AMENDMENT TO CONTRACT Weed Abatement - Mowing Bid No. 15-080 Lancaster County Renewal Gary's Lawn & Landscape

This Amendment is hereby entered into by and between Gary's Lawn & Landscape, 1418 S 3rd St., Lincoln, NE 68502 (hereinafter "Contractor") and Lancaster County, (hereinafter "County"), for the purpose of amending the Contract dated June 23, 2015, under County Contract No. C-15-0304, for Weed Abatement - Mowing, Bid No. 15-080, which is made a part hereof by this reference.

WHEREAS, the original term of the Contract is June 23, 2015 through June 22, 2016, with the option to renew for three (3) additional one (1) year terms upon written mutual consent of both parties; and

WHEREAS, the Contract was amended by County Contract No. C-16-0352 on July 5, 2016, to renew the contract for an additional three (3) year term from June 23, 2016 through June 22, 2017; and

WHEREAS, the parties hereby renew the Contract for an additional one (1) year term beginning June 23, 2017 through June 22, 2018; and

WHEREAS, the expenditures for Lancaster County for the term of this renewal shall not exceed \$15,000.00 without approval by the Lancaster County Board of Commissioners; and

NOW, THEREFORE, IN CONSIDERATION of the mutual covenants contained in County Contract No. C-15-0304, and stated herein the parties agree as follows:

- 1) The parties hereby renew the Contract for an additional one (1) year term beginning June 23, 2017 through June 22, 2018.
- 2) The expenditures for Lancaster County for the term of this renewal shall not exceed \$15,000.00 without approval by the Lancaster County Board of Commissioners.
- 3) All other terms of the Contract, not in conflict with this Amendment, shall remain in full force and effect.

The Parties do hereby agree to all the terms and conditions of this Amendment. This Amendment shall be binding upon the parties, their heirs, administrators, executors, legal and personal representatives, successors, and assigns.

IN WITNESS WHEREOF, the Parties do hereby execute this Amendment upon completion of signatures on:

Vendor Signature Page Lancaster County Signature Page

Vendor Signature Page

AMENDMENT TO CONTRACT Weed Abatement - Mowing Bid No. 15-080 Lancaster County Renewal Gary's Lawn & Landscape

Please sign, date and return within 5 days of receipt.

Mail to:

City/County Purchasing Attn: Brianne Crooks 440 So. 8th St., Ste. 200 Lincoln, NE 68508 Or email to: BCrooks@lincoln.ne.gov

| Company Name: | Gary's Lawn and Landscape |
|---|------------------------------------|
| By: (Please Sign) | TE Re- |
| By: (Please Print) | Thomas Bennett |
| Title: | Manager |
| Company Address: | 1418 5 3rd St. |
| Company Phone & Fax: | 402- 840-5094 |
| E-Mail Address: | garyslawnand landscope @ gneil.com |
| Date: | 6/2/17 |
| Contact Person for: Service or Orders" | Tom Bennett |
| Contact Phone Number: | 402- 840-5094 |

..

Lancaster County Signature Page

AMENDMENT TO CONTRACT Weed Abatement - Mowing Bid No. 15-080 Lancaster County Renewal Gary's Lawn & Landscape

EXECUTION BY LANCASTER COUNTY, NEBRASKA

Contract Approved as to Form:

Lancaster, Nebraska

The Board of County Commissioners of

Deputy Lancaster County Attorney

dated _____

| | - | |
|----|---|----|
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| AC | O | RD |
| 1 | | |

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/03/2016

| | THIS CERTIFICATE IS ISSUED AS A I CERTIFICATE DOES NOT AFFIRMATI BELOW. THIS CERTIFICATE OF INS REPRESENTATIVE OR PRODUCER, AN | VEL | Y OR | NEGATIVELY AMEND, DOES NOT CONSTITUT | EXTER | ND OR ALTI | ER THE CO | VERAGE AFFORDE | CAT D B | Y THE | LDER. THIS |
|-------|---|-------|-------------------------------|--|--------------------------|--|---|---|------------|--------|------------|
| L I | MPORTANT: If the certificate holder i f SUBROGATION IS WAIVED, subject his certificate does not confer rights t | to th | ne ter | rms and conditions of th | e polic | y, certain po | olicies may i | | | | |
| | DDUCER | | | | CONTA NAME: | | | | | | |
| | Aurora Insurance | | | | | , Ext): 402-694 | -5000 | FAX | No). | 402-69 | 4-4017 |
| | Box 225 | | | | E-MAIL | se. gail.aurora | ins@hamilton | | 110]. | | |
| | Aurora NE 68818-022 | 25 | | | AUDIL | | | DING COVERAGE | | | NAIC # |
| | | | | | INSURF | RA: Addison | | | | | 10324 |
| INS | URED O | | | | | | OMP UNDER | WRITERS | | | |
| | Gary's Lawn & Landsca | pe | | | INSURER C : | | | | | | |
| | Gary Nunnally | | | | INSURE | | | | | | |
| | 1418 S. 3rd Street | 4.4 | | | INSURE | | | | | | |
| | LINCOLN NE 68502-19 | | | | INSURE | | | | | | |
| cc | OVERAGES CER | TIFIC | CATE | NUMBER: 2016100315 | | | | REVISION NUMBE | R: | | 1 |
| | THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RE CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH | | NSUF REME AIN, CIES. | RANCE LISTED BELOW HAY NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE | VE BEE OF AN ED BY | N ISSUED TO Y CONTRACT THE POLICIE REDUCED BY | OR OTHE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS. | D NAMED ABOVE FO | OR T | ст то | WHICH THIS |
| INSE | | INSD | SUBR WVD | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | | LIMIT | S | |
| | COMMERCIAL GENERAL LIABILITY | | | | | | | EACH OCCURRENCE | | \$ | 1,000,000 |
| | CLAIMS-MADE OCCUR | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrenc | e) | \$ | 100,000 |
| A | | | | | | | | MED EXP (Any one perso | n) | \$ | 5,000 |
| | | Y | N | 60451751 | | 10/03/2016 | 10/03/2017 | PERSONAL & ADV INJUR | Y | \$ | 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGATE | | \$ | 2,000,000 |
| | POLICY PRO- JECT LOC | | | | | | | PRODUCTS - COMP/OP | AGG | \$ | 2,000,000 |
| | OTHER: | | | | | | | Fire Damage | | \$ | |
| | AUTOMOBILE LIABILITY | | | | | | | COMBINED SINGLE LIMI (Ea accident) | Г | \$ | 1,000,000 |
| | ANY AUTO | | | | | | | BODILY INJURY (Per per | son) | \$ | |
| A | OWNED SCHEDULED AUTOS ONLY AUTOS | | | 00454754 | | 1010010010 | | BODILY INJURY (Per acc | dent) | \$ | |
| · ` ` | HIRED NON-OWNED AUTOS ONLY | Ν | N | 60451751 | | 10/03/2016 | 10/03/2017 | PROPERTY DAMAGE (Per accident) | | S | |
| | | | | | | | | | | \$ | |
| | UMBRELLA LIAB OCCUR | | | | | | | EACH OCCURRENCE | | \$ | |
| | EXCESS LIAB CLAIMS-MADE | | | | | | | AGGREGATE | | \$ | |
| | DED RETENTION \$ | | | | | | | | | \$ | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N | | | | | | | PER O STATUTE E | TH- R | | |
| B | ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED? | N/A | N | MWC0100296 01 | | 00/10/2010 | 00/10/0017 | E.L. EACH ACCIDENT | | \$ | 100,000 |
| - | (Mandatory in NH) | | | MWC0100286-01 | | 09/18/2016 | 09/18/2017 | E.L. DISEASE - EA EMPL | OYEE | \$ | 100,000 |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY L | IMIT | \$ | 500,000 |
| DES | SCRIPTION OF OPERATIONS / LOCATIONS / VEHICI | ES (/ | CORD | 101 Additional Democily Schools | 1 | | | | | | |
| 10.0 | | | | | is, may b | attacheu il mor | apace is require | 50) | | | |
| La | ancaster County - Additiona | l In | sure | ed | | | | | | | |
| 65 | | | | | | | | | | | |
| | RTIFICATE HOLDER | | | | CANC | ELLATION | | | | | |
| | Lancaster County 550 So. 10th Street LINCOLN NE 68508 | | | | THE | EXPIRATION | I DATE THE TH THE POLIC | ESCRIBED POLICIES I REOF, NOTICE WI Y PROVISIONS. | | | |
| | Email: dwinkler@lincoln.ne | .gov | | | AUTHO | bai | lX | nilor | 2 | - | |

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES 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 |
|---|-----------------------------------|
| LANCASTER COUNTY C/O CITY OF LINCOLN PURCHASING 440 S 8 ST LINCOLN NE 68503 | AS PER CONTRACT |

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

PREMIUM 50

- 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
 - **2.** 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.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

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:

- 1. 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.

C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

Notice to Policyholders — Location and Premises Clarification

This notice does not provide you with any coverage and is intended solely as a clarification of our intent.

Wherever any reference to <u>location</u> is made in the Declarations, Supplemental Declarations, Coverage Forms, or endorsements that comprise this policy, that reference shall also be deemed to apply to <u>premises</u>, and likewise any reference to <u>premises</u> shall be deemed to apply to <u>location</u>.

This notice is provided to you as certain documents that comprise your policy may use these terms interchangeably.

If you have any questions regarding this notice please contact your agent.

Thank you for doing business with United Fire Group.