fire Dept.                             | M   | U        | 06/05/1993    |         |          | 802306821   | MS        |           |                     |     |              |          |
| 5        | Brandon Saffler  | M   | U        | 01/20/2006    |         |          | 869358238   | MS        |           |                     |     |              |          |
| 6        | Brooks Hoda  | M   | U        | 05/04/1995    |         |          | 802280843   | MS        |           |                     |     |              |          |
| 7        | Camron Ladner  | U   | U        | 11/14/1991    |         |          | 800755102   | MS        |           |                     |     |              |          |
| 8        | Charles Dean Toler<br>29 Pine Bark Cove<br>Hattiesburg, MS 39401 | M   | U        | 10/01/1996    |         |          | 802421172   | MS        |           |                     |     |              |          |
| 9        | Chris Boswell  | M   | U        | 01/09/1989    |         |          | 800825788   | MS        |           |                     |     |              |          |
| 10       | Corbin Adams   | M   | U        | 08/18/2005    |         |          | 972353707   | MS        |           |                     |     |              |          |
| 11       | Darren Koenenn   | M   | U        | 09/08/1967    |         |          | 800762791   | MS        |           |                     |     |              |          |
| 12       | Darren Martin McCaleb<br>13407 John Lee Road<br>Biloxi, MS 39532 | M   | U        | 09/24/1984    |         |          | 800862777   | MS        |           |                     |     |              |          |

**GENERAL INFORMATION**

|   |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
|---|---------------------|--|--|------|-------|-------------|---------------------|--|------|--|--|--|-------|
| EXPLAIN ALL "YES" RESPONSES   |                     |  |  |      |       |             |                     |  |      |  |  |  | Y / N |
| 1. WITH THE EXCEPTION OF ANY ENCUMBRANCES, ARE ANY VEHICLES FOR WHICH INSURANCE IS REQUESTED NOT SOLELY OWNED BY AND REGISTERED TO THE APPLICANT? |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| VEH #   | NAME OF OTHER OWNER |  |  |      |       | VEH #       | NAME OF OTHER OWNER |  |      |  |  |  |       |
| 2. DO OVER 50% OF THE EMPLOYEES USE THEIR AUTOS IN THE BUSINESS?  |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| 3. IS THERE A VEHICLE MAINTENANCE PROGRAM IN OPERATION?   |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| 4. ARE ANY VEHICLES LEASED TO OTHERS?   |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| 5. ANY CAR MODIFIED / SPECIAL EQUIPMENT? (Include customized vans / pickups)  |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| VEH #   | DESCRIPTION         |  |  | COST | VEH # | DESCRIPTION |                     |  | COST |  |  |  |       |
|   |                     |  |  | \$   |       |             |                     |  | \$   |  |  |  |       |
| 6. ARE ICC, PUC OR OTHER FILINGS REQUIRED? (If "YES", attach ACORD 194)   |                     |  |  |      |       |             |                     |  |      |  |  |  |       |
| 7. DO OPERATIONS INVOLVE TRANSPORTING HAZARDOUS MATERIAL?   |                     |  |  |      |       |             |                     |  |      |  |  |  |       |

ACORD 127 (2010/05)

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**GENERAL INFORMATION (continued)**

AGENCY CUSTOMER ID: **PASSCHR-10**

**HGERALD**

| EXPLAIN ALL "YES" RESPONSES  | Y/N  |                   |                     |                     |           |  |  |  |  |  |  |
|--|--|-------------------|---------------------|---------------------|-----------|--|--|--|--|--|--|
| 8. ANY HOLD HARMLESS AGREEMENTS?   |  |                   |                     |                     |           |  |  |  |  |  |  |
| 9. ANY VEHICLES USED BY FAMILY MEMBERS? IF SO, IDENTIFY.   |  |                   |                     |                     |           |  |  |  |  |  |  |
| 10. DOES THE APPLICANT OBTAIN MVR VERIFICATIONS?   |  |                   |                     |                     |           |  |  |  |  |  |  |
| 11. DOES THE APPLICANT HAVE A SPECIFIC DRIVER RECRUITING METHOD?   |  |                   |                     |                     |           |  |  |  |  |  |  |
| 12. ARE ANY DRIVERS NOT COVERED BY WORKERS COMPENSATION?   |  |                   |                     |                     |           |  |  |  |  |  |  |
| 13. ANY VEHICLES OWNED BUT NOT SCHEDULED ON THIS APPLICATION?  |  |                   |                     |                     |           |  |  |  |  |  |  |
| 14. ANY DRIVERS WITH CONVICTIONS FOR MOVING TRAFFIC VIOLATIONS?<br><b>APPLICABLE ONLY IN KANSAS: UNDER KANSAS LAW, THE FOLLOWING TRAFFIC VIOLATIONS ARE NOT REQUIRED TO BE REPORTED TO INSURERS:</b><br>1. A speeding violation of up to six (6) mph that occurs in an area with a maximum posted speed limit from 30 mph through 54 mph, or<br>2. A speeding violation of up to ten (10) mph that occurs in an area with a maximum posted speed limit from 55 mph through 70 mph. |  |                   |                     |                     |           |  |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;">DRV #</th> <th style="width:20%;">DATE (MM/DD/YYYY)</th> <th style="width:35%;">TYPE</th> <th style="width:20%;">PLACE (CITY, STATE)</th> <th style="width:20%;"># YRS REV</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>  | DRV #                                      | DATE (MM/DD/YYYY) | TYPE                | PLACE (CITY, STATE) | # YRS REV |  |  |  |  |  |  |
| DRV #  | DATE (MM/DD/YYYY)                          | TYPE              | PLACE (CITY, STATE) | # YRS REV           |           |  |  |  |  |  |  |
|  |  |                   |                     |                     |           |  |  |  |  |  |  |
| 15. HAS AGENT INSPECTED VEHICLES?  |  |                   |                     |                     |           |  |  |  |  |  |  |
| 16. ARE ALL VEHICLES TO BE INCLUDED IN THIS POLICY PART OF A FLEET?  |  |                   |                     |                     |           |  |  |  |  |  |  |
| DESCRIPTION OF GARAGE / STORAGE LOCATIONS  | MAXIMUM DOLLAR VALUE SUBJECT TO LOSS<br>\$ |                   |                     |                     |           |  |  |  |  |  |  |

| ADDITIONAL INTEREST / CERTIFICATE RECIPIENT  | ACORD 45 attached for additional names  |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
|--|---|--|---|------------------------------|-----------------|-------------------|--|---------------------------|--|--|--|----------|--|-----------|--|--|--|--|--|
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">                     INTEREST<br/> <input type="checkbox"/> ADDITIONAL INSURED<br/> <input type="checkbox"/> EMPLOYEE AS LESSOR<br/> <input type="checkbox"/> LIENHOLDER<br/> <input type="checkbox"/> </td> <td style="width:15%;"> <input type="checkbox"/> LOSS PAYEE<br/> <input type="checkbox"/> OWNER<br/> <input type="checkbox"/> REGISTRANT<br/> <input type="checkbox"/> </td> </tr> </table> | INTEREST<br><input type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> EMPLOYEE AS LESSOR<br><input type="checkbox"/> LIENHOLDER<br><input type="checkbox"/> | <input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> OWNER<br><input type="checkbox"/> REGISTRANT<br><input type="checkbox"/> | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">NAME AND ADDRESS RANK: _____</td> <td style="width:10%;">EVIDENCE: _____</td> <td style="width:10%;">CERTIFICATE _____</td> <td style="width:40%;"></td> </tr> <tr> <td colspan="4" style="text-align: right;">REFERENCE / LOAN #: _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">VEHICLE:</td> <td colspan="2" style="text-align: right;">LOCATION:</td> </tr> <tr> <td colspan="4" style="height: 40px;"></td> </tr> </table> | NAME AND ADDRESS RANK: _____ | EVIDENCE: _____ | CERTIFICATE _____ |  | REFERENCE / LOAN #: _____ |  |  |  | VEHICLE: |  | LOCATION: |  |  |  |  |  |
| INTEREST<br><input type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> EMPLOYEE AS LESSOR<br><input type="checkbox"/> LIENHOLDER<br><input type="checkbox"/>  | <input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> OWNER<br><input type="checkbox"/> REGISTRANT<br><input type="checkbox"/>                                  |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| NAME AND ADDRESS RANK: _____   | EVIDENCE: _____   | CERTIFICATE _____  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| REFERENCE / LOAN #: _____  |   |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| VEHICLE:   |   | LOCATION:  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
|  |   |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
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| INTEREST<br><input type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> EMPLOYEE AS LESSOR<br><input type="checkbox"/> LIENHOLDER<br><input type="checkbox"/>  | <input type="checkbox"/> LOSS PAYEE<br><input type="checkbox"/> OWNER<br><input type="checkbox"/> REGISTRANT<br><input type="checkbox"/>                                  |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| NAME AND ADDRESS RANK: _____   | EVIDENCE: _____   | CERTIFICATE _____  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| REFERENCE / LOAN #: _____  |   |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
| VEHICLE:   |   | LOCATION:  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |
|  |   |  |   |                              |                 |                   |  |                           |  |  |  |          |  |           |  |  |  |  |  |

**REMARKS (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**

**Notes**

MVRs are checked at pre-hire and annually.

Emergency vehicle driver/operator training program  
 Driver training program

VEHICLE DESCRIPTION  ACORD 129 attached for additional vehicles

|                        |                         |                                  |                          |                |                |                |              |
|------------------------|-------------------------|----------------------------------|--------------------------|----------------|----------------|----------------|--------------|
| VEH #<br><b>1</b>      | YEAR<br><b>2009</b>     | MAKE: <b>International</b>       | BODY TYPE: <b>PUMPER</b> | VEHICLE TYPE   | SYM / AGE      | COMP / OTC SYM | COLL SYM     |
| MODEL: <b>4000</b>     |                         | V.I.N.: <b>1HTMKAZR29H155699</b> |                          | PP             | SPEC           | COML           |              |
| GARAGING ADDRESS       | STREET (Required in KY) |                                  | CITY                     | COUNTY         |                | STATE          | ZIP          |
|                        |                         | <b>Pass Christian</b>            |                          |                |                | <b>MS</b>      | <b>39571</b> |
| LIC STATE              | TERR                    | GVW / GCW                        | CLASS                    | SIC            | FACTOR         | SEAT CP        | RADIUS       |
| <b>MS</b>              | <b>122</b>              |                                  | <b>790900</b>            |                | <b>0.00</b>    |                |              |
| USE                    | COMM'L                  | FOR HIRE                         | CHECK COVERAGES          | ADD'L NO-FAULT | UNDRINS MOTOR  | F              | LSP          |
| PLEASURE               | RETAIL                  |                                  | LIAB                     | MED PAY        | TOWING & LABOR | FT             | COMP/OTC     |
| FARM                   | SERVICE                 |                                  | NO-FAULT                 | UNINS MOTOR    | SPEC C OF L    | FTW            | COLL         |
| RENT REIMB             | DEDUCTIBLES             | ACV                              | COMP/OTC                 | SPEC C OF L    | ST AMT         |                |              |
| FG                     | X AA                    |                                  | X                        |                | \$             |                |              |
|                        |                         |                                  |                          |                | <b>181,554</b> |                | <b>1,000</b> |
| DRIVE TO WORK / SCHOOL | < 15 MILES              | 15 MILES +                       | NET VEH DR/CR:           | TOTAL PREM: \$ |                |                |              |
|                        |                         |                                  |                          |                |                |                |              |
| VEH #<br><b>2</b>      | YEAR<br><b>2017</b>     | MAKE: <b>Ford</b>                | BODY TYPE: <b>Truck</b>  | VEHICLE TYPE   | SYM / AGE      | COMP / OTC SYM | COLL SYM     |
| MODEL: <b>F250</b>     |                         | V.I.N.: <b>1FT7W2B68HEC57500</b> |                          | PP             | SPEC           | COML           |              |
| GARAGING ADDRESS       | STREET (Required in KY) |                                  | CITY                     | COUNTY         |                | STATE          | ZIP          |
|                        |                         | <b>Pass Christian</b>            |                          |                |                | <b>MS</b>      | <b>39571</b> |
| LIC STATE              | TERR                    | GVW / GCW                        | CLASS                    | SIC            | FACTOR         | SEAT CP        | RADIUS       |
| <b>MS</b>              | <b>122</b>              |                                  | <b>790800</b>            |                | <b>0.00</b>    |                |              |
| USE                    | COMM'L                  | FOR HIRE                         | CHECK COVERAGES          | ADD'L NO-FAULT | UNDRINS MOTOR  | F              | LSP          |
| PLEASURE               | RETAIL                  |                                  | LIAB                     | MED PAY        | TOWING & LABOR | FT             | COMP/OTC     |
| FARM                   | SERVICE                 |                                  | NO-FAULT                 | UNINS MOTOR    | SPEC C OF L    | FTW            | COLL         |
| RENT REIMB             | DEDUCTIBLES             | ACV                              | COMP/OTC                 | SPEC C OF L    | ST AMT         |                |              |
| FG                     | X AA                    |                                  | X                        |                | \$             |                |              |
|                        |                         |                                  |                          |                | <b>1,000</b>   |                | <b>1,000</b> |
| DRIVE TO WORK / SCHOOL | < 15 MILES              | 15 MILES +                       | NET VEH DR/CR:           | TOTAL PREM: \$ |                |                |              |
|                        |                         |                                  |                          |                |                |                |              |
| VEH #<br><b>3</b>      | YEAR<br><b>2017</b>     | MAKE: <b>Ford</b>                | BODY TYPE: <b>Truck</b>  | VEHICLE TYPE   | SYM / AGE      | COMP / OTC SYM | COLL SYM     |
| MODEL: <b>F250</b>     |                         | V.I.N.: <b>1FT7W2B67HEE78683</b> |                          | PP             | SPEC           | COML           |              |
| GARAGING ADDRESS       | STREET (Required in KY) |                                  | CITY                     | COUNTY         |                | STATE          | ZIP          |
|                        |                         | <b>Pass Christian</b>            |                          |                |                | <b>MS</b>      | <b>39571</b> |
| LIC STATE              | TERR                    | GVW / GCW                        | CLASS                    | SIC            | FACTOR         | SEAT CP        | RADIUS       |
| <b>MS</b>              | <b>122</b>              |                                  | <b>790800</b>            |                | <b>0.00</b>    |                |              |
| USE                    | COMM'L                  | FOR HIRE                         | CHECK COVERAGES          | ADD'L NO-FAULT | UNDRINS MOTOR  | F              | LSP          |
| PLEASURE               | RETAIL                  |                                  | LIAB                     | MED PAY        | TOWING & LABOR | FT             | COMP/OTC     |
| FARM                   | SERVICE                 |                                  | NO-FAULT                 | UNINS MOTOR    | SPEC C OF L    | FTW            | COLL         |
| RENT REIMB             | DEDUCTIBLES             | ACV                              | COMP/OTC                 | SPEC C OF L    | ST AMT         |                |              |
| FG                     | X AA                    |                                  | X                        |                | \$             |                |              |
|                        |                         |                                  |                          |                | <b>1,000</b>   |                | <b>1,000</b> |
| DRIVE TO WORK / SCHOOL | < 15 MILES              | 15 MILES +                       | NET VEH DR/CR:           | TOTAL PREM: \$ |                |                |              |
|                        |                         |                                  |                          |                |                |                |              |
| VEH #<br><b>4</b>      | YEAR<br><b>2020</b>     | MAKE: <b>Custom</b>              | BODY TYPE: <b>PUMPER</b> | VEHICLE TYPE   | SYM / AGE      | COMP / OTC SYM | COLL SYM     |
| MODEL: <b>E-One</b>    |                         | V.I.N.: <b>4EN6AAA87L1003011</b> |                          | PP             | SPEC           | COML           |              |
| GARAGING ADDRESS       | STREET (Required in KY) |                                  | CITY                     | COUNTY         |                | STATE          | ZIP          |
|                        |                         | <b>Pass Christian</b>            |                          |                |                | <b>MS</b>      | <b>39571</b> |
| LIC STATE              | TERR                    | GVW / GCW                        | CLASS                    | SIC            | FACTOR         | SEAT CP        | RADIUS       |
| <b>MS</b>              | <b>122</b>              |                                  | <b>790900</b>            |                | <b>0.00</b>    |                |              |
| USE                    | COMM'L                  | FOR HIRE                         | CHECK COVERAGES          | ADD'L NO-FAULT | UNDRINS MOTOR  | F              | LSP          |
| PLEASURE               | RETAIL                  |                                  | LIAB                     | MED PAY        | TOWING & LABOR | FT             | COMP/OTC     |
| FARM                   | SERVICE                 |                                  | NO-FAULT                 | UNINS MOTOR    | SPEC C OF L    | FTW            | COLL         |
| RENT REIMB             | DEDUCTIBLES             | ACV                              | COMP/OTC                 | SPEC C OF L    | ST AMT         |                |              |
| FG                     | X AA                    |                                  | X                        |                | \$             |                |              |
|                        |                         |                                  |                          |                | <b>462,066</b> |                | <b>1,000</b> |
| DRIVE TO WORK / SCHOOL | < 15 MILES              | 15 MILES +                       | NET VEH DR/CR:           | TOTAL PREM: \$ |                |                |              |
|                        |                         |                                  |                          |                |                |                |              |


ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES.

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.

|  |  |   |
|--|--|---|
| PRODUCER'S SIGNATURE<br> | PRODUCER'S NAME (Please Print)<br><b>Albert Betz, CIC, ACI</b> | STATE PRODUCER LICENSE NO (Required in Florida)<br><b>9600840</b> |
| APPLICANT'S SIGNATURE  | DATE   | NATIONAL PRODUCER NUMBER  |



# MISSISSIPPI COMMERCIAL AUTO COVERAGES/LIMITS SECTION

PASSCHR-10 HGERALD

DATE (MM/DD/YYYY)  
03/09/2026

|   |  |
|---|--|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> | APPLICANT (First Named Insured)<br><b>City of Pass Christian Fire &amp; Rescue</b> |
|---|--|

**BUSINESS AUTO SECTION**

| COVERAGES   | COVERED AUTO SYMBOLS | LIMITS                    | COVERAGES                | COVERED AUTO SYMBOLS | LIMITS              |
|---|----------------------|---------------------------|--------------------------|----------------------|---------------------|
| LIABILITY   | 1 4 9                | CSL BI EA PER \$          |                          |                      |                     |
|   | 2 7                  | BI EACH ACCIDENT \$       |                          |                      |                     |
|   | 3 8                  | PROPERTY DAMAGE \$        |                          |                      |                     |
| <b>PHYSICAL DAMAGE</b>  |                      |                           |                          |                      |                     |
|   |                      |                           | TOWING & LABOR           | 3 7                  | \$                  |
|   |                      |                           | COMPREHENSIVE            | 2 4 X 8              |                     |
|   |                      |                           |                          | 3 X 7                |                     |
| MEDICAL PAYMENTS  | 2 4 8                | EACH PERSON \$            | SPECIFIED CAUSES OF LOSS | 2 4 8                | SCL FT LSP          |
|   | 3 7                  |                           |                          | 3 7                  | F FTW               |
| UNINSURED MOTORIST  | 2 6                  | CSL BI EA PER \$          | COLLISION                | 2 4 X 8              |                     |
|   | 3 7                  | BI EACH ACCIDENT \$       |                          | 3 X 7                |                     |
|   | 4                    | PROPERTY DAMAGE \$        |                          |                      |                     |
| HIRED/BORROWED LIABILITY  | YES STATES           | COST OF HIRE IF ANY BASIS | HIRED PHYSICAL DAMAGE    | STATES # DAYS # VEH  | COVERAGE/DEDUCTIBLE |
| NO  |                      | \$                        |                          |                      |                     |
| NON-OWNED LIABILITY   | YES STATES           | GROUP TYPE                |                          |                      | SPEC C OF L \$      |
|   | NO                   | NUMBER OF                 |                          |                      |                     |
|   |                      | EMPLOYEES                 |                          |                      |                     |
|   |                      | VOLUNTEERS                |                          |                      |                     |
|   |                      | PARTNERS                  |                          |                      |                     |
| COVERED AUTO SYMBOLS (1) ANY AUTO (2) ALL OWNED AUTOS (3) OWNED PRIVATE PASSENGER AUTOS (4) OWNED AUTOS OTHER THAN PRIVATE PASSENGER (5) ALL OWNED AUTOS WHICH REQUIRE NO-FAULT COVERAGE (6) OWNED AUTOS SUBJECT TO COMPULSORY U.M. LAW (7) AUTOS SPECIFIED ON SCHEDULE (8) HIRED AUTOS (9) NON-OWNED AUTOS |                      |                           |                          |                      |                     |

**TRUCKERS SECTION**

| COVERAGES   | COVERED AUTO SYMBOLS | LIMITS                    | PHYSICAL DAMAGE            |                     |            |                                |
|---|----------------------|---------------------------|----------------------------|---------------------|------------|--------------------------------|
| LIABILITY   | 41 46                | CSL BI EA PER \$          | COMPREHENSIVE              | 42 46               |            |                                |
|   | 42 47                | BI EACH ACCIDENT \$       |                            | 43 47               |            | \$                             |
|   | 43 50                | PROPERTY DAMAGE \$        |                            |                     |            |                                |
|   |                      |                           | SPECIFIED CAUSES OF LOSS   | 42 46               | SCL FT LSP | \$                             |
|   |                      |                           |                            | 43 47               | F FTW      |                                |
| MEDICAL PAYMENTS  | 42 46                | EACH PERSON \$            | COLLISION                  | 42 46               |            | \$                             |
|   | 43                   |                           |                            | 43 47               |            |                                |
| UNINSURED MOTORIST  | 42 46                | CSL BI EA PER \$          | TOWING & LABOR             | 46                  |            | \$                             |
|   | 43                   | BI EACH ACCIDENT \$       |                            |                     |            |                                |
|   | 45                   | PROPERTY DAMAGE \$        | <b>TRAILER INTERCHANGE</b> |                     |            |                                |
|   |                      |                           | COVERAGES                  | SYMBOL              | # TRAILERS | STATE # DAYS RADIUS DEDUCTIBLE |
|   |                      |                           | COMPREHENSIVE              | 48 49               |            |                                |
|   |                      |                           | SPECIFIED CAUSES OF LOSS   | 48 49               |            |                                |
|   |                      |                           | COLLISION                  | 48 49               |            | \$                             |
| NON-TRUCKERS HIRED/BORROWED   | YES STATES           | COST OF HIRE IF ANY BASIS | HIRED PHYSICAL DAMAGE      | STATES # DAYS # VEH |            |                                |
| NO  |                      | \$                        |                            |                     |            |                                |
| HIRED/BORROWED LIABILITY  | YES STATES           | COST OF HIRE IF ANY BASIS |                            |                     |            |                                |
| NO  |                      | \$                        |                            |                     |            |                                |
| NON-OWNED AUTO LIABILITY  | YES STATES           | GROUP TYPE                |                            |                     |            |                                |
|   | NO                   | NUMBER OF                 |                            |                     |            |                                |
|   |                      | EMPLOYEES                 |                            |                     |            |                                |
|   |                      | VOLUNTEERS                |                            |                     |            |                                |
|   |                      | PARTNERS                  |                            |                     |            |                                |
| OTHER   |                      |                           | OTHER                      |                     |            |                                |
| COVERED AUTO SYMBOLS (41) ANY AUTO (42) OWNED AUTOS ONLY (43) OWNED COMMERCIAL AUTOS ONLY (44) OWNED AUTOS SUBJECT TO NO-FAULT (45) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW (46) SPECIFICALLY DESCRIBED AUTOS (47) HIRED AUTOS ONLY (48) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT (49) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT (50) NON-OWNED AUTOS ONLY |                      |                           |                            |                     |            |                                |

**MOTOR CARRIER SECTION**

**PASSCHR-10**

**HGERALD**

| COVERAGES                   | COVERED AUTO SYMBOLS         |                             |                              | LIMITS                                |                                       | PHYSICAL DAMAGE             |                             |                              |                              |                              |            |  |  |
|-----------------------------|------------------------------|-----------------------------|------------------------------|---------------------------------------|---------------------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|------------|--|--|
|                             |                              |                             |                              |                                       |                                       | COVERAGES                   | COVERED AUTO SYMBOLS        | LIMITS                       | DEDUCTIBLE                   |                              |            |  |  |
| LIABILITY                   | <input type="checkbox"/> 61  | <input type="checkbox"/> 67 | <input type="checkbox"/> CSL | <input type="checkbox"/> BI EA PER \$ | COMPREHENSIVE                         | <input type="checkbox"/> 62 | <input type="checkbox"/> 67 |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> 62  | <input type="checkbox"/> 68 |                              | BI EACH ACCIDENT \$                   |                                       | <input type="checkbox"/> 63 | <input type="checkbox"/> 68 |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> 63  | <input type="checkbox"/> 71 |                              | PROPERTY DAMAGE \$                    |                                       | <input type="checkbox"/> 64 | <input type="checkbox"/> 68 |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> 64  |                             |                              |                                       |                                       | <input type="checkbox"/> 62 | <input type="checkbox"/> 67 |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       | SPECIFIED CAUSES OF LOSS              | <input type="checkbox"/> 63 | <input type="checkbox"/> 68 | <input type="checkbox"/> SCL | <input type="checkbox"/> FT  | <input type="checkbox"/> LSP |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 64 |                             | <input type="checkbox"/> F   | <input type="checkbox"/> FTW |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 62 | <input type="checkbox"/> 67 |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 63 | <input type="checkbox"/> 68 |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 64 |                             |                              |                              |                              |            |  |  |
| MEDICAL PAYMENTS            | <input type="checkbox"/> 62  | <input type="checkbox"/> 64 |                              | EACH PERSON \$                        |                                       | <input type="checkbox"/> 63 |                             |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> 63  | <input type="checkbox"/> 67 |                              |                                       |                                       | <input type="checkbox"/> 67 |                             |                              |                              |                              |            |  |  |
| UNINSURED MOTORIST          | <input type="checkbox"/> 62  | <input type="checkbox"/> 66 | <input type="checkbox"/> CSL | <input type="checkbox"/> BI EA PER \$ | TRAILER INTERCHANGE                   |                             |                             |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> 63  | <input type="checkbox"/> 67 |                              | BI EACH ACCIDENT \$                   | COVERAGES                             | SYMBOL                      | # TRAILERS                  | STATE                        | # DAYS                       | RADIUS                       | DEDUCTIBLE |  |  |
|                             | <input type="checkbox"/> 64  |                             |                              | PROPERTY DAMAGE \$                    | COMPREHENSIVE                         | <input type="checkbox"/> 69 |                             |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 70 |                             |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 69 |                             |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       | <input type="checkbox"/> 70 |                             |                              |                              |                              |            |  |  |
| NON-TRUCKERS HIRED/BORROWED | <input type="checkbox"/> YES | STATES                      |                              | COST OF HIRE                          | <input type="checkbox"/> IF ANY BASIS |                             |                             |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> NO  |                             |                              | \$                                    |                                       |                             |                             |                              |                              |                              |            |  |  |
| HIRED/BORROWED LIABILITY    | <input type="checkbox"/> YES | STATES                      |                              | COST OF HIRE                          | <input type="checkbox"/> IF ANY BASIS |                             | STATES                      | # DAYS                       | # VEH                        |                              |            |  |  |
|                             | <input type="checkbox"/> NO  |                             |                              | \$                                    |                                       |                             |                             |                              |                              |                              |            |  |  |
| NON-OWNED AUTO LIABILITY    | <input type="checkbox"/> YES | STATES                      |                              | GROUP TYPE                            | NUMBER OF                             |                             |                             |                              |                              |                              |            |  |  |
|                             | <input type="checkbox"/> NO  |                             |                              | <input type="checkbox"/> EMPLOYEES    |                                       |                             |                             |                              |                              |                              |            |  |  |
|                             |                              |                             |                              | <input type="checkbox"/> VOLUNTEERS   |                                       |                             |                             |                              |                              |                              |            |  |  |
|                             |                              |                             |                              | <input type="checkbox"/> PARTNERS     |                                       |                             |                             |                              |                              |                              |            |  |  |
| OTHER                       |                              |                             |                              |                                       |                                       |                             | OTHER                       |                              |                              |                              |            |  |  |
|                             |                              |                             |                              |                                       |                                       |                             |                             |                              |                              |                              |            |  |  |

COVERED AUTO SYMBOLS (61) ANY AUTO (62) OWNED AUTOS ONLY (63) OWNED PRIVATE PASS AUTOS ONLY (64) OWNED COMMERCIAL AUTOS ONLY (65) OWNED AUTOS SUBJECT TO NO-FAULT (66) OWNED AUTOS SUBJECT TO A COMPULSORY UNINSURED MOTORIST LAW (67) SPECIFICALLY DESCRIBED AUTOS (68) HIRED AUTOS ONLY (69) TRAILERS IN YOUR POSSESSION UNDER A TRAILER INTERCHANGE AGREEMENT (70) YOUR TRAILERS IN THE POSSESSION OF ANOTHER TRUCKER UNDER A TRAILER INTERCHANGE AGREEMENT (71) NON-OWNED AUTOS ONLY

**ENDORSEMENTS**

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU, IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

I UNDERSTAND AND ACKNOWLEDGE THAT UNINSURED MOTORISTS (UM) BODILY INJURY (BI) AND PROPERTY DAMAGE (PD) COVERAGES HAVE BEEN EXPLAINED TO ME. I ALSO UNDERSTAND THAT STATE LAW ALLOWS ME TO PURCHASE UM LIMITS EQUAL TO MY LIABILITY LIMITS, UM LIMITS LOWER THAN MY LIABILITY LIMITS, TO REJECT UM PD ONLY, OR TO REJECT UM BI AND UM PD COVERAGES ENTIRELY.

1. I APPLY FOR UM BI AND PD LIMITS INDICATED IN THIS APPLICATION. \_\_\_\_\_ (INITIALS)

2. I REJECT UM PD COVERAGE IN ITS ENTIRETY. \_\_\_\_\_ (INITIALS)

3. I REJECT UM COVERAGE IN ITS ENTIRETY. \_\_\_\_\_ (INITIALS)

ALSO, IF I HAVE TEN (10) OR MORE COVERED MOTOR VEHICLES AND I HAVE SELECTED "NON-STACKABLE" UM COVERAGE, I HAVE COMPLETED THE STATE SUPPLEMENT.

I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE WILL APPLY TO ALL FUTURE POLICY RENEWALS, CONTINUATIONS AND changes unless I notify you otherwise in writing.

|                       |      |                      |                          |
|-----------------------|------|----------------------|--------------------------|
| APPLICANT'S SIGNATURE | DATE | PRODUCER'S SIGNATURE | NATIONAL PRODUCER NUMBER |
|                       |      | <i>A</i>             |                          |



AGENCY CUSTOMER ID: PASSCHR-10

HGERALD

## VEHICLE SCHEDULE

DATE (MM/DD/YYYY)  
03/09/2026

|   |  |  |   |                         |
|---|--|--|---|-------------------------|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |  | CARRIER<br><b>Special Risk Insurance</b> |   | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER                                       |  | EFFECTIVE DATE<br><b>04/10/2026</b>      | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |                         |

## VEHICLE DESCRIPTION

|                         |                     |                       |                               |                             |                              |         |           |                   |                |          |
|-------------------------|---------------------|-----------------------|-------------------------------|-----------------------------|------------------------------|---------|-----------|-------------------|----------------|----------|
| VEH #<br><b>5</b>       | YEAR<br><b>2020</b> | MAKE: <b>Typhoon</b>  | BODY TYPE: <b>PUMPER</b>      | VEHICLE TYPE                |                              |         | SYM / AGE | COMP / OTC SYM    | COLL SYM       |          |
| GARAGING ADDRESS        |                     | CITY                  |                               | COUNTY                      |                              |         | STATE     | ZIP               |                |          |
| STREET (Required in KY) |                     | <b>Pass Christian</b> |                               |                             |                              |         | <b>MS</b> | <b>39571</b>      |                |          |
| LIC STATE<br><b>MS</b>  | TERR<br><b>122</b>  | GVW / GCW             | CLASS                         | SIC                         | FACTOR                       | SEAT CP | RADIUS    | FARTHEST TERMINAL |                |          |
| USE                     |                     | FOR HIRE              | CHECK COVERAGES               | ADD'L NO-FAULT              | UNDRINS MOTOR TOWING & LABOR | F       | LSP       | RENT REIMB        | DEDUCTIBLES    |          |
| PLEASURE                | RETAIL              |                       | LIAB                          | MED PAY                     | UNINS MOTOR                  | FT      | COMP/OTC  | FG                | AA             |          |
| FARM                    | SERVICE             |                       | NO-FAULT                      |                             |                              | FTW     | X         |                   |                |          |
| DRIVE TO WORK / SCHOOL  |                     | < 15 MILES            | 15 MILES +                    | NET VEH DR/CR:              | TOTAL PREM: \$               |         |           |                   |                |          |
| VEH #<br><b>6</b>       |                     | YEAR<br><b>1990</b>   | MAKE: <b>American General</b> | BODY TYPE: <b>CARGO TRK</b> | VEHICLE TYPE                 |         |           | SYM / AGE         | COMP / OTC SYM | COLL SYM |
| GARAGING ADDRESS        |                     | CITY                  |                               | COUNTY                      |                              |         | STATE     | ZIP               |                |          |
| STREET (Required in KY) |                     | <b>Pass Christian</b> |                               |                             |                              |         | <b>MS</b> | <b>39571</b>      |                |          |
| LIC STATE<br><b>MS</b>  | TERR<br><b>122</b>  | GVW / GCW             | CLASS                         | SIC                         | FACTOR                       | SEAT CP | RADIUS    | FARTHEST TERMINAL |                |          |
| USE                     |                     | FOR HIRE              | CHECK COVERAGES               | ADD'L NO-FAULT              | UNDRINS MOTOR TOWING & LABOR | F       | LSP       | RENT REIMB        | DEDUCTIBLES    |          |
| PLEASURE                | RETAIL              |                       | LIAB                          | MED PAY                     | UNINS MOTOR                  | FT      | COMP/OTC  | FG                | AA             |          |
| FARM                    | SERVICE             |                       | NO-FAULT                      |                             |                              | FTW     | X         |                   |                |          |
| DRIVE TO WORK / SCHOOL  |                     | < 15 MILES            | 15 MILES +                    | NET VEH DR/CR:              | TOTAL PREM: \$               |         |           |                   |                |          |
| VEH #<br><b>7</b>       |                     | YEAR<br><b>2018</b>   | MAKE: <b>Freedom</b>          | BODY TYPE: <b>TRL/GEN</b>   | VEHICLE TYPE                 |         |           | SYM / AGE         | COMP / OTC SYM | COLL SYM |
| GARAGING ADDRESS        |                     | CITY                  |                               | COUNTY                      |                              |         | STATE     | ZIP               |                |          |
| STREET (Required in KY) |                     | <b>Pass Christian</b> |                               |                             |                              |         | <b>MS</b> | <b>39571</b>      |                |          |
| LIC STATE<br><b>MS</b>  | TERR<br><b>122</b>  | GVW / GCW             | CLASS                         | SIC                         | FACTOR                       | SEAT CP | RADIUS    | FARTHEST TERMINAL |                |          |
| USE                     |                     | FOR HIRE              | CHECK COVERAGES               | ADD'L NO-FAULT              | UNDRINS MOTOR TOWING & LABOR | F       | LSP       | RENT REIMB        | DEDUCTIBLES    |          |
| PLEASURE                | RETAIL              |                       | LIAB                          | MED PAY                     | UNINS MOTOR                  | FT      | COMP/OTC  | FG                | AA             |          |
| FARM                    | SERVICE             |                       | NO-FAULT                      |                             |                              | FTW     | X         |                   |                |          |
| DRIVE TO WORK / SCHOOL  |                     | < 15 MILES            | 15 MILES +                    | NET VEH DR/CR:              | TOTAL PREM: \$               |         |           |                   |                |          |
| VEH #<br><b>8</b>       |                     | YEAR<br><b>2022</b>   | MAKE: <b>Ford</b>             | BODY TYPE: <b>PU TRUCK</b>  | VEHICLE TYPE                 |         |           | SYM / AGE         | COMP / OTC SYM | COLL SYM |
| GARAGING ADDRESS        |                     | CITY                  |                               | COUNTY                      |                              |         | STATE     | ZIP               |                |          |
| STREET (Required in KY) |                     | <b>Pass Christian</b> |                               |                             |                              |         | <b>MS</b> | <b>39571</b>      |                |          |
| LIC STATE<br><b>MS</b>  | TERR<br><b>122</b>  | GVW / GCW             | CLASS                         | SIC                         | FACTOR                       | SEAT CP | RADIUS    | FARTHEST TERMINAL |                |          |
| USE                     |                     | FOR HIRE              | CHECK COVERAGES               | ADD'L NO-FAULT              | UNDRINS MOTOR TOWING & LABOR | F       | LSP       | RENT REIMB        | DEDUCTIBLES    |          |
| PLEASURE                | RETAIL              |                       | LIAB                          | MED PAY                     | UNINS MOTOR                  | FT      | COMP/OTC  | FG                | AA             |          |
| FARM                    | SERVICE             | X                     | NO-FAULT                      |                             |                              | FTW     | X         |                   |                |          |
| DRIVE TO WORK / SCHOOL  |                     | < 15 MILES            | 15 MILES +                    | NET VEH DR/CR:              | TOTAL PREM: \$               |         |           |                   |                |          |
| VEH #<br><b>9</b>       |                     | YEAR<br><b>2023</b>   | MAKE: <b>Ford</b>             | BODY TYPE: <b>PU TRUCK</b>  | VEHICLE TYPE                 |         |           | SYM / AGE         | COMP / OTC SYM | COLL SYM |
| GARAGING ADDRESS        |                     | CITY                  |                               | COUNTY                      |                              |         | STATE     | ZIP               |                |          |
| STREET (Required in KY) |                     | <b>Pass Christian</b> |                               |                             |                              |         | <b>MS</b> | <b>39571</b>      |                |          |
| LIC STATE<br><b>MS</b>  | TERR<br><b>122</b>  | GVW / GCW             | CLASS                         | SIC                         | FACTOR                       | SEAT CP | RADIUS    | FARTHEST TERMINAL |                |          |
| USE                     |                     | FOR HIRE              | CHECK COVERAGES               | ADD'L NO-FAULT              | UNDRINS MOTOR TOWING & LABOR | F       | LSP       | RENT REIMB        | DEDUCTIBLES    |          |
| PLEASURE                | RETAIL              |                       | LIAB                          | MED PAY                     | UNINS MOTOR                  | FT      | COMP/OTC  | FG                | AA             |          |
| FARM                    | SERVICE             | X                     | NO-FAULT                      |                             |                              | FTW     | X         |                   |                |          |
| DRIVE TO WORK / SCHOOL  |                     | < 15 MILES            | 15 MILES +                    | NET VEH DR/CR:              | TOTAL PREM: \$               |         |           |                   |                |          |



# VEHICLE SCHEDULE

DATE (MM/DD/YYYY)  
03/09/2026

|   |  |  |   |                         |
|---|--|--|---|-------------------------|
| AGENCY<br><b>Betz Rosetti &amp; Associates Inc.</b> |  | CARRIER<br><b>Special Risk Insurance</b> |   | NAIC CODE<br><b>N/A</b> |
| POLICY NUMBER                                       |  | EFFECTIVE DATE<br><b>04/10/2026</b>      | NAMED INSURED(S)<br><b>City of Pass Christian Fire &amp; Rescue</b> |                         |

### VEHICLE DESCRIPTION

|                        |                     |  |                               |                |                              |         |            |                    |                     |                             |            |             |
|------------------------|---------------------|--|-------------------------------|----------------|------------------------------|---------|------------|--------------------|---------------------|-----------------------------|------------|-------------|
| VEH #<br><b>10</b>     | YEAR<br><b>1991</b> | MAKE: <b>Harsco</b>                              | BODY TYPE: <b>Cargo Truck</b> |                | VEHICLE TYPE                 |         |            | SYM / AGE          | COMP / OTC SYM      | COLL SYM                    |            |             |
| MODEL: <b>M923A2</b>   |                     | V.I.N.: <b>2306841</b>                           |                               | PP             | SPEC                         | COML    |            |                    |                     |                             |            |             |
| GARAGING ADDRESS       |                     | STREET (Required in KY)<br><b>Pass Christian</b> |                               | CITY           |                              | COUNTY  |            | STATE<br><b>MS</b> | ZIP<br><b>39571</b> |                             |            |             |
| LIC STATE<br><b>MS</b> | TERR<br><b>122</b>  | GVW / GCW  | CLASS                         | SIC            | FACTOR<br><b>0.00</b>        | SEAT CP | RADIUS     | FARTHEST TERMINAL  |                     | COST NEW<br><b>\$ 5,000</b> |            |             |
| USE                    | COMML               | FOR HIRE   | CHECK COVERAGES               | ADD'L NO-FAULT | UNDRINS MOTOR TOWING & LABOR | F       | LSP        | RENT REIMB         | DEDUCTIBLES         | ACV                         | COMP / OTC | SPEC C OF L |
| PLEASURE               | RETAIL              |  | LIAB NO-FAULT                 | MED PAY        | UNINS MOTOR                  | FT      | COMP / OTC | FG                 | X AA                | ST AMT                      | \$         | 1,000       |
| FARM                   | SERVICE             |  |                               |                |                              | FTW     | X COLL     |                    | \$                  | 5,000                       | \$         | 1,000 COLL  |
| DRIVE TO WORK / SCHOOL |                     | < 15 MILES                                       | 15 MILES +                    | NET VEH DR/CR: | TOTAL PREM: \$               |         |            |                    |                     |                             |            |             |

**ACORD™ COMMERCIAL AUTO DRIVER INFORMATION SCHEDULE**DATE  
03/09/2026

|   |   |  |
|---|---|--|
| PRODUCER  | PHONE (A/C, No, Ext): (228) 701-0200<br>FAX (A/C, No): (228) 867-2500 | APPLICANT City of Pass Christian Fire & Rescue<br>(First Named Insured)<br>200 West Scenic Drive<br>Pass Christian, MS 39571 |
| Betz Rosetti & Associates Inc.<br>2304 19th Street, Suite 102<br>Gulfport, MS 39501 |   | FOR COMPANY USE ONLY   |
| CODE:   | SUB CODE:   |  |
| AGENCY CUSTOMER ID:   | PASSCHR-10  |  |

**DRIVER INFORMATION**

LIST ALL DRIVERS, INCLUDING FAMILY MEMBERS THAT WILL DRIVE COMPANY VEHICLES, AND EMPLOYEES WHO DRIVE OWN VEHICLES ON COMPANY BUSINESS.

| DRIVER # | NAME (Include address, if required)   | SEX | MAR STAT | DATE OF BIRTH | YRS EXP | YEAR LIC | DRIVERS LICENSE NUMBER/<br>SOCIAL SECURITY NUMBER | STATE LIC | DATE HIRE | BROADEN NO-FAULT | DOC | USE VEH # | % USE |
|----------|---|-----|----------|---------------|---------|----------|---|-----------|-----------|------------------|-----|-----------|-------|
| 13       | David Joseph Easterling<br>9245 Cuandet Road #206<br>Gulfport, MS 39503     | M   | U        | 03/04/1996    |         |          | 802354954   | MS        |           |                  |     |           |       |
| 14       | Diamond Woodman   | M   | U        | 01/08/1982    |         |          | 801334779   | MS        |           |                  |     |           |       |
| 15       | Dustin Rene Dauner<br>26244 J P Ladner Road<br>Pass Christian, MS 39571     | M   | U        | 06/17/1989    |         |          | 800690013   | MS        |           |                  |     |           |       |
| 16       | Emanuel Cintron   | M   | U        | 05/01/1992    |         |          | 801055203   | MS        |           |                  |     |           |       |
| 17       | Gavin Carter  | M   | U        | 09/22/1998    |         |          | 802648756   | MS        |           |                  |     |           |       |
| 18       | Gerard Ledet  | M   | U        | 07/16/1984    |         |          | 800340683   | MS        |           |                  |     |           |       |
| 19       | Jaclyn Laughlin   | F   | U        | 07/06/1989    |         |          | 800354845   | MS        |           |                  |     |           |       |
| 20       | Jaden Bishop  | M   | U        | 11/25/2004    |         |          | 456540797   | MS        |           |                  |     |           |       |
| 21       | Jason M Smith   | M   | U        | 11/09/1997    |         |          | 800742852   | MS        |           |                  |     |           |       |
| 22       | Jeffrey Matthew Klemmer<br>540 St. Louis Street<br>Pass Christian, MS 39571 | M   | U        | 09/15/1970    |         |          | 802960732   | MS        |           |                  |     |           |       |
| 23       | Jeremy Brent McLeod<br>12200 Olive Road<br>Gulfport, MS 39503               | M   | U        | 08/28/1992    |         |          | 801550353   | MS        |           |                  |     |           |       |
| 24       | Jessie Peterson   | M   | U        | 01/02/1985    |         |          | 802321984   | MS        |           |                  |     |           |       |
| 25       | John Pope   | M   | U        | 11/12/1977    |         |          | 593268340   | MS        |           |                  |     |           |       |
| 26       | John W Strawn III   | M   | U        | 06/20/1993    |         |          | 801654568   | MS        |           |                  |     |           |       |
| 27       | Jordan Edwards  | U   | U        | 12/21/1983    |         |          | 802126593   | MS        |           |                  |     |           |       |
| 28       | Justin Barr   | M   | U        | 08/09/1984    |         |          | 802857868   | MS        |           |                  |     |           |       |
| 29       | Louis Paul  | M   | U        | 10/21/2003    |         |          | 354727085   | MS        |           |                  |     |           |       |
| 30       | Marcos Chacon   | M   | U        | 06/26/2000    |         |          | 200343030   | MS        |           |                  |     |           |       |
| 31       | Michael Bass  | M   | U        | 10/12/1967    |         |          | 800710956   | MS        |           |                  |     |           |       |
| 32       | Michael D Chillura  | M   | U        | 05/19/1998    |         |          | 112708482   | MS        |           |                  |     |           |       |
| 33       | Michael Paul  | M   | U        | 05/21/1992    |         |          | 801096452   | MS        |           |                  |     |           |       |
| 34       | Richard Andrew Purchner<br>26481 Eddy Road<br>Pass Christian, MS 39571      | M   | U        | 01/01/1983    |         |          | 800814909   | MS        |           |                  |     |           |       |
| 35       | Richard Scott   | M   | U        | 08/22/1981    |         |          | 800246925   | MS        |           |                  |     |           |       |
| 36       | River W Johnson   | U   | U        | 11/19/1999    |         |          | 802861370   | MS        |           |                  |     |           |       |



# VFIS ORDER FORM

CITY OF PASS CHRISTIAN (MS) C53925

| Coverage             | Effective/<br>Expiration Dates | Accept<br><i>Initial to accept<br/>coverage</i> | Decline<br><i>Initial to decline<br/>coverage</i> | Premium<br>Quoted |
|----------------------|--------------------------------|---|---|-------------------|
| Property             |                                |   |   | \$22,262          |
| Crime                |                                |   |   |                   |
| Portable Equipment   |                                |   |   | \$3,897           |
| Auto                 |                                |   |   | \$7,818           |
| General Liability    |                                |   |   | \$2,058           |
| Management Liability |                                |   |   |                   |
| Excess Liability     |                                |   |   |                   |
| <b>Total</b>         |                                |   |   | <b>\$36,035</b>   |

### Payment Plans

Please indicate your choice of premium payment options. There are no installment fees. Payment plans do not include any applicable taxes, fees, and surcharges. They will be included with your initial invoice. Payment plans options do not apply to future endorsements. You will receive an invoice based on the payment plan selected. \*\*\*Please Note – Any breakdown of premium values listed on this Order Form should not be used for billing purposes. On Installment plans, payment amounts will vary due to rounding on installment schedules. Please wait for the invoice to bill the insured. Remittance payment must match the invoice.\*\*\*

- Annual Default unless otherwise eligible and selected below
- Two-Pay \$2,500 account minimum
- Four-Pay \$3,500 account minimum
- Ten-Pay \$10,000 account minimum

Signature of Insurance Representative \_\_\_\_\_

\_\_\_\_\_ Date

Agency Name/Address Betz Rosetti & Associates, Inc.  
2304 19th Street, Suite 102, Gulfport, MS 39501

Producer/Service Rep. Albert Betz / Haidee Gerald

### Before you return this form, you must:

1. Provide the INSURED'S Federal ID#: 64-6000951
2. Identify all mortgagees, loss payees and (for Auto only) additional insureds/lessors (provide address).
3. Choose \$1,000,000 underlying limits when there is Excess Liability.

*This is not a binder, nor should it be used as one. This form is solely for the purpose of ordering property and casualty insurance coverages for which VFIS has provided a valid quote.*

Signature of Insured \_\_\_\_\_

\_\_\_\_\_ Date

Comments/Notes: \_\_\_\_\_

|                           |                          |                       |  |
|---------------------------|--------------------------|-----------------------|--|
| <b>Internal Use Only:</b> | C53925 MS                | Qt Eff Dt: 04/10/2026 | Doc ID: afc0893ceef14730bc97abe63895bd15 |
|                           | Property: 62580810000000 | Crime: 0              | PE: 62580810000000 Auto: 04580810000000  |
|                           | GL: 62580810000000       | ML: 0                 | Excess: 0                                |

**INSURANCE PROPOSAL  
PREPARED FOR:**

**CITY OF PASS CHRISTIAN FIRE & RESCUE**

200 West Scenic Drive  
Pass Christian MS 39571

**PRESENTED BY:**

**Albert Betz, CIC, ACI**

**BETZ ROSETTI**  
& ASSOCIATES

**INSURANCE AND RISK SOLUTIONS**

2304 19th Street, Suite 102  
Gulfport MS 39501  
Phone: (228) 701-0200  
[www.betzrosetti.com](http://www.betzrosetti.com)

**DISCLAIMER** - The abbreviated outlines of coverages used throughout this proposal are not intended to express any legal opinion as to the nature of coverage. They are only visuals to a basic understanding of coverages. This is only a summary and the terms and conditions of any policy issued will take precedence over the proposal.

## SERVICING TEAM

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## LOCATION SCHEDULE

**Issuing Company:** National Union Fire Insurance Company of Pittsburgh, PA.  
**Policy Term:** 4/10/2026 - 4/10/2027

**Loc # Bldg # Address**

|   |   |   |
|---|---|---|
| 1 | 1 | 808 E Second Street Pass Christian MS 39571 |
| 1 | 2 | 808 E Second Street Pass Christian MS 39571 |
| 2 | 1 | 707 W North Street Pass Christian MS 39571  |
| 3 | 1 | 351 Clark Ave Pass Christian MS 39571       |
| 3 | 2 | 351 Clark Ave Pass Christian MS 39571       |

## PROPERTY LIMITS

| Loc # | Bldg # | Subject of Ins                     | Amount      | Coins | Ded   | Valuation             | Wind Ded |
|-------|--------|------------------------------------|-------------|-------|-------|-----------------------|----------|
| 1     | 1      | Building                           | \$1,170,613 |       | 1,000 | Replacement Cost      | 5% NS    |
| 1     | 1      | Contents                           | \$360,190   |       | 1,000 | Replacement Cost      | 5% NS    |
| 1     | 1      | Flood                              | \$1,530,803 |       | 1,000 | Replacement Cost      |          |
| 1     | 1      | Earthquake                         | \$1,530,803 |       | 5%    | Replacement Cost      |          |
| 1     | 1      | Business Income with Extra Expense |             |       |       | Actual Loss Sustained | 5% NS    |
| 1     | 2      | Building                           | \$7,020     |       | 1,000 | Replacement Cost      | 5% NS    |
| 1     | 2      | Contents                           | \$29,247    |       | 1,000 | Replacement Cost      | 5% NS    |
| 1     | 2      | Flood                              | \$36,267    |       | 1,000 | Replacement Cost      |          |

|   |   |                                       |             |  |       |                       |       |
|---|---|---------------------------------------|-------------|--|-------|-----------------------|-------|
| 1 | 2 | Earthquake                            | \$36,267    |  | 5%    | Replacement Cost      |       |
| 1 | 2 | Business Income<br>with Extra Expense |             |  |       | Actual Loss Sustained |       |
| 2 | 1 | Building                              | \$1,019,334 |  | 1,000 | Replacement Cost      | 5% NS |
| 2 | 1 | Contents                              | \$90,048    |  | 1,000 | Replacement Cost      | 5% NS |
| 2 | 1 | Flood                                 | \$1,109,382 |  | 1,000 | Replacement Cost      |       |
| 2 | 1 | Earthquake                            | \$1,109,382 |  | 5%    | Replacement Cost      |       |
| 2 | 1 | Business Income<br>with Extra Expense |             |  |       | Actual Loss Sustained |       |
| 3 | 1 | Building                              | \$291,388   |  | 1,000 | Replacement Cost      | 5% NS |
| 3 | 1 | Flood                                 | \$291,388   |  | 1,000 | Replacement Cost      |       |
| 3 | 1 | Earthquake                            | \$291,388   |  | 5%    | Replacement Cost      |       |
| 3 | 1 | Business Income<br>with Extra Expense |             |  |       | Actual Loss Sustained |       |
| 3 | 2 | Building                              | \$14,038    |  | 1,000 | Actual Cash Value     | 5% NS |
| 3 | 2 | Flood                                 | \$14,038    |  | 1,000 | Actual Cash Value     |       |
| 3 | 2 | Earthquake                            | \$14,038    |  | 5%    | Actual Cash Value     |       |
| 3 | 2 | Business Income<br>with Extra Expense |             |  |       | Actual Loss Sustained |       |

## COMMERCIAL PROPERTY

Property insurance is any type of insurance that indemnifies an insured party who suffers a financial loss because property has been damaged or destroyed. Property is considered to be any item that has a value. Property can be classified as real property or personal property. Real property is land and the attachments to the land, such as buildings. Personal property is all property that is not real property. The Building and Personal Property coverage form is the form used to insure almost all types of commercial property. The insuring agreement in the Building and Personal Property coverage form promises to pay for direct physical loss or damage to covered property at the premises described in the policy when caused by or resulting from a covered cause of loss. The following is a brief outline of coverage and how they are used within the Commercial Building and Personal Property coverage form.

### **Buildings and Business Personal Property**

Coverage for the building includes the building and structures, completed additions to covered buildings, outdoor fixtures, permanently installed fixtures, machinery and equipment. The building material used to maintain and service the insured's premises is also insured. Business Personal Property owned by the insured and used in the insured's business is covered for direct loss or damage. The coverage includes furniture and fixtures, stock, and several other similar business property items when not specifically excluded from coverage. The policy is also designed to protect the insured against loss or damage to the personal property of others while in the insured's care, custody or control.

### **Coverage Extensions and Additional Coverage**

In addition to the limits stated in the Building and Personal Property coverage form, the policy has a coverage extensions section and an additional coverage section. The coverage extensions section provides limited coverage for newly acquired or constructed property, property of others, certain outdoor property, and the cost to research and reconstruct information on destroyed records. When coverage is placed on the all risk form, two additional extensions are added for property in transit and coverage for certain repair costs related to damage caused by water. The two additional extensions are covered by certain perils only. The additional coverage section provides coverage for indirect losses that result from a direct loss. The coverage applies to removal of debris, preservation of property, fire department service charges and pollutant cleanup and removal. The coverage extensions and the additional coverage have limitations and are subject to certain conditions.

#### **Limit of Insurance**

The most the insurer will pay for a loss or damage in any one occurrence is the limit of insurance stated in the policy declarations

#### **Deductible**

The standard deductible is \$250. However, other deductible amounts are available and the deductible applies only once per loss.

### **Causes of Loss**

The term peril is used when discussing losses. A peril is a cause of loss. Basic property insurance policies are written to cover the perils of fire, lightning, explosion, windstorm, hail, smoke, aircraft or vehicle damage, riot or civil commotion, vandalism, sprinkler leakage, sinkhole collapse, and volcanic action. Other property insurance policies, often referred to as the broad form policy, add coverage for water damage, weight of snow, ice or sleet, breakage of glass and coverage for falling objects. The broadest coverage is the special form, which is best known as the all risk form. All risk covers all causes of loss, except those specifically excluded from coverage. It is possible for a commercial property policy to have more than one cause of loss form.

## Replacement Cost and Actual Cash Value

Property can be valued in several different ways. Insurance companies commonly use two approaches to determine value, which also determines how a loss will be paid; the replacement cost method and the actual cash value method. Insurers consider replacement cost of a property item to be the cost to replace it with property of like kind. Actual cash value is replacement cost minus the accumulated depreciation for age and condition.

## Agreed Value

When the agreed value option is used the coinsurance requirement is removed and the insurer agrees to cover losses for its agreed value. When this option is used the insured and the insurance company agree on the value of the property before the policy is issued. As an example, the insured has property insured for \$100,000 and the agreed value is also \$100,000, if a loss occurs, any loss up to \$100,000 is covered at 100%. This option is usually assigned to one-of-a-kind property.

## COINSURANCE

The success of any Commercial Property program is measured by its effectiveness following an insured loss. Thus, in establishing adequate coverage, one must have firsthand information as to the insurable values at risk. Book values do not fulfill this purpose. Insurable values are present day replacement cost with proper allowance for depreciation. Since replacement costs fluctuate, it is necessary to keep a constant check on insurable values.

Most building and business personal property policies have a coinsurance clause which requires the insured to carry insurance equal to at least a specified percentage of the actual cash value of the property. If a loss occurs, and it is determined that the amount of insurance carried is less than the amount required a penalty could be placed on the insured.

The insurance applying in the following example is subject to the 90% Coinsurance Clause. Under the terms in this clause, you should insure the property at risk to the stipulated percentage of value. If you fail to do so, you will not be fully reimbursed for any loss that may occur. The manner in which the Coinsurance Clause would operate in the event of a partial loss is illustrated below and is merely a hypothetical example:

| Insurable Interest | Insurance Carried | Insurance Required (90%) | Amount of Loss | Policy Pays | Insured Pays |
|--------------------|-------------------|--------------------------|----------------|-------------|--------------|
| \$100,000          | \$60,000          | \$90,000                 | \$10,000       | \$6,667     | \$3,333      |

The computation formula is 'did over should.' The insured carried \$60,000, but should have carried \$90,000. Therefore the insured carried two-thirds of what he should have carried and will receive payment for only two-thirds of his \$10,000 partial loss in spite of the fact the face amount of the policy was \$60,000.

The above is merely to show how Coinsurance works. If at any time you should substantially increase building values or contents values, you should notify us immediately to increase your coverage to avoid any Coinsurance penalties.

## Inflation Guard

An insured can insure a building for its full value at the beginning of the policy year, but, at the end of the year, it might not be covered for its full value. This problem can be corrected by adding inflation guard coverage. With inflation guard, the policy limit increases gradually during the policy term so that the total increase amounts to the desired percentage increase at the end of the policy term.

## Earthquake Coverage

This endorsement extends your causes of loss to include damage that results directly from an earthquake. Coverage is provided for replacement of buildings only. All earthquakes shocks that occur within a 168 hour period (one week) are considered to be a single occurrence. A separate deductible applies and is determined by the value of the insured property.

## GENERAL LIABILITY LIMITS

**Issuing Company:** National Union Fire Insurance Company of Pittsburgh, PA.  
**Policy Term:** 4/10/2026 - 4/10/2027

|  |             |
|--|-------------|
| <b>General Aggregate Limit</b>                           | \$3,000,000 |
| <b>Products/Completed Operations<br/>Aggregate Limit</b> | \$3,000,000 |
| <b>Personal/Advertising Injury Limit</b>                 | \$1,000,000 |
| <b>Each Occurrence</b>                                   | \$1,000,000 |
| <b>Fire Damage Limit</b>                                 | \$1,000,000 |
| <b>Medical Expense Limit</b>                             | \$5,000     |

## GENERAL LIABILITY

The Commercial General Liability policy provides the insurance protection needed to pay damages for bodily injury or property damages for which the insured is legally responsible. The policy provides coverage for liability arising from personal injury and advertising injury. Coverage for medical expense is also provided. The policy also covers accidents occurring on the premises or away from the premises. Coverage is provided for injury or damages arising out of goods or products made or sold by the named insured. The insured is the named insured and the employees of the named insured. However, several individuals and organizations, other than the named insured, may be covered, depending upon certain circumstances specified in the policy. In addition to the limits, the policy provides supplemental payments for attorney fees, court costs and other expenses associated with a claim or the defense of a liability suit.

There are two commercial general liability coverage forms available, the occurrence form and the claims-made form. Both forms are somewhat identical in the coverage offered. The main difference is in the way the claims are handled under the two forms. The occurrence form covers bodily injury or property damage claims that occur during the policy term, regardless of when the claim is reported. The claims-made policy form only covers claims made against the insured during the policy term. A claim made after the policy expires is not covered by a claims-made policy unless the claim is covered by an extended reporting period. The claims-made policy will only have the extended reporting period. The following reflect both forms.

### **General Aggregate**

The General Aggregate Limit is the most money the insurer will pay under a certain coverage for all claims occurring during the policy term.

### **Premises/Operations**

Coverage is provided for damages arising out of ownership or occupancy of the insured premises when not maintained in a reasonable manner. This also covers damages arising out of operations performed by the insured's business.

### **Products/Completed Operations**

Products coverage is provided for damages arising out of products manufactured, sold, handled or distributed by the insured. Completed Operations covers damages occurring after operations have been completed or abandoned, or after an item is installed or built and released for its intended purpose.

### **Medical Expense Limit**

Medical payments coverage pays medical expenses resulting from bodily injury caused by an accident on premises owned or rented by the insured, or locations next to such property, or when caused by the insured's operations. These payments are made without regard to the liability of the insured.

### **Fire Damage Limit**

The fire damage limit provides coverage for fire damage caused by negligence on the part of the insured to premises rented to the named insured. If a fire occurs because of negligence of the insured and causes damage to property not rented to the insured, coverage would be provided under the occurrence limit.

## **Personal Injury**

Personal injury means injury other than bodily injury. Coverage is provided for injury resulting from offenses such as false arrest, malicious prosecution, detention or imprisonment, the wrongful entry into, wrongful eviction from and other acts of invasion, or rights of private occupancy of a room. Coverage for libel and slander is also provided in the policy.

## **Advertising Injury**

This coverage pays for damages done in the course of oral or written advertisement that disparages, libels or slanders a person's or organization's goods, products or services. Coverage for these offenses is provided under advertising injury coverage only if they occur during the course of advertising the named insured's own goods, products or services.

## **Each Occurrence**

Each occurrence is considered to be an accident, which could include continuous or repeated exposure to the same harmful conditions. An occurrence can also be a sudden event, or a result of a long term series of events.

# **CLAIMS MADE FORM ONLY**

## **Basic Extended Reporting Period (Basic Tail)**

This coverage is provided automatically without an additional premium charge if coverage is canceled, not renewed, or the insurer renews with a later retroactive date. The basic extended reporting period starts at the end of the policy period and lasts for five years for claims made against the insured within the five year period and reported to the insurer within 60 days after the end of the policy period.

## **Supplemental Extended Reporting Period (Supplemental Tail)**

The supplemental extended reporting period is available under the same circumstances as the basic one. However, it becomes effective only if the named insured makes a written request within 60 days after the termination of the policy period and the additional premium is paid. The supplemental extended reporting period begins when the basic one ends, and it continues forever. It cannot be canceled by the insured or the insurer. The supplemental tail endorsement would provide coverage for claims reported to the insurer within sixty days after the end of the policy period but did not result in a claim being made against the insured until after the end of the five year policy period.

Other types of occurrence or offenses that are unknown by the insured and therefore not reported within the sixty days after the end of the policy period could also be covered by the supplemental tail. When the tail is purchased the policies general aggregate limit and the products/completed operations aggregate limit is reinstated.

## **Retroactive Date**

The retroactive date shown in the policy declarations is the same as the inception date, or the retroactive date can be a date prior to the inception date. A policy can also be written with no retroactive date.

## BUSINESS AUTOMOBILE LIMITS

**Issuing Company:** National Union Fire Insurance Company of Pittsburgh, PA.  
**Policy Term:** 4/10/2026 - 4/10/2027

## PHYSICAL DAMAGE

**Comprehensive or Specified Cause of Loss**

See Schedule of Vehicles

**Collision**

See Schedule of Vehicles

## SCHEDULE OF VEHICLES

| Year | Make/Model<br>VIN                                 | Liab | Med<br>Pay | PIP | UM | UIM | Comprehensive or<br>Specified Causes of Loss | Collision          |
|------|---|------|------------|-----|----|-----|--|--------------------|
| 1    | 2009<br>International / 4000<br>1HTMKAZR29H155699 |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |
| 2    | 2017<br>Ford / F250<br>1FT7W2B68HEC57500          |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |
| 3    | 2017<br>Ford / F250<br>1FT7W2B67HEE78683          |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |
| 4    | 2020<br>Custom / E-One<br>4EN6AAA87L1003011       |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |
| 5    | 2020<br>Typhoon / E-One<br>4EN6AAA8XL1003682      |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |
| 6    | 1990<br>American General / M923A2<br>V9913031360  |      |            |     |    |     | \$1,000 Comprehensive Deductible             | \$1,000 Deductible |

|    |      |   |  |  |  |  |  |                                  |                    |
|----|------|---|--|--|--|--|--|----------------------------------|--------------------|
| 7  | 2018 | Freedom / TD80/22817<br>5WKBE122XJ1055754 |  |  |  |  |  | \$1,000 Comprehensive Deductible | \$1,000 Deductible |
| 8  | 2022 | Ford / F150<br>1FTFW1P8XNKE09578          |  |  |  |  |  | \$1,000 Comprehensive Deductible | \$1,000 Deductible |
| 9  | 2023 | Ford / F150<br>1FTEW1EPXPFB91661          |  |  |  |  |  | \$1,000 Comprehensive Deductible | \$1,000 Deductible |
| 10 | 1991 | Harsco / M923A2<br>2306841                |  |  |  |  |  | \$1,000 Comprehensive Deductible | \$1,000 Deductible |

## **BUSINESS AUTOMOBILE**

The liability coverage of the business auto policy provides protection against legal liability arising out of the ownership, maintenance, or use of any insured automobile. The insuring agreement agrees to pay damages for bodily injury or property damage for which the insured is legally responsible because of an automobile accident resulting from the ownership, maintenance, or use of a covered auto. The insuring agreement also states that in addition to the payment of damages for which the insured is legally liable, the insurer also agrees to defend the insured for all legal defense cost. The defense cost is in addition to the policy limits.

### **Medical Payments Coverage**

The insuring agreement states that the insurer will pay all reasonable and necessary medical and funeral expenses incurred by an insured because of bodily injury caused by an accident. The insured is the named insured, the insured's employees and guests, and any other person occupying a covered auto. These payments are made without regard to fault.

### **Uninsured/Underinsured Motorist Coverage**

#### **Uninsured Motorist**

This insuring agreement pays for bodily injury to an insured who is injured by an uninsured motorist, a hit-and-run driver, or a driver whose insurer becomes insolvent. These benefits are paid under the named insured's policy.

#### **Underinsured Motorist**

This coverage is added to supplement the Uninsured Motorist Coverage, the coverage applies only when the other driver has liability limits at the time of an accident, but the liability limits carried may be insufficient to pay for damages for which the driver is responsible. This is when the insured's underinsured motorist's coverage would apply and payment for the difference could be made. The two coverages are mutually exclusive and do not overlap or duplicate each other.

### **Any Automobile**

Coverage is provided for any auto, including autos owned by the insured, autos the named insured hires or borrows from others, and other non-owned autos used in the insured's business.

### **Owned Automobile**

Coverage is provided for all autos owned by the named insured. The owned auto symbol is used for liability insurance only.

### **Non-Owned Auto**

Coverage is provided only for autos not owned, leased, hired, or borrowed by the named insured. Coverage includes autos owned by the insured's employees or members of their households, but only while used in the named insured's business or personal affairs.

### **Hired Auto**

Coverage is provided only for autos leased, hired, rented, or borrowed for use in the named insured's business.

## PHYSICAL DAMAGE COVERAGE

### Collision Coverage

This coverage provides protection against loss or damage to a covered auto or a non-owned auto resulting from the impact with another vehicle or object. Collision losses are paid regardless of fault.

### Comprehensive Coverage

Comprehensive coverage provides protection against loss or damage to a covered auto resulting from loss other than a collision or upset. This coverage also provides for supplemental payments for transportation expenses in the event of total theft of a covered auto or a non-owned auto. Coverage begins forty-eight hours after the theft.

### Specified Cause of Loss

This provides coverage against loss from fire, lightning, or explosion; theft; windstorm, hail, or earthquake; flood; mischief or vandalism; and sinking, burning, collision or derailment of a conveyance transporting the covered auto.

## ENDORSEMENTS

### Rental Reimbursement

The business auto policy provides a coverage extension if an auto is insured for comprehensive or specified cause of loss coverage which insures against loss of use of a covered auto only if the auto is a private passenger type auto and is stolen. The coverage extension pays up to a daily limit of \$10 and a maximum limit of \$300. Payments begin 48 hours after the theft and ends when the insured auto is returned or when the insurer has paid the insured for the auto.

However, for broader coverage the insured can pay an additional premium for rental reimbursement coverage. Rental reimbursement pays the cost of renting a substitute auto for replacement of any covered auto that has suffered a covered loss. The daily and maximum limit for this coverage varies among insurers.

### Towing and Labor

When this coverage is added, the insurer pays for towing and labor costs each time a covered auto or non-owned auto is disabled, up to a stated amount.

### Personal Injury Protection

Personal Injury Protection (PIP) is an endorsement that adds no-fault benefits. No-Fault means that in the event of an automobile accident, each party collects from his or her own insurer regardless of fault. The PIP endorsement is only available in certain states with No-Fault Laws. The endorsement applies only to bodily injury and not to property damage. (The state of Michigan is the exception to property damage.) No-Fault Laws vary widely from state to state.

## EQUIPMENT FLOATER LIMITS

**Issuing Company:** National Union Fire Insurance Company of Pittsburgh, PA.  
**Policy Term:** 4/10/2026 - 4/10/2027

### Coverage                      Deductible

|           |                   |
|-----------|-------------------|
| All risks | **See chart below |
|           | Deductible: \$500 |

\*\*B = Blanket amount   S = Scheduled   RISK = All risks   NAMED = Named perils   THEFT = Named perils (including theft)  
 ACV = Actual cash value   REPL = Replacement cost   DI = Disappearing   FL = Flat   GR = Graduated   OT = Other   PC = Percent

## SCHEDULED EQUIPMENT

| Item # | Year/Mod | Description                     | ID/Serial #           | Amt of Ins |
|--------|----------|---------------------------------|-----------------------|------------|
| 1      |          | 23 ft Open Runabout- Boat       | TJZ2R103J910          | 39,191     |
| 2      |          | Motor for 2010 Triton           | 342208                | 30,000     |
| 3      |          | Misc Equipment attached to boat |                       | 4,000      |
| 4      |          | Utility RTV Tractor             | A5KA1CGACHG0477<br>18 | 11,365     |
| 5      |          | Generator                       | 3001979624            | 26,004     |
| 6      |          | 9.8 Outboard                    | 028071XF              | 2,000      |
| 7      |          | Aluminum Boat Hull              | KJG43A761607          | 2,000      |
| 8      |          | 8.78 oz                         | 1581FYC2B30021E2A     | 615        |

## EQUIPMENT FLOATER

The primary function of the ACORD Equipment Floater Application #146 is to collect underwriting and rating information for the Contractors Equipment Form. However, the application may be used for any other Inland Marine coverage that will fit into its structure. Since there are several Inland Marine Coverage Forms that fit into the structure of this application, this document will briefly explain the many kinds of inland marine policies that cover many kinds of loss exposures. Inland marine policies are divided into two categories: filed and non-filed. Filed policies are characterized by a large number of potential insureds and reasonably similar loss exposures. The rates and forms of filed policies must be filed with the state insurance department. Non-filed policies are characterized by a relatively small number of potential insureds, and diverse loss exposures or both. The rates and forms for non-filed policies are not filed with the state.

## FILED FORMS

### Sign Coverage

The sign coverage form is used to insure neon fluorescent, automatic or mechanical electric signs, and lamps. All covered signs must be written on a schedule with a limit of insurance shown for each item on the schedule.

### Equipment Dealers Coverage Form

The primary purpose of the equipment dealers coverage form is to insure the stock in trade of dealers in agriculture and construction equipment. Coverage is provided for customers' equipment in the care, custody or control of the named insured. The coverage can be written on a reporting basis or non-reporting basis.

### Commercial Articles Coverage Form

The commercial articles coverage form is used to cover photographic equipment and musical instruments used on a commercial basis. Coverage is provided for photographers, motion picture producers, professional musicians, and others. The form is not intended to provide coverage for dealers of these types of property. Coverage can be written on a schedule or blanket basis.

### Mail Coverage Form

The mail coverage form is written for banks, trust companies, insurance companies, investment brokers and similar firms that frequently ship securities by mail. The mail coverage form purpose is to cover securities and other negotiable instruments while in transit by first class mail, certified mail, express mail, or registered mail.

### Jewelers Block Coverage Form

This form was designed to meet the needs of retail jewelers. The form provides coverage for damage to the jeweler's stock of jewelry, precious and semi-precious stones, watches, precious metals and similar merchandise. Similar property of others in the insured's care, custody or control is also covered.

## NON-FILED FORMS

### **Contractors Equipment Floater**

The property covered on the contractors equipment floater might range from simple hand tools to very large cranes. Virtually any type of mobile equipment or tool can be insured. The equipment covered can be used in a wide variety of operations from home improvements to strip mining. It might be used to build roads, buildings, pipelines, or any other types of structures. The coverage provided is for direct physical loss to the equipment. Rental reimbursement coverage can be added by endorsement to cover the cost of renting substitute equipment. Rental reimbursement coverage can be added by endorsement to cover the cost of renting substitute equipment if covered property is out of service by a covered cause of loss.

### **Builders Risk/Installation**

The inland marine builders risk portion of the policy form covers structures being built, temporary structures at the building site, and building materials that have not yet become part of the building. The building materials are covered while on the insured location, in transit, or in storage at another location. Business income coverage can also be provided on the policy. The installation portion of the policy usually insures a contractor's interest in building supplies or in fixtures that the contractor has been hired to install.

### **Electronic Data Processing Equipment Form**

The inland marine electronic data processing policy is used to insure damage to data processing hardware, software, and media. The policy also covers the extra expense to continue data processing operations following a covered loss that resulted in damage to the system.

### **Bailee Policy**

Bailee policies are written to insure dry cleaners, repair shops, public warehouses, and several other types of businesses with large amounts of the customers' goods in the insured's possession. There are two major types of bailee policies. The Bailee Liability Policy covers damage to customer's goods only if the insured is legally liable for the damage. The Bailee's Customers Policy covers damage to customers' goods without regard to the bailee's liability.

## SUMMARY

| COVERAGE             | EXPIRING PREMIUM | RENEWAL PREMIUM |
|----------------------|------------------|-----------------|
| Commercial Package * | \$ 36,135.00     | \$ 36,035.00    |

**COMMERCIAL PACKAGE POLICY INCLUDES THE FOLLOWING COVERAGES:**

- Property
- Portable Equipment
- Auto
- General Liability

**ARE YOU EXPOSED??? OTHER LINES OF COVERAGE TO CONSIDER:**

- AUTO LIABILITY
- PROFESSIONAL LIABILITY
- EMPLOYMENT PRACTICES LIABILITY
- CYBER LIABILITY

**DID YOU KNOW....** BETZ ROSETTI & ASSOCIATES NOW OFFER A FULL SUITE OF PERSONAL LINES COVERAGES FOR YOUR HOME, AUTO, BOAT, AND PERSONAL LIABILITY. LET US OFFER YOU A QUOTE TODAY.

CA-9  
3-17-26

**Melodie Hayes**

**From:** Deborah Akwuiwu <dakwuiwu@mema.ms.gov>  
**Sent:** Monday, February 23, 2026 4:06 PM  
**To:** Melodie Hayes  
**Subject:** RE: L0273 Course: Managing Floodplain Development Through the NFIP class

**Caution:** THIS IS AN EXTERNAL EMAIL AND MAY BE MALICIOUS. PLEASE TAKE CARE WHEN CLICKING LINKS OR OPENING ATTACHMENTS.

Good evening,

Yes, the class is still going to take place, and you are registered for it. I will let you know if anything changes.

Warm regards,


*All other regulations in the ordinance should be followed. This is only in response to specific issues. This could have flood insurance implications.*

**Deborah Akwuiwu (Ah-qEE-wu)**  
Floodplain Specialist  
Mississippi Emergency Management Agency  
[dakwuiwu@mema.ms.gov](mailto:dakwuiwu@mema.ms.gov)  
Cell: (769) 228-6939  
Office: (601) 933-6605

March  
23-26

**From:** Melodie Hayes <mhayes@pass-christian.ms.gov>  
**Sent:** Monday, February 23, 2026 12:56 PM  
**To:** Deborah Akwuiwu <dakwuiwu@mema.ms.gov>  
**Cc:** Billy Dauphin <bdauphin@pass-christian.ms.gov>  
**Subject:** RE: L0273 Course: Managing Floodplain Development Through the NFIP class

Hi. Good afternoon- just checking to see if this class is still going to take place and if I am able to attend.

|   |  |
|---|--|
|  | <p><b>Melodie Hayes</b><br/>City Planner, City of Pass Christian</p> <p>PHONE (228) 452-5047<br/>WEB <a href="http://www.pass-christian.com">www.pass-christian.com</a><br/>ADDRESS 200 West Scenic Drive, Pass Christian, MS, 39571</p> |
|---|--|

CA-10  
3-17-26

**CITY OF PASS CHRISTIAN  
BOARD OF ALDERMEN MEETING**

---

**MEETING & HEARING DATE:** March 17, 2026  
**ACTION REQUESTED:** Lot merge of 3 lots into 1 lot located at Tax Parcel numbers 0312N-02-065.000, 0312N-02-064.000 and 0312N-02-083.000  
**APPLICANT AND OWNER:** Lisa Sadler and Herbert Welch  
**REVIEWED BY:** Melodie Hayes, City Planner  
**RECOMMENDATION:** Recommend approval to Board of Aldermen  
**CURRENT ZONING:** T3R

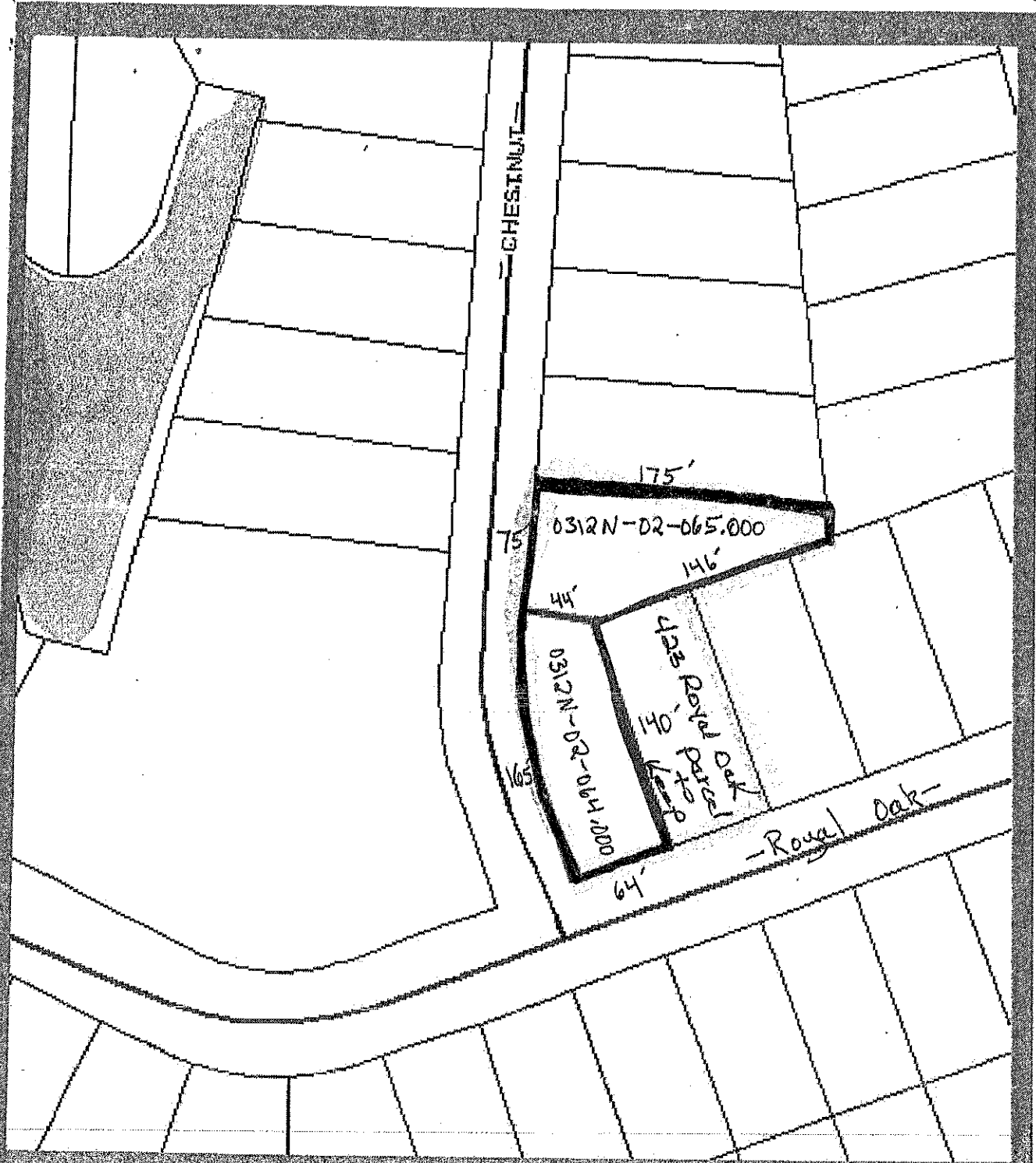
---

**Background**

The applicant is requesting merge three adjoining lots to create one bigger lot at the tax parcel numbers 0312N-02-065.000, 0312N-02-064.000 and 0312N-02-083.000, with the address to be 423 Royal Oak Blvd.

The current zone is T3R.

This is in conformance with city regulations and staff recommend approval.

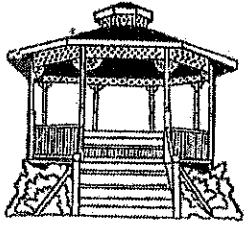


Parcel #: 0312N-02-064.000  
Date Printed: Aug 27, 2014

T3R Zone

**THIS MAP IS PREPARED FOR ASSESSMENT PURPOSES ONLY.  
HARRISON COUNTY ASSUMES NO LEGAL RESPONSIBILITIES  
FOR THE INFORMATION CONTAINED ON THIS MAP.**

241316



# Application for Re-Subdivision

City of Pass Christian  
Planning Department  
200 West Scenic Drive  
Pass Christian, MS 39571

|                       |                             |
|-----------------------|-----------------------------|
| Applicant's Name:     | Herbert Welch               |
| Applicant's Address:  | 423 Royal oak Blvd          |
| Applicant's Phone(s): | 318-379-9660                |
| Applicant's Email:    | herbert.welch1963@gmail.com |
| Applicant's Signature | Date:                       |

|                    |                             |
|--------------------|-----------------------------|
| Owner's Name:      | Lisa Sadler & Herbert Welch |
| Owner's Address:   | 423 Royal oak Blvd          |
| Owner's Phone(s):  | 318-436-1539                |
| Owner's Email:     | Lharpers@yahoo.com          |
| Owner's Signature: | Date:                       |

|                                    |   |   |
|------------------------------------|---|---|
| Number of Existing Parcels / Lots: | <input checked="" type="radio"/> Merge<br><input type="radio"/> Split | Number of Parcels / Lots To be Created: 1 |
|------------------------------------|---|---|

|                    |                    |                               |
|--------------------|--------------------|-------------------------------|
| Parcel ID #: 73952 | - Lots 6 + 7/sg 61 | Parcel Address: 104 Chestnut  |
| Parcel ID #: 73954 | Lots 5/sg 61       | Parcel Address: 423 Royal oak |
| Parcel ID #:       |                    | Parcel Address:               |
| Parcel ID #:       |                    | Parcel Address:               |
| Parcel ID #:       |                    | Parcel Address:               |

Application Fee of \$162.00 is due upon receipt by the Planning Department.

Date: 3/4/20 By: [Signature]

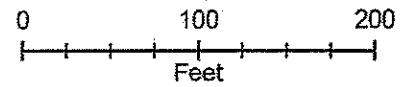
|                                |                        |
|--------------------------------|------------------------|
| Timber Ridge POA               | Re-Subdivision of Lots |
| Merge: Approved 3/4/2026       | Split:                 |
| Board of Directors Tene Velard | Date March 4, 2026     |



## HARRISON COUNTY, MISSISSIPPI

DISCLAIMER: THIS MAP IS FOR PROPERTY TAX ASSESSMENT PURPOSES ONLY. IT WAS CONSTRUCTED FROM PROPERTY INFORMATION RECORDED IN THE OFFICE OF THE REGISTER OF DEEDS AND IS NOT CONCLUSIVE AS TO LOCATION OF PROPERTY OR LEGAL OWNERSHIP. TAL FLURRY, TAX ASSESSOR.

MAP DATE: March 5, 2026



CA-11  
3.17.26

CITY OF PASS CHRISTIAN  
BOARD OF ALDERMEN MEETING

---

**MEETING & HEARING DATE:** March 17, 2026

**ACTION REQUESTED:** Lot merge of 2 lots into 1 lot located at Tax Parcel numbers 0212P-02-076.006 and 0212P-02-076.007, located at approximately 0 Poinsettia Loop

**APPLICANT AND OWNER:** Ryan & Jessica Meyer

**REVIEWED BY:** Melodie Hayes, City Planner

**RECOMMENDATION:** Recommend approval to Board of Aldermen

**CURRENT ZONING:** T3R

---

**Background**

The applicant is requesting consideration of approval for simple and by right, lot merge of two lots into one lot located at approximately 0 Poinsettia Loop, tax parcel numbers 0212P-02-076-006 and 0212P-02-076.007. The current zoning is T3R

The applicants have recently purchased the two lots and would like to combine the lots for future development and have a larger lot.

This is in conformance with city regulations and staff recommends approval.

CA-12  
3.17.26

STATE OF MISSISSIPPI  
COUNTY OF HARRISON  
CITY OF PASS CHRISTIAN

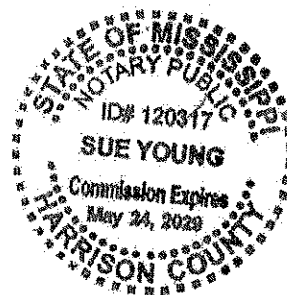
OATH OF OFFICE

I, Kristy Boyd, do solemnly swear (or affirm) that I will faithfully support and true allegiance bear the Constitution of the United States and the Constitution of the State of Mississippi and obey the laws thereof; that I am not disqualified from holding the office/position of Police Officer; by the Constitution of the United States, and the State of Mississippi; that I will support and obey the laws, ordinances and resolutions of the City of Pass Christian, and that I will faithfully discharge the duties of the office upon which I am about to enter, So help me God.

Kristy Boyd  
Signature

Sworn and subscribed before me, Sue Young, Notary Public, at City Hall, Pass Christian, Mississippi, on this the 11 day of March, 2026.

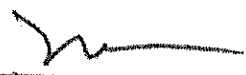
Sue Young  
Notary Public




STATE OF MISSISSIPPI  
COUNTY OF HARRISON  
CITY OF PASS CHRISTIAN

OATH OF OFFICE

I, JOHN SALTARELLI, do solemnly swear (or affirm) that I will faithfully support and true allegiance bear the Constitution of the United States and the Constitution of the State of Mississippi and obey the laws thereof; that I am not disqualified from holding the office/position of POLICE OFFICER; by the Constitution of the United States, and the State of Mississippi; that I will support and obey the laws, ordinances and resolutions of the City of Pass Christian, and that I will faithfully discharge the duties of the office upon which I am about to enter, So help me God.

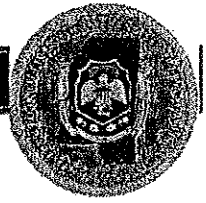
  
\_\_\_\_\_  
Signature

Sworn and subscribed before me, Sue Young, Notary Public, at City Hall, Pass Christian, Mississippi, on this the 6<sup>th</sup> day of February, 2021.

  
\_\_\_\_\_  
Notary Public



CA-14  
3.17.26



**Mississippi Office of Homeland Security**

**Mississippi Office of Homeland Security Grant Program (HSGP)  
FY26 HSGP Notice of Funding Announcement  
February 13, 2026**

**Purpose:**

The purpose of this announcement is to provide guidance for submitting grant applications for the upcoming FY26 Homeland Security Grant Program (HSGP). All applications must demonstrate clear alignment with the national priority funding investments outlined below.

**Program Eligibility and Participation:**

To be eligible for FY26 priority grant funding, applicants must address at least one of the national priority areas available to sub-grantees, which include:

- Enhancing the protection of soft targets and crowded places
- Supporting Homeland Security Task Forces and fusion centers
- Enhancing and integrating cybersecurity resiliency
- Enhancing election security
- Border Crisis Response and Enforcement Support

\*At the time of this release, the FY26 National Priority Areas (NPAs) have not been confirmed.

Applicants must also demonstrate how their proposed projects align with the terrorism preparedness framework, including efforts to prevent, prepare for, protect against, and respond to acts of terrorism. All application materials must be completed in full to be considered for review.

Projects that address one or more of the national priority areas will receive primary consideration during the evaluation process. Project requests outside the federal priority areas may still be reviewed; however, they will be considered secondary to those that directly support the identified national priorities.

**Application Release:**

The Mississippi Office of Homeland Security (MOHS) will release the FY26 Homeland Security Grant Program (HSGP) application on **Monday, March 2, 2026**. The application and accompanying funding guidance document will be available on the MOHS website at: <https://www.homelandsecurity.ms.gov/>

The FY26 HSGP application will be accessible only through an electronic link provided on the website beginning **March 2, 2026**. All submissions must be completed and submitted through that link.

**Grant Writing Workshops:**

MOHS will host two (2) virtual grant writing workshops to answer questions regarding the grant and provide updates on funding, national priority areas, and other information related to the FY26 grant year. Sessions will be held on:

- March 11, 2026 — 9:00 a.m. to 10:00 a.m.
- March 25, 2026 — 9:00 a.m. to 10:00 a.m.

Registration is currently open at: <https://mohsgrants.jotform.com/260295928887073>

**Instructions and Deadlines:**

All applications and required documentation must be submitted electronically through the designated website link no later than **Friday, April 3, 2026, at 5:00 p.m.** For Applications to be considered complete:

- All fields within the application must be fully filled out
- All required information must be submitted
- The application must include an electronic signature

MOHS requests that all jurisdictions prioritize funding requests that address capability targets and gaps identified through a formal needs assessment. Due to limited funding, projects that focus on high-priority capability gaps and align with both national and state priorities are most likely to receive funding. Applicants are strongly encouraged to use grant funds to maintain or sustain existing capabilities before proposing new initiatives.

Applications submitted after the deadline will not be considered for funding. Late submissions may only be reviewed if additional or reallocated funding becomes available. Submission of an application does not guarantee an award.

**FEMA Federal Grant Information:**

Additional federal grant guidance and program information can be found at:  
<https://www.fema.gov/grants/preparedness/homeland-security>

**FY26 National Priority Funding:**

DHS/FEMA has identified five (5) national priority areas that must be addressed by allocating a designated percentage of funding to each, totaling thirty (30) percent of all federal HSGP funds. In addition to meeting these federal requirements, MOHS will continue to invest in state-identified priority areas to strengthen overall preparedness and capability development.

**National priorities are subject to change upon release of the FEMA FY26 Notice of Funding Opportunity.**

**1. Enhancing the Protection of Soft Targets/Crowded Places:** Soft targets and crowded places—such as parks, shopping centers, transportation hubs, and event venues—remain attractive targets for terrorists due to their accessibility and large gatherings. These locations often lack robust security measures, increasing their vulnerability.

Mitigation efforts require strong collaboration between public and private sector partners to enhance security at facilities such as transportation centers, restaurants, polling places, and similar venues. Personnel who may respond to incidents at these sites should receive training in key operational systems, such as the Incident Command System (ICS), to ensure effective and coordinated incident management.

**2. Supporting Homeland Security Task Forces and Fusion Centers:** This priority aligns with Executive Order 14159, Protecting the American People Against Invasion, which calls for the establishment of Homeland Security Task Forces (HSTFs) nationwide. These multi-agency teams—comprised of federal and local law enforcement partners—are responsible for disrupting and dismantling transnational criminal organizations, targeting cross-border human smuggling and trafficking networks (particularly those involving children), and supporting lawful immigration enforcement.

**3. Enhancing and Integrating Cybersecurity Resiliency:** In today's interconnected environment, increased connectivity brings heightened risk, including opportunities for adversaries and terrorists to exploit cyber vulnerabilities and disrupt critical systems. While not mandatory, applicants are strongly encouraged to submit proposals for ongoing or high-priority cybersecurity projects. DHS/FEMA will evaluate these investments based on anticipated impact and effectiveness.

Cybersecurity projects should enhance the security and resilience of critical infrastructure and strengthen core capabilities that support the prevention of, preparation for, protection against, and response to acts of terrorism.

**4. Enhancing Election Security:** The United States' election infrastructure is vital to national stability. Any incapacitation or destruction of this infrastructure would have severe consequences. Securing election systems, ensuring their continued operation amid threats or harassment, advancing the safety of election officials, and protecting against foreign interference are national security priorities.

Because threats to election systems evolve constantly, defending them requires ongoing vigilance, innovation, and adaptation.

**5. Border Crisis Response and Enforcement Support:** State and local law enforcement agencies play a critical role in safeguarding national security and public safety. Pursuant to Executive Order 14159, Protecting the American People Against Invasion, it is the policy of the United States to enforce immigration laws against all inadmissible and removable individuals—particularly those who pose a threat to public safety or national security. This includes the efficient and lawful execution of immigration enforcement activities, supported by appropriate incentives and enhanced detention capabilities.

**Questions:**

For questions related to the grant application, guidelines, or technical assistance, please contact: [mohsgrants@dps.ms.gov](mailto:mohsgrants@dps.ms.gov)

CA-17  
3-17-26



Mississippi Association of Chiefs of Police  
1723 University Ave. Ste B #367  
Oxford, MS 38655  
662-897-6227

## INVOICE

Thomas Williams  
Pass Christian Police Dept.  
525 Espy Avenue  
Pass Christian, MS 39571

Order Number: 40101  
Order Date: March 5, 2026  
Payment Method: Pay Offline

| Product                | Quantity | Price           |
|------------------------|----------|-----------------|
| Member Dues - Member   | 1        | \$100.00        |
| Member Options: Member |          |                 |
| <b>Subtotal</b>        |          | \$100.00        |
| <b>Shipping</b>        |          | Free shipping   |
| <b>Total</b>           |          | <b>\$100.00</b> |

Mississippi Association of Chiefs of Police  
1723 University Ave, STE B, #387  
Oxford, MS 38865

**Billing Address**

Thomas Williams  
Pass Christian Police Dept.  
626 Espy Avenue  
Pass Christian, MS 39571

**Shipping Address**

Thomas Williams  
Pass Christian Police Dept.  
626 Espy Avenue  
Pass Christian, MS 39571

**Order**

|                |                                 |
|----------------|---------------------------------|
| Invoice Number | 1684                            |
| Order Number   | 40101                           |
| Order Date     | March 6, 2028                   |
| Payment Method | Pay Online                      |
| Email          | cwilliams@pass-christian.ms.gov |
| Telephone      | 2262975999                      |

| Product                 | Price    | Quantity | Total         |
|-------------------------|----------|----------|---------------|
| Member Dues             | \$100.00 | 1        | \$100.00      |
| Member Options : Member |          |          |               |
| Subtotal                |          |          | \$100.00      |
| Shipping                |          |          | Free shipping |
| Total                   |          | 1        | \$100.00      |

CA-18  
3.17.26



**Mississippi  
Association  
of Chiefs of  
Police**  
(<https://mschiefs.org>)

f (<https://www.facebook.com/mschiefs>) t (<https://twitter.com/MSPoliceC>)

[EVENTS\(HTTPS://MSCHIEFS.ORG/EVENTS/\)](https://mschiefs.org/events/) [POLICE TESTING\(HTTPS://MSCHIEFS.ORG/POLICE-TESTING/\)](https://mschiefs.org/police-testing/) [RESOURCES](#) [ABOUT](#)

# 2026 MACP SUMMER EDUCATIONAL CONFERENCE-ATTENDEE REGISTRATION

**16** 19 2026 SUMMER CONFERENCE  
JUN

## Event Details

**Annual Conference:**

**June 16-19, 2026**

**Biloxi, MS**

The Annual Conference is our primary educational conference and trade show which provides Chiefs and upper-level law enforcement executives the opportunity to receive the required (20) twenty hours of instruction.

The complete course of instruction will be added once all training is finalized.

*NOTE: When registering online please list the Chief(person attending) as the person the order is being billed to and please add the attendees current cell phone number under order notes in additional information. This will be used for voting.*

The trade show provides attendees the opportunity to interact with vendors of various types of equipment and technology available for law enforcement today.

The conference also provides for social interaction between Chiefs in an information-sharing format designed to exchange ideas and talk of common problems/solutions they are experiencing.

**Lodging: Golden Nugget – Biloxi, Mississippi**

**Group Rate available: 6/14-6/19, 2026**

### GUEST ACCOMMODATIONS

Luxury King Non-Smoking \$119.99; Luxury Two Queen Non-Smoking \$139.99, Terrace King 139.00, Terrace (2) Queen 159.00

All rates add a \$16.99 per night resort fee. Rates are subject to Harrison County room tax, currently five percent (5%), and state sales tax, currently seven percent (7%). County and state taxes are subject to change without prior notice. ALL hotel rooms are non-smoking. A \$200 charge will be assessed for smoking in a hotel room.

Guestrooms must be occupied by and registered to at least one adult who is twenty-one years of age or older. Photo Identification will be required at check-in.

Balcony rooms are available for an additional \$20.00 plus tax per night, based on availability.

Reservations accepted in excess of the room night commitment on any particular night, regardless of rate, will be applied to the overall performance of this agreement.

Requests for specific room types may be made at the time of reservation however requests such as bed type or view are based upon availability at the time of check-in and are not guaranteed. ALL hotel sleeping rooms are non-smoking.

#### Payment options:

If payment is by city check and requesting tax exemption, the check should be mailed to and received by the hotel two weeks prior to the conference check-in date along with the tax-exempt letter.

Payment by city credit card and a tax-exempt letter may be accepted at check-in with a card.

**\*\*Payment by personal credit card or cash, the hotel cannot honor a tax-exempt letter.\*\***

#### CHECK-IN AUTHORIZATIONS

Please be advised that the following payments/incidental deposits and authorizations are taken upon check-in:

Room, tax, and resort fee for the entire stay (unless billed to the master) + additional deposit(s) outlined below.

Room Type Additional Incidental Deposit Method of Payment Accepted

Standard Guestroom \$100.00 per stay Credit Card, Debit Card

All guests are required to post a credit card (or debit card) at check-in. Please advise attendees that if using a DEBIT card for incidentals/deposit at check-in, banks will put a hold on funds in the amount of \$100.00 for several days when a debit card is used, so a credit card is the recommended choice.

#### ARRIVAL/DEPARTURE

Check-in time is after 4:00 p.m. Check-Out time is by 11:00 a.m.

The Hotel will make the best effort to accommodate the requests for check-in prior to check-in time or late departures,

based upon availability. If rooms are available for check-in prior to 1:00 PM Central Time and the guest chooses to check-in, a \$15 early arrival fee will apply. If rooms are available for check-in after 1:00 PM Central Time and the guest chooses

to check-in before 4 pm, there is no additional fee.

The bell desk can store a limited amount of luggage for early arrivals and/or for late departures. For late check-out a fee may apply depending on the availability and length of the extension. Requests should be directed to the front desk on the day of departure for availability.

#### RESERVATION METHOD

The group code that you will need to share with your attendees is **\$260304**. Attendees may make their reservations by calling 1-800-777-7568 and using the group code **\$260304**, or they may click on this link (no group code needed if they use this link):

<https://goldennuggetbiloxi.reztrip.com/ext/promoRate?property=1262&mode=b&pm=true&sr=1013949&vr=3>  
(<https://goldennuggetbiloxi.reztrip.com/ext/promoRate?property=1262&mode=b&pm=true&sr=1013949&vr=3>)

The last day to make reservations will be **May 22, 2026 or until rooms run out, whichever comes first**. The resort fee is \$16.99 per night plus tax. Taxes are currently 12% on hotel rooms. When making the reservation, guest will only be charged first night's room and tax at that time. The rest will be charged upon check-in.

You may also identify yourself as being with the **MS Association of Chiefs of Police**.

**The group rate is not guaranteed to be available after the cut-off.**

All hotel rooms are non-smoking.

The Golden Nugget Biloxi requires a first night's deposit of room and tax, per room, to guarantee individual reservations. The Hotel accepts all major credit cards for the deposit and the credit card will be charged for the

stipulated room and tax at the time of reservation. Guests may cancel individual reservations up to 72-hours prior to arrival date without penalty. Cancellations received inside of 72-hours of arrival will forfeit the first night room and tax deposit. All guests will be required to provide a credit card upon check-in. Guests that do not cancel or do not check in will be charged the first night's rate, tax, and resort fee.

#### RESERVATION CUT-OFF DATE

The "cut-off date" for accepting reservations into this group block is **May 22, 2026**. Reservation requests and/or name/date change requests received after 11:59 p.m. local time at Hotel on the cut-off date will be accepted based on rate and/or category availability.

#### EARLY DEPARTURE FEE

The Hotel understands that guests may need to depart prior to the scheduled departure date. The guest will have up to the time of check-in to amend their departure date without penalty. After this time, should the guest depart earlier than indicated there will be a \$50.00 early departure fee. This charge will be posted to the individual's account

as an incidental charge unless otherwise specified on billing instructions. The Hotel will inform guests upon check-in of this fee.

#### CANCELLATION FOR INDIVIDUAL RESERVATIONS

Cancellation for an individual guaranteed guest room reservation is at least seventy-two (72) hours prior to the arrival date. Rooms released less than seventy-two (72) hours prior to arrival may be subject to a cancellation penalty equivalent to the first night's room rate, plus tax.

#### SCROLL TO THE BOTTOM OF THE PAGE TO CONTINUE REGISTRATION

In order to pay for the registration by check you must have a PO number which when entered you will have an option to pay offline which is the one to choose. An invoice will be generated and attached to the order receipt email. You must create a separate order for each person attending. You can no longer add someone as a guest.

#### 🕒 Time

June 16, 2026 1:00 pm - June 19, 2026 12:00 pm (GMT-05:00)

#### 📍 Location (<https://www.goldennugget.com/biloxi>)

Golden Nugget Biloxi  
(<https://www.goldennugget.com/biloxi>)  
151 Beach Blvd (<https://www.goldennugget.com/biloxi>)

OTHER EVENTS >

CALENDAR ([https://mschiefs.org/wp-admin/admin-ajax.php?action=eventon\\_ics\\_download&event\\_id=400](https://mschiefs.org/wp-admin/admin-ajax.php?action=eventon_ics_download&event_id=400))  
GOOGLECAL (<https://www.google.com/calendar/event?action=TEMPLATE&text=2026+MACP+SUMMER+EDUCATIONAL+ATTENDEE+REGISTRATION&dates=20260616T180000Z/20260619T170000Z&ctz=america/chicago&details=2026+MACP+ATTENDEE+REGISTRATION&location=golden+nugget--biloxi151+beach+blvd>)

#### 👤 Organizer

MISSISSIPPI ASSOCIATION OF CHIEFS OF POLICE (<http://www.mschiefs.org>)

LEARN MORE >

#### 🎫 Ticket Section Title

2026 Summer Conference

PRICE

\$375.00

TOTAL PRICE

\$375.00

ADD TO CART



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## Leave a Reply

Your email address will not be published. Required fields are marked \*

Comment \*

Name \*

Email \*

Website

Post Comment



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January 30, 2026

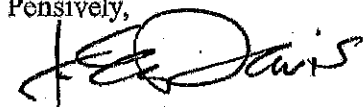
Chief Daren Freeman,

As you know, Police K9s are incredible animals that take on so many tasks that humans just can't do. They have the ability to detect explosive devices, narcotics, weapons, track fugitives and locate missing persons. These tasks often put dogs in dangerous and potentially life-threatening situations. Unlike human officers, K9s are not typically issued bulletproof vests. The K9 ballistic vests can be quite expensive and typically cost between \$2000 and \$4000. Based on available data, K-9 officer line-of-duty deaths trended upward between 2000 and 2023, with a peak of 36 reported deaths in 2016, K-9 deaths have shown a significant upward trend, with research indicating a notable increase in the 2018–2023 period compared to previous years as shown in research from Taylor & Francis Online. Having access to ballistic vests can make a difference between life and death for these dogs.

Cheatam County Tennessee Deputy Samuel Gregory is my brother-in-law and has been in law enforcement for over 20 years. Much of his time as a law enforcement officer and United States Army veteran has been spent serving his local community by working with and training K-9s. Deputy Gregory met with me in January 2026 about his desire to donate a new K-9 vest that he personally purchased to a deserving police department here on the Mississippi Gulf Coast. In my conversation with Picayune Police Officer John Salterelli, I learned that your agency was in need of a vest for your K-9 program. On behalf of Deputy Sam Gregory, I would like to donate a K-9 vest to your agency.

Donation of this vest to your department on today's date was not chosen at random. You will notice a permanent black banner on the vest that pays tribute to Pittsburgh Police Department K-9 Officer "Rocko". K9 Rocco was killed in the line of duty on January 30, 2014, while protecting his handler and another officer, who were in a violent struggle with a fugitive. The subject had attempted to disarm a deputy earlier in the day when an Allegheny County sheriff's deputy attempted to arrest him for failure to register as a sex offender and home invasion. The man was able to flee after struggling with the deputy. Officer located the man in the basement of a building. When they entered the darkened room, the man began swinging a 5-inch knife at them, wounding both officers. K9 Rocco attacked the subject but suffered a deep stab wound to the back, which punctured his kidney and spine. K9 Rocco was taken to an emergency animal hospital where he underwent emergency surgery but died from his injuries. The subject was taken into custody. K9 Rocco had served with the Pittsburgh Police Department for five years. With over 33 continuous years of law enforcement myself, it is my sincere hope and prayer that it provides much needed protection to the men, women and K-9 members of your department who have chosen this honorable profession.

Pensively,



Terry E. Davis

Sue

---

**From:** STURGEON, JOHN <JOHN.STURGEON@cbp.dhs.gov>  
**Sent:** Monday, March 2, 2026 2:11 PM  
**To:** Sue  
**Cc:** Ryan  
**Subject:** RE: OPSG Updates

**Caution:** THIS IS AN EXTERNAL EMAIL AND MAY BE MALICIOUS. PLEASE TAKE CARE WHEN CLICKING LINKS OR OPENING ATTACHMENTS.

The current MOU should still be valid... I have not been told anything to the contrary.

V/R,  
John

John L. Sturgeon Jr.  
Supervisory Border Patrol Agent (Reemployed Annuitant)  
Gulfport Station  
New Orleans Sector  
(228)896-0884 Office  
(601)715-4251 Cell

**From:** Sue <[syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov)>  
**Sent:** Monday, March 2, 2026 2:09 PM  
**To:** STURGEON, JOHN <JOHN.STURGEON@cbp.dhs.gov>  
**Cc:** Ryan <[rhenry@pass-christian.ms.gov](mailto:rhenry@pass-christian.ms.gov)>  
**Subject:** RE: OPSG Updates

Microsoft Word You don't often get email from [syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov). [Learn why this is important](#)

Wonderfull

I did have one more question, do we need to sign another MOU or agreement, or is the one signed in 2024 still in standing? There were no expiration dates on the previous MOU.

Thanks again,  
Sue

**From:** STURGEON, JOHN <[JOHN.STURGEON@cbp.dhs.gov](mailto:JOHN.STURGEON@cbp.dhs.gov)>  
**Sent:** Monday, March 2, 2026 2:03 PM  
**To:** Sue <[syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov)>  
**Cc:** Ryan <[rhenry@pass-christian.ms.gov](mailto:rhenry@pass-christian.ms.gov)>  
**Subject:** RE: OPSG Updates

**Caution:** THIS IS AN EXTERNAL EMAIL AND MAY BE MALICIOUS. PLEASE TAKE CARE WHEN CLICKING LINKS OR OPENING ATTACHMENTS.

Good afternoon Sue,

The TEAOF funds are now available for your agency to utilize according to the program guidelines.

If you have any additional questions, please feel free to contact me.

Respectfully,  
John

John L. Sturgeon Jr.  
Supervisory Border Patrol Agent (Reemployed Annuitant)  
Gulfport Station  
New Orleans Sector  
(228)896-0884 Office  
(601)715-4251 Cell

**From:** Sue <[syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov)>  
**Sent:** Monday, March 2, 2026 10:42 AM  
**To:** STURGEON, JOHN <[JOHN.STURGEON@cbp.dhs.gov](mailto:JOHN.STURGEON@cbp.dhs.gov)>  
**Cc:** Ryan <[rhenry@pass-christian.ms.gov](mailto:rhenry@pass-christian.ms.gov)>  
**Subject:** FW: OPSG Updates

You don't often get email from [syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov). [Learn why this is important](#)

**CAUTION:** This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. If you feel this is a suspicious-looking email, please report by using the "Report Phishing" button option. If on a mobile device, please utilize the "Report Phishing" button or "Forward as Attachment" to [CBPSOC@cbp.dhs.gov](mailto:CBPSOC@cbp.dhs.gov).

SBPA Sturgeon,

Good morning! I wanted to confirm that our agency (Pass Christian Police Department) is able to begin TEAOF activity. Last information I was given was that our budget was \$20,000 to utilize through July 31, 2026 and that we could begin March 1, 2026. Please advise and thank you!

*Sue Young*

Assistant to Chief Daren Freeman



O. 228.363.6041 C. 228.213.7282



[syoung@pass-christian.ms.gov](mailto:syoung@pass-christian.ms.gov)



**Pass Christian Police Department**  
525 Espy Avenue, Pass Christian MS 39571

**From:** EDWARDS, CHIANTI <[CHIANTI.EDWARDS@cbp.dhs.gov](mailto:CHIANTI.EDWARDS@cbp.dhs.gov)>

**Sent:** Monday, February 9, 2026 10:59 AM

**To:** STURGEON, JOHN <[JOHN.STURGEON@cbp.dhs.gov](mailto:JOHN.STURGEON@cbp.dhs.gov)>

**Cc:** HALL, BRANDON K <[brandon.k.hall@cbp.dhs.gov](mailto:brandon.k.hall@cbp.dhs.gov)>; JOHNSON, ISRAEL N <[israel.n.johnson@cbp.dhs.gov](mailto:israel.n.johnson@cbp.dhs.gov)>

**Subject:** FW: OPSG Updates

**Caution:** THIS IS AN EXTERNAL EMAIL AND MAY BE MALICIOUS. PLEASE TAKE CARE WHEN CLICKING LINKS OR OPENING ATTACHMENTS.

Good morning, Partners,

---

I am currently on TDY until further notice. SBPA John Sturgeon will serve as your point of contact at Gulfport Station for the Stonegarden and TEOAF programs. I remain available to assist with any historical information as needed.

Chianti Edwards  
Acting Patrol Agent in Charge  
Mobile Border Patrol Station  
Cell Phone: 956-279-5700

CA-22  
3-17-26

Dear Chief Freeman,

Please accept this letter as formal notice of my resignation from my position as a Police Officer with the Pass Christian Police Department, effective March 29, 2026.

This decision was not an easy one. Due to financial reasons, I have determined that I need to pursue other opportunities at this time. I want to sincerely thank each of you for the opportunity to be a part of the City of Pass Christian Police Department. Even in the short time I have been here, it has been an honor to work alongside such a dedicated team and to serve the community with you.

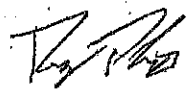
I am truly grateful for the support and professionalism I have experienced during my time with the City of Pass Christian Police Department. I have a great deal of respect for the leadership and the officers I have had the privilege of working with.

If possible, I would greatly appreciate the opportunity to remain affiliated with the City of Pass Christian Police Department in a part-time capacity. I would welcome the chance to continue working with everyone and contributing to the team when opportunities arise.

Thank you again for the opportunity and for your leadership and support. I wish the City of Pass Christian Police Department continued success, and I hope our paths cross again in the future.

Respectfully,

Rony Polizzi



BE IT REMEMBERED that the Mayor and Board of Aldermen of the City of Pass Christian, Mississippi met on the above date at the Municipal Court Bldg., 105 Hiern Avenue, Pass Christian, Mississippi, at 6:00 p.m., same being the time and place for said meeting.

PRESENT: Mayor Kenny Torgeson, Alderman at Large Victor Pickich, Alderman Barry Dreyfus, Alderman Joe Piernas, Alderman Kirk Kimball, Alderman Greg Federico, Jim Simpson, City Attorney and Marian Governor, City Clerk

There being a quorum present to transact the business of the City, the following proceedings were had and done.

Upon motion of Alderman Greg Federico and seconded by Alderman Kirk Kimball the Board unanimously approved the agenda for the March 3, 2026, Regular Board of Aldermen Meeting.

\* \* \*

Upon motion of Alderman Joe Piernas and seconded by Alderman Victor Pickich the Board unanimously approved presenting Girl Scout Week 2026 Proclamation.

\* \* \*

Upon motion of Alderman Victor Pickich and seconded by Alderman Greg Federico the Board unanimously approved special presentation from Fire Department.

\* \* \*

Upon motion of Alderman Victor Pickich and seconded by Alderman Greg Federico the Board unanimously approved hearing from Carey Welsch with Gov Deals.

\* \* \*

*ADMINISTRATIVE*

Upon motion of Alderman Joe Piernas and seconded by Alderman Victor Pickich the Board unanimously approved hearing from Melodie Hayes, City Planner, concerning Short Term rentals.

\* \* \*

Upon motion of Alderman Joe Piernas and seconded by Alderman Greg Federico the Board unanimously approved Change Order No. 1 to Krol Electric, Inc. for the Elevate and Replace Electrical and Controls at City Lift Station to increase the contract price by \$11,800, to cover costs for labor and materials necessary for the power company to install new wiring. This change order can be paid with ARPA/MCWI Grant funds Project 234, as requested by City Engineer, Bob Escher. A-2

\* \* \*

Upon motion of Alderman Kirk Kimball and seconded by Alderman Greg Federico the Board unanimously approved adopting Ordinance 715 establishing new standards for installation of flow-through decking for new construction and replacement of public piers, excluding minor repairs, in the City's Small Craft Harbor, as requested by Fire Chief Woodman. A-3

\* \* \*

The Board took no action on having the city attorney provide a default notice to the seafood dealers that have not paid their 2025-2026 lease payment, as requested by Marian Governor, City Clerk.

\* \* \*

*EVENTS*

Upon motion of Alderman Greg Federico and second by Alderman Victor Pickich the Board unanimously approved moving the Pass Market to Scenic Drive on April 4, 2026, and block off Fleitas Avenue to the property line of War Memorial Park from 7:00 a.m. to noon for annual Easter Egg Hunt, as requested by Alderman Victor Pickich.

\*

\*

\*

Upon motion of Alderman Kirk Kimball and second by Alderman Victor Pickich the Board unanimously approved request from Amy Rupert, Randolph Center renter for a wedding and reception on March 14, 2026, to donate landscaping work to be done in the courtyard gardens with an estimated value between \$1000 - \$1200. If approved, work will be scheduled for March 6 – 7, 2026. The scope of work would include the following to the center circle and 4 sections of the outdoor courtyard to be performed by Garret Garcia, Owner & Operator of Property Solutions, LLC. E-2

- Weeding
- Raking and removal of dead leaves and old mulch.
- Trimming of bushes.
- Mulching of all the sections.
- Power washing of sidewalks

\*

\*

\*

Upon motion of Alderman Joe Piernas and second by Alderman Kirk Kimball the Board approved request from the LAD Project for the following City resources on Saturday, April 25, 2026, from 10:30 a.m. to 2:30 p.m., Event will bel held at Trinity Episcopal Church, this bringing favorable notice to the resources and opportunities of the City as requested by Tammie Gray, Executive Director. The following resources are as follows: (E-3)

- -Stage
- -Cones
- -Barricades
- -Generators & Panel Board (if needed)
- - Anything deemed necessary by the Mayor

\* \* \*

Upon motion of Alderman Joe Piernas and second by Alderman Kirk Kimball the Board unanimously approved use of War Memorial Park and the Athletic Facility sportsplex on Fleitas Avenue by the Pass Christian School District March 10, 2026, from 9:00 a.m. to 2:00 p.m. This campus-wide event is to honor the students and faculty for their commitment and hard work. All concerning Department Heads have granted permission, this bringing favorable notice and opportunities to the city, as requested by Alderman Kimball. E-4

\* \* \*

Upon motion of Alderman Greg Federico and second by Alderman Kirk Kimball the Board approved request from Animal Aid MS (a Pass Christian charitable organization) to hold Bacchus Pawty on Saturday April 25, 2026, noon to 4:00 p.m. hosted by Bacchus. All concerned Dept. Heads have granted permission. The following additional resources are requested, this bringing favorable notice to the resources and opportunities of the City, as requested by Alderman Kimball.

- Blocking streets West Scenic & Hiern /Market & Scenic
- Barricades & Cones
- Use of the city's stage (If needed)
- Flatbed Trailer (If needed)
- Trash Cans
- City's Mobile restroom trailer (if needed)
- Generators & Electric panel Board
- Other needs as deemed necessary by the Mayor

\* \* \*

*CONSENT AGENDA*

*Upon motion of Alderman Greg Federico and seconded by Alderman Victor Pickich the Board unanimously approved items 1-15.*

1. Approved – Administration: awarding the best and lowest bid for Lift Station Rehabilitation – Phase II to LJ Construction, Inc. of Gulfport, MS in the amount of \$711,606.63 (GOMESA). Awarding only the base bid at this time will ensure adequate funds remain for Bayview Avenue Lift Station work, as recommended by City Engineer, Bob Escher. CA-1
2. Approved – Administration: payment to Overstreet and Associates for invoice #4145 in the amount of \$6,016.75 for 1257 North St. Gravity Sewer Phase II and III, reimbursable by GOMESA Grant, as requested by Jason Overstreet, P.E. CA-2
3. Approved - Administrative - Marian Governor attending the 2026 Municipal Clerk Spring Conference in Starkville, MS. on April 28, 2026, through May 1, 2026, with a registration fee of \$225.00, lodging of \$555.00, per diem of \$272.00 and mileage reimbursement, as requested by Mayor Torgeson. CA-3
4. Approved - Administrative: request to send Olivia Lewis to the Spring Certified Municipal Clerk seminar in Hattiesburg, MS on March 25-27, 2026. Registration fee is \$325.00, per diem \$84.00, lodging \$220.00 and mileage reimbursement \$98.60, as requested by Marian Governor, City Clerk. CA-4
5. Approved - Administrative: the surplus and disposal of the following assets: CA-5
  - Dell OptiPlex 3050 (Asset ID# 02080)
6. Approved - Court – refund request of \$724.00 to Nancy Cooley. Ms. Cooley paid a \$1500.00 cash bond at the HCADC on 2/9/2025. Ms. Cooley was heard on her charges 02/18/2026 and was ordered to pay \$776.00 which left a balance of \$724.00 be refunded, as requested by Judge Negrotto. CA-6

7. Approved - Fire – Deputy Chief Bass and Inspector Klemmer attendance to MS Fire Service Instructors Association March 24-27 in D'Iberville. \$200 Registration (001-220-610) and the use of a city vehicle., as requested by Fire Chief Woodman. CA-7
8. Approved - Fire – Chief Woodman attendance to MS Fire Investigators Conference April 15-17, 2026, \$250 Registration fee, \$301 per diem, and \$417 for hotel room (001-220-610) and the use of a city vehicle, as requested by Fire Chief Woodman. CA-8
9. Approved - Fire – request to advertise for Disaster Debris Removal and Disaster Debris monitoring services for the 2026 Hurricane Season, as requested by Fire Chief Woodman. CA-9
10. Approved - Harbor - the installation of a covered boat-lift at B10 for Jennifer Jenkins, at the tenant's expense. All construction will comply with harbor modifications guidelines and will be installed by Innovative Builders, who will obtain DMR permits before installation, as requested by James Butcher, Harbor Master.
11. Approved - Harbor – the installation of a covered boat-lift at L10 for Kyle Cassagne, at the tenant's expense. All construction will comply with harbor modifications guidelines and will be installed by A Step Above, who will obtain DMR permits before installation, as requested by James Butcher, Harbor Master.
12. Approved - Planning - a lot merger of parcel# 0313D-08-001.000 and 0313D-08-031.000 and will have a formal address of 136 Fernwood Drive. Lot 26 & 27 has previously been approved by the BOA (September 2, 2025) to have a lot split in order for the developer to sell the two parcels separately, as requested by Melodie Hayes, City Planner. CA-12
13. Approved - Planning - a lot split of parcel number 0313H-02-060.000 for 121-125 Scenic Drive, as requested by Melodie Hayes, City Planner. CA- 13

- 14. Approved - Police – recommendation to hire Kristy Boyd to fill the existing vacancy in patrol effective March 6, 2026, and a starting salary of \$21.46 per hour plus holiday pay. She has passed psychological and urinalysis. Position has a one-year probationary period. This is a budgeted position, and funds are available as confirmed, as requested by Police Chief Freeman.
- 15. Approved - Police – request to send Evidence Technician Haley Entrekin to a one-day Sexual Assault Kit Tracking & Katie's Law Training course held March 10, 2026, in Pearl MS. Tuition is free and no lodging or per diem, only mileage reimbursement for personal vehicle, as requested by Police Chief Freeman. CA-15
- 16. Approved - Police – request to reimburse Investigator Gaspar Guerra \$354.97 for suit. This reimbursement will be deducted from previously approved clothing allowance for investigators, as requested by Police Chief Freeman. CA-16
- 17. Approved – Administrative - recommendation to advertise for Receptionist/Clerk of Council to fill upcoming vacancy (June 2026), as recommended by Marian Governor, City Clerk.
- 18. Approved – Administrative - the minutes of February 17, 2026, Regular Mayor and Board of Aldermen meeting, with changes, as requested by Deputy City Clerk, Dawn Sanders. CA-18

*CLAIMS DOCKET*

Upon motion of Alderman Victor Pickich and second by Alderman Greg Federico the Board unanimously approved the Claims Docket in the amount of \$279,627.26. CD-1

\* \* \*

Upon motion of Alderman Joe Piernas and seconded by Alderman Kirk Kimball the Board unanimously approved to accept the Addendum.

\* \* \*

The Board took no action on hiring Jesse Ruzzin as Harbor Service employee at a rate of \$13.46, pending background checks and physical/drug screens, as requested by Harbormaster James Butcher.

\* \* \*

Upon motion of Alderman Joe Piernas and seconded by Alderman Victor Pickich the Board unanimously approved awarding the best and lowest bid for East Small Craft Harbor Hurricane Ida Repairs to David Rush Construction in the amount of \$1,270,533.80 as recommended by City Engineer, Bob Escher. AD-2

\* \* \*

Upon motion of Alderman Victor Pickich and seconded by Alderman Kirk Kimball the Board approved Resolution to impose a 3% special local tax upon the gross proceeds of the sales of hotels, motels, short-term rentals, the sale of prepared foods by restaurants and bars for the purpose of supporting tourism, special events, parks and recreation within the municipality, as requested by Mayor Torgeson. AD-3

|                   |     |
|-------------------|-----|
| Alderman Dreyfus  | Aye |
| Alderman Piernas  | Nay |
| Alderman Kimball  | Aye |
| Alderman Federico | Aye |
| Alderman Pickich  | Aye |

\* \* \*

Upon motion of Alderman Kirk Kimball and seconded by Alderman Victor Pickich the Board unanimously approved amended Development Agreement for Whispering Oaks Subdivision Phase II. AD-4

\* \* \*

Upon motion of Alderman Kirk Kimball and seconded by Alderman Greg Federico the Board unanimously approved awarding the best and lowest bid to Gulf Coast Solutions, LLC in the amount

of \$659,699.50 for the infrastructure of Whispering Oaks Phase II of which \$500,000 will be paid from SB2468 and the developer will reimburse the City for the balance and any future change orders, as recommended by City Engineer, Bob Escher. AD-5

\* \* \*

Upon motion of Alderman Greg Federico and seconded by Alderman Barry Dreyfus the Board unanimously approved the MOU between the City of Pass Christian and Ms. Department of Marine Services for the 2024 GOMESA Highway 90 Hurricane Mitigation Phase II project in the amount of \$2,810,000.00. AD-6

\* \* \*

Upon motion of Alderman Victor Pickich the Board unanimously approved going into Closed Session to determine going into Executive Session regarding potential litigation.

\* \* \*

Upon motion of Alderman Greg Federico and seconded by Alderman Victor Pickich the Board unanimously approved coming out of Closed Session.

\* \* \*

Upon motion of Alderman Greg Federico and seconded by Alderman Victor Pickich the Board unanimously approved going into Executive Session to discuss potential litigation.

\* \* \*

Upon motion of Alderman Victor Pickich and seconded by Alderman Greg Federico the Board unanimously approved coming out of Executive Session.

\* \* \*

The Board took no action in Executive Session only received update from City Attorney, Jim Simpson on potential litigation.

\*

\*

\*

Upon motion of Alderman Greg Federico and seconded by Alderman Joe Piernas the Board unanimously approved to recess at 7:46 p.m. until the next Mayor and Board of Aldermen meeting on March 17, 2026.

\*

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\_\_\_\_\_  
Mayor

3-17-2026  
\_\_\_\_\_  
Date

\_\_\_\_\_  
City Clerk

3-17-2026  
\_\_\_\_\_  
Date



|                                 | Original<br>Total Budget         | Current<br>Total Budget | Period<br>Activity  | Fiscal<br>Activity  | Variance<br>(Unfavorable) | Percent<br>Remaining        |
|---------------------------------|----------------------------------|-------------------------|---------------------|---------------------|---------------------------|-----------------------------|
| <b>Fund: 001 - GENERAL FUND</b> |                                  |                         |                     |                     |                           |                             |
| <b>Revenue</b>                  |                                  |                         |                     |                     |                           |                             |
| <a href="#">001-000-179</a>     | UMI SHARING                      | 5,000.00                | 5,000.00            | 124.00              | 401.25                    | -4,598.75 91.98 %           |
| <a href="#">001-000-200</a>     | AD VALOREM TAXES- CURRENT YEAR   | 4,412,897.00            | 4,412,897.00        | 2,093,460.54        | 3,131,395.60              | -1,281,501.40 29.04 %       |
| <a href="#">001-000-201</a>     | AD VALOREM TAXES- AUTOMOBILE     | 539,444.00              | 539,444.00          | 50,297.49           | 224,630.06                | -314,813.94 58.36 %         |
| <a href="#">001-000-203</a>     | AD VALOREM TAXES- PRIOR YEAR     | 100,000.00              | 100,000.00          | 697.51              | 6,699.72                  | -93,300.28 93.30 %          |
| <a href="#">001-000-210</a>     | PENALTIES & INTEREST ON TAXES    | 25,000.00               | 25,000.00           | 0.00                | 0.00                      | -25,000.00 100.00 %         |
| <a href="#">001-000-220</a>     | PRIVILEGE LICENSES               | 12,500.00               | 12,500.00           | 353.01              | 4,651.48                  | -7,848.52 62.79 %           |
| <a href="#">001-000-221</a>     | FRANCHISE CHARGES- MISS. POWER   | 305,000.00              | 305,000.00          | 0.00                | 172,309.56                | -132,690.44 43.51 %         |
| <a href="#">001-000-222</a>     | FRANCHISE CHARGES- CABLE ONE     | 50,000.00               | 50,000.00           | 6,310.85            | 13,040.94                 | -36,959.06 73.92 %          |
| <a href="#">001-000-224</a>     | FRANCHISE FEES CENTERPOINT EN... | 18,000.00               | 18,000.00           | 0.00                | 0.00                      | -18,000.00 100.00 %         |
| <a href="#">001-000-225</a>     | FRANCHISE FEES AT&T              | 6,000.00                | 6,000.00            | 919.18              | 1,879.78                  | -4,120.22 68.67 %           |
| <a href="#">001-000-226</a>     | SHORT TERM RENTAL FEES           | 40,000.00               | 40,000.00           | 3,200.00            | 26,400.00                 | -13,600.00 34.00 %          |
| <a href="#">001-000-227</a>     | GOLF CART REGISTRATION FEES      | 8,000.00                | 8,000.00            | 200.00              | 2,500.00                  | -5,500.00 68.75 %           |
| <a href="#">001-000-228</a>     | PLANNING DEPT FEES               | 10,000.00               | 10,000.00           | 216.00              | 2,594.00                  | -7,406.00 74.06 %           |
| <a href="#">001-000-229</a>     | BUILDING PERMITS                 | 250,000.00              | 250,000.00          | 22,433.87           | 105,502.75                | -144,497.25 57.80 %         |
| <a href="#">001-000-250</a>     | MUNICIPAL AID                    | 8,000.00                | 8,000.00            | 0.00                | 6,841.28                  | -1,158.72 14.48 %           |
| <a href="#">001-000-251</a>     | HOMESTEAD EXEMPTION REIMBER...   | 151,000.00              | 151,000.00          | 0.00                | 0.00                      | -151,000.00 100.00 %        |
| <a href="#">001-000-260</a>     | GENERAL SALES TAX                | 2,050,000.00            | 2,050,000.00        | 183,774.79          | 912,495.03                | -1,137,504.97 55.49 %       |
| <a href="#">001-000-261</a>     | ALCOHOLIC BEVERAGE LICENSES      | 21,000.00               | 21,000.00           | 1,575.00            | 9,449.99                  | -11,550.01 55.00 %          |
| <a href="#">001-000-271</a>     | COUNTY ROAD TAX                  | 87,000.00               | 87,000.00           | 16,191.82           | 22,242.68                 | -64,757.32 74.43 %          |
| <a href="#">001-000-280</a>     | COLLECTION FEE SCHOOL TAXES      | 17,000.00               | 17,000.00           | 0.00                | 0.00                      | -17,000.00 100.00 %         |
| <a href="#">001-000-281</a>     | ADMINISTRATION FEE ENTERPRISE    | 40,000.00               | 40,000.00           | 0.00                | 0.00                      | -40,000.00 100.00 %         |
| <a href="#">001-000-282</a>     | SCHOOL RESOURCE OFFICER REIM...  | 130,000.00              | 130,000.00          | 0.00                | 19,749.26                 | -110,250.74 84.81 %         |
| <a href="#">001-000-313</a>     | FOOTBALL REGISTRATION/GATE FE... | 7,000.00                | 7,000.00            | 686.00              | 2,419.00                  | -4,581.00 65.44 %           |
| <a href="#">001-000-314</a>     | PARK BUSINESS RENTALS            | 1,000.00                | 1,000.00            | 0.00                | 325.00                    | -675.00 67.50 %             |
| <a href="#">001-000-315</a>     | TENNIS FEES                      | 1,000.00                | 1,000.00            | 0.00                | 0.00                      | -1,000.00 100.00 %          |
| <a href="#">001-000-316</a>     | PARK REC BASEBALL/BASKETBALL     | 4,000.00                | 4,000.00            | 0.00                | 444.00                    | -3,556.00 88.90 %           |
| <a href="#">001-000-317</a>     | RANDOLPH SCHOOL RENTAL FEES      | 10,000.00               | 10,000.00           | 375.00              | 3,783.30                  | -6,216.70 62.17 %           |
| <a href="#">001-000-318</a>     | PARK/REC CHEERLEADING            | 2,750.00                | 2,750.00            | 0.00                | 0.00                      | -2,750.00 100.00 %          |
| <a href="#">001-000-319</a>     | PARK/REC CONCESSIONS             | 1,000.00                | 1,000.00            | 0.00                | 0.00                      | -1,000.00 100.00 %          |
| <a href="#">001-000-320</a>     | SOCCER/KICKBALL REGISTRATION     | 1,500.00                | 1,500.00            | 0.00                | 0.00                      | -1,500.00 100.00 %          |
| <a href="#">001-000-330</a>     | POLICE FINES/FEES                | 75,000.00               | 75,000.00           | 10,376.07           | 47,406.33                 | -27,593.67 36.79 %          |
| <a href="#">001-000-339</a>     | CCTC INTEREST EARNED             | 5,000.00                | 5,000.00            | 0.00                | 12,944.59                 | 7,944.59 258.89 %           |
| <a href="#">001-000-340</a>     | INTEREST EARNINGS                | 145,000.00              | 145,000.00          | 7,646.88            | 51,517.97                 | -93,482.03 64.47 %          |
| <a href="#">001-000-342</a>     | DONATIONS - PRIVATE SOURCE UNR   | 10,000.00               | 10,000.00           | 0.00                | 4,500.00                  | -5,500.00 55.00 %           |
| <a href="#">001-000-344</a>     | INSURANCE PROCEEDS               | 15,000.00               | 15,000.00           | 0.00                | 6,457.04                  | -8,542.96 56.95 %           |
| <a href="#">001-000-346</a>     | TREE PLANTING ORDINANCE          | 7,500.00                | 7,500.00            | 578.00              | 2,601.00                  | -4,899.00 65.32 %           |
| <a href="#">001-000-347</a>     | BURN PERMIT                      | 0.00                    | 0.00                | 0.00                | 200.00                    | 200.00 0.00 %               |
| <a href="#">001-000-356</a>     | POLICE ACCIDENT REPORT FEES      | 1,000.00                | 1,000.00            | 0.00                | 0.00                      | -1,000.00 100.00 %          |
| <a href="#">001-000-357</a>     | POLICE FINGER PRINT FEES         | 1,000.00                | 1,000.00            | 0.00                | 0.00                      | -1,000.00 100.00 %          |
| <a href="#">001-000-358</a>     | SUNDRY INCOME                    | 10,000.00               | 10,000.00           | 2,740.36            | 5,366.74                  | -4,633.26 46.33 %           |
| <a href="#">001-000-394</a>     | SALE OF SURPLUS ITEMS            | 7,500.00                | 7,500.00            | 0.00                | 0.00                      | -7,500.00 100.00 %          |
|                                 | <b>Revenue Total:</b>            | <b>8,591,091.00</b>     | <b>8,591,091.00</b> | <b>2,402,156.37</b> | <b>4,800,748.35</b>       | <b>-3,790,342.65 44.12%</b> |
| <b>Expense</b>                  |                                  |                         |                     |                     |                           |                             |
| <a href="#">001-100-401</a>     | SALARY - DEPARTMENT HEAD         | 41,754.18               | 52,464.36           | 4,119.30            | 22,656.15                 | 29,808.21 56.82 %           |
| <a href="#">001-100-460</a>     | STATE RETIREMENT                 | 7,734.96                | 9,719.02            | 758.00              | 4,169.00                  | 5,550.02 57.10 %            |
| <a href="#">001-100-470</a>     | FICA                             | 3,194.19                | 4,013.52            | 304.32              | 1,679.15                  | 2,334.37 58.16 %            |
| <a href="#">001-100-480</a>     | EMPLOYEE GROUP INSURANCE         | 12,399.36               | 12,430.76           | 1,024.34            | 5,121.70                  | 7,309.06 58.80 %            |
| <a href="#">001-100-481</a>     | CLINIC SERVICES                  | 0.00                    | 25.00               | 0.00                | 25.00                     | 0.00 0.00 %                 |
| <a href="#">001-100-491</a>     | WORKERS' COMPENSATION            | 1,000.00                | 1,000.00            | 0.00                | 1,000.00                  | 0.00 0.00 %                 |
| <a href="#">001-100-505</a>     | GENERAL SUPPLIES & EXPENSE       | 50.00                   | 50.00               | 0.00                | 12.45                     | 37.55 75.10 %               |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|                             |                               | <b>Original</b>     | <b>Current</b>      | <b>Period</b>   | <b>Fiscal</b>   | <b>Variance</b>      | <b>Percent</b>   |
|-----------------------------|-------------------------------|---------------------|---------------------|-----------------|-----------------|----------------------|------------------|
|                             |                               | <b>Total Budget</b> | <b>Total Budget</b> | <b>Activity</b> | <b>Activity</b> | <b>(Unfavorable)</b> | <b>Remaining</b> |
| <a href="#">001-100-610</a> | TRAINING & TRAVEL             | 1,500.00            | 1,500.00            | 0.00            | 1,377.52        | 122.48               | 8.17 %           |
| <a href="#">001-101-403</a> | SALARY - CLERICAL             | 77,385.06           | 77,385.06           | 5,836.80        | 33,602.40       | 43,782.66            | 56.58 %          |
| <a href="#">001-101-404</a> | SALARY - REGULAR              | 15,128.34           | 15,128.34           | 1,163.72        | 6,400.46        | 8,727.88             | 57.69 %          |
| <a href="#">001-101-408</a> | SALARY - MUNICIPAL JUDGE      | 21,950.08           | 21,950.08           | 1,573.08        | 10,651.94       | 11,298.14            | 51.47 %          |
| <a href="#">001-101-460</a> | STATE RETIREMENT              | 21,204.36           | 21,204.36           | 1,577.52        | 9,320.36        | 11,884.00            | 56.05 %          |
| <a href="#">001-101-470</a> | FICA                          | 8,756.46            | 8,756.46            | 600.36          | 3,679.40        | 5,077.06             | 57.98 %          |
| <a href="#">001-101-480</a> | EMPLOYEE GROUP INSURANCE      | 21,633.66           | 21,633.66           | 2,075.24        | 9,417.06        | 12,216.60            | 56.47 %          |
| <a href="#">001-101-481</a> | CLINIC SERVICES               | 600.00              | 600.00              | 50.00           | 250.00          | 350.00               | 58.33 %          |
| <a href="#">001-101-491</a> | COURT                         | 1,600.00            | 1,600.00            | 0.00            | 1,600.00        | 0.00                 | 0.00 %           |
| <a href="#">001-101-500</a> | OFFICE SUPPLIES               | 2,000.00            | 2,000.00            | 154.20          | 154.20          | 1,845.80             | 92.29 %          |
| <a href="#">001-101-560</a> | REPAIRS & MAINTENANCE         | 0.00                | 0.00                | 0.00            | 0.10            | -0.10                | 0.00 %           |
| <a href="#">001-101-600</a> | CONTRACTUAL SERVICES          | 2,500.00            | 2,500.00            | 0.00            | 0.00            | 2,500.00             | 100.00 %         |
| <a href="#">001-101-601</a> | LEGAL SERVICES                | 3,000.00            | 3,000.00            | 400.00          | 600.00          | 2,400.00             | 80.00 %          |
| <a href="#">001-101-610</a> | TRAINING & TRAVEL             | 250.00              | 250.00              | 0.00            | 0.00            | 250.00               | 100.00 %         |
| <a href="#">001-102-401</a> | SALARY - DEPARTMENT HEAD      | 57,750.00           | 57,750.00           | 4,442.30        | 24,432.65       | 33,317.35            | 57.69 %          |
| <a href="#">001-102-460</a> | STATE RETIREMENT              | 10,698.17           | 10,698.17           | 817.38          | 4,495.59        | 6,202.58             | 57.98 %          |
| <a href="#">001-102-470</a> | FICA                          | 4,417.87            | 4,417.87            | 337.64          | 1,858.12        | 2,559.75             | 57.94 %          |
| <a href="#">001-102-480</a> | EMPLOYEE GROUP INSURANCE      | 6,115.08            | 6,115.08            | 507.96          | 2,539.80        | 3,575.28             | 58.47 %          |
| <a href="#">001-102-481</a> | CLINIC SERVICES               | 300.00              | 300.00              | 0.00            | 0.00            | 300.00               | 100.00 %         |
| <a href="#">001-102-491</a> | EXECUTIVE OFFICE              | 900.00              | 900.00              | 0.00            | 900.00          | 0.00                 | 0.00 %           |
| <a href="#">001-102-525</a> | FUEL                          | 1,200.00            | 1,200.00            | 50.13           | 257.66          | 942.34               | 78.53 %          |
| <a href="#">001-102-610</a> | TRAINING & TRAVEL             | 1,500.00            | 1,500.00            | 0.00            | 1,131.00        | 369.00               | 24.60 %          |
| <a href="#">001-105-401</a> | SALARY - DEPARTMENT HEAD      | 80,000.12           | 80,000.12           | 6,225.00        | 35,812.21       | 44,187.91            | 55.23 %          |
| <a href="#">001-105-403</a> | SALARY - CLERICAL             | 97,381.12           | 97,381.12           | 2,907.20        | 33,693.54       | 63,687.58            | 65.40 %          |
| <a href="#">001-105-450</a> | SALARY - OVERTIME             | 20,000.00           | 20,000.00           | 5,728.12        | 18,762.19       | 1,237.81             | 6.19 %           |
| <a href="#">001-105-460</a> | STATE RETIREMENT              | 32,859.88           | 32,859.88           | 2,734.30        | 16,133.24       | 16,726.64            | 50.90 %          |
| <a href="#">001-105-470</a> | FICA                          | 13,569.67           | 13,569.67           | 1,043.81        | 6,242.60        | 7,327.07             | 54.00 %          |
| <a href="#">001-105-480</a> | EMPLOYEE GROUP INSURANCE      | 24,596.94           | 24,596.94           | 2,305.41        | 12,130.43       | 12,466.51            | 50.68 %          |
| <a href="#">001-105-481</a> | CLINIC SERVICES               | 900.00              | 900.00              | 50.00           | 250.00          | 650.00               | 72.22 %          |
| <a href="#">001-105-491</a> | CITY HALL                     | 2,300.00            | 2,300.00            | 0.00            | 1,800.00        | 500.00               | 21.74 %          |
| <a href="#">001-105-500</a> | OFFICE SUPPLIES               | 3,000.00            | 3,000.00            | 73.99           | 354.02          | 2,645.98             | 88.20 %          |
| <a href="#">001-105-505</a> | GENERAL SUPPLIES & EXPENSE    | 12,000.00           | 12,000.00           | 305.53          | 1,055.33        | 10,944.67            | 91.21 %          |
| <a href="#">001-105-506</a> | LITIGATION & CLAIM DAMAGES    | 5,000.00            | 5,000.00            | 0.00            | 0.00            | 5,000.00             | 100.00 %         |
| <a href="#">001-105-510</a> | JANITORIAL SUPPLIES & EXPENSE | 500.00              | 500.00              | 0.00            | 302.72          | 197.28               | 39.46 %          |
| <a href="#">001-105-525</a> | FUEL                          | 250.00              | 250.00              | 0.00            | 0.00            | 250.00               | 100.00 %         |
| <a href="#">001-105-600</a> | CONTRACTUAL SERVICES          | 50,000.00           | 50,000.00           | 5,830.18        | 15,120.85       | 34,879.15            | 69.76 %          |
| <a href="#">001-105-601</a> | LEGAL SERVICES                | 70,000.00           | 70,000.00           | 5,902.50        | 31,296.00       | 38,704.00            | 55.29 %          |
| <a href="#">001-105-603</a> | OTHER CONTRACTUAL             | 4,000.00            | 4,000.00            | 0.00            | 0.00            | 4,000.00             | 100.00 %         |
| <a href="#">001-105-604</a> | AUDITOR & ACCOUNTANT          | 40,000.00           | 40,000.00           | 0.00            | 0.00            | 40,000.00            | 100.00 %         |
| <a href="#">001-105-606</a> | POSTAGE                       | 7,500.00            | 7,500.00            | 519.64          | 1,454.06        | 6,045.94             | 80.61 %          |
| <a href="#">001-105-610</a> | TRAINING & TRAVEL             | 2,500.00            | 2,500.00            | 325.00          | 1,494.00        | 1,006.00             | 40.24 %          |
| <a href="#">001-105-615</a> | ADVERTISING                   | 8,000.00            | 8,000.00            | 259.60          | 1,521.72        | 6,478.28             | 80.98 %          |
| <a href="#">001-105-620</a> | INSURANCE                     | 475,000.00          | 475,000.00          | 0.00            | 41,869.24       | 433,130.76           | 91.19 %          |
| <a href="#">001-105-625</a> | UTILITIES-ELECTRICAL          | 25,000.00           | 25,000.00           | 1,638.43        | 7,879.85        | 17,120.15            | 68.48 %          |
| <a href="#">001-105-646</a> | CONTRACTUAL ANIMAL CONTROL    | 10,000.00           | 13,223.80           | 794.26          | 7,195.10        | 6,028.70             | 45.59 %          |
| <a href="#">001-107-600</a> | CONTRACTUAL SERVICES          | 125,000.00          | 125,000.00          | 22,107.84       | 54,569.70       | 70,430.30            | 56.34 %          |
| <a href="#">001-107-605</a> | TELEPHONE                     | 60,000.00           | 60,000.00           | 1,138.68        | 18,245.68       | 41,754.32            | 69.59 %          |
| <a href="#">001-107-628</a> | UTILITIES-CABLE               | 31,000.00           | 31,000.00           | 2,806.93        | 15,630.06       | 15,369.94            | 49.58 %          |
| <a href="#">001-107-639</a> | RENTALS                       | 8,000.00            | 8,000.00            | 467.49          | 2,117.38        | 5,882.62             | 73.53 %          |
| <a href="#">001-107-919</a> | MACHINERY AND EQUIPMENT       | 2,000.00            | 2,000.00            | 0.00            | 0.00            | 2,000.00             | 100.00 %         |
| <a href="#">001-108-600</a> | CONTRACTUAL SERVICES          | 50,000.00           | 50,000.00           | 2,106.00        | 8,258.90        | 41,741.10            | 83.48 %          |
| <a href="#">001-108-613</a> | VOLUNTEER FIRE DEPT.          | 2,000.00            | 2,000.00            | 0.00            | 2,000.00        | 0.00                 | 0.00 %           |
| <a href="#">001-108-614</a> | POLICE RESERVES               | 2,000.00            | 2,000.00            | 0.00            | 0.00            | 2,000.00             | 100.00 %         |
| <a href="#">001-108-615</a> | ADVERTISING                   | 17,500.00           | 17,500.00           | 2,359.89        | 7,486.26        | 10,013.74            | 57.22 %          |
| <a href="#">001-110-401</a> | SALARY - DEPARTMENT HEAD      | 56,120.00           | 56,120.00           | 4,240.00        | 24,320.01       | 31,799.99            | 56.66 %          |
| <a href="#">001-110-403</a> | SALARY - CLERICAL             | 38,856.00           | 38,856.00           | 2,912.00        | 16,988.70       | 21,867.30            | 56.28 %          |
| <a href="#">001-110-404</a> | SALARY - REGULAR              | 18,016.50           | 18,016.50           | 1,321.32        | 9,191.03        | 8,825.47             | 48.99 %          |
| <a href="#">001-110-409</a> | PLANNING                      | 46,790.02           | 46,790.02           | 3,600.01        | 19,800.04       | 26,989.98            | 57.68 %          |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|                             |                                 | <b>Original</b>     | <b>Current</b>      | <b>Period</b>   | <b>Fiscal</b>   | <b>Variance</b>      | <b>Percent</b>   |
|-----------------------------|---------------------------------|---------------------|---------------------|-----------------|-----------------|----------------------|------------------|
|                             |                                 | <b>Total Budget</b> | <b>Total Budget</b> | <b>Activity</b> | <b>Activity</b> | <b>(Unfavorable)</b> | <b>Remaining</b> |
| <a href="#">001-110-460</a> | STATE RETIREMENT                | 29,599.71           | 29,599.71           | 1,978.36        | 11,243.96       | 18,355.75            | 62.01 %          |
| <a href="#">001-110-470</a> | FICA                            | 12,223.36           | 12,223.36           | 888.62          | 5,203.00        | 7,020.36             | 57.43 %          |
| <a href="#">001-110-480</a> | EMPLOYEE GROUP INSURANCE        | 21,633.66           | 21,633.66           | 1,802.84        | 9,014.20        | 12,619.46            | 58.33 %          |
| <a href="#">001-110-481</a> | CLINIC SERVICES                 | 900.00              | 900.00              | 75.00           | 375.00          | 525.00               | 58.33 %          |
| <a href="#">001-110-490</a> | UNEMPLOYMENT CONTRIBUTION       | 7,800.00            | 7,800.00            | 0.00            | 1,175.00        | 6,625.00             | 84.94 %          |
| <a href="#">001-110-491</a> | CODE OFFICE                     | 2,750.00            | 2,750.00            | 0.00            | 2,750.00        | 0.00                 | 0.00 %           |
| <a href="#">001-110-500</a> | OFFICE SUPPLIES                 | 2,000.00            | 2,000.00            | 0.00            | 307.68          | 1,692.32             | 84.62 %          |
| <a href="#">001-110-505</a> | GENERAL SUPPLIES & EXPENSE      | 2,000.00            | 2,000.00            | 0.00            | 475.24          | 1,524.76             | 76.24 %          |
| <a href="#">001-110-510</a> | JANITORIAL SUPPLIES & EXPENSE   | 250.00              | 250.00              | 0.00            | 11.22           | 238.78               | 95.51 %          |
| <a href="#">001-110-525</a> | FUEL                            | 2,500.00            | 2,500.00            | 35.44           | 244.83          | 2,255.17             | 90.21 %          |
| <a href="#">001-110-535</a> | UNIFORMS                        | 500.00              | 500.00              | 0.00            | 0.00            | 500.00               | 100.00 %         |
| <a href="#">001-110-560</a> | REPAIRS & MAINTENANCE           | 2,000.00            | 2,000.00            | 0.00            | 565.59          | 1,434.41             | 71.72 %          |
| <a href="#">001-110-571</a> | TIRES & TUBES                   | 750.00              | 750.00              | 0.00            | 0.00            | 750.00               | 100.00 %         |
| <a href="#">001-110-600</a> | CONTRACTUAL SERVICES            | 16,000.00           | 16,000.00           | 1,401.37        | 2,844.10        | 13,155.90            | 82.22 %          |
| <a href="#">001-110-610</a> | TRAINING & TRAVEL               | 10,000.00           | 10,000.00           | 0.00            | 1,371.42        | 8,628.58             | 86.29 %          |
| <a href="#">001-200-401</a> | SALARY - DEPARTMENT HEAD        | 71,050.00           | 71,050.00           | 5,350.00        | 30,925.01       | 40,124.99            | 56.47 %          |
| <a href="#">001-200-402</a> | SALARY - ASSISTANT DEPT HEAD    | 62,490.06           | 62,490.06           | 4,691.54        | 27,303.47       | 35,186.59            | 56.31 %          |
| <a href="#">001-200-403</a> | SALARY - CLERICAL               | 39,269.47           | 39,269.47           | 2,905.60        | 17,480.80       | 21,788.67            | 55.49 %          |
| <a href="#">001-200-404</a> | SALARY - REGULAR                | 1,050,263.01        | 1,049,362.93        | 58,575.46       | 313,041.20      | 736,321.73           | 70.17 %          |
| <a href="#">001-200-405</a> | DISPATCH                        | 201,684.40          | 201,684.40          | 16,562.76       | 92,084.05       | 109,600.35           | 54.34 %          |
| <a href="#">001-200-414</a> | SCHOOL RESOURCE OFFICER         | 138,754.25          | 138,754.25          | 4,055.62        | 34,008.86       | 104,745.39           | 75.49 %          |
| <a href="#">001-200-450</a> | SALARY - OVERTIME               | 60,000.00           | 60,000.00           | 5,385.72        | 42,070.76       | 17,929.24            | 29.88 %          |
| <a href="#">001-200-460</a> | STATE RETIREMENT                | 289,640.45          | 289,640.45          | 18,623.32       | 104,114.30      | 185,526.15           | 64.05 %          |
| <a href="#">001-200-470</a> | FICA                            | 119,608.61          | 119,608.61          | 7,477.67        | 42,199.20       | 77,409.41            | 64.72 %          |
| <a href="#">001-200-480</a> | EMPLOYEE GROUP INSURANCE        | 207,676.98          | 207,676.98          | 9,959.34        | 55,835.78       | 151,841.20           | 73.11 %          |
| <a href="#">001-200-481</a> | CLINIC SERVICES                 | 9,900.00            | 9,900.00            | 575.00          | 2,952.66        | 6,947.34             | 70.18 %          |
| <a href="#">001-200-490</a> | UNEMPLOYMENT CONTRIBUTION       | 0.00                | 900.08              | 900.08          | 900.08          | 0.00                 | 0.00 %           |
| <a href="#">001-200-491</a> | POLICE DEPT                     | 56,000.00           | 56,000.00           | 0.00            | 45,000.00       | 11,000.00            | 19.64 %          |
| <a href="#">001-200-500</a> | OFFICE SUPPLIES                 | 5,000.00            | 5,000.00            | 7.28            | 1,100.81        | 3,899.19             | 77.98 %          |
| <a href="#">001-200-505</a> | GENERAL SUPPLIES & EXPENSE      | 23,000.00           | 23,000.00           | 1,385.39        | 4,578.65        | 18,421.35            | 80.09 %          |
| <a href="#">001-200-520</a> | PRISONER EXPENSE                | 40,000.00           | 40,000.00           | 2,589.88        | 8,949.88        | 31,050.12            | 77.63 %          |
| <a href="#">001-200-525</a> | FUEL                            | 75,000.00           | 75,000.00           | 3,683.62        | 17,284.05       | 57,715.95            | 76.95 %          |
| <a href="#">001-200-535</a> | UNIFORMS                        | 17,500.00           | 17,500.00           | 415.87          | 2,918.65        | 14,581.35            | 83.32 %          |
| <a href="#">001-200-560</a> | REPAIRS & MAINTENANCE           | 42,580.00           | 42,580.00           | 12,717.74       | 38,116.97       | 4,463.03             | 10.48 %          |
| <a href="#">001-200-571</a> | TIRES & TUBES                   | 9,000.00            | 9,000.00            | 0.00            | 675.38          | 8,324.62             | 92.50 %          |
| <a href="#">001-200-600</a> | CONTRACTUAL SERVICES            | 115,000.00          | 115,000.00          | 2,141.29        | 122,785.96      | -7,785.96            | -6.77 %          |
| <a href="#">001-200-610</a> | TRAINING & TRAVEL               | 15,000.00           | 15,000.00           | 465.50          | 4,462.00        | 10,538.00            | 70.25 %          |
| <a href="#">001-200-625</a> | UTILITIES-ELECTRICAL            | 51,000.00           | 51,000.00           | 2,616.42        | 10,974.12       | 40,025.88            | 78.48 %          |
| <a href="#">001-200-919</a> | MACHINERY AND EQUIPMENT         | 0.00                | 11,779.20           | 0.00            | 11,379.20       | 400.00               | 3.40 %           |
| <a href="#">001-220-401</a> | SALARY - DEPARTMENT HEAD        | 69,410.09           | 69,410.09           | 5,185.40        | 30,519.71       | 38,890.38            | 56.03 %          |
| <a href="#">001-220-402</a> | SALARY - ASSISTANT DEPT HEAD    | 63,803.52           | 63,803.52           | 4,754.12        | 28,147.67       | 35,655.85            | 55.88 %          |
| <a href="#">001-220-403</a> | SALARY - CLERICAL               | 38,937.60           | 38,937.60           | 2,995.20        | 16,473.60       | 22,464.00            | 57.69 %          |
| <a href="#">001-220-404</a> | SALARY - REGULAR                | 982,196.26          | 982,196.26          | 74,127.59       | 425,234.21      | 556,962.05           | 56.71 %          |
| <a href="#">001-220-450</a> | SALARY - OVERTIME               | 15,000.00           | 15,000.00           | 0.00            | 2,243.46        | 12,756.54            | 85.04 %          |
| <a href="#">001-220-460</a> | STATE RETIREMENT                | 213,842.87          | 213,842.87          | 15,965.29       | 92,105.25       | 121,737.62           | 56.93 %          |
| <a href="#">001-220-470</a> | FICA                            | 88,307.58           | 88,307.58           | 6,435.83        | 37,499.58       | 50,808.00            | 57.54 %          |
| <a href="#">001-220-480</a> | EMPLOYEE GROUP INSURANCE        | 139,699.62          | 139,699.62          | 11,775.90       | 54,001.70       | 85,697.92            | 61.34 %          |
| <a href="#">001-220-481</a> | CLINIC SERVICES                 | 7,800.00            | 7,800.00            | 537.50          | 2,622.34        | 5,177.66             | 66.38 %          |
| <a href="#">001-220-491</a> | FIRE DEPT                       | 54,000.00           | 54,000.00           | 0.00            | 38,045.31       | 15,954.69            | 29.55 %          |
| <a href="#">001-220-500</a> | OFFICE SUPPLIES                 | 1,300.00            | 1,300.00            | 3.72            | 128.43          | 1,171.57             | 90.12 %          |
| <a href="#">001-220-505</a> | GENERAL SUPPLIES & EXPENSE      | 14,000.00           | 14,000.00           | 211.58          | 1,127.35        | 12,872.65            | 91.95 %          |
| <a href="#">001-220-510</a> | JANITORIAL SUPPLIES & EXPENSE   | 2,000.00            | 2,000.00            | 53.39           | 123.43          | 1,876.57             | 93.83 %          |
| <a href="#">001-220-525</a> | FUEL                            | 30,000.00           | 30,000.00           | 1,125.82        | 5,620.79        | 24,379.21            | 81.26 %          |
| <a href="#">001-220-535</a> | UNIFORMS                        | 13,250.00           | 13,250.00           | 581.15          | 2,080.93        | 11,169.07            | 84.29 %          |
| <a href="#">001-220-560</a> | REPAIRS & MAINTENANCE           | 16,800.00           | 29,714.08           | 456.66          | 3,110.56        | 26,603.52            | 89.53 %          |
| <a href="#">001-220-561</a> | BUILDING REPAIRS AND MAINTEN... | 18,000.00           | 18,000.00           | 3,267.15        | 5,073.34        | 12,926.66            | 71.81 %          |
| <a href="#">001-220-571</a> | TIRES & TUBES                   | 6,500.00            | 6,500.00            | 0.00            | 0.00            | 6,500.00             | 100.00 %         |
| <a href="#">001-220-600</a> | CONTRACTUAL SERVICES            | 12,500.00           | 12,500.00           | 500.00          | 934.00          | 11,566.00            | 92.53 %          |

Budget Report

For Fiscal: 2025-2026 Period Ending: 02/28/2026

|                             |                                 | Original<br>Total Budget | Current<br>Total Budget | Period<br>Activity | Fiscal<br>Activity | Variance<br>Favorable<br>(Unfavorable) | Percent<br>Remaining |
|-----------------------------|---------------------------------|--------------------------|-------------------------|--------------------|--------------------|--|----------------------|
| <a href="#">001-220-610</a> | TRAINING & TRAVEL               | 20,000.00                | 20,000.00               | 1,792.00           | 5,779.76           | 14,220.24                              | 71.10 %              |
| <a href="#">001-220-625</a> | UTILITIES-ELECTRICAL            | 14,000.00                | 14,000.00               | 936.24             | 4,743.21           | 9,256.79                               | 66.12 %              |
| <a href="#">001-220-627</a> | UTILITIES-GAS                   | 2,500.00                 | 2,500.00                | 325.74             | 782.66             | 1,717.34                               | 68.69 %              |
| <a href="#">001-220-635</a> | CONTRACTUAL REPAIRS & MAINTA... | 8,000.00                 | 8,000.00                | 584.00             | 3,117.59           | 4,882.41                               | 61.03 %              |
| <a href="#">001-222-507</a> | EMERGENCY SUPPLIES              | 5,000.00                 | 5,000.00                | 0.00               | 0.00               | 5,000.00                               | 100.00 %             |
| <a href="#">001-222-526</a> | EMERGENCY FUEL                  | 5,000.00                 | 5,000.00                | 0.00               | 0.00               | 5,000.00                               | 100.00 %             |
| <a href="#">001-222-560</a> | REPAIRS & MAINTENANCE           | 5,000.00                 | 5,000.00                | 0.00               | 0.00               | 5,000.00                               | 100.00 %             |
| <a href="#">001-294-625</a> | UTILITIES-ELECTRICAL            | 9,500.00                 | 9,500.00                | 615.70             | 2,928.48           | 6,571.52                               | 69.17 %              |
| <a href="#">001-294-635</a> | CONTRACTUAL REPAIRS & MAINTA... | 2,500.00                 | 2,500.00                | 0.00               | 0.00               | 2,500.00                               | 100.00 %             |
| <a href="#">001-300-505</a> | GENERAL SUPPLIES & EXPENSE      | 6,000.00                 | 6,000.00                | 0.00               | 589.32             | 5,410.68                               | 90.18 %              |
| <a href="#">001-300-510</a> | JANITORIAL SUPPLIES & EXPENSE   | 500.00                   | 500.00                  | 0.00               | 0.00               | 500.00                                 | 100.00 %             |
| <a href="#">001-300-560</a> | REPAIRS & MAINTENANCE           | 20,000.00                | 20,000.00               | 446.75             | 6,613.86           | 13,386.14                              | 66.93 %              |
| <a href="#">001-300-600</a> | CONTRACTUAL SERVICES            | 5,000.00                 | 5,000.00                | 0.00               | 210.00             | 4,790.00                               | 95.80 %              |
| <a href="#">001-300-603</a> | OTHER CONTRACTUAL               | 15,000.00                | 15,000.00               | 1,056.86           | 4,938.58           | 10,061.42                              | 67.08 %              |
| <a href="#">001-300-611</a> | CONTRACTUAL ADA CURB GUTTER     | 1,000.00                 | 1,000.00                | 0.00               | 0.00               | 1,000.00                               | 100.00 %             |
| <a href="#">001-300-639</a> | RENTALS                         | 1,500.00                 | 1,500.00                | 0.00               | 0.00               | 1,500.00                               | 100.00 %             |
| <a href="#">001-301-401</a> | SALARY - DEPARTMENT HEAD        | 58,147.75                | 58,147.75               | 4,319.06           | 25,754.84          | 32,392.91                              | 55.71 %              |
| <a href="#">001-301-403</a> | SALARY - CLERICAL               | 39,444.99                | 39,444.99               | 2,880.00           | 17,840.00          | 21,604.99                              | 54.77 %              |
| <a href="#">001-301-404</a> | SALARY - REGULAR                | 297,313.76               | 297,313.76              | 21,565.76          | 127,772.13         | 169,541.63                             | 57.02 %              |
| <a href="#">001-301-406</a> | SALARY - MECHANIC               | 79,726.24                | 79,726.24               | 3,145.60           | 20,144.80          | 59,581.44                              | 74.73 %              |
| <a href="#">001-301-450</a> | SALARY - OVERTIME               | 17,500.00                | 17,500.00               | 0.00               | 3,279.74           | 14,220.26                              | 81.26 %              |
| <a href="#">001-301-460</a> | STATE RETIREMENT                | 87,925.72                | 87,925.72               | 5,871.53           | 35,841.69          | 52,084.03                              | 59.24 %              |
| <a href="#">001-301-470</a> | FICA                            | 36,309.40                | 36,309.40               | 2,296.88           | 14,142.20          | 22,167.20                              | 61.05 %              |
| <a href="#">001-301-480</a> | EMPLOYEE GROUP INSURANCE        | 72,434.04                | 72,434.04               | 5,624.15           | 28,140.05          | 44,293.99                              | 61.15 %              |
| <a href="#">001-301-481</a> | CLINIC SERVICES                 | 3,300.00                 | 3,300.00                | 248.91             | 1,240.26           | 2,059.74                               | 62.42 %              |
| <a href="#">001-301-491</a> | PUBLIC WORKS                    | 23,500.00                | 23,500.00               | 0.00               | 20,000.00          | 3,500.00                               | 14.89 %              |
| <a href="#">001-301-500</a> | OFFICE SUPPLIES                 | 500.00                   | 500.00                  | 3.84               | 3.84               | 496.16                                 | 99.23 %              |
| <a href="#">001-301-505</a> | GENERAL SUPPLIES & EXPENSE      | 11,154.24                | 11,154.24               | 1,225.41           | 2,489.93           | 8,664.31                               | 77.68 %              |
| <a href="#">001-301-510</a> | JANITORIAL SUPPLIES & EXPENSE   | 500.00                   | 500.00                  | 0.00               | 112.81             | 387.19                                 | 77.44 %              |
| <a href="#">001-301-524</a> | OIL AND LUBRICANTS              | 4,000.00                 | 4,000.00                | 0.00               | 730.00             | 3,270.00                               | 81.75 %              |
| <a href="#">001-301-525</a> | FUEL                            | 32,500.00                | 32,500.00               | 1,935.46           | 10,650.35          | 21,849.65                              | 67.23 %              |
| <a href="#">001-301-535</a> | UNIFORMS                        | 3,000.00                 | 3,000.00                | 0.00               | 0.00               | 3,000.00                               | 100.00 %             |
| <a href="#">001-301-555</a> | SIGNAGE                         | 8,000.00                 | 8,000.00                | 0.00               | 3,014.60           | 4,985.40                               | 62.32 %              |
| <a href="#">001-301-560</a> | REPAIRS & MAINTENANCE           | 45,000.00                | 45,000.00               | 7,361.92           | 18,610.13          | 26,389.87                              | 58.64 %              |
| <a href="#">001-301-571</a> | TIRES & TUBES                   | 5,000.00                 | 5,000.00                | 712.00             | 3,026.62           | 1,973.38                               | 39.47 %              |
| <a href="#">001-301-580</a> | GRAVEL & SHELLS                 | 5,000.00                 | 5,000.00                | 0.00               | 3,707.62           | 1,292.38                               | 25.85 %              |
| <a href="#">001-301-585</a> | CONCRETE & ASPHALT              | 7,500.00                 | 7,500.00                | 123.34             | 1,518.24           | 5,981.76                               | 79.76 %              |
| <a href="#">001-301-586</a> | PIPE                            | 7,500.00                 | 7,500.00                | 0.00               | 2,038.16           | 5,461.84                               | 72.82 %              |
| <a href="#">001-301-600</a> | CONTRACTUAL SERVICES            | 316.00                   | 6,776.00                | 0.00               | 6,451.50           | 324.50                                 | 4.79 %               |
| <a href="#">001-301-602</a> | ARCHITECT AND ENGINEER          | 75,000.00                | 68,540.00               | 2,317.50           | 4,885.00           | 63,655.00                              | 92.87 %              |
| <a href="#">001-301-625</a> | UTILITIES-ELECTRICAL            | 10,000.00                | 10,000.00               | 550.79             | 2,909.58           | 7,090.42                               | 70.90 %              |
| <a href="#">001-301-631</a> | STREET LIGHTING                 | 235,000.00               | 235,000.00              | 20,639.98          | 81,532.27          | 153,467.73                             | 65.31 %              |
| <a href="#">001-301-635</a> | CONTRACTUAL REPAIRS & MAINTA... | 16,000.00                | 16,000.00               | 0.00               | 1,850.00           | 14,150.00                              | 88.44 %              |
| <a href="#">001-301-639</a> | RENTALS                         | 5,000.00                 | 5,000.00                | 0.00               | 0.00               | 5,000.00                               | 100.00 %             |
| <a href="#">001-350-635</a> | CONTRACTUAL REPAIRS & MAINTA... | 2,000.00                 | 2,000.00                | 0.00               | 0.00               | 2,000.00                               | 100.00 %             |
| <a href="#">001-502-401</a> | SALARY - DEPARTMENT HEAD        | 46,927.20                | 46,927.20               | 3,494.40           | 20,719.20          | 26,208.00                              | 55.85 %              |
| <a href="#">001-502-411</a> | SALARY - HOURLY                 | 212,859.42               | 212,859.42              | 15,945.87          | 93,302.04          | 119,557.38                             | 56.17 %              |
| <a href="#">001-502-450</a> | SALARY - OVERTIME               | 5,000.00                 | 5,000.00                | 0.00               | 128.70             | 4,871.30                               | 97.43 %              |
| <a href="#">001-502-460</a> | STATE RETIREMENT                | 48,125.47                | 48,125.47               | 3,577.00           | 21,003.51          | 27,121.96                              | 56.36 %              |
| <a href="#">001-502-470</a> | FICA                            | 19,873.68                | 19,873.68               | 1,432.46           | 8,455.94           | 11,417.74                              | 57.45 %              |
| <a href="#">001-502-480</a> | EMPLOYEE GROUP INSURANCE        | 42,861.96                | 42,861.96               | 3,594.19           | 18,058.14          | 24,803.82                              | 57.87 %              |
| <a href="#">001-502-481</a> | CLINIC SERVICES                 | 2,400.00                 | 2,400.00                | 201.09             | 1,009.74           | 1,390.26                               | 57.93 %              |
| <a href="#">001-502-491</a> | WORKERS' COMPENSATION           | 14,500.00                | 14,500.00               | 0.00               | 12,000.00          | 2,500.00                               | 17.24 %              |
| <a href="#">001-502-505</a> | GENERAL SUPPLIES & EXPENSE      | 15,000.00                | 15,000.00               | 1,004.79           | 4,750.15           | 10,249.85                              | 68.33 %              |
| <a href="#">001-502-508</a> | PLANTS & SHRUBS                 | 13,449.00                | 14,027.00               | 200.00             | 4,900.00           | 9,127.00                               | 65.07 %              |
| <a href="#">001-502-510</a> | JANITORIAL SUPPLIES & EXPENSE   | 3,000.00                 | 3,000.00                | 0.00               | 1,420.02           | 1,579.98                               | 52.67 %              |
| <a href="#">001-502-525</a> | FUEL                            | 11,500.00                | 11,500.00               | 538.93             | 2,640.32           | 8,859.68                               | 77.04 %              |
| <a href="#">001-502-535</a> | UNIFORMS                        | 2,500.00                 | 2,500.00                | 0.00               | 852.20             | 1,647.80                               | 65.91 %              |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|  |   | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|--|---|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <a href="#">001-502-560</a>                | REPAIRS & MAINTENANCE   | 9,000.00                         | 9,000.00                        | 1,090.59                   | 2,641.22                   | 6,358.78  | 70.65 %                      |
| <a href="#">001-502-571</a>                | TIRES & TUBES   | 2,500.00                         | 2,500.00                        | 0.00                       | 0.00                       | 2,500.00  | 100.00 %                     |
| <a href="#">001-502-600</a>                | CONTRACTUAL SERVICES  | 2,400.00                         | 2,400.00                        | 0.00                       | 700.00                     | 1,700.00  | 70.83 %                      |
| <a href="#">001-502-625</a>                | UTILITIES-ELECTRICAL  | 11,500.00                        | 11,500.00                       | 884.39                     | 3,851.53                   | 7,648.47  | 66.51 %                      |
| <a href="#">001-502-639</a>                | RENTALS   | 3,500.00                         | 3,500.00                        | 420.00                     | 1,400.00                   | 2,100.00  | 60.00 %                      |
| <a href="#">001-506-401</a>                | SALARY - DEPARTMENT HEAD                                      | 47,600.26                        | 47,600.26                       | 3,507.20                   | 21,289.60                  | 26,310.66                                       | 55.27 %                      |
| <a href="#">001-506-404</a>                | SALARY - REGULAR  | 30,116.67                        | 30,116.67                       | 2,240.00                   | 13,428.50                  | 16,688.17                                       | 55.41 %                      |
| <a href="#">001-506-460</a>                | STATE RETIREMENT  | 14,397.06                        | 14,397.06                       | 1,057.48                   | 6,388.10                   | 8,008.96  | 55.63 %                      |
| <a href="#">001-506-470</a>                | FICA  | 5,945.34                         | 5,945.34                        | 433.48                     | 2,625.01                   | 3,320.33  | 55.85 %                      |
| <a href="#">001-506-480</a>                | EMPLOYEE GROUP INSURANCE                                      | 12,230.16                        | 12,230.16                       | 1,019.20                   | 5,096.00                   | 7,134.16  | 58.33 %                      |
| <a href="#">001-506-481</a>                | CLINIC SERVICES   | 600.00                           | 600.00                          | 50.00                      | 250.00                     | 350.00  | 58.33 %                      |
| <a href="#">001-506-491</a>                | PARK & REC  | 3,000.00                         | 3,000.00                        | 0.00                       | 2,500.00                   | 500.00  | 16.67 %                      |
| <a href="#">001-506-500</a>                | OFFICE SUPPLIES   | 200.00                           | 200.00                          | 0.00                       | 0.00                       | 200.00  | 100.00 %                     |
| <a href="#">001-506-505</a>                | GENERAL SUPPLIES & EXPENSE                                    | 1,750.00                         | 1,750.00                        | 3.84                       | 3.84                       | 1,746.16  | 99.78 %                      |
| <a href="#">001-506-510</a>                | JANITORIAL SUPPLIES & EXPENSE                                 | 400.00                           | 400.00                          | 0.00                       | 140.18                     | 259.82  | 64.96 %                      |
| <a href="#">001-506-525</a>                | FUEL  | 4,500.00                         | 4,500.00                        | 112.68                     | 683.24                     | 3,816.76  | 84.82 %                      |
| <a href="#">001-506-535</a>                | UNIFORMS  | 300.00                           | 300.00                          | 0.00                       | 0.00                       | 300.00  | 100.00 %                     |
| <a href="#">001-506-550</a>                | BASEBALL SUPPLIES   | 3,200.00                         | 3,200.00                        | 0.00                       | 0.00                       | 3,200.00  | 100.00 %                     |
| <a href="#">001-506-551</a>                | FOOTBALL SUPPLIES   | 6,000.00                         | 6,000.00                        | 0.00                       | 250.47                     | 5,749.53  | 95.83 %                      |
| <a href="#">001-506-552</a>                | BASKETBALL SUPPLIES   | 4,500.00                         | 4,500.00                        | 0.00                       | 2,321.68                   | 2,178.32  | 48.41 %                      |
| <a href="#">001-506-553</a>                | TENNIS SUPPLIES   | 500.00                           | 500.00                          | 0.00                       | 0.00                       | 500.00  | 100.00 %                     |
| <a href="#">001-506-554</a>                | CHEERLEADING SUPPLIES   | 4,000.00                         | 4,000.00                        | 0.00                       | 962.00                     | 3,038.00  | 75.95 %                      |
| <a href="#">001-506-560</a>                | REPAIRS & MAINTENANCE   | 2,500.00                         | 2,500.00                        | 0.00                       | 327.21                     | 2,172.79  | 86.91 %                      |
| <a href="#">001-506-571</a>                | TIRES & TUBES   | 300.00                           | 300.00                          | 0.00                       | 0.00                       | 300.00  | 100.00 %                     |
| <a href="#">001-506-600</a>                | CONTRACTUAL SERVICES  | 12,000.00                        | 24,000.00                       | 2,000.00                   | 13,204.97                  | 10,795.03                                       | 44.98 %                      |
| <a href="#">001-506-625</a>                | UTILITIES-ELECTRICAL  | 6,500.00                         | 6,500.00                        | 499.09                     | 2,284.34                   | 4,215.66  | 64.86 %                      |
| <a href="#">001-800-820</a>                | PRINCIPAL   | 135,000.00                       | 135,000.00                      | 0.00                       | 135,000.00                 | 0.00  | 0.00 %                       |
| <a href="#">001-800-830</a>                | INTEREST  | 8,371.88                         | 8,371.88                        | 0.00                       | 4,987.50                   | 3,384.38  | 40.43 %                      |
|  | <b>Expense Total:</b>   | <b>8,445,713.76</b>              | <b>8,499,778.81</b>             | <b>530,624.55</b>          | <b>3,249,086.48</b>        | <b>5,250,692.33</b>                             | <b>61.77%</b>                |
|  | <b>Fund: 001 - GENERAL FUND Surplus (Deficit):</b>            | <b>145,377.24</b>                | <b>91,312.19</b>                | <b>1,871,531.82</b>        | <b>1,551,661.87</b>        | <b>1,460,349.68</b>                             | <b>-1,599.29%</b>            |
| <b>Fund: 107 - HOMELAND SECURITY GRANT</b> |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                             |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">107-000-253</a>                | STATE GRANT - GENERAL GOVT                                    | 0.00                             | 15,000.00                       | 0.00                       | 0.00                       | -15,000.00                                      | 100.00 %                     |
|  | <b>Revenue Total:</b>   | <b>0.00</b>                      | <b>15,000.00</b>                | <b>0.00</b>                | <b>0.00</b>                | <b>-15,000.00</b>                               | <b>100.00%</b>               |
| <b>Expense</b>                             |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">107-200-919</a>                | MACHINERY AND EQUIPMENT                                       | 0.00                             | 15,000.00                       | 0.00                       | 15,000.00                  | 0.00  | 0.00 %                       |
|  | <b>Expense Total:</b>   | <b>0.00</b>                      | <b>15,000.00</b>                | <b>0.00</b>                | <b>15,000.00</b>           | <b>0.00</b>                                     | <b>0.00%</b>                 |
|  | <b>Fund: 107 - HOMELAND SECURITY GRANT Surplus (Deficit):</b> | <b>0.00</b>                      | <b>0.00</b>                     | <b>0.00</b>                | <b>-15,000.00</b>          | <b>-15,000.00</b>                               | <b>0.00%</b>                 |
| <b>Fund: 110 - CASH FORFEITURE FUND</b>    |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                             |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">110-000-340</a>                | INTEREST EARNINGS   | 150.00                           | 150.00                          | 13.56                      | 80.29                      | -69.71  | 46.47 %                      |
| <a href="#">110-000-358</a>                | SUNDRY INCOME   | 500.00                           | 500.00                          | 0.00                       | 0.00                       | -500.00   | 100.00 %                     |
|  | <b>Revenue Total:</b>   | <b>650.00</b>                    | <b>650.00</b>                   | <b>13.56</b>               | <b>80.29</b>               | <b>-569.71</b>                                  | <b>87.65%</b>                |
|  | <b>Fund: 110 - CASH FORFEITURE FUND Total:</b>                | <b>650.00</b>                    | <b>650.00</b>                   | <b>13.56</b>               | <b>80.29</b>               | <b>-569.71</b>                                  | <b>87.65%</b>                |
| <b>Fund: 111 - PUBLIC SAFETY FUND</b>      |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                             |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">111-000-254</a>                | STATE GRANT - PUBLIC SAFETY                                   | 23,021.70                        | 23,021.70                       | 2,759.87                   | 8,160.84                   | -14,860.86                                      | 64.55 %                      |
| <a href="#">111-000-340</a>                | INTEREST EARNINGS   | 150.00                           | 150.00                          | -20.48                     | -89.62                     | -239.62   | 159.75 %                     |
|  | <b>Revenue Total:</b>   | <b>23,171.70</b>                 | <b>23,171.70</b>                | <b>2,739.39</b>            | <b>8,071.22</b>            | <b>-15,100.48</b>                               | <b>65.17%</b>                |
| <b>Expense</b>                             |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">111-200-450</a>                | SALARY - OVERTIME   | 23,021.70                        | 23,021.70                       | 3,893.24                   | 14,657.55                  | 8,364.15  | 36.33 %                      |
|  | <b>Expense Total:</b>   | <b>23,021.70</b>                 | <b>23,021.70</b>                | <b>3,893.24</b>            | <b>14,657.55</b>           | <b>8,364.15</b>                                 | <b>36.33%</b>                |
|  | <b>Fund: 111 - PUBLIC SAFETY FUND Surplus (Deficit):</b>      | <b>150.00</b>                    | <b>150.00</b>                   | <b>-1,153.85</b>           | <b>-6,586.33</b>           | <b>-6,736.33</b>                                | <b>4,490.89%</b>             |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|  |   | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|--|---|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <b>Fund: 116 - FIRE PROTECTION FUND</b>                  |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">116-000-262</a>                              | STATE INSURANCE REBATE  | 44,000.00                        | 44,000.00                       | 0.00                       | 0.00                       | -44,000.00                                      | 100.00 %                     |
| <a href="#">116-000-340</a>                              | INTEREST EARNINGS   | 2,800.00                         | 2,800.00                        | 180.47                     | 1,240.18                   | -1,559.82                                       | 55.71 %                      |
|  | <b>Revenue Total:</b>   | <b>46,800.00</b>                 | <b>46,800.00</b>                | <b>180.47</b>              | <b>1,240.18</b>            | <b>-45,559.82</b>                               | <b>97.35%</b>                |
| <b>Expense</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">116-220-505</a>                              | GENERAL SUPPLIES & EXPENSE  | 15,000.00                        | 15,000.00                       | 0.00                       | 0.00                       | 15,000.00                                       | 100.00 %                     |
| <a href="#">116-220-610</a>                              | Travel  | 11,000.00                        | 11,000.00                       | 0.00                       | 341.95                     | 10,658.05                                       | 96.89 %                      |
| <a href="#">116-220-919</a>                              | MACHINERY AND EQUIPMENT   | 115,000.00                       | 115,000.00                      | 528.20                     | 4,236.20                   | 110,763.80                                      | 96.32 %                      |
|  | <b>Expense Total:</b>   | <b>141,000.00</b>                | <b>141,000.00</b>               | <b>528.20</b>              | <b>4,578.15</b>            | <b>136,421.85</b>                               | <b>96.75%</b>                |
|  | <b>Fund: 116 - FIRE PROTECTION FUND Surplus (Deficit):</b>          | <b>-94,200.00</b>                | <b>-94,200.00</b>               | <b>-347.73</b>             | <b>-3,337.97</b>           | <b>90,862.03</b>                                | <b>96.46%</b>                |
| <b>Fund: 117 - CAPITAL IMPROVEMENT FUND</b>              |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">117-000-340</a>                              | INTEREST EARNINGS   | 100.00                           | 100.00                          | 2.25                       | 319.56                     | 219.56  | 319.56 %                     |
|  | <b>Revenue Total:</b>   | <b>100.00</b>                    | <b>100.00</b>                   | <b>2.25</b>                | <b>319.56</b>              | <b>219.56</b>                                   | <b>219.56%</b>               |
| <b>Expense</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">117-800-820</a>                              | PRINCIPAL   | 118,656.28                       | 118,656.28                      | 0.00                       | 118,656.28                 | 0.00  | 0.00 %                       |
| <a href="#">117-800-830</a>                              | INTEREST  | 7,660.63                         | 7,660.63                        | 0.00                       | 8,089.32                   | -428.69   | -5.60 %                      |
|  | <b>Expense Total:</b>   | <b>126,316.91</b>                | <b>126,316.91</b>               | <b>0.00</b>                | <b>126,745.60</b>          | <b>-428.69</b>                                  | <b>-0.34%</b>                |
|  | <b>Fund: 117 - CAPITAL IMPROVEMENT FUND Surplus (Deficit):</b>      | <b>-126,216.91</b>               | <b>-126,216.91</b>              | <b>2.25</b>                | <b>-126,426.04</b>         | <b>-209.13</b>                                  | <b>-0.17%</b>                |
| <b>Fund: 118 - MODERNIZATION INFRASTRUCTURE TAX FUND</b> |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">118-000-253</a>                              | STATE GRANT - GENERAL GOVT  | 575,000.00                       | 575,000.00                      | 0.00                       | 293,020.32                 | -281,979.68                                     | 49.04 %                      |
| <a href="#">118-000-282</a>                              | PASS SCHOOL DISTRICT REIMBURS...                                    | 12,250.00                        | 12,250.00                       | 0.00                       | 0.00                       | -12,250.00                                      | 100.00 %                     |
| <a href="#">118-000-340</a>                              | INTEREST EARNINGS   | 0.00                             | 0.00                            | 938.72                     | 3,224.59                   | 3,224.59  | 0.00 %                       |
|  | <b>Revenue Total:</b>   | <b>587,250.00</b>                | <b>587,250.00</b>               | <b>938.72</b>              | <b>296,244.91</b>          | <b>-291,005.09</b>                              | <b>49.55%</b>                |
| <b>Expense</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">118-301-602</a>                              | ARCHITECT AND ENGINEER  | 50,000.00                        | 50,000.00                       | 7,200.00                   | 9,155.00                   | 40,845.00                                       | 81.69 %                      |
| <a href="#">118-301-911</a>                              | CONSTRUCTION IN PROGRESS  | 500,000.00                       | 472,445.04                      | 0.00                       | 10,680.00                  | 461,765.04                                      | 97.74 %                      |
| <a href="#">118-301-919</a>                              | MACHINERY AND EQUIPMENT   | 0.00                             | 27,554.96                       | 27,554.96                  | 27,554.96                  | 0.00  | 0.00 %                       |
| <a href="#">118-703-600</a>                              | CONTRACTUAL SERVICES  | 179,000.00                       | 179,000.00                      | 14,881.66                  | 59,526.64                  | 119,473.36                                      | 66.74 %                      |
| <a href="#">118-800-820</a>                              | PRINCIPAL   | 102,325.00                       | 102,325.00                      | 544.92                     | 98,174.95                  | 4,150.05  | 4.06 %                       |
| <a href="#">118-800-830</a>                              | INTEREST  | 87,949.00                        | 87,949.00                       | 172.01                     | 45,690.52                  | 42,258.48                                       | 48.05 %                      |
|  | <b>Expense Total:</b>   | <b>919,274.00</b>                | <b>919,274.00</b>               | <b>50,353.55</b>           | <b>250,782.07</b>          | <b>668,491.93</b>                               | <b>72.72%</b>                |
|  | <b>Fund: 118 - MODERNIZATION INFRASTRUCTURE TAX FUND Surplus ..</b> | <b>-332,024.00</b>               | <b>-332,024.00</b>              | <b>-49,414.83</b>          | <b>45,462.84</b>           | <b>377,486.84</b>                               | <b>113.69%</b>               |
| <b>Fund: 140 - LIBRARY FUND</b>                          |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">140-000-200</a>                              | AD VALOREM TAXES- CURRENT YEAR                                      | 172,159.00                       | 172,159.00                      | 81,721.26                  | 122,198.78                 | -49,960.22                                      | 29.02 %                      |
| <a href="#">140-000-201</a>                              | AD VALOREM TAXES- AUTOMOBILE  | 21,015.00                        | 21,015.00                       | 2,055.63                   | 9,003.26                   | -12,011.74                                      | 57.16 %                      |
| <a href="#">140-000-203</a>                              | AD VALOREM TAXES- PRIOR YEAR  | 1,500.00                         | 1,500.00                        | 0.00                       | 162.44                     | -1,337.56                                       | 89.17 %                      |
|  | <b>Revenue Total:</b>   | <b>194,674.00</b>                | <b>194,674.00</b>               | <b>83,776.89</b>           | <b>131,364.48</b>          | <b>-63,309.52</b>                               | <b>32.52%</b>                |
| <b>Expense</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">140-350-645</a>                              | AID TO OTHER GOVERNMENTS  | 191,157.00                       | 191,157.00                      | 31,859.50                  | 79,648.75                  | 111,508.25                                      | 58.33 %                      |
|  | <b>Expense Total:</b>   | <b>191,157.00</b>                | <b>191,157.00</b>               | <b>31,859.50</b>           | <b>79,648.75</b>           | <b>111,508.25</b>                               | <b>58.33%</b>                |
|  | <b>Fund: 140 - LIBRARY FUND Surplus (Deficit):</b>                  | <b>3,517.00</b>                  | <b>3,517.00</b>                 | <b>51,917.39</b>           | <b>51,715.73</b>           | <b>48,198.73</b>                                | <b>-1,370.45%</b>            |
| <b>Fund: 141 - HURRICANE ZETA FEMA ACCOUNT</b>           |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">141-000-230</a>                              | FEDERAL GRANTS  | 2,062,126.09                     | 2,062,126.09                    | 0.00                       | 0.00                       | -2,062,126.09                                   | 100.00 %                     |
|  | <b>Revenue Total:</b>   | <b>2,062,126.09</b>              | <b>2,062,126.09</b>             | <b>0.00</b>                | <b>0.00</b>                | <b>-2,062,126.09</b>                            | <b>100.00%</b>               |
|  | <b>Fund: 141 - HURRICANE ZETA FEMA ACCOUNT Total:</b>               | <b>2,062,126.09</b>              | <b>2,062,126.09</b>             | <b>0.00</b>                | <b>0.00</b>                | <b>-2,062,126.09</b>                            | <b>100.00%</b>               |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|  |   | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|--|---|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <b>Fund: 142 - SENATE BILL 2849</b>                |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">142-000-340</a>                        | INTEREST EARNINGS   | 500.00                           | 500.00                          | 38.23                      | 216.17                     | -283.83   | 56.77 %                      |
|  | <b>Revenue Total:</b>   | <b>500.00</b>                    | <b>500.00</b>                   | <b>38.23</b>               | <b>216.17</b>              | <b>-283.83</b>                                  | <b>56.77%</b>                |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">142-105-602</a>                        | ARCHITECT AND ENGINEER  | 1,000.00                         | 1,000.00                        | 0.00                       | 0.00                       | 1,000.00  | 100.00 %                     |
| <a href="#">142-105-911</a>                        | CONSTRUCTION IN PROGRESS  | 21,000.00                        | 21,000.00                       | 0.00                       | 0.00                       | 21,000.00                                       | 100.00 %                     |
|  | <b>Expense Total:</b>   | <b>22,000.00</b>                 | <b>22,000.00</b>                | <b>0.00</b>                | <b>0.00</b>                | <b>22,000.00</b>                                | <b>100.00%</b>               |
|  | <b>Fund: 142 - SENATE BILL 2849 Surplus (Deficit):</b>                | <b>-21,500.00</b>                | <b>-21,500.00</b>               | <b>38.23</b>               | <b>216.17</b>              | <b>21,716.17</b>                                | <b>101.01%</b>               |
| <b>Fund: 143 - HOUSE BILL 1353</b>                 |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">143-000-340</a>                        | INTEREST EARNINGS   | 12,500.00                        | 12,500.00                       | 821.95                     | 4,647.33                   | -7,852.67                                       | 62.82 %                      |
|  | <b>Revenue Total:</b>   | <b>12,500.00</b>                 | <b>12,500.00</b>                | <b>821.95</b>              | <b>4,647.33</b>            | <b>-7,852.67</b>                                | <b>62.82%</b>                |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">143-105-911</a>                        | CONSTRUCTION IN PROGRESS  | 475,000.00                       | 475,000.00                      | 0.00                       | 0.00                       | 475,000.00                                      | 100.00 %                     |
|  | <b>Expense Total:</b>   | <b>475,000.00</b>                | <b>475,000.00</b>               | <b>0.00</b>                | <b>0.00</b>                | <b>475,000.00</b>                               | <b>100.00%</b>               |
|  | <b>Fund: 143 - HOUSE BILL 1353 Surplus (Deficit):</b>                 | <b>-462,500.00</b>               | <b>-462,500.00</b>              | <b>821.95</b>              | <b>4,647.33</b>            | <b>467,147.33</b>                               | <b>101.00%</b>               |
| <b>Fund: 144 - SENATE BILL 2468</b>                |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">144-000-340</a>                        | INTEREST EARNINGS   | 10,000.00                        | 10,000.00                       | 1,264.13                   | 7,251.55                   | -2,748.45                                       | 27.48 %                      |
|  | <b>Revenue Total:</b>   | <b>10,000.00</b>                 | <b>10,000.00</b>                | <b>1,264.13</b>            | <b>7,251.55</b>            | <b>-2,748.45</b>                                | <b>27.48%</b>                |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">144-301-602</a>                        | ARCHITECT AND ENGINEER  | 15,000.00                        | 145,000.00                      | 4,528.75                   | 18,663.75                  | 126,336.25                                      | 87.13 %                      |
| <a href="#">144-301-911</a>                        | CONSTRUCTION IN PROGRESS  | 750,000.00                       | 620,000.00                      | 0.00                       | 0.00                       | 620,000.00                                      | 100.00 %                     |
|  | <b>Expense Total:</b>   | <b>765,000.00</b>                | <b>765,000.00</b>               | <b>4,528.75</b>            | <b>18,663.75</b>           | <b>746,336.25</b>                               | <b>97.56%</b>                |
|  | <b>Fund: 144 - SENATE BILL 2468 Surplus (Deficit):</b>                | <b>-755,000.00</b>               | <b>-755,000.00</b>              | <b>-3,264.62</b>           | <b>-11,412.20</b>          | <b>743,587.80</b>                               | <b>98.49%</b>                |
| <b>Fund: 150 - GULF COAST RESTORATION FUND</b>     |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">150-000-258</a>                        | STATE GRANT - CONS URBAN ECON   | 900,000.00                       | 900,000.00                      | 0.00                       | 523,457.30                 | -376,542.70                                     | 41.84 %                      |
| <a href="#">150-000-340</a>                        | INTEREST EARNINGS   | 3,000.00                         | 3,000.00                        | 530.58                     | 2,999.90                   | -0.10   | 0.00 %                       |
|  | <b>Revenue Total:</b>   | <b>903,000.00</b>                | <b>903,000.00</b>               | <b>530.58</b>              | <b>526,457.20</b>          | <b>-376,542.80</b>                              | <b>41.70%</b>                |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">150-105-602</a>                        | ARCHITECT AND ENGINEER  | 50,000.00                        | 50,000.00                       | 0.00                       | 0.00                       | 50,000.00                                       | 100.00 %                     |
| <a href="#">150-105-911</a>                        | CONSTRUCTION IN PROGRESS  | 750,000.00                       | 750,000.00                      | 0.00                       | 0.00                       | 750,000.00                                      | 100.00 %                     |
|  | <b>Expense Total:</b>   | <b>800,000.00</b>                | <b>800,000.00</b>               | <b>0.00</b>                | <b>0.00</b>                | <b>800,000.00</b>                               | <b>100.00%</b>               |
|  | <b>Fund: 150 - GULF COAST RESTORATION FUND Surplus (Deficit):</b>     | <b>103,000.00</b>                | <b>103,000.00</b>               | <b>530.58</b>              | <b>526,457.20</b>          | <b>423,457.20</b>                               | <b>-411.12%</b>              |
| <b>Fund: 151 - AMERICAN RECOVERY PLAN ACT FUND</b> |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">151-000-340</a>                        | INTEREST EARNINGS   | 0.00                             | 0.00                            | 402.56                     | 1,963.92                   | 1,963.92  | 0.00 %                       |
|  | <b>Revenue Total:</b>   | <b>0.00</b>                      | <b>0.00</b>                     | <b>402.56</b>              | <b>1,963.92</b>            | <b>1,963.92</b>                                 | <b>0.00%</b>                 |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">151-704-602</a>                        | ARCHITECT AND ENGINEER  | 250,000.00                       | 250,000.00                      | 17,100.00                  | 82,417.50                  | 167,582.50                                      | 67.03 %                      |
| <a href="#">151-704-911</a>                        | CONSTRUCTION IN PROGRESS  | 658,000.00                       | 658,000.00                      | 58,927.91                  | 255,107.33                 | 402,892.67                                      | 61.23 %                      |
|  | <b>Expense Total:</b>   | <b>908,000.00</b>                | <b>908,000.00</b>               | <b>76,027.91</b>           | <b>337,524.83</b>          | <b>570,475.17</b>                               | <b>62.83%</b>                |
|  | <b>Fund: 151 - AMERICAN RECOVERY PLAN ACT FUND Surplus (Deficit):</b> | <b>-908,000.00</b>               | <b>-908,000.00</b>              | <b>-75,625.35</b>          | <b>-335,560.91</b>         | <b>572,439.09</b>                               | <b>63.04%</b>                |
| <b>Fund: 152 - GO MESA FUND</b>                    |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">152-000-253</a>                        | STATE GRANT - GENERAL GOVT  | 10,000,000.00                    | 10,000,000.00                   | 195,763.29                 | 1,560,381.95               | -8,439,618.05                                   | 84.40 %                      |
|  | <b>Revenue Total:</b>   | <b>10,000,000.00</b>             | <b>10,000,000.00</b>            | <b>195,763.29</b>          | <b>1,560,381.95</b>        | <b>-8,439,618.05</b>                            | <b>84.40%</b>                |
| <b>Expense</b>                                     |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">152-701-602</a>                        | ARCHITECT AND ENGINEER  | 605,323.00                       | 605,323.00                      | 11,902.60                  | 89,725.82                  | 515,597.18                                      | 85.18 %                      |
| <a href="#">152-701-911</a>                        | CONSTRUCTION IN PROGRESS  | 3,862,592.00                     | 3,862,592.00                    | 142,244.06                 | 1,314,619.58               | 2,547,972.42                                    | 65.97 %                      |
| <a href="#">152-751-602</a>                        | ARCHITECT AND ENGINEER  | 851,737.16                       | 851,737.16                      | 0.00                       | 0.00                       | 851,737.16                                      | 100.00 %                     |

Budget Report

For Fiscal: 2025-2026 Period Ending: 02/28/2026

|  |  | Original<br>Total Budget | Current<br>Total Budget | Period<br>Activity   | Fiscal<br>Activity  | Variance<br>Favorable<br>(Unfavorable) | Percent<br>Remaining |
|--|--|--------------------------|-------------------------|----------------------|---------------------|--|----------------------|
| <a href="#">152-751-911</a>  | CONSTRUCTION IN PROGRESS   | 4,453,917.95             | 4,453,917.95            | 1,153,921.50         | 1,153,921.50        | 3,299,996.45                           | 74.09 %              |
|  | <b>Expense Total:</b>  | <b>9,773,570.11</b>      | <b>9,773,570.11</b>     | <b>1,308,068.16</b>  | <b>2,558,266.90</b> | <b>7,215,303.21</b>                    | <b>73.82%</b>        |
|  | <b>Fund: 152 - GO MESA FUND Surplus (Deficit):</b>                 | <b>226,429.89</b>        | <b>226,429.89</b>       | <b>-1,112,304.87</b> | <b>-997,884.95</b>  | <b>-1,224,314.84</b>                   | <b>540.70%</b>       |
| <b>Fund: 154 - HURRICANE IDA FEMA ACCOUNT</b>                        |  |                          |                         |                      |                     |  |                      |
| <b>Revenue</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">154-000-230</a>  | FEDERAL GRANTS   | 287,932.97               | 287,932.97              | 0.00                 | 0.00                | -287,932.97                            | 100.00 %             |
|  | <b>Revenue Total:</b>  | <b>287,932.97</b>        | <b>287,932.97</b>       | <b>0.00</b>          | <b>0.00</b>         | <b>-287,932.97</b>                     | <b>100.00%</b>       |
| <b>Expense</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">154-751-602</a>  | ARCHITECT AND ENGINEER   | 80,000.00                | 80,000.00               | 0.00                 | 0.00                | 80,000.00                              | 100.00 %             |
| <a href="#">154-751-911</a>  | CONSTRUCTION IN PROGRESS   | 1,000,000.00             | 1,000,000.00            | 0.00                 | 0.00                | 1,000,000.00                           | 100.00 %             |
|  | <b>Expense Total:</b>  | <b>1,080,000.00</b>      | <b>1,080,000.00</b>     | <b>0.00</b>          | <b>0.00</b>         | <b>1,080,000.00</b>                    | <b>100.00%</b>       |
|  | <b>Fund: 154 - HURRICANE IDA FEMA ACCOUNT Surplus (Deficit):</b>   | <b>-792,067.03</b>       | <b>-792,067.03</b>      | <b>0.00</b>          | <b>0.00</b>         | <b>792,067.03</b>                      | <b>100.00%</b>       |
| <b>Fund: 156 - HB 603 INFRASTRUCTURE GRANT</b>                       |  |                          |                         |                      |                     |  |                      |
| <b>Revenue</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">156-000-340</a>  | INTEREST EARNINGS  | 21,750.00                | 21,750.00               | 1,315.12             | 7,435.74            | -14,314.26                             | 65.81 %              |
|  | <b>Revenue Total:</b>  | <b>21,750.00</b>         | <b>21,750.00</b>        | <b>1,315.12</b>      | <b>7,435.74</b>     | <b>-14,314.26</b>                      | <b>65.81%</b>        |
| <b>Expense</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">156-301-602</a>  | ARCHITECT AND ENGINEER   | 25,000.00                | 25,000.00               | 0.00                 | 0.00                | 25,000.00                              | 100.00 %             |
| <a href="#">156-301-911</a>  | CONSTRUCTION IN PROGRESS   | 750,000.00               | 750,000.00              | 0.00                 | 0.00                | 750,000.00                             | 100.00 %             |
|  | <b>Expense Total:</b>  | <b>775,000.00</b>        | <b>775,000.00</b>       | <b>0.00</b>          | <b>0.00</b>         | <b>775,000.00</b>                      | <b>100.00%</b>       |
|  | <b>Fund: 156 - HB 603 INFRASTRUCTURE GRANT Surplus (Deficit):</b>  | <b>-753,250.00</b>       | <b>-753,250.00</b>      | <b>1,315.12</b>      | <b>7,435.74</b>     | <b>760,685.74</b>                      | <b>100.99%</b>       |
| <b>Fund: 159 - MS MUNICIPALITY COUNTY WATER INFRASTRUCTURE GRANT</b> |  |                          |                         |                      |                     |  |                      |
| <b>Revenue</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">159-000-253</a>  | STATE GRANT - GENERAL GOVT   | 750,000.00               | 750,000.00              | 0.00                 | 67,518.75           | -682,481.25                            | 91.00 %              |
|  | <b>Revenue Total:</b>  | <b>750,000.00</b>        | <b>750,000.00</b>       | <b>0.00</b>          | <b>67,518.75</b>    | <b>-682,481.25</b>                     | <b>91.00%</b>        |
| <b>Expense</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">159-704-602</a>  | ARCHITECT AND ENGINEER   | 75,000.00                | 75,000.00               | 0.00                 | 0.00                | 75,000.00                              | 100.00 %             |
| <a href="#">159-704-911</a>  | CONSTRUCTION IN PROGRESS   | 658,000.00               | 658,000.00              | 58,927.90            | 255,107.30          | 402,892.70                             | 61.23 %              |
|  | <b>Expense Total:</b>  | <b>733,000.00</b>        | <b>733,000.00</b>       | <b>58,927.90</b>     | <b>255,107.30</b>   | <b>477,892.70</b>                      | <b>65.20%</b>        |
|  | <b>Fund: 159 - MS MUNICIPALITY COUNTY WATER INFRASTRUCTURE ...</b> | <b>17,000.00</b>         | <b>17,000.00</b>        | <b>-58,927.90</b>    | <b>-187,588.55</b>  | <b>-204,588.55</b>                     | <b>1,203.46%</b>     |
| <b>Fund: 206 - 2025 BOND SERIES</b>                                  |  |                          |                         |                      |                     |  |                      |
| <b>Revenue</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">206-000-340</a>  | INTEREST EARNINGS  | 25,000.00                | 25,000.00               | 2,019.19             | 11,695.73           | -13,304.27                             | 53.22 %              |
|  | <b>Revenue Total:</b>  | <b>25,000.00</b>         | <b>25,000.00</b>        | <b>2,019.19</b>      | <b>11,695.73</b>    | <b>-13,304.27</b>                      | <b>53.22%</b>        |
| <b>Expense</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">206-105-602</a>  | ARCHITECT AND ENGINEER   | 50,000.00                | 50,000.00               | 0.00                 | 0.00                | 50,000.00                              | 100.00 %             |
| <a href="#">206-220-600</a>  | CONTRACTUAL SERVICES   | 25,000.00                | 25,000.00               | 0.00                 | 0.00                | 25,000.00                              | 100.00 %             |
| <a href="#">206-220-911</a>  | CONSTRUCTION IN PROGRESS   | 135,000.00               | 135,000.00              | 0.00                 | 104,259.99          | 30,740.01                              | 22.77 %              |
| <a href="#">206-294-635</a>  | CONTRACTUAL REPAIRS & MAINTA...                                    | 2,000.00                 | 2,000.00                | 0.00                 | 0.00                | 2,000.00                               | 100.00 %             |
| <a href="#">206-301-600</a>  | CONTRACTUAL SERVICES   | 25,000.00                | 25,000.00               | 0.00                 | 0.00                | 25,000.00                              | 100.00 %             |
| <a href="#">206-301-911</a>  | CONSTRUCTION IN PROGRESS   | 556,835.00               | 556,835.00              | 0.00                 | 0.00                | 556,835.00                             | 100.00 %             |
| <a href="#">206-502-635</a>  | CONTRACTUAL REPAIRS & MAINTA...                                    | 10,200.00                | 10,200.00               | 0.00                 | 0.00                | 10,200.00                              | 100.00 %             |
| <a href="#">206-751-635</a>  | CONTRACTUAL REPAIRS & MAINTA...                                    | 40,000.00                | 40,000.00               | 0.00                 | 0.00                | 40,000.00                              | 100.00 %             |
|  | <b>Expense Total:</b>  | <b>844,035.00</b>        | <b>844,035.00</b>       | <b>0.00</b>          | <b>104,259.99</b>   | <b>739,775.01</b>                      | <b>87.65%</b>        |
|  | <b>Fund: 206 - 2025 BOND SERIES Surplus (Deficit):</b>             | <b>-819,035.00</b>       | <b>-819,035.00</b>      | <b>2,019.19</b>      | <b>-92,564.26</b>   | <b>726,470.74</b>                      | <b>88.70%</b>        |
| <b>Fund: 400 - WATERWORKS AND SEWER FUND</b>                         |  |                          |                         |                      |                     |  |                      |
| <b>Revenue</b>   |  |                          |                         |                      |                     |  |                      |
| <a href="#">400-000-117</a>  | SALES TAX DISCOUNT   | 400.00                   | 400.00                  | 35.14                | 332.03              | -67.97                                 | 16.99 %              |
| <a href="#">400-000-340</a>  | INTEREST EARNINGS  | 60,000.00                | 60,000.00               | 3,670.95             | 20,930.04           | -39,069.96                             | 65.12 %              |
| <a href="#">400-000-358</a>  | SUNDRY INCOME  | 0.00                     | 0.00                    | 0.00                 | -15.00              | -15.00                                 | 0.00 %               |
| <a href="#">400-000-360</a>  | WATER SALES  | 1,210,740.00             | 1,210,740.00            | 96,526.72            | 486,501.28          | -724,238.72                            | 59.82 %              |
| <a href="#">400-000-362</a>  | SERVICE CONNECTION CHARGES   | 15,000.00                | 15,000.00               | 906.18               | 2,956.11            | -12,043.89                             | 80.29 %              |
| <a href="#">400-000-363</a>  | WATER TAP FEES   | 12,000.00                | 12,000.00               | 700.00               | 2,700.00            | -9,300.00                              | 77.50 %              |
| <a href="#">400-000-364</a>  | SEWER TAP FEES   | 15,000.00                | 15,000.00               | 640.00               | 2,553.75            | -12,446.25                             | 82.98 %              |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|   |                                 | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|---|---------------------------------|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <a href="#">400-000-365</a>                                     | GARBAGE FEES                    | 914,000.00                       | 914,000.00                      | 75,438.10                  | 374,197.08                 | -539,802.92                                     | 59.06 %                      |
| <a href="#">400-000-369</a>                                     | SEWER SALES                     | 882,300.00                       | 882,300.00                      | 83,152.57                  | 375,368.44                 | -506,931.56                                     | 57.46 %                      |
| <a href="#">400-000-372</a>                                     | PENALTY                         | 65,000.00                        | 65,000.00                       | 6,755.05                   | 30,786.56                  | -34,213.44                                      | 52.64 %                      |
| <a href="#">400-000-379</a>                                     | MISC. ENTERPRISE INCOME         | 3,500.00                         | 3,500.00                        | 523.88                     | 1,680.32                   | -1,819.68                                       | 51.99 %                      |
|   | <b>Revenue Total:</b>           | <b>3,177,940.00</b>              | <b>3,177,940.00</b>             | <b>268,348.59</b>          | <b>1,297,990.61</b>        | <b>-1,879,949.39</b>                            | <b>59.16%</b>                |
| <b>Expense</b>  |                                 |                                  |                                 |                            |                            |   |                              |
| <a href="#">400-107-600</a>                                     | CONTRACTUAL SERVICES            | 80,000.00                        | 80,000.00                       | 2,830.50                   | 19,137.02                  | 60,862.98                                       | 76.08 %                      |
| <a href="#">400-700-401</a>                                     | SALARY - DEPARTMENT HEAD        | 50,991.98                        | 50,991.98                       | 307.04                     | 468.64                     | 50,523.34                                       | 99.08 %                      |
| <a href="#">400-700-403</a>                                     | SALARY - CLERICAL               | 72,698.30                        | 72,698.30                       | 5,756.82                   | 33,289.79                  | 39,408.51                                       | 54.21 %                      |
| <a href="#">400-700-404</a>                                     | SALARY - REGULAR                | 72,784.84                        | 72,784.84                       | 5,368.00                   | 32,524.05                  | 40,260.79                                       | 55.31 %                      |
| <a href="#">400-700-450</a>                                     | SALARY - OVERTIME               | 0.00                             | 0.00                            | 16.16                      | 161.60                     | -161.60   | 0.00 %                       |
| <a href="#">400-700-460</a>                                     | STATE RETIREMENT                | 36,397.02                        | 36,397.02                       | 2,106.44                   | 12,225.74                  | 24,171.28                                       | 66.41 %                      |
| <a href="#">400-700-470</a>                                     | FICA                            | 15,030.35                        | 15,030.35                       | 845.07                     | 4,930.73                   | 10,099.62                                       | 67.19 %                      |
| <a href="#">400-700-480</a>                                     | EMPLOYEE GROUP INSURANCE        | 24,512.32                        | 24,512.32                       | 1,591.00                   | 7,777.58                   | 16,734.74                                       | 68.27 %                      |
| <a href="#">400-700-481</a>                                     | CLINIC SERVICES                 | 1,500.00                         | 1,500.00                        | 100.00                     | 500.00                     | 1,000.00  | 66.67 %                      |
| <a href="#">400-700-491</a>                                     | WORKERS' COMPENSATION           | 4,000.00                         | 4,000.00                        | 0.00                       | 2,168.92                   | 1,831.08  | 45.78 %                      |
| <a href="#">400-700-500</a>                                     | OFFICE SUPPLIES                 | 1,800.00                         | 1,800.00                        | 0.00                       | 7.66                       | 1,792.34  | 99.57 %                      |
| <a href="#">400-700-505</a>                                     | GENERAL SUPPLIES & EXPENSE      | 2,500.00                         | 2,500.00                        | 0.00                       | 0.00                       | 2,500.00  | 100.00 %                     |
| <a href="#">400-700-510</a>                                     | JANITORIAL SUPPLIES & EXPENSE   | 500.00                           | 500.00                          | 0.00                       | 0.00                       | 500.00  | 100.00 %                     |
| <a href="#">400-700-525</a>                                     | FUEL                            | 3,100.00                         | 3,100.00                        | 227.97                     | 1,115.47                   | 1,984.53  | 64.02 %                      |
| <a href="#">400-700-535</a>                                     | UNIFORMS                        | 450.00                           | 450.00                          | 0.00                       | 0.00                       | 450.00  | 100.00 %                     |
| <a href="#">400-700-560</a>                                     | REPAIRS & MAINTENANCE           | 2,800.00                         | 2,800.00                        | 1,377.80                   | 2,622.80                   | 177.20  | 6.33 %                       |
| <a href="#">400-700-600</a>                                     | CONTRACTUAL SERVICES            | 15,000.00                        | 15,000.00                       | 179.40                     | 13,320.53                  | 1,679.47  | 11.20 %                      |
| <a href="#">400-700-604</a>                                     | AUDITOR & ACCOUNTANT            | 25,000.00                        | 25,000.00                       | 0.00                       | 0.00                       | 25,000.00                                       | 100.00 %                     |
| <a href="#">400-700-605</a>                                     | TELEPHONE                       | 5,000.00                         | 5,000.00                        | 48.38                      | 676.19                     | 4,323.81  | 86.48 %                      |
| <a href="#">400-700-606</a>                                     | POSTAGE                         | 16,000.00                        | 16,000.00                       | 0.00                       | 14,000.00                  | 2,000.00  | 12.50 %                      |
| <a href="#">400-700-620</a>                                     | INSURANCE                       | 100,000.00                       | 100,000.00                      | 0.00                       | 9,467.31                   | 90,532.69                                       | 90.53 %                      |
| <a href="#">400-700-625</a>                                     | UTILITIES-ELECTRICAL            | 5,000.00                         | 5,000.00                        | 1,517.27                   | 4,771.49                   | 228.51  | 4.57 %                       |
| <a href="#">400-700-685</a>                                     | ADMINISTRATIVE PMTS TO GENERAL  | 40,000.00                        | 40,000.00                       | 0.00                       | 40,000.00                  | 0.00  | 0.00 %                       |
| <a href="#">400-701-625</a>                                     | UTILITIES-ELECTRICAL            | 80,000.00                        | 80,000.00                       | 6,278.72                   | 26,139.65                  | 53,860.35                                       | 67.33 %                      |
| <a href="#">400-702-560</a>                                     | REPAIRS & MAINTENANCE           | 60,000.00                        | 60,000.00                       | 3,071.44                   | 29,968.99                  | 30,031.01                                       | 50.05 %                      |
| <a href="#">400-702-600</a>                                     | CONTRACTUAL SERVICES            | 25,000.00                        | 25,000.00                       | 0.00                       | 9,100.00                   | 15,900.00                                       | 63.60 %                      |
| <a href="#">400-702-603</a>                                     | OTHER CONTRACTUAL               | 186,000.00                       | 186,000.00                      | 18,133.66                  | 62,550.28                  | 123,449.72                                      | 66.37 %                      |
| <a href="#">400-702-635</a>                                     | CONTRACTUAL REPAIRS & MAINTA... | 15,000.00                        | 15,000.00                       | 0.00                       | 4,096.75                   | 10,903.25                                       | 72.69 %                      |
| <a href="#">400-703-560</a>                                     | REPAIRS & MAINTENANCE           | 15,000.00                        | 15,000.00                       | 300.00                     | 8,656.77                   | 6,343.23  | 42.29 %                      |
| <a href="#">400-703-602</a>                                     | ARCHITECT AND ENGINEER          | 40,000.00                        | 40,000.00                       | 0.00                       | 1,150.00                   | 38,850.00                                       | 97.13 %                      |
| <a href="#">400-703-625</a>                                     | UTILITIES-ELECTRICAL            | 75,000.00                        | 75,000.00                       | 4,597.50                   | 22,099.69                  | 52,900.31                                       | 70.53 %                      |
| <a href="#">400-703-911</a>                                     | CONSTRUCTION IN PROGRESS        | 150,000.00                       | 150,000.00                      | 0.00                       | 0.00                       | 150,000.00                                      | 100.00 %                     |
| <a href="#">400-703-919</a>                                     | MACHINERY AND EQUIPMENT         | 50,000.00                        | 50,000.00                       | 0.00                       | 18,069.60                  | 31,930.40                                       | 63.86 %                      |
| <a href="#">400-704-560</a>                                     | REPAIRS & MAINTENANCE           | 125,000.00                       | 125,000.00                      | 9,124.45                   | 36,825.51                  | 88,174.49                                       | 70.54 %                      |
| <a href="#">400-704-603</a>                                     | OTHER CONTRACTUAL               | 270,000.00                       | 270,000.00                      | 27,200.51                  | 108,419.67                 | 161,580.33                                      | 59.84 %                      |
| <a href="#">400-704-636</a>                                     | EMERGENCY CONTRACT REPAIRS      | 10,000.00                        | 10,000.00                       | 0.00                       | 4,847.08                   | 5,152.92  | 51.53 %                      |
| <a href="#">400-704-911</a>                                     | CONSTRUCTION IN PROGRESS        | 100,000.00                       | 100,000.00                      | 0.00                       | 0.00                       | 100,000.00                                      | 100.00 %                     |
| <a href="#">400-705-600</a>                                     | CONTRACTUAL SERVICES            | 914,548.00                       | 914,548.00                      | 78,435.42                  | 359,747.44                 | 554,800.56                                      | 60.66 %                      |
| <a href="#">400-706-600</a>                                     | CONTRACTUAL SERVICES            | 421,961.00                       | 421,961.00                      | 35,164.00                  | 174,521.00                 | 247,440.00                                      | 58.64 %                      |
|   | <b>Expense Total:</b>           | <b>3,112,573.81</b>              | <b>3,112,573.81</b>             | <b>204,577.55</b>          | <b>1,065,357.95</b>        | <b>2,047,215.86</b>                             | <b>65.77%</b>                |
| <b>Fund: 400 - WATERWORKS AND SEWER FUND Surplus (Deficit):</b> |                                 | <b>65,366.19</b>                 | <b>65,366.19</b>                | <b>63,771.04</b>           | <b>232,632.66</b>          | <b>167,266.47</b>                               | <b>-255.89%</b>              |
| <b>Fund: 480 - HARBOR FUND</b>                                  |                                 |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>  |                                 |                                  |                                 |                            |                            |   |                              |
| <a href="#">480-000-117</a>                                     | SALES TAX DISCOUNT              | 500.00                           | 500.00                          | 50.00                      | 300.00                     | -200.00   | 40.00 %                      |
| <a href="#">480-000-340</a>                                     | INTEREST EARNINGS               | 8,000.00                         | 8,000.00                        | -581.88                    | -3,690.64                  | -11,690.64                                      | 146.13 %                     |
| <a href="#">480-000-361</a>                                     | OTHER SALES                     | 115,000.00                       | 115,000.00                      | 9,917.17                   | 45,233.52                  | -69,766.48                                      | 60.67 %                      |
| <a href="#">480-000-366</a>                                     | HARBOR BERTH RENTAL             | 400,000.00                       | 400,000.00                      | 35,150.21                  | 188,364.97                 | -211,635.03                                     | 52.91 %                      |
| <a href="#">480-000-367</a>                                     | EVENT PARKING                   | 1,200.00                         | 1,200.00                        | 4,880.00                   | 4,880.00                   | 3,680.00  | 406.67 %                     |
| <a href="#">480-000-368</a>                                     | NAVY LAND LEASE                 | 23,268.60                        | 23,268.60                       | 0.00                       | 3,765.14                   | -19,503.46                                      | 83.82 %                      |
| <a href="#">480-000-370</a>                                     | NAVY SLIP LEASE                 | 11,152.44                        | 11,152.44                       | 0.00                       | 1,812.61                   | -9,339.83                                       | 83.75 %                      |
| <a href="#">480-000-372</a>                                     | PENALTY                         | 5,000.00                         | 5,000.00                        | 40.00                      | 69.56                      | -4,930.44                                       | 98.61 %                      |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|  |   | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|--|---|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <a href="#">480-000-373</a>                      | HARBOR COM.LEASES-KIMBALL'S                                 | 8,366.18                         | 8,366.18                        | 0.00                       | 0.00                       | -8,366.18                                       | 100.00 %                     |
| <a href="#">480-000-374</a>                      | HARBOR COM.LEASES-JERRY FORTE                               | 19,300.32                        | 19,300.32                       | 5,713.75                   | 12,713.75                  | -6,586.57                                       | 34.13 %                      |
| <a href="#">480-000-375</a>                      | HARBOR COM.LEASES-SHAQGGY'S                                 | 41,944.61                        | 41,944.61                       | 3,526.52                   | 17,632.60                  | -24,312.01                                      | 57.96 %                      |
| <a href="#">480-000-376</a>                      | HARBOR COM.LEASE-STELLA MARR...                             | 21,283.63                        | 21,283.63                       | 0.00                       | 0.00                       | -21,283.63                                      | 100.00 %                     |
| <a href="#">480-000-377</a>                      | ROSCOE/NEYSA BAIT SHOP                                      | 10,712.00                        | 10,712.00                       | 0.00                       | 5,308.01                   | -5,403.99                                       | 50.45 %                      |
| <a href="#">480-000-378</a>                      | LEASE SEA LEVEL/ICE MACHINES                                | 8,143.24                         | 8,143.24                        | 602.99                     | 3,014.95                   | -5,128.29                                       | 62.98 %                      |
| <a href="#">480-000-379</a>                      | MISC. ENTERPRISE INCOME                                     | 20,000.00                        | 20,000.00                       | 2,504.57                   | 20,308.29                  | 308.29  | 101.54 %                     |
|  | <b>Revenue Total:</b>                                       | <b>693,871.02</b>                | <b>693,871.02</b>               | <b>61,803.33</b>           | <b>299,712.76</b>          | <b>-394,158.26</b>                              | <b>56.81%</b>                |
| <b>Expense</b>                                   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">480-751-401</a>                      | SALARY - DEPARTMENT HEAD                                    | 51,319.94                        | 51,319.94                       | 3,832.31                   | 22,577.69                  | 28,742.25                                       | 56.01 %                      |
| <a href="#">480-751-403</a>                      | CLERICAL  | 32,448.00                        | 32,448.00                       | 0.00                       | 0.00                       | 32,448.00                                       | 100.00 %                     |
| <a href="#">480-751-404</a>                      | SALARY - REGULAR  | 222,333.37                       | 221,645.93                      | 24,499.79                  | 114,056.52                 | 107,589.41                                      | 48.54 %                      |
| <a href="#">480-751-450</a>                      | SALARY - OVERTIME   | 2,500.00                         | 2,500.00                        | 305.57                     | 645.25                     | 1,854.75  | 74.19 %                      |
| <a href="#">480-751-460</a>                      | STATE RETIREMENT  | 56,705.27                        | 56,705.27                       | 5,269.33                   | 25,259.41                  | 31,445.86                                       | 55.45 %                      |
| <a href="#">480-751-470</a>                      | FICA  | 23,416.75                        | 23,416.75                       | 2,080.20                   | 10,052.26                  | 13,364.49                                       | 57.07 %                      |
| <a href="#">480-751-480</a>                      | EMPLOYEE GROUP INSURANCE                                    | 61,287.42                        | 61,287.42                       | 4,366.92                   | 19,209.64                  | 42,077.78                                       | 68.66 %                      |
| <a href="#">480-751-481</a>                      | CLINIC SERVICES   | 2,700.00                         | 2,700.00                        | 200.00                     | 1,025.00                   | 1,675.00  | 62.04 %                      |
| <a href="#">480-751-490</a>                      | UNEMPLOYMENT CONTRIBUTION                                   | 0.00                             | 687.44                          | 687.44                     | 687.44                     | 0.00  | 0.00 %                       |
| <a href="#">480-751-491</a>                      | HARBOR  | 5,000.00                         | 5,000.00                        | 0.00                       | 3,750.00                   | 1,250.00  | 25.00 %                      |
| <a href="#">480-751-500</a>                      | OFFICE SUPPLIES   | 150.00                           | 250.00                          | 55.27                      | 200.17                     | 49.83   | 19.93 %                      |
| <a href="#">480-751-505</a>                      | GENERAL SUPPLIES & EXPENSE                                  | 10,000.00                        | 9,900.00                        | 378.83                     | 1,915.20                   | 7,984.80  | 80.65 %                      |
| <a href="#">480-751-510</a>                      | JANITORIAL SUPPLIES & EXPENSE                               | 5,000.00                         | 5,000.00                        | 123.23                     | 629.55                     | 4,370.45  | 87.41 %                      |
| <a href="#">480-751-525</a>                      | FUEL  | 10,000.00                        | 10,000.00                       | 598.76                     | 2,613.61                   | 7,386.39  | 73.86 %                      |
| <a href="#">480-751-535</a>                      | UNIFORMS  | 5,000.00                         | 5,000.00                        | 239.96                     | 1,822.84                   | 3,177.16  | 63.54 %                      |
| <a href="#">480-751-560</a>                      | REPAIRS & MAINTENANCE                                       | 30,000.00                        | 30,000.00                       | 127.72                     | 3,222.00                   | 26,778.00                                       | 89.26 %                      |
| <a href="#">480-751-571</a>                      | TIRES & TUBES   | 2,000.00                         | 2,000.00                        | 0.00                       | 0.00                       | 2,000.00  | 100.00 %                     |
| <a href="#">480-751-600</a>                      | CONTRACTUAL SERVICES  | 25,000.00                        | 25,000.00                       | 943.56                     | 14,701.18                  | 10,298.82                                       | 41.20 %                      |
| <a href="#">480-751-602</a>                      | ARCHITECT AND ENGINEER                                      | 425.00                           | 425.00                          | 0.00                       | 0.00                       | 425.00  | 100.00 %                     |
| <a href="#">480-751-603</a>                      | OTHER CONTRACTUAL   | 75.00                            | 75.00                           | 0.00                       | 0.00                       | 75.00   | 100.00 %                     |
| <a href="#">480-751-605</a>                      | TELEPHONE   | 1,200.00                         | 1,200.00                        | 0.00                       | 485.99                     | 714.01  | 59.50 %                      |
| <a href="#">480-751-625</a>                      | UTILITIES-ELECTRICAL  | 100,000.00                       | 100,000.00                      | 9,461.92                   | 49,485.53                  | 50,514.47                                       | 50.51 %                      |
| <a href="#">480-751-635</a>                      | CONTRACTUAL REPAIRS & MAINTA...                             | 20,000.00                        | 20,000.00                       | 3,155.00                   | 7,105.00                   | 12,895.00                                       | 64.48 %                      |
| <a href="#">480-751-639</a>                      | RENTALS   | 5,000.00                         | 5,000.00                        | 140.00                     | 700.00                     | 4,300.00  | 86.00 %                      |
| <a href="#">480-751-919</a>                      | MACHINERY AND EQUIPMENT                                     | 1,694.71                         | 1,694.71                        | 0.00                       | 508.38                     | 1,186.33  | 70.00 %                      |
|  | <b>Expense Total:</b>                                       | <b>673,255.46</b>                | <b>673,255.46</b>               | <b>56,465.81</b>           | <b>280,652.66</b>          | <b>392,602.80</b>                               | <b>58.31%</b>                |
|  | <b>Fund: 480 - HARBOR FUND Surplus (Deficit):</b>           | <b>20,615.56</b>                 | <b>20,615.56</b>                | <b>5,337.52</b>            | <b>19,060.10</b>           | <b>-1,555.46</b>                                | <b>7.55%</b>                 |
| <b>Fund: 481 - HARBOR TIDELANDS FUND</b>         |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">481-000-259</a>                      | STATE GRANT - ENTERPRISE                                    | 800,000.00                       | 800,000.00                      | 0.00                       | 0.00                       | -800,000.00                                     | 100.00 %                     |
| <a href="#">481-000-340</a>                      | INTEREST EARNINGS   | 500.00                           | 500.00                          | -146.57                    | -778.40                    | -1,278.40                                       | 255.68 %                     |
|  | <b>Revenue Total:</b>                                       | <b>800,500.00</b>                | <b>800,500.00</b>               | <b>-146.57</b>             | <b>-778.40</b>             | <b>-801,278.40</b>                              | <b>100.10%</b>               |
| <b>Expense</b>                                   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">481-751-602</a>                      | ARCHITECT AND ENGINEER                                      | 75,000.00                        | 75,000.00                       | 2,187.50                   | 12,390.00                  | 62,610.00                                       | 83.48 %                      |
| <a href="#">481-751-911</a>                      | CONSTRUCTION IN PROGRESS                                    | 675,000.00                       | 675,000.00                      | 0.00                       | 0.00                       | 675,000.00                                      | 100.00 %                     |
|  | <b>Expense Total:</b>                                       | <b>750,000.00</b>                | <b>750,000.00</b>               | <b>2,187.50</b>            | <b>12,390.00</b>           | <b>737,610.00</b>                               | <b>98.35%</b>                |
|  | <b>Fund: 481 - HARBOR TIDELANDS FUND Surplus (Deficit):</b> | <b>50,500.00</b>                 | <b>50,500.00</b>                | <b>-2,334.07</b>           | <b>-13,168.40</b>          | <b>-63,668.40</b>                               | <b>126.08%</b>               |
| <b>Fund: 611 - PAYROLL CLEARING FUND</b>         |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">611-000-340</a>                      | INTEREST EARNINGS   | 4,500.00                         | 4,500.00                        | 403.09                     | 2,120.43                   | -2,379.57                                       | 52.88 %                      |
|  | <b>Revenue Total:</b>                                       | <b>4,500.00</b>                  | <b>4,500.00</b>                 | <b>403.09</b>              | <b>2,120.43</b>            | <b>-2,379.57</b>                                | <b>52.88%</b>                |
|  | <b>Fund: 611 - PAYROLL CLEARING FUND Total:</b>             | <b>4,500.00</b>                  | <b>4,500.00</b>                 | <b>403.09</b>              | <b>2,120.43</b>            | <b>-2,379.57</b>                                | <b>52.88%</b>                |
| <b>Fund: 613 - CITY CLERK TAX COLLECTOR FUND</b> |   |                                  |                                 |                            |                            |   |                              |
| <b>Revenue</b>                                   |   |                                  |                                 |                            |                            |   |                              |
| <a href="#">613-000-200</a>                      | AD VALOREM TAXES- CURRENT YEAR                              | 20,426,039.00                    | 20,426,039.00                   | 9,884,202.34               | 13,752,837.40              | -6,673,201.60                                   | 32.67 %                      |
| <a href="#">613-000-340</a>                      | INTEREST EARNINGS   | 12,500.00                        | 12,500.00                       | 2,951.51                   | 4,708.56                   | -7,791.44                                       | 62.33 %                      |

**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

|   | <b>Original<br/>Total Budget</b> | <b>Current<br/>Total Budget</b> | <b>Period<br/>Activity</b> | <b>Fiscal<br/>Activity</b> | <b>Variance<br/>Favorable<br/>(Unfavorable)</b> | <b>Percent<br/>Remaining</b> |
|---|----------------------------------|---------------------------------|----------------------------|----------------------------|---|------------------------------|
| <a href="#">613-000-385</a>   |                                  |                                 |                            |                            |   |                              |
| TRANSFER TO OTHER FUNDS   | 0.00                             | 0.00                            | 0.00                       | -12,944.59                 | -12,944.59                                      | 0.00 %                       |
| <b>Revenue Total:</b>   | <b>20,438,539.00</b>             | <b>20,438,539.00</b>            | <b>9,887,153.85</b>        | <b>13,744,601.37</b>       | <b>-6,693,937.63</b>                            | <b>32.75%</b>                |
| <b>Expense</b>  |                                  |                                 |                            |                            |   |                              |
| <a href="#">613-742-640</a>   |                                  |                                 |                            |                            |   |                              |
| AID TO OTHER GOVERNMENTS  | 5,271,054.00                     | 5,271,054.00                    | 2,228,232.43               | 3,491,468.36               | 1,779,585.64                                    | 33.76 %                      |
| <a href="#">613-745-640</a>   |                                  |                                 |                            |                            |   |                              |
| AID TO OTHER GOVERNMENTS  | 231,985.00                       | 231,985.00                      | 166,138.09                 | 222,676.47                 | 9,308.53  | 4.01 %                       |
| <a href="#">613-747-645</a>   |                                  |                                 |                            |                            |   |                              |
| AID TO OTHER GOVERNMENTS  | 14,923,000.00                    | 14,923,000.00                   | 7,489,831.82               | 10,038,692.57              | 4,884,307.43                                    | 32.73 %                      |
| <b>Expense Total:</b>   | <b>20,426,039.00</b>             | <b>20,426,039.00</b>            | <b>9,884,202.34</b>        | <b>13,752,837.40</b>       | <b>6,673,201.60</b>                             | <b>32.67%</b>                |
| <b>Fund: 613 - CITY CLERK TAX COLLECTOR FUND Surplus (Deficit):</b> | <b>12,500.00</b>                 | <b>12,500.00</b>                | <b>2,951.51</b>            | <b>-8,236.03</b>           | <b>-20,736.03</b>                               | <b>165.89%</b>               |
| <b>Report Surplus (Deficit):</b>                                    | <b>-2,352,060.97</b>             | <b>-2,406,126.02</b>            | <b>697,280.03</b>          | <b>643,724.72</b>          | <b>3,049,850.74</b>                             | <b>126.75%</b>               |

**Group Summary**

| Account Typ...  | Original<br>Total Budget | Current<br>Total Budget | Period<br>Activity  | Fiscal<br>Activity  | Variance<br>Favorable<br>(Unfavorable) | Percent<br>Remaining |
|---|--------------------------|-------------------------|---------------------|---------------------|--|----------------------|
| <b>Fund: 001 - GENERAL FUND</b>                                     |                          |                         |                     |                     |  |                      |
| Revenue   | 8,591,091.00             | 8,591,091.00            | 2,402,156.37        | 4,800,748.35        | -3,790,342.65                          | 44.12%               |
| Expense   | 8,445,713.76             | 8,499,778.81            | 530,624.55          | 3,249,086.48        | 5,250,692.33                           | 61.77%               |
| <b>Fund: 001 - GENERAL FUND Surplus (Deficit):</b>                  | <b>145,377.24</b>        | <b>91,312.19</b>        | <b>1,871,531.82</b> | <b>1,551,661.87</b> | <b>1,460,349.68</b>                    | <b>-1,599.29%</b>    |
| <b>Fund: 107 - HOMELAND SECURITY GRANT</b>                          |                          |                         |                     |                     |  |                      |
| Revenue   | 0.00                     | 15,000.00               | 0.00                | 0.00                | -15,000.00                             | 100.00%              |
| Expense   | 0.00                     | 15,000.00               | 0.00                | 15,000.00           | 0.00                                   | 0.00%                |
| <b>Fund: 107 - HOMELAND SECURITY GRANT Surplus (Deficit):</b>       | <b>0.00</b>              | <b>0.00</b>             | <b>0.00</b>         | <b>-15,000.00</b>   | <b>-15,000.00</b>                      | <b>0.00%</b>         |
| <b>Fund: 110 - CASH FORFEITURE FUND</b>                             |                          |                         |                     |                     |  |                      |
| Revenue   | 650.00                   | 650.00                  | 13.56               | 80.29               | -569.71                                | 87.65%               |
| <b>Fund: 110 - CASH FORFEITURE FUND Total:</b>                      | <b>650.00</b>            | <b>650.00</b>           | <b>13.56</b>        | <b>80.29</b>        | <b>-569.71</b>                         | <b>87.65%</b>        |
| <b>Fund: 111 - PUBLIC SAFETY FUND</b>                               |                          |                         |                     |                     |  |                      |
| Revenue   | 23,171.70                | 23,171.70               | 2,739.39            | 8,071.22            | -15,100.48                             | 65.17%               |
| Expense   | 23,021.70                | 23,021.70               | 3,893.24            | 14,657.55           | 8,364.15                               | 36.33%               |
| <b>Fund: 111 - PUBLIC SAFETY FUND Surplus (Deficit):</b>            | <b>150.00</b>            | <b>150.00</b>           | <b>-1,153.85</b>    | <b>-6,586.33</b>    | <b>-6,736.33</b>                       | <b>4,490.89%</b>     |
| <b>Fund: 116 - FIRE PROTECTION FUND</b>                             |                          |                         |                     |                     |  |                      |
| Revenue   | 46,800.00                | 46,800.00               | 180.47              | 1,240.18            | -45,559.82                             | 97.35%               |
| Expense   | 141,000.00               | 141,000.00              | 528.20              | 4,578.15            | 136,421.85                             | 96.75%               |
| <b>Fund: 116 - FIRE PROTECTION FUND Surplus (Deficit):</b>          | <b>-94,200.00</b>        | <b>-94,200.00</b>       | <b>-347.73</b>      | <b>-3,337.97</b>    | <b>90,862.03</b>                       | <b>96.46%</b>        |
| <b>Fund: 117 - CAPITAL IMPROVEMENT FUND</b>                         |                          |                         |                     |                     |  |                      |
| Revenue   | 100.00                   | 100.00                  | 2.25                | 319.56              | 219.56                                 | 219.56%              |
| Expense   | 126,316.91               | 126,316.91              | 0.00                | 126,745.60          | -428.69                                | -0.34%               |
| <b>Fund: 117 - CAPITAL IMPROVEMENT FUND Surplus (Deficit):</b>      | <b>-126,216.91</b>       | <b>-126,216.91</b>      | <b>2.25</b>         | <b>-126,426.04</b>  | <b>-209.13</b>                         | <b>-0.17%</b>        |
| <b>Fund: 118 - MODERNIZATION INFRASTRUCTURE TAX FUND</b>            |                          |                         |                     |                     |  |                      |
| Revenue   | 587,250.00               | 587,250.00              | 938.72              | 296,244.91          | -291,005.09                            | 49.55%               |
| Expense   | 919,274.00               | 919,274.00              | 50,353.55           | 250,782.07          | 668,491.93                             | 72.72%               |
| <b>Fund: 118 - MODERNIZATION INFRASTRUCTURE TAX FUND Surplus ..</b> | <b>-332,024.00</b>       | <b>-332,024.00</b>      | <b>-49,414.83</b>   | <b>45,462.84</b>    | <b>377,486.84</b>                      | <b>113.69%</b>       |
| <b>Fund: 140 - LIBRARY FUND</b>                                     |                          |                         |                     |                     |  |                      |
| Revenue   | 194,674.00               | 194,674.00              | 83,776.89           | 131,364.48          | -63,309.52                             | 32.52%               |
| Expense   | 191,157.00               | 191,157.00              | 31,859.50           | 79,648.75           | 111,508.25                             | 58.33%               |
| <b>Fund: 140 - LIBRARY FUND Surplus (Deficit):</b>                  | <b>3,517.00</b>          | <b>3,517.00</b>         | <b>51,917.39</b>    | <b>51,715.73</b>    | <b>48,198.73</b>                       | <b>-1,370.45%</b>    |
| <b>Fund: 141 - HURRICANE ZETA FEMA ACCOUNT</b>                      |                          |                         |                     |                     |  |                      |
| Revenue   | 2,062,126.09             | 2,062,126.09            | 0.00                | 0.00                | -2,062,126.09                          | 100.00%              |
| <b>Fund: 141 - HURRICANE ZETA FEMA ACCOUNT Total:</b>               | <b>2,062,126.09</b>      | <b>2,062,126.09</b>     | <b>0.00</b>         | <b>0.00</b>         | <b>-2,062,126.09</b>                   | <b>100.00%</b>       |
| <b>Fund: 142 - SENATE BILL 2849</b>                                 |                          |                         |                     |                     |  |                      |
| Revenue   | 500.00                   | 500.00                  | 38.23               | 216.17              | -283.83                                | 56.77%               |
| Expense   | 22,000.00                | 22,000.00               | 0.00                | 0.00                | 22,000.00                              | 100.00%              |
| <b>Fund: 142 - SENATE BILL 2849 Surplus (Deficit):</b>              | <b>-21,500.00</b>        | <b>-21,500.00</b>       | <b>38.23</b>        | <b>216.17</b>       | <b>21,716.17</b>                       | <b>101.01%</b>       |
| <b>Fund: 143 - HOUSE BILL 1353</b>                                  |                          |                         |                     |                     |  |                      |
| Revenue   | 12,500.00                | 12,500.00               | 821.95              | 4,647.33            | -7,852.67                              | 62.82%               |
| Expense   | 475,000.00               | 475,000.00              | 0.00                | 0.00                | 475,000.00                             | 100.00%              |
| <b>Fund: 143 - HOUSE BILL 1353 Surplus (Deficit):</b>               | <b>-462,500.00</b>       | <b>-462,500.00</b>      | <b>821.95</b>       | <b>4,647.33</b>     | <b>467,147.33</b>                      | <b>101.00%</b>       |
| <b>Fund: 144 - SENATE BILL 2468</b>                                 |                          |                         |                     |                     |  |                      |
| Revenue   | 10,000.00                | 10,000.00               | 1,264.13            | 7,251.55            | -2,748.45                              | 27.48%               |
| Expense   | 765,000.00               | 765,000.00              | 4,528.75            | 18,663.75           | 746,336.25                             | 97.56%               |
| <b>Fund: 144 - SENATE BILL 2468 Surplus (Deficit):</b>              | <b>-755,000.00</b>       | <b>-755,000.00</b>      | <b>-3,264.62</b>    | <b>-11,412.20</b>   | <b>743,587.80</b>                      | <b>98.49%</b>        |
| <b>Fund: 150 - GULF COAST RESTORATION FUND</b>                      |                          |                         |                     |                     |  |                      |
| Revenue   | 903,000.00               | 903,000.00              | 530.58              | 526,457.20          | -376,542.80                            | 41.70%               |
| Expense   | 800,000.00               | 800,000.00              | 0.00                | 0.00                | 800,000.00                             | 100.00%              |
| <b>Fund: 150 - GULF COAST RESTORATION FUND Surplus (Deficit):</b>   | <b>103,000.00</b>        | <b>103,000.00</b>       | <b>530.58</b>       | <b>526,457.20</b>   | <b>423,457.20</b>                      | <b>-411.12%</b>      |
| <b>Fund: 151 - AMERICAN RECOVERY PLAN ACT FUND</b>                  |                          |                         |                     |                     |  |                      |
| Revenue   | 0.00                     | 0.00                    | 402.56              | 1,963.92            | 1,963.92                               | 0.00%                |

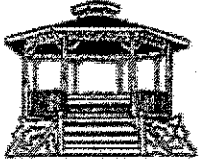
**Budget Report**

**For Fiscal: 2025-2026 Period Ending: 02/28/2026**

| Account Typ...  | Original<br>Total Budget | Current<br>Total Budget | Period<br>Activity   | Fiscal<br>Activity | Variance<br>Favorable<br>(Unfavorable) | Percent<br>Remaining |
|---|--------------------------|-------------------------|----------------------|--------------------|--|----------------------|
| Expense   | 908,000.00               | 908,000.00              | 76,027.91            | 337,524.83         | 570,475.17                             | 62.83%               |
| <b>Fund: 151 - AMERICAN RECOVERY PLAN ACT FUND Surplus (Deficit):</b> | <b>-908,000.00</b>       | <b>-908,000.00</b>      | <b>-75,625.35</b>    | <b>-335,560.91</b> | <b>572,439.09</b>                      | <b>63.04%</b>        |
| <b>Fund: 152 - GO MESA FUND</b>                                       |                          |                         |                      |                    |  |                      |
| Revenue   | 10,000,000.00            | 10,000,000.00           | 195,763.29           | 1,560,381.95       | -8,439,618.05                          | 84.40%               |
| Expense   | 9,773,570.11             | 9,773,570.11            | 1,308,068.16         | 2,558,266.90       | 7,215,303.21                           | 73.82%               |
| <b>Fund: 152 - GO MESA FUND Surplus (Deficit):</b>                    | <b>226,429.89</b>        | <b>226,429.89</b>       | <b>-1,112,304.87</b> | <b>-997,884.95</b> | <b>-1,224,314.84</b>                   | <b>540.70%</b>       |
| <b>Fund: 154 - HURRICANE IDA FEMA ACCOUNT</b>                         |                          |                         |                      |                    |  |                      |
| Revenue   | 287,932.97               | 287,932.97              | 0.00                 | 0.00               | -287,932.97                            | 100.00%              |
| Expense   | 1,080,000.00             | 1,080,000.00            | 0.00                 | 0.00               | 1,080,000.00                           | 100.00%              |
| <b>Fund: 154 - HURRICANE IDA FEMA ACCOUNT Surplus (Deficit):</b>      | <b>-792,067.03</b>       | <b>-792,067.03</b>      | <b>0.00</b>          | <b>0.00</b>        | <b>792,067.03</b>                      | <b>100.00%</b>       |
| <b>Fund: 156 - HB 603 INFRASTRUCTURE GRANT</b>                        |                          |                         |                      |                    |  |                      |
| Revenue   | 21,750.00                | 21,750.00               | 1,315.12             | 7,435.74           | -14,314.26                             | 65.81%               |
| Expense   | 775,000.00               | 775,000.00              | 0.00                 | 0.00               | 775,000.00                             | 100.00%              |
| <b>Fund: 156 - HB 603 INFRASTRUCTURE GRANT Surplus (Deficit):</b>     | <b>-753,250.00</b>       | <b>-753,250.00</b>      | <b>1,315.12</b>      | <b>7,435.74</b>    | <b>760,685.74</b>                      | <b>100.99%</b>       |
| <b>Fund: 159 - MS MUNICIPALITY COUNTY WATER INFRASTRUCTURE ...</b>    |                          |                         |                      |                    |  |                      |
| Revenue   | 750,000.00               | 750,000.00              | 0.00                 | 67,518.75          | -682,481.25                            | 91.00%               |
| Expense   | 733,000.00               | 733,000.00              | 58,927.90            | 255,107.30         | 477,892.70                             | 65.20%               |
| <b>Fund: 159 - MS MUNICIPALITY COUNTY WATER INFRASTRUCTURE ...</b>    | <b>17,000.00</b>         | <b>17,000.00</b>        | <b>-58,927.90</b>    | <b>-187,588.55</b> | <b>-204,588.55</b>                     | <b>1,203.46%</b>     |
| <b>Fund: 206 - 2025 BOND SERIES</b>                                   |                          |                         |                      |                    |  |                      |
| Revenue   | 25,000.00                | 25,000.00               | 2,019.19             | 11,695.73          | -13,304.27                             | 53.22%               |
| Expense   | 844,035.00               | 844,035.00              | 0.00                 | 104,259.99         | 739,775.01                             | 87.65%               |
| <b>Fund: 206 - 2025 BOND SERIES Surplus (Deficit):</b>                | <b>-819,035.00</b>       | <b>-819,035.00</b>      | <b>2,019.19</b>      | <b>-92,564.26</b>  | <b>726,470.74</b>                      | <b>88.70%</b>        |
| <b>Fund: 400 - WATERWORKS AND SEWER FUND</b>                          |                          |                         |                      |                    |  |                      |
| Revenue   | 3,177,940.00             | 3,177,940.00            | 268,348.59           | 1,297,990.61       | -1,879,949.39                          | 59.16%               |
| Expense   | 3,112,573.81             | 3,112,573.81            | 204,577.55           | 1,065,357.95       | 2,047,215.86                           | 65.77%               |
| <b>Fund: 400 - WATERWORKS AND SEWER FUND Surplus (Deficit):</b>       | <b>65,366.19</b>         | <b>65,366.19</b>        | <b>63,771.04</b>     | <b>232,632.66</b>  | <b>167,266.47</b>                      | <b>-255.89%</b>      |
| <b>Fund: 480 - HARBOR FUND</b>  |                          |                         |                      |                    |  |                      |
| Revenue   | 693,871.02               | 693,871.02              | 61,803.33            | 299,712.76         | -394,158.26                            | 56.81%               |
| Expense   | 673,255.46               | 673,255.46              | 56,465.81            | 280,652.66         | 392,602.80                             | 58.31%               |
| <b>Fund: 480 - HARBOR FUND Surplus (Deficit):</b>                     | <b>20,615.56</b>         | <b>20,615.56</b>        | <b>5,337.52</b>      | <b>19,060.10</b>   | <b>-1,555.46</b>                       | <b>7.55%</b>         |
| <b>Fund: 481 - HARBOR TIDELANDS FUND</b>                              |                          |                         |                      |                    |  |                      |
| Revenue   | 800,500.00               | 800,500.00              | -146.57              | -778.40            | -801,278.40                            | 100.10%              |
| Expense   | 750,000.00               | 750,000.00              | 2,187.50             | 12,390.00          | 737,610.00                             | 98.35%               |
| <b>Fund: 481 - HARBOR TIDELANDS FUND Surplus (Deficit):</b>           | <b>50,500.00</b>         | <b>50,500.00</b>        | <b>-2,334.07</b>     | <b>-13,168.40</b>  | <b>-63,668.40</b>                      | <b>126.08%</b>       |
| <b>Fund: 611 - PAYROLL CLEARING FUND</b>                              |                          |                         |                      |                    |  |                      |
| Revenue   | 4,500.00                 | 4,500.00                | 403.09               | 2,120.43           | -2,379.57                              | 52.88%               |
| <b>Fund: 611 - PAYROLL CLEARING FUND Total:</b>                       | <b>4,500.00</b>          | <b>4,500.00</b>         | <b>403.09</b>        | <b>2,120.43</b>    | <b>-2,379.57</b>                       | <b>52.88%</b>        |
| <b>Fund: 613 - CITY CLERK TAX COLLECTOR FUND</b>                      |                          |                         |                      |                    |  |                      |
| Revenue   | 20,438,539.00            | 20,438,539.00           | 9,887,153.85         | 13,744,601.37      | -6,693,937.63                          | 32.75%               |
| Expense   | 20,426,039.00            | 20,426,039.00           | 9,884,202.34         | 13,752,837.40      | 6,673,201.60                           | 32.67%               |
| <b>Fund: 613 - CITY CLERK TAX COLLECTOR FUND Surplus (Deficit):</b>   | <b>12,500.00</b>         | <b>12,500.00</b>        | <b>2,951.51</b>      | <b>-8,236.03</b>   | <b>-20,736.03</b>                      | <b>165.89%</b>       |
| <b>Report Surplus (Deficit):</b>                                      | <b>-2,352,060.97</b>     | <b>-2,406,126.02</b>    | <b>697,280.03</b>    | <b>643,724.72</b>  | <b>3,049,850.74</b>                    | <b>126.75%</b>       |

**Fund Summary**

| Fund                             | Original<br>Total Budget | Current<br>Total Budget | Period<br>Activity | Fiscal<br>Activity | Variance<br>Favorable<br>(Unfavorable) |
|----------------------------------|--------------------------|-------------------------|--------------------|--------------------|--|
| 001 - GENERAL FUND               | 145,377.24               | 91,312.19               | 1,871,531.82       | 1,551,661.87       | 1,460,349.68                           |
| 107 - HOMELAND SECURITY GRAN     | 0.00                     | 0.00                    | 0.00               | -15,000.00         | -15,000.00                             |
| 110 - CASH FORFEITURE FUND       | 650.00                   | 650.00                  | 13.56              | 80.29              | -569.71                                |
| 111 - PUBLIC SAFETY FUND         | 150.00                   | 150.00                  | -1,153.85          | -6,586.33          | -6,736.33                              |
| 116 - FIRE PROTECTION FUND       | -94,200.00               | -94,200.00              | -347.73            | -3,337.97          | 90,862.03                              |
| 117 - CAPITAL IMPROVEMENT FUN    | -126,216.91              | -126,216.91             | 2.25               | -126,426.04        | -209.13                                |
| 118 - MODERNIZATION INFRASTRU    | -332,024.00              | -332,024.00             | -49,414.83         | 45,462.84          | 377,486.84                             |
| 140 - LIBRARY FUND               | 3,517.00                 | 3,517.00                | 51,917.39          | 51,715.73          | 48,198.73                              |
| 141 - HURRICANE ZETA FEMA ACC    | 2,062,126.09             | 2,062,126.09            | 0.00               | 0.00               | -2,062,126.09                          |
| 142 - SENATE BILL 2849           | -21,500.00               | -21,500.00              | 38.23              | 216.17             | 21,716.17                              |
| 143 - HOUSE BILL 1353            | -462,500.00              | -462,500.00             | 821.95             | 4,647.33           | 467,147.33                             |
| 144 - SENATE BILL 2468           | -755,000.00              | -755,000.00             | -3,264.62          | -11,412.20         | 743,587.80                             |
| 150 - GULF COAST RESTORATION I   | 103,000.00               | 103,000.00              | 530.58             | 526,457.20         | 423,457.20                             |
| 151 - AMERICAN RECOVERY PLAN     | -908,000.00              | -908,000.00             | -75,625.35         | -335,560.91        | 572,439.09                             |
| 152 - GO MESA FUND               | 226,429.89               | 226,429.89              | -1,112,304.87      | -997,884.95        | -1,224,314.84                          |
| 154 - HURRICANE IDA FEMA ACCO    | -792,067.03              | -792,067.03             | 0.00               | 0.00               | 792,067.03                             |
| 156 - HB 603 INFRASTRUCTURE GF   | -753,250.00              | -753,250.00             | 1,315.12           | 7,435.74           | 760,685.74                             |
| 159 - MS MUNICIPALITY COUNTY     | 17,000.00                | 17,000.00               | -58,927.90         | -187,588.55        | -204,588.55                            |
| 206 - 2025 BOND SERIES           | -819,035.00              | -819,035.00             | 2,019.19           | -92,564.26         | 726,470.74                             |
| 400 - WATERWORKS AND SEWER I     | 65,366.19                | 65,366.19               | 63,771.04          | 232,632.66         | 167,266.47                             |
| 480 - HARBOR FUND                | 20,615.56                | 20,615.56               | 5,337.52           | 19,060.10          | -1,555.46                              |
| 481 - HARBOR TIDELANDS FUND      | 50,500.00                | 50,500.00               | -2,334.07          | -13,168.40         | -63,668.40                             |
| 611 - PAYROLL CLEARING FUND      | 4,500.00                 | 4,500.00                | 403.09             | 2,120.43           | -2,379.57                              |
| 613 - CITY CLERK TAX COLLECTOR   | 12,500.00                | 12,500.00               | 2,951.51           | -8,236.03          | -20,736.03                             |
| <b>Report Surplus (Deficit):</b> | <b>-2,352,060.97</b>     | <b>-2,406,126.02</b>    | <b>697,280.03</b>  | <b>643,724.72</b>  | <b>3,049,850.74</b>                    |



City of Pass Christian, MS

CD-1  
3-17-26

# Docket of Claims Register

APPKT08171 - BOA 3/17/26

By Docket/Claim Number

| Vendor # | Vendor Name<br>Payable Number                  | Docket/Claim #<br>Payable Description | Payable Type | Payable Date | Item Description                        | Account Number | Payment Amount<br>Distribution Amount |
|----------|--|---------------------------------------|--------------|--------------|---|----------------|---------------------------------------|
| 02294    | ACTL, LLC<br>000783                            | DKT27357<br>Sweeper Truck Repars      | Invoice      | 03/13/2026   | Additional Labor                        | 001-301-560    | 935.18<br>175.00                      |
|          |  |                                       |              |              | Computer Diagnostic                     | 001-301-560    | 225.00                                |
|          |  |                                       |              |              | Mileage                                 | 001-301-560    | 49.00                                 |
|          |  |                                       |              |              | Sweeper Truck Repars service call       | 001-301-560    | 425.00                                |
|          |  |                                       |              |              | Taxes                                   | 001-301-560    | 61.18                                 |
| 01909    | AGJ SYSTEMS AND NETWORKS IN<br>129993          | DKT27358<br>BOOKING PC QUOTE 4372     | Invoice      | 03/09/2026   | BOOKING PC QUOTE 4372                   | 001-200-505    | 1,266.44<br>1,227.47                  |
|          | 129995   | 5 PORT GIGABIT SWITCH                 | Invoice      | 03/09/2026   | 5 PORT GIGABIT SWITCH                   | 001-200-505    | 24.99                                 |
|          | 129997   | HDMI TO DISPLAY PORT                  | Invoice      | 03/09/2026   | HDMI TO DISPLAY PORT                    | 001-110-505    | 13.98                                 |
| 02214    | AMAZON CAPITAL SERVICES<br>112 1110624-3985805 | DKT27359<br>Corbin's Academy Uniform  | Invoice      | 01/21/2026   | Port & Co Fleece Pullover Hooded Swe    | 001-220-535    | 925.60<br>22.76                       |
|          |  |                                       |              |              | Port & Co Fleece Pullover Hooded Swe    | 001-220-535    | 22.76                                 |
|          |  |                                       |              |              | Port & Company Men's Classic Sweatp     | 001-220-535    | 22.76                                 |
|          |  |                                       |              |              | Port & Company Men's Classic Sweatp     | 001-220-535    | 22.76                                 |
|          | 112 2407070-9685047                            | Picture Frames                        | Invoice      | 01/15/2026   | Urinal Screens Deodorizer 56 Pack Urir  | 001-220-510    | 39.99                                 |
|          | 112 4145313-5679418                            | Hand Soap                             | Invoice      | 02/10/2026   | Hand Soap(6es)                          | 001-301-510    | 17.82                                 |
|          | 112-4145313-5679418                            | DUAL STAND FOR DESK 2 SCREEN 32"      | Invoice      | 02/10/2026   | DUAL STAND FOR DESK 2 SCREEN 32"        | 001-110-505    | 63.16                                 |
|          |  |                                       |              |              | MOUNT PRO Dual Monitor Stand, Free      | 001-110-505    | 39.99                                 |
|          | 112-8829507-4533058                            | HAND SOAP/STATIONERY'S                | Invoice      | 02/24/2026   | HANDSOAP/ CASE                          | 001-200-500    | 18.37                                 |
|          |  |                                       |              |              | STATIONERY FOR MARDI GRAS ASSIST/       | 001-200-500    | 30.48                                 |
|          | 112-9754200-7293837                            | RUBBER BANDS 150PCS 4.8INCH           | Invoice      | 02/02/2026   | Amazon Basics Rubber Bands, Size 33     | 001-110-500    | 16.99                                 |
|          |  |                                       |              |              | NextDayLabels Gold Seals for Certificat | 001-105-505    | 14.12                                 |
|          |  |                                       |              |              | RUBBER BANDS 150PCS 4.8INCH             | 001-110-500    | 16.48                                 |
|          |  |                                       |              |              | YOUOWO Rubber Bands Size #64 Beige      | 001-110-500    | 12.88                                 |
|          | 113-5622138-5809040                            | EAR PIECE FOR HARRIS RADIO- C. WILL   | Invoice      | 02/10/2026   | 10 pk KEY FOB                           | 001-200-500    | 6.67                                  |
|          |  |                                       |              |              | EAR PIECE FOR HARRIS RADIO- C. WILL     | 001-200-535    | 92.86                                 |
|          | 113-5731165-6961059                            | GRILL FOR TRANSPORT VAN               | Invoice      | 02/13/2026   | GRILL FOR TRANSPORT VAN                 | 001-200-560    | 128.99                                |
|          | 113-7042925-2429867                            | PLANTRONICS HEADSET ENCORE PRO        | Invoice      | 01/28/2026   | PLANTRONICS HEADSET ENCORE PRO          | 001-200-505    | 225.07                                |
|          | 113-9093621-3455424                            | DAWN 2 PACK DISHWASHING LIQUID        | Invoice      | 02/03/2026   | CLOROX TOILET CLEANER 2PK               | 001-200-500    | 15.72                                 |
|          |  |                                       |              |              | CLOROX WIPES 3 PCK                      | 001-200-500    | 25.56                                 |
|          |  |                                       |              |              | DAWN 2 PACK DISHWASHING LIQUID          | 001-200-500    | 15.48                                 |
|          |  |                                       |              |              | FABULOSO 4 PL                           | 001-200-500    | 34.49                                 |
|          |  |                                       |              |              | PINALEN SPRAY CLEANER                   | 001-200-500    | 5.94                                  |
|          |  |                                       |              |              | PLEDGE 3 PL                             | 001-200-500    | 13.50                                 |

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| Vendor # | Vendor Name                 | Docket/Claim #                      | Payable Type | Payable Date | Item Description                    | Account Number | Payment Amount      |
|----------|-----------------------------|-------------------------------------|--------------|--------------|-------------------------------------|----------------|---------------------|
|          | Payable Number              | Payable Description                 |              |              |                                     |                | Distribution Amount |
| 00011    | AMERICAN MUNICIPAL SERVICES | DKT27360                            |              |              |                                     |                | 15.99               |
|          | 4987                        | Collection Fees(Utilities)          | Invoice      | 03/10/2026   | Collection Fees(Utilities)          | 400-700-612    | 15.99               |
| 00011    | AMERICAN MUNICIPAL SERVICES | DKT27361                            |              |              |                                     |                | 631.51              |
|          | 130192                      | Collection Fees                     | Invoice      | 11/08/2025   | 10/1-10/31/25                       | 001-101-612    | 134.50              |
|          | 137065                      | Collection Fees                     | Invoice      | 12/05/2025   | 11/1-11/30/25                       | 001-101-612    | 147.61              |
|          | 148523                      | Collection Fees                     | Invoice      | 01/13/2026   | 12-1-12/31/25                       | 001-101-612    | 30.00               |
|          | 157597                      | Collection Fees                     | Invoice      | 02/09/2026   | 1/1-1/31/26                         | 001-101-612    | 85.40               |
|          | 168572                      | Collection Fees                     | Invoice      | 03/10/2026   | 2/1-2/28/26                         | 001-101-612    | 234.00              |
| 02570    | AMERICAN TANK MAINTENANCE   | DKT27362                            |              |              |                                     |                | 14,881.66           |
|          | 116174                      | Bayview Street Tank                 | Invoice      | 03/01/2026   | Bayview Street Tank                 | 118-703-600    | 7,161.58            |
|          | 116353                      | East 2nd Street Tank                | Invoice      | 03/01/2026   | East 2nd Street Tank                | 118-703-600    | 7,720.08            |
| 02223    | AUTO SERVICE CENTER, INC.   | DKT27363                            |              |              |                                     |                | 227.48              |
|          | 32476                       | R/O 32476 UNIT 232 OIL CHANGE, TIRE | Invoice      | 03/03/2026   | R/O 32476 UNIT 232 OIL CHANGE, TIRE | 001-200-560    | 84.48               |
|          | 32529                       | R/O 32529 DIAGNOSTIC ON 2018 DUR    | Invoice      | 03/11/2026   | R/O 32529 DIAGNOSTIC ON 2018 DUR    | 001-200-560    | 143.00              |
| 01551    | BENJMIN M. FIELDS SR        | DKT27364                            |              |              |                                     |                | 2,750.00            |
|          | 220436                      | Cement Repair Work                  | Invoice      | 02/26/2026   | Cement Repair Work                  | 001-301-635    | 1,250.00            |
|          | 220438                      | Cement repair work                  | Invoice      | 03/02/2026   | Cement repair work                  | 001-301-635    | 1,500.00            |
| 02426    | BOXCAST INC                 | DKT27365                            |              |              |                                     |                | 329.19              |
|          | 92CA6172-0099               | BOA Streaming                       | Invoice      | 03/01/2026   | BOA Streaming                       | 001-107-600    | 189.00              |
|          | 92CA6172-0100               | Archived Storage                    | Invoice      | 03/03/2026   | Archived Storage                    | 001-107-600    | 140.19              |
| 00038    | CABLE ONE                   | DKT27366                            |              |              |                                     |                | 33.62               |
|          | INV0014316                  | Internet                            | Invoice      | 02/23/2026   | 399 E Second St                     | 001-107-628    | 33.62               |
| 01035    | CARD SERVICES               | DKT27367                            |              |              |                                     |                | 2,560.00            |
|          | 3151767966                  | Utility App(Lift Stations)          | Invoice      | 02/27/2026   | Utility App(Lift Stations)          | 400-704-560    | 2,560.00            |

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| Vendor # | Vendor Name                | Docket/Claim #                   | Payable Type | Payable Date | Item Description                     | Account Number | Payment Amount      |
|----------|----------------------------|----------------------------------|--------------|--------------|--------------------------------------|----------------|---------------------|
|          | Payable Number             | Payable Description              |              |              |                                      |                | Distribution Amount |
| 01035    | CARD SERVICES              | DKT27368                         |              |              |                                      |                | 4,729.12            |
|          | 00289143095823             | 9.3 Autodark weld H              | Invoice      | 02/04/2026   | 9.3 Auto dark weld H                 | 001-301-505    | 99.99               |
|          | 109374                     | Ms Fire Investigator Yearly fee  | Invoice      | 02/19/2026   | Active - 1yr                         | 001-220-610    | 100.00              |
|          |                            |                                  |              |              | Administrative Fee                   | 001-220-610    | 3.00                |
|          |                            |                                  |              |              | Mississippi - Active 1yr             | 001-220-610    | 22.00               |
|          |                            |                                  |              |              | MS 1yr                               | 001-220-610    | 3.00                |
|          | 2PP84894H0476930A          | MS Muncipal Clerks Assoc Renewal | Invoice      | 02/17/2026   | MS Muncipal Clerks Assoc Renewal     | 001-105-610    | 100.00              |
|          | 386036541195449            | Supplies from Walmart            | Invoice      | 02/05/2026   | car soap                             | 480-751-510    | 4.47                |
|          |                            |                                  |              |              | cups                                 | 480-751-510    | 15.88               |
|          |                            |                                  |              |              | dish soap                            | 480-751-510    | 17.94               |
|          |                            |                                  |              |              | faucets                              | 480-751-510    | 44.76               |
|          |                            |                                  |              |              | paper towels                         | 480-751-510    | 45.12               |
|          | 392658                     | FIMCO 2.4 12V PUMP               | Invoice      | 02/04/2026   | CAP T POST                           | 001-301-505    | 17.99               |
|          |                            |                                  |              |              | CAP T POST                           | 001-301-505    | 17.99               |
|          |                            |                                  |              |              | FIMCO 2.4 12V PUMP                   | 001-301-505    | 99.99               |
|          |                            |                                  |              |              | SPRAY GUN                            | 001-301-505    | 74.99               |
|          | 437-1-9296-1068728-24.8.1  | OFFICE DEPOT                     | Invoice      | 02/12/2026   | LARGE LEGAL LAMINATOR                | 001-200-500    | 164.99              |
|          |                            |                                  |              |              | LEGAL PAPER TRIMMER                  | 001-200-500    | 109.99              |
|          | 437-3-4118-1062780-24.8.1  | OFFICE DEPOT                     | Invoice      | 02/12/2026   | BALLPOINT PEN, BULK                  | 001-200-500    | 25.49               |
|          |                            |                                  |              |              | HIGHLIGHTER                          | 001-200-500    | 11.38               |
|          |                            |                                  |              |              | HOLE PUNCH                           | 001-200-500    | 7.98                |
|          |                            |                                  |              |              | LEGAL CARDSTOCK                      | 001-200-500    | 14.89               |
|          |                            |                                  |              |              | LEGAL LAMINATING POUCH               | 001-200-500    | 84.58               |
|          |                            |                                  |              |              | PEN, BULK                            | 001-200-500    | 12.29               |
|          |                            |                                  |              |              | PEN, BULK                            | 001-200-500    | 33.98               |
|          |                            |                                  |              |              | POST IT NOTES                        | 001-200-500    | 11.39               |
|          |                            |                                  |              |              | POST IT NOTES                        | 001-200-500    | 19.99               |
|          | 4997 1748 1545 2288 2411 7 | Mardi Gras Supplies              | Invoice      | 02/13/2026   | Cranberry,Hot Dogs,Buns,Cheese,Chip: | 001-108-615    | 133.00              |
|          | 53100323-26                | 2026 MEMBERSHIP DUES D. FREEMAN  | Invoice      | 02/13/2026   | 2026 MEMBERSHIP DUES D. FREEMAN      | 001-200-610    | 50.00               |
|          | 53405                      | Tins for Helmets                 | Invoice      | 02/02/2026   | bored at the house 12x18 street sign | 001-220-505    | 40.00               |
|          |                            |                                  |              |              | Classic Helmet Tins                  | 001-220-505    | 270.00              |
|          | 686071                     | GW POLY LEAF RAKES               | Invoice      | 02/11/2026   | GW POLY LEAF RAKES                   | 001-301-560    | 249.90              |
|          | 686103                     | CAP T POST                       | Invoice      | 02/11/2026   | CAP T POST                           | 001-301-560    | 17.99               |
|          |                            |                                  |              |              | CAP T POST                           | 001-301-560    | 17.99               |
|          | 89558                      | Orange safety barrier fence      | Invoice      | 02/11/2026   | Orange safety barrier fence          | 001-301-560    | 154.68              |
|          | 92259930                   | FBI LEEDA CONFERENCE C. WILLIAMS | Invoice      | 02/13/2026   | FBI LEEDA CONFERENCE C. WILLIAMS     | 001-200-610    | 425.00              |
|          | 9367 6726 8593 2258 2511 7 | Mardi Gras Supplies              | Invoice      | 01/31/2026   | Meatf,Straws,Bowls,Pans,Mayo,Butter  | 001-108-615    | 567.26              |
|          | AB06821594594CUS           | ACROBAT PRO                      | Invoice      | 02/11/2026   | ACROBAT PRO                          | 001-110-505    | 616.06              |
|          | AB06821594594CUS-0         | Adobe(License)                   | Invoice      | 02/11/2026   | Adobe(License)                       | 001-110-505    | 192.47              |
|          | CM0000224                  | Credit(1099 MISC Forms)          | Credit Memo  | 03/17/2026   | Credit(1099 MISC Forms)              | 001-105-505    | -46.82              |
|          | CM0000225                  | Credit(Adobe)                    | Credit Memo  | 03/17/2026   | Credit(Adobe)                        | 001-110-505    | -192.47             |
|          | QAHNQPEZX                  | Electrical Equipment             | Invoice      | 02/10/2026   | 20amp box of ten                     | 480-751-560    | 69.99               |
|          |                            |                                  |              |              | 20amp breakers                       | 480-751-560    | 200.00              |

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| Vendor # | Vendor Name<br>Payable Number             | Docket/Claim #<br>Payable Description | Payable Type | Payable Date | Item Description  | Account Number   | Payment Amount<br>Distribution Amount      |
|----------|---|---------------------------------------|--------------|--------------|---|--|--|
|          | QAHNQPEZX                                 | Electrical Equipment                  | Invoice      | 02/10/2026   | 50 amp breakers   | 480-751-560  | 800.00                                     |
| 02393    | CATERPILLAR FINANCIAL SERVICE<br>38212425 | DKT27369<br>Track Loader Loan         | Invoice      | 02/26/2026   | Fee<br>Track Loader Loan  | 001-300-603<br>001-300-603                               | 751.16<br>35.73<br>715.43                  |
| 01998    | CELLULAR SOUTH, INC<br>3000683894-53W     | DKT27370<br>Phone(Water)              | Invoice      | 03/03/2026   | Phone(Water)  | 400-700-605  | 48.38                                      |
| 01998    | CELLULAR SOUTH, INC<br>3000683894-53      | DKT27371<br>Internet/Phone            | Invoice      | 03/03/2026   | Internet<br>Phone   | 001-107-628<br>001-107-605                               | 3,191.68<br>2,053.00<br>1,138.68           |
| 00046    | CENTERPOINT ENTERY/ENTEX<br>INV0014315    | DKT27372<br>707 W North St            | Invoice      | 02/26/2026   | 707 W North St  | 001-220-627  | 160.46                                     |
| 00056    | COAST ELECTRIC POWER ASSO<br>INV0014318   | DKT27373<br>520 Espy Ave Well         | Invoice      | 02/27/2026   | 520 Espy Ave Well   | 400-701-625  | 1,478.37                                   |
| 00056    | COAST ELECTRIC POWER ASSO<br>INV0014317   | DKT27374<br>520 Espy Ave              | Invoice      | 02/27/2026   | 520 Espy Ave  | 001-200-625  | 2,452.66                                   |
| 00824    | COASTAL TIRE INC<br>95824                 | DKT27375<br>1109 Tires                | Invoice      | 03/02/2026   | 2457017 IRONMAN RB SUV<br>4 STATE TIRE FEE<br>SHOP SUPPLY<br>WASTE TIRE FEE | 001-220-571<br>001-220-571<br>001-220-571<br>001-220-571 | 826.00<br>492.00<br>4.00<br>36.00<br>14.00 |
|          | 95877                                     | Tire Replacement                      | Invoice      | 03/03/2026   | Tire Replacement  | 480-751-571  | 20.00                                      |
|          | 96138                                     | Tire Sensor                           | Invoice      | 03/10/2026   | Tire Sensor 1109  | 001-220-571  | 260.00                                     |

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|----------|-----------------------------|--------------------------------------|--------------|--------------|-------------------------------------|----------------|---------------------|
| Vendor # | Payable Number              | Payable Description                  |              |              |                                     |                | Distribution Amount |
| 01534    | COBURN SUPPLY COMPANY, INC  | DKT27376                             |              |              |                                     |                | 471.57              |
|          | 666217514                   | 303 Espy Ave                         | Invoice      | 02/23/2026   | Check Valve                         | 400-702-560    | 51.47               |
|          |                             |                                      |              |              | Male Adapter                        | 400-702-560    | 1.48                |
|          |                             |                                      |              |              | Pvc Coupling                        | 400-702-560    | 14.08               |
|          |                             |                                      |              |              | Pvc Coupling                        | 400-702-560    | 1.60                |
|          | 666217597                   | GPS Repair(1036 Demourelle)          | Invoice      | 02/26/2026   | Clamp                               | 400-702-560    | 7.48                |
|          |                             |                                      |              |              | Coupling                            | 400-702-560    | 2.40                |
|          |                             |                                      |              |              | Pvc Ball Valve                      | 400-702-560    | 25.32               |
|          |                             |                                      |              |              | Pvc Coupling                        | 400-702-560    | 35.46               |
|          | 666217600                   | Meter Repair(450 Henderson)          | Invoice      | 02/26/2026   | Coupling                            | 400-704-560    | 1.18                |
|          |                             |                                      |              |              | Male Adapter                        | 400-704-560    | 14.13               |
|          |                             |                                      |              |              | Pro Span Coupling                   | 400-704-560    | 27.11               |
|          |                             |                                      |              |              | Pvc Belled End                      | 400-704-560    | 14.40               |
|          | 666217664                   | Taps/Meters Install(103 Kelly Cove)  | Invoice      | 03/03/2026   | Cement                              | 400-704-560    | 25.77               |
|          |                             |                                      |              |              | Check Valve                         | 400-704-560    | 102.94              |
|          |                             |                                      |              |              | Coupling                            | 400-704-560    | 1.60                |
|          |                             |                                      |              |              | Male Adapter                        | 400-704-560    | 2.96                |
|          |                             |                                      |              |              | Primer                              | 400-704-560    | 16.75               |
|          |                             |                                      |              |              | Pvc Belled End                      | 400-704-560    | 27.60               |
|          |                             |                                      |              |              | Reducer Bushing                     | 400-704-560    | 0.93                |
|          | 666217732                   | Repair(156 Holiday)                  | Invoice      | 03/06/2026   | Pvc Belled End                      | 400-702-560    | 41.20               |
|          |                             |                                      |              |              | Pvc Clamp Coupling                  | 400-702-560    | 17.08               |
|          |                             |                                      |              |              | Pvc Sdr Coupling                    | 400-702-560    | 3.87                |
|          |                             |                                      |              |              | Pvc Sdr Fitting                     | 400-702-560    | 6.01                |
|          |                             |                                      |              |              | Pvc Threaded Plug                   | 400-702-560    | 4.64                |
|          | 666217779                   | Sewer Clean Out(211 St. Paul)        | Invoice      | 03/10/2026   | Pvc Plug                            | 400-702-560    | 24.11               |
| 01534    | COBURN SUPPLY COMPANY, INC  | DKT27377                             |              |              |                                     |                | 39.21               |
|          | 666217637                   | Compression Couplings                | Invoice      | 02/27/2026   | Compression Couplings               | 001-502-560    | 39.21               |
| 00478    | CONTROL SYSTEM, INC         | DKT27378                             |              |              |                                     |                | 4,200.00            |
|          | CAB_0035_01012026           | SCADA Annual Service Fee             | Invoice      | 01/01/2026   | SCADA Annual Service Fee            | 400-702-560    | 2,100.00            |
|          |                             |                                      |              |              | SCADA Annual Service Fee            | 400-704-560    | 2,100.00            |
| 02249    | COVINGTON CIVIL AND ENVIROM | DKT27379                             |              |              |                                     |                | 1,357.50            |
|          | 16481.08 36                 | Engineer Professional Services       | Invoice      | 03/03/2026   | Subdivision Review/Planning         | 150-105-602    | 1,357.50            |
| 02249    | COVINGTON CIVIL AND ENVIROM | DKT27380                             |              |              |                                     |                | 37,137.33           |
|          | 16481.08-36                 | Engineer Professional Services       | Invoice      | 03/03/2026   | Admin                               | 001-301-602    | 407.50              |
|          | 16524.08-13                 | West Bulkhead Wall Replacemen PH II  | Invoice      | 03/06/2026   | West Bulkhead Wall Replacemen PH II | 152-751-602    | 28,912.33           |
|          | 16537.08-09                 | Pump Station 18 Upgrade(ARPA/MCW     | Invoice      | 03/12/2026   | Pump Station 18 Upgrade(ARPA/MCW    | 151-704-602    | 7,817.50            |
| 01143    | DAWN SANDERS                | DKT27381                             |              |              |                                     |                | 2,983.76            |
|          | INV0014322                  | Pay(2-16/20-26)(2-23/27-26)(3-2/6-26 | Invoice      | 02/16/2026   | 143.45hrs x \$20.80                 | 001-105-600    | 2,983.76            |
| 00708    | DUNAWAY GLASS OF GULFPORT   | DKT27382                             |              |              |                                     |                | 349.70              |
|          | I112359                     | WINDSHIELD- TRANSPORT VAN            | Invoice      | 03/10/2026   | WINDSHIELD- TRANSPORT VAN           | 001-200-560    | 349.70              |

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| Vendor # | Vendor Name                  | Docket/Claim #                       | Payable Type | Payable Date | Item Description                     | Account Number | Payment Amount<br>Distribution Amount |
|----------|------------------------------|--------------------------------------|--------------|--------------|--------------------------------------|----------------|---------------------------------------|
| 01554    | ECONO SIGNS & BARRICADE, LLC | DKT27383                             |              |              |                                      |                | 289.37                                |
|          | 10-1001267                   | NO PARKING THIS SIDE SIGNS           | Invoice      | 02/24/2026   | FREIGHT                              | 001-301-555    | 23.88                                 |
|          |                              |                                      |              |              | NO PARKING THIS SIDE SIGNS           | 001-301-555    | 59.70                                 |
|          | 10-1001362                   | 18x24 Please Drive Slow Signs x 4    | Invoice      | 02/26/2026   | 18x24 Please Drive Slow Signs x 4    | 001-301-555    | 173.60                                |
|          |                              |                                      |              |              | FREIGHT                              | 001-301-555    | 32.19                                 |
| 00448    | EMERGENCY EQUIPMENT PROFE    | DKT27384                             |              |              |                                      |                | 240.00                                |
|          | 526274                       | Air Sample                           | Invoice      | 02/26/2026   | Mileage                              | 001-220-560    | 75.00                                 |
|          |                              |                                      |              |              | Mis Air Sample                       | 001-220-560    | 155.00                                |
|          |                              |                                      |              |              | Mis Air Sample kit                   | 001-220-560    | 10.00                                 |
| 00404    | FAZZIO'S FARM EQUIPMENT      | DKT27385                             |              |              |                                      |                | 1,218.80                              |
|          | 10900                        | 1 1/2 yard cart of cement with fiber | Invoice      | 03/02/2026   | 1 1/2 yard cart of cement with fiber | 001-301-585    | 1,175.00                              |
|          |                              |                                      |              |              | Fiber                                | 001-301-585    | 43.80                                 |

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| Vendor # | Vendor Name          | Docket/Claim #               | Payable Type | Payable Date | Item Description  | Account Number | Payment Amount      |
|----------|----------------------|------------------------------|--------------|--------------|-------------------|----------------|---------------------|
|          | Payable Number       | Payable Description          |              |              |                   |                | Distribution Amount |
| 00218    | FERGUSON US HOLDINGS | DKT27386                     |              |              |                   |                | 12,503.50           |
|          | 0884231              | Stock(Water)                 | Invoice      | 03/06/2026   | 3/4 Comp Coup     | 400-704-560    | 292.08              |
|          |                      |                              |              |              | 4x12 Repair Clamp | 400-704-560    | 384.69              |
|          |                      |                              |              |              | 4x16 Repair Clamp | 400-704-560    | 423.94              |
|          |                      |                              |              |              | 4x18 Repair Clamp | 400-704-560    | 496.72              |
|          | 0884435              | 120 Beach Viwe(Sewer Repair) | Invoice      | 02/13/2026   | Gasket            | 400-702-560    | 21.40               |
|          |                      |                              |              |              | Hde Adapter       | 400-702-560    | 295.00              |
|          |                      |                              |              |              | Hyd Saye          | 400-702-560    | 2,900.00            |
|          |                      |                              |              |              | T-Bolt            | 400-702-560    | 38.40               |
|          | 0884536              | Menge(North St Pump Station) | Invoice      | 02/13/2026   | Mtr Box           | 400-702-560    | 200.00              |
|          | 0884544              | Sewer(Stock)                 | Invoice      | 02/13/2026   | Barrier Tape      | 400-704-560    | 30.00               |
|          |                      |                              |              |              | Piipe Wrap Tape   | 400-704-560    | 6.50                |
|          | 0884758              | Stock(Water)                 | Invoice      | 03/06/2026   | 3/4 Str Mtr       | 400-704-560    | 393.60              |
|          |                      |                              |              |              | Sdl Tee           | 400-704-560    | 816.76              |
|          |                      |                              |              |              | Str Mtr Coup      | 400-704-560    | 300.00              |
|          | 0884759              | Stock(Water)                 | Invoice      | 03/06/2026   | Cts Coup          | 400-704-560    | 488.88              |
|          |                      |                              |              |              | Cts Pj            | 400-704-560    | 172.41              |
|          | 0885079              | Menge(Pump Station Sewer)    | Invoice      | 02/17/2026   | Brs Bush          | 400-702-560    | 18.74               |
|          |                      |                              |              |              | Brs Gbl           | 400-702-560    | 18.00               |
|          |                      |                              |              |              | Cts Comp          | 400-702-560    | 309.13              |
|          |                      |                              |              |              | Cts Pe            | 400-702-560    | 4.88                |
|          |                      |                              |              |              | Dbl SS            | 400-702-560    | 126.67              |
|          |                      |                              |              |              | Mtr Kit           | 400-702-560    | 95.97               |
|          |                      |                              |              |              | Pj Ball           | 400-702-560    | 224.18              |
|          |                      |                              |              |              | Psi Blk           | 400-702-560    | 136.00              |
|          | 0885083              | Stock(Water)                 | Invoice      | 03/06/2026   | CC Dbl            | 400-704-560    | 360.00              |
|          | 0886574              | Stock(Sewer)                 | Invoice      | 03/06/2026   | 4 Mega Pvc        | 400-702-560    | 258.00              |
|          |                      |                              |              |              | 4 Sbr Gskt        | 400-702-560    | 61.20               |
|          |                      |                              |              |              | 6 Mego Pvc        | 400-702-560    | 312.00              |
|          |                      |                              |              |              | 6 Sbr Gskt        | 400-702-560    | 63.00               |
|          |                      |                              |              |              | Bolt/Nut          | 400-702-560    | 247.80              |
|          |                      |                              |              |              | Gate Blts         | 400-702-560    | 940.00              |
|          |                      |                              |              |              | Mego Pvc          | 400-702-560    | 300.00              |
|          |                      |                              |              |              | Sbr Gskt          | 400-702-560    | 46.20               |
|          | 0886606              | Paving Project(Man Holes)    | Invoice      | 03/06/2026   | Valve Box         | 400-702-560    | 1,167.75            |
|          | 0886722              | Stock(Water)                 | Invoice      | 03/06/2026   | Strt Coup         | 400-704-560    | 140.00              |
|          |                      |                              |              |              | Strt Gskt         | 400-704-560    | 20.00               |
|          |                      |                              |              |              | Strt Mtr          | 400-704-560    | 393.60              |
| 00096    | FUELMAN              | DKT27387                     |              |              |                   |                | 139.46              |
|          | NP70104671W          | Fuel                         | Invoice      | 02/23/2026   | Utl               | 400-700-525    | 44.35               |
|          | NP70153836W          | Fuel                         | Invoice      | 03/02/2026   | Utl               | 400-700-525    | 95.11               |

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| Vendor # | Vendor Name<br>Payable Number           | Docket/Claim #<br>Payable Description         | Payable Type | Payable Date | Item Description                  | Account Number | Payment Amount<br>Distribution Amount |
|----------|---|---|--------------|--------------|-----------------------------------|----------------|---------------------------------------|
| 00096    | FUELMAN<br>NP70104671                   | DKT27388<br>Fuel                              | Invoice      | 02/23/2026   | Beau                              | 001-502-525    | 4,991.68                              |
|          |   |   |              |              | FD                                | 001-220-525    | 148.62                                |
|          |   |   |              |              | Harbor                            | 480-751-525    | 395.12                                |
|          |   |   |              |              | PD                                | 001-200-525    | 127.11                                |
|          |   |   |              |              | PW                                | 001-301-525    | 1,124.99                              |
|          |   |   |              |              | Rec                               | 001-506-525    | 313.30                                |
|          | NP70153836                              | Fuel  | Invoice      | 03/02/2026   | Beau                              | 001-502-525    | 38.65                                 |
|          |   |   |              |              | Code                              | 001-110-525    | 320.33                                |
|          |   |   |              |              | FD                                | 001-220-525    | 48.52                                 |
|          |   |   |              |              | Harbor                            | 480-751-525    | 387.55                                |
|          |   |   |              |              | PD                                | 001-200-525    | 284.56                                |
|          |   |   |              |              | PW                                | 001-301-525    | 1,209.21                              |
|          |   |   |              |              | Rec                               | 001-506-525    | 545.18                                |
| 02147    | FUTURE DESIGN GROUP<br>2284             | DKT27389<br>City Websit Maintenance           | Invoice      | 03/01/2026   | City Websit Maintenance           | 001-107-600    | 48.54                                 |
|          |   |   |              |              |                                   |                | 250.00                                |
| 00097    | G & O SUPPLY CO, INC<br>G18975          | DKT27390<br>PW FY 25/26 G & O Pipes Sypply    | Invoice      | 03/05/2026   | Wall Dissimilar Adapters          | 001-301-586    | 250.00                                |
|          | G18990                                  | PW FY 25/26 G & O Pipes Sypply                | Invoice      | 03/11/2026   | 15" Elbows                        | 001-301-586    | 804.66                                |
| 00099    | GALLS, LLC<br>033180455                 | DKT27391<br>GALLS PRO MENS TAC FORCE TACTICAL | Invoice      | 11/17/2025   | GALLS PRO MENS TAC FORCE TACTICAL | 001-200-535    | 581.43                                |
|          | 033774686                               | #GL1604 MFG 005013M HELLFOX GLO               | Invoice      | 01/16/2026   | #GL1604 MFG 005001L HELLFOX GLO   | 001-200-535    | 156.99                                |
|          |   |   |              |              | #GL1604 MFG 005001XL HELLFOX GLO  | 001-200-505    | 160.00                                |
|          |   |   |              |              | #GL1604 MFG 005013M HELLFOX GLO   | 001-200-535    | 180.00                                |
|          |   |   |              |              |                                   |                | 84.44                                 |
| 00140    | HUMANE SOCIETY OF SO MS<br>2025-598     | DKT27392<br>Animal Control(March 26)          | Invoice      | 03/01/2026   | Animal Control(March 26)          | 001-105-646    | 2,869.02                              |
|          | INV0014319                              | Housing/Pharmacy                              | Invoice      | 03/06/2026   | Housing/Pharmacy                  | 001-200-520    | 794.26                                |
| 02098    | IMPERIAL BAG & PAPER CO LLC<br>40786262 | DKT27393<br>PAPER PRODUCTS                    | Invoice      | 02/25/2026   | Multifolds(VBMF91K)               | 001-300-505    | 2,074.76                              |
|          |   |   |              |              | PAPER TOWELS(HB1990A)             | 001-300-505    | 359.47                                |
|          |   |   |              |              | PAPER TOWELS(HB1990A)             | 001-502-510    | 48.40                                 |
|          | 40870836                                | PAPER PRODUCTS                                | Invoice      | 03/04/2026   | ROLL TOWEL NAT(VBRT350K)          | 001-200-500    | 128.05                                |
|          |   |   |              |              | ROLL TOWEL NAT(VBRT350K)          | 001-502-510    | 51.22                                 |
| 00155    | JERRY'S LAWN MOWER SALES AN<br>68220    | DKT27394<br>FY 25/26 BEAU                     | Invoice      | 03/04/2026   | Mowing Head/Engine Oil            | 001-502-560    | 65.90                                 |
|          |   |   |              |              |                                   |                | 65.90                                 |
| 01129    | KOHL MOTORS INC<br>158848               | DKT27395<br>UNIT 230 HEATER CORE ISSUE        | Invoice      | 03/04/2026   | UNIT 230 CLEANER AND SHOP SUPPLIE | 001-200-560    | 191.76                                |
|          |   |   |              |              | UNIT 230 HEATER CORE ISSUE        | 001-200-560    | 191.76                                |
|          |   |   |              |              |                                   |                | 267.80                                |
|          |   |   |              |              |                                   |                | 27.80                                 |
|          |   |   |              |              |                                   |                | 240.00                                |

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|----------|--|---|--------------------|--------------------------|--|--|--|
|          | Payable Number                         | Payable Description                             |                    |                          |  |  | Distribution Amount                      |
| 00187    | LOWE'S COMPANIES, INC.<br>984443       | DKT27396<br>Grinder Pump Repair(Shooting Range) | Invoice            | 02/10/2026               | 5/16 Anchor<br>5/32x10                                       | 400-702-560<br>400-702-560                               | 41.73<br>16.57<br>25.16                  |
| 00187    | LOWE'S COMPANIES, INC.<br>987168       | DKT27397<br>Vinyl/Wood                          | Invoice            | 01/28/2026               | 36 in Alum<br>Oscillating Wood<br>Plastic Anc<br>Wood 1/4 x6 | 001-220-561<br>001-220-561<br>001-220-561<br>001-220-561 | 55.02<br>22.78<br>17.08<br>4.73<br>10.43 |
| 01480    | LYNN CARD COMPANY<br>2260223-001       | DKT27398<br>PD THANK YOU CARDS                  | Invoice            | 02/26/2026               | PD THANK YOU CARDS   | 001-200-500  | 126.00<br>126.00                         |
| 02115    | MANDAL AUTOMOTIVE OF D'IBEL<br>5086469 | DKT27399<br>Dodge Durango Repair                | Invoice            | 01/08/2026               | Dodge Durango Repair   | 001-200-560  | 995.00<br>995.00                         |
| 00195    | MARTIN HARDWARE<br>A182515<br>A182601  | DKT27400<br>WATER FY25/26<br>WATER FY25/26      | Invoice<br>Invoice | 02/19/2026<br>02/20/2026 | Saw Blades,Laser<br>Pvc Male Adapter                         | 400-702-560<br>400-702-560                               | 28.24<br>25.84<br>2.40                   |

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| Vendor # | Vendor Name     | Docket/Claim #                    | Payable Type | Payable Date | Item Description                  | Account Number | Payment Amount      |
|----------|-----------------|-----------------------------------|--------------|--------------|-----------------------------------|----------------|---------------------|
|          | Payable Number  | Payable Description               |              |              |                                   |                | Distribution Amount |
| 00195    | MARTIN HARDWARE | DKT27401                          |              |              |                                   |                | 916.45              |
|          | A181211         | PD FY25/26                        | Invoice      | 01/29/2026   | FLUID STARTING GUMOUT             | 001-200-505    | 3.99                |
|          | A181233         | FD FY25/26                        | Invoice      | 01/29/2026   | TIRE SHINE WET N BLACK            | 001-220-561    | 11.25               |
|          | A181252         | Credit(THRESHOLD ALUM SAT NKL3-3) | Credit Memo  | 03/17/2026   | Credit(THRESHOLD ALUM SAT NKL3-3) | 001-220-561    | -39.27              |
|          | A181264         | PW FY25/26                        | Invoice      | 01/29/2026   | FASTENERS                         | 001-301-560    | 7.78                |
|          | A181291         | PD FY25/26                        | Invoice      | 01/30/2026   | KEY                               | 001-200-505    | 4.66                |
|          | A181294         | PW FY25/26                        | Invoice      | 01/30/2026   | FASTENERS                         | 001-301-560    | 33.27               |
|          | A181309         | PW FY25/26                        | Invoice      | 01/30/2026   | TIE WIRE NO16 330FT 3.SLB         | 001-301-560    | 23.00               |
|          | A181325         | PW FY25/26                        | Invoice      | 01/30/2026   | KEY TORX SET 8PC MED ERGO         | 001-301-560    | 31.04               |
|          | A181416         | HARBOR FY25/26                    | Invoice      | 02/02/2026   | 2FT 1" PVC PIPE                   | 480-751-560    | 2.27                |
|          | A181425         | HARBOR FY25/26                    | Invoice      | 02/02/2026   | FASTENERES,ADAPTERS,CLAMPS        | 480-751-560    | 11.87               |
|          | A181432         | BEAU FY25/26                      | Invoice      | 02/02/2026   | FASTERNERS                        | 001-502-560    | 17.98               |
|          | A181440         | HARBOR FY25/26                    | Invoice      | 02/02/2026   | HARBOR FY25/26                    | 480-751-560    | 3.68                |
|          | A181441         | HARBOR FY25/26                    | Invoice      | 02/02/2026   | CAP MALLEABLE GALV 1IN            | 480-751-560    | 3.15                |
|          | A181449         | HARBOR FY25/26                    | Invoice      | 02/02/2026   | FASTENERS                         | 480-751-560    | 11.97               |
|          | A181460         | PW FY25/26                        | Invoice      | 02/02/2026   | PAINT SPRY MATTE BLACK            | 001-301-560    | 11.70               |
|          | A181499         | BUILDING/PLANTS 25/26             | Invoice      | 02/03/2026   | FASTENERS                         | 001-300-560    | 1.92                |
|          | A181502         | BUILDING/PLANTS 25/26             | Invoice      | 02/03/2026   | CABLE TIE 11IN UVB CUT            | 001-300-560    | 66.47               |
|          | A181538         | HARBOR FY25/26                    | Invoice      | 02/03/2026   | HOSE CLAMP SS NO.20 SS SC         | 480-751-560    | 2.05                |
|          | A181561         | BEAU FY25/26                      | Invoice      | 02/09/2026   | TAPE DUCT 1.88INX55YD             | 001-502-560    | 6.35                |
|          | A181583         | BUILDING/PLANTS 25/26             | Invoice      | 02/04/2026   | FASTENERS,PIPE NIPPLE             | 001-300-560    | 18.38               |
|          | A181584         | FD FY25/26                        | Invoice      | 02/04/2026   | KEY TORX SET 8PC MED ERGO         | 001-220-561    | 21.99               |
|          | A181608         | HARBOR FY25/26                    | Invoice      | 02/05/2026   | SB 3/4 End Stop                   | 480-751-560    | 11.68               |
|          | A181630         | HARBOR FY25/26                    | Invoice      | 02/05/2026   | SINK SUPPLY LINE 3/8X1/2X         | 480-751-560    | 14.48               |
|          | A181710         | PW FY25/26                        | Invoice      | 02/06/2026   | SOLDER IRON FEATHERWEIGHT         | 001-301-560    | 60.69               |
|          | A181807         | BUILDING/PLANTS 25/26             | Invoice      | 02/09/2026   | FASTENERS                         | 001-300-560    | 54.46               |
|          | A181926         | HARBOR FY25/26                    | Invoice      | 02/10/2026   | BLEACH CONC DISINFECTNG           | 480-751-560    | 13.98               |
|          | A181944         | BEAU FY25/26                      | Invoice      | 02/10/2026   | SCREWDRIVER SET 6PC               | 001-502-560    | 24.99               |
|          | A181948         | BUILDING/PLANTS 25/26             | Invoice      | 02/10/2026   | CABLE TIE 1.8IN HEAVY DUTY        | 001-300-560    | 23.96               |
|          | A181950         | BEAU FY25/26                      | Invoice      | 02/10/2026   | DRILL/DRIVE DIY PRO SET           | 001-502-560    | 21.05               |
|          | A181981         | PW FY25/26                        | Invoice      | 02/11/2026   | CABLE TIE NATURAL 8IN             | 001-301-560    | 17.98               |
|          | A182065         | BEAU FY25/26                      | Invoice      | 02/12/2026   | LATEX GLOVES 100CT,DEEP WOODS     | 001-502-560    | 20.91               |
|          | A182066         | HARBOR FY25/26                    | Invoice      | 02/12/2026   | REMOVER PAINT/VARNISH PST         | 480-751-560    | 23.88               |
|          | A182076         | BEAU FY25/26                      | Invoice      | 02/12/2026   | CABLE TIE NATURAL 14IN            | 001-502-560    | 9.56                |
|          | A182082         | Credit(CABLE TIE NATURAL 14IN)    | Credit Memo  | 03/17/2026   | Credit(CABLE TIE NATURAL 14IN)    | 001-502-560    | -5.58               |
|          | A182089         | HARBOR FY25/26                    | Invoice      | 02/12/2026   | TAPE CAUTION BRCD 2M 3INX         | 480-751-560    | 19.47               |
|          | A182198         | FD FY25/26                        | Invoice      | 02/13/2026   | KEY STORAGE PORT PADLK CO         | 001-220-561    | 37.32               |
|          | A182243         | BEAU FY25/26                      | Invoice      | 02/14/2026   | EXCHANGE PROPANE                  | 001-502-560    | 34.99               |
|          | A182444         | PD FY25/26                        | Invoice      | 02/18/2026   | 16.5oz Aero Kroil Oil             | 001-200-505    | 29.99               |
|          | A182446         | BEAU FY25/26                      | Invoice      | 02/18/2026   | NO NOATZ                          | 001-502-560    | 6.75                |
|          | A182486         | BEAU FY25/26                      | Invoice      | 02/18/2026   | NO NOATZ                          | 001-502-560    | 13.50               |
|          | A182510         | BEAU FY25/26                      | Invoice      | 02/19/2026   | BLEACH CONC GERMICIDAL            | 001-502-560    | 24.44               |
|          | A182511         | PD FY25/26                        | Invoice      | 02/19/2026   | HOSE WASHER MACHINE               | 001-200-505    | 25.82               |

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| Vendor # | Vendor Name                | Docket/Claim #                       | Payable Type | Payable Date | Item Description                     | Account Number | Payment Amount      |
|----------|----------------------------|--------------------------------------|--------------|--------------|--------------------------------------|----------------|---------------------|
|          | Payable Number             | Payable Description                  |              |              |                                      |                | Distribution Amount |
|          | A182516                    | BUILDING/PLANTS 25/26                | Invoice      | 02/19/2026   | TYLO ENTRY K6 ANTIQUE BRA            | 001-300-560    | 55.42               |
|          | A182777                    | HARBOR FY25/26                       | Invoice      | 02/23/2026   | BALL VALVE PVC                       | 480-751-560    | 13.95               |
|          | A182821                    | HARBOR FY25/26                       | Invoice      | 02/24/2026   | PIPE PVC SCH40 PRESS                 | 480-751-560    | 10.69               |
|          | A182898                    | PW FY25/26                           | Invoice      | 02/25/2026   | INSERT BIT 1/4X3-1/2                 | 001-301-560    | 5.98                |
|          | A182955                    | PW FY25/26                           | Invoice      | 02/26/2026   | FASTENERS                            | 001-301-560    | 10.43               |
|          | A183004                    | PW FY25/26                           | Invoice      | 02/26/2026   | GFCI TAMPER RESIS ST WHIT            | 001-301-560    | 47.97               |
|          | A183007                    | BEAU FY25/26                         | Invoice      | 02/26/2026   | PLUNGER TANKMASTER 21INHN            | 001-502-560    | 8.99                |
|          | A183026                    | PW FY25/26                           | Invoice      | 02/27/2026   | WHEEL CUTOFF METAL                   | 001-301-560    | 23.20               |
| 02616    | MAVERICKS TRUCK REPAIR LLC | DKT27402                             |              |              |                                      |                | 4,995.65            |
|          | 2992                       | 1113 Def Issue                       | Invoice      | 03/09/2026   | COOLANT SWITCH                       | 001-220-560    | 440.23              |
|          |                            |                                      |              |              | DISCHARGE AIR LINE                   | 001-220-560    | 144.87              |
|          |                            |                                      |              |              | LABOR: little, COMPUTER DIAGNOSIS    | 001-220-560    | 150.00              |
|          |                            |                                      |              |              | LABOR: LITTLE, R AND I COOLANT SWIT  | 001-220-560    | 525.00              |
|          |                            |                                      |              |              | LABOR: little, R AND I DEF TANK WITH | 001-220-560    | 300.00              |
|          |                            |                                      |              |              | Shop Supplies                        | 001-220-560    | 135.80              |
|          |                            |                                      |              |              | TANK UREA 5 GAL PORTRAIT GEN 7       | 001-220-560    | 3,299.75            |
| 00976    | MICHAEL I HOLMES           | DKT27403                             |              |              |                                      |                | 4,535.00            |
|          | 30426                      | 6 Loads of dirt                      | Invoice      | 03/04/2026   | 3 loads of top soil                  | 001-301-560    | 810.00              |
|          |                            |                                      |              |              | 6 Loads of dirt                      | 001-301-560    | 225.00              |
|          | INV0014320                 | Welding and Fad work on the Vac Truc | Invoice      | 03/04/2026   | Welding and Fad work on the Vac Truc | 001-301-560    | 3,500.00            |
| 00204    | MICRO-METHODS, INC         | DKT27404                             |              |              |                                      |                | 268.00              |
|          | 2603011-424                | Water Testing(Cottages@ 2nd and sun  | Invoice      | 03/03/2026   | Water Testing                        | 400-704-560    | 134.00              |
|          | 2603094-424                | Disenfect(East 2nd St)               | Invoice      | 03/04/2026   | Disenfect(East 2nd St)               | 400-704-560    | 134.00              |
| 00230    | NAPA OF BAY ST. LOUIS      | DKT27405                             |              |              |                                      |                | 1,700.34            |
|          | 436619                     | FY 25/26 FIRE OPEN PO                | Invoice      | 02/23/2026   | Heater Hose                          | 001-220-560    | 12.66               |
|          | 436922                     | PW FY 25/26 NAPA AUTO                | Invoice      | 02/26/2026   | Air Sensor,Hose Fitting,Hose         | 001-301-560    | 435.11              |
|          | 437286                     | PW FY 25/26 NAPA AUTO                | Invoice      | 03/03/2026   | Air Filter,Washer Fluid,Coolant      | 001-301-560    | 436.90              |
|          | 437553                     | PW FY 25/26 NAPA AUTO                | Invoice      | 03/06/2026   | Flex Light,Air Filter,Battery        | 001-301-560    | 392.08              |
|          | 437739                     | PW FY 25/26 NAPA AUTO                | Invoice      | 03/09/2026   | Fan                                  | 001-301-560    | 189.97              |
|          | 437890                     | PW FY 25/26 NAPA AUTO                | Invoice      | 03/10/2026   | Air Filters                          | 001-301-560    | 233.62              |
| 00482    | NECAISE LOCKSMITH SERVICE  | DKT27406                             |              |              |                                      |                | 85.00               |
|          | 603795                     | INVOICE 603795 TROUBLESHOOT SPEC     | Invoice      | 03/09/2026   | INVOICE 603795 TROUBLESHOOT SPEC     | 001-200-560    | 85.00               |

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| Vendor # | Vendor Name                   | Docket/Claim #                       | Payable Type | Payable Date | Item Description                     | Account Number | Payment Amount      |
|----------|-------------------------------|--------------------------------------|--------------|--------------|--------------------------------------|----------------|---------------------|
|          | Payable Number                | Payable Description                  |              |              |                                      |                | Distribution Amount |
| 00239    | O'REILLY AUTOMOTIVE STORES, I | DKT27407                             |              |              |                                      |                | 567.77              |
|          | 1281-304594                   | UT IGN009-8 ULTIMA TECHNOLOGIES      | Invoice      | 02/10/2026   | CAS HIMI5 30 5QT OIL                 | 001-200-560    | 63.98               |
|          |                               |                                      |              |              | FEL VSS0564R FEL PRO VALVE COVER C   | 001-200-560    | 35.50               |
|          |                               |                                      |              |              | MGD MGL51348 MICROGARD OIL FILT      | 001-200-560    | 3.32                |
|          |                               |                                      |              |              | MOT SP413X MOTORCRAFT COPPER         | 001-200-560    | 32.80               |
|          |                               |                                      |              |              | PER 27037 OPTIMUM BLK                | 001-200-560    | 16.99               |
|          |                               |                                      |              |              | PER 77134 OERMATEX ADH               | 001-200-560    | 5.19                |
|          |                               |                                      |              |              | UT IGN009-8 ULTIMA TECHNOLOGIES      | 001-200-560    | 161.39              |
|          | 1281-304596                   | UNIT 92 BATTERY #65PRM               | Invoice      | 02/10/2026   | UNIT 92 BATTERY #65PRM               | 001-200-560    | 126.57              |
|          | 1281-308040                   | INV. LED CAPSULE                     | Invoice      | 03/05/2026   | INV. LED CAPSULE                     | 001-200-560    | 68.03               |
|          | 1281-308069                   | Wipers 1101                          | Invoice      | 03/06/2026   | Wipers 1101                          | 001-220-560    | 54.00               |
| 00862    | PORTABLE SERVICES, INC.       | DKT27408                             |              |              |                                      |                | 350.00              |
|          | 173813                        | Church Ave                           | Invoice      | 03/09/2026   | Church Ave                           | 001-502-639    | 70.00               |
|          | 173855                        | Church Ave Park                      | Invoice      | 03/10/2026   | Church Ave Park                      | 001-502-639    | 140.00              |
|          | 173861                        | 115 S Market St                      | Invoice      | 03/10/2026   | 115 S Market St                      | 480-751-639    | 140.00              |
| 01973    | PSYCHOLOGICAL RESOURCES SUF   | DKT27409                             |              |              |                                      |                | 250.00              |
|          | 2603044                       | PRE-EMPLOY PSYCH EVAL- KRISTY BOY    | Invoice      | 03/04/2026   | PRE-EMPLOY PSYCH EVAL- KRISTY BOY    | 001-200-600    | 250.00              |
| 02363    | PVS DX INC                    | DKT27410                             |              |              |                                      |                | 3,457.10            |
|          | 217000441.26                  | Chlorine(Bayview Well)               | Invoice      | 03/10/2026   | Chlorine(Bayview Well)               | 400-704-560    | 1,458.92            |
|          | 217000448.26                  | Chlorine(Market St Well)             | Invoice      | 03/10/2026   | Chlorine(Market St Well)             | 400-704-560    | 1,698.18            |
|          | RE7001117-26                  | Chlorine Cyl Rental                  | Invoice      | 02/28/2026   | Chlorine Cyl Rental                  | 400-704-560    | 300.00              |
| 01177    | QUADIEN FINANCE USA, INC.     | DKT27411                             |              |              |                                      |                | 178.58              |
|          | INV0014321                    | Postage                              | Invoice      | 02/22/2026   | Postage                              | 001-105-606    | 178.58              |
| 00273    | RAINBOW SPRING WATER, INC     | DKT27412                             |              |              |                                      |                | 20.53               |
|          | 398222                        | Water Service(Harbor)                | Invoice      | 02/19/2026   | Water Service(Harbor)                | 480-751-505    | 34.24               |
|          | 398226                        | Water Service(Beau)                  | Invoice      | 02/19/2026   | Water Service(Beau)                  | 001-502-505    | 20.54               |
|          | CM0000226                     | Credit(PW)                           | Credit Memo  | 03/17/2026   | Credit(PW)                           | 001-301-505    | -34.25              |
| 02167    | ROBERT J YOUNG COMPANY LLC    | DKT27413                             |              |              |                                      |                | 295.43              |
|          | INV7950788                    | Printer Rental                       | Invoice      | 03/06/2026   | Printer Rental                       | 001-110-600    | 295.43              |
| 00305    | SMITH TIRES & AUTO SERVICES   | DKT27414                             |              |              |                                      |                | 109.95              |
|          | 1-39324                       | W/O ALIGNMENT 4 WHEEL                | Invoice      | 02/23/2026   | W/O ALIGNMENT 4 WHEEL                | 001-200-571    | 109.95              |
| 02432    | SPORTSENGINE NCSI             | DKT27415                             |              |              |                                      |                | 69.00               |
|          | 67233                         | Backgrounds                          | Invoice      | 03/01/2026   | Brown                                | 480-751-600    | 23.00               |
|          |                               |                                      |              |              | Germany                              | 001-200-505    | 23.00               |
|          |                               |                                      |              |              | Wayne                                | 001-200-505    | 23.00               |
| 00329    | SUNBELT FIRE APPARTUS,INC     | DKT27416                             |              |              |                                      |                | 311.21              |
|          | 00037464                      | Adapter                              | Invoice      | 03/12/2026   | KOSS4L5T45-HS2 Adapter, 5" Storz Sw  | 001-220-560    | 311.21              |
| 00834    | THE GAZEBO GAZETTE            | DKT27417                             |              |              |                                      |                | 261.96              |
|          | 7160                          | 2026 Annual Unit Price Project Sewer | Invoice      | 03/10/2026   | 2026 Annual Unit Price Project Sewer | 001-105-615    | 247.36              |
|          | 7161                          | Ordiance 715                         | Invoice      | 03/10/2026   | Ordiance 715                         | 001-105-615    | 14.60               |

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| Vendor #                | Vendor Name<br>Payable Number | Docket/Claim #<br>Payable Description | Payable Type | Payable Date | Item Description                     | Account Number               | Payment Amount<br>Distribution Amount |
|-------------------------|-------------------------------|---------------------------------------|--------------|--------------|--------------------------------------|------------------------------|---------------------------------------|
| 02025                   | THE GOODYEAR TIRE & RUBBER (  | DKT27418                              |              |              |                                      |                              | 507.96                                |
|                         | 0000082607                    | TIRES FOR 4UNNER QUOTE 33312          | Invoice      | 03/04/2026   | INSTALLATION PACKAGE                 | 001-200-571                  | 70.00                                 |
|                         |                               |                                       |              |              | SCRAP TIRE DISPOSAL                  | 001-200-571                  | 14.00                                 |
|                         |                               |                                       |              |              | VANTAGE 265/70/16                    | 001-200-571                  | 423.96                                |
| 01784                   | THE SOUTHERN CONNECTION PC    | DKT27419                              |              |              |                                      |                              | 215.96                                |
|                         | 3738                          | Pants for New Hires                   | Invoice      | 03/06/2026   | Propper EDGETEC Tactical Pants-Men's | 001-220-535                  | 119.97                                |
|                         |                               |                                       |              |              | Propper EDGETEC Tactical Pants-Men's | 001-220-535                  | 39.99                                 |
|                         | 3753                          | BLAUER SHIRT XXL                      | Invoice      | 03/12/2026   | BLAUER SHIRT XXL                     | 001-200-535                  | 50.00                                 |
|                         |                               |                                       |              |              | EMBROIDERY                           | 001-200-535                  | 6.00                                  |
| 01632                   | TRANSUNION RISK AND ALTERNA   | DKT27420                              |              |              |                                      |                              | 192.95                                |
|                         | 851248-202602-1               | Advanced Search                       | Invoice      | 03/01/2026   | Advanced Search                      | 001-200-505                  | 192.95                                |
| 01000                   | TYLER BUSINESS FORMS          | DKT27421                              |              |              |                                      |                              | 253.16                                |
|                         | 111159                        | Self Seal Envelopes                   | Invoice      | 03/03/2026   | Self Seal Envelopes                  | 001-105-505                  | 177.80                                |
|                         | 111213                        | 1095C Forms                           | Invoice      | 03/09/2026   | 1095C Forms                          | 001-105-505                  | 75.36                                 |
| 00170                   | W.S. KEEL LUMBER              | DKT27422                              |              |              |                                      |                              | 108.71                                |
|                         | 58072                         | Open PO 25/26 HARBOR                  | Invoice      | 03/10/2026   | Treated Wood,Screws                  | 480-751-560                  | 44.15                                 |
|                         | 58501                         | Open PO 25/26 HARBOR                  | Invoice      | 01/23/2026   | Concrete Mix                         | 480-751-560                  | 18.20                                 |
|                         | 58524                         | Open PO 25/26 HARBOR                  | Invoice      | 01/28/2026   | Plywood,Nuts Washers                 | 480-751-560                  | 46.36                                 |
| 02366                   | WARREN PAVING INC             | DKT27423                              |              |              |                                      |                              | 582.72                                |
|                         | 122024                        | PW FY 25/26 WARREN PAVING             | Invoice      | 03/03/2026   | Asphalt                              | 001-301-585                  | 192.00                                |
|                         | 122126                        | PW FY 25/26 WARREN PAVING             | Invoice      | 03/04/2026   | Asphalt                              | 001-301-585                  | 195.84                                |
|                         | 122224                        | PW FY 25/26 WARREN PAVING             | Invoice      | 03/05/2026   | Asphalt                              | 001-301-585                  | 194.88                                |
| <b>Total Claims: 67</b> |                               |                                       |              |              |                                      | <b>Total Payment Amount:</b> | <b>130,919.94</b>                     |