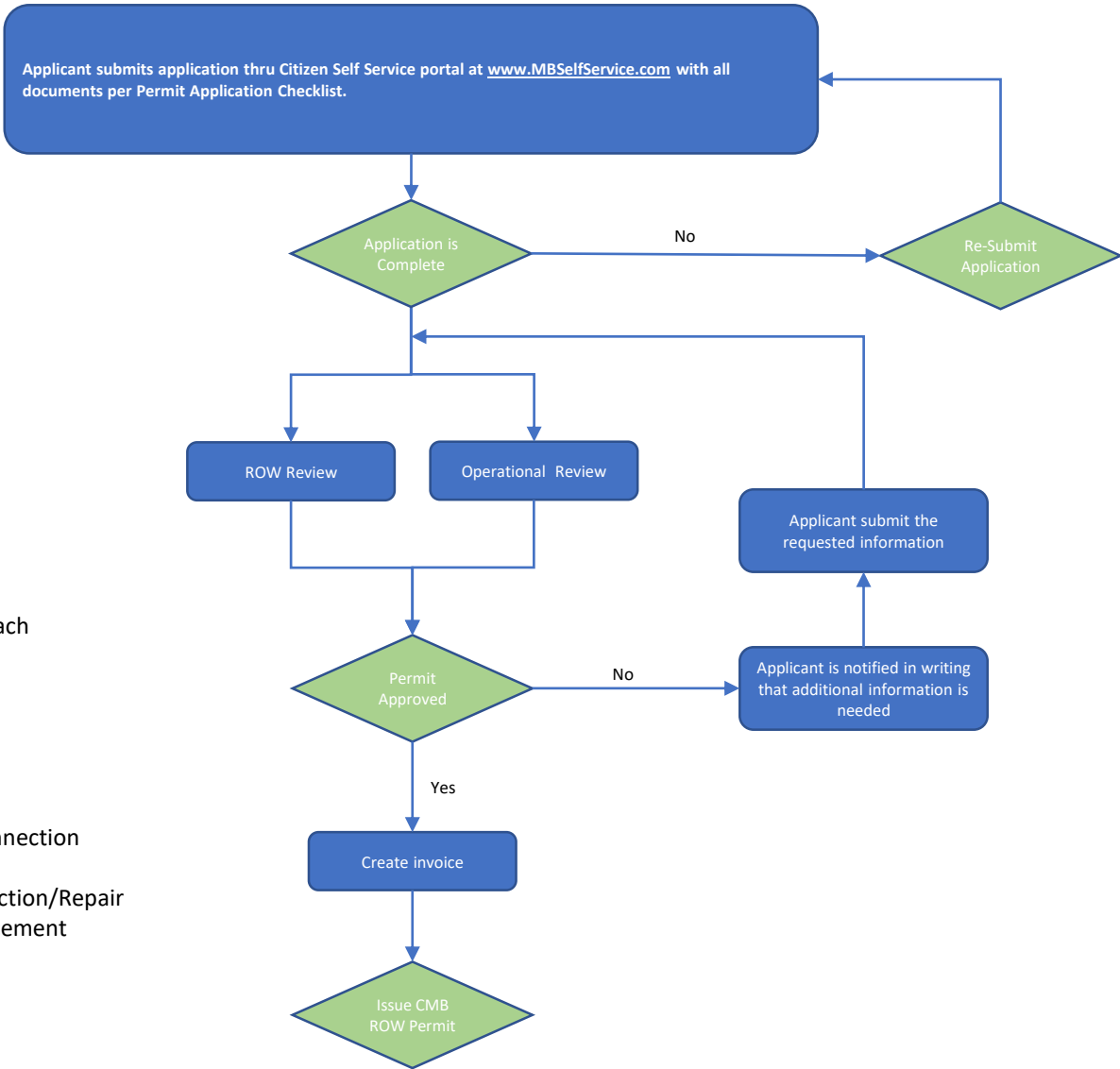


ELECTRONIC SUBMITAL



ROW Permits

- Asphalt Driveway Approach
- Bus Shelter
- Concrete Driveway Approach
- Crane Set-up in ROW
- Decorative Paver Driveway Approach
- Fire Line Service Connection
- Generator Placement in ROW
- Landscape in ROW
- Local Street Closure
- Pedestrian Scaffolding Placement
- Public Storage Container in ROW
- Sanitary Sewer Lateral Service Connection
- Sidewalk Closure
- Sidewalk Curb and Gutter Construction/Repair
- Temporary Dumpster/Roll-off Placement



Permit Application Checklist Landscape – Tree Planting / Right-of-Way Improvements

(A copy of the Right-of-Way permit and plan is required to be on the job site at all times during construction)

When applying for a permit for Landscape – Tree Planting / Right-of-Way Improvements, the following documents must be provided:

- Provide a complete Public Works Right of Way Permit Application
- Provide two (2) sets of Landscaping Plans signed/sealed by a Licensed Landscape Architect drawn to scale, (11"X17" minimum size) showing existing/proposed right-of-way swale area condition.
- Provide certified Maintenance of Traffic Plan (MOT).
- Provide copy of notification letter to Home Owners Association (HOA) / property owners in construction area (s).
- Provide copy of City of Miami Beach Urban Forestry Tree Permit
- Provide photographs of existing sidewalk/curb/gutter/asphalt/swale area pre-existing conditions.

The following are Public Works minimum construction standards for Landscaping improvements within the Right-of-Way

- Greenspace Division plan review required by the City's certified Arborist / Landscape Coordinator.
- Proposed utility lay-out to be white lined for visual location.
- All driveways will be maintained open at all times.
- Working hours within the City right-of-way shall be between the hours of 9:00 am- 4:00 pm
- Permittee is cautioned that utilities may be located within the construction area.
- A Maintenance of Traffic Plan (MOT), an off-duty Miami Beach Police officer or F.D.O.T. Certified Flagman may be required. A determination will be made by Public Works Engineering.

The applicant must call Sunshine One Call of Florida at 800-432-4770 and the Miami Beach Public Works Department at (305) 673-7080 to mark underground utilities located in the construction zone. To schedule an off-duty police officer contact City of Miami Beach Police off duty division at 305-673-7823

Following are the required inspections:

- Full Sections of Sidewalk Full Section of curb & gutter Asphalt Restoration
- Landscaping/Sod Restoration Sight triangle restrictions for hedges not to exceed 2 feet in height within fifteen (15) feet of the edge of driveway adjacent to a public right-of-way as required in the City of Miami Beach Public Works Manuel Roadway Detail RS16 Final

For Official Use Only:

The terms and conditions covered by this permit check list have been discussed with the applicant.

Inspector' Signature _____

MIAMI BEACH

City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139, www.miamibeachfl.com

PUBLIC WORKS DEPARTMENT

Tel: 305-673-7080; Fax: 305-673-7028

PUBLIC WORKS PERMIT APPLICATION

APPLICANT USE ONLY	
COMPANY/INDIVIDUAL TO PERFORM WORK	JOB DESCRIPTION OF PROPOSED WORK
<input type="checkbox"/> <u>CITY SUB/CIP</u> <input type="checkbox"/> <u>F.D.O.T.</u> <input type="checkbox"/> <u>MIAMI-DADE COUNTY</u> NAME: _____ ADDRESS: _____ PHONE: _____ FAX/OFFICE: _____ EMAIL: _____	STREET ADDRESS: _____ WORK TO BE PERFORMED: _____ START OF WORK: _____ <div style="text-align: right;">MONTH.DAY.YEAR</div> EST. COMPLETION: _____ <div style="text-align: right;">MONT.DAY. YEAR</div>
OFFICE USE ONLY	RWP _____ CRANE BOND NO. _____
STANDARD REVIEW <input type="checkbox"/> LOCAL RD. \$330.00 _____ <input type="checkbox"/> COLLECTOR RD. \$440.00 _____ <input type="checkbox"/> ARTERIAL RD. \$1,029.00 _____ PRIORITY REVIEW <input type="checkbox"/> LOCAL RD. \$396.00 _____ <input type="checkbox"/> COLLECTOR RD. \$528.00 _____ <input type="checkbox"/> ARTERIAL RD. \$1,029.00 _____ PARTIAL DAY <input type="checkbox"/> LOCAL RD. \$165.00 _____ <input type="checkbox"/> COLLECTOR RD. \$220.00 _____ <input type="checkbox"/> CONSECUTIVE MULTI-DAY \$57.00 () _____ <input type="checkbox"/> BLOCKING RIGHT OF WAY (LOCAL & COLLECTOR) (_____ LF)(\$0.26)(_____ per day) _____ (_____ SQ. FT)(\$0.04)(_____ per day) _____ <input type="checkbox"/> BLOCKING RIGHT OF WAY (ARTERIAL) (_____ LF)(\$2.58)(_____ per day) _____ (_____ SQ. FT)(\$0.31)(_____ per day) _____ <input type="checkbox"/> STREET EXCAVATION 50' OR LESS \$374.00 _____ EACH ADD'L FT. \$3.14 () _____ <input type="checkbox"/> SIDEWALK REPAIR 50' OR LESS \$308.00 _____ EACH ADD'L FT. \$3.14 () _____ <input type="checkbox"/> SIDEWALK CONSTRUCTION 50' OR LESS \$308.00 _____ EACH ADD'L FT. \$3.14 () _____ SUB-TOTAL _____	<input type="checkbox"/> PAVING/RESURFACING 25' OR LESS \$308.00 _____ EACH ADD'L FT. \$6.68 () _____ <input type="checkbox"/> LINE AND GRADE SURVEY 50' OR LESS \$374.00 _____ EACH ADD'L FT. \$7.46 () _____ <input type="checkbox"/> DRIVEWAYS \$134.00 () _____ <input type="checkbox"/> FLUME (STORM SEWER) \$308.00 () _____ <input type="checkbox"/> UTILITY PLACEMENT \$308.00 () _____ ADD'L PER BLOCK \$14.93 () _____ <input type="checkbox"/> LANDSCAPING WITHIN PER TREE/BEDDING \$107.00 () _____ <input type="checkbox"/> URBAN FORESTRY APPROVAL <input type="checkbox"/> UNDERGROUND SERVICE CONNECTION EACH \$308 () _____ <input type="checkbox"/> MONITOR WELLS \$308 () _____ <input type="checkbox"/> REINSPECTION \$118.00 _____ <input type="checkbox"/> REVOCABLE PERMIT \$4,269.00 () _____ PER ADDRESS (375' R) \$0.53 () _____ <input type="checkbox"/> BLOCKING RIGHT OF WAY APP. FEE \$39.00 _____ <input type="checkbox"/> AFTER THE FACT FEE 4 () _____ <input type="checkbox"/> PERMIT EXT. (90 DAYS) \$134.00 _____ REFUNDABLE BOND: <input type="checkbox"/> 500 <input type="checkbox"/> 1K <input type="checkbox"/> 1500 <input type="checkbox"/> 2500 <input type="checkbox"/> 5K <input type="checkbox"/> 10K TOTAL _____

MIAMI BEACH

City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139, www.miamibeachfl.gov

PUBLIC WORKS DEPARTMENT

Tel: 305-673-7080, Fax: 305-673-7028

ROW Permit Application Checklist

Type: Insurance Requirements

Insurance requirements for general construction/Right-of-Way permits are the following:

- Provide current copy of Certificate of Insurance Liability/Workmen's Compensation coverage to be approved by the City's Risk Management Division.
- Auto liability limits \$1,000,000
- Commercial General Liability Limits \$1,000,000
- Workmen's Compensation, if required by the State.
- All policies must be issued by companies authorized to do business in Florida with a Best Key rating of B+VI or better.
- The City of Miami Beach **must** be a CERTIFICATE HOLDER with 30-day notice of cancellation of change.
- The City of Miami Beach **must** be named as an additional insured for both General Liability and Automobile insurance.
- Provide project address, description and duration of construction activity to be performed in the description operation section of the Certificate of Insurance document.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER [REDACTED]	CONTACT NAME: Leonardo Cicarelli
	PHONE (A/C, No, Ext): (305) 944-0002 FAX (A/C, No): (305) 949-1010
	E-MAIL ADDRESS: leo@alltrustfl.com
INSURER(S) AFFORDING COVERAGE	
INSURER A :	Hudson Specialty Insurance Company
INSURER B :	Chartis
INSURER C :	Founders Insurance Company
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EXP (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			HSGM04491	04/27/2017	04/27/2018	EACH OCCURRENCE \$ 1,000,000.00 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000.00 MED EXP (Any one person) \$ 5,000.00 PERSONAL & ADV INJURY \$ 1,000,000.00 GENERAL AGGREGATE \$ 2,000,000.00 PRODUCTS - COMP/OP AGG \$ 1,000,000.00 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ OFFICER/MEMBER EXCLUDED (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			Z071446802	05/13/2017	05/13/2018	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER 100,000.00 E.L. EACH ACCIDENT \$ 100,000.00 E.L. DISEASE - EA EMPLOYEE \$ 500,000.00 E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

City of Miami Beach is named as additionally insured with regards to the following project:
 Project Name:
 Project Address:
 Project Description:
 Duration of Construction Activity:

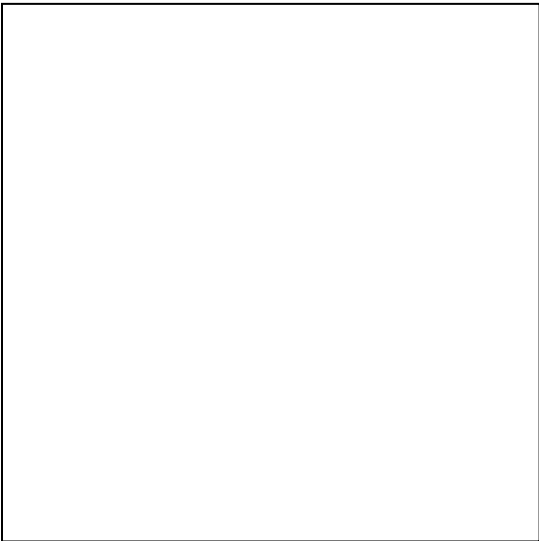
CERTIFICATE HOLDER**CANCELLATION**

City of Miami Beach 1700 Convention Center Drive Miami Beach, FL 33139	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

DECLARATION OF RESTRICTIVE COVENANT

KNOWN ALL MEN BY THESE PRESENTS:

THIS DECLARATION REGARDING CONSTRUCTION AND MAINTENANCE OF SIDEWALK, LANDSCAPING - BOX PLANTER(S), IRRIGATION SYSTEM, LANDSCAPING AND TREE GRATE IMPROVEMENTS, (the "Declaration" is made this _____ day of _____, 20____, by _____, a Florida Corporation (the "Owner") in favor of the City of Miami Beach, Florida, a municipality of the State of Florida (the "City").



WHEREAS, the undersigned _____, president of _____ hereinafter referred to as the simple Owner (s) ("Owner") of the following described property ("Property"), located at _____, City of Miami Beach, Florida: Lot(s) _____ Block _____ of _____ Subdivision, according to the Plat thereof as recorded in Plat Book _____, Page _____, of the Public Records of Miami-Dade County, Florida; and

WHEREAS, the City's Planning Department has required the Owner to install _____ landscaping & irrigation on the _____ side of _____ within the _____ right-of-way, according to a plan reviewed and approved by the City's Parks and Planning Departments; and

WHEREAS, the City's Planning Department has required the Owner to install [] landscaping - Box Planter(s) [] irrigation [] landscaping [] tree grate on the _____ side of _____ within the right-of-way adjacent to the Owners property; and

WHEREAS, the undersigned Owner, has applied to the Public Works Department of the City of Miami Beach for permission to install the above described item(s), within the right-of-way, according to a plan reviewed and approved by the City's Public Works Department; and

WHEREAS, in consideration of the approval of this permit and/or plans by the Public Works Department of the City of Miami Beach, the undersigned Owner(s) agree(s), subject to, among other this the following:

- 1. To install and maintain the [] sidewalk [] landscaping - box planter(s), [] irrigation system [] tree grate within the right-of-way adjacent to the Property
- 2. To replace, restore and/or repair the [] sidewalk [] landscaping - box planter(s) [] irrigation system [] tree grate at Owner's expense, in the event the Public Works Department must issue an underground utility or right-of-way permit for work in that area.
- 3. Reserve unto the City the Right to remove, add, maintain or have the Owner(s) remove any of the improvements within the right-of-way, at Owner's expense.
- 4. Add the City of Miami Beach as additional insured on the Certificates of Insurance for Liability and Workmen's Compensation for a coverage in the minimum limits as approved by the City's Risk Manager.

NOW, THEREFORE, for good and valuable consideration, the undersigned do(es) hereby declare that these conditions shall be deemed a restrictive covenant running with the above mentioned property in favor of the City of Miami Beach, and shall remain in full force and effect and be binding on the undersigned, his/her/their heirs and assigns, until such time as this obligation has been canceled by an affidavit filed in the Public Records of Miami-Dade County, Florida, by the Director of the Public Works Department of the City of Miami Beach (or his authorized designee)

Signed, sealed, executed and acknowledged on _____ day of _____, 20_____.

Signed, sealed and delivered in the presence of:

WITNESSES:

OWNER(S):

Print name: _____

Print name: _____

Print name: _____

Print name: _____

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I HEREBY CERTIFY that on this day personally appeared before me _____ who is personally known to me, or has produced _____ (type of identification) as identification and he/she acknowledge that he/she executed the foregoing, freely and voluntarily, for purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20_____.

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA

Print Name: _____

Commission No.: _____