City Contract Version 4.6 released on 8/3/21



CITY COUNCIL USE ONLY	Tracking			CITY CLERK USE ONLY	
Date Received: Committee Date:	Committ		Scanned Date	:02.09.2022	
1st Agenda Date:	Hearing Da 2 nd Agenda Da		Posted Item#	2202_00275	
All department	items requiring Council appr	oval must be submitted throu	igh the Mayor's C	Office.	
Primary Details					
Contract Phase ○ New Contract ○ Renewal Adjustment ○ Final Payment	O Amendment Statuto O Permission to Continue	ory Change Order O Supp O Terminate/Cancel	lemental Documer	ntation O Quantity	
Board Approv al	Other Board Name	City Council Approval ✓ Yes ○ No	13379	t Number	
Department Engineering Services	Contact Name Ryan McKaskle	Email rmckaskle@cityoftulsa.	Phone 19185	969508	
Vendor Name(s) Becco Contractors, Inc.	Vendor Number 1056	Description (Subject) Non-Art Street Rehab &	WL Repl. MZ 100	7 & 3007	
Contract Type Public Const Proj	Contract Subtype Pub Imp/Cap Proj	Bid/Project Number 104107 & TMUA- W 13-		Contract Amount \$53,185.00	
Budget					
Contract Funding Type ○ No Payment Involved ○ Revenue Contract ◆ Expense Contract	Funding Source(s)	15.Streets.NArtRhb.4260-4260	03122-541106: _ TOTAL:	\$53,185.00 \$53,185.00	
Approvals	1 1				
Department:	Mul Roma		Date:	01.24.22	
Legal:	Sachar		Date:	8/1/2022	
Board:			Date:		
Mayor:	A 47/		Date:	FEB (1.9. 2022	
Other:	-		Date:		
Policy Statement					
CHANGE ORDER DESCRIPTION Contractors, Inc., for Project no. 1 amount of \$53,185.00 is necessar originally in the plans.	04107, TMUA-W 13-44, MS#62	20, TMUA 04-57 C5, 144107, T	MUA-W 14-32, 20	15-MPO (C1), in the	
Summation of the Requested Action Request for Change Order No. 2 to	o be approved.				
Other Pertinent Details					
Processing Information for	City Clark's Office				
Processing Information for	Sity Clerk's Office	Additional Burney	Carlow Batella		
Post Execution Processing Mail vendor copy (addt'l signatu Must be filed with other governm		Additional Routing and Proc	essing Details		
☐ Addt'l governmental entity appro					



NON-ARTERIAL STREET REHABILITATION AND WATERLINE REPLACEMENT CITY OF TULSA, OKLAHOMA CONSTRUCTION PLANS FOR MAINTENANCE ZONE 1007

PROJECT NO. 104107 TMWA-04-57-C5 TMUA-W-13-44

SYMBOL LEGEND

UTILITY COORDINATION

PSO/AEP CHLAHOMA NATURAL GAS COMPARY ATAT

ACCOUNT NO. 6326 5453104 040522104107 ENGINEERING SERVICES DEPARTMENT TULSA, OKLAHOMA MS# 620

ZONE 1007

COUNCIL DISTIBICT

Bench Mark Survey Control Point Found Survey Control Point Set Oate Poet

Signal Box Signal Box Signal Junctions Predestal

R 12 E E LATIMER

SECRETAL REPORTS WILL DE FINES SECRETAL REPORTS TO A SECRETAL REPORTS OF THE PROPERTY OF THE P ROADWAY QUANTITES AND NOTES (1) TO (2) SANTRAY SEWER QUANTITIES AND NOTES ANTERLACE QUANTITIES AND NOTES (1) TO (2) SOADWAY SUMMARIES MINISTER SUMMERS (1) TO (2) SIGN SUMMERS (1) TO (3) STRUCTURE SUMMERS (1) TO (3) FIPICAL SECTIONS (1) TO (2) MINISTERMEND BETABLIS (1) TO (3) SECHERIAL ETANINO WILL DETAILS (1) TO (2) HOPE DETAILS (1) TO (2)

ODOT ROADWAY STANDARDS
TRANSFER UNITS FOR CONCRETE PAYEMENT CITY OF TULSA STANDARDS

STANDARD STRAW BALE DIKE, SILT FENCE, AND CONSTRUCTION ENTRANCE BEDDING DETAIL — RIGID PIPE.
BEDDING DETAIL — SEMI RIGID PIPE.
FIRE HYDRANT PRUSE BANK BANK BANKE BANKE BANKE BANKE BANKE BANKE AND DE DER 4 LD. SWITARY MANDLE BANKE ROUGE BANKE 310.4 STANDARD STANDA

M 12 HIR

AND X" WATER SERVICE WATER METER INSTALLATION

* & 1 WATER METER CAN WATER METER INSTALLATION TER METER INSTALLATION DARD METER SETTINGS FOR 16, X 16, AM. METER SETTINGS FOR 11-4, MARTER SETTINGS FOR 11-4, MARTER SETTINGS FOR 21-4, MARTER SETTINGS FOR 22-4, MARTER SETTINGS FOR 22-4, MARTER SETTINGS FOR 22-4, X 16, AM. WITH RIAL AND LID FOR 11-4, WA STORE SETTINGS FOR 24-4, MARTER SET AND LID FOR 11-4, WA STORE STORE STORE SETTINGS FOR 24-4, MARTER STORE STORE STORE SETTINGS FOR 21-4, MARTER SETTINGS FOR 21-4,

42 . 214

MONETE FOR STATE OF THE STATE OF RESIDENTIAL AND COLLECTOR FREE BLOOMERS FOR RESIDENTIAL AND COLLECTOR FREE BLOOMERS FOR STATE BLOOMERS FOR AND UP FOR 4" AND US FOR 4" AND US FOR 4" AND US FOR A" AND US FOR A " AND US FOR A" AND US FOR A " AND US FOR A " AND US FOR A" AND FOR A" AND A" AND FOR A" AND A AL OF TRAFFIC ITEMS
WED PAYEMENT PATCH AND REPAIR
ETE PAYEMENT STANDARD DETAILS FOR RESIDENTIAL AND COLLECTOR

Note: Entire project is within the Corporand and City Limits of Tulsa, Oklahoma

LOCATION MAP

VICINITY MAP

E EASTON

HORIZONTAL AND VERTICAL CONTROL ACCURACY CONFORMS I THE MINIMUM STANDARDS OF FOR THE PRACTICE OF LAND VEYING AS PER OKLAHOMA ADMINISTRATIVE CODE TITLE 245.

HORIZONTAL CONTROL OKLAHOMA STATE PLANE COORDINATE SYSTEM NORTH ZONE 3501 NAD 1983 (1993)

NAVD 1988 SCALE FACTOR: 0.999909464

VERTICAL CONTROL

311

3. BRASS CAP SET IN CONCRETE FLUSH STAMPED "62 RESET, SET ON THE WEST SIGE OF OUTCA. AYE, AND NORTH OF 1-244 APPROX. 0.55 MILE. OCHANIAN STITE PLANE COORDINATES. NORTHING: 425170.A.S. EASTING. 2568517.27 AND 1988 E.EV. * 751.597.

PERMANENT BENCH MARK USED ON THIS PROJECT:

NOTE: THIS PROJECT COMPLES WITH ALL ORLANDIAL DEPARTME OF ENVIRONMENTAL QUALITY (20E2) REQUIREMENT

NOTE:
ALL CONSTRUCTION TO BE IN STRICT ACCORDA
WHI ACT OF TUGAS BONNESERING SERVICES
DEPARTMENT STANDARD SPECIFICATIONS AND
STANDARD DETAILS, OCTOBER 2013

N.T.S.

PREPARED BY

DATE

3,543 MI. 3.543 MI.

ROADWAY LENGTH 18709.00 FT.

18709.00 FT.

PROJECT LENGTH

1623 E 6TH STREET
TULSA, ORLAHOMA 74120
TEL 918—835—9568
FAX 918—835—9139
MALA®BKLING, COM

DATE

9-EET 10-772

CITY OF TULSA STANDARD SPECIFICATIONS AND STANDARD DEFLAIS (CURRENT) OVERN. ALL CONFER CONSTRUCTION AND MATERIALS SHALL BE ACCORDANCE WITH SOOD OULANDARD SPECIFICATIONS FOR HIGHMAY CONSTRUCTION.

Kmin = 12 CREST Kmin = 28 SAG DESIGN DATA

Project Expense Inquiry [City of Tulsa]

























Project string

_	Project *	104015	 Citywide Nonarterial Rehℜ
_	Phase *	Streets	 Streets
_	Task *	NArtRhb	 Non-Arterial Street Rehab
	Sub-Task *	4260	 2008 GO ISSUE 1

Description

Justification

Name * Short Name * Status Projected date range Actual date range

CW Non-Art Active 01/01/2021

Citywide Nonarterial Reh&Re

06/30/2022 to to

Project Available

Actual overhead Expense Type

PROJECT STRING BALANCES

GL ACCOUNTS

4	Project Year 2022		Project Year 2021		Project Year	2(
Original Budget	.00		.00			
Transfers - In	.00		1,500,000.00	-		
Transfers - Out	.00		.00	-		
Revised Budget	1,500,000.00		1,500,000.00			
Actual (Memo)	.00		289,507.19			
Encumbrances	47,135.24		.00	-		
SOY Encumbrances	.00		.00			
Requisitions	.00	90	.00			
Inception to SOY	289,507.19		.00			
Available	1,163,357.57		1,210,492.81			
Percent Used	22.44		19.30			

Add / Display reminder alerts on ...







Engineering Services Department MEMORANDUM

DATE:

September 16, 2021

SUBJECT: CHANGE ORDER 2, Project 104107, TMUA-W 13-44, MS#620,

TMUA 04-57 C5, 144107, TMUA-W 14-32, 2015-MPO (C1)

Non-Arterial Street Rehabilitation & Waterline Replacement for MZ 1007 & 3007

Original Contract -

\$11,697,000.00

Change Order 1 -

\$ 47,135.24

Change Order 2 -

\$ 53,185.00

Change Order 1% -

0.40%

Change Order 2% -

0.45%

New Contract Amount -

\$11,797,320.24

Contract Time -

730 Calendar Days

Contract Time Added by CO#1-

0 Calendar Days

Contract Time Added by CO#2-

0 Calendar Days

Change Order 2 consists of the following;

Establish the following pay items for tree removal not originally in the plans. The pay items are as follows:

	Proje	ct 104	107		
Bid Item	Description	Unit	Quantity	Unit Price	Total Price
208	Tree Removal 6" to 12"	EA	6	\$ 330.00	\$ 1,980.00
209	Tree Removal 13" to 18"	EA	6	\$ 632.50	\$ 3,795.00
210	Tree Removal 19" to 24"	EA	12	\$ 770.00	\$ 9,240.00
211	Tree Removal 25" to 30"	EA	9	\$ 1,320.00	\$ 11,880.00
212	Tree Removal 31" to 36"	EA	6	\$ 2,090.00	\$ 12,540.00
213	Tree Removal 37" to 42"	EA	2	\$ 3,025.00	\$ 6,050.00
214	Tree Removal Greater Than 43"	EA	2	\$ 3,850.00	\$ 7,700.00
	Total Price				\$ 53,185.00

See attached email correspondence

CITY OF TULSA CHANGE ORDER NO. 2 BOND NO. 1018378 CONTRACT NO. 133790

PROJECT NO. 104107, TMUA-W 13-44, MS#620, TMUA 04-57 C5, 144107, TMUA-W 14-32, 2015-MPO (C1)

Non-Arterial Street Rehabilitation & Waterline Replacement for MZ 1007 & 3007

CHANGE ORDER DESCRIPTION AND JUSTIFICATION: Change Order No. 2 to Contract No. 133790, between the City of Tulsa and Becco Contractors, Inc., for Project No. 104107, TMUA-W 13-44, MS#620, TMUA 04-57 C5, 144107, TMUA-W 14-32, 2015-MPO (C1), in the amount of \$53,185.00 is necessary to add an additional 0 Calendar Days to the contract, to establish pay items for tree removal not originally in the plans.

Decrease in Contract Price: \$0.00

Increase in Contract Price: \$53,185.00

Net Change in contract Amount: \$53,185.00

DESCRIPTION OF CHANGES:

Original contract amount was:	\$11,697,000.00
Net dollar increase by previous Change Order:	\$47,135.24
Net percent increase by previous Change Order:	0.40%
Contract amount prior to this Change Order	\$11,744,135.24
Contract sum is increased by this Change Order:	\$53,185.00
This Change Order is a percentage increase of:	0.45%
Contract amount including this Change Order:	\$11,797,320.24
The total dollar increase including this Change Order:	\$100,320.24
The percentage increase including this Change Order:	0.86%
Contract time prior to this Change Order:	730 Calendar Days
Contract time will be increased by:	0 Calendar Days

IN TESTIMONY WHEREOF, the parties hereto have or representatives on the	re caused this Change Order to be executed by their duly authorized officers is day of, 20
(to be da	ated by City Clerk upon approval)
CITY OF TULSA A municipal corporation	CONTRACTOR: Becco Contractors, Inc.
By	By Carol S. Smith SO ORPORA
	Printed Name: Carol S. Smith SEA
ATTEST:	Date: 9/24/2021
City Clerk	Corporate Secretary (SEAL) Date 9/24/21
APPROVED:	SURETY: Mid-Continent Casualty Company By: Sharon Stone
City Engineer	Printed Name: Sharon Stone, Attorney-in-Fact
Architect/Engineer	Date: 9/84/2021 Attorney-in-Fact (SEAL) (Attached Power of Attorney)
	(Date must match Power of Attorney)
APPROVED BY CITY COUNCIL	SURETY
Date:	Great American Insurance Company
Ву:	By: Sharon Stone
Chairman	Printed Name: Sharon Stone, Attorney-in-Fact
	Date: 9/24/2021 (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 30 day of August, 2021.



MID-CONTINENT CASUALTY COMPANY

ATTEST:

Sharon Hackl, Assistant Secretary

On this 30 day of August, 2021 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

COUNTY OF TULSA



Commission # 11008253

My Commission Expires: 09-08-23

Helie Callalian

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 September. 2021

heren Hachl

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 TWO this power of attorney is not more than

No. 0 20096

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.

POWER OF ATTORNEY

Name

JEFF R. JOHNSON SHARON STONE

Address BOTH OF TULSA, OKLAHOMA

Limit of Power BOTH \$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 OCTOBER officers and its corporate seal hereunto affixed this day of

Attest

Assistant Secretary

GREAT AMERICAN INSURANCE COMPAN

Divisional Senior Vice President

MARK VICARIO (877-377-2405)

Susan a Kohowst

STATE OF OHIO, COUNTY OF HAMILTON - ss:

6TH On this

OCTOBER day of

2020 , before me personally appeared MARK VICARIO, 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 Comm. Expires May 18, 2025

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 Divisonal 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 September

AFFIDAVIT OF CLAIMANT

STATE OF OKLAHOMA	
COUNTY OF TULSA	
Affiant further states that the work, services with the contract, plans, specifications, order that (s)he has made no payment directly or in	ally sworn, on oath says that this contract is true and correct. It is or materials will be completed or supplied in accordance it is or requests furnished to the affiant. Affiant further states indirectly of money or any other thing of value to any elected also or any public trust of which the City is a beneficiary to order. By: Signature
Î	Name: CAROL S. SMITH
Com	pany: BECCO CONTRACTORS, INC.
	Title: PRESIDENT
Subscribed and sworn to before me this	day of SEPTEMBER, 2021.
My Commission Expires: 7/17/2022) WILCO
Notary Commission Number: 14006	289

NON-COLLUSION AFFIDAVIT

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

STATE OF)SS.
COUNTY OF		
	horized	Agent) , of lawful age, being first duly sworn, state that:
1.	I am the ["Service collusion facts p	he authorized agent of Contractor, Engineer, Architect or provider of professional service rices Provider"] herein for the purposes of certifying facts pertaining to the existence of ion between and among Services Provider and municipal officials or employees, as well as pertaining to the giving or offering of things of value to government personnel in return for all consideration in the letting of any contract pursuant to which this statement is attached.
2.	this sta	ully aware of the facts and circumstances surrounding the making of the contract to which atement is attached, and I have been personally and directly involved in the proceedings g to the awarding of such contract; and
3.		er the Services Provider nor anyone subject to the Services Provider's direction or control een 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: By: Signature
		Title: PRESIDENT
My Commissi Notary Comm	ion Expir	n to before me this 24 ¹⁴ day of SEPTEMBER 20 21 Notary Public ires: 7 17 2022 Number: 40010289
County & Sta	te Wher	re Notarized: TULSA COUNTY OKLAHOMA OF OKLAHOMA

INTEREST AFFIDAVIT

STATE OF OKLAHOMA)) SS.						
COUNTY OF TULSA						
I, CAPOL 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: Carel S. Signature Signature						
Title: PEESIDEUT						
Subscribed and sworn to before me this 24th day of SEPTEMBER 20 21 Notary Public 20 21						
My Commission Expires: 7/17/2022						
Notary Commission Number: 14006289 County & State Where Notarized: TULS A County \ OKLAHOMA						
and a second of the contract o						



CERTIFICATE OF LIABILITY INSURANCE

12/31/2021

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	CONTACT NAME:				
INSURICA - Tulsa	PHONE (A/C, No, Ext): (918) 660-0090	8) 660-0836			
406 S. Boulder Ave. Suite # 500 Tulsa, OK 74103	E-MAIL ADDRESS:				
	INSURER(S) AFFORDING CO	INSURER(S) AFFORDING COVERAGE			
	INSURER A : Greenwich Insurance Co	22322			
INSURED	INSURER B : Midwest Employers Cas	23612			
Becco Contractors Inc. P. O. Box 9159 Tulsa, OK 74157-0159	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.

NSR		TYPE OF INSURANCE	ADDL SUBF	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	Х	COMMERCIAL GENERAL LIABILITY	INSD WYD	INSU IVIU	(MM/DD/TTTT)	(MANUEL PARTY)	EACH OCCURRENCE \$ 1,000,0
		CLAIMS-MADE X OCCUR		CGS7409834	4/1/2021	4/1/2022	DAMAGE TO RENTED \$ 100,0
	X	Jobsite Pollution					MED EXP (Any one person) \$ 5,0
							PERSONAL & ADV INJURY \$ 1,000,0
	GEN	L AGGREGATE LIMIT APPLIES PER:	SGREGATE LIMIT APPLIES PER:		GENERAL AGGREGATE \$ 2,000,0		
		POLICY X PRO-					PRODUCTS - COMP/OP AGG \$ 2,000,0
Α	AUT	OTHER:					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,0
	X	ANY AUTO		CAS740983502	4/1/2021	4/1/2022	BODILY INJURY (Per person) \$
	x	OWNED AUTOS ONLY HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
			-				\$
		UMBRELLA LIAB OCCUR					EACH OCCURRENCE \$
		EXCESS LIAB CLAIMS-MAD	E .				AGGREGATE \$
-		DED RETENTION\$					▼ PER OTH-
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			EWC008484	2/1/2021	2/1/2022	A STATUTE ER
	ANY	ANY PROPRIETOR/PARTNER/EXECUTIVE N		EWC008484 2/1/2021	2/1/2021	2/1/2022	E.L. EACH ACCIDENT \$ 1,000,0
	(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 1,000,0

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

CERTIFICATE H	HOLDER
---------------	--------

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

CANCELLATION

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

Jeff A Johnson

LPELNIK



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/1/2022

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).

CONTACT PRODUCER **INSURICA** - Tulsa PHONE (A/C, No. Ext): (918) 660-0090 FAX (A/C, No): (918) 660-0836 406 S. Boulder Ave. Suite # 500 Tulsa, OK 74103 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Greenwich Insurance Company 22322 INSURED INSURER B City of Tulsa INSURER C 175 E. 2nd INSURER D Tulsa, OK 74103 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.

R TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,00
CLAIMS-MADE X OCCUR	CGG7409837		4/1/2022	4/1/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	s	
X Owner's & Contractor X City of Tulsa projec GEN'L AGGREGATE LIMIT APPLIES PER					MED EXP (Any one person)	\$	
					PERSONAL & ADV INJURY		
					GENERAL AGGREGATE	S	2,000,000
POLICY PRO-					PRODUCTS - COMP/OP AGG	S	2,000,00
OTHER						5	
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	
ANY AUTO					BODILY INJURY (Per person)	5	
OWNED AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY					BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	s s	
						S	
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE	E				AGGREGATE	S	
DED RETENTIONS						\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N / A					E L EACH ACCIDENT	\$	
(Mandatory in NH)					E L DISEASE - EA EMPLOYEE	\$	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	5	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Project No. 104107, TMUA-W 13-44, MS#620, TMUA 04-57 C5, 144107, TMUA-W 14-32, 2015-MPO

Change Order No. 2 Contract No. 133790

Non-Arterial Street Rehabilitation & Waterline Replacement for MZ 1007 & 3007

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.

ALITHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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