AGREEMENT

Division 00500

THIS AGREEMENT is made by and between COUNTY OF MONTEREY, a political subdivision of the State of California, hereinafter called "COUNTY," and R.F. KOERBER, INC., hereinafter called "CONTRACTOR." For reference purposes, the date of this Agreement is the last date opposite the respective signatures below.

COUNTY and CONTRACTOR hereby agree as follows:

ARTICLE 1. SCOPE OF WORK

This Job Order Contract (JOC) is an indefinite quantity contract pursuant to which CONTRACTOR will perform a variety of Job Orders, consisting of specific construction tasks. The scope of this JOC is for general construction, repair, remodel and other repetitive related Work. COUNTY has published a Construction Task Catalog[®] (CTC) containing a series of construction tasks with preset Unit Prices. The CTC was developed using experienced labor and high quality materials. All Unit Prices are based on local labor, material and equipment prices including the current prevailing wages. CONTRACTOR will bid Adjustment Factors to be applied to the Unit Prices. The price of an individual Job Order will be determined by multiplying the preset Unit Prices and the appropriate quantities by the appropriate Adjustment Factor.

The scope of work for this Contract will be determined by the Detailed Scopes of Work issued in connection with individual Job Orders. The Scope of Work (SOW), for each Job Order will be explained to CONTRACTOR at a Joint Scope Meeting. COUNTY will provide a Request for Job Order Proposal and Detailed SOW to CONTRACTOR. CONTRACTOR will be required to review the Detailed SOW and develop a Price Proposal using appropriate tasks, quantities and the applicable Adjustment Factor. COUNTY will review CONTRACTOR's Proposal in detail and if found to be reasonable and acceptable, a Job Order may be issued. The agreed-upon price will be fixed price for the performance of the Detailed SOW.

CONTRACTOR shall, within the time stipulated, perform the contract below as herein defined and shall furnish all Work, labor, equipment, transportation, material, and services to construct and complete in a good, expeditious, workmanlike, and substantial manner, the project:

PROJECT NO. JOC, BID NO. FACILITIES 2024-04

ARTICLE 2. TIME FOR START AND COMPLETION

Contract Time commences upon the written execution of the Contract by COUNTY and shall end either one year from the date signed by COUNTY or upon the payment by COUNTY to CONTRACTOR of the maximum amount payable under this Agreement, whichever occurs earlier. If CONTRACTOR has an active JOC Facilities Agreement upon written execution of this Contract, Agreement will commence when the active JOC Facilities Agreement meets maximum amount payable or after the one year expiration date, whichever comes first.

COUNTY will not issue any new Job Orders after the expiration of this Agreement. Any Job Order authorized prior to the expiration of the Agreement must be completed within the time specified in the Job Order. In the event the scheduled completion for any Job Order extends beyond the term of this Agreement, CONTRACTOR and COUNTY agree that the terms of this Agreement shall continue in effect and be applicable for such Job Orders. A separate Job Order Notice to Proceed (NTP) will be issued for each Job Order. Each Job Order will specify a time limit for completion as stated on the Job Order NTP.

ARTICLE 3. ADJUSTMENT FACTORS

CONTRACTOR shall perform all Work required, necessary, proper for, or incidental to completing the Detailed SOW called for in each individual Job Order issued pursuant to this Contract for the Unit Prices set forth in the CTC. COUNTY shall pay CONTRATOR the Job Order Price for completion of Work in accordance with Contract Documents and the Detailed SOW described in each Job Order multiplied by the following Adjustment Factors:

ADJUSTMENT FACTORS

CONTRACTOR will have the opportunity to receive Job Orders totaling at least \$25,000 during the Contract term. The Maximum Contract Value is \$6,023,368 for the **JOC FACILITIES 2024-04.** COUNTY does not guarantee CONTRACTOR will receive this volume of Work. COUNTY may award contracts or issue Job Orders to other contractors for the same or similar Work during the term of this Agreement. In no event will CONTRACTOR be issued Job Orders which, in total, exceed the Maximum Contract Value. At no time may the sum of the outstanding Job Orders exceed the amount of the Payment Bond and Performance Bond. A Job Order is outstanding until COUNTY has accepted the Work described in the Job Order by recordation of a Notice of Completion. CONTRACTOR will not be issued Job Orders which in total exceed the Maximum Contract Value.

ITEM	DESCRIPTION	ADJUSTMENT FACTORS
1.	Normal Working Hours–General Facilities 7 a.m. to 5 p.m. Monday through Friday	1.1000
2.	Other than Normal Working Hours–General Facilities Hours outside of Normal Working Hours including all day Saturday, Sunday, and COUNTY Holidays	1.1200
3.	Normal Working Hours – Detention Facilities 7 a.m. to 5 p.m. Monday through Friday	1.1400
4.	Other than Normal Working Hours–Detention Facilities Hours outside of Normal Working Hours including all day Saturday, Sunday, and COUNTY Holidays	1.1400

ARTICLE 4. <u>LIQUIDATED DAMAGES</u>

COUNTY and CONTRACTOR recognize that time is of the essence of this Agreement and that County will suffer financial loss, if all or any part of the Work is not completed within the time specified in the Job Order, plus any extensions thereof. Accordingly, COUNTY and CONTRACTOR agree that liquidated damages for delay will be established by COUNTY for each Job Order. CONTRACTOR shall pay COUNTY the dollar amount stipulated in the Job Order for each day that expires after the time specified therein for CONTRACTOR to achieve

Completion.

These measures of liquidated damages shall apply cumulatively and except as provided below, shall be presumed to be the damages suffered by COUNTY resulting from delay in completion of the Work.

Liquidated damages for delay shall only cover project administrative (such as Project management and consultant expenses) and cost damages suffered by COUNTY as a result of delay. Liquidated damages shall not cover the cost of completion of the Work, damages resulting from Defective Work, lost revenues or costs of substitute facilities, or damages suffered by others who then seek to recover their damages from COUNTY (for example, delay claims of other contractors, subcontractors, tenants, or other third-parties), and defense costs thereof.

ARTICLE 5. NOTIFICATION OF THIRD-PARTY CLAIMS

COUNTY shall notify CONTRACTOR of the receipt of any third-party claim relating to the contract and is entitled to recover its reasonable costs incurred in providing the notification as provided in Public Contract Code Section 9201.

ARTICLE 6. COMPONENT PARTS OF THIS CONTRACT

The Contract entered into by this Agreement consists of the following Contract Documents, all of which are component parts of the Contract as if herein set out in full or attached hereto:

- Notice to Bidders
- Information for Bidders
- Bid, as accepted
- Noncollusion Affidavit
- Workers' Compensation Certificate
- Statement Concerning Employment of Undocumented Aliens
- Iran Contracting Certification
- Contractor's Certification of Good Faith Effort to Employ Monterey Bay Area Residents
- Written Plan to Recruit Monterey Bay Area Residents, when applicable
- Bid Bond or Bidder's Security
- Agreement
- Performance Bond
- Payment Bond
- Insurance Certificate

- Division 00710 General Conditions, **Bid No. FACILITIES 2024-04**
- Project Specifications
- Construction Task Catalog®
- Technical Specifications
- Community Development Block Grant (CDBG) Subrecipient Agreement Template
- Required Federal-Aid Contract
 Language Caltrans Local Assistance
 ManualFederal Emergency Management
 Agency (FEMA) Standard Provisions
 and Requirements
- Monterey County Telecommunications Cabling and Pathway Systems Requirements
- As issued, Addenda Nos: 1

All of the above-named Contract Documents are intended to be complementary. Work required by one of the above-named Contract Documents and not by others shall be done as if required by all.

IN WITNESS WHEREOF, the parties have duly executed four (4) identical counterparts of this instrument, each of which shall be for all purposes deemed an original thereof, on the dates set forth below.

Name, Title

Date:

COUNTY OF MONTEREY	CONTRACTOR: R.F. KOERBER, INC.
By:	By:
Name: Randell Ishii, MS, PE, TE	Name: Justin Koerber
Title: Department of Public Works, Facilities, and Parks	Title: President
(PWFP) Director	(Per California Corporations Code Section 313, for Corporations, first signatory should be Chair, President OR Vice President)
Date:	Date: 9/11/2024 12:47 PM PDT
APPROVED AS TO FORM	& By:
CONTRACTS/PURCHASING	Name: Justin Koerber
By:	Title: CFO
Name: Debra R. Wilson	(Per California Corporations Code Section 313, for Corporations, second
Title: Contracts/Purchasing Officer	signatory should be the Secretary, Assistant Secretary, Treasurer, Assistant Treasurer OR CFO)
Date:	Date: 9/11/2024 12:47 PM PDT
APPROVED AS TO FORM	COMPANY ADDRESS:
OFFICE OF THE COUNTY COUNSEL	PO BOX 431
Susan K. Bligala Gounty Counsel	PASO ROBLES, CA 93447
By: Mary Grace Perry. 633031E17FD247F	Contractor's License Type: B
Mary Grace Perry, Deputy County Counsel	License Number: 863577
Date: 9/20/2024 1:32 PM PDT	License Expiration Date: 8/31/2025
APPROVED AS TO FISCAL TERMS	NOTE: CONTRACTORS ARE REQUIRED TO BE LICENSED AND REGULATED BY THE CONTRACTORS' STATE LICENSE BOARD. ANY QUESTIONS CONCERNING A CONTRACTOR MAY BE
COUNTY AUDITOR-CONTROLLER DocuSigned by:	REFERRED TO THE REGISTRAR, CONTRACTORS' STATE
Ruph Shah, Auditor Controller Patricia Ruiy By:	LICENSE BOARD, P O BOX 26000, SACRAMENTO, CALIFORNIA 95826
Patricia Ruiz	
Name: Ma Mon Auditor Controller Analyst I	INSTRUCTIONS: If bidder is a corporation, the full
Title: Chief Deputy Auditor-Controller	legal name of the corporation shall be set forth above
Date: 9/23/2024 8:12 AM PDT	together with the signatures of two (2) officers authorized to sign per California Corporations Code Section 313 and the document shall bear the corporate seal; if bidder is a
APPROVED AS TO INDEMNITY/INSURANCE PROVISIONS	Limited Liability Corporation (LLC), the full legal name of the LLC shall be set forth above together with the signatures of two (2) managers; if bidder is a partnership,
OFFICE OF THE COUNTY COUNSEL-RISK MANAGEMENT, David Bolton, Risk Management	the full name of the firm shall be set forth above together with the signature of the partner or partners authorized to sign contracts on behalf of the partnership; and if bidder is
By:	an individual, his/her signature shall be placed above.

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ONE ORIGINAL COPY

BOND NUMBER 024278644

PREMIUM:\$28,131.00 IS SUBJECT TO CHANGE BASED ON FINAL CONTRACT PRICE.

PERFORMANCE BOND

(Public Contract Code Section 20129)
Division 00600

WHEREAS, County of Monterey "COUNTY" has awarded to Principal,
R.F. KOERBER, INC.
as CONTRACTOR, for the following project (Check One Box):
PROJECT NO. JOC 2024, BID NO. FACILITIES 2024-01; OR
PROJECT NO. JOC 2024, BID NO. FACILITIES 2024-02; OR
PROJECT NO. JOC 2024, BID NO. FACILITIES 2024-03; OR
PROJECT NO. JOC 2024, BID NO. FACILITIES 2024-04; and
WHEREAS, Principal, as CONTRACTOR, is required to furnish a bond in connection with said Contract, to secure the faithful performance of said Contract.
NOW, THEREFORE, we R.F. KOERBER, INC.
as Principal, and THE OHIO CASUALTY INSURANCE COMPANY

as Surety, are held and firmly bound unto the County of Monterey, a political subdivision of the State of California (hereinafter called "COUNTY"), in the penal sum of Three Million, Eleven Thousand, Six undred and Eighty-Four Dollars (\$3,011,684), for the payment of which sum in lawful money of the United States, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

If the Principal, as CONTRACTOR, or Principal's heirs, executors, administrators, successors, or assigns, (1) shall in all things stand to and abide by and well and truly keep and perform the covenants, conditions, and agreements in said Contract and any alteration thereof made as therein provided, on Principal's part to be kept and performed, at the time and in the manner therein specified and in all respects according to their true intent and meaning, and (2) shall indemnify, defend, and save harmless the County, the members of its board of supervisors, and its officers, agents, and employees as therein stipulated, then this obligation shall become null and void; otherwise, it shall be and remain in full force and virtue.

Surety hereby stipulates and agrees that no change, extension of time, alteration, or addition to the terms of the Contract or the call for bids, or to the Work to be performed thereunder, or the specifications accompanying the same, shall in any way affect its obligation under this bond, and it does hereby waive notice of any such change, extension of time, alteration or addition to the terms of said Contract or the call for bids, or to the Work, or to the specifications.

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Whenever the Principal, as CONTRACTOR, is in default, and is declared in default, under the Contract by the County of Monterey, the County of Monterey having performed its obligation under the Contract, Surety may promptly remedy the default, or shall promptly:

- 1. Complete the Contract in accordance with its terms or conditions, or
- 2. Obtain a bid or bids for submission to County of Monterey for completing the Contract in accordance with its terms or conditions, and upon determination by the County of Monterey and Surety of the lowest responsible and responsive bidder, arrange for a Contract between such bidder and the County of Monterey, and make available as Work progresses (even though there should be a default or succession of defaults under the Contract or Contracts of completion arranged under this paragraph) sufficient funds to pay the cost of completion less the balance of the Contract price.

If suit is brought upon this bond by the COUNTY and judgment is recovered, the Surety shall pay all litigation expenses incurred by the COUNTY in such suit, including attorneys' fees, court costs, expert witness fees, and investigation expenses.

IN WITNESS WHEREOF, the above-bonded parties have executed this instrument under their several seals this 6TH day of SEPTEMBER, 2024, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

(Corporate Seal) R.F. KOERBER, INC.

Principal

By:

Title: Justin REGINALS WORDON

(Corporate Seal) THE OHIO CASUALTY INSURANCE COMPANY

Surety

By:

Title: BRITTON CHRISTIANSEN, ATTORNEY-in-FACT

Attach: 1) Copy of authorization for signature for Principal, and 2) original or certified copy of unrevoked appointment, Power of Attorney, Attorney-in-Fact Certificate bylaws or other instrument entitling or authorizing person executing bond on behalf of Surety to do so.



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

> Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No: 8210752-969577

bond and/or Power of Attorney ise call 610-832-8240 or email I

For bon please

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint,	
all of the city of Covina state of CA each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.	
IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this11th day ofSeptember,2023	
Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company 1912 1919 1919 By:	fuines,
State of PENNSYLVANIA County of MONTGOMERY David M. Carey, Assistant Secretary State of PENNSYLVANIA	ou no
On this 11th day of September, 2023 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.	verification inquines,
IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.	(POA)



Commonwealth of Pennsylvania - Notary Sea Teresa Pastella, Notary Public Montgomery County My commission expires March 28, 2025 Commission number 1126044

Member, Pennsylvania Association of Notanes

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys in fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys in fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 6TH day of SEPTEMBER,







Renee C. Llewellyn, Assistant Secretary

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate document to which this certificate is attached, and not the	e verifies only the identity of the individual who signed the truthfulness, accuracy, or validity of that document.
State of California) County of SAN LUIS OBISPO) On SEP 0 6 2024 before me,	McKENZIE SALAZAR, NOTARY PUBLIC
Date personally appeared BRITTON CHRISTIANSEN	Here Insert Name and Title of the Officer
	Name(s) of Signer(s)
subscribed to the within instrument and acknowle	evidence to be the person(s) whose name(s) is/are dged to me that he/she/they executed the same in /her/their signature(s) on the instrument the person(s), ed, executed the instrument.
MCKENZIE SALAZAR Notary Public - California San Luis Obispo County Commission # 2459004 My Comm. Expires Aug 13, 2027	f the State of California that the foregoing paragraph true and correct. ITNESS my hand and official seal. ignature Signature of Notary Public
Place Notary Seal Above	ONAL
Though this section is optional, completing this in	ornation can deter alteration of the document or form to an unintended document.
Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Than	
Capacity(ies) Claimed by Signer(s) Signer's Name:	Signer's Name: Corporate Officer — Title(s): Partner — _ Limited _ General

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CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. County of Monterey 09/17/204 before me, James Chare, Notary Public.

Date
Here Insert Name and Title of the Officer

conally appeared System Reginal Koerber who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing JASMIN CHAVEZ Notary Public - California Monterey County Commission # 2472918 paragraph is true and correct. omm. Expires Nov 21, 2027 WITNESS my hand and official seal. Signature Place Notary Seal and/or Stamp Above Notary Public **OPTIONAL** Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document Title or Type of Document: Document Date: __ Number of Pages: __ Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: _ □ Corporate Officer – Title(s): ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact ☐ Individual ☐ Attorney in Fact □ Trustee □ Guardian or Conservator Guardian or Conservator ☐ Trustee ☐ Other: ☐ Other: = Signer is Representing: Signer is Representing: ___

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ONE ORIGINAL COPY

BOND NUMBER 024278644

PAYMENT BOND

(Civil Code Section 9550) Division 00610

WHEREAS, the County of Mo	nterey ("COUNTY") has awarded to Principal,
R.F. KOERBER, INC.	
as CONTRACTOR, a Contract	for the following (Check One Box):
PROJECT NO. JOC 202	4, BID NO. FACILITIES 2024-01;
PROJECT NO. JOC 202	4, BID NO. FACILITIES 2024-02;
PROJECT NO. JOC 202	4, BID NO. FACILITIES 2024-03;
PROJECT NO. JOC 202	4, BID NO. FACILITIES 2024-04; and
Contract, to secure the payment	TRACTOR, is required to furnish a bond in connection with said to f claims of laborers, mechanics, material providers, and other persons on the project, as provided by law.
NOW, THEREFORE, we	R.F. KOERBER, INC.
as Principal, and THE OHIO C	ASUALTY INSURANCE COMPANY

as Surety, are held and firmly bound unto the County of Monterey, a political subdivision of the State of California (hereinafter called "COUNTY"), and to the persons named in California Civil Code Section 9100 in the penal sum of Three Million, Eleven Thousand, Six undred and Eighty-Four Dollars (\$3,011,684) for the payment of which sum in lawful money of the United States, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT:

If Principal or any of Principal's heirs, executors, administrators, successors, assigns, or subcontractors (1) fails to pay in full all of the persons named in Civil Code Section 9100 with respect to any labor or materials furnished by said persons on the project described above, or (2) fails to pay in full all amounts due under the California Unemployment Insurance Code with respect to work or labor performed under the Contract on the project described above, or (3) fails to pay for any amounts required to be deducted, withheld, and paid over to the Employment Development Department from the wages of employees of the Principal and subcontractors pursuant to Unemployment Insurance Code Section 13020 with respect to such Work and labor, then the Surety shall pay for the same.

Surety hereby stipulates and agrees that no change, extension of time, alteration or addition to the terms of the Contract on the call for bids, or to the Work to be performed thereunder, or the specifications accompanying the same, shall in any way affect its obligation under this bond, and it does hereby waive notice of any such change, extension of time, alteration or addition to the terms of said Contract or the call for bids, or to the Work, or to the specifications.

Project JOC 2024-FACILITIES Project Specifications Page 35 DocuSign Envelope ID: DC34F49E-405F-425A-8F45-6BF82C0BEA57

If the COUNTY brings suit upon this bond and judgment is recovered, the Surety shall pay all litigation expenses incurred by the COUNTY in such suit, including attorneys' fees, court costs, expert witness fees and investigation expenses.

This bond inures to the benefit of any of the persons named in Civil Code Section 9100, and such persons or their assigns shall have a right of action in any suit brought upon this bond, subject to any limitations set forth in Civil Code Sections 9550 et seq. (Civil Code, Division 4, Part 6, Title 3, Chapter 5: Payment Bond for Public Works).

IN WITNESS WHEREOF the above bounden parties have executed this instrument under their several seals this 6TH day of SEPTEMBER, 2024, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

(Corporate Seal) R.F. KOERBER, INC.

Principal

3v: <

Title: Justin PEGINAUD KOBOBA, CEC

(Corporate Seal) THE OHIO CASUALTY INSURANCE COMPANY

Surety

By: _

Title: BRITTON CHRISTIANSEN, ATTORNEY-in-FACT

Attach: 1) Copy of authorization for signature for Principal, and 2) original or certified copy of unrevoked appointment, Power of Attorney, Attorney-in-Fact Certificate bylaws or other instrument entitling or authorizing person executing bond on behalf of Surety to do so.



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

> **Eiberty Mutual Insurance Company** The Ohio Casualty Insurance Company West American Insurance Company

Certificate No. 8210752-969577

HOSUR@libertymutual.com

bond and/o sse call 610

For bor please

DOWED OF ATTORNEY

			FOTTLI	OF ATTORN	IL I	
Liberty Mutual Insurance under the laws of the S	ce Company is a corpor	ation duly organized collectively called the	I under the laws of t	the State of Massachuse	viation duly organized under the laws of the State of New Hamps alts, and West American Insurance Company is a corporation duly of the herein set forth, does hereby name, constitute and appoint,	
						1 - 500
				and deed, any and all un	f there be more than one named, its true and lawful attorney-in-fact dertakings, bonds, recognizances and other surety obligations, in pusident and attested by the secretary of the Companies in their ow	ursuance
	OF, this Power of Attorr	•	ribed by an authoriz	ed officer or official of the	ne Companies and the corporate seals of the Companies have been	n affixed
State of PENNSYLVAN	JIA	912 CONSTRUCTION OF THE PROPERTY OF THE PROPER	1919	1991 CONTORNE AND	Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company By: David M. Carey, Assistant Secretary	inimi
Office of L Child of EAVI.	22					

County of MONTGOMERY

(POA) verification 11th day of September , 2023 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mulual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



ommonwealth of Pennsylvania - Notary Sea Teresa Pastella, Notary Public Montgomery County My commission expires March 28, 2025 Commission number 1126044 Member, Pennsylvania Association of Notaces

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

nd/or Power of Attorney 610-832-8240 or email Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys in fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 6TH day of SEPTEMBER,







Renee C. Llewellyn, Assistant Secretary

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate document to which this certificate is attached, and not the	ate verifies only the identity of the individual who signed the he truthfulness, accuracy, or validity of that document.
State of California) County of SAN LUIS OBISPO) On SEP 0 6 2024 before me,	McKENZIE SALAZAR, NOTARY PUBLIC
Date	Here Insert Name and Title of the Officer
personally appeared BRITTON CHRISTIANSEI	N
	Name(s) of Signer(s)
subscribed to the within instrument and acknow	evidence to be the person(s) whose name(s) is/are ledged to me that he/she/they executed the same in is/her/their signature(s) on the instrument the person(s), cted, executed the instrument.
	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
MCKENZIE SALAZAR Notary Public - California San Luls Obispo County Commission # 2459004 My Comm. Expires Aug 13, 2027	WITNESS my hand and official seal. Signature Malayan Signature of Notary Public
Place Notary Seal Above	
Though this section is optional, completing this	TIONAL information can deter alteration of the document or form to an unintended document.
Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Tha	n Named Above:
Capacity(ies) Claimed by Signer(s) Signer's Name:	Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer is Representing:
CONTRACTOR OF THE STANDARD CONTRACTOR OF THE STA	\$\U\U\U\U\U\U\U\U\U\U\U\U\U\U\U\U\U\U\U

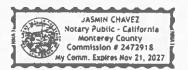
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CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

I PRINTERIO DE SENTE LE PRESENTATION DE LA PRINTE DE LA P

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Place Notary Seal and/or Stamp Above

Sayante St Notary Public

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document: ___ Document Date: __ Number of Pages: Signer(s) Other Than Named Above: _____ Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: ☐ Corporate Officer - Title(s): ☐ Corporate Officer - Title(s): ☐ Partner — ☐ Limited ☐ General □ Partner - □ Limited □ General ☐ Individual ☐ Attorney in Fact □ Individual ☐ Attorney in Fact □-Trustee □ Guardian or Conservator ☐ Trustee Guardian or Conservator ☐ Other: □ Other: Signer is Representing: ____ Signer is Representing:



P.O. BOX 8192, PLEASANTON, CA 94588

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ISSUE DATE: 09-03-2024

GROUP:

POLICY NUMBER:

9140487-2024

CERTIFICATE ID:

211

CERTIFICATE EXPIRES: 09-01-2025

09-01-2024/09-01-2025

COUNTY OF MONTEREY

SC

JOB: COUNTY OF MONTEREY JOC FACILITIES 2024-04

1441 SCHILLING PL

SALINAS CA 93901

1441 SCHILLING PL SALINAS CA 93901-4543

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon 30 days advance written notice to the employer.

We will also give you 30 days advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policy listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate of insurance may be issued or to which it may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions, and conditions, of such policy.

Authorized Representative

President and CEO

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000 PER OCCURRENCE.

ENDORSEMENT #2085 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE 09-01-2024 IS ATTACHED TO AND FORMS A PART OF THIS POLICY.

ENDORSEMENT #2572 ENTITLED BLANKET WAIVER OF SUBROGATION EFFECTIVE 2024-09-01 IS ATTACHED TO AND FORMS A PART OF THIS POLICY

EMPLOYER

R F KOERBER, INC. (A CORP) PO BOX 431 PASO ROBLES CA 93447 SC

[P1B,H0]

PRINTED: 09-03-2024



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/10/2024

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed.

		BROGATION IS WAIVED, subject to ertificate does not confer rights to				uch en	dorsement(s		juire an endorsement. A	l state	ement on
PRODUCER Ted Hamm Insurance Agency			CONTACY NAME: Ailsa Hunter								
1503 Park Street				PHONE (A/C, No	o. Ext): (000)	238-1818	FAX (A/C, No);	(888)2	79-2649		
		Paso Robles, CA 93446				E-MAIL ADDRE	ss: allsa	@thiapaso.co	om		
		License #: 0L89671						URER(S) AFFOR	RDING COVERAGE		NAIC#
		Licelise w. OLOSO7 I				INSURE	RA: Evan	ston Insur	ance Company		
INSU	RED					INSURE			nce Company		10914
		R F Koerber, Inc.				INSURE			ince Company		
		PO BOX 431				INSURE					
		Paso Robles, CA 93447			•	INSURE					
						INSURE	RF:				ĺ
CO	VER	AGES CER	TIFIC	CATE	E NUMBER: 00002755-3				REVISION NUMBER:	4	
IN Cl	DICA	S TO CERTIFY THAT THE POLICIES OF ATED. NOTWITHSTANDING ANY REC FICATE MAY BE ISSUED OR MAY PE USIONS AND CONDITIONS OF SUCH	DUIRE RTAII POLI	EMEN N, TH CIES.	IT, TERM OR CONDITION OF E INSURANCE AFFORDED I LIMITS SHOWN MAY HAVE	F ANY C BY THE	CONTRACT OF POLICIES DE REDUCED BY	R OTHER DOC SCRIBED HER PAID CLAIMS:	UMENT WITH RESPECT TO REIN IS SUBJECT TO ALL T	HW C	CH THIS
INSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMBT	9	
A	Х	COMMERCIAL GENERAL LIABILITY	Y	Υ	3AA756181		02/21/2024	02/21/2025	EACH OCCURRENCE	\$	1,000,000
•		CLAIMS-MADE X OCCUR	_						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
									MED EXP (Any one person)	s	5,000
]					PERSONAL & ADV INJURY	\$	1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000
	X	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:								\$	
В	AUT	OMOBILE LIABILITY	Υ	Y	50010204801		05/06/2024	11/06/2024	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO	•	1					BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS		1					BODILY INJURY (Per accident)	\$	
		AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
		AUTOS ONLY AUTOS ONLY			:				<u> </u>	S	
С	Х	UMBRELLA LIAB X OCCUR			AN1312028		04/26/2024	04/26/2025	EACH OCCURRENCE	\$	1,000,000
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	1,000,000
		DED RETENTION \$								\$	
		RKERS COMPENSATION							PER OTH- STATUTE ER		
		PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	
	OFF	ICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE	\$	
	If yes	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	5	
A	-	llution			CPLMOL122068		02/21/2024	02/21/2025	Occurrence		1,000,000
	"										
DES	CRIPT	TION OF OPERATIONS / LOCATIONS / VEHICL	LES (/	ACORE) 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requir	ed)		
TH	IE C	OUNTY OF MONTEREY, its O	ffice	ers, I	Employees, Represena	itives,	Volunteers	and Agent	ts are listed as Additic	onal I	nsured
		espect to liability per written a	gree	eme	nt to include Primary a	ind No	ncontribut	ory as per e	endorsements for job	: Mon	iterey
Co	unt	y JOC Facilities 2024-04									
CF	RTIF	FICATE HOLDER				CAN	CELLATION	·			
	- 4 38							***			
									ESCRIBED POLICIES BE C		
		County of Monterey, Departs	nent	of P	ublic Works, Facilities				OF, NOTICE WILL BE DELIV BY PROVISIONS.	EKEU	1174

and Parks

Salinas, CA 93901

1441 Schillnig Place, 2nd Floor

AUTHORIZED REPRESENTATIVE

COMMERCIAL GENERAL LIABILITY
CG 20 10 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Only those parties required to be named as an additional insured in a written contract with a named insured under this policy, entered into prior to loss or "occurrence".	All

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above. B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

COMMERCIAL GENERAL LIABILITY CG 20 37 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Only those parties required to be named as an additional insured in a written contract with a named insured under this policy, entered into prior to loss or "occurrence".	Name Of Additional Insured Person(s) Or Organization(s):	Location And Description Of Completed Operations
	named as an additional insured in a written contract with a named insured under this policy, entered into prior to loss or	

Section II — Who is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

COMMERCIAL GENERAL LIABILITY CG 24 04 05 09

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

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

SCHEDULE

Name Of Person Or Organization:

Only such Person or Organization where required in a written contract with the Named insured under this policy, entered into prior to the loss or "occurrence".

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

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

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.



Kemper Auto Commercial

11702 Great Oaks Way, Suite 450 Alpharetta, GA 30022 Underwritten by Infinity Select Insurance Company

Customer Service (£00) 727-2391

Claims Service (800) 334-1-61

ADDITIONAL NAMED INSURED ENDORSEMENT

Copy To	Policy ID Number	Expiration Date
	50010204801	11/06/2024 12:01 a.m.
County of Monterey, Department of Public Works, Facilities and Parks 1441 Schilling Place, 2nd Floor		Insured
Salinac CA 93961	This endrusen ships at all field No. No enanges and unletted we prior	g pilinger a pot of new stead policy. In this time topology and rapid 55 0

Additional Insured	
County of Monterey, Department of Public Works, Facilities and Parks	

Part A - Liability Coverage, is changed as follows

The definition of insured is changed to include the additional insured named above. Adding an insured will not increase the limit of our flamility. The insural de provided by this endorsement will be excess over any other valid and collectible insurance.

All other parts of this Policy remain unchanged

AMENDIDATE 25:07/2024 ENDORSEMENT I-11



Kemper Auto Commercial

1700 Great Oaks Way Suite 450 Alpharetta, GA 30022 Underwritten by Infinity Select Insurance Company

Customer Service: 800) 722-2381

Claims Service (800) 334-1661

WAIVER OF SUBROGATION

Сору То	Policy ID Number	Expiration Date	
	50010204801	11/06/2024 12:01 a m	
County of Monterey Department of Public Viorks Facilities and Parks 1441 Schilling Place 2nd Floor Salmas, CA 93901	Name	Insured	
	F F KOERBERING		
	This engorsement is attack	red to and forms a part of the	
	listed policy. No changes will be effective phon to the time		
	changes are reduested.		

In return for your premium payment shown below we agree that our rights of subrogation or rights of recovery under the policy will not apply against the following person or organization

County of Monterey, Department of Public Works, Facilities and Parks

mame of person or organization,

Additional premium in this amount of \$50.10 will be retained by us regardless of any early termination of this endorsement or the policy.

All other policy provisions remain unchanged.



Kemper Auto Commercial

11700 Great Oaks Way Suite 450 Alpharetta GA 30022

Underwritten by Infinity Select Insurance Company

Customer Service (200) 722-3291

Claims Service (500) 334-1661

PRIMARY AND NONCONTRIBUTORY ENDORSEMENT

Сору То	Policy ID Number	Expiration Date
County of Montare, Department of Factories and Parks 1441 Schilling Place Tool Faces Salinus CA 53901	50010204801	11/06/2024 12:01 a.m.
	Named Insured	
	FI KOERERING	
	This endorsement is attribued to and forms a part of the listed policy. The following endorsement applies only if Form Number 503/2NCV01 appears on your Daclarations Page.	

This encorsement modifies the insurance provided under your COMMERCIAL AUTO POLICY.

PART A - LIABILITY COVERAGE OTHER INSURANCE - PART A ONLY

The following is added to this section.

The coverage afforded under your Commercial Auto Policy is primary to a to will not seek contribution from any other insurance available to an activional insurabilinder your policy of by decitinat

- a. You have agreed in writing in a contract or agreement that the coverage afforded under your Commercial Auto Policy would be primary and would not seek contribution from any other insurance available to such additional insured, and
- b. Such additional insured is a named insured under such other insurer ca-

ALL OTHER TERMS, LIMITS, CONDITIONS, AND PROVISIONS OF THE POLICY REMAIN UNCHANGED.

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

PRIMARY AND NON-CONTRIBUTING INSURANCE

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE FORM

The following is added to SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, Paragraph 4:

Section IV: Commercial General Liability Conditions

4. Other Insurance:

d. Notwithstanding the provisions of sub-paragraphs a, b, and c of this paragraph 4, with respect to the Third Party as defined below, it is understood and agreed that in the event of a claim or "suit" caused in whole or in part by the Named Insured's negligence, this insurance shall be primary and any other insurance maintained by the additional insured named as the Third Party below shall be excess and non-contributory.

The Third Party to whom this endorsement applies is:

Only those parties required to be named as an additional insured in a written contract with a named insured under this policy, entered into prior to loss or "occurrence".

Absence of a specifically named Third Party above means this endorsement applies only to those third parties required to be named as an Additional Insured as Primary and Non-Contributory coverage specified in a written contract with the Named Insured under this policy, entered into prior to the "loss" or "occurrence".

All other terms, conditions and exclusions under this policy are applicable to this Endorsement and remain unchanged.