.

RECEIVED BY PORT EVERGLADES	, DFPT
PORTEYERGIADESFRA	
An application will not be deemed complete and ready for received.	
A separate application must be filed for	each type of franchise applied for.
CHECK ONE STEAMSHIP AGEN	T X STEVEDORE
CARGO HANDLER TUGBOAT & TOW	VING VESSEL BUNKERING
VESSEL OILY WASTE REMOVAL VESSE	EL SANITARY WASTE WATER REMOVAL
MARINE TERMINAL SECURITY	MARINE TERMINAL SECURITY
FIREARMS CARRYING SECURITY PERSONNEL	NON-FIREARMS CARRYING SECURITY PERSONNEL
Note: Applicant is the legal entity applying for the franchis the named franchisee. All information contained in this ap any parent, affiliate, or subsidiary entities.	
Applicant's	
Name Host Terminals, LLC	er, or other legal documentation as applicable, evidencing the
legal formation of the Applicant)	
Applicant's Business Address 150 W Main Street,	Ste 1600, Norfolk, VA 23510 Street City/State/Zip
	address contracts@tparkerh@t.com
Fax #: ( 757-927-2879	0
Fax #: ( 757-9 <u>27-2879</u> Name of the person authorized to bind the Applicant	0
\	
Name of the person authorized to bind the Applicant	0
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan Title Vice President Terminal Operations	(Person's signature must appear on Page 13.)
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan Title Vice President Terminal Operations Business Address 150 W Main Street, Ste 1600, Nor	(Person's signature must appear on Page 13.)
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan         Title Vice President Terminal Operations         Business Address 150 W Main Street, Ste 1600, Nor Number / S	(Person's signature must appear on Page 13.) folk, VA 23510
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan         Title Vice President Terminal Operations         Business Address 150 W Main Street, Ste 1600, Nor Number / S	(Person's signature must appear on Page 13.) folk, VA 23510
Name of the person authorized to bind the Applicant of Name Patrick R. CallahanTitle Vice President Terminal OperationsBusiness Address 150 W Main Street, Ste 1600, Nor Number / SPhone # (757-627-6286Fax #: (757)627-2879Provide the Name and Contact Information of Appli this application are to be directed (if different from the second se	(Person's signature must appear on Page 13.) folk, VA 23510 Greet City/State/Zip c-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about
Name of the person authorized to bind the Applicant of Name Patrick R. CallahanTitle Vice President Terminal OperationsBusiness Address 150 W Main Street, Ste 1600, Nor Number / SPhone # (757-627-6286Fax #: (757)627-2879Provide the Name and Contact Information of Appli	(Person's signature must appear on Page 13.) folk, VA 23510 Greet City/State/Zip c-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about
Name of the person authorized to bind the Applicant of Name Patrick R. CallahanTitle Vice President Terminal OperationsBusiness Address 150 W Main Street, Ste 1600, Nor Number / SNumber / SPhone # (757-627-6286EFax #: (757)627-2879Provide the Name and Contact Information of Appli this application are to be directed (if different from the Representative's Name Keri D. Jenkins Representative's Title Senior Administrator	(Person's signature must appear on Page 13.) folk, VA 23510 Generative City/State/Zip c-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about he person authorized to bind the Applicant):
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan         Title Vice President Terminal Operations         Business Address 150 W Main Street, Ste 1600, Nor Number / S         Phone # (757- <u>627-6286</u> Fax #:         (757)627-2879         Provide the Name and Contact Information of Applititis application are to be directed (if different from the Representative's Name Keri D. Jenkins	(Person's signature must appear on Page 13.) folk, VA 23510 Generative City/State/Zip c-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about he person authorized to bind the Applicant):
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan         Title Vice President Terminal Operations         Business Address 150 W Main Street, Ste 1600, Nor Number / S         Phone # (757-627-6286         E         Fax #: (757)627-2879         Provide the Name and Contact Information of Appliting this application are to be directed (if different from the Representative's Name Keri D. Jenkins         Representative's Title Senior Administrator         Representative's Business Address 150 W Main Street	(Person's signature must appear on Page 13.) folk, VA 23510 Street City/State/Zip C-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about he person authorized to bind the Applicant): et, Ste 1600, Norfolk, VA 23510
Name of the person authorized to bind the Applicant of Name Patrick R. Callahan         Title Vice President Terminal Operations         Business Address 150 W Main Street, Ste 1600, Nor Number / S         Phone # (757-627-6286         Fax #: (757)627-2879         Provide the Name and Contact Information of Appliting this application are to be directed (if different from the Representative's Name Keri D. Jenkins         Representative's Title Senior Administrator         Representative's Business Address 150 W Main Street         Number /	(Person's signature must appear on Page 13.) folk, VA 23510 itreet City/State/Zip C-mail address <u>contracts@tpark@rhost.com</u> cant's Representative to whom questions about he person authorized to bind the Applicant): et, Ste 1600, Norfolk, VA 23510 Street City/State/Zip

1

PLEASE COMPLETE THIS APPLICATION AND LABEL ALL REQUIRED BACKUP DOCUMENTATION TO CLEARLY IDENTIFY THE SECTION OF THE APPLICATION TO WHICH THE DOCUMENTATION APPLIES (I.E...., SECTION A, B, C, etc.).

# Section A

1. List the name(s) of Applicant's officers, including, CEO, COO, CFO, director(s), member(s), partner(s), shareholder(s), principal(s), employee(s), agents, and local representative(s) active in the management of the Applicant.

Officers:

Title See attached	
First Name	Middle Name
Last Name	
Business Street Address	
City, State, Zip Code	
Phone Number ()	Fax Number (
Email Address	
Title	
First Name	Middle Name
Last Name	
Business Street Address	
City, State, Zip Code	
Phone Number ( )	Fax Number ( )
Email Address	<u>a a a a a a a a a a a a a a a a a a a </u>
Title	
	Middle Name
Last Name	
Business Street Address	
City, State, Zip Code	
Phone Number ( )	Fax Number ()
Email Address	
Title	
First Name	Middle Name
Last Name	
Business Street Address	
City, State, Zip Code	
Phone Number ()	Fax Number ()
Email Address	

Attach additional sheets if necessary.

2. RESUMES: Provide a resume for each officer, director, member, partner, shareholder, principal, employee, agent, and local representative(s) active in the management of the Applicant, as listed above.

## Section B

- Place checkmark to describe the Applicant:
   Sole Proprietorship ( ) Corporation ( ) Partnership ( ) Joint Venture (x) Limited Liability Company
- 2. Provide copies of the documents filed at the time the Applicant was formed including Articles of Incorporation (if a corporation); Articles of Organization (if an LLC); or Certificate of Limited Partnership or Limited Liability Limited Partnership (if a partnership). If the Applicant was not formed in the State of Florida, provide a copy of the documents demonstrating that the Applicant is authorized to conduct business in the State of Florida.

## Section C

1. Has there been any change in the ownership of the Applicant within the last five (5) years? (e.g., any transfer of interest to another party)

Yes\_ $\underline{X}$  No\_\_\_ If "Yes," please provide details in the space provided. Attach additional sheets if necessary. See attached

2. Has there been any name change of the Applicant or has the Applicant operated under a different name within the last five (5) years?

Yes  $\underline{X}$  No\_\_\_\_ If "Yes," please provide details in the space provided, including: Prior name(s) and Date of name change(s) filed with the State of Florida's Division of Corporations or other applicable state agency. Attach additional sheets if necessary.

#### See attached

3. Has there been any change in the officers, directors, executives, partners, shareholders, or members of the Applicant within the past five (5) years?

Yes\_X\_No\_\_\_\_ If "Yes," please provide details in the space provided, including: Prior officers, directors, executives, partners, shareholders, members

Name(s)

New officers, directors, executives, partners, shareholders, members Name(s)

Also supply documentation evidencing the changes including resolution or minutes appointing new officers, list of new principals with titles and contact information, and effective date of changes. Attach additional sheets if necessary. See attached

# Section D

Provide copies of all fictitious name registrations filed by the Applicant with the State of Florida's Division of Corporations or other State agencies. If none, indicate "None" None.

### Section E

- Has the Applicant acquired another business entity within the last five (5) years?
   Yes No x If "Yes," please provide the full legal name of any business entity which the Applicant acquired during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application. If none, indicate "None"\_\_\_\_\_.
- 2. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the acquired firm's officers, managers, employees and/or the acquired firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.
- 3. Has the Applicant been acquired by another business entity within the last five (5) years? Yes Nox If "Yes," provide the full legal name of any business entity which acquired the Applicant during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application. If none, indicate "None".
- 4. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the parent firm's officers, managers, employees and/or the parent firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.

## Section F

Provide the Applicant's previous business history, including length of time in the same or similar business activities as planned at Port Everglades. See attached

### Section G

- 1. Provide a list of the Applicant's current managerial employees, including supervisors, superintendents, and forepersons.
- 2. List the previous work history/experience of the Applicant's current managerial employees, including their active involvement in seaports and length of time in the same or similar business activities as planned at Port Everglades.

## Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed). See attached

If none, state "None" \_\_\_\_\_.

Seaport

Number of Years Operating at this Seaport

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Services to this Client

Number of Years Applicant has Provided

et.

#### Section I

1. Provide a description of all past (within the last five (5) years) and pending litigation and legal claims where the Applicant is a named party, whether in the State of Florida or in another jurisdiction, involving allegations that Applicant has violated or otherwise failed to comply with environmental laws, rules, or regulations or committed a public entity crime as defined by Chapter 287, Florida Statutes, or theft-related crime such as fraud, bribery, smuggling, embezzlement or misappropriation of funds or acts of moral turpitude, meaning conduct or acts that tend to degrade persons in society or ridicule public morals.

The description must include all of the following:

a) The case title and docket number

b) The name and location of the court before which it is pending or was heard

c) The identification of all parties to the litigation

d) General nature of all claims being made

If none, indicate "None" None

2. Indicate whether in the last five (5) years the Applicant or an officer, director, executive, partner, or a shareholder, employee or agent who is or was (during the time period in which the illegal conduct or activity took place) active in the management of the Applicant was charged, indicted, found guilty or convicted of illegal conduct or activity (with or without an adjudication of guilt) as a result of a jury verdict, nonjury trial, entry of a plea of guilty or nolo contendere where the illegal conduct or activity (1) is considered to be a public entity crime as defined by Chapter 287, Florida Statutes, as amended from time to time, or (2) is customarily considered to be a white-collar crime or theft-related crime such as fraud, smuggling, bribery, embezzlement, or misappropriation of funds, etc. or (3) results in a felony conviction where the crime is directly related to the business activities for which the franchise is sought.

Yes No x

If you responded "Yes," please provide all of the following information for each indictment, charge, or conviction:

- a) A description of the case style and docket number
- b) The nature of the charge or indictment
- c) Date of the charge or indictment
- d) Location of the court before which the proceeding is pending or was heard
- e) The disposition (e.g., convicted, acquitted, dismissed, etc.)
- f) Any sentence imposed
- g) Any evidence which the County (in its discretion) may determine that the Applicant and/or person found guilty or convicted of illegal conduct or activity has conducted itself, himself or herself in a manner as to warrant the granting or renewal of the franchise.

#### Section J

The Applicant must provide a current certificate(s) of insurance. Franchise insurance requirements are determined by Broward County's Risk Management Division and are contained in the Port Everglades Tariff No. 12 as amended, revised or reissued from time to time. The Port Everglades Tariff is contained in the Broward County Administrative Code, Chapter 42, and is available for inspection on line at: http://www.porteverglades.net/development/tariff. See attached

#### Section K

- 1. The Applicant must provide its most recent audited or reviewed financial statements prepared in accordance with generally accepted accounting principles, or other documents and information which demonstrate the Applicant's creditworthiness, financial responsibility, and resources, which the Port will consider in evaluating the Applicant's financial responsibility. See attached
- Has the Applicant or entity acquired by Applicant (discussed in Section E herein) sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law filed by or against it within the last five (5) year period?
   Yes No x

 $105 100 \chi$ 

If "Yes," please provide the following information for each bankruptcy or insolvency proceeding:

a) Date petition was filed or relief sought

b) Title of case and docket number

c) Name and address of court or agency

- d) Nature of judgment or relief
- e) Date entered
- Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for the business or property of the Applicant? Yes No x

If "Yes," please provide the following information for each appointment:

a) Name of person appointed

b) Date appointed

c) Name and address of court

d) Reason for appointment

4. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for any entity, business, or property acquired by the Applicant?

Yes No x

If "Yes," please provide the following information for each appointment:

a) Name of person appointed

b) Date appointed

c) Name and address of court

d) Reason for appointment

## Section L

List four (4) credit references for the Applicant	, one of which must be a bank. Use this format:
Name of Reference	Nature of Business
Contact Name	Title
Legal Business Street Address	
City, State, Zip Code	
Phone Number ()	
(Provide on a separate sheet.)	

7

#### Section M

- 1. Security: Pursuant to Port Everglades Tariff 12, Item 960, all Franchisees are required to furnish an Indemnity and Payment Bond or Irrevocable Letter of Credit drawn on a U.S. bank in a format and an amount not less than \$20,000 as required by Broward County Port Everglades Department. See attached
- 2. Has the Applicant been denied a bond or letter of credit within the past five (5) years?

Yes\_\_\_ No x

If "Yes," please provide a summary explanation in the space provided of why the Applicant was denied. Use additional sheets if necessary.

## Section N

1. Provide a list and description of all equipment currently owned and/or leased by the Applicant and intended to be used by the Applicant for the type of service(s) intended to be performed at Port Everglades including the age, type of equipment and model number.

See attached

- 2. Identify the type of fuel used for each piece of equipment. See attached
- 3. Indicate which equipment, if any, is to be domiciled at Port Everglades. See attached
- 4. Will all equipment operators be employees of the Applicant, on the payroll of the Applicant, with wages, taxes, benefits, and insurance paid by the Applicant?

Yes x No

If "No," please explain in the space provided who will operate the equipment and pay wages, taxes, benefits, and insurance, if the franchise is granted. Use additional sheets if necessary. N/A

# Section O

Provide a copy of the Applicant's current Broward County Business Tax Receipt (formerly Occupational License). See attached

#### Section P

- Section P See attached 1. Provide a copy of Applicant's safety program.
- 2. Provide a copy of Applicant's substance abuse policy.
- 3. Provide a copy of Applicant's employee job training program/policy.
- 4. Provide information regarding frequency of training.
- 5. Include equipment operator certificates, if any.

#### Section Q

- 1. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from any federal, state, or local environmental regulatory agencies?
  - Yes X No

- 2. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or civil penalties from the U.S. Coast Guard? Yes x No
- 3. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from the Occupational Safety and Health Administration?

Yes x No

If you responded "Yes" to any of this section's questions 1, 2, or 3 above, please provide a detailed summary for each question containing the following information:

- a) Name and address of the agency issuing the citation or notice
- b) Date of the notice
- c) Nature of the violation
- d) Copies of the infraction notice(s) from the agency
- e) Disposition of case
- f) Amount of fines, if any
- g) Corrective action taken

Attach copies of all citations, notices of violations, warning notices, civil penalties and fines issued by local, state, and federal regulatory agencies, all related correspondence, and proof of payment of fines.

4. Provide a statement (and/or documentation) which describes the Applicant's commitment to environmental protection, environmental maintenance, and environmental enhancement in the See attached Port.

#### Section R

Provide written evidence of Applicant's ability to promote and develop growth in the business activities, projects or facilities of Port Everglades through its provision of the services (i.e., stevedore, cargo handler or steamship agent) it seeks to perform at Port Everglades. For first-time applicants (stevedore, cargo handler and steamship agent), the written evidence must demonstrate Applicant's ability to attract and retain new business such that, Broward County may determine in its discretion that the franchise is in the best interests of the operation and promotion of the port and harbor facilities. The term "new business" is defined in Chapter 32, Part II of the Broward County Administrative Code as may be amended from time to time. See attached

If you have checked an Applicant box for VESSEL BUNKERING, VESSEL OILY WASTE REMOVAL, VESSEL SANITARY WASTE WATER REMOVAL, OR MARINE TERMINAL SECURITY, the following additional information is required:

# VESSEL BUNKERING

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the applicant's operations manual approved by the U.S. Coast Guard.

Section V- A copy of the applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

**Section W-** A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

**Section Z-** An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

# VESSEL OILY WASTE REMOVAL

Section S - Certificate of Adequacy in compliance with the Directives of MARPOL 73/75 and 33 CFR 158, if applicable.

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the Applicant's operations manual approved by the U.S. Coast Guard.

**Section U- A** Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

**Section V-** A copy of the Applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

**Section W-** A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

Section X- A Used Oil Collector, Transporter, and Recycler Certificate from the Florida Dept. of Environmental Protection.

Section Y- An Identification Certificate from the U.S. Environmental Protection Agency.

**Section Z-** An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the Applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

### VESSEL SANITARY WASTE WATER REMOVAL

Section U- A Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

Section Z1- A copy of the Applicant's operations manual.

Section Z2- A Septage Receiving Facility Waste Hauler Discharge Permit from the Broward County Water and Wastewater Services Operations Division.

# MARINE TERMINAL SECURITY

Section N1- A list of all metal detection devices, walk-through and hand held, as well as all luggage and carryon x-ray machines owned or leased, to be used or domiciled at Port Everglades. Listing must include brand name and model.

Section N2- A copy of all manufacturers recommended service intervals and name of

company contracted to provide such services on all aforementioned equipment.

Section N3- A description of current method employed to assure all equipment is properly calibrated and functioning.

Section N4- current training requirements and training syllabus for employees operating x-ray equipment. Highlight emphasis on weapon and contraband identification.

Include equipment operator certificates, if any.

Section O1- Provide copies of all local, state and federal licenses, including:

a. A copy of the Applicant's State of Florida Business License.

**b.** A copy of security agency's Manager's "M" or "MB" License and a copy of the security agency's "B" or "BB" License issued by the Florida Department of Agriculture and Consumer Services.

Section P3-SECURITY GUARDS / SUPERVISORS

**a.** Provide Applicant's background requirements, education, training etc., for personnel hired as security guards.

b. Provide historic annual turnover ratio for security guards.

**c.** Provide a copy of Applicant's job training program/policy including a copy of training curriculum and copies of all manuals and take-home materials made available to security guards. Include information regarding frequency of training.

**d.** Provide background requirements, experience, licensing and any and all advanced training provided to supervisory personnel.

**e.** Provide present policy for individual communication devices either required of security guards or supplied by the employer.

**f.** Provide procurement criteria and source as well as Applicant's certification requirements for K-9 workforce.

**g.** Provide information on the number of security guards / supervisors currently employed or expected to be employed to provide security services at Port Everglades.

Supervisors	
Class D Guards	
Class G Guards	
K-9 Handlers	

### Port Everglades Tariff 12

References to the Port Everglades Tariff 12 as amended or reissued: http://www.porteverglades.net/development/tariff

#### **Application Fees**

The following fees have been established for franchised businesses at Port Everglades. Initial processing fees are nonrefundable. A franchise is required for each category of business.

Stevedore

Initial processing fee, assignment fee, or reinstatement fee \$ 11,000.00 Annual Fee 4,000.00 S Cargo Handler Initial processing fee, assignment fee, or reinstatement fee \$ 11,000.00 Annual Fee 4,000.00 S Steamship Agent Initial processing fee, assignment fee, or reinstatement fee \$ 4,000.00 Annual Fee 2,250.00 Ś Tugboat and Towing Initial processing fee, assignment fee, or reinstatement fee \$ 26,000.00 Annual Fee By Contract Vessel Bunkering, Vessel Oily Waste Removal, Vessel Sanitary Waste Water Removal Initial processing fee, assignment fee, or reinstatement fee \$ 4,000.00 Annual Fee \$ 2,250.00

For first-time franchise Applicants, both the initial application fee and the annual fee must be submitted at time of application. Thereafter, annual franchise fees are due and payable each year on the franchise anniversary date, which is defined as the effective date of the franchise.

#### Note: Check(s) should be made payable to:

BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS and be mailed with this application to: Port Everglades Business Administration Division 1850 Eller Drive, Fort Lauderdale, FL 33316

#### **Required Public Hearing**

Staff review of this application will not commence until such time as all of the above requested information and documentation has been provided and the franchise application has been determined by staff to be complete. All of the above requested information and Sections are required to be completed prior to the scheduling of the public hearing. Staff will request that the Broward County Board of County Commissioners set a public hearing to consider the franchise application and hear comments from the public. The Applicant will be notified of the Public Hearing date and must plan to attend the Public Hearing.

By signing and submitting this application, Applicant certifies that all information provided in this application is true and correct. Applicant understands that providing false or misleading information on this application may result in the franchise application being denied, or in instances of renewal, a franchise revoked. Applicant hereby waives any and all claims for any damages resulting to the Applicant from any disclosure or publication in any manner of any material or information acquired by Broward County during the franchise application process or during any inquiries, investigations, or public hearings.

Applicant further understands that if there are any changes to the information provided herein (subsequent to this application submission) or to its officers, directors, senior management personnel, or business operation as stated in this application, Applicant agrees to provide such updated information to the Port Everglades Department of Broward County, including the furnishing of the names, addresses (and other information as required above) with respect to persons becoming associated with Applicant after its franchise application is submitted, and any other required documentation requested by Port Everglades Department staff as relating to the changes in the business operation. This information must be submitted within ten (10) calendar days from the date of any change made by the Applicant.

Applicant certifies that all workers performing functions for Applicant who are subject to the Longshore and Harbor Workers' Act are covered by Longshore & Harbor Workers' Act, Jones Act Insurance, as required by federal law.

This application and all related records are subject to Chapter 119, F.S., the Florida Public Records Act.

By its execution of this application, Applicant acknowledges that it has read and understands the rules, regulations, terms and conditions of the franchise it is applying for as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended, and agrees, should the franchise be granted by Broward County, to be legally bound and governed by all such rules, regulations, terms and conditions of the franchise as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended.

The individual executing this application on behalf of the Applicant, personally warrants that s/he has the full legal authority to execute this application and legally bind the Applicant.

Signature of Applicant's Authorized Representative	Patrick & Call	Date Signed -7-20
Signature name and title - typed or prin	ted (Detrick D. Cellebor	
	Ratrick R. Callanar	n, VP Terminal Operations
Witness Signature (*Required*) Witness name-typed or printed	i D Foucins	
Witness Signature (*Required*)	m	
Witness name-typed or printed	nostine Moder	
If a franchise is granted, all official not	ices/correspondence should b	be sent to:

Name Keri D. Jenkins

Title Senior Administrator

Address \_\_\_\_\_\_ 150 W Main Street, Ste 1600, Norfolk, WAn2\$510) 757-627-6286



# **STEVEDORE FRANCHISE**

**PORT EVERGLADES FRANCHISE APPLICATION** 

January 17, 2020

# **SECTION A1**

# Host Terminals, LLC

# **OFFICERS:**

<i>G. Adam Anderson</i> 150 West Main Street, Suite 16 Phone Number: Fax Number: Email Address:	<i>Board Manager, President &amp; CEO</i> 00, Norfolk, VA 23510 757-627-6286 757-627-2879 adam.anderson@tparkerhost.com
Andrew J. Caplan	Board Manager, Chief Operating Officer
150 West Main Street, Suite 16	00, Norfolk, VA 23510
Phone Number:	757-627-6286
Fax Number:	757-627-2879
Email Address:	andrew.caplan@tparkerhost.com
<i>Cornelis (Cees) van de Mortel</i> 150 West Main Street, Suite 160 Phone Number: Fax Number: Email Address:	00, Norfolk, VA 23510 757-627-6286 757-627-2879 cees.vandemortel@tparkerhost.com
Patrick R. Callahan	Vice President, Terminal Operations
150 West Main Street, Suite 16	00, Norfolk, VA 23510
Phone Number:	757-627-6286
Fax Number:	757-627-2879
Email Address:	patrick.callahan@hostterminals.com

See Section G for list of Management

# **SECTION A2 – Resumes**



# ADAM ANDERSON President & CEO



Adam Anderson joined the company as a boarding agent in 1998, where he gained hands-on waterfront experience, and quickly became an influential part of business development for the company. By the age of 24, he developed and negotiated Host's first terminal operation contract.

During his first 13 years with the company, he had many jobs including truck loader, stevedore, terminal manager, business development manager, marketing, and regional manager. When he became Executive Vice President, he was able to take his first-hand knowledge developed on the docks and grow Host's top and bottom lines by more than 600% in eight years.

In 2011, he was elected to his current role of Chairman and CEO. In this position, he is responsible for setting the vision for the Host company and leading our team through rapid scalable growth across all of our platforms.

He currently sits on several maritime board associations and has become a recognized industry expert who shares his wealth of knowledge within the maritime industry through conferences, forums, and events.

# HOST

# ANDREW CAPLAN Partner & COO



Andrew Caplan joined Host in 2018 as Chief Operating Officer, overseeing all commercial activity and helping the company drive sustainable growth.

Prior to joining, he served on the advisory board for Host Terminals, mentoring the board through many changes and decisions.

Andrew has over 25 years of experience in bulk cargo trading. He most recently worked for Glencore International AG, in Baar, Switzerland, where he was the sole director of the Aluminum Division and member of Glencore's Management Committee, responsible for overseeing both the global marketing business as well as the industrial assets, including strategy, operations, and contract administration.

Andrew holds a bachelor's in Business Administration from Washington University's John M. Olin School of Business.

# HOST





In the fall of 2012, Cees van de Mortel joined Host in Norfolk as Chief Operating Officer, overseeing all aspects of the firm's operations. In 2016, he moved to our commercial team and now serves as our Senior Commercial Director. Cees' background in operations, commercial development, and management makes him uniquely suited to provide skilled and diversified services to Host clients.

Before joining Host, Cees spent 12 years with Kinder Morgan Terminals, most recently as Commercial Director, where he was responsible for the commercial activities for marine terminals in the Mid-Atlantic and Southeast regions, for sales and marketing of all coal and fertilizer movements nationwide, and for intermodal and packaging operations. Prior to Kinder Morgan, he was employed with the Dutch transportation and terminal company Vopak. There, he oversaw operations at the Elizabeth River Terminals and Marine Port Terminals, Inc., handling general cargo and dry-bulk commodities.

Cees was born in the Netherlands and graduated with a bachelor's in mechanical engineering and master's in business administration

from the Technical University of Delft in the Netherlands. He is currently serving as a director of the Virginia Maritime Association and regularly speaks at industry events and conferences.

# HOST

# PATRICK CALLAHAN Vice President of Terminal Operations



Patrick Callahan joined Host in 2015 as the Vice President of Terminal Operations. He plays an integral role in the continual improvement of Host's safety program and the sustained growth of our terminal operations.

Before joining Host, Patrick spent 14 years with the Maersk Group, where he held several senior positions in Marine Terminal and Vessel Operations.

He is a graduate of James Madison University and Maine Maritime Academy.

# **SECTION B2** – Articles of Organization and State of Florida Authorization

# ARTICLES OF ORGANIZATION OF HOST TERMINALS, LLC

The undersigned, pursuant to Title 13.1, Chapter 12, Article 14 of the Code of Virginia, states as follows:

I. <u>Name</u>. The name of the limited liability company is Host Terminals, LLC (the "Company").

2. <u>Initial Registered Office and Registered Agent</u>. The Company's initial registered office address, which is identical to the business office of the registered agent, is 4701 Cox Road, Suite 285, Glen Allen, Virginia 23060. The registered office address is located in the County of Henrico. The name of the initial registered agent is C T Corporation System. The registered agent is a foreign corporation authorized to transact business in the Commonwealth of Virginia.

3. <u>Principal Office</u>. The Company's principal office address is: 150 W. Main Street, Suite 1600, Norfolk, Virginia 23510.

The undersigned has executed these Articles of Organization as of the  $20^{th}$  day of December, 2017.

id By:

G. Adam Anderson, Organizer

Detail by Entity Name

DIVISION OF CORPORATIONS



Department of State / Division of Corporations / Search Records / Detail By Document Number /

# **Detail by Entity Name**

Foreign Limited Liability Company HOST TERMINALS, LLC

**Filing Information** 

 Document Number
 M1800003837

 FEI/EIN Number
 54-1997373

 Date Filed
 04/19/2018

 State
 VA

 Status
 ACTIVE

 Principal Address
 150 Main St

Ste 1600 Norfolk, VA 23510

Changed: 01/16/2020

<u>Mailing Address</u> 150 Main St

Ste 1600 Norfolk, VA 23510

Changed: 01/16/2020

Registered Agent Name & Address C T CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 Authorized Person(s) Detail

Name & Address

Title member

Anderson, Garrett Adam 150 Main St Ste 1600 Norfolk, VA 23510

Title CEO, President

Anderson, Garrett Adam 150 Main St 1/16/2020

Detail by Entity Name

Ste 1600 Norfolk, VA 23510

## Title Vice President of Terminal Operations

Callahan, Patrick R. 150 Main St Ste 1600 Norfolk, VA 23510

Title COO

Caplan, Andrew J. 150 Main St Ste 1600 Norfolk, VA 23510

Title Chief Commercial Officer

VandeMortel, Cees 150 Main St Ste 1600 Norfolk, VA 23510

#### Annual Reports

Report Year	Filed Date
2019	04/26/2019
2020	01/16/2020

#### **Document Images**

01/16/2020 ANNUAL REPORT	View image in PDF format
04/26/2019 ANNUAL REPORT	View image in PDF format
04/19/2018 Foreign Limited	View image in PDF format

Florida Department of State, Division of Corporations

# Commonwealth & Hirginia



# State Corporation Commission

# **CERTIFICATE OF FACT**

1 Certify the Following from the Records of the Commission:

That Host Terminals, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the limited liability company was formed on December 22, 2017; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

January 6, 2020

A. Keck

Joel H. Peck, Clerk of the Commission

CERTIFICATE NUMBER : 2020010613973924

# **SECTION C1 – Change in ownership of the Applicant within the past 5 years:**

T. Parker Host, Incorporated owned Host Terminals from its formation in Virginia on July 13, 2000.

In the restructuring that closed at the end of 2017, among other things, T. Parker Host, Incorporated contributed substantially all its assets to a newly formed entity named TP Host, LLC (DBA T. Parker Host). Key employees remained the same.

On October 4, 2018, T. Parker Host, Incorporated changed its name to CHT Holdings, Inc.



# **SECTION C2** – Change in name of the Applicant within the past 5 years:

On December 22, 2017, Host Terminals, Inc. converted to a Limited Liability Company. A copy of the documents from the State Corporation Commission are attached.

1712080149

#### COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

AT RICHMOND, DECEMBER 21, 2017

The State Corporation Commission has found the accompanying articles of entity conversion submitted on behalf of

Host Terminals, Inc.

S721381 - 4

to comply with the requirements of law and confirms payment of all required fees. Therefore, it is ORDERED that this

# CERTIFICATE OF ENTITY CONVERSION

be issued and admitted to record with the articles of entity conversion and articles of organization in the Office of the Clerk of the Commission, effective December 22, 2017.

When the certificate becomes effective, Host Terminals, Inc. is deemed to be a limited liability company organized under the laws of this Commonwealth with the name

Host Terminals, LLC

The limited liability company is granted the authority conferred on it by law in accordance with its articles of organization, subject to the conditions and restrictions imposed by law.

STATE CORPORATION COMMISSION

By

with W durann

Judith Williams Jagdmann Commissioner

CNVRLACT CIS0368 17-12-21-1100

# SECTION C3 – Change in officers, directors, executives, partners, shareholders, or members of the Applicant within the past 5 years:

Prior Officers:

G. Adam Anderson, President & CEOCees van de Mortel, Vice President & CCOPatrick R. Callahan, Vice President Terminal OperationsJ. Philip Tomlinson, Vice President Business Development

On December 22, 2017, when Host Terminals converted to an LLC, Andrew J. Caplan was added as the Chief Operating Officer, and Debra A. Drake was added as Executive Vice President. Ms. Drake has since left the company, leaving the officers as listed in Section A1, and restated below. Documentation evidencing change attached.

G. Adam Anderson, President & CEO Andrew J. Caplan, Chief Operating Officer Cees van de Mortel, Chief Commercial Officer Patrick R. Callahan, Vice President Terminal Operations

# WRITTEN CONSENT OF THE SOLE MEMBER OF HOST TERMINALS, LLC

## December 22, 2017

The undersigned, being the sole member (the "<u>Member</u>") of Host Terminals, LLC, a Virginia limited liability company ("<u>Company</u>"), hereby consents to and adopts the following resolutions and actions:

#### **REMOVAL AND APPOINTMENT OF OFFICERS**

**RESOLVED**, that, effective immediately, the Member hereby accepts the resignations of, or, if no such resignation has been tendered, removes, all current officers of the Company from their offices with the Company;

**RESOLVED**, that, effective immediately following the resignation or removal of the officers of the Company as described in the preceding resolution, each of the following named persons is hereby appointed to the office set forth opposite his or her name to hold office until his or her death, resignation, or removal, or until his or her successor is duly appointed and qualified:

Name	Office
G. Adam Anderson	President and Chief Executive Officer
Andrew J. Caplan	Chief Operating Officer
Debra A. Drake	Executive Vice President
Cornelis (Cees) van de Mortel	Chief Commercial Officer
Patrick R. Callahan	Vice President, Operations

IN WITNESS WHEREOF, the undersigned has executed this Consent of the Sole Member as of the date first set forth above.

## SOLE MEMBER:

#### T. PARKER HOST, INCORPORATED

1alm By:

Name: G. Adam Anderson Title: President

# **SECTION F – Previous business history**

Host Terminals has operated successfully as a stevedore and marine terminal operator since 2000. Both the company and its management have years of experience in stevedoring and handling all types of cargo. Host Terminals currently has dedicated operations in Fort Lauderdale, Baltimore, Baton Rouge, Avondale, Davant, Philadelphia, Chesapeake, and Richmond.

# SECTION G1 and G2 – Managerial Employees, including supervisors, superintendents and forepersons.

G. Adam Anderson President & CEO	Been in the maritime industry since 1998
Andrew J. Caplan Chief Operating Officer	Been in the maritime industry since 1993
Cornelis (Cees) van de Mortel Chief Commercial Officer & Senio	
Patrick R. Callahan Vice President Terminal Operations	Been in the maritime industry since 1998
Chris Holt Director of Environmental Health a	Been in the maritime industry since 1999 nd Safety
Godfrey Wynter Operations Manager	Been in the maritime industry since 1993
Chris Perez Operations Manager	Been in the maritime industry since 2012

# SEAPORT: **PORT EVERGLADES, FL**

# NUMBER OF YEARS AT THIS SEAPORT: 7.5

CLIENT NAME	NUMBER OF YEARS APPLICANT HAS PROVIDED SERVICES TO THIS CLIENT
King Ocean Services, Ltd.	5.5
Titan	7.5
Cemex	1

Various aggregate customers who supply the Titan and Cemex plants

Various yacht logistics / transportation customers

SEAPORT: DAVANT, LA

NUMBER OF YEARS AT THIS SEAPORT: .5

CLIENT NAME

NUMBER OF YEARS APPLICANT HAS PROVIDED SERVICES TO THIS CLIENT

Oil majors for petcoke exports and various coal companies.

# SEAPORT: BALTIMORE, MD

NUMBER OF YEARS AT THIS SEAPORT: 11.5

CLIENT NAME	NUMBER OF YEARS APPLICANT HAS PROVIDED SERVICES TO THIS CLIENT
ALCOA	11.5
Javelin	2
LafargeHolcim	3.5

Various aluminum importers, both traders and producers

# SEAPORT: BATON ROUGE, LA

# NUMBER OF YEARS AT THIS SEAPORT: 7

NUMBER OF YEARS APPLICANT HAS PROVIDED

CLIENT NAME

DRAX

SERVICES TO THIS CLIENT

7
### **SECTION H - Seaports**

### SEAPORT: PHILADELPHIA, PA

\_\_\_\_\_

NUMBER OF YEARS AT THIS SEAPORT: 7.5

NUMBER OF YEARS APPLICANT HAS PROVIDED

SERVICES TO THIS CLIENT

CLIENT NAME

7.5

ECO-Energy

# **SECTION H - Seaports**

SEAPORT:	RICHMOND, VA	NUMBER OF YEARS AT THIS SEAPORT: 12.5
		NUMBER OF YEARS APPLICANT HAS PROVIDED
CLIENT NAM	IE	SERVICES TO THIS CLIENT
Dominion Virg	ginia Power	12.5

# **SECTION H - Seaports**

SEAPORT:	CHESAPEAKE, VA	NUMBER OF YEARS AT THIS SEAPORT: 20
CLIENT NAM	Е	NUMBER OF YEARS APPLICANT HAS PROVIDED SERVICES TO THIS CLIENT
Perdue Seagate		8.5 3

# **SECTION J – Certificate of Insurance**

ACORD <sup>®</sup> C	CERTIFICATE OF LIABILITY INSURANCE				DATE (MM/DD/Y 01/10/2020	YYY)
THIS CERTIFICATE IS ISSUED AS A CERTIFICATE DOES NOT AFFIRMA BELOW. THIS CERTIFICATE OF IN REPRESENTATIVE OR PRODUCER, A	TIVELY OR NEGATIVELY AMEN SURANCE DOES NOT CONSTIT AND THE CERTIFICATE HOLDER.	D, EXTEND OR ALT	ER THE CO	VERAGE AFFORDED E	BY THE POLIC (S), AUTHORI	CIES IZED
IMPORTANT: If the certificate holder If SUBROGATION IS WAIVED, subject this certificate does not confer rights	t to the terms and conditions of	the policy, certain p	olicies may			
CODUCER	to the certificate holder in fied of	CONTACT NAME:	<u>s).</u>	·····		
MARSH USA INC		PHONE		FAX		
1050 CONNECTICUT AVENUE, SUITE 700 WASHINGTON, DC 20036-5386		(A/C, No, Ext):		(A/C, No):		
		ADDRESS:				
121940219-TPHos-GAWUS-20-					23752	IC #
JRED		INSURER A : Ascot Insu		2	29424	<u> </u>
lost Terminals LLC		INSURER B : Hartford C		Company	20424	
/o TP Host LLC 50 W Main Street		INSURER C : SEE ATTA			11991	
lorfolk, VA 23510-3400		INSURER D : National C			3190735	
		INSURER E : Signal Mut	ual indemnity Ass		5150705	
VERAGES CEI	RTIFICATE NUMBER:	CLE-006480228-13	<u></u>	REVISION NUMBER: 1	3	
HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	S OF INSURANCE LISTED BELOW H REQUIREMENT, TERM OR CONDITIO PERTAIN, THE INSURANCE AFFOR	HAVE BEEN ISSUED TO ON OF ANY CONTRACT RDED BY THE POLICIE	OR OTHER	ed named above for t document with respe d herein is subject t	HE POLICY PER	THIS
1	ADDLISUBR	POLICY EFF				
TYPE OF INSURANCE	INSD WVD POLICY NUMBER MAPL2010000953-01	01/01/2020	(MM/DD/YYYY) 01/01/2021	LIMIT		,000,000
		0110112020	0110112021	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ '	250,000
CLAIMS-MADE X OCCUR				1	\$	10,000
				MED EXP (Any one person) PERSONAL & ADV INJURY	\$	
GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE		2,000,000
X POLICY PRO- LOC				PRODUCTS - COMP/OP AGG	4	.000.000
OTHER:				PRODUCTS - COMPIOP AGG	\$	,000,000
	10 UEN DE4400	01/01/2020	01/01/2021	COMBINED SINGLE LIMIT	· · · · · · · · · · · · · · · · · · ·	,000,000
				(Ea accident) BODILY INJURY (Per person)	\$	
OWNED SCHEDULED				BODILY INJURY (Per accident)	\$	
AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY				PROPERTY DAMAGE	\$	
AUTOS ONLY AUTOS ONLY				(Per accident) Comp/Coll Deductible	\$ SEE	PAGE 2
X UMBRELLALIAB X OCCUR	See ACORD 101	01/01/2020	01/01/2021	EACH OCCURRENCE	<b>s</b> 9	,000,000
EXCESS LIAB CLAIMS-MAD	_			AGGREGATE		,000,000
X DED RETENTION \$ 1,000,000					\$	
WORKERS COMPENSATION	WCSIG35002801	10/01/2019	10/01/2020	X PER OTH- STATUTE ER		
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$ 1	,000,000
(Mandatory in NH)				E.L. DISEASE - EA EMPLOYEE		,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below		1		E.L. DISEASE - POLICY LIMIT		,000,000
USL&H	46600	10/01/2019	09/30/2020	LIMIT:	10	),000,000
RIPTION OF OPERATIONS / LOCATIONS / VEHIC eased Land Port Everglades, Broward County FL a	nd Leased Warehouse Space of Building 28A, 2	2049, SE 35th Street, Fort Lau	iderdale, FL			
Certificate Holder is included as an Additional Insure the underlying General Liability with respect to Addi	a on a Primary & Non-Contributory basis where ional Insured coverage, subject to policy terms	required by written contract w and conditions.		egai Lizolilly. The Umpreuse Lizolit Journey Manual 10 Much Manual 10		IOWS
		CANCELLATION				
roward County ttn: Port Everglades Department 850 Eller Drive			N DATE THE	ESCRIBED POLICIES BE C EREOF, NOTICE WILL I Y PROVISIONS.		
ort Lauderdale, FL 33316		AUTHORIZED REPRESE of Marsh USA Inc.	NTATIVE			
1		Manashi Mukherjee	-	Manaoni Jane	nenjee	
	<u> </u>	© 19	88-2016 AC	ORD CORPORATION.	All rights rese	ərved.

The ACORD name and logo are registered marks of ACORD

### AGENCY CUSTOMER ID: CN121940219

LOC #: Washington



### ADDITIONAL REMARKS SCHEDULE

Page 2 of 3

AGENCY MARSH USA INC	NAMED INSURED Host Terminals LLC c/o TP Host LLC		
POLICY NUMBER	C/O IP Host LLC 150 W Main Street Norfolk, VA 23510-3400		
CARRIER NAIC COL			
	EFFECTIVE DATE:		
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FOR			
FORM NUMBER: 25 FORM TITLE: Certificate of Liability In	surance		
Auto Liabity Physical Damage:			
Owned: Comp./Coll.: \$2,000/\$2,000			
Hired: Comp./Coll.: \$100/\$1,000			
Excess Auto Policy Number: 00098536-0			
Carrier: James River Insurance Company			
Limit: \$4,000,000 excess of \$1,000,000 primary			
Lead Bumbershoot			
Policy Number: BOUM-A-20-2279			
Carrier: StarNet Insurance Company Limit: (35%)			
Policy Number: MAXS2010000952-01			
Carrier: Ascot Insurance Company Policy Limit: (25%)			
Policy Number: NY20LIAZ014DV01			
Carrier: Navigators Insurance Company			
Limit: (20%)			
Policy Number: NYABQKQX002			
Carrier: Liberty International Underwriters Limit: (20%)			
\$9,000,000 xs Underlying Coverages afforded, included but not limited to Protection Indemnity; Ves	sel Pollution; Product's Liability & Completed Operations; Broad Form		
Contractual Liability; Contingent Transport Liability; Charter's Liability; Marine Operator's Liability; Su			
containment & removal.			
The General Liability Policy and any excess coverage includes a Blanket Additional Insured Endorse when there is a written contract that requires such status, and only with regard to work performed on			
The General Liability policy shall be primary and non-contributory only when required by a written co	ntract or agreement between the Named Insured and the Additional Insured.		
insurance afforded to the Certificate Holder, as an additional insured under any policy, shall not exce between the Named Assured and Certificate Holder/Additional Insured.	ed the coverage and/or limits as set forth by the contract or agreements		
A Waiver of Subrogation shall apply to the General Liability, Workers Compensation and Business A	uto only where required by written contract.		

ACORD 101 (2008/01)

© 2008 ACORD CORPORATION. All rights reserved. The ACORD name and logo are registered marks of ACORD

### AGENCY CUSTOMER ID: CN121940219

LOC #: Washington

# ACORD

### ADDITIONAL REMARKS SCHEDULE

Page <u>3</u> of <u>3</u>

AGENCY MARSH USA INC POLICY NUMBER		NAMED INSURED Host Terminals LLC c/o TP Host LLC	
		150 W Main Street Norfolk, VA 23510-3400	
CARRIER	NAIC CODE		
		EFFECTIVE DATE:	

### ADDITIONAL REMARKS

ACORD 101 (2008/01)

© 2008 ACORD CORPORATION. All rights reserved. The ACORD name and logo are registered marks of ACORD

# **SECTION K – Financial Responsibility**

A copy of our financials was provided to Leah Brasso, Director of Finance, on Thursday, November 21, 2019.

### **SECTION L – Credit References**



DUN & BRADSTREET Number: 82-715-8952 FEIN: 54-1997373

#### **BILLING/CONTACTS**

Host Terminals, LLC 150 West Main St., Suite 1600 Norfolk, VA 23510 Payable Contact:

Accounts Payable contact: Email: <u>HT-AP@hostterminals.com</u>

### **BANK – GENERAL INFO**

TowneBank 109 East Main St., Suite 800 Norfolk, VA 23510 Acct #: 0261054341

### **BANK - CREDIT INQUIRY**

TowneBank 109 East Main St., Suite 800 Norfolk, VA 23510 Accounts Acct #: 0261054341 Jill Paule Tel: 757-628-6340

### TRADE VENDOR REFERENCES

Moran Towing Corporation PO Box 409519 Atlanta, GA 30384 Contact: Susanne Ogle Phone: 203-442-2128 Email: susannec@morantug.com

Pug's Fuel Oil & Home Services 2703 Sparrows Point Road Sparrows Point, MD 21219 Contact: Pam Sandridge Phone: 410-477-3345 Email: psandridge@pugsfueloil.net Kelly Tractor Co. PO Box 13834 Newark, NJ 07188 Contact: Yilda Martinez Phone: 305-9925-9939 Email: yilda martinez@kellytractor.com

People Ready Inc. 1015 A Street Tacoma, WA 98402 Contact: Teri Ward Phone: 985-580-9978 Email: <u>tward@trueblue.com</u>

### **TYPE OF BUSINESS**

Marine cargo handler. In business since 2000.

We request that you only accept orders accompanied by a purchase order number.

**SECTION M – Bond** 

### CONTINUATION CERTIFICATE

#### International Fidelity Insurance Company

, Surety upon

a certain Bond No. 0473369

dated effective June 1, 2018 (MONTH-DAY-YEAR)

on behalf of Host Terminals, LLC (PRINCIPAL)

and in favor of Broward County - Port Everglades Department

(OBLIGEE)

does hereby continue said bond in force for the further period

beginning on June 1, 2019 (MONTH-DAY-YEAR)

and ending on June 1, 2020

(MONTH-DAY-YEAR)

(MONTH-DAY-YEAR)

Amount of bond \$ 40,000

Description of bond Indemnity and Payment Bond

**PROVIDED:** That this continuation certificate does not create a new obligation and is executed upon the express condition and provision that the Surety's liability under said bond and this and all Continuation Certificates issued in connection therewith shall not be cumulative and that the said Surety's aggregate liability under said bond and this and all such Continuation Certificates on account of all defaults committed during the period (regardless of the number of years) said bond had been and shall be in force, shall not in any event exceed the amount of said bond as hereinbefore set forth.

Signed and dated on

January 13, 2020

International Fidelity Insurance Company

By Landy Mr. Chahly Sandy McElhaney

Attorney-in-Fact

Bond # 0473369

### POWER OF ATTORNEY INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

One Newark Center, 20th Floor, Newark, New Jersey 07102-5207 PHONE: (973) 624-7200

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

KATHY L. DELGRECO, RACHEL A. CHAVERIAT, MICHELLE LUTE-HEATHERLY, SANDRA KING, JESSICA FREDERICK, JULIE KARNES, REBECCA J. HOBBS, BONNIE L. RICE, MARIAH SMITH, MARY Y. VOLMAR, ANDREA ALLMAN, JOY M. WILLIAMS, CAROLYN E. WHEELER, VICKI NOBINGER, LORETTA M. JONES, SANDY MCELHANEY, THELMA M. LETT

#### Knoxville, TN

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 10th day of July, 2015

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Senior Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

> IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 31st day of December, 2018



STATE OF NEW JERSEY County of Essex

Kenneth Chapman



Executive Vice President, International Fidelity Insurance Company and Allegheny Casualty Company

On this 31st day of December, 2018 , before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and of ALLEGHENY CASUALTY COMPANY: that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

Shirelle A. Outley a Notary Public of New Jersey My Commission Expires April 4, 2023

#### CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day, January 13, 2020

Irene Martins, Assistant Secretary

#### INDEMNITY AND PAYMENT BOND

### BOND NO. 0473369

### KNOW ALL BY THESE PRESENTS:

That we, <u>Paradise Point Marine, Inc.</u> as INDEMNITOR and <u>International</u> <u>Fidelity Insurance Co.</u> as SURETY, a surety company authorized to do business in the State of Florida, are held and firmly bound unto BROWARD COUNTY, as OBLIGEE, a political subdivision of the State of Florida, in the full sum of <u>Forty Thousand</u> DOLLARS (\$40,000), for the payment of which we bind ourselves, our heirs, successors, assigns and personal representatives for the performance of the obligations hereinafter set forth:

NOW THEREFORE, the condition of this obligation is such that if INDEMNITOR, its heirs, executors, administrators, successors and assigns shall well and truly save harmless and keep indemnified BROWARD COUNTY, its successors and assigns, from and against all loss, costs, expenses, damages, injury, claims, actions, liabilities and demands of every kind (including but not limited to all reasonable attorney's fees to and through appellate, supplemental and bankruptcy proceedings) which arises from, is caused by, or results from or on account of:

(i)

failure of INDEMNITOR to pay to BROWARD COUNTY, when due, any and all tariff or other charges that have accrued at Port Everglades (whether relating to the furnishing of services or materials to INDEMNITOR, its principals, agents, servants or employees at Port Everglades; or, due to injury to property of Port Everglades; or, stemming from the use of Port Everglades facilities by INDEMNITOR, its principals, agents, servants or employees; or, otherwise); or

(ii)

non-compliance by INDEMNITOR, its principals, agents, servants or employees with applicable laws, ordinances, rules and regulations of the federal, state and local governmental units or agencies (including but not limited to the terms and provisions of the BROWARD COUNTY Code of Ordinances, Administrative Code, and all procedures and policies of the Port Everglades Department), as amended from time to time; or

(iii)

any act, omission, negligence or misconduct of INDEMNITOR, its principals, agents, servants or employees in Port Everglades (whether causing injury to persons or otherwise;

then these obligations shall be null and void, otherwise to remain in full force and effect.

AS A FURTHER CONDITION of this obligation that it shall remain in full force and effect until and unless the Surety provides at least ninety (90) days prior written notice to BROWARD COUNTY of its intention to terminate this Bond.

Any notices required herein shall be given in writing and be delivered to: Broward County's Port Everglades Department, Attn: Director of Administration, 1850 Eller Drive, Fort Lauderdale, Florida 33316, with a copy to: Broward County Administrator, Governmental Center, 115 S. Andrews Avenue, Fort Lauderdale, Florida 33301.

IN WITNESS WHEREOF, INDEMNITOR has caused this Bond to be executed by \_, on this <u>lst</u> day of <u>June</u>, 2012, and attested to by its G Adam Anderson Secretary and its corporate seal to be affixed, and the Surety has caused this Bond to be executed on this 1st day of June , 2012, in its name, by its Attorney-in-Fact, duly authorized to do so.

### **INDEMNITOR:**

ATTEST:

Corporate Secretary

Thomas C. Comer Jr

(Print Name of Secretary)

(SEAL)

Company Name: Paradise Point Marine Inc

By:\_

G Adam Anderson

(Print Name of Pres./Vice Pres.)

Title: Vice President (Print)

lst day of June 20 12

SURETY:

lst

Company Name: International Fidelity Insurance (

By: C

Michael E. Moore

Title: Attorney In Fact

day of June

(Print)

2012

Whitehead

### **1**61 (973) **624 7200** POWER OF ATTORNEY INTERNATIONAL FIDELITY INSURANCE COMPANY HOME OFFICE ONE NEW ARK CENTER 20TH F - NEWARE NEW JERSEY 07401-5204

SCNOW ALL MEN BY TRESE PRESENTS: That INTERNATIONAL PROFLETP INSURANCE COMPANY , a con-of the Suit of New Rocky, and Include He pro-spational on the Car of New Int. New Pro-st. docs hereby working an MICHAELR GOMEZAR CINDLY KLINE MICHAELR GOMEZ WANDAE LLOYD GINGER C. COCO. MARY KAY WHITTEHEAD, MICHAELE, MOORE

### Norfolk, VA.

ber wellings oblighter, in the heave thereof, which are of may be showed, required or demand ber wellings oblighter, in the heave thereof, which are of may be showed, required or demand or excention of such "harmenics" in pursuance of these piecems, shall be so blanding up OMPANY, so that, and analy, to all memorial the purposes as if the same has been buy ever incipal office. tract of otherwi pinicipal 60%: This Power of Anomay is executed, and may be revolved, pursuant to and by sunnority of Arnole 3 Section 3, of the By Laws adopted by the Band of Directors of INTERNATIONAL STOPLATY INSURANCE COMPANY as a meeting called and held an the 7th day of February, 1974. The Presidencian any Vite President, Executive, Vice President, Secretary or Assimut Secretary, shall have power and authority

(i) To appoint Anomeys-in fact, and to anihofize them to execute on behalf of the Company, and anather the Seal of the Company thereto, bonds and undertakings, contract of indomnity and other writings obligatory in the mature thereef and.

(2) To remove, at any time, any such affording, in fast and resolve first atting by given. Further, this rowst of Atomicy is signed and valid by facethile purchasing resolution of the fipset of Directors of and Company adopted at a meeting study called and held on the 29th day of April, 1982 of which the following is a rule excerpt. Now therefore the significates of such officers and the seal of the Company may be afficiel to any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile, and any such power of attorney or any certificate relating the factimile at a such of the certificate relating the factimile at a such of the certificate relating the factimile with respect to a such and certificate signatures and factimile seal shall be valid and binding upon the Company in the fifther with respect such power so executed and ce bond or undertaking to which

IN TESTIMONY WHEREOF. INTERNATIONAL FIDELITY INSURANCE COMPANY has caused this instrument to be signed and its comparate sells in be affixed by its authorized officer; this 16th day of Centrer; ALD, 2007 INTERNATIONAL FIDELITY INSURANCE COMPANY

# STATE OF NEW JERSEY County of Essex

of October 2007, before me therein described and sufficience officer of the II approximate Seal of said Company, that the said Company

### IN TESTIMONY WHEREOF I have between one my hand affand by Official Se at the Opy of Newart, NPV Jergey the day and your group prove written. AHON NOTAR C PUBLIC

W.JEA

THEHO formey has ts the shooty weight of state beginn some had and the last and state, 2012

CERTIFICATION officer of INFRENATIONAL FEDERATY INSURANCE COMPANY to hereby senify that ( have compared to I afficially and the copy of the Senitor of the Ry Laws of our Company as set for the in task Power of Attenties, wi

A NOTARY BUBLIC OF NEW TERSET My Commission Expires Nev. 21, 2010

Maria of Granco

欼  $\sim \dot{u}$ 

1000



### **BOND RIDER**

To be attached to and form a part of Bond No	
Dated The <u>1st</u> Day of <u>Jun</u>	e, 2012 By and Between:
Paradise Point Marine, Inc.	, as Principal, and
International Fidelity Insurance Company	as Surety, in favor of
Broward County	, as Obligee.
It is understood and agreed that the bond is chan	ged or revised in the particulars checked below
Name of Principal changed to:     Host Terminals. Inc.	
Amount of Bond changed from	
Other	
Said bond shall be subject to all its terms, condition	ons and limitations, except as herein expressly
modified. This bond Rider shall become effective	as of <u>June 1, 2015</u>
IN WITNESS WHEREOF, International Fidelity Insur	ance Company has caused its
corporate seal to be hereunto affixed this24th	day of June 2015.

International Fidelity Insurance Company

a - an an ann an an an an an an tarthair ann an ann an an tarthannachan an ann an tarthan ann an tarthan an an a

By: <u>Patti J.</u> Jeorge Attorney-in-Fact

IFIC BOND RIDER 10/15/2008

### **SECTION N – Equipment**

Host Terminals has the financial strength and commitment to acquire any/all equipment and facilities necessary to safely provide efficient and cost-effective stevedore services while utilizing best practices.

As policy, when equipment is required, Host Terminals will purchase or lease/purchase new equipment, periodically replacing with new equipment to maintain optimal safety and reliability. While not a preference, Host Terminals will also rent equipment to meet peak demands or urgent customer requirements.

All equipment will be domiciled at Port Everglades.

### EQUIPMENT - PORT EVERGLADES

ТҮРЕ	MAKE / MODEL / SERIAL	AGE	Fuel Type
10cm SMAG Grabs		2013	N/A
LOCM SMAG Grabs		2013	N/A
Ocm SMAG Grabs		2013	N/A
.0cm SMAG Grabs 2005 Taylor THDC975 Loaded Container Handler		2013 2017	N/A Diesel
		2017	Gasoline
007 JLG 450AJ Articulating Boom Lift 008 Multiguip Generator Model DCA180SSJUC	2007 JLG 450AJ Articulating Boom Lift	2019	Diesel
012 Buffalo KB4 Debris Blower OLGH		2017	Gasoline
015 TYM THDC955 Container Handler	9000 Lb 5 High Full Container Handler	2017	Diesel
5HP DB-60 Mounted Fan	25HP DB-60 Mounted Fan	2013	N/A
6k Kalmar Forklift	200349	2018	Diesel
Breakbulk Walkways		2013	N/A
0' Trailer		2013	N/A
k Nissan Forklift	MW1F4A35V	2013	Diesel
k Nissan Forklift	Y1F290497,0500	2013	Diesel
k Nissan Forklift	MW1F4A35V	2013	Diesel
usby Bomb Cart	5327016·21	1995	N/A
usby Bomb Cart	5327016-11	1995	N/A
usby Bomb Cart	5327016.7	1995	N/A
usby Bomb Cart	5327016.14	1995	N/A
usby Bomb Cart	5327016-9	1995	N/A
usby Bomb Cart	5327016-8	1995	N/A
usby Bomb Cart	5327016.10	1995	N/A
AT 4000W Light Tower Engine	Diesel Engine for Wacker LTN6C 4000W Light Tower	2016	Diesel
aterpillar Forklift	DP40 3CM12747 8,000#	2000	Diesel
aterpillar Forklift	DP40 3CM12242 8,000#	2000	Diesel
aterpillar Forklift	DP70E AT20C70289 12,900#	2012	Diesel
aterpillar Forklift	DP70E AT20C70215 13,200#	2011	Diesel
aterpillar Forklift	DP70E AT20C70295 13,200#	2012	Diesel
aterpillar Forklift	DP70E AT20C70292 14,200#	2012	Diesel
hallenger Chassis	RG-50 1W8A11E388500 322 120,200 GVWR	2008	N/A
hassis	BLK 20FT FUEL	2008	N/A
hevy Pickup Truck	Silverado 1500 2GCEC13T661177951	2006	Gasoline
hevy Pickup Truck	Silverado 1500 2GCEC19V761111482	2005	Gasoline
ontainer Enterprise Chassis	RM40GN CMCZ 142540 1NNZF4523CM063941 67,200GVWR	1996	N/A
ontainer Enterprise Chassis	RM40GN CMCZ 141469 R70380 67,200GVWR	1995	N/A
ontainer Enterprise Chassis	RM40GN CMCZ 141889 1NNZF4520CM061967 67,200 GVWR	1995	N/A
ontainer Spreader Frames (2) - 20' & 40'	Tandemloc N3100 Fixed Autoloc Container Spreader Frames	2016	N/A
odge Pickup Truck	Ram 2500 3D7KR26C55G812835	2005	Gasoline
ouble Walled Steel 500 G Tank w 12V Pump		2014	N/A
ust Suppression Equipment	BT-CKB4M Gasoline Monsoon KB	2014	N/A
ust Suppression Equipment	BT-CKB4M Gasoline Monsoon KB	2014	N/A
me Bomb Cart	M20·45D GEI-120537 110,000#	2000	N/A
me Bomb Cart	M20·45D GEI-120538 110,000#	2000	N/A
me Bomb Cart	M20-45D GEI-122039 110,000#	2001	N/A
lme Bomb Cart	M20·45D GEI-118433 110,000#	2001	N/A
me Bomb Cart	M20-45D GEI-118734 110,000#	2001	N/A
me Bomb Cart	M20-45D GEI-120035 110,000#	2000	N/A
me Bomb Cart	M20·45D GEI-120036 110,000#	2000	N/A
ord Pickup Truck	Ranger 15TYR14D67PA53279	2007	Gasoline
ord Pickup Truck	Ranger edge 1FTYR14V63PB29618	2003	Gasoline
eightliner Van	Utilimaster van 4UZA4FF4XTC776401	1996	Diesel
eli Forklift	CPCD70 010701E2062MI 15,430#	2012	Diesel
eli Forklift	CPCD70 010701E2064MI 15,430#	2012	Diesel
eli Forklift	CPCD70 010701E2065MI 15,430#	2012	Diesel
eli Forklift	CPCD70 010701H9236MI 15,430#	2012	Diesel
oppers - South Florida		2013	N/A
oppers - South Florida		2013	N/A
oppers - South Florida		2013	N/A
oppers - South Florida		2019	N/A Discol
yster Forklift	H60XM D187V11503W? 6,000#	1999	Diesel
yster Forklift	H155XL2 F006D06373Y 15,000#	2001	Diesel
almar Forklift	DC25/28 RORO T34110,1365 25,000# 36000 Lb Capacity Pneumatic Tire Diesel @ 24"LC 136"; HOIST Equipment	1989 2014	Diesel Diesel

Loading Ramp		2016	N/A
Man Basket	CT4020	2013	N/A
Man Basket	12047	2013	N/A
Man Basket		2013	N/A
Mazda Pickup Truck	B-2500 5 speed 4F4YR12C9XTM45326	1999	Gasoline
Scale		2013	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spill Plates - South Florida Piers		2014	N/A
Spreader 12'		2016	N/A
Spreader 16'		2016	N/A
Spreader Bar 15'		2013	N/A
Spreader Bar 15'		2013	N/A
Strick Chassis	1S12GC404RB685762 65,000 GVWR	1994	N/A
Taylor Forklift	T-360-L 31103 32,770#	2007	Diesel
Taylor Forklift	TX-360L 38204 36,000#	2007	Diesel
Taylor Industrial Truck X360L Forklift		2017	Diesel
Taylor Toplift Loader	TEC-950 27417 67,200 (SAFE)	1998	Diesel
Taylor Toplift Loader	THDC-974 31478 80,000 (SAFE)	2004	Diesel
Taylor Toplift Loader	THDC-954 30537 80,000 (SAFE)	2003	Diesel
Taylor Toplift Loader	TEC-9SO 24116 67,200 (SAFE)	1995	Diesel
Taylor Toplift Loader	TEC-950 26525 67,200 (SAFE)	1997	Diesel
Toyota Forklift	42.6FGCU20 65317 4,000#	2005	Diesel
Used Drop Deck Trailer (DD-02)		2016	N/A
Used Drop Deck Trailer (DD-04)		2016	N/A
Used Drop Deck Trailer (DD-05)		2016	N/A
Used Drop Deck Trailer (DD-06)		2016	N/A
Used Truck Scale		2013	N/A
Yale Forklift	GDP060 A875B32197C 5,750#	2005	Diesel
Yale Forklift	GDP155CA A878V01567Z 15,500#	2002	Diesel
Yale Forklift	GDP155CA A878V01569Z 15,500#	2002	Diesel

# **SECTION O – Broward County Business Tax Receipt**

### BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000 VALID OCTOBER 1, 2019 THROUGH SEPTEMBER 30, 2020

DBA: Business Name: TERMINALS Receipt #:329-248482 ALL OTHERS (MARINE CONCEIRGE Business Type: SERVICES)

Business Opened:05/01/2012

State/County/Cert/Reg:

**Exemption Code:** 

Owner Name: HOST TERMINALS Business Location: 500 E PLUME ST STE 600 OUT OF COUNTY

Business Phone:

Machines Professionals Rooms Seats Employees 5 For Vending Business Only Number of Machines: Vending Type: Tax Amount Transfer Fee NSF Fee Penaltv Prior Years **Collection Cost** Total Paid 0.00 33.00 33.00 0.00 0.00 0.00 0.00

### THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

HOST TERMINALS 150 W MAIN ST NORFOLK, VA 23510 Receipt #05A-18-00007282 Paid 07/16/2019 33.00

### 2019 - 2020

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT 115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000 VALID OCTOBER 1, 2019 THROUGH SEPTEMBER 30, 2020

DBA: HOST TERMINALS

Owner Name: HOST TERMINALS Business Location: 500 E PLUME ST STE 600 OUT OF COUNTY Receipt #: 329-248482 Business Type: ALL OTHERS (MARINE CONCEIRGE SERVICES)

Business Opened: 05/01/2012 State/County/Cert/Reg: Exemption Code:

Business Phone:

For Vending Business		Vending Business Onl	•		
mber of Machi	nes:		Vending Type:		
ansfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
0.00	0.00	0.00	0.00	0.00	33.00
	ansfer Fee	mber of Machines: ansfer Fee NSF Fee	mber of Machines: ansfer Fee NSF Fee Penalty	mber of Machines:         Vending Type:           ansfer Fee         NSF Fee         Penalty         Prior Years	wher of Machines:         Vending Type:           ansfer Fee         NSF Fee         Penalty         Prior Years         Collection Cost

Receipt #05A-18-00007282 Paid 07/16/2019 33.00

# SECTION P – Safety/Substance Abuse/Job Training/Certificates



# Occupational Health and Safety

Program

Issue Date: Revision Date: Revision Number: Approved By: May 24, 2017 N/A N/A Chris Holt

Host Terminals Occupational Health and Safety Program, Version 1



### ENVIRONMENTAL, HEALTH, AND SAFETY POLICY

Host Terminals will conduct all operations in an environmentally compliant and safe manner. Environmental stewardship and the safety of our teammates are just as important to our success as operational and financial performance. We are committed to a process of continuous improvement in all we do and to the adoption of industry standards and safe practices. We fundamentally believe that all accidents/injuries are preventable. Essential to this belief is the setting of clear expectations, responsibilities, improvement of safe work practices, identification and control of workplace hazards, and a commitment to the safety of all teammates involved in our operations. Our efforts in the areas of environmental, health and safety shall be guided by the following:

**Accident Prevention:** We will strive to make our workplaces free of injuries and accidents with 100% safe work practices and safe conditions throughout our operations.

**Environmental Stewardship:** We are committed to protecting the environment and shall apply industry best practices as appropriate to minimize the generation of emissions and waste throughout our operations.

**Risk Assessment:** We will systematically identify potential hazards and establish controls to ensure that risks are minimized.

**Regulatory Compliance:** We will comply with all applicable laws, regulations, and, where any of these are inadequate, adopt and apply the highest standards that reflect Host Terminal's commitment to safety and protection of the environment.

**Emergency Preparedness:** Being properly prepared for an emergency is of vital importance and is the responsibility of management, supervisors and employees at all levels. We will maintain emergency plans in cooperation with local authorities and emergency services to ensure a prompt, effective and integrated response to minimize harmful effects from any incidents.

**Continuous Improvement:** Our management systems provide a framework for setting targets, measuring performance, managing risks, investigating incidents and reporting results. We will employ these systems and encourage and require employee involvement to achieve continual improvement in our overall EHS performance.

**Communication:** We will clearly communicate our EHS commitments, responsibilities and performance to our employees and the public. Additionally, we will provide information to all relevant parties on the safe use, handling, transportation, storage, recycling, reuse and disposal of materials, products and wastes we handle.

**Training:** We will ensure that employees understand their EHS responsibilities, that they have the right training for their jobs and are competent to perform their assignments safely, effectively and efficiently.

**Tools:** We will provide the required resources, facilities, tools, and equipment for our team to work safely.

J Chris Holt Director of Environmental, Health, and Safety May 17, 2017 Date

Host Terminals Occupational Health and Safety Program, Version 1

1 | 22



Con	itent	S	
		duction	3
		Jram Overview	
2.		Responsibilities	
2.3		Workers Comp	
2.3		Drug Free Workplace	
2.4		Driving Safety	
2.		OSHA 300	
2.6		Hazard Communication Program	
		agement Leadership	
		ard ID and Assessments	
4.		Identification	
4.2	2.	Assessments	
4.3		Accident Investigations	
4.4		Rules	
4.4	4.1.	General	
4.4	4.2.	Housekeeping	
4.4	4.3.	Fire Prevention	
	4.4.	IH Monitoring	
4.4	4.5.	PPE	
4.4	4.6.	LOTO	
4.4	4.7.	Electrical Safety	
	4.8.	Machine Guarding	
	4.9.	Compressed Gas	
4.4	4.10.	Ladders and Scaffolding	
		Flammable and Combustible Liquids.	
		Cranes & Hoists	
		Welding and Cutting	
		Fall Protection	
		Forklifts	
		Aerial Lifts	
		Excavations, Trenching and Shoring	
		Dockside Safety	
		Equipment Tire Servicing	
		Tools	
4.5		Additional Plans/Programs	
4.6		Standard Operating Procedures	
		rgency	
		cal and First Aid	
		ections	
		Audit Procedures	
6.2		Safety Observations	
		ing, Documentation and Systems	
7.1		Training	
7.2		Documentation	
7.3		Systems	
			21
		IS	
		rences	

Host Terminals Occupational Health and Safety Program, Version 1



### 1. Introduction

At Host Terminals, our people are our greatest assets and their safety is our #1 priority. Our company is our people, and the service they provide is our only product. We work relentlessly to strengthen our safety culture, focusing on the relationship between our people and their work environment. A strong safety culture is complemented by our competent workforce.

It is Host Terminals belief that all injuries, damage to the environment, incidents and accidents are preventable. This document outlines our safety standards and requirements. These standards apply to all aspects of our operations.

The procedures described in this program are intended to protect employees, provide and maintain a safe workplace, preserve and protect the environment, and facilitate compliance with applicable governmental regulations. If there is a conflict between any part of a facility program and a governmental regulation, the governmental regulation will apply and the facility program will be modified.

### **Occupational Health and Safety Act**

Host Terminals shall:

- Furnish to each employee a place of employment free from recognized hazards that are likely to cause death or serious physical harm.
- Comply with occupational health and safety standards and rules, regulations and
  orders pursuant to the Act that are applicable to company business and operations.
- Comply with and require all employees to comply with occupational health and safety standards and regulations under the Act which are applicable to their actions and situations.
- Encourage employees to contact their supervisor for information that will help them understand their responsibilities under the Act.

### 2. Program Overview

This program outlines responsibilities for Occupational Safety and Health and provides general safety requirements. The objective of the Program is to prevent losses to employees and the organization. This program is risk-based and designed to meet our continually evolving and dynamic business and operating model.

### Mission:

- To provide a safe and healthful work environment for all employees.
- To be a productive, responsible organizational citizen and the employer of choice in our industry.



#### Goals:

- Develop an accident-free work environment, which is safe, clean and productive for our employees.
- Minimize our workers' compensation insurance costs to enhance the organization's profitability.
- Provide continual training to employees and management such that an understanding of hazards and respective safety requirements are established and supported.
- Develop, implement, and manage effective loss prevention programs to assure a safe, healthful and productive workplace, and compliance with applicable state and federal regulations.
- Encourage the responsibility and participation of all employees and management in the organization's loss prevention efforts.

### 2.1. Responsibilities

### **Employee Responsibilities**

All Company employees are responsible for:

- Complying with all company programs, procedures, rules, applicable laws, and regulations.
- Participating in safety, environmental, severe weather drills & exercises.
- Assisting in incident investigations and identifying areas for improvement.
- Attending training as required.
- Notifying management if training has not been provided or was inadequate.
- Correcting/reporting any substandard or unsafe conditions.
- Immediately reporting any injuries or spills.
- Participating in near miss investigations and development of job safety analysis (JSA's).
- Utilizing proper tools and protective equipment.
- Performing housekeeping to ensure work can be performed safely.
- Striving daily for incident-free work environment.
- Warning others of anything that could affect their safety.
- Minimizing distractions while performing operations and maintenance activities.
- Requesting clarity regarding roles, responsibilities or methods of complying with procedures if any are unclear.
- Stopping the job if a dangerous situation exists.

### Management Responsibility

Company management includes supervisors, operations managers, general managers, and division managers.



Managers are responsible for:

- Leading by example by following all safety procedures and policies.
- Ensuring that each employee is adequately trained.
- Making any regulations or standards applicable to the work or work environment, available to all employees.
- Ensuring that all work is conducted in compliance with all environmental, safety, and health laws and regulations.
- Identifying training needs based on operational changes.
- Encouraging employee participation and involvement in safety decisions.
- Providing adequate safety equipment for all employees.
- Ensuring that all equipment is maintained.
- Correcting unsafe acts or conditions promptly.
- Communicating new and updated safety or regulatory information.
- · Conducting safety meetings and training.
- Providing guidance to employees requesting information.
- Administering disciplinary action when necessary.

### **Environmental Health and Safety (EHS) Personnel**

EHS personnel are responsible for:

- Functioning as a safety & health advisor/resource and technical expert.
- Communicating new & updated safety or regulatory information.
- Developing, maintaining, and communicating environmental programs, procedures, and policies.
- Communicating changes to procedures, plans, programs, and policies.
- Coordination of state and local permitting/licensing efforts.
- Tracking environmental compliance measures and trends.
- Identifying core training curriculums.
- Training employees on safety and environmental topics.
- Conducting audits/assessments and providing corrective measures to any findings.
- Assisting in the annual review of safety procedures.
- Providing guidance on procuring and maintaining new safety equipment.
- Managing Terminals Spill Prevention Control and Countermeasure Plans.
- Assisting with regulatory agency inspections and investigations.
- Managing waste generation and disposal.

### 2.2. Workers Comp

The following actions will be taken/followed on all accidents/injuries being submitted as a Workers' Compensation claim:

Injured employees must report all accidents/injuries to their supervisor immediately.



- All accidents/incidents will be investigated by the EHS management to determine the facts and take corrective action to prevent recurrence.
- Employees must complete the Worker Information section of the Workers' Safety and Compensation Report of Occupational Injury or Disease forms, Human Resources will complete the Employer's Information section.
- Human Resources will ensure that the Workers' Safety and Compensation Division is notified as appropriate by filing the report.
- The accident investigation must confirm that the injury was job related for the claim to be valid.
- Injured employees will enter a modified job program, i.e., light duty, restricted duty, when such is recommended by the attending physician.

### 2.3. Drug Free Workplace

- The unlawful use, possession, transfer, or sale of illegal drugs or controlled substances and the misuse of alcohol by employees during work hours are prohibited. The consequences for violation of the drug-free policy may include, but are not limited to, a referral for therapeutic help, discipline and/or discharge.
- A list of community resources that provide substance abuse treatment and prevention services is posted at the bulletin board where they may be regularly viewed by employees.
- The Department of Health also provides information on their website, or may be contacted directly.
- Host Terminals encourages the designation of a totally or partially smoke free workplace.

### 2.4. Driving Safety

Vehicle operations are an integral part of our business. Therefore, the following rules shall apply to all business vehicle operations:

- All vehicle operators are required to have a current and valid drivers' license for the vehicle to be operated, i.e., motorcycles, trucks, commercial drivers' license.
- No unauthorized use of company vehicles shall be permitted.
- Prior to entering the vehicle, visually inspect the entire vehicle. Look for broken windows, light covers, low tire pressure, etc. Report all damage to your supervisor.
- Adjust all mirrors for the proper vision of the operator.
- All occupants shall fasten their seat belts.
- Check all gauges and switches for proper function and location, i.e., cruise control, windshield wipers, and lights.
- Test the brakes to determine their effectiveness.
- Obey all traffic laws while operating the vehicle, this includes the speed limit.
- Vehicles shall NOT be operated while under the influence of alcohol or drugs which may impair your driving ability. Some prescription drugs and over-the-counter drugs also may affect your driving and decision-making abilities.
- Cell phone operation must be conducted ONLY while stopped and out of traffic.
- Always maintain a safe following distance.
- If your vehicle becomes disabled, call for help on your cell phone.
- Report all incidents/accidents to supervision immediately.

Host Terminals Occupational Health and Safety Program, Version 1



### 2.5. OSHA 300

The OSHA Form 300 log of all recordable occupational injuries and illnesses is maintained for each work facility. In some cases, the log may be kept at the main office. The summary section of the OSHA Form 300 must be posted at each work facility/site by February 1st of the following year and remain in place until April 30th.

### 2.6. Hazard Communication Program

Host Terminals has a Hazardous Communication Program in place because of our work with and exposure to hazardous chemicals in the workplace. Important elements of this program are: captured in our written program explaining the program; a master listing of hazardous chemicals in the workplace; safety data sheets (SDSs) of those chemicals; labeling requirements of chemicals containers; and training for all employees on the program and its elements. Employees are encouraged to review this program at any time.

### 3. Management Leadership

Host Terminals Leadership is committed to providing employees with a safe and healthful workplace. Employee recommendations to improve safety and health conditions will be given thorough consideration by our management team. Leadership will give top priority to, and provide the financial resources for, the correction of unsafe conditions. Similarly, management will take disciplinary action against an employee who willfully or repeatedly violates workplace safety rules.

Senior leaders are actively involved with employees in establishing and maintaining an effective safety program. Ongoing safety and health program activities include:

- · Promoting safety committee participation.
- Providing safety and health education and training.
- Reviewing and updating workplace safety rules.

This statement serves to express management's complete commitment to and involvement in, providing our employees a safe and healthful workplace. This workplace safety program will be incorporated as the standard of practice for this organization. Compliance with the safety rules will be required of all employees as a condition of employment.

### 4. Hazard ID and Assessments

### 4.1. Identification

Hazard identification and elimination is not only an inherent responsibility of supervision in providing a safe workplace for employees, but also requires employee involvement. As such, hazard evaluation and control shall be an on-going concern for all. It is the responsibility of everyone to identify, report, and correct, all possible hazards. Employees are particularly important in this process as they are in the best position to identify hazards in the workplace and day-to-day operations.



All injuries, accidents, incidents, and near misses must be reported. Accidents and incidents are investigated so that measures can be taken to prevent a recurrence of similar events. Investigation represents an "after-the-fact" response for any incident. However, a thorough investigation may uncover hazards or problems that can be eliminated "before-the-fact" for the future. After root causes have been determined, prompt follow-up action is required to achieve the purpose of the investigation.

# Reporting hazards is a protected activity and no action will be taken against anyone for identifying unsafe conditions.

Host terminals has a procedure for conducting inspections of workplaces/jobsites for compliance with health and safety rules. The purpose of this inspection is to identify hazards and unsafe practices before they cause an injury or accident.

The company's health and safety program will be reviewed at least annually and formal safety and health inspections will be conducted in all fixed facilities and shops.

After completion of jobsite or facility inspections, the individual performing the inspection will:

- Discuss findings with employees/persons responsible for creating the condition. Invite their comments, suggestions and aid.
- Ensure recommended corrections/changes are transmitted to and discussed with the proper supervisor/person for correction.
- Follow up on changes, corrections, and other actions necessary.
- Provide copy of checklist to company health and safety person, along with statement of corrective actions taken or still required.

### 4.2. Assessments

Items, areas, and categories that may be examined during health and safety inspections of the workplace:

- · First aid safety and lifesaving equipment
- Required posters and signs
- Accident reporting records
- Employee training records
- Equipment and tools (hand, power, welding, etc.): condition, use, etc.
- Protective guards and devices
- Housekeeping: maintaining clean work areas, free of trash/debris accumulation, tripping, and slipping hazards
- Lighting: for adequacy and safety
- Sanitation: water, toilets for cleanliness and proper operation
- Noise hazards, hearing protection
- Ventilation for gases, vapors, fumes, dusts
- Availability of personal protective equipment: Hard hats/head protection, respirators, safety belts, life lines, safety shoes, eye protection, gloves
- · Fire protection, prevention and control, use of fire protection equipment
- Temporary buildings, trailers, sheds



- Open yard storage
- Storage of flammable and combustible liquids including service and refueling areas for vehicles
- Fall protection requirements: in place and in use
- Electrical system and devices; condition and use of cords; ground fault protection; circuit breaker panels; receptacles and switches
- Rigging
- Openings: floor, wall, safety railings
- Materials: handling equipment and elevators
- Ladders: condition and use
- Hazard communication program and material safety data sheets (MSDS)
- Stairways: safety railings, condition
- Scaffolds: safety railings, secured
- Lockout/Tagout procedures
- · Machines and equipment: condition, guards in place
- Forklifts: condition, operation
- Preventive maintenance program: all inclusive, up to date
- Other items as appropriate

### 4.3. Accident Investigations

Accident and Incident Investigation

- All near misses and incidents where someone else could be injured from the same task, condition, behavior, design, etc. shall be reviewed using the Incident Investigation Form referenced in this program.
- Investigations are to be performed immediately and corrective actions put into place to abate any recognized hazard to prevent a recurrence.
- All investigations are to be documented and retained.

Procedures for investigating workplace accidents and exposures include:

- Interviewing injured workers and witnesses
- Examining the workplace for factors associated with the accident/exposure
- Determining the cause(s) of the accident/exposure
- Taking corrective action to prevent the accident/exposure from reoccurring
- Reviewing training for affected staff

### 4.4. Rules

### 4.4.1. General

Compliance with all governmental regulations/rules and all company safety rules in the following sections are required:

- Report unsafe conditions to your immediate supervisor.
- Promptly report all accidents/injuries/incidents to your supervisor.



- Use eye and face protection where there is danger from flying objects or particles, (such as when grinding, chipping, burning and welding, etc.) or from hazardous chemical splashes.
- Dress properly. Wear appropriate work clothes, gloves, and shoes or boots. Loose clothing and jewelry shall not be worn.
- Keep all equipment in safe working condition. Never use defective tools or equipment. Report any defective tools or equipment to supervision.
- Properly care for and be responsible for all personal protective equipment (PPE). Wear or use any such PPE when required.
- Lockout/tagout or disconnect power on any equipment or machines before any maintenance, unjamming, and adjustments are made.
- Do not leave materials in aisles, walkways, stairways, work areas, or other points of egress.
- Practice good housekeeping at all times.
- Do not operate equipment if you have not received training.
- Horseplay, scuffling, and other acts that tend to have an adverse influence on the safety or well-being of the employees shall be prohibited.
- No one shall knowingly be permitted or required to work while the employee's ability or alertness is so impaired by fatigue, illness, or other causes that it might unnecessarily expose the employee or others to injury.
- Do not enter any confined spaces, i.e. manholes, tanks, etc., unless it has been determined that is safe to enter.
- Ensure that all guards and other protective and safety devices are in proper places and adjusted, and report deficiencies promptly to the foreman or superintendent.
- Crowding or pushing when boarding or leaving any vehicle or other conveyance shall be prohibited.
- All injuries shall be reported promptly.
- When lifting heavy objects, the large muscles of the leg instead of the smaller muscles of the back shall be used.
- Enclosed top, composite toe anti-slip soled shoes shall be worn.
- Do not throw materials, tools, or other objects from elevations until proper precautions are taken to protect others from the falling objects.
- Everyone entering an operational area must wear the protective equipment.
- Do not attempt to cleanup any spilled material unless you are properly trained.
- Keep all exits, aisles, emergency equipment and electrical panels unblocked (36-inch clearance is required).
- All electrical panels are to be clearly marked to indicate equipment/circuits controlled by specific breakers.
- Never walk across any moving parts, or place any body part in a hazard zone of machinery or equipment.

Host Terminals Occupational Health and Safety Program, Version 1



- Never stand near any suspended load (crane or lift).
- Assure that ladders are solid and well based.
- Only use chemicals if you have been trained on their safe use, and that they are in labeled containers.
- Unless welding, stay away from welding and grinding areas, assure that curtains are used.
- Do not use compressed air to clean your clothing.
- Use cranes, hoist, or forklifts as opposed to manually lifting items.
- Never work alone in the facility.
- Never distract another worker when operating equipment.
- Do not drive yourself if you are injured, notify your supervisor.
- Know where the assembly point, Emergency Evacuation maps are located, emergency eye wash stations, and first aid supplies are kept and who the first aid providers are.
- When working with electrical hand tools, make sure ground is intact and that all insulation is sound.
- Use ground fault circuit interrupters in wet areas.
- Bay doors are to be completely open or closed, not partially open.
- Only certified forklift operators are to use the equipment.
- Only one person is permitted per seat on equipment.
- During transport, loads are always to be kept low and weights within limits.
- Always wash hands with soap and water after handling any chemicals.
- Eating, drinking or smoking is not permitted in any chemical use/storage area.

### 4.4.2. Housekeeping

Proper housekeeping is the foundation for a safe work environment. It helps prevent accidents and fires, as well as creating a professional appearance in the work area.

Adhere to the following:

- All work areas, floors, aisles, and stairways will be kept clean and orderly, and free of tripping and slipping hazards. Oils, greases, and other liquids will be immediately cleaned up if spilled.
- Combustible scrap, debris, and garbage shall be removed from the work area at frequent and regular intervals.
- Stairways, walkways, exit doors, in front of electrical panels, or access to firefighting equipment will be kept clear of storage, materials, supplies, trash, and other debris at all times.
- Overhead storage areas will be marked as to maximum load rating.



### 4.4.3. Fire Prevention

- All portable fire extinguishers will be conspicuously located, accessible, and maintained in operating condition. Portable fire extinguishers will receive an annual service check and a monthly visual inspection. These will be documented on the tag on the extinguisher or other form.
- All employees must know the location of firefighting equipment in the work area and have knowledge of its use and application.
- Exits will be marked as such by a readily visible sign. Other doors likely to be mistaken for an exit will be marked as "Not an Exit".
- Only approved safety cans shall be used for handling or storing flammable liquids in quantities greater than one gallon. For one or less gallon, only the original container or a safety can will be used.
- When heat producing equipment is used, the work area must be kept clear of all fire hazards and all sources of potential fires will be eliminated.
- Fire extinguishers will be available at all times when utilizing heatproducing equipment.

### 4.4.4. IH Monitoring

- Employees exposed to noise levels above the permissible noise level will be included into the hearing conservation program. Hazardous noise areas will be posted and hearing protection worn in those areas as required.
- Employees exposed to harmful gases, fumes, dust, and similar airborne hazards will be furnished protection through proper ventilation or personal respiratory equipment.
- Any demolition or renovation will be assessed for lead exposure, particularly if drywall or any painted surfaces or abrasive blasting/grinding is involved, and asbestos exposure.

### 4.4.5. PPE

Personal protective equipment must be worn as required for each job in all operations where there is an exposure to hazardous conditions. This exposure is determined by a personal protective equipment hazard assessment of the workplace by the supervisor. Equipment selection and wearing requirements are determined from this assessment.

### PPE Guidelines:

- Safety glasses, goggles or face shields, hard hats, reflective vests and foot protection will be worn in all operational areas.
- Hand protection is required when hands are exposed to severe cuts/abrasions, chemical/thermal burns, or chemical absorption.
- The use of safety harnesses and lanyards are required when working at heights that expose a worker to a fall of more than four (4) feet.
- Personal flotation devices (PFD's) shall be worn when working within three (3) feet of the water's edge.

Host Terminals Occupational Health and Safety Program, Version 1



### 4.4.6. LOTO

Before any work or maintenance is performed on any machine, equipment, tool, or electrical system, they will be made totally safe before work starts by removing any source of energy or power to them, such as electrical, air/hydraulic pressure, spring/stored energy, or thermal (heat/cold). The Lockout/Tagout Program provides for a safe method of working on, near, or in machinery or equipment that can cause serious injury.

This program will be used by all employees to ensure that the machine or equipment is stopped, isolated from all potentially hazardous energy sources, and locked out before employees perform any servicing or maintenance where the unexpected energization or start-up of the machine or equipment, or release of stored energy, could cause injury.

### 4.4.7. Electrical Safety

- Live electrical parts shall be guarded against accidental contact by cabinets, enclosures, location, or guarding.
- Open circuit breaker openings or knock out holes, broken receptacles/switches, missing covering plates, etc., will be reported to supervision for repair or replacement.
- Working and clear space around electric equipment and distribution boxes will be kept clear and assessable.
- Circuit breakers, switch boxes, etc. will be legibly marked to indicate its purpose.
- All extension cords and electric powered tools (except double insulated) will be grounded. Ground prongs will not be removed.
- Electric cords and their strain relief devices will be in good condition, with no splices.
- Electric wiring/cords entering/exiting any panel/control/junction box will be secured with clamps or other appropriate strain relief device.
- Extension cords and other flexible cords will not be used in lieu of permanent wiring and receptacles. Cords will not be run through holes in doors, walls, windows, nor will they be fastened to walls, poles, equipment, etc.
- All lamps below seven feet used for general illumination will have the bulbs protected against breakage.

### 4.4.8. Machine Guarding

- All flywheels, shafting, pulleys, belts, gears, sprockets, chains, and fan blades will be guarded/enclosed when located below seven feet above the floor or work platform.
- Guards installed on machinery and equipment, such as air compressors, conveyors, drill presses, etc., will not be removed when operating.
- Guards removed for servicing or other work on the machine or equipment will be immediately replaced upon completion of the work.

Host Terminals Occupational Health and Safety Program, Version 1

13 | 22


#### 4.4.9. Compressed Gas

- All gas cylinders shall have their contents clearly marked on the outside of each cylinder.
- Cylinders must be transported, stored, and secured in an upright position. They will never be left lying on the ground or floor, nor used as rollers or supports.
- Cylinder valves must be protected with caps and closed when not in use.
- Oxygen cylinders and fittings will be kept away from oil and grease.
- Oxygen cylinders will be stored at least 20 feet from any fuel gas cylinder, or separated by a fire barrier at least five feet high.
- When cylinders are hoisted, they will be secured in a cradle, sling-board, or pallet.
- Valve protection caps will not be used for lifting cylinders from one vertical level to another.

#### 4.4.10. Ladders and Scaffolding

#### Ladders

- Ladders will be inspected frequently to identify any unsafe conditions. Those ladders which have developed defects will be tagged, removed from service, and repaired or replaced.
- Portable ladders will be placed as to prevent slipping, or if used on other than stable, level, and dry surfaces, will be tied off or held.
- Portable ladders will extend at least three feet above the upper level to which the ladder is used to gain access.
- Face ladders when climbing.
- The top of a stepladder will not be used as step.
- Only one person will be on a ladder at a time.

#### Scaffolds

- Scaffold platforms more than ten feet above the ground, floor, or lower level will have standard guardrails (consisting of top rail, mid rail, and toe board) installed on all open sides and ends of platforms.
- Planking will be laid tight; overlap at least 12 inches, and extend over end supports 6 12 inches.
- Mobile scaffolds will be erected no more than a maximum height of four times their minimum base dimension.
- Scaffolds will not be overloaded beyond their design loadings.

#### 4.4.11. Flammable and Combustible Liquids

- Only approved safety cans, original containers, or portable tanks will be used to store flammable or combustible liquids.
- No more than 25 gallons of Class IA and 120 gallons of Class IB, IC, II, or III liquids may be stored outside a storage cabinet or an inside storage room.
- An emergency shut off switch located 15 75 feet from the pumps and a fire extinguisher will be provided at company fuel servicing areas.

Host Terminals Occupational Health and Safety Program, Version 1



#### 4.4.12. Cranes & Hoists

- All cranes/hoists will be inspected prior to each use to make sure it is in safe operating condition.
- A monthly inspection of hooks, running ropes, and hoist chains will be made and a certification record to include date, inspector signature, and hook/rope/chain identifier will be maintained.
- Inspections of frequent (daily-monthly) and periodic (1-12 months) intervals, depending on severity of use, will be made of all cranes.
- The rated load of the crane/hoist will be plainly marked on each side of the crane. If the crane has more than one hoisting unit, each rating will be marked on the unit or its load block.
- Loads will never be swung over the heads of workers in the area.
- Loads, booms, and rigging will be kept at least 10 feet from energized electrical lines rated 50 KV or lower unless the lines are de-energized.

#### 4.4.13. Welding and Cutting

- Combustible material will be cleared for a radius of 35 feet from the area around cutting or welding operations. If the combustible material cannot be cleared or the work cannot be moved, then the welding/cutting will not be performed.
- Welding helmets and goggles will be worn for eye protection and to prevent flash burns. Eye protection will be worn to guard against slag while chipping, grinding and dressing of welds.
- Welding screens will be used and in proper position to protect nearby workers from welding rays.
- Cables, leads, hoses, and connections will be placed so that there is no fire or tripping hazards.
- Oxygen cylinders will be stored at least 20 feet from fuel gas cylinders, or separated by a noncombustible fire wall with a one-half hour rating at least five high.
- Ventilation is a prerequisite for welding in any confined spaces.

#### 4.4.14. Fall Protection

- All open sided floors and platforms four feet or more above adjacent floor/ground level will be guarded by a standard railing (top and mid rail, toe board if required).
- All stairways of four or more risers will be guarded by a handrail, or stair rails on the open side.
- Handrails or stair rails will be provided on both sides if the stairs are more than 44 inches wide.
- When a hole or floor opening is created during a work activity, a cover or a barricade must be installed immediately.
- Safety harnesses, belts, lanyards, lines, and lifelines may be used in lieu of other fall protection systems to provide the required fall protection.
- Adjustment of lanyards must provide for a not more than a four foot fall, and all tie off points must be at least waist high.

Host Terminals Occupational Health and Safety Program, Version 1



#### 4.4.15. Forklifts

- Only authorized and trained employees will operate forklifts and other industrial trucks.
- Safe speeds, load handling, turning, and other safe driving practices will be followed at all times.
- Operators will ensure loads are stable and/or secure before moving.
- Employees will not operate any forklift that is in need of repairs, defective, or unsafe. Such forklifts will be removed from service for repair.

#### 4.4.16. Aerial Lifts

- Only trained employees will operate aerial lifts (cherry pickers, extensible and articulating boom platforms).
- A body belt or harness will be worn and a lanyard attached to the boom or basket when working from an aerial lift.
- Employees will stand firmly on the basket floor, and not sit/stand/ climb on the edge of the basket. Planks, ladders, or other devices will not be used for additional elevation.
- Aerial lift trucks will not be moved with workers in an elevated basket.
- Lift controls will be tested each day prior to use.

#### 4.4.17. Excavations, Trenching and Shoring

- Any excavation or trench five feet or more in depth (or less than five feet and showing potential of cave-in) will be provided cave-in protection through shoring, sloping, benching, or the use of trench shields. Additional requirements are dependent upon the soil classification.
- A competent person will inspect each excavation/trench daily prior to start of work, after every rainstorm or other hazard increasing occurrence, and as needed throughout the shift.
- Means of egress will be provided in trenches of four feet or more in depth. No more than 25 feet of lateral travel for each employee.
- Spoil piles and other equipment will be kept at least two feet from the edge of the trench or excavation.

#### 4.4.18. Dockside Safety

- All dockside operations taking place within three feet of the water's edge requires a personal floatation device (PFD).
- All operators working on the dock shall be trained in Man overboard procedures.

#### 4.4.19. Equipment Tire Servicing

- Only trained employees will service large truck wheels. A cage or other restraining device plus an airline assembly consisting of a clip-on chuck, gauge, and hose will be used to inflate tires.
- Any inspection, disassembly, or assembly of vehicle brakes or clutches must address the hazard of asbestos exposure.

Host Terminals Occupational Health and Safety Program, Version 1



#### 4.4.20. Tools

- Hand tools with broken/cracked handles, mushroomed heads, or other defects will be removed from service
- Power tools will be turned off and motion stopped before setting tool down.
- Tools will be disconnected from power source before changing drills, blades or bits, or attempting repair or adjustment. Never leave a running tool unattended.
- Power saws, table saws, and radial arm saws will have operational blade guards installed and used. Anti-kickback teeth and spreaders will be used when rip sawing.
- Pedestal grinders will be permanently mounted, tool rests installed and adjusted to within 1/8 inch of the wheel, tongue guards installed and adjusted to within 1/4 inch of the wheel, and side spindle/nut guards installed.
- Air compressor receivers will be drained frequently to prevent buildup of water in the tank.

#### 4.5. Additional Plans/Programs

In addition to the Occupational Health and Safety Program, Host Terminals has developed the following programs:

- Hazcom
- PPE
- Confined Space
- Respiratory Protection
- Hearing Conservation
- Lockout / Tagout
- Emergency Response
- Emergency Action
- Fire Prevention
- Asbestos
- Lead Exposure
- Spill Prevention, Countermeasures, and Controls (SPCC)

#### 4.6. Standard Operating Procedures

Additional SOPs to include the elements of OH&S programs discussed so far apply to all basic health and safety programs developed are but not limited to:

- PPE
- Lockout / Tagout
- Confined Space
- Hot-Work
- Walking/ Working Surfaces
- Emergency Plan
- Man Overboard



- Fall Protection
- Heat Stress
- Accident / Incidents
- Electrical Safety
- Machine Guarding
- PIT's
- Hand and Power Tools
- Overhead Cranes and Hoists
- Hearing Protection
- Bloodborne Pathogens
- First Aid / CPR
- Fire Prevention
- Vehicle Safety

#### 5. Emergency

Emergency procedures are plans for dealing with emergencies such as fires, explosions, major releases of hazardous materials, violent occurrences, or natural hazards. When such events occur, the urgent need for rapid decisions, shortage of time, lack of resources, and trained personnel can lead to chaos.

The objective of the plan is to prevent or minimize fatalities, injuries, and damage. The organization and procedures for handling these sudden and unexpected situations must be clearly defined.

The development of the plan follows a logical sequence.

- Compile a list of possible hazards or scenarios (for example: fires, explosions, floods).
- Identify the possible major consequences of each (for example: casualties, damage).
- Determine the required countermeasures (for example: evacuation, rescue, firefighting).
- Inventory the resources needed to carry out the planned actions (for example: medical supplies, rescue equipment, training personnel).

Based on these considerations, establish the necessary emergency organization and procedures. Communication, training, and periodic drills are required to ensure adequate performance when the plan must be implemented.

#### 5.1. Medical and First Aid

First aid facilities and the provision of medical aid is generally prescribed under health and safety legislation or workers' compensation legislation. When no medical facility is reasonably accessible (time and distance) to the workplace, a person who has a valid certificate of first aid training and first aid supplies will be available at the workplace to render first aid.



#### 6. Inspections

#### 6.1. Audit Procedures

Periodic inspections to identify and evaluate workplace hazards shall be performed by a competent observer in all areas of our workplace. Management and facility reviews and audits will occur to address safety conditions.

Annual audits will evaluate safety and health training, safety evaluations conducted, and all necessary follow-up actions to assure abatement of loss sources, and control of potential hazards.

#### 6.2. Safety Observations

- Periodic will be completed monthly by all supervisors and documented.
- The results will be communicated to staff outlining areas for improvement.
- The Safety Process will be POSITIVE BASED.
- People will be recognized that perform well.
- Managers and Supervisors that emphasize the JSA and Safety efforts, and employees that receive excellent Safety Observations will be recognized.
- Audits will be documented and retained.
- Corrective actions will be given and reviewed to ensure the continued improvement of the Safety Process.
- Any safety conditions noted during normal work periods are to be documented and reported to the supervisor.
- Safety issues noted during audits are to be documented and reported to the facility manager.
- Safety Work Order will be developed for each safety issue to be corrected.
- Safety Suggestion Form is to be posted and available for people to report any hazardous conditions or issues as well.

#### 7. Training, Documentation and Systems

#### 7.1. Training

Training and education cannot be over emphasized as a means of learning a healthful and safe approach to employee work effort. Knowledge of the safety rules and how and when to function under the rules, supplemented by compliance, is essential to safety.

- Employees scheduled for any safety and health training will attend such training.
- New employees will be provided orientation training and will be furnished information and literature covering the company health and safety policies, rules, and procedures. This orientation training must be provided prior to the employee's exposure to the work environment.



Individual job/task training will be provided to all employees. Included in this training are:

- The applicable regulations/standards for their job; the recognition, avoidance, and prevention of unsafe conditions; areas and activities that require personal protective equipment; and how to use protective equipment
- Monthly/quarterly on-going safety training sessions will be conducted to provide information and training on new equipment, new procedures, new chemicals, refresher/remedial training in specific areas, or meet annual requirements.

Examples of specified training include but not limited to:

- Fire extinguisher training
- Confined space entry
- Respirator care and use
- Hazard communication
- Lockout/tagout procedures
- Industrial truck/forklift operation
- Electrical work

Training addressed above will be documented in the employees' personnel records and/or in a master training record.

#### 7.2. Documentation

The following records shall be kept:

- Records of hazard assessment inspections, and accident/incident investigations including the person(s) conducting the inspection.
- Records of the unsafe conditions and work practices that have been identified and the action taken to correct the identified unsafe conditions and work practices, are recorded on a hazard assessment and correction form.
- Documentation of safety and health training for each worker, including the worker's name or other identifier, training dates, type(s) of training, and training providers, is recorded on a worker training and instruction form.
- Inspection records and training documentation will be maintained for one year.
- Any exposure or medical records are to be retained for the duration of employment plus 30 years.



#### 7.3. Systems

Documents	Risk Management Center Location
Written Safety and Health Program	My Content <sup>™</sup>
Training Documentation including:	Training Track <sup>™</sup> application
- Classroom training and training course	
completed	
- Sign-in sheets	
- Quizzes	
- Skills evaluations	
- Operator Certificates	
Pre-shift Inspection Checklists	My Content <sup>™</sup>
Safety Observations	Job Hazard Analysis/ Safety Observation Tool <sup>™</sup>
Near misses	Incident Track <sup>™</sup>
Accidents and claims	Incident Track <sup>™</sup>
Supplier and manufacturer Certificates of	COI Track <sup>™</sup>
Insurance	
Safety Data Sheets	SDS Track <sup>™</sup>

#### 8. Continuous Improvement



Host Terminals Occupational Health and Safety Program, Version 1

21 | 22



#### 9. Forms

7 . . . F

SAF-F-905 Incident Report Form SAF-F-904 Workplace Hazard Assessment

#### 10. References

OSHA 1910 OSHA 1917 OSHA 1918

Host Terminals Occupational Health and Safety Program, Version 1

22 | 22



#### Substance Abuse Policy

#### Objective

Illegal drugs and other controlled substances have become serious threats to the safety and productivity of employees in this county. One indication of the magnitude of the threat is legislation enacted by Congress known as the **Drug-Free Workplace Act of 1998.** That statute places requirements on employers doing business with the government and is intended to aid them in maintaining a work place free of drugs.

Host likewise has as one of its objectives the elimination of illegal drugs and alcohol in the work place because of the risks of safety, security, and health that are caused by those substances, not only to the employee but also to innocent coworkers, clients, contractors, customers, families of employees, and members of the public.

#### Policy

In compliance with the **Drug-Free Workplace Act of 1988**, and in furtherance of its objective of having safe and productive work places throughout, Host adopts the following Drug Policy consisting of four components, as follows: (1) Drug-Free Awareness Program; (2) Company Rules and Discipline; (3) Testing of Applicants and Employees; and (4) Rehabilitation Program.

#### **Drug-Free Awareness Program**

Host will implement a drug-free awareness program. Its purpose is to deter drug abuse by educating employees. This program will inform employees about; (1) the dangers of drug abuse in the work place; (2) the contents of this policy; (3) available drug counseling, rehabilitation, and employee assistance programs; and (4) the discipline that may be imposed upon employees for involvement with illegal drugs. The program will include communication measures that are suitable to the circumstances of the work unit, such as group meetings, newsletters, videos, and written materials.

#### **Company Rules and Discipline**

- Any employee who manufactures, distributes, or dispenses any illegal drug or controlled substance at any place or location, or any employee who uses, conceals, or possesses any illegal drug or controlled substance except for lawfully prescribed substance at any place or location, will be subject to discharge, without notice or other warning, in accordance with the principle of employment-at-will.
  - It is a condition of employment for all employees to submit to searches of their persons, work areas, Company vehicles, lockers, personal property (such as clothing, lunch boxes, handbags, and luggage), and personal vehicles for the presence of illegal drugs or other controlled substances or alcohol while at work, or on Host business. Search may be conducted in the manner and under such circumstances as Host may direct when the Company suspects, in the exercise of its discretion, that an employee is possessing or is under the influence of anyillegal drugs, controlled substances, or alcohol.
- It also is a condition of employment for all employees to submit to breath, blood and/or

urine tests for determining the presence of alcohol, illegal drugs, or controlled substances under the circumstances and for the reasons stated under the heading entitled **Testing of Applicants and Employees**, unless otherwise prohibited by applicable state law.

• Refusal to consent to, or failure to cooperate in, a search or test, as described above and as direct by Host, may result in the employee being discharged, without notice or other warning, in accordance with the principles of employment-at-will.

#### **Testing of Applicants and Employees**

- All applicants are required to submit to Host's designated drug and/or alcohol tests before being employed. Applicants who refuse to take such test, refuse or fail to cooperate in their administration, test positive, or who attempt to alter, conceal, or compromise test results, will not be given further consideration for employment.
- It is a condition of employment that employees may be required to submit to Host's approved drug and/or alcohol tests under circumstances that include the following:
  - As part of Company-mandated physical examinations;
  - As part of physical examinations mandated by the United State Department of Transportation;
  - o Incident to investigations of accidents resulting in bodily injury or property damage;
  - Where, in Host's discretion, drug or alcohol involvement is suspected, including, but not limited to:
    - Observed drug or alcohol use;
    - Arrest or conviction for involvement with illegal drugs, other controlled substances, or alcohol abuse;
    - Abnormal, or erratic, behavior or changes in the employee's work performance or attendance;
    - Where there is information satisfactory to Host, in its discretion, that an employee has caused or contributed to an accident at work where illegal drugs, controlled substances or alcohol may have been consumed or otherwise werepresent;
    - Where there is information satisfactory to Host that an employee has been or is manufacturing, distributing, dispensing, using concealing, possessing, or under the influence of any illegal drug, controlled substance, or alcohol, on property owned or controlled by Host, in Company vehicles, or while off the premises performing work for Host;
  - On a periodic or random basis, as directed by Host; and
  - Random or periodic follow-up testing for all employees who have participated in the rehabilitation program described below.

#### **Rehabilitation Program**

- Employees who use or abuse illegal drugs or controlled substances or abuse alcohol, have the opportunity to participate in Host's Employee Assistance Program (EAP). They are encouraged to seek assistance on a voluntary basis
- Participation in a Company-approved counseling, treatment, or rehabilitation program for drug or alcohol use or abuse may not be grounds for discharge provided:
  - The employee voluntarily enters such a program prior to being identified as a drug or alcohol user or abuser by means such as test, or before the employee becomes suspected under circumstances satisfactory to Host of being a drug user or abuser; and
  - The employee has not completed a similar voluntary program in the previous calendar year.

- Any employee in a rehabilitation program who is actively working will be subject to such drug tests as Host may direct.
- Any employee in a rehabilitation program who is not actively working will be required to submit to such as Host may direct upon completion of the program. Applicable Host leave of absence and insurance policies may be utilized with respect to the rehabilitation program.



#### Employee Consent for Drug, Alcohol, AND Inhalant Testing

In addition to requesting an applicant to submit to drug, alcohol or inhalant test, a policy requiring employees to submit to such tests in certain circumstances assists in maintaining a substance-free workplace. The circumstances under which employees are generally requested or required to submit to such tests usually stem from observations, which lead to a reasonable belief that the employee is operating under the influence of drugs, alcohol, or inhalants. There also may be performance problems or accidents, which are otherwise unexplainable.

Even where there is a consistent policy against drug, alcohol, or inhalant use at the workplace, and a policy of requiring employees to submit to a urine or blood test, it is advisable to have employees sign a consent form. Signing the consent gives employees a chance to list any other legal substances they might have consumed which could cause the erratic behavior, thus avoiding confusion with test results.



#### **EMPLOYEE CONSENT FOR DRUG/ALCOHOL/INHALANT TESTING**

\_\_\_\_\_, hereby acknowledge that as a condition

(Print Name)

١, \_

and in consideration of my continuing employment with either T. Parker Host, Host Terminals, LLC or Host Agency, LLC, I may be required to undergo testing and/or examination for drugs, alcohol, or inhalants. I consent to the conduct of such tests and/or examinations as may be required to assure the safety and well-being of all employees, as well as my compliance with the company's drug, alcohol, and inhalant abuse program. I authorize the complete release of the company, any doctor, medical personnel and/or testing facility from any and all liability arising from the release or use of this information. Further, I recognize that any failure to cooperate and/or undergo test and/or examination upon request will constitute grounds for my immediate dismissal.

Name

Date



Host Terminals, LLC 150 West Main Street, Suite 1600 Norfolk, VA 23510 757-627-6286 www.hostterminals.com

February 19, 2020

#### VIA EMAIL AOSORNOBELLEME@BROWARD.ORG

Port Everglades Department ATTN: Angela Osorno Belleme Franchise and Business Permit Manager 1850 Eller Drive, Suite 603 Fort Lauderdale, FL 33316

Re: 2020 Stevedore License Renewal – Outstanding Items

Dear Ms. Belleme,

We are in receipt of your letter dated February 18, 2020 requesting additional information in reference to Page 8, Section P.4 – Frequency of Training.

#### Host's Response:

In addition to the training outlined in Section 7 of our Occupational Health and Safety Program, Host also provides:

1) Daily safety briefings before all operations based on the JSA's.

- 2) Stand down safety meetings if there is a near miss or incident.
- 3) Training/Orientation for all new hires.
- 4) All employees are certified for all equipment that they operate and recertified annually.

If you have any questions or need additional information, please do not hesitate to contact Keri Jenkins at 757-627-6286.

Sincerely. Unter

Cees van de Mortel Chief Commercial Officer

KDJ



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

## is hereby granted to Derrick Graves

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 18. 2019

nerden



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

## is hereby granted to Angel Garcia

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 19. 2019

EXHIBIT 3 Page 90 of 132



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

is hereby granted to Jason Graves

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 18. 2019

EXHIBIT 3 Page 91 of 132



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

is hereby granted to **Kino Woods** 

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 18. 2019

EXHIBIT 3 Page 92 of 132



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

## is hereby granted to Hector Tamburi

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 18. 2019

nes de

EXHIBIT 3 Page 93 of 132



Material Handling Business Solutions Inc.

**Certificate of Completion** 

## is hereby granted to Fritz St Peirre

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018

EXHIBIT 3 Page 94 of 132

Material Handling Business Solutions Inc.

**Certificate of Completion** 



is hereby granted to
Dennis Abel

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018

Jøse A. Sierra

President

EXHIBIT 3 Page 95 of 132

Material Handling Business Solutions Inc.

**Certificate of Completion** 



is hereby granted to Webster Pratt

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018

Jøse A. Sierra

President

EXHIBIT 3 Page 96 of 132

Material Handling Business Solutions Inc.

**Certificate of Completion** 



# is hereby granted to Tarson Bodden

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018

EXHIBIT 3 Page 97 of 132

Material Handling Business Solutions Inc.

**Certificate of Completion** 



is hereby granted to Terrence Coombs

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018

EXHIBIT 3 Page 98 of 132



Material Handling Business Solutions Inc.

**Certificate of Completion** 

# is hereby granted to <u>Johnny Taylor</u>

## to certify that he/she has completed to satisfaction FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: April 17, 2018



**Caribbean Maritime Institute** 

Certificate of Proficiency

This is to certify that

Javíer Rodríquez

Has successfully completed sixteen (16) hours of prescribed training in

Síngle-Líft Dock Gantry Contaíner Crane Símulatíon

slorge

Presenter

. . .. .

<u>*August 11, 2006*</u> Issue Date

- Twie y Authorized Director

EXHIBIT 3 Page 100 of 132



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

# is hereby granted to Josh Sarmiento

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 19. 2019

EXHIBIT 3 Page 101 of 132

-



Material Handling Business Solutions, Inc.

**Certificate of Completion** 

## is hereby granted to Miguel Fernandez

## to certify that he/she has completed to satisfaction CONTAINER HANDLER FORKLIFT DRIVER OSHA CERTIFICATION COURSE

GRANTED ON: March 19. 2019

## **SECTION Q**

## **Q1**

## a) Name and address of the Agency issuing citation or notice

U.S. Department of Transportation, Federal Railroad Administration, Washington, DC

## b) Date of Notice

10/24/2016

## c) Nature of the Violation

At our operation at ECO Energy Terminal in Philadelphia, 2 loose belly cap plugs were found by FRA inspector on unit train released by terminal.

## d) Copies of Infractions

See attached

#### e) Disposition of case

Penalty imposed and fine paid.

### f) Amount of fines

\$18,000

## g) Corrective Action Taken

Unit train checklist updated so that tightening of belly caps is done via the plugs and not the caps themselves. Retraining conducted with all operators, and checklist updated.

## Q2a

## a) Name and address of the Agency issuing citation or notice

U.S. Coast Guard, Sector Miami

### b) Date of Notice

4/17/2015

### c) Nature of the Violation

One of our FSO's was terminated from our security company and we did not update the FSP.

## d) Copies of Infractions

See attached

## e) Disposition of case

Cleared to resume operations.

## f) Amount of fines

None

## g) Corrective Action Taken

Updated FSP.

## Q2b

## a) Name and address of the Agency issuing citation or notice

U.S. Coast Guard, Sector Baltimore

## b) Date of Notice

6/9/2017

## c) Nature of the Violation

A shore crane operated by Host at Tradepoint, LLC was overfilled with diesel. Approximately 10 gallons of diesel spilled into the Patapsco River causing sheen on surface of water. This incident was under the auspices of Host at Tradepoint, LLC; however, issued to Host Terminals as the Managing Member.

## d) Copies of Infractions

See attached

## e) Disposition of case

Warning issued.

## f) Amount of fines

None

## g) Corrective Action Taken

A fuel process SOP was instituted, and a robust Spill Response Program was implemented.

## **Q3**

## a) Name and address of the Agency issuing citation or notice

U.S. Department of Labor, Occupational Safety and Health Administration

## b) Date of Notice

4/28/2016

## c) Nature of the Violation

Other-than-Serious Recordkeeping violation, Part 1904, Subpart D

## d) Copies of Infractions

See attached

## e) Disposition of case

Fine issued.

## f) Amount of fines

\$536.00

## g) Corrective Action Taken

OSHA 300 & 300a logs updated.

EXHIBIT 3 Page 105 of 132

QI

#### U.S. DEPARTMENT OF TRANSPORTATION FEDERAL RAILROAD ADMINISTRATION Washington, D.C. 20590

Mr. Zac Kaye Manager Host Terminals 4747 South Broad Street, Suite 231 Philadelphia, PA 19112

#### Re: FRA No. ZHTE 2016-1(HMT)

Dear Mr. Kaye:

Enclosed please find an Order Assessing Civil Penalty for the above-referenced case. Please follow the specific instructions in the Order for how to pay the penalty, and retain the Order for your records after payment is made.

As stated in the Order, payment of this civil penalty is due within thirty (30) days of the date of this Order and should be made by check, money order, or credit card. Payment by credit card should be made via the Internet at <u>https://www.pay.gov/paygov/</u>. Payment by check or money order should be made payable to the Federal Railroad Administration, show the case number covered by the payment, and be mailed to one of the following addresses:

#### MAILING ADDRESS:

#### **OVERNIGHT EXPRESS:**

DOT/FRA c/o M.M.A.C., AMK-324, HQ-RM 181 P.O. Box 25082 Oklahoma City, OK 73125 DOT/FRA c/o M.M.A.C., AMK-324, HQ-RM 181 6500 South MacArthur Blvd Oklahoma City, OK 73169

A copy of the letter transmitting payment should be sent to the Office of Chief Counsel, Mail Stop 10, FRA, 1200 New Jersey Ave., SE, Washington, DC 20590.

Thank you for your cooperation in resolving this matter. Should you have any additional questions or concerns, please feel free to contact me at 202-493-0273.

Sincerely,

Veronica Chittim Trial Attorney



#### U.S. DEPARTMENT OF TRANSPORTATION FEDERAL RAILROAD ADMINISTRATION Office of Chief Counsel (STOP 10) 1200 New Jersey Avenue, SE Washington, DC 20590

#### NOTICE OF PROBABLE VIOLATION

FRA No. ZHTE 2016-1(HMT)

Date issued:

OCT 2 4 2016

**Respondent: Host Terminals** 

Representative Served: Mr. Zac Kaye Manager Host Terminals 4747 South Broad Street, Suite 231 Philadelphia, PA 19112

No. of Violations: 2

Total Proposed Assessment: \$19,000

The respondent named above is hereby charged with knowingly<sup>1</sup> committing an act or acts that violated the Federal hazardous materials transportation statute, chapter 51 of title 49, United States Code (49 U.S.C. Sections 5101-5128), and/or implementing regulations (title 49, Code of Federal Regulations (CFR), parts 106-179). This proceeding is based on specific allegations set forth in the enclosed FRA investigation report(s). The enclosed Summary of Alleged Violations indicates the penalty amounts FRA proposes.

Assessment of civil penalties of up to \$100,000 for each violation occurring between December 25, 2006, and September 26, 2010, up to \$110,000 for each violation occurring on or after September 27, 2010, and up to \$175,000 for each violation occurring on or after October 1, 2012, is authorized by 49 U.S.C. § 5123, and the Federal Civil Penalties Inflation Adjustment Act of 1990. Each day of a continuing violation constitutes a separate offense. FRA procedures for hazardous materials cases are set forth in 49 CFR part 209. In determining your response, please review the enclosed Explanation of Respondent's Options. FRA reserves the right, should this case not be resolved informally, to reissue this Notice with a more detailed Summary of Alleged Violations prior to a formal hearing and to seek penalties up to the statutory maximum penalty for each violation. See 49 CFR 209.105(c).

Failure to reply to this Notice within thirty (30) days of service, which is the date of issuance, constitutes a waiver of any right to contest the allegations and authorizes the Assistant Chief Counsel, FRA, to find the facts to be as alleged and to assess the proposed civil penalty set forth above. See 49 CFR 209.107(c). Please contact the attorney assigned to this case, Veronica Chittim (veronica.chittim@dot.gov) at (202) 493-0273 or (202) 493-6052 if you need additional information.

Very truly yours,

John T. Seguin Assistant Chief Counsel for Safety

Enclosures:

(1) Summary of Alleged Violations

(2) Explanation of Respondent's Options

(3) Copy of Violation Report(s)

cc: Enforcement Specialist, Case file

1

A person acts "knowingly" within the meaning of the hazardous materials transportation laws when that person has actual knowledge of the facts giving rise to the violation or if a reasonable person acting in the circumstances and exercising due care would have such knowledge. 49 U.S.C. § 5123(a).



#### U.S. DEPARTMENT OF TRANSPORTATION FEDERAL RAILROAD ADMINISTRATION Washington, D.C. 20590

#### **ORDER ASSESSING CIVIL PENALTY**

FRA No. ZHTE 2016-1(HMT)

Issued: JAN - 3 2017

Respondent: Host Terminals

Respondent Served: Mr. Zac Kaye

Manager Host Terminals 4747 South Broad Street, Suite 231 Philadelphia, PA 19112

Having considered the materials attached to the Federal Railroad Administration's (FRA) Notice of Probable Violation (Notice) issued on October 24, 2016 and any response made by respondent's representative, the Assistant Chief Counsel for Safety finds that respondent knowingly<sup>1</sup> committed an act (or acts) in violation of the Hazardous Materials Regulations as alleged in the Notice. Payment of the amount assessed does not constitute agreement by respondent with the finding(s) made and entered by the Assistant Chief Counsel for Safety, nor does it constitute an admission by respondent that any violation has occurred.

The Assistant Chief Counsel for Safety has taken into account the factors specified in 49 CFR § 209.119 in making this assessment.

The Assistant Chief Counsel for Safety, under authority of 49 CFR § 209.111, assesses respondent a total of **\$18,000** for the violation(s) of the Hazardous Materials Regulations specified in the above case.

Payment of this civil penalty is due within 30 days of the date of this order and must be made by check, money order, or credit card. A payment by check<sup>2</sup> or money order must be made payable to the "Federal Railroad Administration" and show the FRA case number(s)

<sup>&</sup>lt;sup>1</sup>A person acts "knowingly" within the meaning of the hazardous materials transportation laws when that person has actual knowledge of the facts giving rise to the violation or if a reasonable person acting in the circumstances and exercising due care would have such knowledge. 49 U.S.C. § 5123(a).

<sup>&</sup>lt;sup>2</sup>By mailing or presenting a completed and signed paper check to FRA, respondent is authorizing the conversion of the check into an electronic transaction, pursuant to the Paper Check Conversion system developed by the U.S. Department of the Treasury (Treasury). The electronic transfer of funds will normally occur within 24 hours of receipt by FRA.

covered by the payment and respondent's Federal tax identification number. <u>The check or</u> <u>money order must be sent to one of the following addresses</u>: DOT/FRA, c/o M.M.A.C., AMK-324, HQ-RM 181, P.O. Box 25082, Oklahoma City, OK 73125. <u>Overnight express</u> <u>payments may be sent to</u> DOT/FRA, c/o M.M.A.C., AMK-324, HQ-RM 181, 6500 South MacArthur Blvd., Oklahoma City, OK 73169. A copy of the letter transmitting payment should be sent to the Office of Chief Counsel (RCC-10, Mail Stop 10), Federal Railroad Administration,1200 New Jersey Avenue, SE, Washington, DC 20590. **Payment by credit card must be made via the Internet at** <u>https://www.pay.gov/paygov</u>/. Instructions for online payment are found at the Web site.

If the full sum due under this order is not paid by respondent within 30 days of its date of issuance, the Federal Aviation Administration's (FAA) Financial Operations Division will start collection activities and may assess interest and administrative charges under 31 U.S.C. § 3717, 31 CFR § 901.9 and 49 CFR § 89.23. A late-payment of six percent (6%) per year may apply to any portion of the debt that is more than 90 days past due. The sum due hereunder (or any outstanding portion thereof) shall bear interest, from the date of this order until fully paid, at the rate (equal to the average investment rate for the Treasury tax and loan accounts for the 12-month period ending on September 30 of each year) determined by Treasury pursuant to 31 U.S.C. § 3717 that is in effect on the date of this order. All accrued interest shall be added to the penalty amount due hereunder. Interest shall be calculated on the basis of a 365-day year. Such charge shall not exceed 6% per annum of the outstanding sum due hereunder. The FAA's Financial Operations Division may refer any debt and associated charges incurred due to respondent's failure to make a payment, to Treasury for collection. Under certain circumstances, Treasury may collect the debt by administrative offset. 31 CFR § 901.3. Under the Debt Collection Act, 31 U.S.C. § 3716(a), a debtor has certain rights prior to an offset. Respondent, as the debtor, has the right to be notified of the following: (1) the nature and amount of the debt; (2) the agency's intention to collect the debt by offset; (3) the right to inspect and copy the agency records pertaining to the debt; (4) the right to request a review within the agency of the indebtedness; and (5) the right to enter into a written agreement with the agency to repay the debt. This order constitutes written notification of these procedural rights.

Assistant Chief Counsel for Safety
EXHIBIT 3 Page 109 of 132

(22a)

## SENSITIVE SECURITY INFORMATION

U.S. Department of Homeland Security United States

Coast Guard



Commander United States Coast Guard Sector Miami 100 MacArthur Causeway Miami Beach, Florida 33139-5101 Staff Symbol: sp Phone: (786) 777-0775 Fax: (786) 777-0791

16600/15-0370 April 20, 2015

MISLE#: 5103363 FIN#: MIAS6096

## FACILITY SECURITY PLAN AMENDMENT # 15-0370

Paradise Point Marine, Inc. Attn: Jonathan Foster 1800 SE 10<sup>th</sup> Ave Fort Lauderdale, FL 33316

Dear Mr. Foster,

On April 17, 2015 you submitted amendments for your Facility Security Plan (FSP) for Paradise Point Marine, Inc in Port Everglades. The following amendments have been reviewed and approved:

- Remove Jose Denis and add Danny Ball as FSO.
- Remove Julia Matos, Ruby Lecounte, Joseph Dufort, Harold Mathis, Patrick Lamarre, Fred Pierrot, Jean St. Paul and Adrienne Johnson as AFSOs.
- Remove escorting by "line of sight monitoring" to a ratio of 5:1 non-TWIC visitors/vendors to security guard and a ratio of 1:1 non-TWIC truck driver to security guard.

Please insert the submitted amendments and a record of changes as a permanent part of your approved FSP. When you annotate your record of changes, please provide the amendment number above. Your facility must operate in compliance with their approved security plan, all approved amendments, and any additional requirements contained in 33 Code of Federal Regulations part 105 (33 CFR 105). A failure to implement all portions of the approved FSP may subject you to civil or criminal penalties prescribed in 33 United States Code 1232 (33 U.S.C. 1232) or 50 United States Code 192 (50 U.S.C. 192) as appropriate.

A copy of this letter shall be maintained with the approved FSP. Any additional requests for amendments under Title 33 Code of Federal Regulations part 105.415 (33 CFR 105.415) must be submitted at least 30 days before the proposed amendment is to take effect. If you have any questions, please contact the Sector Miami's Facilities and Containers Branch at (786) 777-0775.

Sincerely.

T. M. HOWARD Commander, U. S. Coast Guard Captain of the Port By direction

WARNING: This record contains Sensitive Security Information that is controlled under 49 CFR Part 1520. No part of this record may be disclosed to persons without "need to know", as defined in 49 CFR 1520.5, except with the written permission of the Secretary of Homeland Security. Unauthorized release may result in civil penalty or other action. For U.S. Government agencies, public disclosure is governed by 5 U.S.C. 552 and 49 CFR Part 1520.

## EXHIBIT 3 Page 110 of 132

(22b

U.S. Department of Homeland Security



Captain of the Port United States Coast Guard Sector Maryland-NCR

2401 Hawkins Point Road Baltimore, MD 21226-1791 Staff Symbol: sr Phone: (410) 576-2539 Fax: (410) 576-2553

16465 MISLE ACT#: 5737824

JUN 0 9 2017

Host Terminals Attn: Zachary Kaye 1600 Sparrows Point Blvd. Baltimore, MD 21219

#### SUBJECT: WARNING IN LIEU OF A CIVIL PENALTY

Dear Zachary Kaye,

On May 15, 2017 Coast Guard personnel from Sector Maryland-NCR received a report of a discharge of diesel at Tradepoint Atlantic in Baltimore, MD. The oil discharged into the Patapsco River, which is a U.S. navigable waterway. The following violation was identified:

#### Violation Cite: 33 USC 1321(b)(3)

# To wit: Discharge of oil or a hazardous substance into the navigable waters of the United States, adjoining shoreline, or contiguous zone.

Specifically, on May 15, 2017, a shore crane owned by Tradepoint Atlantic and operated by Host Terminals was overfilled with diesel. This caused the oil to overflow onto the deck of a barge moored at Tradepoint Atlantic's pier and into the water. Approximately 10 gallons of diesel was discharged into the Patapsco River, a U.S. navigable waterway, which caused a sheen on the surface of the water.

It has been determined that justice will best be served by issuing you a warning rather than pursuing a monetary civil penalty for your conduct as set forth above. You are advised that this warning will become a matter of Coast Guard record and will be considered for any future enforcement actions against you. Please indicate if you accept or decline the above mentioned warning and return this letter via mail or fax to the address above within 30 days of the date of this letter. If you feel this warning is not warranted, you may decline it; however, your refusal may result in civil penalty proceedings being initiated against you in accordance with Title 33 Code of Federal Regulations, Subpart 1.07. **The maximum civil penalty for the violation cited is \$17,816.00.** If you have any questions, you may contact the Sector Maryland-NCR Incident Management Division at (410) 576-2539.

Sincerely **VID RUHI** DA

Lieutenant, U.S. Coast Guard By Direction of the Captain of the Port

\*\*\*\*\* I hereby accept the above mentioned warning

I hereby **decline** the above mentioned warning

Laye Printed Name and Signature

Date



## U.S. Department of Labor

Occupational Safety and Health Administration 1000 South Pine Island Road Suite 100 Fort Lauderdale, FL 33324 Phone: 954-424-0242 Fax: 954-424-3073

# Citation and Notification of Penalty

## To:

Host Terminals, Inc. division of T. Parker Host, Inc., dba Host Terminals, Inc. division of T. Parker Host, Inc. and its successors

1800 Southeast Tenth Ave. Suite 435 Fort Lauderdale, FL 33316

Inspection Site: 1800 Southeast Tenth Ave.

Suite 435 Fort Lauderdale, FL 33316 Inspection Number: 1139782 Inspection Date(s): 04/14/2016 - 04/14/2016 Issuance Date: 04/28/2016

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.

This Citation and Notification of Penalty (this Citation) describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed herein is (are) based on these violations. You must abate the violations referred to in this Citation by the dates listed and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and Notification of Penalty **you either call to schedule an informal conference (see paragraph below) or** you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. Please refer to the enclosed booklet (OSHA 3000) which outlines your rights and responsibilities and which should be read in conjunction with this form. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless this Citation is affirmed by the Review Commission or a court.

**Posting** - The law requires that a copy of this Citation and Notification of Penalty be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because of the nature of the employer's operations, where it will be readily observable by all affected employees. This Citation must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

Informal Conference - An informal conference is not required. However, if you wish to have such a

Citation and Notification of Penalty

Page 1 of 8

**Employer Discrimination Unlawful** – The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he/she has been discriminated against may file a complaint no later than 30 days after the discrimination occurred with the U.S. Department of Labor Area Office at the address shown above.

Employer Rights and Responsibilities – The enclosed booklet (OSHA 3000) outlines additional employer rights and responsibilities and should be read in conjunction with this notification.

Notice to Employees – The law gives an employee or his/her representative the opportunity to object to any abatement date set for a violation if he/she believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above and postmarked within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and Notification of Penalty.

**Inspection Activity Data** – You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this citation. You are encouraged to review the information concerning your establishment at www.osha.gov. If you have any dispute with the accuracy of the information displayed, please contact this office.

Page 3 of 8

**U.S. Department of Labor** Occupational Safety and Health Administration



# NOTICE TO EMPLOYEES OF INFORMAL CONFERENCE

An informal conference has been scheduled with OSHA to discuss the citation(s) issued on 04/28/2016. The conference will be held by telephone or at the OSHA office located at 1000 South Pine Island Road, Suite 100, Fort Lauderdale, FL 33324 on \_\_\_\_\_\_ at . Employees and/or representatives of employees have a right to attend an

informal conference.

Page 4 of 8

## CERTIFICATION OF CORRECTIVE ACTION WORKSHEET

Inspection Number: 1139782

Company Name: Host Terminals, Inc. division of T. Parker Host, Inc., dba Host Terminals, Inc. division of T. Parker Host, Inc.

Inspection Site: 1800 Southeast Tenth Ave., Suite 435, Fort Lauderdale, FL 33316 Issuance Date: 04/28/2016

List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return to: U.S. Department of Labor – Occupational Safety and Health Administration, 1000 South Pine Island Road, Suite 100, Fort Lauderdale, FL 33324

Citation Number By (Method of Abate	and Item Number ement):	was corrected on	
Citation Number By (Method of Abate	and Item Number ement):	was corrected on	
Citation Number	and Item Number	was corrected on	
Citation Number By (Method of Abate	and Item Number ement):	was corrected on	
Citation Number By (Method of Abate	ement):	was corrected on	
Citation Number By (Method of Abate	and Item Number	was corrected on	

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

Signature	Date
Typed or Printed Name	Title

NOTE: 29 USC 666(g) whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment of not more than 6 months or both.

POSTING: A copy of completed Corrective Action Worksheet should be posted for employee review

Citation and Notification of Penalty

:

Page 5 of 8

U.S. Department of Labor Occupational Safety and Health Administration Inspection Date(s): 04/14/2016 - 04/14/2016

**Inspection Number:** 1139782 Issuance Date: 04/28/2016



# Citation and Notification of Penalty

Company Name: Host Terminals, Inc. division of T. Parker Host, Inc., dba Host Terminals, Inc. division of T. Parker Host, Inc. Inspection Site: 1800 Southeast Tenth Ave., Suite 435, Fort Lauderdale, FL 33316

# Citation 1 Item 1 Type of Violation: Other-than-Serious

29 CFR 1904.33(b)(1): During the five year storage period, the employer did not update the stored OSHA 300 Logs to include newly discovered recordable injuries or illnesses and to show any changes that had occurred in the classification of previously recorded injuries and illnesses.

On or about 04/14/2016, at the above addressed location, OSHA 300 and 300A logs had not been updated to reflect recordable injuries.

Date By Which Violation Must be Abated: Proposed Penalty:

05/04/2016 \$536.00

Condell Eastmond Area Director

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

Citation and Notification of Penalty

Page 6 of 8

U.S. Department of Labor Occupational Safety and Health Administration 1000 South Pine Island Road Suite 100 Fort Lauderdale, FL 33324 Phone: 954-424-0242 Fax: 954-424-3073



\$536.00

# INVOICE / DEBT COLLECTION NOTICE

Company Name: division of T. Parker Inspection Site: Issuance Date:		arker Host, Inc., dba Host Terminals, Inc. 5, Fort Lauderdale, FL 33316
Summary of Penaltie	s for Inspection Number	1139782
Citation 1, Other-tha	n-Serious	\$536.00

TOTAL PROPOSED PENALTIES

To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance. You can also make your payment electronically on <u>www.pay.gov</u>. On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on <u>OSHA Penalty Payment Form</u>. The direct link is <u>https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334</u>. You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will cash the check or money order as if these restrictions or conditions do not exist.

If a personal check is issued, it will be converted into an electronic fund transfer (EFT). This means that our bank will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will then usually occur within 24 hours and will be shown on your regular account statement. You will not receive your original check back. The bank will destroy your original check, but will keep a copy of it. If the EFT cannot be completed because of insufficient funds or closed account, the bank will attempt to make the transfer up to 2 times.

Citation and Notification of Penalty

Page 7 of 8

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

Interest: Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is one percent (1%). Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

**Delinquent Charges**: A debt is considered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

<u>Administrative Costs</u>: Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.

04/28/16

Date

Condell Eastmond Area Director

Page 8 of 8

conference you may request one with the Area Director during the 15 working day contest period. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation(s) and/or penalty(ies).

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of this Citation. The running of this contest period is not interrupted by an informal conference.

If you decide to request an informal conference, please complete, remove and post the Notice to Employees next to this Citation and Notification of Penalty as soon as the time, date, and place of the informal conference have been determined. Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

**Right to Contest** – You have the right to contest this Citation and Notification of Penalty. You may contest all citation items or only individual items. You may also contest proposed penalties and/or abatement dates without contesting the underlying violations. <u>Unless you inform the Area Director in writing that you intend</u> to contest the citation(s) and/or proposed penalty(ies) within 15 working days after receipt, the citation(s) and the proposed penalty(ies) will become a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency.

**Penalty Payment** – Penalties are due within 15 working days of receipt of this notification unless contested. (See the enclosed booklet and the additional information provided related to the Debt Collection Act of 1982.) Make your check or money order payable to "DOL-OSHA". Please indicate the Inspection Number on the remittance. You can also make your payment electronically on <u>www.pay.gov</u>. On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on <u>OSHA Penalty Payment Form</u>. The direct link is:

## https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334.

You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will process the payments as if these restrictions or conditions do not exist.

**Notification of Corrective Action** – For each violation which you do not contest, you must provide *abatement certification* to the Area Director of the OSHA office issuing the citation and identified above. This abatement certification is to be provided by letter within 10 calendar days after each abatement date. Abatement certification includes the date and method of abatement. If the citation indicates that the violation was corrected during the inspection, no abatement certification is required for that item. The abatement certification letter must be posted at the location where the violation appeared and the corrective action took place or employees must otherwise be effectively informed about abatement activities. A sample abatement certification letter is enclosed with this Citation. In addition, where the citation indicates that *abatement documentation* is necessary, evidence of the purchase or repair of equipment, photographs or video, receipts, training records, etc., verifying that abatement has occurred is required to be provided to the Area Director.

Citation and Notification of Penalty

EXHIBIT 3 Page 119 of 132

# Enviros - Enforcement Action Advanced Search

	Broward.org   Government   Agencies   Services   Resident	rs   Businesses   Visitors
BROWARI Our Best. No	D.org	Search County Government
Home County Comm	nission Doing Business Visiting	
ENVIROS		
	Enforcement Action Advanced Search	
Search Reset		
No information wa again.	s found matching your selection criteria. Please try	
Enforcement Action Numbe	r:	
House Number: Street:	To:	
City:	(All) V Zip: (All) V	
Section:	[(All) ✓ Township: [(All) ✓ Range: [(All) ✓	
Respondent:	Host Terminals, LLC	
		Help on this pa Screen ID: 23473
	Contact Us     Comments and Suggestions     Comments and Suggestions     Report a Complaint     Site Map	

Page 1 of 1

# Enviros - Enforcement Action Advanced Search

EXHIBIT 3 Page 120 of 132 Page 1 of 1

	Broward.org   Government   Agencies   Ser	vices   Residents   Businesses   Visitors	
BROWARI Our Best. No	D.org	Search County Government	
Home County Comm	nission Doing Business Visiting		
ENVIROS Search Reset	Enforcement Action Advanced Sear	rch	
No information was again.	s found matching your selection criteria. Plea	ase try	
Enforcement Action Number	r:		
House Number: Street:	To:		
City:	(All) V Zip: (All) V		
Section:	(All)     V     Township:     (All)     V       Range:     (All)     V		
Respondent:	Host Terminals, Inc.		
		He	elp on this pa Screen ID: 23473
	<ul> <li>Contact Us</li> <li>Comments and Suggestions</li> <li>Report a Complaint</li> <li>Site Map</li> </ul>	Broward.org     Terms of Use     Subscribe	Connected

EXHIBIT 3 Page 121 of 132

# Florida Hazardous Waste Handler Search Results

Page 1 of 1

Florída Department of Environmental Protection				
mg .	Matthe Lepin	1. CAR	all the second	
Flo	orida Department of Environ	nmental Protec	tion	
Haz	ardous Waste Facilitie	es Search Ro	esults	
Selection Criteria for This Handler EPAID: % ; Name: HOST TERMIN.		; City: % ; Co	ounty: %	
For Facility Data Links:	For a Generator Status His	tory:		
Activities provides a list of RCRA compliance activities and violations.	click on the <b>Status.</b> - <b>NNOT</b> issued the associated EPAID			
Mapping in GIS this opens a [NEW [MPROVED] GIS mapping tool focused of the facility.	Legend of Status Types			
Documents this provides a list of				
electronic documents available online. Error Reporting send us feedback to				
address data errors.				
<b>C</b> ounty Verification County or RPC verification of Facility and Waste for this				
site.				
EPA ID Name County Search has retri <mark>eved 0 Faciliti</mark> es	Address Contact	Status	As of	Data Links
Legend of Status Types:				
CES - Conditionally Exempt Small Qu	antity Generator			
TSD - Treatment/Storage/Disposal Fac	cility			
	iste			
Search has retrieved 0 Facilities Legend of Status Types: LQG - Large Quantity Generator SQG - Small Quantity Generator CES - Conditionally Exempt Small Qu UOT - Used Oil Transporter TRA - Hazardous Waste Transporter	uantity Generator	Status	As of	Data Links

https://fldeploc.dep.state.fl.us/www\_rcra/reports/handler\_results.... 2/18/2020

# Florida Hazardous Waste Handler Search Results

Florida Department of Environmental Protection Hazardous Waste Facilities Search Results								
Selection Criteria for This Handler EPAID: % ; Name: <mark>HOST TERMIN</mark>		; Address: % ;	City: % ; Co	ounty: %				
<b>For Facility Data Links:</b> <b>A</b> ctivities provides a list of RCRA compliance activities and violations.	click on the		indicates a faci		otifier and may not have been using that EPAID!			
<ul> <li>Mapping in GIS this opens a [NEW IMPROVED] GIS mapping tool focused the facility.</li> <li>Documents this provides a list of electronic documents available online.</li> <li>Error Reporting send us feedback to address data errors.</li> <li>County Verification County or RPC verification of Facility and Waste for this site.</li> </ul>		<u>Status Types</u>						
EPA ID Name County Search has retrieved <mark>0 Facilities</mark>	Address	Contact	Status	As of	Data Links			
Legend of Status Types: LQG - Large Quantity Generator SQG - Small Quantity Generator CES - Conditionally Exempt Small Q UOT - Used Oil Transporter TRA - Hazardous Waste Transporter TSD - Treatment/Storage/Disposal Fa CLO - Closed NHR - Non-Handler of Hazardous W	acility	ator						

https://fldeploc.dep.state.fl.us/www\_rcra/reports/handler\_results.... 2/19/2020

EXHIBIT 3 Page 123 of 132

Establishment Search Page | Occupational Safety and Health Administration Page 1 of 2 🕇 🔰 🖸 🔊 🖂 🖸 DEPARTMENT OF LABOR

Occupational Safety and Health Administration				
Q SEARCH OSHA				
OSHA Y STANDARDS Y TOPICS Y HELP AND RESOURCES Y Contact Us FAQ A to Z Index English				
Español				

# **Establishment Search**

# Reflects inspection data through 02/13/2020

This page enables the user to search for OSHA enforcement inspections by the name of the establishment. Information may also be obtained for a specified inspection or inspections within a specified SIC.

	Yo	ur searcl	h did not return any results	s.	
Establishment	Host Terminals, LLC				
	(This box can also be used t	to search f	for a State Activity Number for	r the following states: NC, SC, KY, IN, O	R and WA)
State	All States	$\checkmark$	Fed & State	$\checkmark$	
OSHA Office	All Offices	~			
Site Zip Code					
Case Status	All      Closed      Op	en			
Violation Status	All      With Violations	⊖ With	nout Violations		
	All      With Violations	() With	nout Violations		
Violation Status	All      With Violations	() With	nout Violations		
	All O With Violations     January	<ul> <li>With</li> </ul>	1 2015		
Inspection Date					
Inspection Date Start Date	January		1 💟 2015 🗸		

https://www.osha.gov/pls/imis/establishment.html?p\_message=2&establishm... 2/18/2020

EXHIBIT 3 Page 124 of 132

# Establishment Search Page | Occupational Safety and Health Administration Page 2 of 2

state agencies which carry out reuerally approved using programs. Access to this Using work product is being anorded with the internet for the use of members of the public who wish to track OSHA interventions at particular work sites or to perform statistical analyses of OSHA enforcement activity. It is critical that users of the data understand several aspects of the system in order to accurately use the information.

The source of the information in the IMIS is the local federal or state office in the geographical area where the activity occurred. Information is entered as events occur in the course of agency activities. Until cases are closed, IMIS entries concerning specific OSHA inspections are subject to continuing correction and updating, particularly with regard to citation items, which are subject to modification by amended citations, settlement agreements, or as a result of contest proceedings. THE USER SHOULD ALSO BE AWARE THAT DIFFERENT COMPANIES MAY HAVE SIMILAR NAMES AND CLOSE ATTENTION TO THE ADDRESS MAY BE NECESSARY TO AVOID MISINTERPRETATION.

The Integrated Management Information System (IMIS) is designed and administered as a management tool for OSHA to help it direct its resources. When IMIS is put to new or different uses, the data should be verified by reference to the case file and confirmed by the appropriate federal or state office. Employers or employees who believe a particular IMIS entry to be inaccurate, incomplete or out-of-date are encouraged to contact the OSHA field office or state plan agency which originated the entry.

# UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration 200 Constitution Ave NW Washington, DC 20210 \$ 800-321-6742 (OSHA) TTY www.OSHA.gov

#### FEDERAL GOVERNMENT

White House Severe Storm and Flood Recovery Assistance Disaster Recovery Assistance DisasterAssistance.gov USA.gov No Fear Act Data U.S. Office of Special Counsel

#### OCCUPATIONAL SAFETY AND HEALTH

Frequently Asked Questions A - Z Index Freedom of Information Act Read the OSHA Newsletter Subscribe to the OSHA Newsletter OSHA Publications Office of Inspector General

#### ABOUT THE SITE

Freedom of Information Act Privacy & Security Statement Disclaimers Important Website Notices Plug-Ins Used by DOL Accessibility Statement

EXHIBIT 3
Page 125 of 132

Establishment Search Results Page | Occupational Safety and Health Admin... Page 1 of 2

UNITED STATES DEPARTMENT OF LABOR

LABOR

f 🖌 🖸 🎐 🖂 🖸

Occu	pational Safety and Health Administration		•	Menu
٩	SEARCH OSHA			
OSHA	✓ STANDARDS ✓ TOPICS ✓ HELP AND RESOURCES ✓ Contact Us FAQ A to Z Index	English		
		Español		

# Establishment Search Results

Establishment	Date Range	Office	Zipcode	State
Host Terminals Inc.	01/01/2015 to 02/16/2020	all	all	all

Please note that inspections which are known to be incomplete will have the identifying Activity Nr shown in italic. Information for these open cases is especially dynamic, e.g., violations may be added or deleted.

Sort By: Date   Name   Office   State	
---------------------------------------	--

Results 1 - 2 of 2

Return to Search O

# By Date

Get Detail Select All Reset # Activity Opened RID Sc SIC NAICS Vio **Establishment Name** St Туре 1139782.015 04/14/2016 0418800 FL Planned Complete 483112 1 Host Terminals, Inc. Division Of T. Parker Host, Inc. 1 2 1092033.015 09/15/2015 0418800 FL Referral Partial 488320 Host Terminals, Inc.

# UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration 200 Constitution Ave NW Washington, DC 20210 \$ 800-321-6742 (OSHA) TTY www.OSHA.gov

## FEDERAL GOVERNMENT

White House Severe Storm and Flood Recovery Assistance Disaster Recovery Assistance DisasterAssistance.gov USA.gov

## OCCUPATIONAL SAFETY AND HEALTH

Frequently Asked Questions A - Z Index Freedom of Information Act Read the OSHA Newsletter Subscribe to the OSHA Newsletter

#### ABOUT THE SITE

Freedom of Information Act Privacy & Security Statement Disclaimers Important Website Notices Plug-Ins Used by DOL

https://www.osha.gov/pls/imis/establishment.search?p\_logger=1&establishm... 2/19/2020

EXHIBIT 3 Page 126 of 132 Establishment Search Results Page | Occupational Safety and Health Admin... Page 2 of 2 No Fear Act Data U.S. Office of Special Counsel Office of Inspector General

Inspection Detail   Occupational Safety and Health Administration	Page 127 of 132 Page 1 of 2
DEPARTMENT OF LABOR $\mathbf{f} \neq \mathbf{O} \mathbf{h} \simeq \mathbf{O}$	
Occupational Safety and Health Administration	<ul> <li>Menu</li> </ul>
Q SEARCH OSHA	
OSHA 🌱 STANDARDS 🌱 TOPICS 🌱 HELP AND RESOURCES 🌱 Contact Us FAQ A to Z Index En	glish
Es	pañol

**EXHIBIT 3** 

# **Inspection Detail**

Inspection Type:

**Current Penalty** 

FTA Amount

Scope:

Ownership:

		Case Status: CLOSED	
Inspection: 1	.139782.015 - Host Termin	<mark>als, Inc.</mark> Division Of T. Parker Host, I	inc.
	Inspection Information	- Office: Ft. Lauderdale	
Nr: 1139782.015	Report ID: 0418800	Open Date: 04/14/2016	
1800 Southeast Tenth Fort Lauderdale, FL 33		Union Status: NonUnion	
SIC: NAICS: 483112/Deep	Sea Passenger Transportation		

Ν

Advanced Notice:

\$0 \$536

\$0

\$0

Safety/Health: Emphasis:			Safety P:Maritime, L:Maritime		Close Conf <mark>Close Case</mark>		/	14/2016 <mark>13/2017</mark>	
						Case	Status: (	CLOSED	
	Vie	olation S	Summary						
	Serious	Willful	Repeat	Other	Unclass	Total			
Initial Violations				1		1			
Current Violations				1		1			
Initial Penalty	\$0	\$0	\$0	\$536	\$0	\$536			

\$0

\$0

Mailing: 1800 Southeast Tenth Ave. Suite 435, Fort Lauderdale, FL 33316

Planned

Private

\$0

\$0

\$0

\$0

Complete

Violation Items										
#	ID	Туре	Standard	Issuance	Abate	Curr\$	Init\$	Fta\$	Contest	LastEvent
1.	01001	Other	19040033 B01	04/28/2016	05/04/2016	\$536	\$536	\$0		Z - Issued

\$536

\$0

UNITED STATES DEPARTMENT OF LABOR

# Inspection Detail | Occupational Safety and Health Administration

Occupational Safety and Healt 200 Constitution Ave NW Washington, DC 20210 \$ 800-321-6742 (OSHA) TTY www.OSHA.gov

### FEDERAL GOVERNMENT

White House Severe Storm and Flood Recovery Assistance Disaster Recovery Assistance DisasterAssistance.gov USA.gov No Fear Act Data U.S. Office of Special Counsel

#### **OCCUPATIONAL SAFETY AND HEALTH**

Frequently Asked Questions A - Z Index Freedom of Information Act Read the OSHA Newsletter Subscribe to the OSHA Newsletter OSHA Publications Office of Inspector General

## ABOUT THE SITE

Freedom of Information Act Privacy & Security Statement Disclaimers Important Website Notices Plug-Ins Used by DOL Accessibility Statement

EXHIBIT 3 Page 128 of 132 Page 2 of 2

# **SECTION Q4 – Commitment to Environment**

Host Terminals is fully committed to protecting, preserving and enhancing the environment at Port Everglades, and all locations where Host operates and/or provides services.

Land, water and air quality are the upmost concern to Host Terminals.

In addition to complying fully with all state, local and federal environmental rules, regulation, statutes and laws, Host Terminals is proactive concerning environmental protection, environmental maintenance and environmental enhancement at Port Everglades and locations where Host operates and/or provides services.

# SECTION R – Ability to promote and develop Growth

It is our intention to continue to look for ways to increase revenue stream and business development for Host Terminals by using our long-standing relationships with principles both locally and commercially in Port Everglades.

Our team's commitment to servicing our current customers and dedication to providing them exceptional service and solutions while adding value instead of cost will be the tool that we will use to grow our business within the port.

We will continue to serve both the community and port stakeholders as a partner in order to also increase overall growth of both our business in Port Everglades and that of the port itself.

# EXHIBIT 3 Page 131 of 132

# Detail by Entity Name

Florida Department of State

DIVISION OF CORPORATIONS

Page 1 of 2

DIVISION OF CORPORATIONS on offerent Shore of Chorenta author

Department of State / Division of Corporations / Search Records / Detail By Document Number /

# **Detail by Entity Name**

Foreign Limited Liability Company HOST TERMINALS, LLC

#### **Filing Information**

Document Number	M18000003837
FEI/EIN Number	54-1997373
Date Filed	04/19/2018
State	VA
Status	ACTIVE

## **Principal Address**

150 Main St Ste 1600 Norfolk, VA 23510

Changed: 01/16/2020

## **Mailing Address**

150 Main St Ste 1600 Norfolk, VA 23510

Changed: 01/16/2020

## **Registered Agent Name & Address**

C T CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324

## Authorized Person(s) Detail

Name & Address

Title member

Anderson, Garrett Adam 150 Main St Ste 1600 Norfolk, VA 23510

Title CEO, President

Anderson, Garrett Adam

EXHIBIT 3 Page 132 of 132

Page 2 of 2

# Detail by Entity Name

150 Main St Ste 1600 Norfolk, VA 23510

Title Vice President of Terminal Operations

Callahan, Patrick R. 150 Main St Ste 1600 Norfolk, VA 23510

Title COO

Caplan, Andrew J. 150 Main St Ste 1600 Norfolk, VA 23510

Title Chief Commercial Officer

VandeMortel, Cees 150 Main St Ste 1600 Norfolk, VA 23510

## **Annual Reports**

Report Year	Filed Date
2019	04/26/2019
2020	01/16/2020

## **Document Images**

01/16/2020 ANNUAL REPORT	View image in PDF format
04/26/2019 ANNUAL REPORT	View image in PDF format
04/19/2018 Foreign Limited	View image in PDF format

Florida Department of State, Division of Corporations