

RESOLUTION NO. 2024-491

**A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AMENDING THE FISCAL YEAR 2025 FIRE DISTRICT FUND BUDGET TO RECEIVE UNANTICIPATED REVENUE AND AUTHORIZE ITS EXPENDITURE BY THE ST. JOHNS COUNTY FIRE RESCUE DEPARTMENT FOR THE REPLACEMENT OF A BATALLION CHIEF TRUCK.**

**WHEREAS**, St. Johns County has a Fire Rescue department which operates through the Fire District Fund; and

**WHEREAS**, the County has received an insurance payment for the replacement of damaged Fire Chief truck; and

**WHEREAS**, St. Johns County, Florida, when preparing its budget for Fiscal Year 2025, did not anticipate this payment and

**WHEREAS**, the revenue of \$43,974.25 is intended to be used for replacement of a damaged Fire Chief truck.

**NOW THEREFORE, BE IT RESOLVED** by the Board of County Commissioners of St. Johns County, Florida, that:

1. The above recitals are hereby adopted as legislative findings of fact and incorporated herein.
2. The Fire District Fund revenue and expenditure budgets shall be adjusted to account for unanticipated funds from insurance in the amount of \$43,974.25 for Fiscal Year 2025.

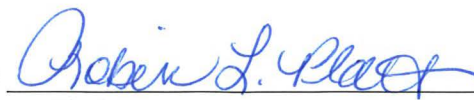
**PASSED AND ADOPTED** by the Board of County Commissioners of St. Johns County, State of Florida, this 5th day of November 2024.

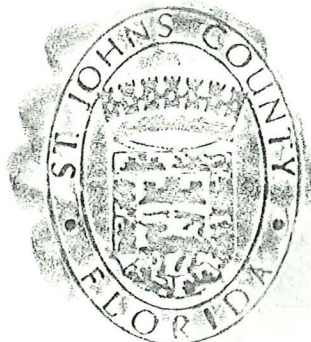
**BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA**

Rendition Date NOV 07 2024

By:   
Sarah Arnold, Chair

**ATTEST: Brandon J. Patty, CLERK OF THE CIRCUIT COURT & COMPTROLLER**

By:   
Deputy Clerk



**From:** [Amy Land](#)  
**To:** [Andrea R. Matzke](#)  
**Subject:** FW: Ford Expedition/claim FLCM24030632  
**Date:** Friday, October 4, 2024 9:14:11 AM  
**Attachments:** [image002.png](#)  
[St John ccc.pdf](#)  
[FL SAMPLE FRONT & BACK OF TITLE.pdf](#)  
[St John letter of auth template.pdf](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)  
[image009.png](#)  
[image010.png](#)  
[image011.png](#)

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Andrea,  
The email below is all I received for the Expedition.  
Thanks,



**Amy Land**  
*Finance Coordinator*  
St. Johns County Fire Rescue  
St. Johns County Board of County Commissioners  
3657 Gaines Road, St. Augustine, FL 32084  
P: 904-209-1717 Direct line  
904-209-1700 | F: 904-209-1794  
[www.sjcfl.us](http://www.sjcfl.us)

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**From:** Rodney Marcum <[rmarcum@sjcfl.us](mailto:rmarcum@sjcfl.us)>  
**Sent:** Thursday, April 25, 2024 8:18 AM  
**To:** Amy Land <[aland@sjcfl.us](mailto:aland@sjcfl.us)>  
**Subject:** FW: Ford Expedition/claim FLCM24030632

Morning Amy, FYI on the totaled Expedition.

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**From:** Christina F. Dennes <[cdennes@glatfelters.com](mailto:cdennes@glatfelters.com)>  
**Sent:** Wednesday, April 24, 2024 3:28 PM  
**To:** Rodney Marcum <[rmarcum@sjcfl.us](mailto:rmarcum@sjcfl.us)>  
**Subject:** Ford Expedition/claim FLCM24030632

Good Afternoon Rodney

As discussed, the car was deemed a total loss. The value for the car is \$43,974.25 and that is for us to purchase the car. The evaluation report is attached, please review to make sure everything looks correct.

I have put a stop pay on the original check for \$13438.62.

Your department's policy also provides coverage for the cost to transfer the installed emergency equipment from the damaged vehicle to another vehicle. If any of the installed emergency equipment was damaged in the accident, we will also pay to repair or replace the damaged item. If replacement of the item is necessary, we would pay the cost of a new item of like, kind and quality. **The policy does not cover the cost to replace any emergency equipment that was not damaged but which is not compatible or useable in another vehicle.** The coverage does pay for the cost to place similar graphics on the replacement vehicle. You just need to forward any invoices or estimates, these will get paid separately from the vehicle.

Please forward quotes/estimates for the costs to transfer, graphics and damaged items.

When the car is ready, let me know and I'll make arrangements to have it picked up.

In order to issue payment, I will need the following:

\*original signed title-I've attached a sample FL for your reference. It gets signed on the front. Whoever signs the title should sign their name, print their name/position "on behalf of St Johns Cty Bd of Commissioners"

\*include either a business card for the person signing or a letter of authorization-see attached template. If you use the template, It will need copy/pasted onto company letterhead and signed by someone who can designate the person signing the title. you can not authorize yourself.

I recommend sending the title to my attention via a traceable method such as UPS, Fed-X or Priority Mail. Our address is:

Glatfelter Claims Management  
183 Leader Heights Rd (UPS or Fed-X)  
York PA 17402  
Or  
PO Box 5126 (Priority Mail)  
York PA 17405

I will reimburse you for expenses to mail the title. You may scan/fax a copy of the receipt to my attention.

Let me know if you have any questions.



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**Christina Dennes, AIC**

(CA License #4114599\*)

**Liability Claims Representative**

VFIS Claims Management Inc.

(CA Adjuster License #2D89880)

P.O. Box 5126 | York, PA 17405

d: 717.741.7712 | 800.233.1957 ext. 7712 | f: 717.747.7051

[cdennes@glatfelters.com](mailto:cdennes@glatfelters.com)

\*License of Heath Conrad, Qualified Manager

This correspondence is sent by Glatfelter Claims Management as authorized administrator for National Union Fire Insurance Company of Pittsburgh PA, Lexington Insurance Company, AIG Specialty Insurance Company and California Rural Water Risk Management Authority.

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