

City Contract

Version 4.6 released on 8/3/21



END 0119332

CITY COUNCIL USE ONLY

Date Received: _____
Committee Date: _____
1st Agenda Date: _____

Tracking #: _____

Committee: _____

Hearing Date: _____

2nd Agenda Date: _____

CITY CLERK USE ONLY

☐ Scanned

Date: 10.12.2022

☐ Posted

Item #: 2210-02286

All department items requiring Council approval must be submitted through the Mayor's Office.

Primary Details

Contract Phase

☐ New Contract ☐ Renewal ☐ Amendment ☒ **Statutory Change Order** ☐ Supplemental Documentation ☐ Quantity Adjustment ☐ Final Payment ☐ Permission to Continue ☐ Terminate/Cancel

Board Approval

Other Board Name

City Council Approval

Contract Number

☐ Yes ☐ No

136093

Department

Engineering Services

Contact Name

Ryan McKaskle

Email

rmckaskle@cityoftulsa.org

Phone

9185969508

Vendor Name(s)

Becco Contractors, Inc.

Vendor Number

1056

Description (Subject)

Arterial Street Widening S. Yale 81st to 91st

Contract Type

Public Const Proj

Contract Subtype

SSW I/M SCO COT

Bid/Project Number

144101TMUA-W 14-82 MS
635

Contract Amount

\$23,000.00

Budget

Contract Funding Type

☐ No Payment Involved
☐ Revenue Contract
☐ Expense Contract

Funding Source(s)

203310008Z.WaterDist.740074003122-541101:

\$23,000.00

TOTAL:

\$23,000.00

Approvals

Department: _____

Legal: _____

Board: _____

Mayor: _____

Other: _____

Date: 9/9/22

Date: 10-3-22

Date: OCT 12 2022

Date: _____

Date: _____

Policy Statement

Background Information

CHANGE ORDER DESCRIPTION AND JUSTIFICATION: Change Order No. 1 to Contract No. 136093, between the City of Tulsa and Becco Contractors, Inc., for Project No. 144101, TMUA-W 14-82, MS-635, in the amount of \$23,000.00 is necessary due to 1.5" waterline services encountered that need to be tied-into the new system, but, for which the Contract does not include pay items.

Summation of the Requested Action

Request Approval for Change Order No.1

Other Pertinent Details

Council District # 8, S. Yale Ave - 81st to 91st

Processing Information for City Clerk's Office

Post Execution Processing

☐ Mail vendor copy (add'l signature copies attached)
☐ Must be filed with other governmental entity
☐ Add'l governmental entity approval(s) required

HHS

Additional Routing and Processing Details

Project Expense Inquiry [City of ...



Back



Search



Browse



Output



Print



Display



PDF



Excel



Email



Schedule

(0)



Attach

Project string

▲ Project *	203310008Z ...	CW - Water Mains Replacement	Description
▲ Phase *	WaterDist ...	Water distribution mains	
▲ Task *	7400 ...	TMUA Water Capital Projects	
Sub-Task *	...		Justification
Name *	CW - Water Mains Replacement		
Short Name *	WTR_REPLC		
Status	Active ▼		
Projected date range	07/01/2019	to	07/01/2024
Actual date range		to	
			Project Available
			Actual overhead
			Expense Type

PROJECT STRING BALANCES

GL ACCOUNTS

	Project Year 2023		Project Year 2022		Project Year 2021
Original Budget	.00		.00		
Transfers - In	.00		214,260.87		
Transfers - Out	.00		.00		
Revised Budget	14,955,060.87		14,955,060.87		14,740,000.00
Actual (Memo)	4,462.26		5,799,426.91		2,247,884.21
Encumbrances	6,874,851.03		-11,275.00		
SOY Encumbrances	.00		11,275.00		
Requisitions	.00		.00		
Inception to SOY	8,047,311.12		2,247,884.21		
Available	28,436.46		6,907,749.75		12,470,000.00
Percent Used	99.81		53.81		



1 of 1



Add / Display reminder alerts on ...



Engineering Services Department
MEMORANDUM

DATE: 8/18/22

SUBJECT: CHANGE ORDER NO. 1

Contract: 136093
Project: 144101, TMUA-W 14-82, MS-635
Project Title: Arterial Street Widening - S. Yale Ave. - 81st to 91st

Original Contract Amount:	\$ 29,257,000.00
Change Order No. 1 Amount:	\$ 23,000.00
Change Order No. 1 Percent:	0.08%
New Contract Amount:	\$ 29,280,000.00
Total of Change Order Amounts:	\$ 23,000.00
Total Change Order Percent:	0.08%
Original Contract Time (Calendar Days):	670
Change Order No. 1 Time Added (Calendar Days):	0
New Contract Time (Calendar Days):	670

CHANGE ORDER NO. 1 Consists of the Following:

During construction of Phase 2 waterlines, five water services were encountered in the 1.5" size for which the Contract did not include pay items. These services must be reconnected to the new waterline system.

The cost to reconnect the five services is \$23,00.00.

CITY OF TULSA
CHANGE ORDER NO. 1
BOND NO. 1021640
CONTRACT NO. 136093
PROJECT NO. 144101, TMUA-W 14-82, MS-635
ARETERIAL STREET WIDENING
SOUTH YALE AVENUE FROM EAST 81ST ST SOUTH TO EAST 91ST ST SOUTH

CHANGE ORDER DESCRIPTION AND JUSTIFICATION: Change Order No. 1 to Contract No. 136093, between the CITY OF TULSA and BECCO CONTRACTORS, INC., for Project No. 144101, TMUA-W 14-82, MS-635, in the amount of \$23,000.00 is necessary due to 1.5" waterline services encountered that need to be tied-into the new system, but, for which the Contract does not include pay items.

Decrease in Contract Price: \$0.00

Increase in Contract Price: \$23,000.00

Net Change in contract Amount: \$23,000.00

DESCRIPTION OF CHANGES:

Original contract amount was:	\$29,257,000.00
Net dollar increase by previous Change Order:	\$0.00
Net percent increase by previous Change Order:	0.00%
Contract amount prior to this Change Order:	\$29,257,000.00
Contract sum is increased by this Change Order:	\$23,000.00
This Change Order is a percentage increase of:	0.08%
Contract amount including this Change Order:	\$29,280,000.00
The total dollar increase including this Change Order:	\$23,000.00
The percentage increase including this Change Order:	0.08%
Contract time prior to this Change Order:	670 Calendar Days
Contract time will be increased by:	0 Calendar Days

IN TESTIMONY WHEREOF, the parties hereto have caused this Change Order to be executed by their duly authorized officers or representatives on this _____ day of _____, 20____
(to be dated by City Clerk upon approval)

CITY OF TULSA
A municipal corporation

By _____
Mayor

ATTEST:

City Clerk

APPROVED:

Asst. Erica Grayson
City Attorney
[Signature]
City Engineer
[Signature]
Architect/Engineer

APPROVED BY CITY COUNCIL

Date: _____

By: _____
Chairman

CONTRACTOR:

Becco Contractors, Inc.

By: Carol S. Smith

Printed Name: Carol S. Smith

Title: President

Date: August 24, 2022

ATTEST:

William E. Smith
Corporate Secretary (SEAL)



8/24/22
Date

SURETY:

Mid-Continent Casualty Company

By: Sharon Stone

Printed Name: Sharon Stone, Attorney-in-Fact

Date: August 24, 2022
Attorney-in-Fact (SEAL)
(Attached Power of Attorney)

(Date must match Power of Attorney)

SURETY

Great American Insurance Company

By: Sharon Stone

Printed Name: Sharon Stone, Attorney-in-Fact

Date: August 24, 2022
(SEAL) Attach Power of Attorney

MID-CONTINENT CASUALTY COMPANY

1437 South Boulder, Suite 200, Tulsa, Oklahoma 74119 · Ph: 918-587-7221 · Fax: 918-588-1296

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the **Mid-Continent Casualty Company**, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof. Timothy W. Driskill, Guy Griggs, Sylvia M. Hyde, Jeff R. Johnson, William L. Johnson, Lynn Pelnik, Dawn Reside, Sharon Stone, Barry W. Tims, Robert Turner, all of TULSA, OK.

IN WITNESS WHEREOF, the **Mid-Continent Casualty Company** has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 18 day of April, 2022.



ATTEST:

Sharon Hackl

Sharon Hackl, Assistant Secretary

MID-CONTINENT CASUALTY COMPANY

Todd Bazata

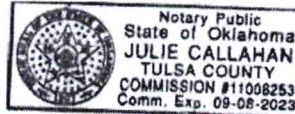
Todd Bazata, Vice President

On this 18 day of April, 2022 before me personally appeared Todd Bazata, to me known, being duly sworn, deposes and says that s/he resides in Broken Arrow, Oklahoma, that s/he is a Vice President of **Mid-Continent Casualty Company**, the company described in and which executed the above instrument; that s/he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of her/his office under the By-Laws of said Company, and that s/he signed his name thereto by like authority.

STATE OF OKLAHOMA

} SS

COUNTY OF TULSA



Commission # 11008253

My Commission Expires: 09-08-23

Julie Callahan

Julie Callahan, Notary Public

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of **Mid-Continent Casualty Company** by unanimous written consent dated September 25, 2009.

RESOLVED: That the President, the Executive Vice President, the several Senior Vice Presidents and Vice Presidents or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, Sharon Hackl, Assistant Secretary of **Mid-Continent Casualty Company**, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of September 25, 2009 have not been revoked and are now in full force and effect.



Signed and sealed this 24th day of August, 2022

Sharon Hackl

Sharon Hackl, Assistant Secretary

VOID IF BOX IS EMPTY

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET • CINCINNATI, OHIO 45202 • 513-369-5000 • FAX 513-723-2740

The number of persons authorized by
this power of attorney is not more than TWO

No. 0 20096

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name	Address	Limit of Power
JEFF R. JOHNSON	BOTH OF	BOTH
SHARON STONE	TULSA, OKLAHOMA	\$100,000,000

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 15TH day of MAY, 2017

Attest

GREAT AMERICAN INSURANCE COMPANY



Stephen C. Beraha
Assistant Secretary

David C. Kitchen
Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss:

DAVID C. KITCHIN (877-377-2405)

On this 15TH day of MAY, 2017, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



Susan A. Kohorst
Notary Public, State of Ohio
My Commission Expires 05-18-2020

Susan A. Kohorst

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this

24th

day of

August

2022



Stephen C. Beraha
Assistant Secretary

AFFIDAVIT OF CLAIMANT

STATE OF OKLAHOMA

COUNTY OF TULSA

The undersigned, of lawful age, being first duly sworn, on oath says that this contract is true and correct. Affiant further states that the work, services or materials will be completed or supplied in accordance with the contract, plans, specifications, orders or requests furnished to the affiant. Affiant further states that (s)he has made no payment directly or indirectly of money or any other thing of value to any elected official, officer or employee of the City of Tulsa or any public trust of which the City is a beneficiary to obtain or procure the contract or purchase order.

By: Carol S. Smith
Signature

Name: CAROL S. SMITH

Company: BECCO CONTRACTORS, INC

Title: PRESIDENT

Subscribed and sworn to before me this 24TH day of AUGUST, 20 22.

AJW
Notary Public

My Commission Expires: 8/4/2026

Notary Commission Number: 22010578



INTEREST AFFIDAVIT

STATE OF OKLAHOMA)
) SS.
COUNTY OF TULSA)

I, CAROL S. SMITH, of lawful age, being first duly sworn, state that I am the agent authorized by Contractor, Engineer, Architect or provider of professional service ["Services Provider"] to submit the attached Agreement. Affiant further states that no officer or employee of the City of Tulsa either directly or indirectly owns a five percent (5%) interest or more in the Services Provider's business or such a percentage that constitutes a controlling interest. Affiant further states that the following officers and/or employees of the City of Tulsa own an interest in the Services Provider's business which is less than a controlling interest, either direct or indirect.

NONE

By: Carol S. Smith
Signature

Title: PRESIDENT

Subscribed and sworn to before me this 24TH day of AUGUST 20 22

[Signature]

Notary Public

My Commission Expires: 8/4/2026

Notary Commission Number: 22010578

County & State Where Notarized: TULSA COUNTY - OKLAHOMA



The Affidavit must be signed by an authorized agent and notarized.

NON-COLLUSION AFFIDAVIT

(Required by Oklahoma law, 74 O.S. §85.22-85.25)

STATE OF OKLAHOMA

)SS.

COUNTY OF TULSA)

I, CAROL S. SMITH, of lawful age, being first duly sworn, state that:
(Authorized Agent)

1. I am the authorized agent of Contractor, Engineer, Architect or provider of professional service ["Services Provider"] herein for the purposes of certifying facts pertaining to the existence of collusion between and among Services Provider and municipal officials or employees, as well as facts pertaining to the giving or offering of things of value to government personnel in return for special consideration in the letting of any contract pursuant to which this statement is attached.
2. I am fully aware of the facts and circumstances surrounding the making of the contract to which this statement is attached, and I have been personally and directly involved in the proceedings leading to the awarding of such contract; and
3. Neither the Services Provider nor anyone subject to the Services Provider's direction or control has been a party:
 - a. to any collusion with any municipal official or employee as to quantity, quality, or price in the prospective contract, or as to any other terms of such prospective contract, nor
 - b. in any discussions between Services Provider and any municipal official concerning exchange of money or other thing of value for special consideration in the letting of a contract.

By: Carol S. Smith
Signature

Title: PRESIDENT

Subscribed and sworn to before me this 24TH day of AUGUST 20 22

[Signature]
Notary Public

My Commission Expires: 8/4/2026

Notary Commission Number: 22010578

County & State Where Notarized: TULSA COUNTY - OKLAHOMA



The Affidavit must be signed by an authorized agent and notarized.

COST BREAKDOWN FOR CHANGE ORDER

Contract No.: 136093

Date: 04/27/22

Project No.: 144101 S. Yale Ave, 81st to 91st

Contractor: Becco Contractors, Inc.

Description of Work: 1.5" Short Service Connection

Materials:

Items	Units	Cost	Quantity	Amount
12" X 1-1/2" CC 313 TAP SADDLE	EA	\$104.00	5.00	\$520.00
1-1/2" FB1600-NL CORP STOP	EA	\$204.00	5.00	\$1,020.00
1-1/2" VBHH76-95599-001-NL METE	EA	\$1,976.00	5.00	\$9,880.00
1-1/2" #90581 PEX PRESS X MIP AD	EA	\$33.00	5.00	\$165.00
1-1/2" TYPE K COPPER TUBE	EA	\$13.82	5.00	\$69.10
				\$0.00
			Sub-Total	\$11,654.10
			10% Profit	\$1,165.41
			Total	\$12,819.51

Labor:

Job Title	Rate/Hr.	Total Hrs.	Amount	
Foreman	\$35.00	40.00	\$1,400.00	
Operator	\$26.50	40.00	\$1,060.00	
Laborer	\$17.00	40.00	\$680.00	
			\$0.00	
			\$0.00	
			\$0.00	
			Sub-Total	\$3,140.00
			15% Profit	\$471.00
			Total	\$3,611.00

Payroll Additives:

Item	% of Labor	Amount
Bonds (Total of Items 1, 2 & 3 Less O&P)	1.00%	\$195.44
Insurance (Item 1 Less O&P)	8.00%	\$251.20
Workers Comp	Actual	\$388.73
Unemployment Insurance (Item 1 Less O&P)	3.80%	\$119.32
Social Security Tax (Item 1 Less O&P)	7.65%	\$240.21
Emp. Fringe Benefits (Item 1 Less O&P)	20.00%	\$628.00
	Total	\$1,819.89

Equipment:

Type	Cost/Hr.	Total Hrs.	Amount
1 Ton Pickup	\$32.02	40.00	\$1,280.80
Mini Excavator	\$86.72	40.00	\$3,468.80
			\$0.00
			\$0.00
			\$0.00
		Total	\$4,749.60

Sub-Contractor Cost	\$0.00
Mark-up On Sub-Contractor (10%)	\$0.00
Contractor Cost	\$21,363.59
Contractor Profit	\$1,636.41
Contractor Total	\$23,000.00

Total Lump Sum Cost for Work Described	
--	--

5 EA	Total Cost	\$4,600.00
	Quantity	

Ryan Francisco
Contractor's Signature

UTILITY SUPPLY COMPANY
19711 EAST 6th STREET in TULSA, OK 74108
PHONE (918) 266-0209
FAX (918) 266-0235

QUOTE # S422-27: 136093: 144101 S. Yale Ave, 81st to 91st
1-1/2" COT METER ASSY

4/27/2022

ITEM	QTY	UM	DESCRIPTION	UNIT PRICE	TOTAL PRICE
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1	EA		1-1/2" COT METER ASSY	\$2,330.82	\$2,330.82
			1 EA - 12" X 1-1/2" CC 313 TAP SADDLE	\$104.00	
			1 EA - 1-1/2" FB1600-NL CORP STOP	\$204.00	
			1 EA - 1-1/2" VBHH76-95599-001-NL METER SETTER	\$1,976.00	
			1 EA - 1-1/2" #90581 PEX PRESS X MIP ADPT	\$33.00	
			1 EA - 1-1/2" TYPE K COPPER TUBE	\$13.82	

QUOTE SUBTOTAL	\$2,330.82
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FOB SHPT.

FRT. ALLOWED

Note: Due to extreme market volatility, the pricing shown on this quote is subject to manufacturer price changes. Price changes can be without notice and effective immediately. This quote is current with competitive pricing, and we ensure our best pricing at the time of purchase.



BECCCON02C

LPELNIK

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/24/2022

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 have ADDITIONAL INSURED provisions or 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 INSURICA - Tulsa 406 S. Boulder Ave. Suite # 500 Tulsa, OK 74103	CONTACT NAME:	
	PHONE (A/C, No, Ext): (918) 660-0090	FAX (A/C, No): (918) 660-0836
INSURED Becco Contractors Inc. P. O. Box 9159 Tulsa, OK 74157-0159	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Greenwich Insurance Company	NAIC # 22322
	INSURER B : Safety National Casualty Corporation	15105
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			CGS7409834	4/1/2022	4/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CAS7409835	4/1/2022	4/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input checked="" type="checkbox"/> N	N / A	AGC4066258	2/1/2022	2/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project 144101, TMUA-W 14-82, MS-635 Arterial Street Widening, - S. Yale Ave., -81st to 91st
Change Order No. 1

CERTIFICATE HOLDER

CANCELLATION

City of Tulsa
175 E. 2nd St.
Tulsa, OK 74103

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



BECCCON02C

LPELNIK

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/24/2022

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 have ADDITIONAL INSURED provisions or 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 INSURICA - Tulsa 406 S. Boulder Ave. Suite # 500 Tulsa, OK 74103	CONTACT NAME: PHONE (A/C, No, Ext): (918) 660-0090 FAX (A/C, No): (918) 660-0836 E-MAIL ADDRESS: <table style="width: 100%;"> <tr> <td style="text-align: center;">INSURER(S) AFFORDING COVERAGE</td> <td style="text-align: center;">NAIC #</td> </tr> <tr> <td>INSURER A : Greenwich Insurance Company</td> <td>22322</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Greenwich Insurance Company	22322	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER D :															
INSURER E :															
INSURER F :															
INSURED City of Tulsa 175 E. 2nd Tulsa, OK 74103															

COVERAGES**CERTIFICATE NUMBER:****REVISION 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owner's & Contractor <input checked="" type="checkbox"/> City of Tulsa projec GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CGG7409837	4/1/2022	4/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> Y / <input type="checkbox"/> N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project 144101, TMUA-W 14-82, MS-635 Arterial Street Widening, - S. Yale Ave., -81st to 91st
Change Order No. 1

Contractor: Becco Contractors, Inc.

Blanket Owners/Contractors Protective covering all projects for City of Tulsa.

CERTIFICATE HOLDER**CANCELLATION**

City of Tulsa 175 E. 2nd St. Tulsa, OK 74103	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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CONSTRUCTION PLANS FOR

ARTERIAL STREET WIDENING SOUTH YALE AVENUE FROM EAST 81st ST. SOUTH TO EAST 91st ST. SOUTH

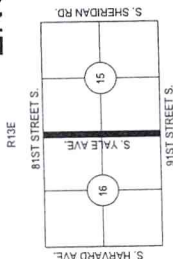
PROJECT NO. 144101
TMUA-W 14-82 AND MS-635
ACCOUNT NO. 6007-5453104-040522966130
AND
ACCOUNT NO. 6315-5453104-040522054057
AND
ACCOUNT NO. 144101-STREETS.543104.4053122-541106



ENGINEERING SERVICES DEPARTMENT

SYMBOL LEGEND	
SS	EXISTING SANITARY SEWER LINE
ST	EXISTING STORM DRAIN LINE
FO	EXISTING FIBER OPTIC LINE
VUG	EXISTING UNDERGROUND CATHY LINE
TUG	EXISTING TELEPHONE RISER
1	EXISTING COMMUNICATIONS BOX
10	EXISTING CATV RISER
11	EXISTING ELECTRICAL RISER
12	EXISTING ELECTRICAL TRANSFORMER
13	EXISTING OVERHEAD ELECTRICAL LINE
PUG	EXISTING UNDERGROUND ELECTRICAL LINE
-G	EXISTING NATURAL GAS LINE
-W	EXISTING WATER LINE
-E	EXISTING PAVEMENT EDGE
-C	EXISTING CONCRETE JOINT
-P	EXISTING PROPERTY LINE
-R	EXISTING ROW
-S	EXISTING PARCEL
-B	EXISTING BASEMENT
-F	EXISTING FENCE
-L	EXISTING FLOWLINE
-S	EXISTING SIGN
-V	EXISTING WATER VALVE
-M	EXISTING WATER METER
-H	EXISTING FIRE HYDRANT
-ICV	EXISTING WATERLINE MARKER
-M	EXISTING SANITARY SEWER MANHOLE
-M	EXISTING STORM MANHOLE
-V	EXISTING GAS VALVE
-M	EXISTING GAS METER
-L	EXISTING LIGHT POLE
-L	EXISTING LIGHT
-P	EXISTING POWER POLE
-W	EXISTING GUY WIRE
-P	EXISTING TRAFFIC SIGNAL POLE
-P	EXISTING TRAFFIC SIGNAL PULL BOX
-T	EXISTING TREE
-H	BORR HOLE
-S	HORIZONTAL CONTROL POINT
-B	BENCH MARK SYMBOL
-V	VERTICAL CONTROL POINT
-N	PARCEL NUMBER
-C	PROPOSED CONSTRUCTION

DESIGN DATA	
AAOT (2014)	= 24,200
TRUCK GROWTH RATE	= 2%
TRUCK TRAFFIC	= 2%
TOTAL FLEXIBLE ESALS	= 3.0 x 10 ⁶
TOTAL RIGID ESALS	= 5.2 x 10 ⁶
LANE FACTOR	= 60%
DIRECTIONAL DISTRIBUTION	= 50%
DESIGN SPEED	= 35 MPH



SURVEY CONTROL DATA

- HORIZONTAL CONTROL:
A. HORIZONTAL CONTROL FOR THIS SURVEY IS THE OKLAHOMA STATE DEPARTMENT OF TRANSPORTATION PLANE COORDINATE SYSTEM, LAMBERT PROJECTION (NORTH ZONE). ALL COORDINATES SHOWN ARE OKLAHOMA DEPARTMENT OF TRANSPORTATION PLANE COORDINATES WHICH WERE DERIVED BY MULTIPLYING THE USCGS OKLAHOMA PLANE COORDINATES BY THE COMBINED ADJUSTMENT FACTOR OF 1.00010. THE OKLAHOMA STATE DEPARTMENT OF TRANSPORTATION COORDINATE SYSTEM PLANE IS 2550 FEET ABOVE THE OKLAHOMA USCGS PLANE.
B. ACCURACY - 3RD ORDER
BEARING:
A. THE BEARINGS SHOWN HEREIN OR HEREON ARE GRID BEARINGS DERIVED FROM THE USCGS OKLAHOMA PLANE COORDINATE SYSTEM AND ARE NOT ASTROGNOMICAL.

- VERTICAL CONTROL:
A. LEVEL DATUM IS MEAN SEA LEVEL (USCGS)

ENTIRE PROJECT IS WITHIN THE CORPORATE AND URBAN LIMITS OF THE CITY OF TULSA



APPROVED BY:

[Signature]
CITY ENGINEER

ADVERTISEMENT DATE: 12-04-2020

DATE: 12-18-20



BENHAM
Benham Design, LLC
One West 10th Street, Suite 200
Tulsa, Oklahoma 74103
(918) 482-1600

PREPARED BY:

[Signature]
BETHONDA J. DUDECK, P.E.
OKLAHOMA REG. NO. 16476
PROJECT ENGINEER



DATE: October 31, 2018

**CONFORMED
DRAWINGS**