

# City Contract

Version 4.6 released on 8/3/21



EU0119404

**CITY COUNCIL USE ONLY**

Date Received: \_\_\_\_\_  
Committee Date: \_\_\_\_\_  
1st Agenda Date: \_\_\_\_\_

Tracking #: \_\_\_\_\_

Committee: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

2nd Agenda Date: \_\_\_\_\_

**CITY CLERK USE ONLY**
☐ Scanned

Date: 11.02.2022

☐ Posted

Item #: 2211.02468

*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**

☒ Yes   ☐ No

**Contract Number**

134638

**Department**

Engineering Services

**Contact Name**

Ryan McKaskle

**Email**

rmckaskle@cityoftulsa.org

**Phone**

9185969508

**Vendor Name(s)**

Crossland Heavy Contractors, Inc.

**Vendor Number**

681

**Description (Subject)**

Art. Str. Rehab Apache St. - MLK Blvd. to Peoria

**Contract Type**

Public Const Proj

**Contract Subtype**

PI/CP SCO COT

**Bid/Project Number**

144201 &amp; TMUA-W 14-17

**Contract Amount**

\$0.00

## Budget

**Contract Funding Type**

☐ No Payment Involved  
☐ Revenue Contract  
☐ Expense Contract

**Funding Source(s)**
**TOTAL:**

## Approvals

**Department:**
**Legal:**
**Board:**
**Mayor:**
**Other:**
**Date:**
**Date:**
**Date:**
**Date:**
**Date:**

## Policy Statement

**Background Information**

CHANGE ORDER DESCRIPTION AND JUSTIFICATION: Change Order No. 1 to Contract No. 134638, between the CITY OF TULSA and CROSSLAND HEAVY CONTRACTORS, INC., for Project no. 144202 & TMUA-W, in the amount of 109 calendar days is necessary due to delays caused by design issues and work added to the Contract, including increased roadway patching as well as the construction of a new double-detector check in-vault to accomodate an unmetered private fireline.

**Summation of the Requested Action**

Request Approval for Change Order No. 1

**Other Pertinent Details**

City Council District 1, Apache St. - MLK Blvd. to Peoria Ave.

## 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

**Additional Routing and Processing Details**



CITY OF TULSA  
CHANGE ORDER NO. 1  
BOND NO. 09293637  
CONTRACT NO. 134638  
PROJECT NO. 144201 & TMUA-W 14-17  
ARTERIAL STREET REHABILITATION FOR APACHE STREET - MLK BLVD TO PEORIA AVE.

CHANGE ORDER DESCRIPTION AND JUSTIFICATION: Change Order No. 1 to Contract No. 134638, between the CITY OF TULSA and CROSSLAND HEAVY CONTRACTORS, INC., for Project No. 144201 & TMUA-W, in the amount of 109 calendar days is necessary due to delays caused by design issues and work added to the Contract, including increased roadway patching as well as the construction of a new double-detector check assembly in-vault to accomodate an unmetered private fireline.

Decrease in Contract Price: \$0.00

Increase in Contract Price: \$0.00

Net Change in contract Amount: \$0.00

DESCRIPTION OF CHANGES:

Original contract amount was:	\$3,380,000.00
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:	\$3,380,000.00
Contract sum is increased by this Change Order:	\$0.00
This Change Order is a percentage increase of:	0.00%
Contract amount including this Change Order:	\$3,380,000.00
The total dollar increase including this Change Order:	\$0.00
The percentage increase including this Change Order:	0.00%
Contract time prior to this Change Order:	240 Calendar Days
Contract time will be increased by:	109 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.* Walter Walker  
City Attorney

[Signature]  
City Engineer

[Signature]  
Architect/Engineer

APPROVED BY CITY COUNCIL

Date: \_\_\_\_\_

By: \_\_\_\_\_  
Chairman

CONTRACTOR:  
Crossland Heavy Contractors, Inc.

By: [Signature]

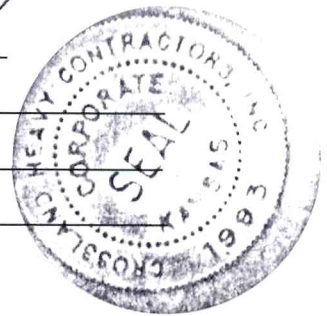
Printed Name: Mark Sell

Title: President

Date: February 15, 2022

ATTEST:

Hok RL 2/17/22  
Corporate Secretary (SEAL) Date



SURETY:

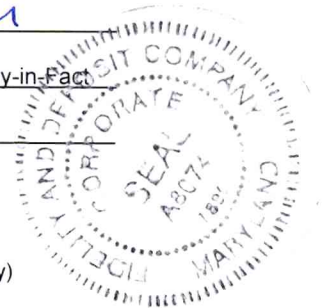
Fidelity and Deposit Company of Maryland

By: Camille O. Parman

Printed Name: Camille O. Parman, Attorney-in-Fact

Date: February 15, 2022  
Attorney-in-Fact (SEAL)  
(Attached Power of Attorney)

(Date must match Power of Attorney)



**ZURICH AMERICAN INSURANCE COMPANY  
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
FIDELITY AND DEPOSIT COMPANY OF MARYLAND  
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Illinois, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Illinois (herein collectively called the "Companies"), by **Robert D. Murray, Vice President**, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint **S. Mark WILKERSON, Kelly E. KIMMEL, Morgan DEWEY, Monica F. DONATELLI, Debra L. WALZ, Carolyn J. JOHNSON, Katherine J. BREIT, Camille O. PARMAN, Morgan L. WILKERSON of Overland Park, Kansas, EACH**, its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: **any and all bonds and undertakings**, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said **ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND**, this 03rd day of March, A.D. 2021.



**ATTEST:**  
**ZURICH AMERICAN INSURANCE COMPANY  
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
FIDELITY AND DEPOSIT COMPANY OF MARYLAND**

By: *Robert D. Murray*  
Vice President

By: *Dawn E. Brown*  
Secretary

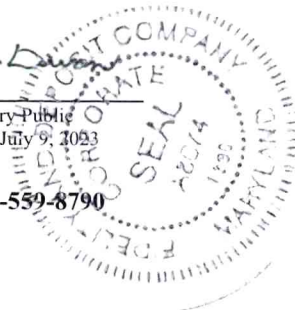
**State of Maryland  
County of Baltimore**

On this 03rd day of March, A.D. 2021, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, **Robert D. Murray, Vice President and Dawn E. Brown, Secretary** of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, depose and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.



*Constance A. Dunn*  
Constance A. Dunn, Notary Public  
My Commission Expires: July 9, 2023



Authenticity of this bond can be confirmed at [bondvalidator.zurichna.com](http://bondvalidator.zurichna.com) or 410-559-8790



## EXTRACT FROM BY-LAWS OF THE COMPANIES

"Article V, Section 8, Attorneys-in-Fact. The Chief Executive Officer, the President, or any Executive Vice President or Vice President may, by written instrument under the attested corporate seal, appoint attorneys-in-fact with authority to execute bonds, policies, recognizances, stipulations, undertakings, or other like instruments on behalf of the Company, and may authorize any officer or any such attorney-in-fact to affix the corporate seal thereto; and may with or without cause modify or revoke any such appointment or authority at any time."

## CERTIFICATE

I, the undersigned, Vice President of the ZURICH AMERICAN INSURANCE COMPANY, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that Article V, Section 8, of the By-Laws of the Companies is still in force.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the ZURICH AMERICAN INSURANCE COMPANY at a meeting duly called and held on the 15th day of December 1998.

RESOLVED: "That the signature of the President or a Vice President and the attesting signature of a Secretary or an Assistant Secretary and the Seal of the Company may be affixed by facsimile on any Power of Attorney...Any such Power or any certificate thereof bearing such facsimile signature and seal shall be valid and binding on the Company."

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at a meeting duly called and held on the 5th day of May, 1994, and the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seals of the said Companies, this 15th day of February, 2022.



By: Brian M. Hodges  
Vice President

**TO REPORT A CLAIM WITH REGARD TO A SURETY BOND, PLEASE SUBMIT A COMPLETE DESCRIPTION OF THE CLAIM INCLUDING THE PRINCIPAL ON THE BOND, THE BOND NUMBER, AND YOUR CONTACT INFORMATION TO:**

Zurich Surety Claims  
1299 Zurich Way  
Schaumburg, IL 60196-1056  
[www.reportsfclaims@zurichna.com](mailto:www.reportsfclaims@zurichna.com)  
800-626-4577

**Authenticity of this bond can be confirmed at [bondvalidator.zurichna.com](http://bondvalidator.zurichna.com) or 410-559-8790**

# CROSSLAND HEAVY CONTRACTORS

501 S. East Avenue • P.O. Box 350

Columbus, KS 66725

tel 620.429.1410

fax 620.429.2977

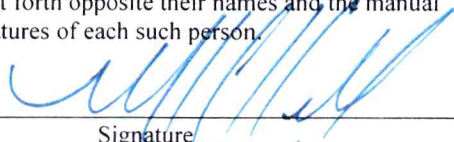
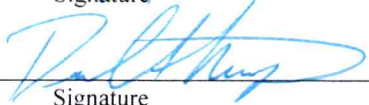
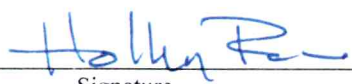

CROSSLAND HEAVY CONTRACTORS, INC.

## SECRETARY'S CERTIFICATE OF CORPORATE RESOLUTION AND AUTHORIZED SIGNATURES

I, Holly Rhodes, do hereby certify that I am the duly elected and qualified secretary of Crossland Heavy Contractors, Inc., a corporation duly organized and validly existing under and by virtue of the laws of the State of Kansas (the "Corporation"), that the following resolution was duly adopted by the Board of Directors of the Corporation at a meeting of the members thereof, called and held in accordance with the requirements of the bylaws of the Corporation, on January 29, 2016, and that such resolution has not been modified, repealed, or rescinded and is in full force and effect as of the date of this certification.

Be it resolved that the Board of Directors of Crossland Heavy Contractors, Inc. hereby authorizes and empowers Chris Walters or Daniel Thompson in the name of and on behalf of the Corporation, to execute bid forms, construction agreements, change orders and other associated construction documents between the Corporation and the City of Tulsa (COT), Tulsa Metropolitan Utility Authority (TMUA), and Regional Metropolitan Utility Authority (RMUA).

I further certify that the persons named below are the duly acting Board of Directors and they are serving on this date as officers of the Corporation in their respective capacities set forth opposite their names and the manual signatures set forth opposite their names are the true manual signatures of each such person.

Mark E. Sell	President	
Name of Director	Title	Signature
Daniel Thompson	Vice-President	
Name of Director	Title	Signature
Holly Rhodes	Secretary	
Name of Director	Title	Signature
Chris Walters	Treasurer	
Name of Director	Title	Signature

In witness whereof, the undersigned has executed this certificate and impressed the seal of the Corporation thereon on this 17<sup>th</sup> day of February, 20 22.

  
Secretary



## NON-COLLUSION AFFIDAVIT

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

STATE OF Kansas )  
 )SS.  
COUNTY OF Cherokee )

I, Mark Sell, 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: \_\_\_\_\_

Signature

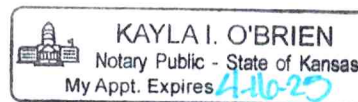
Title: \_\_\_\_\_

President

Subscribed and sworn to before me this 17 day of Feb 2022

Kayla I O'Brien

Notary Public



My Commission Expires: 4-16-25

Notary Commission Number: \_\_\_\_\_

County & State Where Notarized: Cherokee Cty - Kansas

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



AFFIDAVIT OF CLAIMANT

STATE OF Kansas

COUNTY OF Cherokee

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: [Signature]  
Signature

Name: Mark Sell

Company: Crossland Heavy Contractors, Inc.

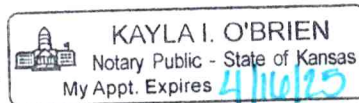
Title: President

Subscribed and sworn to before me this 17<sup>th</sup> day of Feb, 2022.

Kayla I O'Brien  
Notary Public

My Commission Expires: 4-16-25

Notary Commission Number: \_\_\_\_\_



## INTEREST AFFIDAVIT

STATE OF Kansas )  
COUNTY OF Cherokee ) SS.

I, Mark Sell, 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.

By: \_\_\_\_\_

Signature

Title: \_\_\_\_\_

President

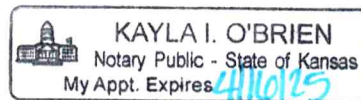
Subscribed and sworn to before me this 17<sup>th</sup> day of Feb 2022

Kayla I O'Brien  
Notary Public

My Commission Expires: 4/16/25

Notary Commission Number: \_\_\_\_\_

County & State Where Notarized: Cherokee City-Kansas



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



**Tulsa**  
CITY OF  
A New Kind of Energy.

Engineering Services Department  
**MEMORANDUM**

**DATE:** 2/14/22

**SUBJECT: CHANGE ORDER NO. 1**

**Contract:** 134638

**Project:** 144201

**Project Title:** Arterial Street Rehab: Apache - MLK to Peoria

Original Contract Amount:	\$ 3,380,000.00
Change Order No. 1 Amount:	\$ -
Change Order No. 1 Percent:	0.00%
New Contract Amount:	\$ 3,380,000.00
Total of Change Order Amounts:	\$ -
Total Change Order Percent:	0.00%
Original Contract Time (Calendar Days):	240
Change Order No. 1 Time Added (Calendar Days):	109
New Contract Time (Calendar Days):	349

**CHANGE ORDER NO. 1 Consists of the Following:**

As work progressed, there were design issue delays and work was added, requiring additional time to complete. This included additional roadway patching and construction of a new double-detector check assembly in-vault to accommodate an unmetered private fireline.

The total time extension required to account for the above issues is 109 calendar days.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/3/2022

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).

<b>PRODUCER</b> IMA, Inc. - Kansas City 9393 W. 110th Street Suite 600 Overland Park KS 66210	<b>CONTACT</b> NAME: IMA Wichita Team PHONE (A/C, No, Ext): 316-267-9221 E-MAIL: certs@imacorp.com ADDRESS: certs@imacorp.com	<b>FAX</b> (A/C, No):
<b>INSURED</b> Crossland Heavy Contractors, Inc. PO Box 45 833 S. East Avenue Columbus KS 66725	License#: PC-1210733 CROSCON-03	
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
INSURER A: Zurich American Insurance Company		16535
INSURER B: American Guarantee and Liability Insurance		26247
INSURER C: *Endurance American Insurance Company		10641
INSURER D: RSUI Indemnity Company		22314
INSURER E: Arch Insurance Company		11150
INSURER F:		

**COVERAGES** **CERTIFICATE NUMBER:** 1562506655 **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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:			GLO859600802	4/30/2022	4/30/2023	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 2,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 10,000,000 \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <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			BAP859615302	4/30/2022	4/30/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			AUC425515001	4/30/2022	4/30/2023	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
A	<input checked="" type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A	WC859600702	4/30/2022	4/30/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000
E	2nd Layer Excess Liability			UXP300009000	4/30/2022	4/30/2023	Ea Occur \$15,000,000 Agg \$15,000,000
C	3rd Layer Excess Liability			EXC30000318405	4/30/2022	4/30/2023	Ea Occur \$10,000,000 Agg \$10,000,000
D	4th Layer Excess Liability			NHA097780	4/30/2022	4/30/2023	Ea Occur \$5,000,000 Agg \$5,000,000

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

The State of Oklahoma is included in the above mentioned Workers Compensation policy, subject to the policy terms and conditions.

Re: Project No. 18037RD, 144201 & TMUA-W 14-17 Arterial Street Rehabilitation for Apache Street - MLK Jr. Blvd to Peoria Ave.

## CERTIFICATE HOLDER

City of Tulsa 175 E. 2nd Street Tulsa OK 74103 USA	<b>CANCELLATION</b>  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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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/15/2022

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.

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<b>PRODUCER</b> IMA, Inc. - Kansas City 9393 W. 110th Street Suite 600 Overland Park KS 66210	<b>CONTACT NAME:</b> IMA Wichita Team <b>PHONE (A/C, No, Ext):</b> 913-982-3650 <b>FAX (A/C, No):</b> 913-982-3495 <b>E-MAIL ADDRESS:</b> certs@imacorp.com
<b>INSURED</b> City of Tulsa 175 E 2nd Street Tulsa, OK 74103	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Travelers Property Casualty Company of America <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>License#:</b> PC-1210733 CROSCON-03	<b>NAIC #</b> 25674

**COVERAGES****CERTIFICATE NUMBER:** 1051817873**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.

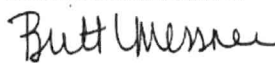
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owner/Contractor <input type="checkbox"/> Protective Liab. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			PRS4G449819	9/27/2018	5/28/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 0 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 0 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 0 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (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)

Designated Contractor: Crossland Heavy Contractors, Inc.

Re: 144201 &amp; TMUA-W 14-17 Arterial Street Rehabilitation for Apache Street - MLK Jr. Blvd to Peoria Ave.

**CERTIFICATE HOLDER****CANCELLATION**

City of Tulsa 175 E 2nd Street 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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