

Finance Department 1204 NE 201st Avenue Fairview, OR 97024 503-661-7200

May 24, 2016

General Contractor Prequalification Application HB Lee Middle School HVAC Upgrades

Addendum #1

From:

Robert Collins

Senior Project Manager Day CPM Services

General Contractor Prequalification Application

HB Lee Middle School HVAC Upgrades

Reynolds School District

The General Contractor Prequalification Application for the above referenced project and the work covered are modified as follows, and except as set forth herein, otherwise remain unchanged and in full effect. This addendum is part of the General Contractor Prequalification Application Documents for the above named project and modifies the original General Contractor Prequalification Application Documents dated May 16, 2016. Acknowledgement of receipt of this addendum is required as part of the General Contractor Prequalification Application.

<u>Item #1 Coversheet</u>, (Changes in <u>italic & underlined</u> to read as follows)

| Application Deadline: | 2:00:00 PM, <u>May 31, 2016</u> |
|-------------------------|---|
| Submit Applications to: | Physical Address: Reynolds School District No. 7 RE: General Contractor Prequalification Application HB Lee Middle School HVAC Upgrades 1121 NE 172 ND Avenue Portland, Oregon 97230 US Mail Address: Attn: Rachel Hopper Reynolds School District No. 7 1204 NE 201st Avenue Fairview, OR 97024 The applicant is solely responsible for assuring the application is delivered to the Bid Desk by the application due date and time. |



<u>Item #2</u> <u>Introduction,</u> (Changes in <u>italic & underlined</u> to read as follows)

Tentative Schedule:

| Advertise Invitation to Bid | June 10, 2016 |
|-----------------------------|--|
| Bid Opening | June24, 2016 |
| Notice of Intent to Award | June 25,2016 |
| Contract Execution | July 7, 2016 |
| Construction | July 7, 2016 – <u>September 30, 2016</u> |

The estimated bidding schedule and construction schedule for the Project are subject to change. Applicant shall be responsible for obtaining bid documents that may contain modifications to the schedule set forth above.

<u>Item #3 1. Instructions</u>, (Changes in <u>italic & underlined</u> to read as follows)

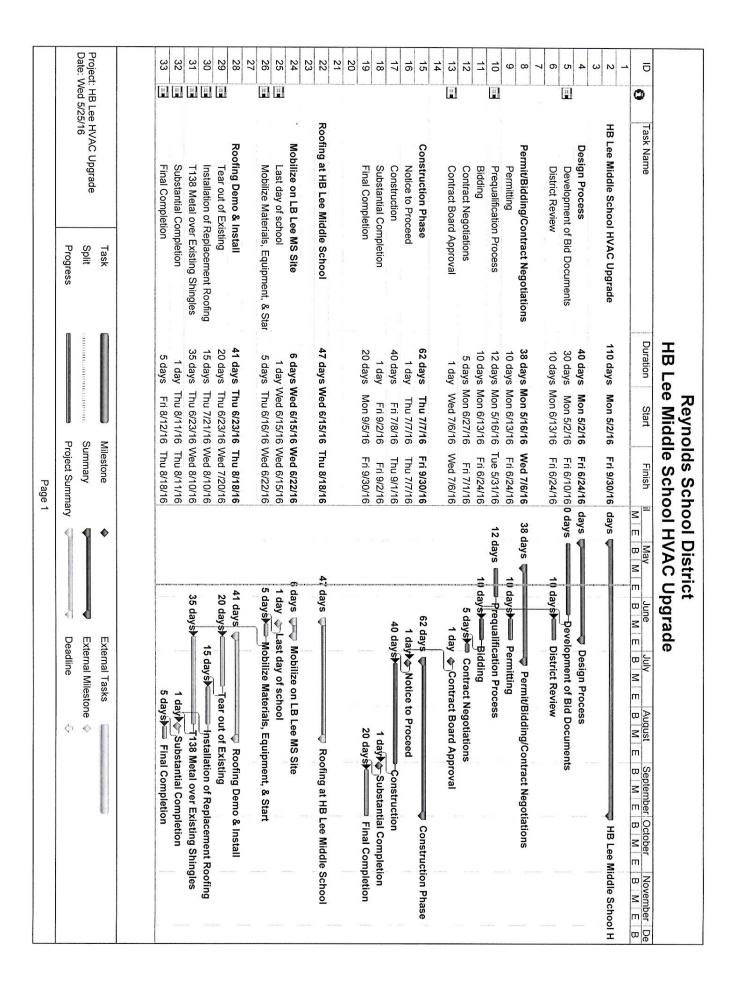
1. Applications are due no later than Tuesday May 31, 2016 at 2:00 PM, PST.

Item #4 V. Confidentiality,

The scheduled bid opening date is June 24, 2016.

Item #5 Draft Schedule (attschment),

End of Addendum #1





Reynolds School District No. 7 Fairview, Oregon

GENERAL CONTRACTOR PREQUALIFICATION APPLICATION

HB Lee Middle School HVAC Upgrade

(Mandatory Prequalification of General Contractor)

| Application Deadline: | 2:00:00 PM, May 30, 2016 |
|-------------------------|---|
| Submit Applications to: | Physical Address: Reynolds School District No. 7 RE: General Contractor Prequalification Application HB Lee Middle School HVAC Upgrades 1204 NE 201st Avenue Fairview, OR 97024 US Mail Address: Attn: Rachel Hopper Reynolds School District No. 7 1204 NE 201st Avenue Fairview, OR 97024 The applicant is solely responsible for assuring the application is delivered to the Bid Desk by the application due date and time. |
| Direct Questions to: | Robert Collins (Project Manager) Email: reollins@daycpm.com Phone: 503-434-3650 |
| Electronic Responses: | Electronic or faxed responses shall not be accepted or considered. |

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Introduction

Reynolds School District ("District") requires mandatory prequalification of general contractor (prime) prospective bidders for the following Work:

In General, the project includes demolition of existing HVAC equipment and ductwork, the refurbishing of existing unit ventilators and fan systems, furnishing of new equipment and ductwork to the existing central system presently in place, providing balancing and new mechanical controls throughout the Middle School, and new ceilings and lighting at certain locations.

Construction will include all project planning and staking, coordination, demolition, refurbishing of existing equipment, adjustments to fire sprinkler system, and finishing and installation of new equipment and ductwork, mechanical controls system, ceilings, light fixtures, and final balancing and coordination with the District's Commissioning Agent of the upgraded HVAC systems.

Tentative Schedule:

| Advertise Invitation to Bid | May 31, 2016 |
|-----------------------------|-----------------------------------|
| Bid Opening | June15, 2016 |
| Notice of Intent to Award | June 17,2016 |
| Contract Execution | June 22, 2016 |
| Construction | June 23, 2016 – September 6, 2016 |

The estimated bidding schedule and construction schedule for the Project are subject to change. Applicant shall be responsible for obtaining bid documents that may contain modifications to the schedule set forth above.

I. Instructions

- 1. Applications are due no later than May 30, 2016 at 2:00 PM, PST.
- 2. Type or print all answers and other entries on the application, except where signatures are required.
- 3. Applicants may submit their own computer-generated forms provided the layout and required information conform to the District's application included in this document.
- 4. It is the responsibility of the applicant to provide all requested information and materials. Failure to do so will delay the review of the application and may be grounds for denial of prequalification.
- 5. An applicant that is currently prequalified with the Department of Transportation or with the Oregon Department of Administrative Services, for projects of the same size and kind, may submit proof of the prequalification in lieu of this prequalification application. Submit applicant's certification of such prequalification under cover of this application, and include a surety letter, certificates of insurance, and affidavit.

6. Required Documents

The following hard copy documentation must be submitted with the prequalification application.

- A copy of this prequalification application, complete with responses to each question or request for information *or*, in the alternative, accompanied by proof of DAS or ODOT prequalification to bid projects of like size and kind.
- A letter from applicant's surety indicating applicant's single project and aggregate bonding capacity for Payment and Performance bonding and contact information for the surety's representative.
- 🗷 Certificates of insurance indicating limits for worker's compensation, public liability, and property damage.
- Affidavit, attached, on behalf of applicant signed by a person authorized to execute contracts for applicant.

- 7. All answers and entries must be specific and complete in detail.
- 8. Provide information only for the specific company applying for prequalification.
- 9. Any false statement or material omission may be grounds for rejection.
- 10. Application signature
 - a. The prequalification application must be signed by the applicant, if a sole proprietor.
 - b. If a partnership, the application should be signed by an authorized partner.
 - c. If a corporation, the application should be signed by an authorized officer.
 - d. If a limited liability, the application should be signed by an authorized member.
- 11. The signatory of the affidavit guarantees the truth and accuracy of all answers, statements, and any additional information submitted to process this application.
- 12. The District reserves the right to request additional or supporting documents.
- 13. Retain a copy of your application for your records.

II. Application Review and Determination

- Upon receipt of the application, the District will review it for completeness and will notify the applicant if additional information is required.
- 2. The date on which applicant has submitted *all* required information will be considered the receipt date of the prequalification application.
- 3. If a prequalification application, or any portion thereof, is submitted after the Application Deadline, the District may process the application, or reject it at the District's sole discretion.
- 4. The District reserves the right to request supplemental or supporting documentation, including but not limited to project history details, safety records and insurance details, or reports or citations of regulatory violation.
- 5. If the District does not receive the requested information within 5 days of request, the District may make a determination on the basis of available information, or may deny the application as incomplete.
- 6. The date on which all of the required information has been received by the District will be considered the date of prequalification application.
- 7. District will review only General contractor project history for work completed within the past 5 years. The District may, but will not be required to, make independent inquiries concerning any information provided in the application.
- 8. This application form complies with the requirements of ORS 279C.430.

III. Notification of Prequalification Status

- 1. The District will notify the applicant of applicant's prequalification status within thirty (30) days of receipt of the application.
- 2. If the applicant fails to prequalify, the District will specify the reasons for denial.
- 3. If after prequalifying an applicant, the District has reasonable cause to believe that due to a substantial change in the applicant's conditions the applicant is no longer qualified under the standards applicable to this Project, the District may revoke prequalification after reasonable notice to the applicant, which notice will specify the reasons for disqualification and inform the applicant of applicant's right to a hearing as provided above.

IV. Appeals

The written appeal must include basis for the appeal and be addressed and delivered to:

Attn: Rachel Hopper Reynolds School District No. 7 1204 NE 201st Avenue Fairview, OR 97024

- (a) An adversely affected or aggrieved Proposer may submit to the Contracting Agency a Written protest of the Contracting Agency's decision to exclude the Proposer from the Competitive Range within seven Days after issuance of the notice of the Competitive Range, unless a different protest period is provided under the Solicitation Document. (See procedural requirements for the use of RFPs at OAR 137-049-0650.)
- (b) The Proposer's protest shall be in Writing and must specify the grounds upon which the protest is based.
- (c) A Proposer is adversely affected only if the Proposer is responsible and submitted a Responsive Proposal and is eligible for inclusion in the Competitive Range, i.e., the protesting Proposer must claim it is eligible for inclusion in the Competitive Range if all ineligible higher-scoring Proposers are removed from consideration, and that those ineligible Proposers are ineligible for inclusion in the Competitive Range because:
 - (A) Their Proposals were not responsive; or
 - (B) The Contracting Agency committed a substantial violation of a provision in the RFP or of an applicable Procurement statute or administrative rule, and the protesting Proposer was unfairly evaluated and would have, but for such substantial violation, been included in the Competitive Range.

V. Confidentiality

All prequalification information submitted by applicants shall be public record and subject to disclosure pursuant to the Oregon Public Records Act (ORS 192.410 et seq.), except such portions of the prequalification for which the applicant requests exception from disclosure consistent with Oregon Law. Financial, trade secret or proprietary information will be kept confidential (e.g. bonding limits). If a public records request to review a company's prequalification application is made, the District will notify the applicant company of the request before releasing any records.

| Application of A-ARSOLITE COMP | ORT PRITTIN & COOLING, INC. Registered Company Name) |
|--|--|
| Individual Sole Proprietorship General Partnership Corporation Joint Venture (JV) Member of Joint Venture Limited Liability Company (LLC) Limited Liability Partnership (LLP) Limited Partnership (LP) Assumed Business Name (ABN) | Address to which all correspondence should be mailed: Contact Name ANOY NART Physical Address 15 336 CARK NACE CT. PO Box City ORESON CATY State OR, Zip Code 97045 Phone No. 503-513-4795 Fax No. 503-513-1797 Email Address ANDY P. A-ARSOLUTE COMPURT. COM. Date Application Prepared 5/30/16 |
| | the purpose determining the applicant's qualification to bid as e Middle School HVAC Upgrade. The scheduled bid opening |
| 1. BUSINESS STRUCTURE Complete only sections that apply to applicant. | |
| Assumed Business Name | |
| If applicant is doing business under an assume | ed business name, complete this section. |
| Assumed business name Owner's name & address | |
| ABN Registration number and date | |
| | |
| Sole Proprietorship | |
| If applicant is a sole proprietorship, con | mplete this section. |
| Individual's name & address | |
| | |
| | |
| Signature | |

| General Partnership | |
|---|----------|
| If applicant is a general partnership , complete this. | |
| Date of organization | |
| Partners' names and addresses | |
| | 3 |
| (| |
| | 9 |
| | |
| | |
| Foreign (out of state) partnership or persons domiciled in another state engaging is under an assumed name indicate whether the applicant is registered in compliance 648. Yes No | |
| Printed names and titles of officers authorized to execute contracts: | |
| Timed hames and titles of officers authorized to execute contracts. | |
| | |
| *************************************** | |
| | |
| Oregon Corporation | |
| If applicant is an Oregon corporation, complete this section. | |
| When incorporated 17-11011995 | |
| Registry Number 664805-84 | |
| President Swarrow My HART | |
| 1st Vice President ANDREW CONRT | |
| Secretary | |
| Treasurer | |
| Printed names and titles of officers authorized to execute contracts: | |
| SMARROW M. LINET PRESIDENT | |
| KNOREN C. HART VICE-PRESTOLN | <u> </u> |
| | |
| | |
| Foreign Corporation | |
| If applicant is a foreign corporation, complete this section. | |
| When incorporated | |

| State of incorporation | | é - |
|---|--------------------------------------|--------|
| Is applicant authorized to transact busin | ness in Oregon? Yes No | |
| Oregon registration no. President 1 st Vice President Secretary Treasurer | | |
| Printed names and titles of officers | | |
| | | |
| | | |
| | | |
| | | |
| Limited Liability Entity | _ | |
| If applicant is a limited liability entity, s | elect one and complete this section. | |
| Limited Liability Company | | |
| Limited Liability Partnership | | |
| Limited Partnership | | |
| When organized Registration no. Registered agent (R/A) R/A address | | |
| Printed names of members authori | zed to execute contracts: | |
| | | |
| | | |
| | | |

2. LICENSES AND REGISTRATIONS

Oregon Secretary of State Corporation Division - Active Business Registry No. www.filinginoregon.com/bizreg/index.htm Phone: (503) 986-2200

664805-84

Oregon Construction Contractors Board No.

www.ccb.state.or.us Phone: (503) 378-4621 132407

City of Sandy Business License If no City of Sandy Business License,

Applicant agrees to obtain such a license upon contract award. WE WC)

☐ Yes 🔀 No

Other Licenses

Constug

License No. PB633

License No. CLE 27

3. INSURANCE

Provide certificates of insurance showing that applicant will be able to maintain insurance meeting the minimum project requirements as follows:

| a. | Workers' Compensation. | Statutory Limits |
|----|----------------------------------|------------------|
| b. | Employer's Liability. | |
| | Each Accident: | \$1,000,000 |
| | Each Bodily Injury Disease: | \$1,000,000 |
| | Aggregate Bodily Injury Disease: | \$1,000,000 |
| c. | Commercial General Liability. | |
| | Each Occurrence: | \$2,000,000 |
| | General Aggregate: | \$3,000,000 |
| | Product/Completed Operations: | \$2,000,000 |
| | Personal & Advertising Injury: | \$2,000,000 |
| | Fire Damage Limit: | \$2,000,000 |
| | Medical Expense Limit: | \$2,000,000 |
| d. | Automobile Liability. | |
| | Combined Single Limit: | \$2,000,000 |

e. Pollution Liability.

Single Limit: Aggregate:

\$1,000,000 \$1,000,000

f. Commercial Umbrella/Excess Coverage.

Each Occurrence:

\$1,000,000

Liability insurance policies will include the District and its officers, employees, agents, volunteers, partners, successors, and assigns as additional insureds. The policy endorsement must extend premise operations and products/completed operations to the additional insureds. The additional insured endorsement for the CGL insurance must be written on ISO Form CG 2010 (11/85), a CG 2037 (07/04) together with CG 2033 (07/04), or the equivalent; but will not use the following forms: CG 20 10 (10 93) or CG 20 10 (03 94). Minimum A.M. Best rating of A VII

4. SURETY BONDS

Required minimum per project limit and remaining aggregate bonding capacity is \$. Provide letter from applicant's surety, as listed below, indicating applicant's per project and aggregate bonding limits for like work, surety's record of successful continuous operations in Oregon for five years, and current A.M. Best rating of A VII_or better.

State the name of the agent and name, address and telephone number of the surety company applicant expects to provide the bonds.

Agent's name:

Agent's address:

Agent's telephone #:

Surety name:

Once ROSS PROPKL INSURANCE

888 SW 5TH. AVENUE SUTTE 1170

503- WB7- 758)

ONTO CASUATY INSURANCE COMPANY

Surety address:

Surety address:

Surety telephone #:

OOL 478 AVE. SUTTE 1311 SEAFTLE, WASHINGTON 98154

(OOL) 473-3788

5. EXPERIENCE

List all projects, commenced or completed within five years of the date of this application, in which the applicant performed or is performing as general contractor for new construction and major remodeling or renovation of HVAC and mechanical control systems, with initial contract values exceeding \$2,000,000.

Required minimum experience is the successful completion of at least 2 projects with initial contract values greater than \$2,000,000, and at least 2 public improvement projects in the five-year period.

| PROJECT #1 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
|--|--|--|---|-------------------------|
| PORTHUNG COMMUNEITY COllege/SE CAMPUS STUDENT COMMONS 3305 SE 8240 AVE - FORTLAND, UR. 97012 | | \$3,146,510.00 | 1/2013 | 9/2113 |
| The second secon | chitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project L | ocation |
| SRG PART | NERSHAD INC. 503-222-1917 | INSTALL OF COMPLETE HVAC | 23 05 SE 80 NO AVE. | |
| PAF CONSO | TITM ENPINEERS DUC 503-226-2921 | NEA WECHMION 7 2 halfw | Portlans, OR, 97012 | |
| PROJECT #2 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| 2305 F 36 | lannowity College/SE Campus Learnity Common Juo Ave. Poetlano, OR, 977212 | 151,461,324.00 | 1/2013 | 2/2014 |
| | chitect/Engineer Name & Phone No. (if applicable) | Description of Project | Description of Project Project Location | |
| skg that | THERSHIP TING, SOB-2002-1917 | INSTALL ANCOMPLETE NEW 2305 SE 80MD | | BOND AVE |
| PAR COUS | 1696-266-503, IC. 503-20-2921 | HUAC MECHANICA) + Plunety Spoon PORTLAND, UR. 91 | | R. 97016 |
| PROJECT #3 Name, Address, Contact Name & Phone No. of Owner | | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| Arc | chitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project L | ocation |
| | | , | | |
| PROJECT #4 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| | | | | |
| Architect/Engineer Name & Phone No. (if applicable) | | Description of Project | Project L | ocation |
| | | | | |

| PROJECT #5 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
|---|--|--|-------------------------|---|
| Arc | hitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project I | Location |
| | | | | |
| PROJECT #6 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| Arc | hitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project I | Location |
| | | | | *************************************** |
| PROJECT #7 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| | | | | |
| Architect/Engineer Name & Phone No. (if applicable) | | Description of Project | Project Location | |
| PROJECT #8 | Name, Address, Contact Name & Phone No. of Owner | Contract Value (initial contract price) | Month/Year Commenced | Month/Year Completed |
| Arcl | hitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project L | ocation |
| PROJECT | Name, Address, Contact Name & Phone No. of Owner | Contract Value | Month/Year | Month/Year |
| #9 | rand, radices, Contact Plante & Phone No. of Owner | (initial contract price) | Commenced | Completed |
| Arch | hitect/Engineer Name & Phone No. (if applicable) | Description of Project | Project L | ocation |
| Ald | meet Engineer (value & Frione (vo. (11 applicable) | Description of Project | Project L | ocation |

6. PERFORMANCE AND INTEGRITY

Applicant must answer each of the following questions. Any "yes" response may result in denial of prequalification. Any unanswered question will be deemed a "yes" response for purposes of this application. For each "yes" response, the applicant may submit an explanation detailing the circumstances and resolution of the matter which the District may, but is not obligated to, consider in evaluating this application. If no explanation is provided, the prequalification application will be denied.

| A. | Has the applicant, citation, under any | | | or, or member of applicant been convicted, or received a |
|----|---|---|--|--|
| | (Check one) | Yes | 🔀 No | If yes, please attach an explanation. |
| В. | | | | or member of applicant, been convicted of a criminal obtain a public or private contract, or in the performance If yes, please attach an explanation. |
| C. | federal statutes of | embezzlement, than other offense | heft, forgery, bril | or member of applicant, been convicted under state or bery, falsification or destruction of records, receiving k of business integrity or business honesty? If yes, please attach an explanation. |
| D. | | ipal, officer, dire | | 's license of any applicant's firm, or any firm with which was previously associated, been revoked within the last 5 If yes, please attach an explanation. |
| E. | | spended or revol | | en denied prequalification, disqualified or had local or federal agency in this or any other state? If yes, please attach an explanation. |
| F. | | ted, been debarre | ed from bidding | firm with which any officer or partner of the applicant was on contracts by any state, local or federal agency in this or If yes, please attach an explanation. |
| G. | previously associate contract; failed to dimprovement contract. | ted, failed or refu complete work u ract terminated for n otherwise declar | used to honor a bunder a public importance or other ared in material bacting agency? | firm with which any officer or partner of the applicant was bid for a state, local or federal public improvement provement contract; had a state, local or federal public wise had its rights to proceed under such a contract breach or default of a state, local or federal public |
| | (Check one) | ☐ Yes | No No | If yes, please attach an explanation. |

| H. | Within the last three years has the applicant, or any officer, principal, agent or employee of applicant been |
|----|---|
| | found to have violated any state or federal prevailing wage statute or regulation (including the federal Davis- |
| | Bacon and related Acts and ORS 279C.800 et. seq.) in any Final Order issued by the Oregon Bureau of Labo |
| | and Industries or the United States Department of Labor, or by any court of competent jurisdiction? |
| | (Check one) Yes X No If yes, please attach an explanation. |
| I. | Within the last three years has the applicant, or any officer, principal, agent or employee of applicant been found to have violated any state or federal statute or regulation, including but not limited to Environmental Protection Agency, Department of Environmental Quality, US Fish and Wildlife Service, Department of Fish and Wildlife, US Army Corps of Engineers, Division of State Lands, Department of Agriculture or Department of Interior, or any permit issued by one of these agencies, in any agency Final Order or by any |
| | court of competent jurisdiction? (Check one) Yes No If yes, please attach an explanation. |

AFFIDAVIT

| STATE OF Oregon |
|---|
| County of Clackamas ss. |
| I, ANNEW C. WART being duly sworn, certify that I am VICE-PRESEDENT (Title) |
| of the applicant herein and that the foregoing statements and answers in all sections of this application are correct |
| and true as of the date of this affidavit, and that any additional information submitted to process this application |
| will be correct and true; that should there be a material reduction in my ability to carry out the project for which I |
| intend to submit a bid, I will give written notice of such change or changes to the public office to whom this |
| statement is submitted at least 10 days prior to the bid opening; and that it is understood that such notice may |
| change my eligibility to submit the bid. |
| Original Signature of Individual Authorized to Execute Bids and Contracts) |
| Subscribed and sworn to before me on this 31 day of May, 2016. |
| MunuEchuc |
| OFFICIAL SEAL MELINDA E C STEFFEN NOTARY PUBLIC-OREGON COMMISSION NO. 477586 MY COMMISSION EXPIRES APRIL 26, 2017 Original Notary Public Signature My Commission expires: 4 - 26 - 2017 |

Uniform Scoring System for the Reynolds School District Contractor Pre-Qualification program (Short Form Questionnaire)

Points are assigned to the proposer's response to Part 6. Performance and Integrity as follows:

| A. | Five points for answering "No" points. | | | |
|--------------------------|--|--|--|--|
| | Five points for answering "No" | | | |
| C. | Five points for answering "No" $\frac{5}{2}$ points. | | | |
| D. | Five points for answering "No" $\frac{5}{2}$ points. | | | |
| E. | Five points for answering "No" $\frac{5}{2}$ points. | | | |
| F. | Five points for answering "No" points. | | | |
| G. | Five points for answering "No" points. | | | |
| Н. | Five points for answering "No" points. | | | |
| I. | Five points for answering "No" points. | | | |
| Total Points 45 points | | | | |
| Bidder's Name ANDREW WRT | | | | |

The information requested in the remainder of the contractor Qualification Questionnaire is for the District consideration in determining a contractor's capacity to perform all the requirements of the Reynolds HB Lee Middle School HVAC Upgrade Project. The District's assessment of the bidder's responses to the information not subject to scoring will be based upon the bidder's prior experience job performance, workforce capacity and bond capacity.



May 26, 2016

Reynolds School District No. 7 1204 NE 201st Avenue Fairview, OR 97024

Re: A-Absolute Comfort Heating & Cooling Inc.

To Whom It May Concern:

It is the privilege of Propel Insurance and The Ohio Casualty Insurance Company to provide surety bonds on behalf of A-Absolute Comfort Heating & Cooling Inc. In our opinion, A-Absolute Comfort Heating & Cooling Inc. is properly financed, well equipped, and capably managed.

At the present time, The Ohio Casualty Insurance Company provides a \$500,000.00 single project / \$1,000,000.00 aggregate surety program to A-Absolute Comfort Heating & Cooling Inc. As always, The Ohio Casualty Insurance Company reserves the right to perform normal underwriting at the time of any bond request, including, without limitation, prior review and approval of relevant contract documents, bond forms, and project financing. We assume no liability to Reynolds School District No. 7 or its affiliates if for any reason we do not execute said bonds.

The Ohio Casualty Insurance Company is listed on the U.S. Treasury Department's Listing of Approved Sureties (Department Circular 570), and is rated A, XV by A.M. Best Company.

Sincerely,

Propel Insurance

Christopher Kinyon Account Manager ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/31/2016

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

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

| PRODUCER | CONTACT Gayle Williams | | |
|---|--|---------|--|
| Propel Insurance | PHONE (A/C, No, Ext): 800 499-0933 FAX (A/C, No): 866 57 | 77-1326 | |
| Portland Commercial Insurance | E-MAIL ADDRESS: gayle.williams@propelinsurance.com | | |
| 888 SW 5th Avenue, Suite 1170 | INSURER(S) AFFORDING COVERAGE | NAIC# | |
| Portland, OR 97204-2025 | INSURER A: Cincinnati Insurance Company | 10677 | |
| INSURED A A hard hate Compfort Heating 8 | INSURER B: SAIF Corporation | 36196 | |
| A-Absolute Comfort Heating & Cooling Inc. | INSURER C: | | |
| 15886 Park Place Ct | INSURER D: | | |
| Oregon City, OR 97045 | INSURER E: | | |
| Oregon City, OK 97045 | INSURER F: | | |

COVERAGES

CERTIFICATE NUMBER:

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

| INSR LTR | TYPE OF INSURANCE | ADDL SUBR | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP | LIMIT | S |
|-------------|---|-----------|--------------------------|----------------------------|------------|---|---|
| A | X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X PD Ded:1,000 | INSK WVD | 0245235 | | | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY | \$1,000,000 \$500,000 \$10,000 \$1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X JECT LOC | | | | | GENERAL AGGREGATE PRODUCTS - COMP/OP AGG WA STOP GAP | \$2,000,000 \$2,000,000 \$1,000,000 |
| Α | AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS AUTOS X HIRED AUTOS X AUTOS AUTOS AUTOS | | 0245235 | 04/20/2016 | 04/20/2017 | COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) | \$1,000,000 \$ \$ \$ \$ |
| Α | X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ | | 0245235 OVER GL AU WC | 04/20/2016 | 04/20/2017 | EACH OCCURRENCE AGGREGATE | \$5,000,000 \$5,000,000 \$ |
| В | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIET OR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | N/A | 909933 | 10/01/2015 | 10/01/2016 | X WC STATU- TORY LIMITS OTH- E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT | \$1,000,000 \$1,000,000 |
| Α | LEASED/RENTED EQ INSTALL FLOATER | | 0245235 0245235 | 04/20/2016 04/20/2016 | | | \$100K |

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

RE: HB Lee Middle School HVAC upgrades

| CERTIFICATE HOLDER | CANCELLATION |
|--|--|
| Reynolds School District No. 7 attn: Rachel Hopper 1204 NE 201st Ave | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| Fairview, OR 97024 | AUTHORIZED REPRESENTATIVE |
| | Seth Pietrel |

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saifcorporation

Carrier No:

20001

Endorsement No:

WC000313

Policy No:

909933

Agency:

A-ABSOLUTE COMFORT HEATING & COOLING INC

15886 PARK PLACE CT

OREGON CITY, OR 97045-1144

DAVE ROSS

PROPEL INSURANCE 888 SW 5TH AVE STE 1170 PORTLAND, OR 97204

Waiver of Our Right to Recover From Others Endorsement

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule.

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Description:

All Operations

Contractor Name:

Persons and/or organizations who, with the insured-employer, are

parties to a construction agreement as defined in ORS 30.140

This endorsement does not alter the rights of an injured worker to pursue recovery from another party or SAIF to receive a statutory share of recoveries by an injured worker, even from the party listed in the schedule.

The premium charge for this endorsement is based on one (1) percent of your manual premium.

Effective Date:

10-01-2015

This endorsement is part of your policy. This endorsement amends and controls anything to the contrary. It is otherwise subject to all other terms of your policy.

Countersigned 10-15-2015 at Salem, Oregon

430b

Kerry Barnett, President and Chief Executive Officer

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED BY CONTRACT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

| Endorsement Effective: | Policy Number: |
|--|----------------|
| 04-20-2016 | EBA 024 52 35 |
| Named Insured: | |
| | |
| A-ABSOLUTE COMFORT HEATING & COOLING INC | |
| Countersigned by: | |
| | |

(Authorized Representative)

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

SECTION II - LIABILITY COVERAGE, A. Coverage, I. Who is an Insured is amended to include as an insured any person or organization with which you have agreed in a valid written contract to provide insurance as is afforded by this policy.

This provision is limited to the scope of the valid written contract.

This provision does not apply unless the valid written contract has been executed prior to the "bodily injury" or "property damage".

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET WAIVER OF SUBROGATION - AUTO

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

| Endorsement Effective: | Policy Number: |
|--|----------------|
| 04-20-2016 | EBA 024 52 35 |
| Named Insured: | |
| | |
| A-ABSOLUTE COMFORT HEATING & COOLING INC | |
| Countersigned by: | |
| | |

(Authorized Representative)

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

1. Blanket Waiver of Subrogation

SECTION IV - BUSINESS AUTO CONDITIONS, A. Loss Conditions, 5. Transfer of Rights of Recovery Against Others to Us is amended by the addition of the following:

We waive any right of recovery we may have against any person or organization because of payments we make for "bodily injury" or "property damage" arising out of the operation of a covered "auto" when you have assumed liability for such "bodily injury" or "property damage" under an "insured contract", provided the "bodily injury" or "property damage" occurs subsequent to the execution of the "insured contract".

OREGON CONTRACTORS' COMMERCIAL GENERAL LIABILITY BROADENED ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Endorsement - Table of Contents:

| Cov | <u>/erage:</u> | Begins on Page |
|-----|---|-----------------------|
| 1. | Employee Benefit Liability Coverage | 2 |
| 2. | Unintentional Failure to Disclose Hazards | 8 |
| 3. | Damage to Premises Rented to You | 8 |
| 4. | Supplementary Payments | 9 |
| 5. | Medical Payments | 10 |
| 6. | Voluntary Property Damage (Coverage a.) and Care, Custody or Control Liability Coverage (Coverage b.) | |
| 7. | 180 Day Coverage for Newly Formed or Acquired Organizations | 10 |
| 8. | Waiver of Subrogation | 10 |
| 9. | Automatic Additional Insured - Specified Relationships: | 11 |
| • | × Managers or Lessors of Premises; | |
| | × Lessor of Leased Equipment; | |
| | × Vendors; | |
| | × State or Political Subdivisions - Permits Relating to Premises; | |
| | × State or Political Subdivisions - Permits; and | |
| | × Contractors' Operations | |
| 10. | Broadened Contractual Liability - Work Within 50' of Railroad Property | 16 |
| 11. | | 16 |
| 12. | Employees as Insureds - Specified Health Care Services: | 16 |
| | × Nurses; | |
| | × Emergency Medical Technicians; and | |
| | × Paramedics | |
| 13. | Broadened Notice of Occurrence | 16 |

B. Limits of Insurance:

The Commercial General Liability Limits of Insurance apply to the insurance provided by this endorsement, except as provided below:

1. Employee Benefit Liability Coverage

Each Employee Limit: \$ 1,000,000 Aggregate Limit: \$ 3,000,000 Deductible: \$ 1,000

3. Damage to Premises Rented to You

The lesser of:

a. The Each Occurrence Limit shown in the Declarations; or

b. \$500,000 unless otherwise stated \$

4. Supplementary Payments

a. Bail bonds: \$ 1,000b. Loss of earnings: \$ 350

5. Medical Payments

Medical Expense Limit: \$ 10,000

6. Voluntary Property Damage (Coverage a.) and Care, Custody or Control Liability Coverage (Coverage b.)

Limits of Insurance (Each Occurrence)

Coverage a. \$1,000

Coverage **b.** \$5,000 unless otherwise stated \$ _____

Deductibles (Each Occurrence)

Coverage a. \$250

Coverage b. \$250 unless otherwise stated

\$

| COVERAGE | PREMIUM BASIS | RATE | ADVANCE PREMIUM | |
|------------------------------------|--|-----------------------------------|--------------------------------------|--|
| | (a) Area(b) Payroll(c) Gross Sales(d) Units(e) Other | (For Limits in Excess of \$5,000) | (For Limits in Excess of \$5,000) | |
| b. Care, Custody or Control | | | \$ | |
| | TC | TAL ANNUAL PREMIUM | \$ | |

11. Property Damage to Borrowed Equipment

Each Occurrence Limit: \$ 10,000

Deductible: \$ 250

C. Coverages:

- 1. Employee Benefit Liability Coverage
 - The following is added to SECTION I
 COVERAGES: Employee Benefit Liability Coverage.
 - (1) Insuring Agreement
 - (a) We will pay those sums that the insured becomes legally obligated to pay as damages caused by any act, error or omission of the insured, or of any other person for whose acts the insured is legally liable, to which this insurance applies. We will have the right and duty to defend the insured against any "suit" seeking those damages. However, we will have no duty to defend against any "suit" seeking damages to which this insurance does not apply. We may, at our discretion, investigate any report of an act, error or omission and settle any claim or "suit" that may result. But:
 - The amount we will pay for damages is limited as described in SEC-TION III - LIMITS OF INSURANCE; and

 Our right and duty to defend ends when we have used up the applicable limit of insurance in the payment of judgments or settlements.

No other obligation or liability to pay sums or perform acts or services is covered unless explicitly provided for under Supplementary Payments.

- (b) This insurance applies to damages only if the act, error or omission, is negligently committed in the "administration" of your "employee benefit program"; and
 - Occurs during the policy period; or
 - 2) Occurred prior to the effective date of this endorsement provided:
 - You did not have knowledge of a claim or "suit" on or before the effective date of this endorsement.

You will be deemed to have

knowledge of a claim or "suit" when any "authorized representative";

- Reports all, or any part, of the act, error or omission to us or any other insurer;
- ii) Receives a written or verbal demand or claim for damages because of the act, error or omission; and
- There is no other applicable insurance.

(2) Exclusions

This insurance does not apply to:

(a) Bodily Injury, Property Damage or Personal and Advertising Injury

"Bodily injury", "property damage" or "personal and advertising injury".

(b) Dishonest, Fraudulent, Criminal or Malicious Act

Damages arising out of any intentional, dishonest, fraudulent, criminal or malicious act, error or omission, committed by any insured, including the willful or reckless violation of any statute.

(c) Failure to Perform a Contract

Damages arising out of failure of performance of contract by any insurer.

(d) Insufficiency of Funds

Damages arising out of an insufficiency of funds to meet any obligations under any plan included in the "employee benefit program".

(e) Inadequacy of Performance of Investment / Advice Given With Respect to Participation

Any claim based upon:

- Failure of any investment to perform;
- Errors in providing information on past performance of investment vehicles; or
- 3) Advice given to any person with respect to that person's decision to participate or not to participate in any plan included in the "employee benefit program".

(f) Workers' Compensation and Similar Laws

Any claim arising out of your failure to comply with the mandatory provisions of any workers' compensation, unemployment compensation insurance, social security or disability benefits law or any similar law.

(g) ERISA

Damages for which any insured is liable because of liability imposed on a fiduciary by the Employee Retirement Income Security Act of 1974, as now or hereafter amended, or by any similar federal, state or local laws.

(h) Available Benefits

Any claim for benefits to the extent that such benefits are available, with reasonable effort and cooperation of the insured, from the applicable funds accrued or other collectible insurance.

(i) Taxes, Fines or Penalties

Taxes, fines or penalties, including those imposed under the Internal Revenue Code or any similar state or local law.

(j) Employment-Related Practices

Any liability arising out of any:

- (1) Refusal to employ;
- (2) Termination of employment;

- (3) Coercion, demotion, evaluation, reassignment, discipline, defamation, harassment, humiliation, discrimination or other employment-related practices, acts or omissions; or
- (4) Consequential liability as a result of (1), (2) or (3) above.

This exclusion applies whether the insured may be held liable as an employer or in any other capacity and to any obligation to share damages with or repay someone else who must pay damages because of the injury.

(3) Supplementary Payments

SECTION I - COVERAGES, SUPPLEMENTARY PAY-MENTS - COVERAGES A AND B also apply to this Coverage.

b. Who is an Insured

As respects Employee Benefit Liability Coverage, **SECTION II - WHO IS AN INSURED** is deleted in its entirety and replaced by the following:

- (1) If you are designated in the Declarations as:
 - (a) An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
 - (b) A partnership or joint venture, you are an insured. Your members, your partners, and their spouses are also insureds but only with respect to the conduct of your business.
 - (c) A limited liability company, you are an insured. Your members are also insureds, but only with respect to the conduct of your business. Your managers are insureds, but only with respect to their duties as your managers.
 - (d) An organization other than a partnership, joint venture or limited liability company, you are an insured. Your "executive officers" and direc-

tors are insureds, but only with respect to their duties as your officers or directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.

- (e) A trust, you are an insured. Your trustees are also insureds, but only with respect to their duties as trustees.
- (2) Each of the following is also an insured:
 - (a) Each of your "employees" who is or was authorized to administer your "employee benefit program".
 - (b) Any persons, organizations or "employees" having proper temporary authorization to administer your "employee benefit program" if you die, but only until your legal representative is appointed.
 - (c) Your legal representative if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Part.
- (3) Any organization you newly acquire or form, other than a partnership, joint venture or limited liability company, and over which you maintain ownership or majority interest, will qualify as a Named Insured if no other similar insurance applies to that organization. However, coverage under this provision:
 - (a) Is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier; and
 - (b) Does not apply to any act, error or omission that was committed before you acquired or formed the organization.

c. Limits of Insurance

As respects Employee Benefit Liability Coverage, **SECTION III - LIMITS OF INSURANCE** is deleted in its entirety and replaced by the following:

- The Limits of Insurance shown in Section B. Limits of Insurance,
 Employee Benefit Liability Coverage and the rules below fix the most we will pay regardless of the number of:
 - (a) Insureds;
 - (b) Claims made or "suits" brought;
 - (c) Persons or organizations making claims or bringing "suits";
 - (d) Acts, errors or omissions; or
 - (e) Benefits included in your "employee benefit program".
- (2) The Aggregate Limit shown in Section B. Limits of Insurance, 1. Employee Benefit Liability Coverage of this endorsement is the most we will pay for all damages because of acts, errors or omissions negligently committed in the "administration" of your "employee benefit program".
- (3) Subject to the limit described in (2) above, the Each Employee Limit shown in Section B. Limits of Insurance, 1. Employee Benefit Liability Coverage of this endorsement is the most we will pay for all damages sustained by any one "employee", including damages sustained by such "employee's" dependents and beneficiaries, as a result of:
 - (a) An act, error or omission; or
 - (b) A series of related acts, errors or omissions, regardless of the amount of time that lapses between such acts, errors or omissions,

negligently committed in the "administration" of your "employee benefit program".

However, the amount paid under this endorsement shall not exceed, and will be subject to the limits and restrictions that apply to the payment of benefits in any plan included in the "employee benefit program".

(4) Deductible Amount

(a) Our obligation to pay damages on behalf of the insured applies only to the amount of damages in excess of the deductible

- amount stated in the Declarations as applicable to Each Employee. The limits of insurance shall not be reduced by the amount of this deductible.
- (b) The deductible amount stated in the Declarations applies to all damages sustained by any one "employee", including such "employee's" dependents and beneficiaries, because of all acts, errors or omissions to which this insurance applies.
- (c) The terms of this insurance, including those with respect to:
 - Our right and duty to defend the insured against any "suits" seeking those damages; and
 - Your duties, and the duties of any other involved insured, in the event of an act, error or omission, or daim,

apply irrespective of the application of the deductible amount.

(d) We may pay any part or all of the deductible amount to effect settlement of any claim or "suit" and, upon notification of the action taken, you shall promptly reimburse us for such part of the deductible amount as we have paid.

d. Additional Conditions

As respects Employee Benefit Liability Coverage, SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS is amended as follows:

- Item 2. Duties in the Event of Occurrence, Offense, Claim or Suit is deleted in its entirety and replaced by the following:
 - 2. Duties in the Event of an Act, Error or Omission, or Claim or Suit
 - You must see to it that we are notified as soon as practicable of an act, error or omission which

may result in a daim. To the extent possible, notice should include:

- (1) What the act, error or omission was and when it occurred; and
- (2) The names and addresses of anyone who may suffer damages as a result of the act, error or omission.
- b. If a claim is made or "suit" is brought against any insured, you must:
 - (1) Immediately record the specifics of the claim or "suit" and the date received; and
 - (2) Notify us as soon as practicable.

You must see to it that we receive written notice of the claim or "suit" as soon as practicable.

- c. You and any other involved insured must:
 - (1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or "suit":
 - (2) Authorize us to obtain records and other information:
 - (3) Cooperate with us in the investigation or settlement of the claim or defense against the "suit"; and
 - (4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the insured because of an act, error or omission to which this in-

surance may also apply.

- d. No insured will, except at that insured's own cost, voluntarily make a payment, assume any obligation, or incur any expense without our consent.
- (2) Item 5. Other Insurance is deleted in its entirety and replaced by the following:

5. Other Insurance

If other valid and collectible insurance is available to the insured for a loss we cover under this Coverage Part, our obligations are limited as follows:

a. Primary Insurance

This insurance is primary except when **c**. below applies. If this insurance is primary, our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in **b**. below.

b. Method of Sharing

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

c. No Coverage

This insurance shall not cover any loss for which the insured is entitled to recovery under any other insurance in force previous to the effective date of this Coverage Part.

e. Additional Definitions

As respects Employee Benefit Liability Coverage, SECTION V -DEFINITIONS is amended as follows:

- (1) The following definitions are added:
 - 1. "Administration" means:
 - a. Providing information to "employees", including their dependents and beneficiaries, with respect to eligibility for or scope of "employee benefit programs";
 - b. Interpreting the "employee benefit programs";
 - c. Handling records in connection with the "employee benefit programs"; or
 - d. Effecting, continuing or terminating any "employee's" participation in any benefit included in the "employee benefit program".

However, "administration" does not include:

- a. Handling payroll deductions; or
- b. The failure to effect or maintain any insurance or adequate limits of coverage of insurance, including but not limited to unemployment insurance, social security benefits, workers' compensation and disability benefits.
- "Cafeteria plans" means plan authorized by applicable law to allow "employees" to elect to pay for certain benefits with pre-tax dollars.
- "Employee benefit programs" means a program

providing some or all of the following benefits to "employees", whether provided through a "cafeteria plan" or otherwise:

- Group life insurance; accident or group health insurance; dental, vision and hearing plans; and flexible spendina accounts: provided that no one other than an "employee" may subscribe to such benefits and such benefits are made generally available to those "employees" who satisfy the plan's eligibility requirements;
- b. Profit sharing plans, employee savings plans, employee stock ownership plans, pension plans and stock subscription plans, provided that no one other than an "employee" may subscribe to such benefits and such benefits are made generally available to all "employees" who are eligible under the plan for such benefits;
- Unemployment insurance, social security benefits, workers' compensation and disability benefits; and
- d. Vacation plans, including buy and sell programs; leave of absence programs, including military, maternity, family, and civil leave; tuition assistance plans; transportation and health club subsidies.
- (2) The following definitions are deleted in their entirety and replaced by the following:
 - 21. "Suit" means a civil proceeding in which money damages because of an act, error or omission to which this insurance applies are alleged. "Suit" includes:
 - An arbitration proceeding in which such dam-

- ages are claimed and to which the insured must submit or does submit with our consent;
- Any other alternative dispute resolution proceeding in which such damages are claimed and to which the insured submits with our consent; or
- **c.** An appeal of a civil proceeding.
- 8. "Employee" means a person actively employed, formerly employed, on leave of absence or disabled, or retired. "Employee" includes a "leased worker". "Employee" does not include a "temporary worker".
- 2. Unintentional Failure to Disclose Hazards

SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, 7. Representations is hereby amended by the addition of the following:

Based on our dependence upon your representations as to existing hazards, if unintentionally you should fail to disclose all such hazards at the inception date of your policy, we will not reject coverage under this Coverage Part based solely on such failure.

- 3. Damage to Premises Rented to You
 - a. The last Subparagraph of Paragraph
 2. SECTION I COVERAGES,
 COVERAGE A. BODILY INJURY
 AND PROPERTY DAMAGE, 2. LI-ABILITY Exclusions is hereby deleted and replaced by the following:

Exclusions **c.** through **q.** do not apply to damage by fire, explosion, lightning, smoke or soot to premises while rented to you or temporarily occupied by you with permission of the owner.

- b. The insurance provided under SEC-TION I - COVERAGES, COVERAGE A. BODILY INJURY AND PROP-ERTY DAMAGE LIABILITY applies to "property damage" arising out of water damage to premises that are both rented to and occupied by you.
 - (1) As respects Water Damage Legal Liability, as provided in Paragraph 3.b. above:

The exclusions under SECTION I - COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions, other than i. War and the Nuclear Energy Liability Exclusion, are deleted and the following are added:

This insurance does not apply to:

- (a) "Property damage":
 - Assumed in any contract; or
 - 2) Loss caused by or resulting from any of the following:
 - a) Wear and tear;
 - Rust, corrosion, fungus, decay, deterioration, hidden or latent defect or any quality in property that causes it to damage or destroy itself;
 - c) Smog;
 - d) Mechanical breakdown including rupture or bursting caused by centrifugal force;
 - e) Settling, cracking, shrinking or expansion; or
 - f) Nesting or infestation, or discharge or release of waste products or secretions, by insects, birds, rodents or other animals.
- (b) Loss caused directly or indirectly by any of the following:
 - Earthquake, volcanic eruption, landslide or any other earth movement;
 - Water that backs up or overflows from a sewer, drain or sump;
 - Water under the ground surface pressing on, or flowing or seeping through:

- a) Foundations, walls, floors or paved surfaces;
- b) Basements, whether paved or not; or
- Doors, windows or other openings.
- (c) Loss caused by or resulting from water that leaks or flows from plumbing, heating, air conditioning, or fire protection systems caused by or resulting from freezing, unless:
 - You did your best to maintain heat in the building or structure; or
 - You drained the equipment and shut off the water supply if the heat was not maintained.
- (d) Loss to or damage to:
 - Plumbing, heating, air conditioning, fire protection systems, or other equipment or appliances; or
 - The interior of any building or structure, or to personal property in the building or structure caused by or resulting from rain, snow, sleet or ice, whether driven by wind or not.

c. Limit of Insurance

The Damage to Premises Rented to You Limit as shown in the Declarations is amended as follows:

- (2) Paragraph 6. of SECTION III LIMITS OF INSURANCE is hereby deleted and replaced by the following:
 - 6. Subject to 5. above, the Damage to Premises Rented to You Limit is the most we will pay under COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY, for damages because of "property damage" to premises while rented to you or temporarily occupied by you with permission of the owner, arising out of any

one "occurrence" to which this insurance applies.

(3) The amount we will pay is limited as described in Section B. Limits of Insurance, 3. Damage to Premises Rented to You of this endorsement.

4. Supplementary Payments

Under SECTION I - COVERAGE, SUP-PLEMENTARY PAYMENTS - COVER-AGES A AND B:

a. Paragraph **2.** is replaced by the following:

Up to the limit shown in Section B. Limits of Insurance, 4.a. Bail Bonds of this endorsement for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

Paragraph 4. is replaced by the following:

All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including actual loss of earnings up to the limit shown in Section **B. Limits of Insurance**, **4.b.** Loss of Earnings of this endorsement per day because of time off from work.

5. Medical Payments

The Medical Expense Limit of Any One Person as stated in the Declarations is amended to the limit shown in Section B. Limits of Insurance, 5. Medical Payments of this endorsement.

- 6. Voluntary Property Damage and Care, Custody or Control Liability Coverage
 - a. Voluntary Property Damage Coverage

We will pay for "property damage" to property of others arising out of operations incidental to the insured's business when:

- Damage is caused by the insured; or
- (2) Damage occurs while in the insured's possession.

With your consent, we will make these payments regardless of fault.

Care, Custody or Control Liability Coverage

SECTION I - COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions, j. Damage to Property, Subparagraphs (3), (4) and (5) do not apply to "property damage" to the property of others described therein.

With respect to the insurance provided by this section of the endorsement, the following additional provisions apply:

- a. The Limits of Insurance shown in the Declarations are replaced by the limits designated in Section B. Limits of Insurance, 6. Voluntary Property Damage and Care, Custody or Control Liability Coverage of this endorsement with respect to coverage provided by this endorsement. These limits are inclusive of and not in addition to the limits being replaced. The Limits of Insurance shown in Section B. Limits of Insurance, 6. Voluntary Property Damage and Care, Custody or Control Liability Coverage of this endorsement fix the most we will pay in any one "occurrence" regardless of the number of:
 - (1) Insureds;
 - (2) Claims made or "suits" brought;
 - (3) Persons or organizations making claims or bringing "suits".

b. Deductible Clause

- (1) Our obligation to pay damages on your behalf applies only to the amount of damages for each "occurrence" which are in excess of the deductible amount stated in Section B. Limits of Insurance, 6. Voluntary Property Damage and Care, Custody or Control Liability Coverage of this endorsement. The limits of insurance will not be reduced by the application of such deductible amount.
- (2) Condition 2. Duties in the Event of Occurrence, Offense, Claim or Suit, applies to each claim or "suit" irrespective of the amount.
- (3) We may pay any part or all of the deductible amount to effect settlement of any claim or "suit" and, upon notification of the action taken, you shall promptly reimburse us for such part of the

deductible amount as has been paid by us.

7. 180 Day Coverage for Newly Formed or Acquired Organizations

SECTION II - WHO IS AN INSURED is amended as follows:

Subparagraph **a.** of Paragraph **4.** is hereby deleted and replaced by the following:

Insurance under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier;

8. Waiver of Subrogation

SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, 9. Transfer of Rights of Recovery Against Others to Us is hereby amended by the addition of the following:

We waive any right of recovery we may have because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a written contract requiring such waiver with that person or organization and included in the "products-completed operations hazard". However, our rights may only be waived prior to the "occurrence" giving rise to the injury or damage for which we make payment under this Coverage Part. The insured must do nothing after a loss to impair our rights. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce those rights.

Automatic Additional Insured - Specified Relationships

- The following is hereby added to SECTION II - WHO IS AN INSURED:
 - (1) Any person or organization described in Paragraph 9.a.(2) below (hereinafter referred to as additional insured) whom you are required to add as an additional insured under this Coverage Part by reason of:
 - (a) A written contract or agreement; or
 - (b) An oral agreement or contract where a certificate of insurance showing that person or organization as an additional insured has been issued,

is an insured, provided:

- (a) The written or oral contract or agreement is:
 - Currently in effect or becomes effective during the policy period; and
 - Executed prior to an "occurrence" or offense to which this insurance would apply; and
- (b) They are not specifically named as an additional insured under any other provision of, or endorsement added to, this Coverage Part.
- (2) Only the following persons or organizations are additional insureds under this endorsement, and insurance coverage provided to such additional insureds is limited as provided herein:
 - (a) The manager or lessor of a premises leased to you with whom you have agreed per Paragraph 9.a.(1) above to provide insurance, but only with respect to liability arising out of the ownership, maintenance or use of that part of a premises leased to you, subject to the following additional exclusions:

This insurance does not apply to:

- Any "occurrence" which takes place after you cease to be a tenant in that premises.
- Structural alterations, new construction or demolition operations performed by or on behalf of such additional insured.
- (b) Any person or organization from which you lease equipment with whom you have agreed per Paragraph 9.a.(1) above to provide insurance. Such person(s) or organization(s) are insureds, but only to the extent that the liability for "bodily injury", "property damage" or "personal and advertising injury" is caused by your negligence, acts or omissions in the maintenance, operation

- or use of equipment leased to you by such person(s) or organizations(s). However, this insurance does not apply to any "occurrence" which takes place after the equipment lease expires.
- (c) Any person or organization (referred to below as vendor) with whom you have agreed per Paragraph 9.a.(1) above to provide insurance, but only with respect to "bodily injury" or "property damage" arising out of "your products" which are distributed or sold in the regular course of the vendor's business, subject to the following additional exclusions:
 - The insurance afforded the vendor does not apply to:
 - "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement;
 - Any express warranty unauthorized by you;
 - Any physical or chemical change in the product made intentionally by the vendor;
 - d) Repackaging, except when unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;

- e) Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products;
- f) Demonstration, installation, servicing or repair operations, except such operations performed at the vendor's premises in connection with the sale of the product;
- g) Products which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for the vendor; or
- h) "Bodily injury" or "property damage" arising out of the negligence, acts or omissions of the vendor, its employees or anyone else acting on its behalf.
- 2) This insurance does not apply to any insured person or organization:
 - a) From whom you have acquired such products, or any ingredient, part or container, entering into, accompanying or containing such products; or
 - b) When liability included within the "products-completed operations hazard" has been excluded under this Coverage

Part with respect to such products.

(d) Any state or political subdivision with which you have agreed per Paragraph 9.a.(1) above to provide insurance, subject to the following additional provision:

This insurance applies only with respect to the following hazards for which the state or political subdivision has issued a permit in connection with premises you own, rent or control and to which this insurance applies:

- The existence, maintenance, repair, construction, erection, or removal of advertising signs, awnings, canopies, cellar entrances, coal holes, driveways, manholes, marquees, hoist away openings, sidewalk vaults, street banners, or decorations and similar exposures; or
- The construction, erection, or removal of elevators; or
- The ownership, maintenance, or use of any elevators covered by this insurance.
- (e) Any state or political subdivision with which you have agreed per Paragraph 9.a.(1) above to provide insurance, subject to the following provisions:
 - This insurance applies only with respect to operations performed by you or on your behalf for which the state or political subdivision has issued a permit.
 - 2) This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the state or political subdivision.
- (f) For "your work" performed in Oregon, any person or

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- organization with which you have agreed per Paragraph 9.a.(1) above to provide insurance, but only to the extent that the liability is caused by "your work" performed for that additional insured and only to the extent that such liability is caused by your negligence or the negligence of those acting on your behalf. A person or organization's status as an insured under this provision of this endorsement continues for only the period of time required by the written contract or agreement, but in no event beyond the expiration date of this Coverage Part. If there is no written contract or agreement, or if no period of time is required by the written contract or agreement, a person or organization's status as an insured under this endorsement ends when your operations for that insured are completed.
- (g) For "your work" performed in the "coverage territory" but not in Oregon, any person or organization with which you have agreed per Paragraph 9.a.(1) above to provide insurance, but only with respect to liability arising out of "your work" per-formed for that additional insured by you or on your behalf. A person or organization's status as an insured under this provision of this endorsement continues for only the period of time required by the written contract or agreement, but in no event beyond the expiration date of this Coverage Part. If there is no written contract or agreement, or if no period of time is required by the written contract or agreement, a person or organization's status as an insured under this endorsement ends when your operations for that insured are completed.
- (3) Any insurance provided to an additional insured designated under Paragraph 9.a.(2):

- (a) Subparagraphs (e), (f) and (g) do not apply to "bodily injury" or "property damage" included within the "products-completed operations hazard";
- (b) Subparagraphs (a), (d), (e) and (g) do not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of the sole negligence or willful misconduct of the additional insured or its "employees"; or
- (c) Subparagraph (f) and (g) do not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of:
 - The rendering of, or failure to render, any professional services by you or on your behalf, but only with respect to either or both of the following operations:
 - a) Providing engineering, architectural or surveying services to others;
 - b) Providing, or hiring independent professionals to provide, engineering, architectural or surveying services in connection with construction work you perform.
 - Subject to Paragraph 3) below, professional services include:
 - a) Preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders, or drawings and specifications; and
 - Supervisory or inspection activities performed as part of any related ar-

chitectural or engineering activities.

- Professional services do not include services within construction means, methods, techniques, sequences and procedures employed by you in connection with construction work you perform.
- (d) Subparagraphs (f) and (g) do not apply to "bodily injury" or "property damage" arising out of "your work" for which a consolidated (wrapup) insurance program has been provided by the prime contractor / project manager or owner of the construction project in which you are involved.
- b. Only with regard to insurance provided to an additional insured designated under Paragraph 9.a.(2) Subparagraphs (f) and (g) above, SECTION III LIMITS OF INSURANCE is amended to include:

The limits applicable to the additional insured are those specified in the written contract or agreement or in the Declarations of this Coverage Part, whichever are less. If no limits are specified in the written contract or agreement, or if there is no written contract or agreement, the limits applicable to the additional insured are those specified in the Declarations of this Coverage Part. The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

- c. SECTION IV COMMERCIAL GEN-ERAL LIABILITY CONDITIONS is hereby amended as follows:
 - (1) Condition 5. Other Insurance is amended to include:
 - (a) Where required by a written contract or agreement, this insurance is primary and / or noncontributory as respects any other insurance policy issued to the additional insured, and such other insurance policy shall be excess and / or noncontributing, whichever applies, with this insurance.
 - (b) Any insurance provided by this endorsement shall be

primary to other insurance available to the additional insured except:

- 1) As otherwise provided in SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS, 5. Other Insurance, b. Excess Insurance: or
- 2) For any other valid and collectible insurance available to the additional insured as an additional insured by attachment of an endorsement to another insurance policy that is written on an excess basis. In such case, the coverage provided under this endorsement shall also be excess.
- (2) Condition 11. Conformance to Specific Written Contract or Agreement is hereby added:
 - 11. Conformance to Specific Written Contract or Agreement
 - With respect to additional insureds described in Paragraph
 9.a.(2)(f) above only:

If a written contract or agreement between you and the additional insured specifies that coverage for the additional insured:

- (1) Be provided by the Insurance Services Office additional insured form number CG 32 61, CG 32 62 or CG 32 63; or
- (2) Include coverage for completed operations; or
- (3) Include coverage for "your work";

and where the limits or coverage provided to the additional insured is more restrictive than was specifically required in that written contract or agreement, the terms of Para-

graphs 9.a.(3)(a) or 9.b. above, or any combination thereof, shall be interpreted as providing the limits or coverage required by the terms of the written contract or agreement, but only to the extent that such limits or coverage is included within the terms of the Coverage Part to which this endorsement is attached.

b. With respect to additional insureds described in Paragraph
 9.a.(2)(g) above only:

If a written contract or agreement between you and the additional insured specifies that coverage for the additional insured:

- a. Be provided by the Insurance Services Office additional insured form number CG 20 10 or CG 20 37 (where edition specified); or
- Include coverage for completed operations; or
- c. Include coverage for "your work";

and where the limits or coverage provided to the additional insured is more restrictive than was specifically required in that written contract or agreement, the terms of Paragraphs 9.a.(3)(a), 9.a.(3)(b) or 9.b. above, or any combination thereof, shall be interpreted as providing the limits or coverage required by the terms of the written contract or agreement, but only to the extent that such limits or coverage is included within the terms of the Coverage Part to which this endorsement is attached. If, however, the written contract or

agreement specifies the Insurance Services Office additional insured form number CG 20 10 but does not specify which edition, or specifies an edition that does not exist, Paragraphs 9.a.3.b. and 9.b. of this endorsement shall not apply and Paragraph 9.a.(3)(a) of this endorsement shall apply.

10. Broadened Contractual Liability - Work Within 50' of Railroad Property

It is hereby agreed that Paragraph f.(1) of Definition 12. "Insured contract" (SECTION V - DEFINITIONS) is deleted.

- 11. Property Damage to Borrowed Equipment
 - The following is hereby added to Exclusion j. Damage to Property of Paragraph 2., Exclusions of SECTION I COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY:

Paragraphs (3) and (4) of this exclusion do not apply to tools or equipment loaned to you, provided they are not being used to perform operations at the time of loss.

- b. With respect to the insurance provided by this section of the endorsement, the following additional provisions apply:
 - (1) The Limits of insurance shown in the Declarations are replaced by the limits designated in Section B. Limits of Insurance, 11. of this endorsement with respect to coverage provided by this endorsement. These limits are inclusive of and not in addition to the limits being replaced. The Limits of Insurance shown in Section B. Limits of Insurance, 11. of this endorsement fix the most we will pay in any one "occurrence" regardless of the number of:
 - (a) Insureds;
 - (b) Claims made or "suits" brought; or
 - (c) Persons or organizations making claims or bring "suits".

(2) Deductible Clause

- (a) Our obligation to pay damages on your behalf applies only to the amount of damages for each "occurrence" which are in excess of the Deductible amount stated in Section B. Limits of Insurance, 11. of this endorsement. The limits of insurance will not be reduced by the application of such Deductible amount.
- (b) Condition 2. Duties in the Event of Occurrence, Offense, Claim or Suit, applies to each claim or "suit" irrespective of the amount.
- (c) We may pay any part or all of the deductible amount to effect settlement of any claim or "suit" and, upon notification of the action taken, you shall promptly reimburse us for such part of the deductible amount as has been paid by us.

12. Employees as Insureds - Specified Health Care Services

It is hereby agreed that Paragraph 2.a.(1)(d) of SECTION II - WHO IS AN INSURED, does not apply to your "employees" who provide professional health care services on your behalf as duly licensed:

- a. Nurses;
- b. Emergency Medical Technicians; or
- c. Paramedics,

in the jurisdiction where an "occurrence" or offense to which this insurance applies takes place.

13. Broadened Notice of Occurrence

Paragraph a. of Condition 2. Duties in the Event of Occurrence, Offense, Claim or Suit (SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS) is hereby deleted and replaced by the following:

- a. You must see to it that we are notified as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, notice should include:
 - (1) How, when and where the "occurrence" or offense took place;
 - (2) The names and addresses of any injured persons and witnesses; and
 - (3) The nature and location of any injury or damage arising out of the "occurrence" or offense.

This requirement applies only when the "occurrence" or offense is known to an "authorized representative".