

Parks and Recreation Dept.

City of Pompano Beach, Florida

1190 NE 3rd Avenue, Bldg C Pompano Beach, Florida 33060 | p: 954.786.4098 | f: 954.786.4168

APPROVED *Brittney Dixon*
By Brittney Dixon at 5:57 pm, Apr 13, 2026

4.13.26

Pompano Beach Firefighters Benevolent
10777 NW 10th Place
Coral Springs, FL 33071

Dear Hector Jimenez,

Your company has fewer than four employees, and you have elected not to purchase Workers' Compensation insurance to cover these employees. The State of Florida allows your company to operate without insurance, however, you are required by the State to "post clear written notice in a conspicuous location at each worksite directed to all employees and other persons performing services at the worksite of their lack of entitlement to benefits" as described in Chapter 440 of the Florida Statutes.

The City of Pompano Beach requires: **ALL CONTRACTORS MUST AGREE TO BE RESPONSIBLE FOR THE EMPLOYMENT, CONTROL AND CONDUCT OF THEIR EMPLOYEES AND FOR ANY INJURY SUSTAINED BY SUCH EMPLOYEES IN THE COURSE OF THEIR EMPLOYMENT.**

Please sign the area below acknowledging your compliance with the above requirements. Return this original letter to me at 1801 NE 6th St, Pompano Beach, 33060. If you have any questions about this letter please telephone me at .

Very truly yours,

Kate Belcher
Recreation Manager

Pompano Beach Firefighters Benevolent has posted notice(s) declaring the absence of Workers' Compensation insurance coverage, as required by the State of Florida **Pompano Beach Firefighters Benevolent**. agrees to be responsible for the employment, control and conduct of our employees and for any injury sustained by such employees in the course of their employment.


Signature

4/13/26

Date

Hector Jimenez/ Director

Name and Title (print)