## AMENDMENT TO CONTRACT Unit Price Electrical and Large Scale Electrical Services Bid No. 16-284 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Renewal Willmar Electric Service

This Amendment is hereby entered into by and between Willmar Electric Service, 1441 Adams St., Lincoln, NE 68521 (hereinafter "Contractor") and the City of Lincoln, Lancaster County and the City of Lincoln-Lancaster County Public Building Commission (hereinafter "Owners"), for the purpose of amending the Contract dated March 2, 2017 executed under City Resolution No. A-90262, and County Contract C-17-0141, dated February 21, 2017, and executed by the City of Lincoln-Lancaster County Public Building Commission, on February 14, 2017, for Unit Price – Electrical and Large Scale Electrical Services, Bid No. 16-284, which is made a part of this amendment by this reference.

WHEREAS, the original term of the Contract is March 1, 2017 through February 28, 2019, with the option to renew for two (2) additional two (2) year terms upon written mutual consent by all parties; and

WHEREAS, the parties hereby renew the Contract for an additional two (2) year term beginning March 1, 2019 through February 28, 2021; and

WHEREAS, the expenditures for the City of Lincoln for the term of this renewal shall not exceed \$240,000.00 for contracts without approval by the City of Lincoln; and

WHEREAS, the expenditures for Lancaster County for the term of this renewal shall not exceed \$120,000.00 for contracts without approval by the Lancaster County Board; and

WHEREAS, the expenditures for the City of Lincoln-Lancaster County Public Building Commission for the term of this renewal shall not exceed \$60,000.00 for contracts without approval by the Public Building Commission; and

WHEREAS, the parties hereby amend the contract to replace Paragraph No. 9 of the Contract with the following language:

<u>OWNER INCLUSION</u>. It is understood and agreed by all parties that "Owner/s" shall include the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission. Whenever a singular entity is referenced (i.e., "the City" or "the County" or "Building Commission") in the Contract, which includes the instructions to bidders, specifications, insurance requirements, bonds, terms and conditions, or any other documents which are a part of the Contract, it shall mean the "Owners" encompassing the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission. Notwithstanding the foregoing, the duties and obligations of the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission. Notwithstanding the foregoing, the duties and obligations, and default by any one of the Owners shall not be attributed to any other of the Owners, but shall remain the sole obligation of the defaulting entity.

NOW, THEREFORE, IN CONSIDERATION of the mutual covenants contained in the Contract under City Resolution A-90262 and County Contract C-17-0141, all amendments thereto, and as stated herein, the parties agree as follows:

1) The parties hereby renew the Contract for an additional two (2) year term beginning March 1, 2019 through February 28, 2021.

- 2) The expenditures for the City of Lincoln for the term of this renewal shall not exceed \$240,000.00 for contracts without approval by the City of Lincoln.
- 3) The expenditures for Lancaster County for the term of this renewal shall not exceed \$120,000.00 for contracts without approval by the Lancaster County Board.
- 4) The expenditures for the City of Lincoln-Lancaster County Public Building Commission for the term of this renewal shall not exceed \$60,000.00 for contracts without approval by the Public Building Commission.
- 5) The parties hereby amend the contract to replace Paragraph No. 9 of the Contract with the following language: <u>OWNER INCLUSION</u>. It is understood and agreed by all parties that "Owner/s" shall include the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission. Whenever a singular entity is referenced (i.e., "the City" or "the County" or "Building Commission") in the Contract, which includes the instructions to bidders, specifications, insurance requirements, bonds, terms and conditions, or any other documents which are a part of the Contract, it shall mean the "Owners" encompassing the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission. Notwithstanding the foregoing, the duties and obligations of the City of Lincoln, Lancaster County, and the Lincoln-Lancaster County Public Building Commission be attributed to any other of the Owners, but shall remain the sole obligation of the defaulting entity.
- 6) All other terms of the Contract, not in conflict with this Amendment, shall remain in 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 City of Lincoln Signature Page Lancaster County Signature Page City of Lincoln-Lancaster County Public Building Commission Signature Page

## **Vendor Signature Page**

### AMENDMENT TO CONTRACT Unit Price Electrical and Large Scale Electrical Services Bid No. 16-284 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Renewal Willmar Electric Service

## 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:	Willmar Electric Service
By: (Please Sign)	lin toms
By: (Please Print)	Paul Latimer
Title:	Project Manager
Company Address:	1441 Adams, Lincoln, NE 68521
Company Phone & Fax:	402-904-7070
E-Mail Address:	platimer@willmar-electric.com
Date:	2/13/2019
Contact Person for Orders or Service	Lee Freudenburg
Contact Phone Number:	402-904-7078

## AMENDMENT TO CONTRACT Unit Price Electrical and Large Scale Electrical Services Bid No. 16-284 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Renewal Willmar Electric Service

## **EXECUTION BY THE CITY OF LINCOLN, NEBRASKA**

ATTEST:

City Clerk

CITY OF LINCOLN, NEBRASKA

Chris Beutler, Mayor

Approved by Executive Order No.\_\_\_\_\_

dated \_\_\_\_\_

# Lancaster County Signature Page

## AMENDMENT TO CONTRACT Unit Price Electrical and Large Scale Electrical Services Bid No. 16-284 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Renewal Willmar Electric Service

## **EXECUTION BY LANCASTER COUNTY, NEBRASKA**

Contract Approved as to Form:

The Board of County Commissioners of Lancaster, Nebraska

Deputy Lancaster County Attorney

dated \_\_\_\_\_

# City of Lincoln-Lancaster County Public Building Commission Signature Page

## AMENDMENT TO CONTRACT Unit Price Electrical and Large Scale Electrical Services Bid No. 16-284 City of Lincoln, Lancaster County and City of Lincoln-Lancaster County Public Building Commission Renewal Willmar Electric Service

## EXECUTION BY LINCOLN-LANCASTER COUNTY PUBLIC BUILDING COMMISSION

ATTEST:

Public Building Commission Attorney

Chairperson, Public Building Commission

dated \_\_\_\_\_

## RIDER

## Liberty Mutual Insurance Company 175 Berkeley Street, Boston, MA 02116

To be attached to and form a part of:

Bond No. 190037148

Type of Bond: Performance & Payment

In consideration of the premium charged for the attached bond, it is hereby agreed to change:

#### Extended Bond Term

From: 03/01/2019

To: 02/28/2021

This rider is effective February 14th, 2019

This rider is executed upon the express condition that the surety's liability under said bond shall not be cumulative and shall in no event exceed the amount specifically set forth in said bond or any existing certificate changing the amount of said bond. The referenced bond shall be subject to all its agreements, limitations and conditions except as herein expressly modified.

SIGNED, SEALED AND DATED this 14th day of February , 2019

Willmar Electric Service Corp.

Bv: David Chapin, President

Liberty Mutual Insurance Company By: John F. Tauer, Attorney-In-Fact

#### CORPORATE ACKNOWLEDGMENT

State of <u>Nebraska</u>) ) ss County of <u>Lancaster</u>)

On this \_\_\_\_\_\_ day of \_\_\_\_\_\_, before me appeared \_\_\_\_\_\_ David Chapin\_\_\_\_\_, to me personally known, who, being by me duly sworn, did say that he/she is the \_\_\_\_\_\_\_\_, or president \_\_\_\_\_\_\_, a corporation, that the seal affixed to the foregoing instrument is the corporate seal of said corporation, and that said instrument was executed in behalf of said corporation by authority of its Board of Directors, and that said \_\_\_\_\_\_\_ David Chapin\_\_\_\_\_\_\_ acknowledged said instrument to be the free act and deed of said corporation.

Notary Public Lancaster Co County, \_ Nebraska

11-17-19

A GENERAL NOTARY - State of Neolaska SYLVIA L. HIGEL My Comm. Exp. Nov. 17, 2019

) ss

#### SURETY ACKNOWLEDGMENT

State of Minnesota County of Hennepin

MELINDA C. BLODGETT NOTARY PUBLIC -MINNESOTA My Commission Expires JADUALY 31, 2023

Notary Public <u>Washington</u> County, <u>Minnesota</u> My commission expires <u>1/31/2023</u>



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

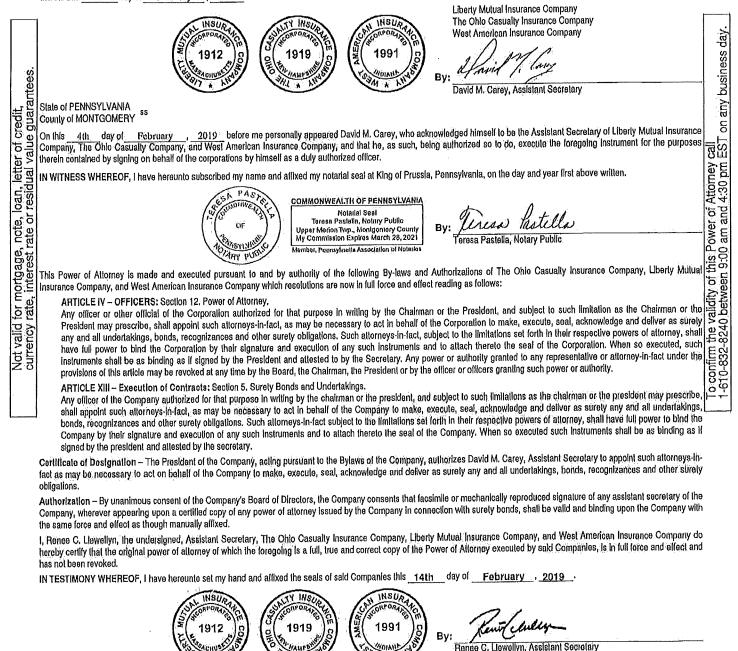
> Liberty Mutual Insurance Company The Ohio Casualiy Insurance Company West American Insurance Company

Cerlificate No: 8200451-190054

### **POWER OF ATTORNEY**

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casually Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mulual insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, <u>Colby D.</u> White, Melinda C. Blodgett, R. C. Boyman, Tina L. Domask, R. Scott Egginton, Sandra M. Engstrum, R. W. Frank, Ted Jorgensen, Joshua R. Loftis, Kurt C. Lundblind Brian J. Ocstrolch, Jerome T. Ouimet, Ross S. Squires, Nicole Stillings, John E. Tauer, Rachel Thomas, Lin Ulven, Emily White

all of the city of <u>Minneepolls</u> state of <u>Minnesota</u> each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.



LMS-12873 LMIC OCIC WAIG Multi Co. 062018

#### Certified Statement Pursuant to Neb. Rev. Stat. § 77-1323

§ 77-1323 Every person, partnership, limited liability company, association, or corporation furnishing labor or material in the repair, alteration, improvement, erection, or construction of any public improvement shall furnish a certified statement to be attached to the contract that all equipment to be used on the project, except that acquired since the assessment date, has been assessed for taxation for the current year, giving the county where assessed.

Las

, do hereby certify that all Pursuant to Neb. Rev. Stat. § 77-1323, I, Jun equipment to be used on Bid No. 16-284, except that equipment acquired since the assessment date, has been assessed for taxation for the current year, in County, Nebraska.

DATED this 13th day of \_January\_\_, 2019.

Title:\_Project Manager\_

STATE OF NEBRASKA

COUNTY OF LANCASTER

On <u>February</u> [3], 2019, before me, the undersigned Notary Public duly commissioned for and qualified in said County, personally came <u>Paul Latimer</u>, to me known to be the identical person, whose name is affixed to the foregoing instrument and acknowledged the execution thereof to be his voluntary act and deed.

)ss.

Witness my hand and notarial seal the day and year last above written.

Lylvia L. Migel Notary Public (SFAL)

(SEÁL)

GEVERAL NOTARY - State of Nebraska SVLVIA L. HIGEL My Comm. Exp. Nov. 17, 2019

#### **EMPLOYEE CLASSIFICATION ACT AFFIDAVIT**

For the purposes of complying with THE NEBRASKA EMPLOYEE CLASSIFICATION ACT, Nebraska Revised Statutes 48-2901 to 48-2912,

I, Paul Latimer, herein below known as the Contractor, state under oath and swear as follows:

1. Each individual performing services for the Contractor is properly classified under the Employee Classification Act.

2. The Contractor has completed a federal I-9 immigration form and has such form on file for each employee performing services.

3. The Contractor has complied with Neb. Rev. Stat. 4-114.

4. The Contractor has no reasonable basis to believe that any individual performing services for the Contractor is an undocumented worker.

5. The Contractor is not barred from contracting with the state or any political subdivision pursuant to Neb. Rev. Stat. 48-2912 of this Act.

6. As the Contractor, I understand that pursuant to the Employee Classification Act a violation of the Act by a contractor is grounds for rescission of the contract by Lancaster County. I understand that pursuant to the Act any contractor who knowingly provides a false affidavit may be subject to criminal penalties and upon a second or subsequent violation shall be barred from contracting with Lancaster County for a period of three years after the date of discovery of the falsehood.

I hereby affirm and swear that the statements and information provided on this affidavit are true, complete and accurate. The undersigned person does hereby agree and represent that he or she is legally capable to sign this affidavit and to lawfully bind the Contractor to this affidavit. . (Einst Middle I act)

PRINT NAME:	_Pau/ Dynn Latimer	(First, Middle, Last)
	111 11	
SIGNATURE:	Sand Latera	- 9

V

Project Manager

) ) ss.

TITLE:

State of Nebraska County of Lancaster

This affidavit was signed and sworn to before me, the undersigned Notary Public, on this 13<sup>th</sup> day of <u>February</u>, 20<u>19</u>.

Lylura L. Higel Notary Public





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/14/2019

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 Cobb Strecker Dunphy & Zimmermann 225 South Sixth Street				CONTACT NAME: Val Hendrickson PHONE (A/C, No, Ext): 612-349-2446 E-MAIL ADDRESs: vhendrickson@csdz.com						
Suite 1900 Minneapolis MN 55402			ADDRE		—— <del>—</del> ————			NAIC #		
				INSURER(S) AFFORDING COVERAGE				25658		
INSURED WILLELEI			INSURER B : Navigators Insurance Company				42307			
Willmar Electric Service Corp. 2405 Trott Ave SW			INSURE	<u> R c : Phoenix</u>	Insurance Co	mpany		25623		
	Box 934				INSURE	RD: Traveler	s Casualty In:	s Co of America		19046
VVI	lmar MN 56201						s Indemnity C	ompany of America		25666
		71710	- A TT		INSURE	RF:				
	VERAGES CER'			NUMBER: 1863169802	/F BEE	N ISSUED TO		REVISION NUMBER:	HE POI	
IN Cl	DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY F KCLUSIONS AND CONDITIONS OF SUCH F	QUIF PERT POLIC	Remei Ain, Dies.	NT, TERM OR CONDITION THE INSURANCE AFFORDE LIMITS SHOWN MAY HAVE	of an' Ed by	Y CONTRACT THE POLICIES REDUCED BY I	OR OTHER D S DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESPECT	CT TO V	NHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
C	X COMMERCIAL GENERAL LIABILITY			DTCO4703R076PHX18		8/1/2018	8/1/2019	EACH OCCURRENCE	\$1,000	,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,0	
	X Contr Liab Per							MED EXP (Any one person)	\$ 5,000	
	X XCU/Policy Form GEN'L AGGREGATE LIMIT APPLIES PER:							PERSONAL & ADV INJURY GENERAL AGGREGATE	\$ 1,000 \$ 2,000	
	POLICY X PRO- JECT X LOC								\$ 2,000	
	OTHER:							***************************************	\$	
A	AUTOMOBILE LIABILITY			DT8104703R076IND18		8/1/2018	8/1/2019	COMBINED SINGLE LIMIT (Ea accident)	\$1,000	,000
	X ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY AUTOS HIRED NON-OWNED								\$	
	AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	- 050 000
в	X Comp: \$1,000 X Coll: \$1,000			CH18EXC632554IV		8/1/2018	8/1/2019	Hired Auto Phys Dmg		0 \$50,000
D :	UMBRELLA LIAB X OCCUR   X EXCESS LIAB CLAIMS-MADE			01102X003230410		0/1/2010	0/112010	EACH OCCURRENCE AGGREGATE	\$10,00 \$10,00	
	DED X RETENTION \$ 0								\$ 10,00	0,000
D	WORKERS COMPENSATION			UB8K7004201826E		8/1/2018	8/1/2019	X PER OTH- STATUTE ER		
	AND EMPLOYERS' LIABILITY Y / N ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A						E.L. EACH ACCIDENT \$1,000,000		,000
	(Mandatory In NH)	пта						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below								\$1,000	
E	Leased/Rented Equipment Special Form			QT6603391B758TIA18		8/1/2018	8/1/2019	Any One Ilem: Deduciible: Actual Cash Value	\$100, \$2,50	
Mis Ado	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Miscellaneous Locations as requested Additional Insured only if required by written contract with respect to General Liability and Automobile Liability applies on a primary basis: City of Lincoln and Lancaster County and Lincoln-Lancaster County Public Building Commission									
Wa Line	iver of Subrogation only if required by w coln-Lancaster County Public Building C	ritten omm	conti issior	ract with respect to Workers	s Comp	ensation app	lies in favor c	f: Cily of Lincoln and Land	caster (	County and
The (10	e following supersedes the cancellation v Days for Non-Payment) will be delivered	vordi d to t	ng: S he ce	hould any of the above des rtificate holder.	cribed	policies be ca	incelled befor	e the expiration date, 30 I	Days w	ritten notice
CE	RTIFICATE HOLDER				CANC	ELLATION				
City of Lincoln Lancaster County Lincoln-Lancaster County Public Building										
					AUTHO	RIZED REPRESE		J.K.		

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ACORD 25 (2016/03) The ACORD name THIS CERTIFICATE SUPERSEDES PREVIOUSLY ISSUED CERTIFICATE

The ACORD name and logo are registered marks of ACORD

# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# BLANKET ADDITIONAL INSURED – AUTOMATIC STATUS IF REQUIRED BY WRITTEN CONTRACT (CONTRACTORS)

- This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART
- 1. The following is added to SECTION II WHO IS AN INSURED:

Any person or organization that:

- You agree in a "written contract requiring insurance" to include as an additional insured on this Coverage Part; and
- b. Has not been added as an additional insured for the same project by attachment of an endorsement under this Coverage Part which includes such person or organization in the endorsement's schedule;
- is an insured, but:

÷., .

- a. Only with respect to liability for "bodily injury", "property damage" or "personal injury"; and
- b. Only as described in Paragraph (1), (2) or (3) below, whichever applies:
  - (1) If the "written contract requiring insurance" specifically requires you to provide additional insured coverage to that person or organization by the use of:
    - (a) The Additional Insured Owners, Lessees or Contractors – (Form B) endorsement CG 20 10 11 85; or
    - (b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10 10 01, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 10 01;

the person or organization is an additional insured only if the injury or damage arises out of "your work" to which the "written contract regulring insurance" applies;

(2) If the "written contract requiring insurance" specifically requires you to provide additional insured coverage to that person or organization by the use of:

- (a) The Additional Insured Owners, Lessees or Contractors – Scheduled Person or Organization endorsement CG 20 10 07 04 or CG 20 10 04 13, the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 07 04 or CG 20 37 04 13, or both of such endorsements with either of those edition dates; or
- (b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37, without an edition date of . such endorsement specified;

the person or organization is an additional insured only if the injury or damage is caused, in whole or in part, by acts or omissions of you or your subcontractor in the performance of "your work" to which the "written contract requiring insurance" applies; or

- (3) If neither Paragraph (1) nor (2) above applies:
  - (a) The person or organization is an additional insured only if, and to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" to which the "written contract requiring insurance" applies; and
  - (b) The person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.

CG D6 04 08 13

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#### COMMERCIAL GENERAL LIABILITY

- 2. The insurance provided to the additional insured by this endorsement is limited as follows:
  - a. If the Limits of Insurance of this Coverage Part shown in the Declarations exceed the minimum limits of liability required by the "written contract requiring insurance", the insurance provided to the additional insured will be limited to such minimum required limits of liability. For the purposes of determining whether this limitation applies, the minimum limits of liability required by the "written contract requiring insurance" will be considered to include the minimum limits of liability of any Umbrella or Excess liability coverage required for the additional insured by that "written contract requiring insurance". This endorsement will not increase the limits of insurance described in Section III - Limits Of Insurance.
  - b. The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services, including:
    - (1) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
    - (2) Supervisory, inspection, architectural or engineering activities.
  - c. The insurance provided to the additional insured does not apply to "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless the "written contract requiring insurance" specifically requires you to provide such coverage for that additional insured during the policy period.
- 3. The insurance provided to the additional insured by this endorsement is excess over any valid and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to the additional insured. However, if the "written contract requiring insurance" specifically requires that this insurance apply on a primary basis or a primary and non-contributory basis, this insurance is primary to other insurance available to the additional insured under which that person or organization qualifies as a named insured, and we will not share with that other insurance. But the insurance provided to the additional insured by this endorsement still is excess over any valid

and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to the additional insured when that person or organization is an additional insured, or is any other insured that does not qualify as a named insured, under such other insurance.

- As a condition of coverage provided to the additional insured by this endorsement:
  - a. The additional insured must give us written notice as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, such notice should include:
    - How, when and where the "occurrence" or offense took place;
    - (2) The names and addresses of any injured persons and witnesses; and
    - (3) The nature and location of any injury or damage arising out of the "occurrence" or offense.
  - b. If a claim is made or "suit" is brought against the additional insured, the additional insured must;
    - (1) Immediately record the specifics of the claim or "suit" and the date received; and
    - (2) Notify us as soon as practicable.

The additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.

- c. The additional insured must immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- d. The additional insured must tender the defense and indemnity of any claim or "suit" to any provider of other insurance which would cover the additional insured for a loss we cover under this endorsement. However, this condition does not affect whether the insurance provided to the additional insured by this endorsement is primary to other insurance available to the additional insured which covers that person or organization as a named insured as described in Paragraph 3, above.
- 5. The following is added to the DEFINITIONS Section:

"Written contract requiring insurance" means that part of any written contract or agreement under which you are required to include a person or or-

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#### ganization as an additional insured on this Coverage Part, provided that the "bodily injury" and "property damage" occurs, and the "personal injury" is caused by an offense committed, during the policy period and:

#### COMMERCIAL GENERAL LIABILITY

- a. After the signing and execution of the contract or agreement by you; and
- b. While that part of the contract or agreement is in effect.

CG D6 04 08 13



WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

ENDORSEMENT WC 00 03 13 (00) -

POLICY NUMBER: UB8K7004201826E

# WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone llable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

SCHEDULE

DESIGNATED PERSON:

#### DESIGNATED ORGANIZATION:

ANY PERSON OR ORGANIZATION FOR WHICH THE NAMED INSURED HAS AGREED IN A WRITTEN CONTRACT EXCEUTED PRIOR TO LOSS TO PROVIDE THIS WAIVER.

DATE OF ISSUE: - - ST ASSIGN: