



**Public Safety Committee**  
**11:00am, Tuesday, March 4, 2025**  
**City Hall Council Chambers**  
**1207 Palm Boulevard, Isle of Palms, SC**

**Public Comment:**

Citizens who wish to speak during the meeting must email their first and last name, address and topic to Nicole DeNeane, City Clerk, at [nicoled@iop.net](mailto:nicoled@iop.net) no later than 3:00 p.m. the day before the meeting. Citizens may also provide written public comment here: <https://www.iop.net/public-comment-form>

**Agenda**

- 1. Call to order and acknowledgement that the press and the public have been duly notified of the meeting in accordance with the Freedom of Information Act.**
- 2. Citizen's Comments** – All comments have a time limit of three (3) minutes.
- 3. Approval of previous meeting's minutes – February 4, 2025** [p. 2-5]
- 4. Old Business**
- 5. New Business**
  - a. Discussion of Ordinance 2025-02 to amend parking fees [p. 6]
  - b. Discussion of cameras in STR units
  - c. Discussion of short-term rentals code enforcement
  - d. Discussion of Surfing Instruction Applications [p. 7-33]
  - e. Discussion of Aviation Authority Mutual Aid Agreement [p. 34-37]
  - f. Review of 10-year Operational Budgets for Police and Fire Departments [p.38-51]
- 6. Miscellaneous Business** – Next meeting date: April 1, 2025 at 11:00am
- 7. Adjournment**



**Public Safety Committee Meeting**  
**9:00am, Tuesday, February 4, 2025**  
**1207 Palm Boulevard, Isle of Palms, SC and**  
**broadcasted live on YouTube: <https://www.youtube.com/user/cityofisleofpalms>**

**MINUTES**

**1. Call to Order**

Present: Council members Streetman, Anderson, Bogosian

Staff Present: Director Kerr, Director Hamilton, Chief Cornett, Deputy Chief Tuohy

**2. Election of Chair and Vice Chair**

Council Member Anderson nominated Council Member Bogosian as Chair of the Public Safety Committee. Council Member Bogosian seconded the motion. Council Member Streetman nominated Council Member Anderson as Chair of the Public Safety Committee. There being no second, the motion failed.

**VOTE: A vote was taken as follows for Council Member Bogosian as Chair of the Public Safety Committee:**

Ayes: Bogosian, Anderson

Nays: Streetman

**Council Member Bogosian will act as Chair of the Public Safety Committee.**

Council Member Bogosian nominated Council Member Anderson as Vice Chair of the Public Safety Committee. There being no second, the motion failed. Council Member Anderson nominated Council Member Streetman as Vice Chair of the Public Safety Committee. Council Member Anderson seconded the motion.

**VOTE: A vote was taken on Council Member Streetman as Vice Chair for the Public Safety Committee, and the motion passed unanimously.**

**3. Citizen's Comments**

Chris Hagy, 20<sup>th</sup> Avenue, shared some issues he has experienced with the rental houses surrounding his home. He would like the Committee to consider changing the rollover date for complaints to a rolling year and not January 1 of each year. He would like a clearer definition of the number of cars permitted for one property; he feels the law is not clear. He would also like them to consider making cars parked in an easement a parking violation.

A further discussion of these code enforcement suggestions will be added to the March agenda.

4. **Approval of Previous Meeting Minutes – September 10, 2024**

**MOTION:** Council Member Anderson made a motion to approve the minutes of the September 10, 2024 meeting. Council Member Bogosian seconded the motion. The motion passed unanimously.

4. **Old Business**

**Update on Coyote Management**

Chief Cornett said his department intends to be more communicative of their coyote management efforts this season. They have already been posting on their social media channels and contacting local media. There have been two sightings so far.

He shared they have added money for trapping to their proposed FY26 budget. He also acknowledged that the Coyote Management Plan on the City's website needs to be updated.

5. **New Business**

A. **Discussion of Ordinance 2025-01 to amend parking regulations**

Director Kerr said these suggested changes will establish a path by which code enforcement can be delegated to a third party for enforcing parking regulations.

Director Kerr said changes to the City's contract with PCI are needed to clarify they do not receive any parking ticket-related income. Council Member Bogosian said he would like clarification from the City's Attorney about the need for those changes.

Chief Cornett said he will implement a training program for those PCI staff writing parking tickets similar to the training received by the BSOs but specifically targeting parking regulations. The management/chain of command details still need to be worked out with PCI.

Council Member Streetman asked about the 4' parking line, and Chief Cornett said he and his staff are continually looking for ways to make a permanently visible parking line to create a safe parking environment.

Committee members were supportive of the changes to 2025-01 but still have questions. Council Member Bogosian would like to know what is legally making the City change the structure of their agreement with PCI. Council Member Anderson would like clarification on the sworn status of PCI staff and their chain of command. She would also like clarity on who is legally allowed to collect fees on behalf of the City. Director Kerr pointed out that changing the fee structure of the PCI contract did not significantly change the monies coming to the City or PCI.

Director Kerr said he would seek clarity from the City Attorney and have that prior to Second Reading at the end of the month.

**B. Discussion of adding a second canine to the Police Department**

Chief Cornett said that Sandy's handler resigned and that handler's supervisor now has possession of the dog. He said her training and tracking have improved.

He also said he had intended to ask for consideration for a second canine, but then the handler resigned. So until he has that position filled, there is no need for a second canine.

**C. Discussion of crosswalk at 42<sup>nd</sup> Avenue and Palm Boulevard**

Council Member Streetman said residents in that area reached out to him about their concerns for people crossing the street in that area, believing the crossing areas to not be well marked.

Director Kerr said a crosswalk could not be added at 42<sup>nd</sup> Avenue, but he will reach out to SCDOT about the costs and process for improving the crosswalks 43<sup>rd</sup> and 46<sup>th</sup> avenues.

**D. Discussion of changing arrangement with County Park from shared Deputy to shared BSO**

Chief Cornett shared with the Committee his idea to change the staff working traffic control outside the County Park in the summer from a County Deputy Sheriff to a City BSO. With the addition of 1-2 BSO positions, he knows he will always have staff available to manage that area. It is often difficult to secure a deputy. He has spoken to the County and they are in favor of the change and will continue to share in the cost. Should the change be approved, the City's share will drop from \$18,000/year to \$5,000/year. The City will continue to use an off-duty deputy to help with calls.

**MOTION: Council Member Bogosian made a motion to recommend to City the change of a shared BSO for traffic control as laid out by Chief Cornett. Council Member Streetman seconded the motion. The motion passed unanimously.**

**E. Discussion of adding a high-water vehicle to the Fire Department**

Deputy Chief Tuohy stated that such a vehicle would be beneficial during times of significant flooding since it is detrimental to the fire trucks to drive in water deeper than 12"-18". They have created and trained a high-water rescue team within the department. He said the truck could be used to assist with other City functions, such as moving equipment.

He said the cost of an upfitted new vehicle would be \$352,000. Upfitting and repairing a surplus vehicle would cost almost as much and there may be safety issues with an older vehicle.

The request for the vehicle will be added to the FY26 budget.

**F. Review of 10-year Capital Plans for Police and Fire Departments**

Chief Cornett reviewed the requests for FY26 in the 10-year Capital Plan. Director Hamilton said some changes may be necessary depending on the outcome of contract changes with PCI. Council Member Bogosian noted the significant increase in the building maintenance line item. Director Kerr believes that increase was intentional because there had been no planned

maintenance for the previous five years due to the renovations on the Public Safety Building in 2019.

Deputy Chief Tuohy said the Fire Department's requests are the same as last year but now include the high-water vehicle. He said the City did not receive a grant for the fire suppression boat that was in the FY25 Capital Plan. They will reapply this year. He also believes the cost of the boat could come down. Council Member Bogosian would like the department to also look at grants for the high-water vehicle. Rather than make both large purchases in the same fiscal year, Deputy Chief Tuohy said the purchases could be staggered if the grant is approved. He would still like to purchase the supporting high-water equipment in FY26 even if the vehicle is not purchased until a later year.

Director Kerr suggested keeping both the boat and the high-water vehicle in the budget. Since both costs are approximately the same, City Council can authorize whichever purchase is more advantageous to the City at that time.

#### **6. Miscellaneous Business**

The next meeting of the Public Safety Committee will be Tuesday, March 4, 2025 at 11:00am.

Council Member Streetman said he was approached by a resident about a second ADA wheelchair at Fire Station 2. Deputy Chief Tuohy said Chief Oliverius will follow up with more information at the March meeting.

Council Member Anderson had questions about last season's parking outcomes. Director Kerr asked her to email her questions to him.

#### **7. Adjournment**

Council Member Streetman made a motion to adjourn, and Council Member Anderson seconded the motion. The meeting was adjourned at 12:36pm.

Respectfully submitted,

Nicole DeNeane  
City Clerk

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ORDINANCE 2025-02

AN ORDINANCE TO AMEND TITLE 8, MOTOR VEHICLES AND TRAFFIC, CHAPTER 2, STOPPING STANDING, AND PARKING OF VEHICLES, ARTICLE C, BEACH PARKING, SECTION 8-2-44 OF THE CITY OF ISLE OF PALMS CODE OF ORDINANCES.

WHEREAS, the Isle of Palms City Council has the authority to amend its Code of Ordinances when it deems it to be in the best interest of the citizens of the City, and now desires to do so with respect to the subject of parking.

NOW, THEREFORE, BE IT ORDAINED by the Mayor and Councilmembers of the City of Isle of Palms, that Section 8-2-44 of the Isle of Palms Code of Ordinances are hereby amended as follows:

SECTION 1. That Section 8-2-44. "Permit; fees." be amended to state:

**Sec. 8-2-44. Permits; fees.**

No permit or parking fee shall be required to park in the designated beach parking zones. A fee shall be required to park in the Municipal Parking Lots located on Pavilion Drive and on-street on Ocean Boulevard between 10<sup>th</sup> and 14<sup>th</sup> Avenues as set by resolution approved by City Council.

SECTION 2. Should any part of this Ordinance be held invalid by a Court of competent jurisdiction, the remaining parts shall be severable therefrom and shall continue to be in full force and effect.

SECTION 3. That all ordinances or parts of ordinances conflicting with the provisions of this Ordinance are hereby repealed insofar as the same affect this Ordinance.

SECTION 4. That this Ordinance take effect immediately upon approval by City Council.

PASSED AND APPROVED BY THE CITY COUNCIL FOR THE ISLE OF PALMS ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 2025.

\_\_\_\_\_  
Phillip Pounds, Mayor

(Seal)

Attest: \_\_\_\_\_

Nicole DeNeane, City Clerk

## **surfing Applicants' Location Requests**

Bowers – 34A

DePass – 26<sup>th</sup>

Antman – 21<sup>st</sup>

Granigan – 8<sup>th</sup>

Busey – 6<sup>th</sup>



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/22/2025

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

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

<b>PRODUCER</b> Verify Insurance Services, LLC DBA Thimble Insurance Services 174 West 4th Street, Suite 204 New York, NY 10014 <a href="https://support.thimble.com/">https://support.thimble.com/</a>	<b>CONTACT NAME:</b> THIMBLE <a href="https://support.thimble.com/">https://support.thimble.com/</a>
	<b>PHONE (A/C, No, Ext):</b> _____ <b>FAX (A/C, No):</b> _____
	<b>E-MAIL ADDRESS:</b> support@thimble.com
	<b>INSURER(S) AFFORDING COVERAGE</b> <span style="float: right;"><b>NAIC #</b></span>
	<b>INSURER A:</b> National Specialty Insurance Company <span style="float: right;">22608</span>
	<b>INSURER B:</b> _____
	<b>INSURER C:</b> _____
	<b>INSURER D:</b> _____
	<b>INSURER E:</b> _____
	<b>INSURER F:</b> <a href="https://www.thimble.com/check-policy-status/">https://www.thimble.com/check-policy-status/</a>

**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____	Y	Y	IBL-P35GX8ZT3J	04/19/2025 12:00 AM EDT	05/18/2025 11:59 PM EDT* See note on expiration date below.	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000						
	MED EXP (Any one person) \$ 5,000						
	PERSONAL & ADV INJURY \$ 1,000,000						
							GENERAL AGGREGATE \$ 1,000,000
							PRODUCTS - COMP/OP AGG \$ 1,000,000
							\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER \$
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
							\$
							\$
							\$
							\$

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

\*Please note that the insured has purchased a monthly policy that will automatically extend upon expiration of the policy if the insured pays the appropriate premium. At that time, you will receive a new Certificate of Liability Insurance, evidencing such extension.

(con't on form Acord 101)

**CERTIFICATE HOLDER** **CANCELLATION**

The City of Isle of Palms desireef@iop.net	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 





**ADDITIONAL REMARKS SCHEDULE**

AGENCY Verify Insurance Services, LLC DBA Thimble Insurance Services		NAMED INSURED IOPSurfLessons 28 26th Ave, Isle of Palms, SC, 29451 iopsurflessons@gmail.com	
POLICY NUMBER IBL-P35GX8ZT3J		EFFECTIVE DATE: 04/19/2025 12:00 AM EDT	
CARRIER National Specialty Insurance Company	NAIC CODE 22608		

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: Acord 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations (con't)

Episodic Coverage (THSN CG 02 03 02 21) for policy number IBL-P35GX8ZT3J until 05/18/2026 11:59 PM EDT

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **DESIGNATED ADDITIONAL INSURED**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

PROFESSIONAL LIABILITY COVERAGE FORM

### **SCHEDULE**

**Name of Designated Person or Organization (including its departments and attached agencies, its directors, officers, officials, employees, representatives and agents):**

Any person(s) or organization(s) for whom you have agreed in writing in a contract or agreement that such person(s) or organization(s) be added as an additional insured on your policy.

**E-Mail Address:**

**A. SECTION II – WHO IS AN INSURED** is amended to include as an additional insured the person(s) or organization(s) shown in the **SCHEDULE** above, but only with respect to liability for "bodily injury", "property damage", "personal and advertising injury" or "wrongful acts" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B. With respect to the insurance afforded to these additional insureds, the following is added to LIMITS OF INSURANCE** section of the coverage form

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance shown in the Declarations;

whichever is less.

**C. If this policy is cancelled or nonrenewed for any reason, we will deliver notice of the cancellation or non-renewal to any Designated Person or Organization shown in the SCHEDULE above at the e-mail address shown above.**

**D. This endorsement shall not increase the applicable limits of insurance shown in the Declaration**

All other terms and conditions remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY  
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

- COMMERCIAL GENERAL LIABILITY COVERAGE PART
- ELECTRONIC DATA LIABILITY COVERAGE PART
- LIQUOR LIABILITY COVERAGE PART
- POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
- POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
- PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
- RAILROAD PROTECTIVE LIABILITY COVERAGE PART
- UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

**SCHEDULE**

**Name Of Person(s) Or Organization(s):**

Any person(s) or organization(s) for whom you have agreed in writing in a contract or agreement that such person(s) or organization(s) be added as an additional insured on your policy.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **DESIGNATED ADDITIONAL INSURED**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

PROFESSIONAL LIABILITY COVERAGE FORM

### **SCHEDULE**

**Name of Designated Person or Organization (including its departments and attached agencies, its directors, officers, officials, employees, representatives and agents):**

The City of Isle of Palms

**E-Mail Address:**

desireef@iop.net

**A. SECTION II – WHO IS AN INSURED** is amended to include as an additional insured the person(s) or organization(s) shown in the **SCHEDULE** above, but only with respect to liability for "bodily injury", "property damage", "personal and advertising injury" or "wrongful acts" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
  2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B.** With respect to the insurance afforded to these additional insureds, the following is added to **LIMITS OF INSURANCE** section of the coverage form
- If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:
1. Required by the contract or agreement; or
  2. Available under the applicable limits of insurance shown in the Declarations;
- whichever is less.
- C.** If this policy is cancelled or nonrenewed for any reason, we will deliver notice of the cancellation or non-renewal to any Designated Person or Organization shown in the **SCHEDULE** above at the e-mail address shown above.
- D.** This endorsement shall not increase the applicable limits of insurance shown in the Declaration
- All other terms and conditions remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**PRIMARY AND NONCONTRIBUTORY –  
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
LIQUOR LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

**Primary And Noncontributory Insurance**

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and

- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY  
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

- COMMERCIAL GENERAL LIABILITY COVERAGE PART
- ELECTRONIC DATA LIABILITY COVERAGE PART
- LIQUOR LIABILITY COVERAGE PART
- POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
- POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
- PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
- RAILROAD PROTECTIVE LIABILITY COVERAGE PART
- UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

**SCHEDULE**

<p><b>Name Of Person(s) Or Organization(s):</b>          The City of Isle of Palms          desireef@iop.net</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us of Section IV – Conditions:**

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.



# StarGuard Lifeguard

## Competency Assessment & Performance Record

**Certification Number:** 175918

**Expiration Date:** 05/25/2025

<b>Last name:</b> Depass	<b>First name:</b> Brycen	<b>Middle initial:</b> M
<b>Date of Birth:</b> 02/17/2004	<b>Email Address:</b> brycendepass@gmail.com	<b>Training Center Affiliation:</b> Town of Mount Pleasant

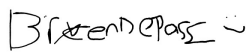
<b>Training Center of Record:</b> Town of Mount Pleasant	<b>Training Location:</b> R L Jones Center
<b>Date of Training:</b> 05/25/2024	<b>Training Format:</b> Blended
<b>Maximum Water Depth:</b> 8 feet or less   <b>Additional Options:</b> Depth: 8' Open Water: [ ] Dispatch: [ ] Oxygen Admin: [X]	

**STUDENT AGREEMENT:**

**Statement of Understanding:** I understand the training requirements for the StarGuard® course and/or any supplemental training module and have completed all course objectives. I understand that it is my responsibility to:

1. Obtain site-specific training at the facility where I work that includes orientation to emergency and operational procedures and practice with equipment
2. Maintain my vigilance, physical fitness (including vision performance), rescue, CPR and first aid skill levels;
3. Exhibit professional behavior (StarGuard® Best Practices) and maintain personal safety when in or around an aquatic environment

I understand that I may be photographed at any time when performing lifeguard duties; that competency assessment of my performance may be conducted at any time; that my image may be used in training or promotional materials produced by StarGuard ELITE. I understand that my competency must be assessed annually by an authorized StarGuard Lifeguard Instructor to renew and retain my StarGuard Lifeguard certification.


<b>Student Name:</b>  Brycen Depass	<b>Student Signature:</b>  
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**INSTRUCTOR AGREEMENT:**

This individual has met the course requirements and demonstrated reasonable competency via written test and skill performance assessment and qualifies for completion certificates in:

- SGE StarGuard® Lifeguard
- Health & Safety Institute Basic Life Support (Professional Rescuer CPR with AED for Adults, Children, and Infants), Basic First Aid, Bloodborne Pathogens, and (if taught) Emergency Oxygen

This student's completion record will be maintained according to the Training Center Administrative Manual (TCAM) standards and guidelines. The student demonstrated competency in **8 feet or less** of water. Verification of performance in deeper water is the responsibility of the employer, based on site-specific needs.

<b>Lead Instructor Name:</b>  Jessica Walsh	<b>Lead Instructor Signature:</b>  
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**Note to the Employer:** This certification record documents the competency and skills performed by the student at the completion of the StarGuard® course. The Competency Assessment & Performance Record is provided for use by the employer. Official course records are maintained by the independent Training Center that conducted the course. Completion of a StarGuard® course does not guarantee future performance nor imply complete training for every circumstance. It is your responsibility as an employer to verify competency, provide site-specific training and supervision, and monitor job performance. To retain StarGuard® certification, skills must be assessed every year, using a new Competency Assessment & Performance Record for renewal.

*Required notice for lifeguards in New York: Meets NY State Department of Health Regulations*





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/09/2024

**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).**


<b>PRODUCER</b> Sadler & Company, Inc.  3014 Devine Street, Columbia, SC, 29250	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 800-622-7370      FAX (A/C No): 803-256-4017 E-MAIL ADDRESS: sport7@sadlerco.com <b>PRODUCER CUSTOMER ID :</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>
	<b>INSURER A :</b> Texas Insurance Company      NAIC # 16543 <b>INSURER B :</b> <b>INSURER C :</b> <b>INSURER D :</b> <b>INSURER E :</b> <b>INSURER F :</b>
	<b>INSURED</b> Sports Marketing Program Management Inc. Philip Neal LLC dba Salt Marsh Surf Co.  1338 Ronald Lane Charleston, SC, 29412

**COVERAGES    CERTIFICATE NUMBER: A-SP-SU-24-04-02-301806    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 EFF (MMDD/YYYY)	POLICY EXP (MMDD/YYYY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS  GENERAL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y	N	BESGLPTNV011301_170012_02	04/09/2024	04/09/2025	EACH OCCURRENCE	\$ 1,000,000.00
							FIRE DAMAGE TO PREMISES RENTED (Any one premises)	\$ 300,000.00
							MED EXP (any one person)	\$ 5,000.00
							PERSONAL & ADV INJURY	\$ 1,000,000.00
							GENERAL AGGREGATE	\$ 3,000,000.00
							PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
	<b>UMBRELLA LIAB</b> OCCUR <b>EXCESS LIAB</b> CLAIMS-MADE  DEDUCTIBLE RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
								\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below						WC STATUTORY LIMITS	OTHER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	<b>OTHER</b> Abuse/Molestation	Y	N	BESGLPTNV011301_170012_02	04/09/2024	04/09/2025	Each Occurrence: \$ 25,000.00	Aggregate: \$ 50,000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Liability Policy Deductible: \$0.00 Deductible for Bodily Injury and \$ 1000.00 per Property Damage Claim. ISO Occurrence form CG 00 01 04 13 and company's specific forms. Coverage for Participant Legal Liability requires that every participant signs a waiver/release. The certificate holder is named as Additional Insured with respect to (continued on next page)

<b>CERTIFICATE HOLDER</b> City of Isle of Palms 1207 Palm Blvd. Isle of Palms, SC, 29451	<b>CANCELLATION</b>  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  <b>Mark Di Perno</b>
---	--

<b>AGENCY</b> Sadler & Company, Inc.		<b>NAMED INSURED</b> Philip Neal LLC dba Salt Marsh Surf Co.	
<b>POLICY NUMBER</b> BESGLPTNV011301_170012_02		<b>1338 Ronald Lane</b> <b>Charleston,</b> <b>SC, 29412</b>	
<b>CARRIER</b> Texas Insurance Company	<b>NAIC CODE</b> 16543	<b>EFFECTIVE DATE:</b> 04/09/2024	

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability Insurance

---

negligent acts or omissions of the Named Insured and only with respect to the Operations of the Insured during the coverage period.  
RE: Registered Surfing participants: 04/09/2024 - 04/09/2025;

CERTIFICATE NO : 00270896

**LIFEGUARD+**  
**CERTIFICATES**

# **CPR & FIRST AID**

## **CERTIFICATE OF COMPLETION**

THIS IS TO PROUDLY CERTIFY:

**PHILIP ANTMAN**

**01/22/2025**

For completing their CPR & First Aid Training with [lifeguardcertificates.com](http://lifeguardcertificates.com) on Wed Jan 22 2025 valid for 1 year from the date of completion.

JESSICA REYES  
Instructor



LIFEGUARDCERTIFICATES  
Course Provider



SCAN THIS QR CODE OR VISIT  
USALIFEGUARDASSOCIATION.ORG  
TO VERIFY THE AUTHENTICITY  
OF YOUR CERTIFICATE.

**LIFEGUARD+**  
**CERTIFICATES**

# LIFEGUARD

## CERTIFICATE OF COMPLETION

THIS IS TO PROUDLY CERTIFY:

**PHILIP ANTMAN**

7869807853788-1

For completing their Lifeguard Training with [lifeguardcertificates.com](https://lifeguardcertificates.com) on Wed Jan 22 2025  
valid for 1 year from the date of completion.

REBECCA LOWES  
Instructor



LIFEGUARDCERTIFICATES  
Course Provider



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/12/2023

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

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

<b>PRODUCER</b> JMG Insurance Corp P.O. Box 700 Norwalk CT 06852	<b>CONTACT NAME:</b> Susan Cagen <b>PHONE (A/C. No. Ext):</b> 203-838-5554 <b>E-MAIL ADDRESS:</b> scagen@jmg.com		<b>FAX (A/C. No.):</b> 203-857-7848	
	<b>INSURER(S) AFFORDING COVERAGE</b>			
<b>INSURED</b> Isla Surf School Inc 1144 Landsdowne Drive Charleston SC 29412	ISLASUR-06	INSURER A :	Vantapro Specialty Insurance Company	NAIC # 44768
		INSURER B :	United States Fire Insurance Company	21113
		INSURER C :		
		INSURER D :		
		INSURER E :		

**COVERAGES**

CERTIFICATE NUMBER: 206791184

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		5077-1367-01	8/18/2023	8/18/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Accident Medical	Y		US1516594-02	8/18/2023	8/18/2024	Max Medical 25,000 Acc Death/Dismember 5,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 The Certificate Holder is named as Additional Insured only with respect to the acts of the Named Insured and only with respect to the Operations of the Insured during the coverage period.

**CERTIFICATE HOLDER****CANCELLATION**

City of Isle of Palms  
 1207 Palm Blvd  
 Isle of Palms, SC 29451

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

*John O. Falivio*

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To whom it may concern,

Currently, my lifeguard certification is out of date. Our entire staff is being recertified on March 2nd for the start of our season. I spoke with someone on the phone at the Isle of Palms office who recommend I provide an explanation and then provide our updated certificates once we receive them. I did not want to miss the deadline for the business license renewal so I figured this was the best option.

Please feel free to contact me with any questions or concerns at [shane@islasurfschool-charleston.com](mailto:shane@islasurfschool-charleston.com) or (843) 813-7897.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/16/2024

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.

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PRODUCER K&K Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804	CONTACT NAME: SCU - Outfitters & Guides		
	PHONE (A/C, No, Ext): 1-877-783-1161	FAX (A/C, No): 1-260-459-5502	
	E-MAIL ADDRESS: OandG@kandkinsurance.com		
	PRODUCER CUSTOMER ID:		
INSURED Carolina Salt Surf Lessons, LLC DBA: Charleston Paddle Board Co. 1111 Oak Crest Dr Charleston, SC 29412 A Member of the Sports, Leisure & Entertainment RPG	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Markel Insurance Company		38970
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

## COVERAGES

CERTIFICATE NUMBER: W02700386

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: MEMBER	X		M1RPA0000500002100	05/16/2024 10:53 AM EDT	05/16/2025 12:01 AM	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea Occurrence)	\$300,000
							MED EXP (Any one person)	EXCLUDED
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$5,000,000
							PRODUCTS - COMP/OP AGG	\$1,000,000
							PROFESSIONAL LIABILITY	
							BODILY INJURY TO PARTICIPANTS	
							COMBINED SINGLE LIMIT (Ea accident)	
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
	<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	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	
							E.L. DISEASE - EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	
	MEDICAL PAYMENTS FOR PARTICIPANTS						PRIMARY MEDICAL	
							EXCESS MEDICAL	

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

Bicycle Rental - Non Stand-Alone, Paddling/Paddleboarding (includes stand-up paddleboarding), Retail Sales (must be 80% or less of total revenues), Surfing  
 Certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured. Coverage does not extend to the negligence or errors & omissions of the additional insured.

## CERTIFICATE HOLDER

Test  
 Test  
 Colorado Springs, CO 80918  
 (Permit Grantor)

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Coverage is only extended to U.S. events and activities.

\*\* NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – STATE OR GOVERNMENTAL  
AGENCY OR SUBDIVISION OR POLITICAL  
SUBDIVISION – PERMITS OR AUTHORIZATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

**State Or Governmental Agency Or Subdivision Or Political Subdivision:**

Per USDA Forest Service assigned National ID Number.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**A. Section II – Who Is An Insured** is amended to include as an additional insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

- 1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

2. This insurance does not apply to:

- a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".

**B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**EARLIER NOTICE OF CANCELLATION  
PROVIDED BY US**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
LIQUOR LIABILITY COVERAGE PART  
POLLUTION LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

**SCHEDULE**

**Number of Days' Notice** Minimum 30 Days or Days per Certificate on file with K&K Insurance Group.

(If no entry appears above, information required to complete this Schedule will be shown in the Declarations as applicable to this endorsement.)

For any statutorily permitted reason other than nonpayment of premium, the number of days required for notice of cancellation, as provided in paragraph 2. of either the CANCELLATION Common Policy Condition or as amended by an applicable state cancellation endorsement, is increased to the number of days shown in the Schedule above.

Named Insured: Carolina Salt Surf Lessons, LLC  
DBA: Charleston Paddle Board Co.  
Effective Date: 05/16/2024

Per USDA Forest Service assigned National ID Number.



**American Red Cross**  
Training Services

## Certificate of Completion

Kyle Busey

has successfully completed requirements for

**Lifeguarding with CPR/AED for Professional Rescuers and First Aid**

Date Completed: 2/10/2023  
Validity Period: 2 Years

Conducted by: City of Charleston Recreation



To verify certificate, scan code or visit [redcross.org/digitalcertificate](https://redcross.org/digitalcertificate) and enter ID.

Learn and be inspired at [LifesavingAwards.org](https://LifesavingAwards.org)



014192G



**APPLICATION: A-SP-SI-24-03-12-299744**

**INSURED'S CONTACT INFORMATION**

Contact Name	Monica Becerra
Contact Phone	8439730078
Contact Email	<a href="mailto:mbecerra18921@gmail.com">mbecerra18921@gmail.com</a>

**ESTABLISHMENT**

Named Insured	Share The Stoke
Address	304 Fleming Rd
City	Charleston
State	South Carolina
Zip code	29412
Country	United States
Website	<a href="http://sharethestokesurfboardrentals.com">sharethestokesurfboardrentals.com</a>
Form of Business	Limited Liability Company
Employee/Volunteers	1
Do you have any activities outside of the United States?	No
Event Location	Isle of Palms, South Carolina

**COVERAGE PERIOD AND ACTIVITIES**

Policy Effective Date	04/01/2024
Policy Expiry Date	03/31/2025

**ACTIVITIES**

**ACTIVITY(1)**

Sport/Activity	Surfing
Level	Amateur
Category	Lessons

**Please specify the Total Number of Participants and Coaches/Officials/Volunteers for the policy duration for each of the following indicated age groups (Estimate where exact numbers are unavailable)**

Coaches/Volunteers/Board Members	1
Total number of registered Participants 12 and under	20
Total number of registered Participants 13-15	20
Total number of registered Participants 16-19	20
Total number of registered Participants 20 and older	20

Will participants be taking more than one lesson?	Yes
What is the average number of lessons per participant?	1 lesson(s)
Will participants stay overnight?	Participants don't stay overnight

**Please describe the operations/activities to be insured:**  
**Please note: Insurance will ONLY cover activities specified above (or on your Insurance Quotation) and no additional activities mentioned below will be covered.**

Surf lessons and surfboard rentals	
Do you have rentals ?	Yes
What percentage of revenue comes from rentals?	5%

### NON-ATHLETIC FUNDRAISING ACTIVITY

Does your organization hold any <b>Non-Athletic</b> Participant fundraising activities?	No
---	----

### GENERAL INFORMATION

What type of security will you be using?	None
Maximum number of spectators at any individual event or location	1
Estimated Gross Receipts	\$100.00
Desired Acc Med Deductible	\$100.00
Desired Acc Med Benefit (\$25,000 is standard. Higher limits result in a higher premium cost)	\$25,000.00
Do you offer Temporary Child Supervision?	No
Will you be using any, pyrotechnics, or use of mechanical devices that will be ridden (excluding sporting equipment)?	No
Does any volunteer, owner, coach or official have a criminal record, or has ever had a criminal record?	No
Have you had any claims in the past five (5) years?	No
Have you ever filed for bankruptcy?	No
Have you ever had insurance Cancelled, or Non Renewed for any reason?	No
Does the applicant use a waiver and release?	Yes

**Please note that the use of a waiver is mandatory for insurance coverage. For your protection we recommend having your waiver prepared / approved by your legal council.**

### ADDITIONAL INSURED

Would you like to add Additional Insured?	Yes
---	-----

### Additional insured (1)

AI name	City of Isle of Palms
Address	1207 Palm Blvd
City	Isle of Palms
State	SC
Zip/Postal code	29451
Country	United States
Contact Name	
Phone Number	

E-mail

---

Type of Business:	<input checked="" type="checkbox"/> Government/Municipality	<input type="checkbox"/> Sponsor
	<input type="checkbox"/> Sub-Contractor	<input type="checkbox"/> Beneficiary/Charity
	<input type="checkbox"/> Venue/Facility	<input type="checkbox"/> Landowner
	<input type="checkbox"/> Association Member	<input type="checkbox"/> Landlord
	<input type="checkbox"/> Other	

---

**\*Note: The SI rep facing application, that is presented in the body of this email, does not include the list of requested additional insured's. This is due to the size of the additional insured list (1 AIs). To see the list of additional insured's please open the application document.**

---

## OPTIONAL COVERAGE

Basic Coverage Summary

---

### Individuals Covered

---

All players, managers or coaches of the Policy holder

---

### Activities Covered

---

While participating as a member of the team in a scheduled game, an official tournament game, or in a practice session of the team.

---

## ABUSE/MOLESTATION COVERAGE

**This endorsement covers the LEGAL COSTS TO DEFEND AGAINST the accusation OF ABUSE OR MOLESTATION against a member of your organization.**

---

Basic Abuse/Molestation Coverage of **\$25,000 per occurrence / \$50,000 aggregate is included** in the base General Liability Package.

---

Higher COVERAGE Limits FOR Abuse / Molestation can be added for an additional premium as indicated below:

---

Abuse/Molestation Coverage (Optional) (Higher Limits) NOT REQUIRED

---

**\* May be more, depending on number of participants. Additional premium Fully Earned at Policy Inception. Premium does not include taxes and fees.**

---

**\*\* Background checks required.**

---

## Excess Liability Coverage

---

Basic Liability Coverage of **\$1,000,000 per occurrence / \$3,000,000 aggregate is included** in the base General Liability Package.

---

Follow-Form Excess Liability Coverage with the following Per Occurrence / Aggregate limits can be added for an additional premium as indicated below:

---

Excess Liability Coverage (Optional) NOT REQUIRED

---

**\* May be more, depending on coverage period and number of participants. Fully Earned at Policy Inception. Premium does not include taxes and fees.**

---

## HIRED NON OWNED AUTO COVERAGE

Any bodily injury and property damage arising out of the transportation of participants is excluded.

---

Follow-Form HNOA Coverage with the following limits can be added for an additional premium as indicated below:

---

NOT REQUIRED

Hired/Non Owned Auto Liability Coverage

---

**\* May be more, depending on coverage period and number of participants. Fully Earned at Policy Inception. Premium does not include taxes and fees.**

---

**Virtual Online Training/Coaching/Instruction (Optional)**

---

Do you provide virtual online training/coaching/instruction? No

---

**\* Additional Premium.**

---

**LIQUOR LIABILITY COVERAGE**

---

Please note Liquor Liability coverage is required if you are selling alcohol

---

Are you selling alcohol? No

---

---

**DECLARATION**

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**IMPORTANT NOTICE**

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Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may result in an insurance claim being denied by the insurer.

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**Declaration**

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To the best of my knowledge and belief all statements made in this Application for Insurance are true. Agreeing electronically to this document does not bind the Applicant to purchase the insurance, but it is agreed that this Application shall be the basis of the contract, should a policy be issued. In order to complete your application and receive a quotation, please indicate your agreement below with a YES.

---

The customer has agreed electronically Yes

---

**American  
Lifeguard  
Association**



[www.americanlifeguard.com](http://www.americanlifeguard.com)

**The American Lifeguard  
Association®**

*has trained over  
250,000 individuals  
since 1990.*

*Our goal is to improve  
the quality and  
accessibility of  
Health & Safety*

**Member No: MONMOW101896**

**Issue Date: 01/08/2025**

**American Lifeguard & Safety Training™**

**Monica  
Mowers**

**Date of Birth 10/18/1996**  
(mm/dd/yyyy)



**Qualification**

Professional Lifeguarding  
Shallow Water Lifeguarding  
Waterfront Lifeguarding  
Swimming Pool Operator  
CPR/AED for the Professional Rescuer  
Community First Aid  
Aquatic First Responder

**Certification issued by:**  
**American Lifeguard Assoc.**

**8300 Boone Blvd.,  
5th Floor**

**Vienna, VA 22182**



For  
Verification  
go to:

**[www.universalcertification.org](http://www.universalcertification.org)**

Valid for 2 years with Employer's Model Aquatic Health Code compliance.

**Date of Completion**

01/08/2025

01/08/2025  
01/08/2025



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/01/2025

**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).**

<b>PRODUCER</b> SportsInsurance.com  P.O. Box 1155, Lake Placid, NY, 12946	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 1-866-889-4763      FAX (A/C No):		
	<b>E-MAIL ADDRESS:</b> info@sportsinsurance.com <b>PRODUCER CUSTOMER ID :</b>		
<b>INSURED</b> Sports Marketing Program Management Inc. Share The Stoke Surfboard Rentals  304 Fleming Rd Charleston, SC, 29412	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A :</b> Accelerant Specialty Insurance Company		16890
	<b>INSURER B :</b>		
	<b>INSURER C :</b>		
	<b>INSURER D :</b>		
	<b>INSURER E :</b>		

**COVERAGES**

CERTIFICATE NUMBER: A-SP-SI-25-01-21-328866\_345226

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 EFF (MMDDYYYY)	POLICY EXP (MMDDYYYY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS  GENERAL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y	N	S0019GL000001-04	04/01/2025	03/31/2026	EACH OCCURRENCE	\$ 1,000,000.00
							FIRE DAMAGE TO PREMISES RENTED (Any one premises)	\$ 300,000.00
							MED EXP (any one person)	\$ 5,000.00
							PERSONAL & ADV INJURY	\$ 1,000,000.00
							GENERAL AGGREGATE	\$ 3,000,000.00
							PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE  DEDUCTIBLE RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
								\$
	<b>WORKERS COMPENSATION AND EMPLOYERS LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below						WC STATUTORY LIMITS	
							OTHER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	<b>OTHER</b> Abuse/Molestation	Y	N	S0019GL000001-04	04/01/2025	03/31/2026	Each Occurrence: \$ 25,000.00	Aggregate: \$ 50,000.00

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

Liability Policy Deductible: \$0.00 Deductible for Bodily Injury and \$ 1000.00 per Property Damage Claim. ISO Occurrence form CG 00 01 04 13 and company's specific forms. Coverage for Participant Legal Liability requires that every participant signs a waiver/release. The certificate holder is named as Additional Insured with respect to (continued on next page)

**CERTIFICATE HOLDER**

City of Isle of Palms  
 1207 Palm Blvd  
 Isle of Palms, SC, 29451

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Mark Di Perno



AGENCY SportsInsurance.com		NAMED INSURED Share The Stoke Surfboard Rentals	
POLICY NUMBER S0019GL000001-04		304 Fleming Rd Charleston, SC, 29412	
CARRIER Accelerant Specialty Insurance Company	NAIC CODE 16890	EFFECTIVE DATE: 04/01/2025	

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance**

negligent acts or omissions of the Named Insured and only with respect to the Operations of the Insured during the coverage period.  
RE: Registered Surfing participants: 04/01/2025 - 03/31/2026;

STATE OF SOUTH CAROLINA	)	LAW ENFORCEMENT
	)	MUTUAL AID AGREEMENT
COUNTY OF CHARLESTON	)	CITY OF ISLE OF PALMS /
		CHARLESTON COUNTY AVIATION AUTHORITY

This agreement, made this 19<sup>TH</sup> day of FEBRUARY, 2025, between the Charleston County Aviation Authority (hereinafter "Aviation Authority"), through Charleston County Aviation Authority Police Department (hereinafter "CCAAPD"), City of Isle of Palms (hereinafter "Isle of Palms"), through the Isle of Palms Police Department (hereinafter "IOP"), and "Party" as to each, collectively the "Parties", provides as follows:

**SECTION 1: PURPOSE OF THE AGREEMENT AND SERVICES TO BE PROVIDED**

Whereas, it is the mutual advantage and benefit of the Aviation Authority and Isle of Palms that each agency to render mutual aid law enforcement services as may be needed from time to time. It is further recognized that there may be situations where additional law enforcement officers and services are needed. These services may include, but are not limited to, patrol services, crowd control, traffic control, and other emergency service situations. The use of law enforcement officers to perform law enforcement duties outside of the territorial limits of the jurisdiction where the law enforcement officers are legally employed may be desirable and necessary in order to preserve and protect the health, safety, and welfare of the public.

**SECTION 2: AUTHORITY**

Any county, incorporated municipality or other political subdivision of this State may enter into mutual aid agreements as may be necessary for the proper and prudent exercise of public safety functions and in accordance with S.C. Code Ann. § 23-1-210 and § 23-20-10 et seq. of the Code of Laws of South Carolina, 1976 as amended.

**SECTION 3: POWER OF AUTHORITY OVER PERSONNEL, EQUIPMENT, AND FACILITIES**

- A) The Aviation Authority authorizes the Police Chief of the CCAAPD or his designee to render and request mutual law enforcement aid from the Isle of Palms Police Department to the extent of available personnel, equipment, and facilities not required

for adequate protection for the remainder of the Isle of Palms Police Department. The Police Chief or commanding officer of the Isle of Palms Police Department shall determine the amount of personnel, equipment, and the facilities available to render mutual law enforcement aid to CCAAPD. His/Her decision shall be final.

- B)** The Isle of Palms Police Department authorizes the Police Chief or his/her designee to render and request mutual law enforcement aid from CCAAPD to the extent of available personnel, equipment and facilities required for adequate protection. The Police Chief or commanding officer of the CCAAPD shall determine the amount of personnel, equipment, and the facilities available to render mutual law enforcement aid to the Isle of Palms Police Department. CCAAPD Chief's decision shall be final.
- C)** Law Enforcement officers acting under this agreement shall be commanded by superior authority within their own agency to maintain the peace and/or perform duties outside of their territorial limits. These law enforcement officers shall be under direction and authority of one person from their own agency/jurisdiction. That person shall in turn be under the direction and authority of the host jurisdiction to which they are called to perform law enforcement and/or peace duties. They shall have the power and authority of law enforcement officers and peace officers as provided by law, including the power to arrest. All arrests and any enforcement actions and prosecutions shall remain within jurisdiction where such action would be properly brought in the absence of this agreement.

#### **SECTION 4: FINANCIAL AGREEMENT**

- A)** Cooperative law enforcement service shall be rendered without charge to reciprocal participating agencies for routine law enforcement activities.
- B)** In the event of any extraordinary cost incurred in the rendering of aid under this agreement, a request may be submitted in writing for compensation by the agency rendering aid.

## **SECTION 5: LIABILITY**

- A) Participating agencies shall not be liable or obligated to indemnify any other person or entity for any of its equipment damaged or destroyed, and the individual officer or his/her estate shall not be indemnified for any material damage to his/her property, injury to his/her person or on account of his/her death resulting from the performance under this agreement.
- B) The Party receiving aid under this agreement shall not be responsible for reimbursing any amounts paid or due as benefits to employees of a Party giving aid under the terms of the South Carolina Workers' Compensation Act due to personal injury or death occurring while such employees are engaged in rendering aid under this Agreement. Both Parties shall be responsible for payment of compensation and benefits only to their respective employees.
- C) All individuals retain all compensation, pension, retirement and disability rights while performing duties in accordance with this agreement, and all officers shall continue to be paid by the entity where they are permanently employed as of the dates services are rendered.
- D) This agreement shall not be construed as or deemed to be an agreement for the benefit of any third Party or Parties, and no third Party or Parties shall have any right of action under this agreement for any cause whatsoever.
- E) To the extent permitted by law, and without waiving sovereign immunity, each agency shall be responsible for any and all claims, demands, suits, actions, damages, and causes of action related to or arising out of or in any way connected with its own actions, and the actions of its personnel in providing aid or law enforcement services under this agreement.

## **SECTION 6: RECORDS**

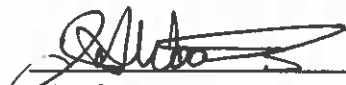
Each agency shall maintain records concerning the performance of services provided by the agency and make available as required by law pursuant to the Freedom of Information Act for public safety functions performed or arising under this agreement.

**SECTION 7: DURATION, MODIFICATION, AND TERMINATION**

- A) This agreement shall be in effect and legally binding when signed by each government entity and will renew automatically one year from the date this document is executed and annually each year thereafter unless fourteen (14) days written notice of intent to terminate is provided by one of the Parties.
  
- B) Any and all modification to this agreement must be in writing and approved by the appropriate governing bodies.

\_\_\_\_\_  
Chief Kevin Cornett  
City of Isle of Palms

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

  
\_\_\_\_\_  
Chief James Woods  
Charleston County Aviation Authority Police Department

Date: 02-19-2025

	A	B	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	DRAFT	CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS													
2	GL Number	Description	ACTUAL FY23	ACTUAL FY24	BUDGET FY25	YTD As Of 12/31/24 (6 MOS)	Jan-Dec 2024 12 Months	FORECAST FY25	INCREASE/ (DECR) FROM FY25 BUDGET	BUDGET FY26	INCREASE/ (DECREASE) FROM FY25 BUDGET	FORECAST FY27	FORECAST FY28	FORECAST FY29	FORECAST FY30
3															
4															
5		GENERAL FUND - POLICE													
6	10-4410.5001	SALARIES & WAGES	1,779,932	1,757,362	1,922,343	889,590	1,836,260	1,922,343	-	2,075,850	153,507	2,133,974	2,193,725	2,255,149	2,311,528
7	10-4410.5002	OVERTIME WAGES	162,421	166,349	172,198	94,472	186,802	172,198	-	187,876	15,678	193,137	198,544	204,104	209,818
8	10-4410.5003	PART-TIME WAGES	-	-	-	-	-	-	-	-	-	-	-	-	-
9	10-4410.5004	FICA EXPENSE	145,309	144,035	160,232	73,880	151,719	160,232	-	173,175	12,943	178,024	183,009	188,133	192,883
10	10-4410.5005	RETIREMENT EXPENSE	369,109	384,086	428,661	191,527	393,385	428,661	-	463,479	34,819	482,429	495,937	509,823	522,695
11	10-4410.5006	GROUP HEALTH INSURANCE	220,469	265,179	313,210	133,708	273,031	313,210	-	314,304	1,094	331,590	344,854	358,648	372,994
12	10-4410.5007	WORKERS COMPENSATION	87,292	105,093	105,798	82,495	115,083	105,798	-	114,404	8,606	117,264	120,196	123,201	126,281
13		Subtotal POLICE Wages & Fringes	2,764,532	2,822,103	3,102,442	1,465,672	2,956,281	3,102,442	-	3,329,088	226,646	3,436,418	3,536,265	3,639,058	3,736,200
14		% Increase/(Decrease) from Prior Year	20%	2%	35%					7%		3%	3%	3%	3%
15															
16	10-4420.5010	PRINT AND OFFICE SUPPLIES	14,059	13,383	15,000	5,591	13,827	15,000	-	15,000	-	14,000	14,000	14,000	14,000
17	10-4420.5014	MEMBERSHIP AND DUES	2,070	1,813	2,000	349	1,119	2,000	-	2,000	-	2,000	2,000	2,000	2,000
18	10-4420.5015	MEETINGS AND SEMINARS	2,666	3,459	3,000	129	169	3,000	-	3,000	-	3,000	3,000	3,000	3,000
19	10-4420.5016	VEHICLE, FUEL & OIL	118,089	107,419	105,500	46,821	93,658	105,500	-	100,000	(5,500)	105,500	105,500	105,500	105,500
20	10-4420.5017	VEHICLE MAINTENANCE	52,987	60,327	60,000	32,767	53,788	60,000	-	60,000	-	60,000	60,000	60,000	60,000
21	10-4420.5020	ELECTRIC AND GAS	31,098	29,325	33,000	12,225	25,559	33,000	-	33,000	-	29,000	29,000	29,000	29,000
22	10-4420.5021	TELEPHONE/CABLE	46,269	53,116	52,000	22,671	47,266	52,000	-	58,400	6,400	58,400	58,400	58,400	58,400
23	10-4420.5022	WATER AND SEWER	6,824	5,965	6,500	3,715	5,889	6,500	-	6,500	-	6,500	6,500	6,500	6,500
24	10-4420.5024	IT EQUIP, SOFTWARE & SVCS	37,466	54,814	67,900	36,660	55,517	67,900	-	75,900	8,000	75,900	75,900	75,900	75,900
25	10-4420.5025	NON-CAPITAL TOOLS & EQUIPMENT	13,203	16,832	14,000	4,301	18,305	14,000	-	20,000	6,000	20,000	20,000	20,000	20,000
26	10-4420.5026	MAINT & SERVICE CONTRACTS	19,016	19,931	40,000	14,205	22,792	40,000	-	40,000	-	40,000	40,000	40,000	40,000
27	10-4420.5027	MACHINE/EQUIPMENT REPAIR	3,024	6,147	7,000	1,571	5,564	7,000	-	7,000	-	8,500	8,500	8,500	8,500
28	10-4420.5041	UNIFORMS	24,415	22,762	28,000	18,078	32,140	28,000	-	23,000	(5,000)	23,000	23,000	23,000	23,000
29	10-4420.5044	CLEANING/SANITARY SUPPLY	3,805	5,609	5,000	2,164	5,906	5,000	-	5,000	-	6,000	6,000	6,000	6,000
30	10-4420.5049	MEDICAL AND LAB	5,509	9,220	6,500	3,252	7,921	6,500	-	6,500	-	6,500	6,500	6,500	6,500
31	10-4420.5062	INSURANCE	125,953	143,345	140,100	133,333	147,793	140,100	-	142,902	2,802	145,760	148,675	151,649	154,682
32	10-4420.5063	RENT AND LEASES	1,600	2,380	3,000	1,278	2,504	3,000	-	3,000	-	3,000	3,000	3,000	3,000
33	10-4420.5064	EMPLOYEE TRAINING	12,901	13,552	16,500	10,693	16,577	16,500	-	20,500	4,000	16,500	16,500	16,500	16,500
34	10-4420.5065	PROFESSIONAL SERVICES	5,020	4,995	5,000	-	-	5,000	-	5,000	-	5,000	5,000	5,000	5,000
35	10-4420.5067	CONTRACTED SERVICES	-	5,575	-	180	5,755	180	180	12,000	12,000	12,000	12,000	12,000	12,000
36	10-4420.5079	MISC. & CONTINGENCY EXP	5,355	4,507	7,000	4,314	5,209	7,000	-	9,000	2,000	5,000	5,000	5,000	5,000
37	10-4420.5081	CANINE KENNEL EXPENSES	1,474	2,203	4,700	1,498	2,236	4,700	-	4,700	-	4,700	4,700	4,700	4,700
38		Subtotal POLICE Operating Expense	532,803	586,677	621,700	355,794	569,493	621,880	180	652,402	30,702	650,260	653,175	656,149	659,182
39		% Increase/(Decrease) from Prior Year	12%	10%	31%			0%		5%		0%	0%	0%	0%
40															
41		TOTAL GENERAL FUND POLICE	3,297,335	3,408,781	3,724,142	1,821,466	3,525,774	3,724,322	180	3,981,490	257,348	4,086,678	4,189,440	4,295,206	4,395,382
42		% Increase/(Decrease) from Prior Year	19%	3%	34%			0%		7%		3%	3%	3%	2%
43															

1

CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS

NOTES

2

3

4

5

GENERAL FUND - POLICE

6

SALARIES & WAGES FY26 Budget 2.5% COLA and 3% merit pool for adjustments effective 1/1/2026. Long-term forecasts include an annual 2.5% merit pool.

7

OVERTIME WAGES Approximately 9% of regular pay for officers, 17% for communications specialists.

8

PART-TIME WAGES

9

FICA EXPENSE FICA rate is 7.65%

10

RETIREMENT EXPENSE PORS & SCRS employer contribution rates are 21.24% & 18.56% respectively.

11

GROUP HEALTH INSURANCE Current PEBA rates & dependent elections plus 7% increase on 1/1/26. City of IOP specific experience modifier load factor is 1.000.

12

WORKMEN'S COMPENSATION Based on current SCMIT rates (including an experience modifier) and forecasted salaries.

13

14

15

16

PRINT AND OFFICE SUPPLIES

17

MEMBERSHIP AND DUES

18

MEETINGS AND SEMINARS Includes hosting of a Tri-County Police Chiefs meeting and/or the SC FBI Group

19

VEHICLE, FUEL & OIL FY26 budget based on recent 12 months usage and an estimated \$3.16/gallon cost for marine-grade unleaded and \$3.26/gallon cost for diesel fuel per Cel Oil.

20

VEHICLE MAINTENANCE Increased based on actual

21

ELECTRIC AND GAS Increased based on actual. Includes propane. Split 50/50 with Fire Dept.

22

TELEPHONE/CABLE Incls phone/internet and cost to switch phones to Segra (\$14k), cellular & data cards (\$7k), NCIC line (\$7k) and Charleston County radio fee (\$28k) FY26 added \$2.4K for First Responder

23

WATER AND SEWER

24

IT EQUP, SOFTWARE & SVCS Police timekeeping (5k) hardware repls (18k), Sonitrol alarm (1k), LawTrac software (4k), Adobe (1k), Pace scheduling module (3k), Power DMS for CALEA (2k), online investigations software (4k), NCIC software annual maint (3k), Code Enforcement Tracking software (5k), Sonitrol alarm monitoring (1k), server warranty (1k), Charleston County MDT license (2.7k) & interagency network IPS (3.7k), new IOP Police App (11k) and misc provision (2k), FY26 includes Alastar MEOC software annual (2.5K), Drone upgrade software FY26+ (\$6K)

25

NON-CAPITAL TOOLS & EQUIPMENT Tasers (tasers must be discharged twice/yr to maintain certification) (\$2k), ammunition for shooting range (\$2k), firearm replacements (\$5K) and provision for other small equipment as needed (\$5k). (FY26 added License Plate reader \$6K)

26

MAINT & SERVICE CONTRACTS Incls IOPPD's portion of annual maintenance on Charleston County's MDT (mobile data terminal) system (\$6.5k), elevator maint contract (\$7.5k), janitorial service (\$6k), recurring expenses for pest control, hvac, County stormwater fees and fire protection sys (\$5k) and misc provision as needed (\$15k).

27

MACHINE/EQUIPMENT REPAIR Non-building expense, blowers, sign post digger

28

UNIFORMS Normal replacement of uniforms and new staff.

29

CLEANING/SANITARY SUPPLY Building cleaning supplies

30

MEDICAL AND LAB Increased based on actual and removed the added \$2500 from FY26 added in FY24 to install a Medsafe pharmaceutical dropbox at the PSB.

31

INSURANCE Forecast 2% annual increase each year. Includes 1/2 cost for underground tanks insurance. Includes a \$5k provision for deductibles

32

RENT AND LEASES Police copier. Timeclock rental moved to IT account

33

EMPLOYEE TRAINING Increased based on actual. FY26 + forecast includes \$2,500 field training office tracking system

34

PROFESSIONAL SERVICES Annual CALEA continuation

35

CONTRACTED SERVICES Critter Control Traps for Coyotes (\$6K) and Evidence Hazmat Cleaning (\$6K).

36

MISC. & CONTINGENCY EXP Increased to allow for increased promotional and recruitment efforts (National Night Out and Community Events). FY26 added investigative fees (\$2K).

37

CANINE KENNEL EXPENSES Includes \$2,500 for food, vet appointment, and kennel maintenance supplies for PD K-9 program

38

39

40

41

42

43

	A	B	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	DRAFT	CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS													
2	GL Number	Description	ACTUAL FY23	ACTUAL FY24	BUDGET FY25	YTD As Of 12/31/24 (6 MOS)	Jan-Dec 2024 12 Months	FORECAST FY25	INCREASE/ (DECR) FROM FY25 BUDGET	BUDGET FY26	INCREASE/ (DECREASE) FROM FY25 BUDGET	FORECAST FY27	FORECAST FY28	FORECAST FY29	FORECAST FY30
44	<b>GENERAL FUND BSO WAGES AND FRINGES</b>														
45	10-5710.5002	OVERTIME WAGES	2,522	3,834	1,500	4,421	5,155	4,658	3,158	2,500	1,000	2,500	2,500	2,500	2,500
46	10-5710.5003	PART-TIME WAGES	82,111	90,764	29,480	39,080	59,165	41,984	12,504	49,600	20,120	49,600	49,600	49,600	49,600
47	10-5710.5004	FICA EXPENSE	6,478	7,237	2,370	3,328	4,920	3,403	1,033	3,986	1,616	3,986	3,986	3,986	3,986
50	10-5710.5007	WORKERS COMPENSATION	4,704	3,337	2,343	1,539	2,379	2,343	-	3,941	1,598	4,040	4,141	4,244	4,350
51		<b>Subtotal BSOs</b>	<b>95,816</b>	<b>105,172</b>	<b>35,693</b>	<b>51,292</b>	<b>74,542</b>	<b>52,388</b>	<b>16,695</b>	<b>60,027</b>	<b>24,334</b>	<b>60,125</b>	<b>60,226</b>	<b>60,330</b>	<b>60,436</b>
52		<b>% Increase/(Decrease) from Prior Year</b>	<b>-1%</b>	<b>10%</b>	<b>-63%</b>			<b>47%</b>		<b>68%</b>		<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>
55	<b>CAPITAL PROJECTS FUND</b>														
56	20-4440.5017	VEHICLE MAINTENANCE	-	-	-	-	-	-	-	-	-	-	-	-	-
57	20-4440.5024	IT EQUIP, SOFTWARE & SVCS	-	-	-	28,690	28,690	-	-	-	-	-	-	-	-
58	20-4440.5025	NON-CAPITAL TOOLS & EQUIPMENT	2,755	-	-	-	-	-	-	-	-	-	-	-	-
59	20-4440.5026	MAINT & SERVICE CONTRACTS	12,164	14,389	62,500	637	8,623	62,500	-	92,500	30,000	125,000	125,000	165,000	125,000
61	20-4440.5084	CONSTRUCTION IN PROGRESS	-	-	-	-	-	-	-	-	-	-	-	-	-
62	20-4440.5085	CAPITAL OUTLAY	142,791	62,864	86,250	71,074	67,652	86,250	-	64,000	(22,250)	181,500	258,500	131,500	170,500
63		<b>TOTAL</b>	<b>157,709</b>	<b>77,253</b>	<b>148,750</b>	<b>100,401</b>	<b>104,964</b>	<b>148,750</b>	<b>-</b>	<b>156,500</b>	<b>7,750</b>	<b>306,500</b>	<b>383,500</b>	<b>296,500</b>	<b>295,500</b>
64		<b>% Increase/(Decrease) from Prior Year</b>	<b>69%</b>	<b>-51%</b>	<b>59%</b>					<b>5%</b>		<b>96%</b>	<b>25%</b>	<b>-23%</b>	<b>0%</b>
66	<b>MUNICIPAL ACCOMMODATIONS TAX FUND - POLICE</b>														
67	30-4420.5021	TELEPHONE/CABLE	9,929	13,015	9,000	9,175	14,390	15,002	6,002	15,000	6,000	15,000	15,000	15,000	15,000
68	30-4420.5025	NON-CAPITAL TOOLS & EQUIPMENT	-	-	-	-	-	-	-	-	-	-	-	-	-
69	30-4420.5026	MAINT & SERVICE CONTRACTS	9,762	13,486	14,000	5,365	13,927	14,000	-	14,000	-	14,000	14,000	14,000	14,000
70	30-4420.5065	PROFESSIONAL SERVICES	-	-	-	-	-	-	-	-	-	-	-	-	-
71	30-4420.5067	CONTRACTED SERVICES	14,791	17,388	60,000	21,012	42,896	60,000	-	40,000	(20,000)	40,000	40,000	40,000	40,000
72	30-4420.5084	CONSTRUCTION IN PROGRESS	-	-	-	-	-	-	-	-	-	-	-	-	-
73	30-4420.5085	CAPITAL OUTLAY	49,546	115,067	55,000	46,909	58,296	55,000	-	104,000	49,000	72,600	103,400	52,600	68,200
74		<b>TOTAL</b>	<b>84,027</b>	<b>158,956</b>	<b>138,000</b>	<b>82,461</b>	<b>129,510</b>	<b>144,002</b>	<b>6,002</b>	<b>173,000</b>	<b>35,000</b>	<b>141,600</b>	<b>172,400</b>	<b>121,600</b>	<b>137,200</b>
75		<b>% Increase/(Decrease) from Prior Year</b>	<b>189%</b>	<b>89%</b>	<b>374%</b>			<b>4%</b>		<b>25%</b>		<b>-18%</b>	<b>22%</b>	<b>-29%</b>	<b>13%</b>
77	<b>MUNICIPAL ACCOMMODATIONS TAX FUND - PARKING MANAGEMENT AND FRONT BEACH MAINTENANCE</b>														
78	30-5620.5010	PRINT AND OFFICE SUPPLIES	8,909	11,286	-	1,629	2,763	1,629	1,629	1,700	1,700	1,700	1,700	1,700	1,700
79	30-5620.5011	DEBT SERVICE - PRINCIPAL	-	2,465	-	-	-	-	-	-	-	-	-	-	-
80	30-5620.5013	BANK SERVICE CHARGES	69,192	49,216	-	-	865	-	-	-	-	-	-	-	-
81	30-5620.5020	ELECTRIC AND GAS	41,633	42,445	42,000	17,550	38,914	42,000	-	42,000	-	42,000	42,000	42,000	42,000
82	30-5620.5021	TELEPHONE/CABLE	2,580	1,445	2,000	721	1,448	2,000	-	2,000	-	2,000	2,000	2,000	2,000
83	30-5620.5022	WATER AND SEWER	3,487	2,579	3,500	2,422	3,456	3,500	-	3,500	-	3,500	3,500	3,500	3,500
84	30-5620.5024	IT EQUIP, SOFTWARE & SVCS	14,290	17,363	8,000	11,117	13,567	23,304	15,304	24,000	16,000	24,000	24,000	24,000	24,000
85	30-5620.5025	NON-CAPITAL TOOLS & EQUIPMENT	625	4,842	3,000	1,892	1,985	3,000	-	3,000	-	3,000	3,000	3,000	3,000
86	30-5620.5026	MAINT & SERVICE CONTRACTS	13,845	10,910	28,500	649	11,559	28,500	-	28,500	-	28,500	28,500	28,500	28,500
87	30-5620.5027	MACHINE/EQUIPMENT REPAIR	9,838	11,815	-	-	3,482	-	-	2,000	2,000	2,000	2,000	2,000	2,000
88	30-5620.5041	UNIFORMS	1,052	97	2,000	81	81	2,000	-	2,000	-	2,000	2,000	2,000	2,000



Z	AA
1	<b>CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>
2	NOTES
3	
4	
44	<b>GENERAL FUND BSO WAGES AND FRINGES</b>
45	OVERTIME WAGES
46	PART-TIME WAGES                      Increased PT hourly rate. All BSO and Parking Attendant wages and fringes are covered with transfers in from Tourism Funds. Added addl BSO to cover county park.
47	FICA EXPENSE                              FICA rate is 7.65%
50	WORKERS COMPENSATION              Based on current SCMIT rates (including an experience modifier) and forecasted salaries. The premium rate for BSOs was changed by SCMIT from the police rate to a lower rate.
51	
52	
53	
54	
55	<b>CAPITAL PROJECTS FUND</b>
56	VEHICLE MAINTENANCE
57	IT EQUIP, SOFTWARE & SVCS              Replace/reconfigure Police Dept servers per VC3 recommendation
58	NON-CAPITAL TOOLS & EQUIPMENT
59	MAINT & SERVICE CONTRACTS              Building maintenance contingency to proactively address issues as needed. Equals 1% (FY23-26) or 2% (FY27+) of PSB insured value. PSB costs are split 50% with Fire Department
61	CONSTRUCTION IN PROGRESS
62	CAPITAL OUTLAY                              FY26 incl 1 patrol SUV (\$64K). Forecast periods = 50% of the annual Police Dept capital needs per the 10-yr plan.
63	
64	
65	
66	<b>MUNICIPAL ACCOMMODATIONS TAX</b>
67	TELEPHONE/CABLE                              Comcast service for IOP Connector camera and Marina pier feed. Increased modem speed for pier cameras.
68	NON-CAPITAL TOOLS & EQUIPMENT
69	MAINT & SERVICE CONTRACTS              Covers pooper scooper stations, supplies and repair/replacements as needed by Animal Control.
70	PROFESSIONAL SERVICES
71	CONTRACTED SERVICES                      Provision for Charleston County Sheriff 1 Deputy assistance. Includes additional support cost shared with IOP County Park. Replaced with 2 BSOs.
72	CONSTRUCTION IN PROGRESS
73	CAPITAL OUTLAY                              FY26 includes 1 SUV repl (\$64k) and 16 Computers @ \$2,500 to replace windows 10 PCs 16 units (\$40K). Forecast periods = 20% of the annual Police Dept capital needs per the 10-yr plan.
74	
75	
76	
77	
78	PRINT AND OFFICE SUPPLIES              Municipal PCI parking management outsourced. FY26 -Hurricane re-entry stickers
79	PROFESSIONAL SERVICES                      -
80	BANK SERVICE CHARGES                      Municipal PCI parking management outsourced
81	ELECTRIC AND GAS                              Landscape lighting in Front Beach area
82	TELEPHONE/CABLE                              Internet service for Code enforcement tablets (\$2,000).
83	WATER AND SEWER                              Irrigation
84	IT EQUIP, SOFTWARE & SVCS              NetCertPro mgt of City-wide traffic camera system, incl maint and add 'l cameras at Marina, Breach Inlet and JCLong & Ocean (8k). Forecast based on Veris Maturity Analysis schedule for T2 System SBITA as defined in GASB 96.
85	NON-CAPITAL TOOLS & EQUIPMENT              Provision for surveillance camera replacements if needed (\$3k).
86	MAINT & SERVICE CONTRACTS              Sidewalks (\$5k) parking lot (\$10k), irrig (\$2.5k), lighting (\$2.5k), benches/cans (\$2k), road patch (\$5k), surveille camera maint (\$1.5k).
87	MACHINE/EQUIPMENT REPAIR              18 Kiosks repair and maintenance
88	UNIFORMS    BSO uniforms

	A	B	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	DRAFT	CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS													
2	GL Number	Description	ACTUAL FY23	ACTUAL FY24	BUDGET FY25	YTD As Of 12/31/24 (6 MOS)	Jan-Dec 2024 12 Months	FORECAST FY25	INCREASE/ (DECR) FROM FY25 BUDGET	BUDGET FY26	INCREASE/ (DECREASE) FROM FY25 BUDGET	FORECAST FY27	FORECAST FY28	FORECAST FY29	FORECAST FY30
3															
4															
89	30-5620.5054	STREET SIGNS	7,456	2,077	2,000	1,127	2,845	2,000	-	2,000	-	2,000	2,000	2,000	2,000
90	30-5620.5062	INSURANCE	887	1,236	1,800	1,914	1,914	1,914	114	2,000	200	2,040	2,081	2,122	2,165
91	30-5620.5065	PROFESSIONAL SERVICES	856	4,155	-	395	2,774	395	395	-	-	-	-	-	-
92	30-5620.5067	CONTRACTED SERVICES	16,800	17,800	18,000	4,400	18,800	18,000	-	18,000	-	18,000	18,000	18,000	18,000
93	30-5620.5079	MISC. & CONTINGENCY EXP	7,092	617	1,000	-	281	1,000	-	1,000	-	7,500	7,500	7,500	7,500
94	30-5620.5085	CAPITAL OUTLAY	71,051	-	-	-	-	-	-	-	-	-	-	-	-
95		<b>TOTAL</b>	<b>269,594</b>	<b>180,347</b>	<b>111,800</b>	<b>43,898</b>	<b>104,735</b>	<b>129,242</b>	<b>17,442</b>	<b>131,700</b>	<b>19,900</b>	<b>138,240</b>	<b>138,281</b>	<b>138,322</b>	<b>138,365</b>
96		<b>% Increase/(Decrease) from Prior Year</b>	<b>8%</b>	<b>-33%</b>	<b>-55%</b>			<b>16%</b>		<b>18%</b>		<b>5%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>
97															
98															
99		<b>HOSPITALITY TAX</b>													
100	35-4420.5009	DEBT SERVICE - PRINCIPAL	37,219	38,447	39,715	39,715	39,715	39,715	-	41,025	1,310	42,385	43,783	45,227	46,719
101	35-4420.5011	DEBT SERVICE - INTEREST	12,627	11,399	10,131	10,131	10,131	10,131	-	8,821	(1,310)	7,468	6,070	4,625	3,133
102	35-4420.5024	IT EQUP, SOFTWARE & SVCS	38,126	1,640	15,000	545	(9,912)	15,000	-	15,000	-	15,000	15,000	15,000	15,000
103	35-4420.5025	NON-CAPITAL TOOLS & EQUIPMENT	598	1,021	2,000	171	171	2,000	-	2,000	-	2,000	2,000	2,000	2,000
104	35-4420.5065	PROFESSIONAL SERVICES	-	-	-	-	-	-	-	-	-	-	-	-	-
105	35-4420.5085	CAPITAL OUTLAY	17,491	67,090	88,500	82,704	100,888	88,500	-	85,000	(3,500)	36,300	51,700	26,300	34,100
106		<b>TOTAL</b>	<b>106,061</b>	<b>119,597</b>	<b>155,346</b>	<b>133,266</b>	<b>140,993</b>	<b>155,346</b>	<b>-</b>	<b>151,846</b>	<b>(3,500)</b>	<b>103,153</b>	<b>118,553</b>	<b>93,152</b>	<b>100,953</b>
107		<b>% Increase/(Decrease) from Prior Year</b>	<b>-78%</b>	<b>13%</b>	<b>-68%</b>					<b>-2%</b>		<b>-32%</b>	<b>15%</b>	<b>-21%</b>	<b>8%</b>
108															
109		<b>STATE ACCOMMODATIONS TAX</b>													
110	50-4420.5025	NON-CAPITAL TOOLS & EQUIPMENT	12,555	11,718	25,000	19,759	21,975	25,000	-	25,500	500	7,500	7,500	7,500	7,500
111	50-4420.5026	MAINT & SERVICE CONTRACTS	-	-	-	-	-	-	-	-	-	-	-	-	-
112	50-4420.5065	PROFESSIONAL SERVICES	-	-	-	-	-	-	-	-	-	-	-	-	-
113	50-4420.5084	CONSTRUCTION IN PROGRESS	-	-	-	-	-	-	-	-	-	-	-	-	-
114	50-4420.5085	CAPITAL OUTLAY	67,202	47,084	82,921	73,694	80,120	82,921	-	48,000	(34,921)	72,600	103,400	52,600	68,200
115		<b>TOTAL</b>	<b>79,758</b>	<b>58,802</b>	<b>107,921</b>	<b>93,453</b>	<b>102,095</b>	<b>107,921</b>	<b>-</b>	<b>73,500</b>	<b>(34,421)</b>	<b>80,100</b>	<b>110,900</b>	<b>60,100</b>	<b>75,700</b>
116		<b>% Increase/(Decrease) from Prior Year</b>	<b>-28%</b>	<b>-26%</b>	<b>-2%</b>					<b>-32%</b>		<b>9%</b>	<b>38%</b>	<b>-46%</b>	<b>26%</b>
117															
118		<b>FEDERAL &amp; STATE NARCOTICS</b>													
119	61-4320.5013	BANK SERVICE CHARGES	-	-	-	-	-	-	-	-	-	-	-	-	-
120	61-4320.5025	NON-CAPITAL TOOLS & EQUIPMENT	-	-	-	-	-	-	-	-	-	-	-	-	-
121	61-4320.5041	UNIFORMS	-	-	-	-	-	-	-	-	-	-	-	-	-
122	61-4320.5079	MISC. & CONTINGENCY EXP	-	-	-	-	-	-	-	-	-	-	-	-	-
123	62-4320.5013	BANK SERVICE CHARGES	-	-	-	-	-	-	-	-	-	-	-	-	-
124	62-4320.5025	NON-CAPITAL TOOLS & EQUIPMENT	-	-	-	-	-	-	-	-	-	-	-	-	-
125	62-4320.5041	UNIFORMS	-	-	-	-	-	-	-	-	-	-	-	-	-
126	62-4320.5079	MISC. & CONTINGENCY EXP	-	-	-	-	-	-	-	-	-	-	-	-	-
127		<b>TOTAL</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
128		<b>% Increase/(Decrease) from Prior Year</b>													
129															
130		<b>VICTIMS FUND</b>													
131	64-4420.5010	PRINT AND OFFICE SUPPLIES	91	-	500	-	-	500	-	500	-	500	500	500	500
132	64-4420.5013	BANK SERVICE CHARGES	-	-	-	-	-	-	-	-	-	-	-	-	-

1

CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS

NOTES

2

3

4

89

STREET SIGNS Replace Front Beach parking signs as needed.

90

INSURANCE Property & liability coverage on parking kiosks, lights and fixtures in Front Beach area

91

PROFESSIONAL SERVICES Municipal PCI parking management outsourced

92

CONTRACTED SERVICES Beach recycling collection per contract

93

MISCELLANEOUS Provision for unanticipated costs.

94

CAPITAL OUTLAY T2 System SBITA as defined in GASB 96. FY24 forecast based on Veris Maturity Analysis Schedule

95

96

97

98

99

HOSPITALITY TAX

100

DEBT SERVICE - PRINCIPAL Debt service on Axon body worn and In-car camera system, SBITA as defined in GABD 96.

101

DEBT SERVICE - INTEREST Debt service on Axon body worn and In-car camera system, SBITA as defined in GABD 96.

102

IT EQUIP, SOFTWARE & SVCS Police Use-of-Force and De-escalation training software maintenance and repairs as needed (\$3K) & radios (in-car & walkies flash upgrade)(\$12K)

103

NON-CAPITAL TOOLS & EQUIPMENT Body camera equipment replacements as needed

104

PROFESSIONAL SERVICES

105

CAPITAL OUTLAY FY26 Patrol Pickup Truck (\$67k). Includes LSV for parking services (\$18K). Forecast periods = 10% of the annual Police Dept capital needs per the 10-yr plan.

106

107

108

109

STATE ACCOMMODATIONS TAX

110

NON-CAPITAL TOOLS & EQUIPMENT Body armor as needed (\$7.5k). FY26 includes computer servers per VC3.

111

MAINT & SERVICE CONTRACTS -

112

PROFESSIONAL SERVICES

113

CONSTRUCTION IN PROGRESS

114

CAPITAL OUTLAY FY26 incl a ATV (\$22K), Speed Radar & Trailer (\$20K), 1/2 PSB Gate (\$6K). Forecast periods = 20% of the annual Police Dept capital needs per the 10-yr plan

115

116

117

118

FEDERAL & STATE NARCOTICS

119

BANK SERVICE CHARGES These funds have been closed

120

NON-CAPITAL TOOLS & EQUIPMENT These funds have been closed

121

UNIFORMS These funds have been closed

122

MISCELLANEOUS These funds have been closed

123

BANK SERVICE CHARGES These funds have been closed

124

NON-CAPITAL TOOLS & EQUIPMENT These funds have been closed

125

UNIFORMS These funds have been closed

126

MISCELLANEOUS These funds have been closed

127

128

129

130

VICTIMS FUND

131

PRINT AND OFFICE SUPPLIES

132

BANK SERVICE CHARGES

	A	B	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	<b>DRAFT</b>	<b>CITY OF ISLE OF PALMS - POLICE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>													
2	<b>GL Number</b>	<b>Description</b>	<b>ACTUAL FY23</b>	<b>ACTUAL FY24</b>	<b>BUDGET FY25</b>	<b>YTD As Of 12/31/24 (6 MOS)</b>	<b>Jan-Dec 2024 12 Months</b>	<b>FORECAST FY25</b>	<b>INCREASE/ (DECR) FROM FY25 BUDGET</b>	<b>BUDGET FY26</b>	<b>INCREASE/ (DECREASE) FROM FY25 BUDGET</b>	<b>FORECAST FY27</b>	<b>FORECAST FY28</b>	<b>FORECAST FY29</b>	<b>FORECAST FY30</b>
3															
4															
133	64-4420.5014	MEMBERSHIP AND DUES	60	-	100	-	-	100	-	100	-	100	100	100	100
134	64-4420.5021	TELEPHONE/CABLE	-	-	2,600	-	-	2,600	-	1,500	(1,100)	1,500	1,500	1,500	1,500
135	64-4420.5041	UNIFORMS	-	-	-	-	-	-	-	-	-	-	-	-	-
136	64-4420.5064	EMPLOYEE TRAINING	621	612	1,500	-	462	1,500	-	1,500	-	1,500	1,500	1,500	1,500
137	64-4420.5079	MISC. & CONTINGENCY EXP	7,524	10,275	2,000	9,611	9,611	9,611	7,611	3,000	1,000	3,000	3,000	3,000	3,000
138		<b>TOTAL</b>	<b>8,296</b>	<b>10,886</b>	<b>6,700</b>	<b>9,611</b>	<b>10,073</b>	<b>14,311</b>	<b>7,611</b>	<b>6,600</b>	<b>(100)</b>	<b>6,600</b>	<b>6,600</b>	<b>6,600</b>	<b>6,600</b>
139		<b>% Increase/(Decrease) from Prior Year</b>	<b>-44%</b>	<b>31%</b>	<b>-55%</b>			<b>114%</b>		<b>-1%</b>					
140															
141		<b>GRAND TOTAL POLICE &amp; BSOs</b>	<b>4,098,595</b>	<b>4,119,795</b>	<b>4,428,352</b>	<b>2,335,849</b>	<b>4,192,685</b>	<b>4,476,282</b>	<b>47,930</b>	<b>4,734,663</b>	<b>306,311</b>	<b>4,922,996</b>	<b>5,179,900</b>	<b>5,071,811</b>	<b>5,210,135</b>
142		<b>% Increase/(Decrease) from Prior Year</b>	<b>6%</b>	<b>1%</b>	<b>15%</b>			<b>1%</b>		<b>7%</b>		<b>4%</b>	<b>5%</b>	<b>-2%</b>	<b>3%</b>

	Z	AA
1	CITY OF ISLE OF PALMS - <b>POLICE DEPARTMENT</b> - EXPENDITURE DETAIL - ALL FUNDS	
2	NOTES	
3		
4		
133	MEMBERSHIP AND DUES	
134	TELEPHONE/CABLE	Add phone for 2nd officer
135	UNIFORMS	
136	EMPLOYEE TRAINING	
137	MISCELLANEOUS	Add provision to cover incidental services for victims, such as towing of victim's car. SC Attorney General-return funds over \$25K. FY26 budget is an average of all years funds were returned.
138		
139		
140		
141		
142		

	A	B	C	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	DRAFT	CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS														
2	GL Number	Description	DEPT	ACTUAL FY23	ACTUAL FY24	BUDGET FY25	YTD As Of 12/31/24 (6 MOS)	Jan-Dec 2024 12 Months	FORECAST FY25	INCREASE/ (DECR) FROM FY25 BUDGET	BUDGET FY26	INCREASE/ (DECREASE) FROM FY25 BUDGET	FORECAST FY27	FORECAST FY28	FORECAST FY29	FORECAST FY30
3																
5	GENERAL FUND - FIRE															
6	10-4510.5001	SALARIES & WAGES	FD	2,207,153	2,274,113	2,643,257	1,211,003	2,449,563	2,501,755	(141,502)	2,684,963	41,706	2,760,142	2,837,426	2,916,874	2,998,546
7	10-4510.5002	OVERTIME WAGES	FD	385,677	464,850	442,691	304,562	537,482	598,842	156,151	474,101	31,410	487,376	501,023	515,051	529,473
8	10-4510.5003	PART-TIME WAGES	FD	318	7,728	20,000	-	-	20,000	-	20,000	-	20,000	20,000	20,000	20,000
9	10-4510.5004	FICA EXPENSE	FD	193,752	205,082	237,605	114,240	224,430	237,605	-	243,122	5,517	249,965	256,921	264,072	271,423
10	10-4510.5005	RETIREMENT EXPENSE	FD	505,437	564,762	658,538	305,489	601,432	658,538	-	673,831	15,294	694,021	713,334	733,189	753,599
11	10-4510.5006	GROUP HEALTH INSURANCE	FD	309,291	383,896	490,032	212,110	424,794	490,032	-	479,692	(10,339)	506,075	526,319	547,371	569,266
12	10-4510.5007	WORKERS COMPENSATION	FD	118,669	125,083	149,303	117,109	151,744	149,303	-	152,415	3,112	156,225	160,131	164,134	168,238
13	10-4510.5008	UNEMPLOYMENT COMPENSATION	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
14	Subtotal FIRE Wages & Fringes			3,720,298	4,025,515	4,641,425	2,264,513	4,389,445	4,656,074	14,649	4,728,125	86,700	4,873,805	5,015,154	5,160,691	5,310,545
15	% Increase/(Decrease) from Prior Year			17%	8%	46%					2%	2%	3%	3%	3%	3%
16																
17	10-4520.5009	DEBT SERVICE - PRINCIPAL	FD	3,842	9,411	10,398	-	-	10,398	-	10,648	250	10,998	11,448	11,823	12,173
18	10-4520.5010	PRINT AND OFFICE SUPPLIES	FD	5,996	5,676	6,500	2,246	4,484	6,500	-	6,500	-	6,500	6,500	6,500	6,500
19	10-4520.5011	DEBT SERVICE - INTEREST	FD	78	1,239	653	-	-	653	-	1,075	422	900	725	575	400
20	10-4520.5014	MEMBERSHIP AND DUES	FD	1,442	1,208	2,000	318	1,310	2,000	-	2,000	-	2,300	2,300	2,300	2,300
21	10-4520.5015	MEETINGS AND SEMINARS	FD	1,752	6,338	3,900	2,961	6,274	3,900	-	9,900	6,000	9,900	9,900	9,900	9,900
22	10-4520.5016	VEHICLE, FUEL & OIL	FD	37,154	27,957	31,000	11,394	23,041	31,000	-	28,000	(3,000)	31,000	31,000	31,000	31,000
23	10-4520.5017	VEHICLE MAINTENANCE	FD	75,952	63,827	75,000	37,189	68,043	75,000	-	80,000	5,000	75,000	75,000	75,000	75,000
24	10-4520.5020	ELECTRIC AND GAS	FD	42,654	44,212	46,000	20,534	40,777	46,000	-	46,000	-	46,000	46,000	46,000	46,000
25	10-4520.5021	TELEPHONE/CABLE	FD	60,212	52,518	61,000	25,317	53,631	61,000	-	61,000	-	61,000	61,000	61,000	61,000
26	10-4520.5022	WATER AND SEWER	FD	9,332	11,836	13,000	7,842	13,009	13,000	-	13,000	-	13,000	13,000	13,000	13,000
27	10-4520.5024	IT EQUIP, SOFTWARE & SVCS	FD	47,621	64,376	35,700	27,225	36,191	35,700	-	53,500	17,800	53,500	53,500	53,500	53,500
28	10-4520.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	13,512	9,789	10,000	3,584	11,835	10,000	-	10,000	-	10,000	10,000	10,000	10,000
29	10-4520.5026	MAINT & SERVICE CONTRACTS	FD	39,788	44,043	41,000	21,653	43,042	41,000	-	41,000	-	41,000	41,000	41,000	41,000
30	10-4520.5027	MACHINE/EQUIPMENT REPAIR	FD	12,736	9,800	15,000	10,955	15,442	15,000	-	15,000	-	15,000	15,000	15,000	15,000
31	10-4520.5041	UNIFORMS	FD	23,154	42,548	44,000	18,525	34,449	44,000	-	46,000	2,000	46,000	46,000	46,000	46,000
32	10-4520.5044	CLEANING/SANITARY SUPPLY	FD	9,150	12,448	10,000	5,404	11,362	10,000	-	13,000	3,000	13,000	13,000	13,000	13,000
33	10-4520.5049	MEDICAL AND LAB	FD	26,535	66,692	60,500	29,293	83,394	60,500	-	40,500	(20,000)	40,500	40,500	40,500	40,500
34	10-4520.5062	INSURANCE	FD	153,510	182,435	207,600	178,654	201,258	203,653	(3,947)	207,726	126	211,881	216,118	220,441	224,849
35	10-4520.5063	RENT AND LEASES	FD	1,108	533	2,500	199	474	2,500	-	1,000	(1,500)	1,000	1,000	1,000	1,000
36	10-4520.5064	EMPLOYEE TRAINING	FD	22,682	20,015	26,500	14,587	19,330	28,837	2,337	26,500	-	26,500	26,500	26,500	26,500

	Z	AA
1	<b>CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>	
2	NOTES	
3		
5	<b>GENERAL FUND - FIRE</b>	
6	SALARIES & WAGES	FY26 Budget 2.5% COLA and 3% merit pool for adjustments effective 1/1/2026. Long-term forecasts include an annual 2.5% merit pool.
7	OVERTIME WAGES	Total OT budget is 17% of Regular Pay - 8% of this is scheduled OT, 9% is estimated OT for coverage of vacation & sick time, extra coverage on summer holidays, etc.
8	PART-TIME WAGES	
9	FICA EXPENSE	FICA rate is 7.65%
10	RETIREMENT EXPENSE	PORS & SCRS employer contribution rates are 21.24% & 18.56% respectively.
11	GROUP HEALTH INSURANCE	Current PEBA rates & dependent elections plus 7% increase on 1/1/26. City of IOP specific experience modifier load factor is 1.000.
12	WORKMEN'S COMPENSATION	Based on current SCMIT rates (including an experience modifier) and forecasted salaries. Firefighter rates decreased for calendar year 2023.
13	UNEMPLOYMENT COMPENSATION	
14		
15		
16		
17	DEBT SERVICE - PRINCIPAL	
18	PRINT AND OFFICE SUPPLIES	
19	DEBT SERVICE - INTEREST	
20	MEMBERSHIP AND DUES	Int'l Assoc of Fire Chiefs, Amazon, Costco, Sams, NFPA, SCIAAI, Fire Engineering, EMS Assc, Fire Alarm,
21	MEETINGS AND SEMINARS	Includes \$2,400 for Fire Marshal's attendance at State Fire Marshal Conference and State Arson Conference and added \$6K CPSE Excellence Conference,
22	VEHICLE, FUEL & OIL	FY26 budget based on recent 12 months usage and an estimated \$3.16/gallon cost for marine-grade unleaded and \$3.26/gallon cost for diesel fuel per Cel Oil.
23	VEHICLE MAINTENANCE	Increased based on age of tower 1002 truck scheduled for replacement in FY27,
24	ELECTRIC AND GAS	
25	TELEPHONE/CABLE	Incls phone/internet (\$26k), cellular & data cards (\$8k) and Charleston County radio fee (\$27k)
26	WATER AND SEWER	
27	IT EQUIP, SOFTWARE & SVCS	Incls Fire timekeeping (\$5k) Crewsense(4k), Adobe DC (1k), Chas Co MDT maint contract (3k) and Image Trend records mgt software (5k), Sonitrol alarm (2k), Vector Solutions training software (6k), Vector Solutions Check-it Inventory & Maint software (1.5k), add Vector Solutions scheduling software w/ integration to RMS system (8.6k), First Arriving dashboard software annual subscription (3.6k), ROK Brothers Net Cloud Mobile Proformance Management Software (\$1.8K) and misc provision (1k), GASB 96 Subscription Software (\$11K)
28	NON-CAPITAL TOOLS & EQUIPMENT	Provision for small (<\$5k) equipment as needed.
29	MAINT & SERVICE CONTRACTS	Incls elevator maint (\$6k), bay door maint (\$3k), janitorial service (\$5k), hvac maint (\$5k), recurring expenses for pest control, AED, county stormwater fees, fire suppression foam and fire protection system (\$7k) and misc provision as needed (\$15k).
30	MACHINE/EQUIPMENT REPAIR	FY26 includes \$5k for radio battery replacements,
31	UNIFORMS	Increased to allow for a more professional standard among all employees. Provides for quick dry summer uniforms.,
32	CLEANING/SANITARY SUPPLY	Increased based on actual,
33	MEDICAL AND LAB	Paramedic supplies and continued FY26+ to maintain the paramedic program.
34	INSURANCE	Forecast 2% annual increase each year. Includes 1/2 cost for underground tanks insurance. Includes a \$5k provision for deductibles. FY26 increased to include coverage for another Medical Director Doctor.
35	RENT AND LEASES	Fire Dept copier. Timeclock rental moved to IT account
36	EMPLOYEE TRAINING	Increased to allow for bringing in outside trainers

	A	B	C	M	N	O	P	Q	R	S	T	U	V	W	X	Y	
1	DRAFT	CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS															
2	GL Number	Description	DEPT	ACTUAL FY23	ACTUAL FY24	BUDGET FY25	YTD As Of 12/31/24 (6 MOS)	Jan-Dec 2024 12 Months	FORECAST FY25	INCREASE/ (DECR) FROM FY25 BUDGET	BUDGET FY26	INCREASE/ (DECREASE) FROM FY25 BUDGET	FORECAST FY27	FORECAST FY28	FORECAST FY29	FORECAST FY30	
37	10-4520.5065	PROFESSIONAL SERVICES	FD	21,969	29,621	32,000	13,461	39,670	32,000	-	39,400	7,400	39,400	39,400	39,400	39,400	
38	10-4520.5079	MISC. & CONTINGENCY EXP	FD	6,222	10,268	9,000	6,081	10,297	9,000	-	9,000	-	9,000	9,000	9,000	9,000	
39	10-4520.5080	VOLUNTEER FIRE POINTS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
40	10-4520.5085	CAPITAL OUTLAY		30,994	-	-	-	-	-	-	-	-	-	-	-	-	
41		<b>Subtotal FIRE Operating Expense</b>		<b>647,395</b>	<b>716,789</b>	<b>743,251</b>	<b>437,422</b>	<b>717,312</b>	<b>741,641</b>	<b>(1,610)</b>	<b>760,749</b>	<b>17,498</b>	<b>763,379</b>	<b>767,891</b>	<b>772,439</b>	<b>777,022</b>	
42		<b>% Increase/(Decrease) from Prior Year</b>		<b>23%</b>	<b>11%</b>	<b>41%</b>					<b>2%</b>	<b>2%</b>	<b>0%</b>	<b>1%</b>	<b>1%</b>	<b>1%</b>	
44		<b>TOTAL GENERAL FUND FIRE</b>		<b>4,367,693</b>	<b>4,742,304</b>	<b>5,384,676</b>	<b>2,701,935</b>	<b>5,106,757</b>	<b>5,397,715</b>	<b>13,039</b>	<b>5,488,874</b>	<b>104,198</b>	<b>5,637,183</b>	<b>5,783,045</b>	<b>5,933,130</b>	<b>6,087,567</b>	
45		<b>% Increase/(Decrease) from Prior Year</b>		<b>18%</b>	<b>9%</b>	<b>45%</b>					<b>2%</b>	<b>2%</b>	<b>3%</b>	<b>3%</b>	<b>3%</b>	<b>3%</b>	
46																	
47		<b>CAPITAL PROJECTS</b>															
48	20-4540.5009	DEBT SERVICE - PRINCIPAL	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
49	20-4540.5011	DEBT SERVICE - INTEREST	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
50	20-4540.5017	VEHICLE MAINTENANCE	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
51	20-4540.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	13,078	(151)	-	-	(20,825)	-	-	13,000	13,000	-	13,000	-	13,000	
52	20-4540.5026	MAINT & SERVICE CONTRACTS	FD	34,160	42,616	222,160	73,362	97,805	222,160	-	158,160	(64,000)	286,321	286,321	286,321	286,321	
53	20-4540.5063	RENT AND LEASES	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
54	20-4540.5065	PROFESSIONAL SERVICES	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
55	20-4540.5084	CONSTRUCTION IN PROGRESS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
56	20-4540.5085	CAPITAL OUTLAY	FD	173,862	143,086	56,250	30,587	116,437	56,250	-	20,000	(36,250)	63,000	191,000	87,500	218,000	
57		<b>TOTAL</b>		<b>221,100</b>	<b>185,551</b>	<b>278,410</b>	<b>103,948</b>	<b>193,417</b>	<b>278,410</b>	<b>-</b>	<b>191,160</b>	<b>(87,250)</b>	<b>349,321</b>	<b>490,321</b>	<b>373,821</b>	<b>517,321</b>	
58		<b>% Increase/(Decrease) from Prior Year</b>		<b>-85%</b>	<b>-16%</b>	<b>-82%</b>					<b>-31%</b>	<b>-31%</b>	<b>83%</b>	<b>40%</b>	<b>-24%</b>	<b>38%</b>	
59																	
60		<b>MUNICIPAL ACCOMMODATIONS TAX</b>															
61	30-4520.5009	DEBT SERVICE - PRINCIPAL	FD	81,449	82,752	84,076	84,076	84,076	84,076	-	85,421	1,345	86,788	88,177	213,083	219,765	
62	30-4520.5011	DEBT SERVICE - INTEREST	FD	12,508	11,205	9,881	9,881	9,881	9,881	-	8,536	(1,345)	7,169	5,780	68,119	61,437	
63	30-4520.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	2,807	-	-	-	-	-	-	-	-	-	-	-	-	
64	30-4520.5026	MAINT & SERVICE CONTRACTS	FD	-	525	-	-	-	-	-	-	-	-	-	-	-	
65	30-4520.5084	CONSTRUCTION IN PROGRESS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-	
66	30-4520.5085	CAPITAL OUTLAY	FD	86,730	172,284	183,000	3,717	165,919	183,000	-	161,667	(21,333)	25,200	76,400	35,000	87,200	
67		<b>TOTAL</b>		<b>183,494</b>	<b>266,766</b>	<b>276,957</b>	<b>97,674</b>	<b>259,876</b>	<b>276,957</b>	<b>-</b>	<b>255,624</b>	<b>(21,333)</b>	<b>119,157</b>	<b>170,357</b>	<b>316,202</b>	<b>368,402</b>	
68		<b>% Increase/(Decrease) from Prior Year</b>		<b>-32%</b>	<b>45%</b>	<b>3%</b>					<b>-8%</b>	<b>-8%</b>	<b>-53%</b>	<b>43%</b>	<b>86%</b>	<b>17%</b>	
69																	
70		<b>HOSPITALITY TAX</b>															
71	35-4520.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	25,023	42,015	71,500	17,215	6,054	71,500	-	62,100	(9,400)	62,100	62,100	62,100	62,100	
72	35-4520.5085	CAPITAL OUTLAY	FD	133,859	178,064	126,000	35,880	190,704	126,000	-	157,667	31,667	12,600	38,200	17,500	43,600	
73		<b>TOTAL</b>		<b>158,882</b>	<b>220,078</b>	<b>197,500</b>	<b>53,095</b>	<b>196,758</b>	<b>197,500</b>	<b>-</b>	<b>219,767</b>	<b>22,267</b>	<b>74,700</b>	<b>100,300</b>	<b>79,600</b>	<b>105,700</b>	



	Z	AA
1	<b>CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>	
2	NOTES	
3		
37	PROFESSIONAL SERVICES	Includes annual required testing for aerials and engine pumps (\$6k). Added \$6k to outsource annual firehose testing. Added \$21k for medical control officer req'd by SCDHEC. Added \$6.4K wellness & resiliency services
38	MISC. & CONTINGENCY EXP	Added \$2,000 for fire prevention materials, kids helmets, etc.,
39	VOLUNTEER FIRE POINTS	
40	CAPITAL OUTLAY	GASB 96 Software Subscription SBITA,
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43		
44		
45		
46		
47	<b>CAPITAL PROJECTS</b>	
48	DEBT SERVICE - PRINCIPAL	
49	DEBT SERVICE - INTEREST	
50	VEHICLE MAINTENANCE	
51	NON-CAPITAL TOOLS & EQUIPMENT	Body Armor for Firefighters as needed.
52	MAINT & SERVICE CONTRACTS	Includes provision for facility maintenance at PSB and Station #2. Equals 1% of insured building values for FY26 and 2% for FY27+. FY26 HVAC replacement as needed (\$30k)
53	RENT AND LEASES	Rental of construction/office trailer for use during renovation.
54	PROFESSIONAL SERVICES	
55	CONSTRUCTION IN PROGRESS	
56	CAPITAL OUTLAY	FY26 includes 50% cost of Thermal Imaging Camera (\$20K). Forecast periods = 50% of annual Fire Dept expenses per the 10-year cap plan not including Fire Engine Pumper
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58		
59		
60	<b>MUNICIPAL ACCOMMODATIONS TAX</b>	
61	DEBT SERVICE - PRINCIPAL	Debt service for Fire engine. FY29+includes new purchase for Pumper Truck. ,
62	DEBT SERVICE - INTEREST	Debt service for Fire engine. FY29+includes new purchase for Pumper Truck. ,
63	NON-CAPITAL TOOLS & EQUIPMENT -	
64	MAINT & SERVICE CONTRACTS	
65	CONSTRUCTION IN PROGRESS	
66	CAPITAL OUTLAY	FY26 includes 1/3 of High Water Vehicle (\$121,667), 1/3 High Water Equipment (\$10K), Sea Doo (\$18K) and PPV Fans (\$12K). Forecast periods = 20% of the annual Fire Dept capital needs per the 10-yr plan.
67		
68		
69		
70	<b>HOSPITALITY TAX</b>	
71	NON-CAPITAL TOOLS & EQUIPMENT	Annual provision for bunker gear \$53,100- this covers all personal protective equipment and accounts for new policy of 2 sets of gear for each employees. Provision for hose & appliances \$9,000 to cover requirements for automatic aid.
72	CAPITAL OUTLAY	FY26 includes 1/3 of High Water Vehicle (\$121,667), 1/3 High Water Equipment (\$10K), and ATV (\$26K). Forecast periods = 20% of the annual Fire Dept capital needs per the 10-yr plan.
73		

	A	B	C	M	N	O	P	Q	R	S	T	U	V	W	X	Y
1	<b>DRAFT</b>	<b>CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>														
2	<b>GL Number</b>	<b>Description</b>	<b>DEPT</b>	<b>ACTUAL FY23</b>	<b>ACTUAL FY24</b>	<b>BUDGET FY25</b>	<b>YTD As Of 12/31/24 (6 MOS)</b>	<b>Jan-Dec 2024 12 Months</b>	<b>FORECAST FY25</b>	<b>INCREASE/ (DECR) FROM FY25 BUDGET</b>	<b>BUDGET FY26</b>	<b>INCREASE/ (DECREASE) FROM FY25 BUDGET</b>	<b>FORECAST FY27</b>	<b>FORECAST FY28</b>	<b>FORECAST FY29</b>	<b>FORECAST FY30</b>
74	<b>% Increase/(Decrease) from Prior Year</b>			<b>191%</b>	<b>39%</b>	<b>262%</b>					<b>11%</b>	<b>11%</b>	<b>-66%</b>	<b>34%</b>	<b>-21%</b>	<b>33%</b>
75																
76	<b>FIRE DEPARTMENT 1% FUND</b>															
77	40-4520.5013	BANK SERVICE CHARGES	FD	63	48	70	24	48	70	-	50	(20)	50	50	50	50
78	40-4520.5014	MEMBERSHIP AND DUES	FD	-	-	-	6,867	6,867	6,867	6,867	7,000	7,000	7,000	7,000	7,000	7,000
79	40-4520.5021	TELEPHONE/CABLE	FD	5,680	4,228	6,100	2,404	4,173	6,100	-	4,700	(1,400)	4,700	4,700	4,700	4,700
80	40-4520.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
81	40-4520.5041	UNIFORMS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
82	40-4520.5062	INSURANCE	FD	188,600	218,050	211,200	261,457	273,709	264,160	52,960	269,443	58,243	269,443	269,443	269,443	269,443
83	40-4520.5079	MISC. & CONTINGENCY EXP	FD	3,240	1,891	2,000	50	138	2,000	-	2,000	-	2,000	2,000	2,000	2,000
84	<b>TOTAL</b>			<b>197,584</b>	<b>224,217</b>	<b>219,370</b>	<b>270,802</b>	<b>284,936</b>	<b>279,197</b>	<b>59,827</b>	<b>283,193</b>	<b>63,823</b>	<b>283,193</b>	<b>283,193</b>	<b>283,193</b>	<b>283,193</b>
85	<b>% Increase/(Decrease) from Prior Year</b>			<b>16%</b>	<b>13%</b>	<b>29%</b>					<b>29%</b>	<b>29%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>
86																
87	<b>STATE ACCOMMODATIONS TAX</b>															
88	50-4520.5009	DEBT SERVICE - PRINCIPAL	FD	80,957	82,439	83,947	-	-	83,947	-	85,483	1,536	292,873	303,214	313,955	233,199
89	50-4520.5011	DEBT SERVICE - INTEREST	FD	10,958	9,476	7,967	-	-	7,967	-	6,431	(1,536)	111,117	100,776	90,035	78,876
90	50-4520.5025	NON-CAPITAL TOOLS & EQUIPMENT	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
91	50-4520.5026	MAINT & SERVICE CONTRACTS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
92	50-4520.5084	CONSTRUCTION IN PROGRESS	FD	-	-	-	-	-	-	-	-	-	-	-	-	-
93	50-4520.5085	CAPITAL OUTLAY	FD	44,116	5,570	153,250	24,165	29,735	153,250	-	157,667	4,417	25,200	76,400	35,000	87,200
94	<b>TOTAL</b>			<b>136,031</b>	<b>97,485</b>	<b>245,165</b>	<b>24,165</b>	<b>29,735</b>	<b>245,165</b>	<b>-</b>	<b>249,581</b>	<b>4,416</b>	<b>429,190</b>	<b>480,390</b>	<b>438,990</b>	<b>399,275</b>
95	<b>% Increase/(Decrease) from Prior Year</b>			<b>-34%</b>	<b>-28%</b>	<b>18%</b>					<b>2%</b>	<b>2%</b>	<b>72%</b>	<b>12%</b>	<b>-9%</b>	<b>-9%</b>
96																
97	<b>GRAND TOTAL FIRE</b>			<b>5,264,784</b>	<b>5,736,401</b>	<b>6,602,078</b>	<b>3,251,619</b>	<b>6,071,479</b>	<b>6,674,944</b>	<b>72,866</b>	<b>6,688,200</b>	<b>86,122</b>	<b>6,892,745</b>	<b>7,307,606</b>	<b>7,424,936</b>	<b>7,761,459</b>
98	<b>% Increase/(Decrease) from Prior Year</b>			<b>-11%</b>	<b>9%</b>	<b>12%</b>					<b>1%</b>	<b>1%</b>	<b>3%</b>	<b>6%</b>	<b>2%</b>	<b>5%</b>
99																

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1	<b>CITY OF ISLE OF PALMS - FIRE DEPARTMENT - EXPENDITURE DETAIL - ALL FUNDS</b>	
2	NOTES	
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76	<b>FIRE DEPARTMENT 1% FUND</b>	
77	BANK SERVICE CHARGES	FD1% Fund
78	MEMBERSHIP AND DUES	FD1% Fund
79	TELEPHONE/CABLE	FD1% Fund
80	NON-CAPITAL TOOLS & EQUIPMENT	FD1% Fund
81	UNIFORMS	FD1% Fund
82	INSURANCE	FD1% Fund. This line item includes contributions to the Fireman's Retirement Fund
83	MISCELLANEOUS	FD1% Fund
84		
85		
86		
87	<b>STATE ACCOMMODATIONS TAX</b>	
88	DEBT SERVICE - PRINCIPAL	Debt service for 75' ladder truck. FY27+ includes new purchase for new Ladder Truck.
89	DEBT SERVICE - INTEREST	Debt service for 75' ladder truck. FY27+ includes new purchase for new Ladder Truck.
90	NON-CAPITAL TOOLS & EQUIPMENT	
91	MAINT & SERVICE CONTRACTS	
92	CONSTRUCTION IN PROGRESS	
93	CAPITAL OUTLAY	FY26 includes 1/3 cost of High Water Vehicle (\$121,667) 1/3 cost of High Water Equipment (\$10) 1/2 cost of Thermal Imaging Camera (\$20K) and 1/2 cost of PSB Gate (\$6K). Forecast periods = 20% of the annual Fire Dept capital needs per the 10-yr plan.
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