



[PSC - CARDINAL CONTRACTORS INC] RESPONSE DOCUMENT REPORT

IFB No. IFB-302-25-JJ

Water Treatment Plant Aeration Pump Station Upgrades

RESPONSE DEADLINE: June 12, 2025 at 3:00 pm

Report Generated: Tuesday, June 24, 2025

PSC - Cardinal Contractors Inc Response

CONTACT INFORMATION

Company:

PSC - Cardinal Contractors Inc

Email:

joe.brown@prim.com

Contact:

Joe Brown

Address:

13794 NW 4th Street

Suite 200

Sunrise, FL 33325

Phone:

(941) 879-9375

Website:

N/A

Submission Date:

Jun 12, 2025 2:55 PM (Eastern Time)

ADDENDA CONFIRMATION

Addendum #1

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

Addendum #2

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

Addendum #3

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

Addendum #4

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

Addendum #5

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

Addendum #6

Confirmed Jun 11, 2025 2:53 PM by Joe Brown

QUESTIONNAIRE

1. VENDOR REFERENCE FORM*

Please download the below documents, complete, and upload.

- [Vendor Reference Form.pdf](#)

Vendor_Reference_Form_Desoto_County_Reginal_WWTP.pdf

Vendor_Reference_Form_Fiesta_Village.pdf

Vendor_Reference_Form_Sawgrass_WWTP.pdf

Vendor_Reference_Form_Springtree_WWTP.pdf

2. Please download the below document, sign, and upload.*

Please download the below documents, complete, and upload.

- [Insurance Requirement for W...](#)

Insurance_Requirements.pdf

3. HOLD HARMLESS AND INDEMNITY CLAUSE*

I, an authorized representative, the contractor, shall indemnify, defend and hold harmless the City of Hollywood, its elected and appointed officials, employees and agents for any and all suits, actions, legal or administrative proceedings, claims, damage, liabilities, interest, attorney's fees, costs of any kind whether arising prior to the start of activities or following the completion or acceptance and in any manner directly or indirectly caused, occasioned or contributed to in whole or in part by reason of any act, error or omission, fault or negligence whether active or passive by the contractor, or anyone acting under its direction, control, or on its behalf in connection with or incident to its performance of the contract.

Confirmed

4. NON-COLLUSION STATEMENT*

I, being first duly sworn, depose that:

- A. He/she is an authorized representative of the Company, the Proposer that has submitted the attached Proposal.
- B. He/she has been fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;
- C. Such Proposal is genuine and is not a collusion or sham Proposal;
- D. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contractor for which the attached Proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices,

profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure an advantage against the City of Hollywood or any person interested in the proposed Contract; and

- E. The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Confirmed

5. CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS*

The applicant certifies that it and its principals:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- B. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- D. Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Confirmed

6. DRUG-FREE WORKPLACE PROGRAM*

- A. IDENTICAL TIE PROPOSALS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented

a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie proposals will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program (if such is available in the employee's community) by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of these requirements.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Confirmed

7. SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY *

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. "No Public officer, employee of an agency, local government attorney, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of

the public officer, employee, local government attorney, or candidate would be influenced thereby.” The term “public officer” includes “any person elected or appointed to hold office in any agency, including any person serving on an advisory body.”

The City of Hollywood/Hollywood CRA policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City/CRA does business.

The State of Florida definition of “gifts” includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Food or beverage,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.

Confirmed

8. Certificate of Insurance*

See requirements in the [#SPECIAL TERM AND CONDITIONS](#) section.

COI_-_CITY_OF_HOLLYWOOD_WTP_Aeration_Pump_Station_Upgrades_-_21852220.pdf

9. PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

80-0388786

[Click to Verify](#) *Value will be copied to clipboard*

10. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*

Incorporated September 18, 1984 and acquired by PRIMORIS in 2004

STATE INCORPORATED/ORGANIZED:*

Florida

REMITTANCE ADDRESS*

Primoris Services Corporation, 18484 East Petroleum Drive, Baton Rouge, LA 70809

BIDDER/PROPOSER'S AUTHORIZED REPRESENTATIVE'S TYPED FULL NAME*

Joe Brown

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER/PROPOSER CERTIFIES ACCEPTANCE OF THE TERMS, CONDITIONS, SPECIFICATIONS, ATTACHMENTS AND ANY ADDENDA. THE BIDDER/PROPOSER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF

THIS SOLICITATION. BIDDER/PROPOSER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR THE PERIOD OF TIME STATED IN THE SOLICITATION.*

Confirmed

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER/PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID/PROPOSAL NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID/PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER/PROPOSER TO THE TERMS OF ITS OFFER.*

Confirmed

BID FORM*

Please download the below documents, complete, and upload.

- [Bid_Form_MASTER.docx](#)

Bid_form_for_hollywood_WTP_Aeration_Pump_Station_Upgrades_Executed.pdf

11. SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

THIS FORM STATEMENT IS SUBMITTED TO THE CITY OF HOLLYWOOD BY:*

(Print individual's name and title) (Print name of entity submitting sworn statement)

Joe Brown, Director of Operations, Cardinal Contractors, Inc.

SWORN STATEMENT CONTINUATION:*

Enter business address:

13794 NW 4th Street, Suite 200, Sunrise, FL 33325

SWORN STATEMENT CONTINUATION:*

Enter Federal Employer Identification Number (FEIN) is:

If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement.

80-0388786

SWORN STATEMENT CONTINUATION:*

I understand that “convicted” or “conviction” as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in an federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

I understand

SWORN STATEMENT CONTINUATION:*

I understand that “Affiliate,” as defined in paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or
2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term “affiliate” includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm’s length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida

during the preceding 36 months shall be considered an affiliate.

Confirmed

SWORN STATEMENT CONTINUATION:*

I understand that "person," as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity.

The term "person" includes those officers, executives, partners, shareholders, employees, members, and agents who are active in management of an entity

Confirmed

SWORN STATEMENT CONTINUATION:*

Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

Division of Administrative Hearings, determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the Final Order).

Neither the entity submitting sworn statement, nor any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

SWORN STATEMENT CONFIRMATION*

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER

FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC

ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR

YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017 FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

Confirmed

PRICE TABLES

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1A	Mobilization (Max. 3%)	1	LS	\$100,884.00	\$100,884.00
1B	Demobilization (Min. 2%)	1	LS	\$67,256.00	\$67,256.00
1C	Indemnification	1	LS	\$10.00	\$10.00
2	Permitting Allowance	1	AL	\$100,000.00	\$100,000.00
3	City's Contingency Allowance	1	AL	\$350,000.00	\$350,000.00
Existing Conditions					
4	Demolition	1	LS	\$77,985.00	\$77,985.00
Concrete					
5	Concrete Repairs	1	LS	\$16,290.00	\$16,290.00
6	Miscellaneous Concrete	1	LS	\$33,176.00	\$33,176.00

[PSC - CARDINAL CONTRACTORS INC] RESPONSE DOCUMENT REPORT
 IFB No. IFB-302-25-JJ
 Water Treatment Plant Aeration Pump Station Upgrades

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
7	6-inch Concrete Slab	13	CY	\$2,411.00	\$31,343.00
8	Concrete Surface Sealer	1	LS	\$9,930.00	\$9,930.00
Metals					
9	Access Hatch 3'x3', H20 Rated	1	EA	\$5,975.00	\$5,975.00
10	Aluminum Ladder	1	EA	\$5,975.00	\$5,975.00
11	SS316 4"x 1/4" Strap	171	LF	\$32.00	\$5,472.00
12	RFP Grating H-20 Rated	226	SF	\$247.00	\$55,822.00
13	Louver	3	EA	\$5,600.00	\$16,800.00
Thermal and Moisture Protection					
14	Vapor Retarder	20	SF	\$78.00	\$1,560.00
Finishes					
15	Protective Coating	1,000	SF	\$45.00	\$45,000.00
16	Waterproof Coating	500	SF	\$112.00	\$56,000.00
Electrical					
17	General Provisions for Electrical	1	LS	\$103,880.00	\$103,880.00
18	Low-Voltage Electrical Power Conductors and Cables (Several Sizes and Types)	1,400	LF	\$190.00	\$266,000.00

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 Water Treatment Plant Aeration Pump Station Upgrades

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
19	Instrumentation and Communication Cables	1	LS	\$69,922.00	\$69,922.00
20	Grounding and Bonding for Electrical Systems	1	LS	\$28,336.00	\$28,336.00
21	Hangers and Supports for Electrical Systems	1	LS	\$14,560.00	\$14,560.00
22	Rigid Conduits (Several Sizes and Types)	3,000	LF	\$90.00	\$270,000.00
23	Flexible Conduits (One Motor Connection)	5	LF	\$560.00	\$2,800.00
24	Sealing Fittings	1	LS	\$0.00	\$0.00
25	Pull, Junction, and Terminal Boxes	1	LS	\$2,800.00	\$2,800.00
26	Outlet Boxes	1	LS	\$3,920.00	\$3,920.00
27	Underground Ductbanks for Electrical Systems	800	LF	\$192.00	\$153,600.00
28	Manholes and Handholes for Electrical Systems	1	EA	\$11,200.00	\$11,200.00
29	Dry Type Transformers	1	EA	\$6,395.00	\$6,395.00
30	Panelboards	1	LS	\$56,130.00	\$56,130.00
31	Low-Voltage Receptacles	1	LS	\$1,120.00	\$1,120.00
32	Enclosed Circuit Breakers	1	LS	\$17,221.00	\$17,221.00
33	Disconnect Switches	1	LS	\$2,607.00	\$2,607.00
34	Low-Voltage VFDs	1	LS	\$112,615.00	\$112,615.00

[PSC - CARDINAL CONTRACTORS INC] RESPONSE DOCUMENT REPORT
 IFB No. IFB-302-25-JJ
 Water Treatment Plant Aeration Pump Station Upgrades

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
35	Control Stations	1	LS	\$0.00	\$0.00
36	Low-Voltage Combo Magnetic Motor Starters	1	LS	\$0.00	\$0.00
37	Lighting	1	LS	\$3,650.00	\$3,650.00
38	Instrumentation	1	LS	\$448.00	\$448.00
39	Automatic Transfer Switches	1	LS	\$23,690.00	\$23,690.00
40	Control Panel	1	LS	\$103,152.00	\$103,152.00
41	Communication Optical Fiber	500	LF	\$14.00	\$7,000.00
Process Interconnections					
42	16-inch DIP Piping	75	LF	\$658.00	\$49,350.00
43	30-inch DIP Piping	30	LF	\$1,721.00	\$51,630.00
44	16-inch Gate Valves	2	EA	\$34,088.00	\$68,176.00
45	16-inch Check Valves	1	EA	\$33,411.00	\$33,411.00
46	Air Release Valves	1	EA	\$13,394.00	\$13,394.00
47	Fittings	1	LS	\$131,217.00	\$131,217.00
Process Gas and Liquid Handling, Purification and Storage Equipment					
48	5,000 GPM Vertical Pump	1	EA	\$209,140.00	\$209,140.00

[PSC - CARDINAL CONTRACTORS INC] RESPONSE DOCUMENT REPORT
 IFB No. IFB-302-25-JJ
 Water Treatment Plant Aeration Pump Station Upgrades

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
49	Pressure Gauges	2	EA	\$3,444.00	\$6,888.00
50	Pressure Transmitters	1	EA	\$9,613.00	\$9,613.00
Water and Wastewater Equipment					
51	Modular Wall System and Roof System for New Electrical Room	1	LS	\$75,936.00	\$75,936.00
52	Painting and Finishing	1	LS	\$38,080.00	\$38,080.00
53	Single Aluminum Doors	5	EA	\$21,920.00	\$109,600.00
54	Double Aluminum Doors	2	LS	\$23,129.00	\$46,258.00
55	Structural Demolition	1	LS	\$15,473.00	\$15,473.00
56	Structural New/Supports	1	LS	\$45,470.00	\$45,470.00
57	Exhaust Fan	1	EA	\$11,200.00	\$11,200.00
58	AC for Electrical Room	1	LS	\$39,200.00	\$39,200.00
59	Roll Up Door	1	EA	\$27,860.00	\$27,860.00
60	OAI Louver with Motorized Damper	1	EA	\$8,960.00	\$8,960.00
Miscellaneous Exploration Work					
61	Field Crew (Superintendent)	80	HR	\$300.00	\$24,000.00
62	Field Crew (Operator)	200	HR	\$180.00	\$36,000.00

[PSC - CARDINAL CONTRACTORS INC] RESPONSE DOCUMENT REPORT
IFB No. IFB-302-25-JJ
Water Treatment Plant Aeration Pump Station Upgrades

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
63	Field Crew (Laborer)	200	HR	\$132.00	\$26,400.00
64	Field Crew (Electrician)	300	HR	\$180.00	\$54,000.00
65	Equipment, Excavator , 5 CY	200	HR	\$120.00	\$24,000.00
66	Equipment, Flat Bed Truck, 12'	300	HR	\$30.00	\$9,000.00
67	Equipment, Loader	300	HR	\$120.00	\$36,000.00
Total					
TOTAL					\$3,440,780.00

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-302-25-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: Desoto County BOCC

Organization/Firm Contact Name: Cindy Talamantez
 Email: c.talamantez@desotobocc.com
 Name of Referenced Project: Regional WWTP Rehab & Repair
 Date Services were provided: 2/2021-current, project is complete

Referenced Vendor's role in Project: ☒ Prime Vendor
 Would you use the Vendor again? ☒ Yes

Title: Project Manager
 Phone: 863-993-4816
 Contract No:
 Project Amount: \$4.2M

☐ Subcontractor/
 Subconsultant
☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):
 New headworks and screening devices, odor control system rehab, rehab of steel tanks, new coatings, new chemical dosing system

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☐	☒	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	☐	Verbal:	☐	Mail: ☐
Verified by:	Name:				Title:
	Department:				Date:

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-302-25-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: Lee County, FL
 Organization/Firm Contact Name: Lyssa Lott Title: Project Manager
 Email: llott@leegov.com Phone: 239-533-5672
 Name of Referenced Project: Fiesta Village WRF Sludge & NaOCL Sys. Contract No: _____
 Date Services were provided: 07/2019-11/2022 Project Amount: \$6.4M
 Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/
 Subconsultant
 Would you use the Vendor again? ☒ Yes ☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):
 New high solids centrifuge with new platform, cake conveyance, piping, pumps & valves, new sludge pumps, piping & valves, reclaimed water pumps, piping & valves, electrical & instrumentation improvements, pre-engineered canopy, sodium hypo feed pumps/piping & valves

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☐	☒	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	☐	Verbal:	☐	Mail: ☐
Verified by:	Name:				Title:
	Department:				Date:

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-302-25-JJ

Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference:

City of Sunrise

Organization/Firm Contact

Name:

Tim Welch

Title:

Project Manager

Email:

twelch@sunrisefl.gov

Phone:

954-888-6055

Name of Referenced Project:

Sawgrass WWTP Reuse Facility-Ph1

Contract No:

Date Services were provided:

11/2015-6/2018

Project

Amount:

\$15M

Referenced Vendor's role in Project:



Prime Vendor



Subcontractor/
Subconsultant

Would you use the Vendor again?



Yes



No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

Construction of 9 MGD WWTP expansion

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☐	☒	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	☐	Verbal:	☐	Mail:	☐
Verified by:	Name:				Title:	
	Department:				Date:	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-302-25-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: City of Sunrise

Organization/Firm Contact Name: Tim Welch Title: Project Manager
 Email: twelch@sunrisefl.gov Phone: 954-888-6055
 Name of Referenced Project: Springtree WWTP-Headworks Impr. Contract No:
 Date Services were provided: 10/2019-10/2022 Project Amount: \$9.3M

Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/
 Would you use the Vendor again? ☒ Yes ☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):
 Rehab the existing headworks structure at the Springtree WWTP

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☐	☒	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	☐	Verbal:	☐	Mail: ☐
Verified by:	Name:				Title:
	Department:				Date:

Insurance Requirements

Contractor shall maintain, at its sole expense, during the term of this agreement the following insurances:

All insurance policies shall be issued by companies authorized to do business under the laws of the State of Florida and satisfactory to the Owner. All companies be rated a minimum A-VII, as per A.M. Best Company's Key Rating Guide, latest edition.

Any sub-contractor shall supply such similar insurance required of the Contractor. Such certificates shall name the City as additional insured on the general liability and auto liability policies.

The Contractor shall furnish certificates of insurance to Risk Management for review and approval prior to the execution of this agreement. No failure to renew, material change or cancellation of, the insurance shall be effective without a 30-day prior written notice to and approval by the Owner.

Commercial General Liability

Prior to the commencement of work governed by this contract, the Contractor shall obtain General Liability Insurance. Coverage shall be maintained throughout the life of the contract and include, as a minimum:

- a. Premises Operations
- b. Products and Completed Operations
- c. Personal & Advertising Injury
- d. Damages to rented premises

The minimum limits acceptable shall be:

\$1,000,000 Each Occurrence / \$2,000,000 General Aggregate

The City of Hollywood shall be named as an Additional Insured.

The City of Hollywood must be the certificate holder per the following format:

City of Hollywood (Nothing else on this line)
Department Name & Room # (if applicable)
Department Address
Department Address

Commercial Automobile Liability Insurance

Recognizing that the work governed by this contract requires the use of vehicles, the Contractor, prior to the commencement of work, shall obtain Vehicle Liability

Insurance. Coverage shall be maintained throughout the life of the contract and include, as a minimum, liability coverage for:

Owned, Non-Owned, and Hired Vehicles

The minimum limits acceptable shall be:

\$1,000,000 Combined Single Limit

The City of Hollywood shall be named as Additional Insured in the Description of Operations Box.

The City of Hollywood must be the certificate holder per the following format:

City of Hollywood (Nothing else on this line)

Department Name & Room # (if applicable)

Department Address

Department Address

Workers' Compensation / Employers Liability Insurance

Prior to the commencement of work governed by this contract, the contractor shall obtain Workers' Compensation Insurance with limits sufficient to respond to the applicable State statutes.

In addition, the Contractor shall obtain Employers' Liability Insurance with limits of not less than:

\$1,000,000, bodily injury by accident

\$1,000,000 bodily injury by disease, each employee

\$1,000,000 bodily injury by disease, policy limit

Pollution Liability Insurance

Prior to the commencement of work governed by this contract, the Contractor shall obtain Pollution Liability Insurance. Coverage shall be maintained throughout the life of the contract and include, as a minimum:

\$1,000,000 Each Occurrence / \$2,000,000 General Aggregate

The City of Hollywood shall be named as Additional Insured in the Description of Operations Box.

Please Note: The Certificate shall contain a provision that coverage afforded under the policy will not be cancelled until at least thirty (30) days prior written notice has been given

to the City. Certificates of insurance, reflecting evidence of the required insurance, shall be provided to the City. In the event the Certificate of Insurance provided indicates that the insurance shall terminate and lapse during the period of this Agreement, the vendor shall furnish, at least thirty (30) days prior to the expiration of the date of such insurance, a renewed Certificate of Insurance as proof that equal and like coverage for the balance of the period of the Agreement or extension thereunder is in effect.

The insurance policy shall not contain any exceptions that would exclude coverage for risks that can be directly or reasonably related to the scope of goods or services in this bid/proposal. **A violation of this requirement at any time during the term, or any extension thereof shall be grounds for the immediate termination of any contract entered in to pursuant to this bid/proposal. In order to show that this requirement has been met, along with an insurance declaration sheet demonstrating the existence of a valid policy of insurance meeting the requirements of this bid/proposal, the successful proposer must submit a signed statement from insurance agency of record that the full policy contains no such exception. The City reserves the right to require additional insurance in order to meet the full value of the contract.**

Contractor waives, and Contractor shall ensure that Contractor's insurance carrier waives, all subrogation rights against the City, its officials, employees, and volunteers for all losses or damages. The City requires the policy to be endorsed with WC 00 03 13 Waiver of our Right to Recover from Others or equivalent.

The City reserves the right to require any other insurance coverage it deems necessary depending upon the exposures.

I understand and am responsible for the insurance requirements and corresponding due date as documented in this Bid.

Initial J.L. Date 6/11/25



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/28/2026

5/21/2025

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 Lockton Companies, LLC 444 W. 47th St., Ste. 900 Kansas City MO 64112-1906 (816) 960-9000 kcasu@lockton.com	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Fire Insurance Company INSURER B: Upland Specialty Insurance Company INSURER C: Property and Casualty Ins Co of Hartford INSURER D: Twin City Fire Insurance Company INSURER E: Hartford Casualty Insurance Company INSURER F: The Travelers Lloyds Insurance Company	NAIC # 19682 16988 34690 29459 29424 41262
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COVERAGES**CERTIFICATE NUMBER:** 21852220**REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC OTHER:	Y	Y	37CSEQU3414	2/28/2025	2/28/2026	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 10,000,000
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY	Y	Y	37CSEQU3415	2/28/2025	2/28/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX PHYS DMG DED \$ 250,000
B	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$	Y	Y	USXSL0136825	2/28/2025	2/28/2026	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$ XXXXXXXX
C D E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☒ N	Y N/A	37WNQU3411 (AOS) 37WBRQU3412 (WI) 37XWEQU3410	2/28/2025 2/28/2025 2/28/2025	2/28/2026 2/28/2026 2/28/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
F	LEASED/RENTED EQUIPMENT	N	N	QT6307W349628TLC25	2/28/2025	2/28/2026	LIMIT: \$5,000,000 DEDUCTIBLE: \$5,000

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

\$1,000,000 DEDUCTIBLE APPLIES TO ALL OTHER STATES AND WISCONSIN WORKERS COMPENSATION POLICIES. POLICY NUMBER: 37XWEQU3410 HAS A \$ 500,000 SIR FOR THE STATES OF CALIFORNIA, LOUISIANA AND TEXAS. RE: PROJECT: WATER TREATMENT PLANT AERATION PUMP STATION UPGRADES, 3441 HOLLYWOOD BOULEVARD, HOLLYWOOD, FLORIDA 33021.

SEE ATTACHED

CERTIFICATE HOLDER**CANCELLATION** See Attachments

21852220
CITY OF HOLLYWOOD
PUBLIC UTILITIES DEPARTMENT
1621 N 14TH AVE
HOLLYWOOD, FL 33020

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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CITY OF HOLLYWOOD IS ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY, AUTOMOBILE LIABILITY, EXCESS/UMBRELLA LIABILITY AND POLLUTION LIABILITY, AND THESE COVERAGES ARE PRIMARY AND NON-CONTRIBUTORY, IF REQUIRED BY WRITTEN CONTRACT. WAIVER OF SUBROGATION IN FAVOR OF THE ADDITIONAL INSURED APPLIES AS RESPECTS GENERAL LIABILITY, AUTOMOBILE LIABILITY, EXCESS/UMBRELLA LIABILITY, WORKERS COMPENSATION/EMPLOYER'S LIABILITY AND POLLUTION LIABILITY, IF REQUIRED BY WRITTEN CONTRACT AND WHERE ALLOWED BY LAW. COVERAGE IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY. FOR CANCELLATION FOR ANY REASON OTHER THAN NONPAYMENT OF PREMIUM, THE INSURER(S) WILL SEND 30 DAYS NOTICE OF CANCELLATION TO THE CERTIFICATE HOLDER.

POLLUTION LIABILITY:

AIG SPECIALTY INSURANCE COMPANY

POLICY NUMBER: CPO1238582

TERM: 02/28/24 – 02/28/26

COVERAGE A: \$25,000,000 EACH LOSS

COVERAGE B: \$25,000,000 EACH LOSS

\$500,000 DEDUCTIBLE EACH LOSS

PROFESSIONAL LIABILITY:

HARTFORD FIRE INSURANCE COMPANY

POLICY NUMBER: 13FPIGC4450

TERM: 10/01/24 – 02/28/26

\$15,000,000 EACH CLAIM/AGGREGATE

COVERAGE A: \$2,000,000 SIR EACH CLAIM, RETRO DATE 5/13/03

COVERAGE B: \$ 0 SIR EACH CLAIM, RETRO DATE 6/15/22

COVERAGE C: \$2,000,000 SIR EACH CLAIM, RETRO DATE 6/15/22

February 25, 2025

To Whom It May Concern,

The below links will provide you with the renewal certificate (s) for the referenced Lockton client. Once you click on the link, a PDF copy of the issued certificate will be provided.

Please reach out if you:

- Are unable to open the link
- Require revisions to the certificate
- No longer need this certificate

Thank you for your cooperation,

Regards,

Michelle Easley
measley@lockton.com

Lockton Companies

POLICY NUMBER: 37CSEQU3415

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NOTICE OF CANCELLATION
TO DESIGNATED CERTIFICATE HOLDER

Number of Days Notice:	SCHEDULE Name of Certificate Holder
Part A: <u>90</u>	BLANKET AS REQUIRED BY WRITTEN CONTRACT.
Part B: <u>10</u>	Mailing Address:
Part C: <u>90</u>	

This policy is subject to the following additional Conditions when a number of days are shown in the Schedule for any of the above Parts.

A. If this policy is cancelled by the Company, other than for nonpayment of premium, notice of such cancellation will be provided to the certificate holder in the Schedule, at least the number of days in advance of the cancellation effective date, as shown in Part A.

B. If this policy is cancelled by the Company for nonpayment of premium, notice of such cancellation will be provided to the certificate holder in the Schedule within the number of days notice of the cancellation effective date, as shown in Part B.

C. If this policy is cancelled by the insured, notice of such cancellation will be provided to the certificate holder in the Schedule, within the number of days notice of the cancellation effective date, as shown in Part C.

If notice is mailed, proof of mailing notice to the certificate holder's mailing address as shown in the Schedule will be sufficient proof of notice. If the number of days notice in the Schedule for any Part is left blank or is shown as zero, no notice will be provided to the Scheduled certificate holder under that Part.

Any notification rights provided by this endorsement apply only to active certificate holder(s) who were issued a certificate of insurance applicable to this policy's term.

POLICY NUMBER: 37CSEQU3415

**COMMERCIAL AUTOMOBILE
HA 99 16 12 21**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL AUTOMOBILE BROAD FORM ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

To the extent that the provisions of this endorsement provide broader benefits to the "insured" than other provisions of the Coverage Form, the provisions of this endorsement apply.

1. BROAD FORM INSURED

Paragraph .1. - WHO IS AN INSURED - of Section II - Liability Coverage is amended to add the following:

d. Subsidiaries and Newly Acquired or Formed Organizations

The Named Insured shown in the Declarations is amended to include:

1. Any legal business entity other than a partnership or joint venture, formed as a subsidiary in which you have an ownership interest of more than 50% on the effective date of the Coverage Form. However, the Named Insured does not include any subsidiary that is an "insured" under any other automobile policy or would be an "insured" under such a policy but for its termination or the exhaustion of its Limit of Insurance.
2. Any organization that is acquired or formed by you and over which you maintain majority ownership. However, the Named Insured does not include any newly formed or acquired organization:
 - a. That is a partnership or joint venture,
 - b. That is an "insured" under any other policy,
 - c. That has exhausted its Limit of Insurance under any other policy, or
 - d. 180 days or more after its acquisition or formation by you, unless you have given us notice of the acquisition or formation.Coverage does not apply to "bodily injury" or "property damage" that results from an "accident" that occurred before you formed or acquired the organization.

e. Employees as Insureds

- (1). Any "employee" of yours while using a covered "auto" you don't own, hire or borrow in your business or your personal affairs.

f. Lessors as Insureds

- (1). The lessor of a covered "auto" while the "auto" is leased to you under a written agreement if:

- a. The agreement requires you to provide direct primary insurance for the lessor and
- b. The "auto" is leased without a driver.

Such a leased "auto" will be considered a covered "auto" you own and not a covered "auto" you hire.

g. Additional Insured if Required by Contract

- (1) When you have agreed, in a written contract or written agreement, that a person or organization be added as an additional insured on your business auto policy, such person or organization is an "insured", but only to the extent such person or organization is liable for "bodily injury" or "property damage" caused by the conduct of an "insured" under paragraphs a. or b. of Who Is An Insured with regard to the ownership, maintenance or use of a covered "auto."

The insurance afforded to any such additional insured applies only if the "bodily injury" or "property damage" occurs:

- a. During the policy period, and
- b. Subsequent to the execution of such written contract, and

(c) Prior to the expiration of the period of time that the written contract requires such insurance be provided to the additional insured.

(2) How Limits Apply

If you have agreed in a written contract or written agreement that another person or organization be added as an additional insured on your policy, the most we will pay on behalf of such additional insured is the lesser of:

- a. The limits of insurance specified in the written contract or written agreement; or
- b. The Limits of Insurance shown in the Declarations.

Such amount shall be a part of and not in addition to Limits of Insurance shown in the Declarations and described in this Section.

(3) Additional Insureds Other Insurance

If we cover a claim or "suit" under this Coverage Part that may also be covered by other insurance available to an additional insured, such additional insured must submit such claim or "suit" to the other insurer for defense and indemnity.

However, this provision does not apply to the extent that you have agreed in a written contract or written agreement that this insurance is primary and non-contributory with the additional insured's own insurance.

(4) Duties in The Event Of Accident, Claim, Suit or Loss

If you have agreed in a written contract or written agreement that another person or organization be added as an additional insured on your policy, the additional insured shall be required to comply with the provisions in LOSS CONDITIONS 2. - DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS - OF SECTION IV BUSINESS AUTO CONDITIONS, in the same manner as the Named Insured.

2. Primary and Non-Contributory if Required by Contract

Only with respect to insurance provided to an additional insured in A.1.g. - Additional Insured If Required by Contract, the following provisions apply:

(1) Primary Insurance When Required By Contract

This insurance is primary if you have agreed in a written contract or written agreement that this insurance be primary. If other insurance is also primary, we will share with all that other insurance by the method described in Other Insurance 5.d.

(2) Primary And Non-Contributory To Other Insurance When Required By Contract

If you have agreed in a written contract or written agreement that this insurance is primary and non-contributory with the additional insured's own insurance, this insurance is primary and we will not seek contribution from that other insurance.

Paragraphs **(1)** and **(2)** do not apply to other insurance to which the additional insured has been added as an additional insured.

When this insurance is excess, we will have no duty to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:

1. The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
2. The total of all deductible and self-insured amounts under all that other insurance.

We will share the remaining loss, if any, by the method described in SECTION IV-Business Auto Conditions, B. General Conditions, Other Insurance 5.d.

3. AUTOS RENTED BY EMPLOYEES

Any "auto" hired or rented by your "employee" on your behalf and at your direction will be considered an "auto" you hire.

The SECTION IV- Business Auto Conditions, B. General Conditions, 5. OTHER INSURANCE Condition is amended by adding the following:

e. If an "employee's" personal insurance also applies on an excess basis to a covered "auto" hired or rented by your "employee" on your behalf and at your direction, this insurance will be primary to the "employee's" personal insurance.

4. AMENDED FELLOW EMPLOYEE EXCLUSION

EXCLUSION 5. - FELLOW EMPLOYEE - of SECTION II - LIABILITY COVERAGE does not apply if you have workers' compensation insurance in-force covering all of your "employees".

Coverage is excess over any other collectible insurance.

5. HIRED AUTO PHYSICAL DAMAGE COVERAGE

If hired "autos" are covered "autos" for Liability Coverage and if Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form for any "auto" you own, then the Physical Damage Coverages provided are extended to "autos" you hire or borrow, subject to the following limit.

The most we will pay for "loss" to any hired "auto" is:

1. \$100,000;
2. The actual cash value of the damaged or stolen property at the time of the "loss"; or
3. The cost of repairing or replacing the damaged or stolen property,

whichever is smallest, minus a deductible. The deductible will be equal to the largest deductible applicable to any owned "auto" for that coverage. No deductible applies to "loss" caused by fire or lightning. Hired Auto Physical Damage coverage is excess over any other collectible insurance. Subject to the above limit, deductible and excess provisions, we will provide coverage equal to the broadest coverage applicable to any covered "auto" you own.

We will also cover loss of use of the hired "auto" if it results from an "accident", you are legally liable and the lessor incurs an actual financial loss, subject to a maximum of \$1000 per "accident".

This extension of coverage does not apply to any "auto" you hire or borrow from any of your "employees", partners (if you are a partnership), members (if you are a limited liability company), or members of their households.

6. PHYSICAL DAMAGE - ADDITIONAL TEMPORARY TRANSPORTATION EXPENSE COVERAGE

Paragraph A.4.a. of SECTION III - PHYSICAL DAMAGE COVERAGE is amended to provide a limit of \$50 per day and a maximum limit of \$1,000.

7. LOAN/LEASE GAP COVERAGE

Under SECTION III - PHYSICAL DAMAGE COVERAGE, in the event of a total "loss" to a

obligation for any difference between the actual cash value of the "auto" at the time of the "loss" and the "outstanding balance" of the loan/lease.

"Outstanding balance" means the amount you owe on the loan/lease at the time of "loss" less any amounts representing taxes; overdue payments; penalties, interest or charges resulting from overdue payments; additional mileage charges; excess wear and tear charges; lease termination fees; security deposits not returned by the lessor; costs for extended warranties, credit life Insurance, health, accident or disability insurance purchased with the loan or lease; and carry-over balances from previous loans or leases.

8. AIRBAG COVERAGE

Under Paragraph B. EXCLUSIONS - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

The exclusion relating to mechanical breakdown does not apply to the accidental discharge of an airbag.

9. ELECTRONIC EQUIPMENT - BROADENED COVERAGE

a. The exceptions to Paragraphs B.4 EXCLUSIONS - of SECTION III - PHYSICAL DAMAGE COVERAGE are replaced by the following:

Exclusions **4.c.** and **4.d.** do not apply to equipment designed to be operated solely by use of the power from the "auto's" electrical system that, at the time of "loss", is:

1. Permanently installed in or upon the covered "auto";
2. Removable from a housing unit which is permanently installed in or upon the covered "auto";
3. An integral part of the same unit housing any electronic equipment described in Paragraphs (1) and (2) above; or
4. Necessary for the normal operation of the covered "auto" or the monitoring of the covered "auto's" operating system.

b. Section III, Physical Damage Coverage, Limit of Insurance, Paragraph C.2. is amended to add the following:

\$1,500 is the most we will pay for "loss" in any one "accident" to all electronic equipment (other than equipment designed solely for the reproduction of sound, and accessories used with such equipment) that reproduces, receives or transmits audio, visual or data signals which, at the time of "loss", is:

covered "auto", we will pay your additional legal

1. Permanently installed in or upon the covered "auto" in a housing, opening or other location that is not normally used by the "auto" manufacturer for the installation of such equipment;
2. Removable from a permanently installed housing unit as described in Paragraph 2.a. above or is an integral part of that equipment; or
3. An integral part of such equipment.

c. For each covered "auto", should loss be limited to electronic equipment only, our obligation to pay for, repair, return or replace damaged or stolen electronic equipment will be reduced by the applicable deductible shown in the Declarations, or \$250, whichever deductible is less.

10. EXTRA EXPENSE - BROADENED COVERAGE

Under Paragraph A. - COVERAGE - of SECTION III - PHYSICAL DAMAGE COVERAGE, we will pay for the expense of returning a stolen covered "auto" to you.

11. GLASS REPAIR - WAIVER OF DEDUCTIBLE

Under Paragraph D. - DEDUCTIBLE - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

No deductible applies to glass damage if the glass is repaired rather than replaced.

12. TWO OR MORE DEDUCTIBLES

Under Paragraph D. - DEDUCTIBLE - of SECTION III - PHYSICAL DAMAGE COVERAGE, the following is added:

If another Hartford Financial Services Group, Inc. company policy or coverage form that is not an automobile policy or coverage form applies to the same "accident", the following applies:

1. If the deductible under this Business Auto Coverage Form is the smaller (or smallest) deductible, it will be waived;
2. If the deductible under this Business Auto Coverage Form is not the smaller (or smallest) deductible, it will be reduced by the amount of the smaller (or smallest) deductible.

13. AMENDED DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS

The requirement in LOSS CONDITIONS 2.a. - DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS - of SECTION IV BUSINESS AUTO CONDITIONS that you must notify us of an "accident" applies only when the "accident" is known to:

1. A partner, if you are a partnership;
2. A member, if you are a limited liability company; or
3. An executive officer or insurance manager, if you are a corporation.

14. UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

If you unintentionally fail to disclose any hazards existing at the inception date of your policy, we will not deny coverage under this Coverage Form because of such failure.

15. HIRED AUTO - COVERAGE TERRITORY

SECTION IV, BUSINESS AUTO CONDITIONS, PARAGRAPH B. GENERAL CONDITIONS, 7. - POLICY PERIOD, COVERAGE TERRITORY is added to include the following:

(6) For short-term hired "autos", the coverage territory with respect to Liability Coverage is anywhere in the world provided that if the "insured's" responsibility to pay damages for "bodily injury" or "property damage" is determined in a "suit," the "suit" is brought in the United States of America, the territories and possessions of the United States of America, Puerto Rico or Canada or in a settlement we agree to.

16. WAIVER OF SUBROGATION

Paragraph 5. TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US - of SECTION IV - BUSINESS AUTO CONDITIONS A. Loss Conditions is amended by adding the following:

We waive any right of recovery we may have against any person or organization with whom you have a written contract that requires such waiver because of payments we make for damages under this Coverage Form.

17. RESULTANT MENTAL ANGUISH COVERAGE

The definition of "bodily injury" in SECTION V-DEFINITIONS, C. is replaced by the following:

"Bodily injury" means bodily injury, sickness or disease sustained by any person, including mental anguish or death resulting from any of these.

18. EXTENDED CANCELLATION CONDITION

Paragraph 2. of the COMMON POLICY CONDITIONS - CANCELLATION - applies except as follows:

If we cancel for any reason other than nonpayment of premium, we will mail or deliver to the first Named Insured written notice of cancellation at least 60 days before the effective date of cancellation.

(1) You, if you are an individual;

19. HYBRID, ELECTRIC, OR NATURAL GAS VEHICLE PAYMENT COVERAGE

In the event of a total loss to a "non-hybrid" auto for which Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form, then such Physical Damage Coverages are amended as follows:

- a. If the auto is replaced with a "hybrid" auto or an auto powered solely by electricity or natural gas, we will pay an additional 10%, to a maximum of \$2,500, of the "non-hybrid" auto's actual cash value or replacement cost, whichever is less,
- b. The auto must be replaced and a copy of a bill of sale or new lease agreement received by us within 60 calendar days of the date of "loss,"
- c. Regardless of the number of autos deemed a total loss, the most we will pay under this Hybrid, Electric, or Natural Gas Vehicle Payment Coverage provision for any one "loss" is \$10,000.

For the purposes of the coverage provision,

a. A "non-hybrid" auto is defined as an auto that uses only an internal combustion engine to move the auto but does not include autos powered solely by electricity or natural gas.

b. A "hybrid" auto is defined as an auto with an internal combustion engine and one or more electric motors; and that uses the internal combustion engine and one or more electric motors to move the auto, or the internal combustion engine to charge one or more electric motors, which move the auto.

20. VEHICLE WRAP COVERAGE

In the event of a total loss to an "auto" for which Comprehensive, Specified Causes of Loss, or Collision coverages are provided under this Coverage Form, then such Physical Damage Coverages are amended to add the following:

In addition to the actual cash value of the "auto", we will pay up to \$1,000 for vinyl vehicle wraps which are displayed on the covered "auto" at the time of total loss. Regardless of the number of autos deemed a total loss, the most we will pay under this Vehicle Wrap Coverage provision for any one "loss" is \$5,000. For purposes of this coverage provision, signs or other graphics painted or magnetically affixed to the vehicle are not considered vehicle wraps.

POLICY NUMBER: 37CSEQU3415

COMMERCIAL AUTO
CA 04 50 11 16

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY - OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

GARAGE COVERAGE FORM

MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

The following is added to the **Other Insurance** Condition in the Business Auto and Garage Coverage Forms and the **Other Insurance - Primary And Excess Insurance Provisions** in the Motor Carrier Coverage Form and supersedes any provision to the contrary:

This Coverage Form's Liability Coverage is primary to and will not seek contribution from any other insurance available to an insured under your policy provided that:

1. Such "insured" is a Named Insured under such other insurance; and

2. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to such "insured".

POLICY NUMBER: 37CSEQU3415

**COMMERCIAL AUTO
CA 04 44 10 13**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: PRIMORIS SERVICES CORPORATION

Endorsement Effective Date: 02/28/2025

SCHEDULE

Name(s) Of Person(s) Or Organization(s):

AS REQUIRED BY WRITTEN CONTRACT

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

The **Transfer Of Rights Of Recovery Against Others To Us** condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

POLICY NUMBER: 37CSEQU3414

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

EARLIER NOTICE OF CANCELLATION OR NONRENEWAL PROVIDED BY US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
EDUCATORS LEGAL LIABILITY COVERAGE PART (CLAIMS MADE)
LIQUOR LIABILITY COVERAGE PART
MANUFACTURERS' ERRORS AND OMISSIONS LIABILITY COVERAGE PART
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART
PRINTERS ERRORS AND OMISSIONS LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
PRODUCT WITHDRAWAL COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART

SCHEDULE

Number of Days' Notice

Cancellation: 90

Nonrenewal: 90

(If no entry is shown in the Schedule above for either Cancellation or Nonrenewal, the number of days notice for that condition is not amended by this endorsement)

For any statutorily permitted reason other than nonpayment of premium, the number of days required for notice of cancellation or nonrenewal, as provided in:

1. Paragraph **A.2.** of the **Cancellation** Common Policy Condition;
2. The Coverage Part; or
3. An applicable state cancellation or nonrenewal endorsement,
whichever may apply, is increased to the number of days shown in the Schedule above.

In no event, however, will notice of cancellation or nonrenewal be less than the minimum number of days required, if any, of the state shown as the first Named Insured's mailing address shown in the Declarations.

POLICY NUMBER: 37CSEQU3414

**COMMERCIAL GENERAL LIABILITY
CG 24 04 12 19**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):

BLANKET AS REQUIRED BY WRITTEN CONTRACT

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

Rights Of Recovery Against Others To Us of Section IV — Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CONTRACTORS BROAD FORM ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

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1. ALIENATED PREMISES COVERAGE

Exclusion j. Damage To Property of Section I Coverage A is amended as follows:

- a. The following exception to the exclusion is deleted:

Paragraph (2) of this exclusion does not apply if the premises are "your work" and were never occupied, rented or held for rental by you,

- b. This exception is replaced by the following:

Paragraph (2) of this exclusion does not apply if the premises are "your work".

2. DAMAGE TO YOUR WORK

A. Section I - Coverage A - Bodily Injury And Property Damage Liability, Paragraph 1. Insuring Agreement is amended to add the following:

- f. Damages because of "property damage" include damages the insured becomes legally obligated to pay because of ipr-o-pert-y damage to- 'lyour work'" or caused by "your work", and such "property damage" shall be deemed to be caused by an "occurrence", if not intended or expected from the standpoint

of the insured , regardless of whether the "property damage" arises from breach of contract.

B. Exclusion I. Damage To Your Work of Section I - Coverage A is replaced by the following:

I. Damage to Your Work

"Property damage" to that particular part of "your work" that must be restored, repaired or replaced because "your work" was incorrectly performed and included in the "products-completed operations hazard".

This exclusion does not apply if the damaged work or the work performed incorrectly was performed on your behalf by a subcontractor,

This Paragraph 2.B. does not apply if **Exclusion I. Damage To Your Work** has been otherwise modified by endorsement.

3. THAT PARTICULAR PART

This Paragraph 3. applies to **Exclusion j. amage WProperty**, subparagraphs (5), and (6), **Exclusion k. Damage to Your Product**, and **Exclusion I. Damage to Your Work**

When performing operations as a "general contractor", the term that particular part shall not mean the entire construction, improvement or renovation project. For purposes of this provision, the term "general contractor" means the contractor signing the prime construction contract for a construction, erection, improvement or renovation project and that has main responsibility for such project including hiring all of the subcontractors and suppliers.

4 CONTRACTORS LIMITED PROFESSIONAL LIABILITY

The following exclusion is added to Paragraph 2., **Exclusions of Section I - Coverage A - Bodily Injury And Property Damage Liability**, and to Paragraph 2., **Exclusions of Section I - Coverage B - Personal And Advertising Injury Liability**:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of or failure to render any professional services by you with respect to your providing engineering, architectural or surveying services in your capacity as an engineer, architect or surveyor.

Professional services include:

1. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders, or drawings and specifications; and
2. Supervisory or inspection activities performed as a part of any related architectural or engineering activities

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or failure to render any professional services by you with respect to your providing engineering, architectural or surveying services in your capacity as an engineer, architect or surveyor,

This exclusion does not apply to your operations in connection with construction work performed by you or on your behalf,

However, this exception to the exclusion will not apply if you are in the business or profession of providing the professional services described above independent from the construction work performed by you or on your behalf,

In the event this insurance applies to any injury, damage, loss, cost or expense covered by Professional Liability insurance issued by a company unaffiliated with us, then the insurance

afforded under this Coverage Part is excess over such other valid and collectible Professional Liability insurance (including any deductible or self-insured retention portion thereof), and any other valid and collectible insurance available to the insured whether primary, excess, contingent or on any other basis.

5 PER PROJECT AND PER LOCATION GENERAL AGGREGATE LIMITS OF INSURANCE

A For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under **Section I - Coverage A**, and for all medical expenses caused by accidents under **Section I - Coverage C**, which can be attributed only to ongoing operations at a single "project" or a single "location";

1 A separate Per Project General Aggregate Limit or a separate Per Location General Aggregate Limit applies to each "project" or "location", whichever is applicable. The Per Project General Aggregate Limit and Per Location Aggregate Limit is equal to the amount of the General Aggregate Limit shown in the Declarations.

2- The Per Project General Aggregate Limit or the Per Location General Aggregate Limit, whichever applies, is the most we will pay for the sum of all damages under **Coverage A**, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard", and for medical expenses under **Coverage C** regardless of the number of;

a- Insureds;

b Claims made or "suits" brought; or

c Persons or organizations making claims or bringing "suits".

3 Any payments made under **Coverage A** for damages or under **Coverage C** for medical expenses shall reduce the Per Project General Aggregate Limit for that "project" or the Per Location General Aggregate for that "location", whichever applies. Such payments shall not reduce the General Aggregate Limit shown in the

Declarations, the Per Project General Aggregate Limit for any other "project", or the Per Location General Aggregate Limit for any other "location".

4 The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expense continue to apply. However, instead of

being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Per Project General Aggregate Limit if attributable only to ongoing operations at a single "project" or the Per Location General Aggregate if attributable only to ongoing operations at a single "location".

B For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under **Section I - Coverage A** and for all medical expenses caused by accidents under **Section I - Coverage C** which cannot be attributed only to ongoing operations at a single "project" or a single "location";

1. Any payments made under **Coverage A** for damages or under **Coverage C** for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products-Completed Operations Aggregate Limit, whichever is applicable; and

2 Such payments shall not reduce any Per Project General Aggregate Limit or any Per Location General Aggregate Limit.

C When coverage for liability arising out of the "products-completed operations hazard" is provided, any payments for damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard" will reduce the Products-Completed Operations Aggregate Limit, and not reduce the General Aggregate Limit, or any Per Project General Aggregate Limit or any Per Location General Aggregate Limit

D The provisions of **Section III - Limits Of Insurance** not otherwise modified by this endorsement shall continue to apply as stipulated.

E For the purposes of Paragraph **5-**, the following definitions apply:

"Project" means a premises an insured does not own or rent and where such insured performs construction-related operations. Each "project" involving the same or connecting lots, or premises whose connection is separated by a street, roadway, waterway, railroad or right-of-way shall be considered a single "project".

1 If a "project" has been abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the "project" shall be considered a single "project". "Project" does not include a premises that is a "location".

2 "Location" means a premises an insured owns or rents and where such insured performs business operations other than construction-related operations. Each "location" involving the same or connecting lots, or premises whose connection is separated by a street, roadway, waterway or right-of-way railroad shall be considered a single "location," "Location" does not include a premises that is a "project".

This provision does not apply if the Per Project and the Per Location General Aggregate Limit has been otherwise modified by endorsement

6 MEDICAL PAYMENTS COVERAGE - INCLUDING PRODUCTS-COMPLETED OPERATIONS

Paragraph **1.a.** of the **Insuring Agreement - Coverage C** is replaced by the following:

1. Insuring Agreement

a. We will pay medical expenses as described below for "bodily injury" caused by an accident:

1. On premises you own or rent;
2. On ways next to premises you own or rent;
3. Because of your operations; or
4. Included within the definition of the "products-completed operations hazard;"

provided that:

1. The accident takes place in the "coverage territory" and during the policy period;
2. The expenses are incurred and reported to us within three years of the date of the accident; and
3. The injured person submits to examination, at our expense, by physicians of our choice as often as we reasonably require.

7. INJURY TO EMPLOYEE'S REPUTATION WITH RESPECT TO INCIDENTAL MEDICAL MALPRACTICE

A. The following is added to Paragraph **1.e** of the **Insuring Agreement - Coverage A**:

(3) With respect to incidental medical malpractice, "bodily injury" includes damages claimed for injury to emotions or reputation of an "employee" arising out of the rendering or failure to render professional health care services as a physician, dentist, nurse, emergency medical technician or paramedic services

B The following exclusion is added to Coverage **B**
- Personal and Advertising Injury:

"Personal and advertising injury arising out of the rendering or failure to render professional health care services as a physician, dentist, nurse, emergency medical technician or paramedic

8. BODILY INJURY EMPLOYEE SUITS

A. "Bodily injury" as listed in Paragraph **2 a (1)** of **Section II - Who Is An Insured**, does not apply to **2.a.(1)(a)** through **2.a.(1)(c)**.

B. Part **a.** of Paragraph **4. Nonowned Watercraft** in **Section II - Who Is An Insured** does not apply.

**9 CONSOLIDATED INSURANCE
(WRAP-LJP)-PROGRAMS**

The following exclusion is added to **Section I Coverage A:**

This insurance does not apply to any "bodily injury" or "property damage" arising out of any "wrap project or premises" where an insured under this policy is or was also an insured under one or more commercial general liability (CGL) policies (including any umbrella or excess policies that include the commercial general liability policy(ies) as underlying insurance) included within a "consolidated insurance (wrap-up) program." This exclusion applies even if the limits of insurance for such "consolidated insurance (wrap-up) program" are exhausted or not collected for any reason, including bankruptcy or insolvency of the insurer providing coverage for the "consolidated insurance (wrap-up) program". This exclusion also applies if the CGL coverage afforded under the "consolidated insurance (wrap-up) program" is narrower in scope than the coverage provided by this policy.

This exclusion does not apply to:

A. Products-Completed Operations Hazard Exception

"Bodily injury" or "property damage" arising out of an "insured-s operations" at or in connection with a "wrap project or premises" when such "bodily injury" or "property damage" commences after the "products-completed operations hazard" coverage or any completed operations extension coverage provided by the applicable "consolidated insurance (wrap-up) program" has ended or is no longer in effect.

B. Off-Site Location Exception

"Bodily injury" or "property damage" resulting from an "insured-s operations" at or in connection with a "wrap project or premises" at a location to which the applicable "consolidated insurance (wrap-up) program" does not apply,

C. Repair Work And Punch List Work Exception

"Bodily injury" or "property damage" resulting from "repair work" or "punch list work" at a "wrap project or premises" but only when the applicable "consolidated insurance (wrap-up) program" does not apply or no longer applies to such "repair work" or "punch list work".

This exception does not apply to the cost of performing such "repair work" or "punch list work", or to the "repair work" or "punch list work" itself.

A. Additional Insured Extension

"Bodily injury" or "property damage" for which you are solely an additional insured under the "consolidated insurance (wrap-up) program".

The coverage provided under Paragraphs **9.A** through **9.D.** above is subject to all terms, conditions and exclusions of this policy,

For purposes of Paragraph **9**, the following definitions apply:

"Consolidated insurance (wrap-up) program" means any agreement or arrangement, including any contractor-controlled, owner-controlled, project-specific or similar insurance program under which one or more contractor(s) working on a specified project are insured under one or more commercial general liability (CGL) policies (including any umbrella or excess policies that include the commercial general liability policy(ies) as underlying insurance) issued by a specified carrier for injury or damage arising out of operations conducted in connection with or necessary or incidental to the project

"Insureds operations" means all operations performed by a named insured (and not sub-contracted or performed by others on the insureds behalf).

"Punch list work" means the "insureds operations" at or in connection with a "wrap project or premises" in order to complete the work called for in an insureds contract for the "wrap project or premises".

"Repair work" means the "insureds operations" that are service, maintenance, correction, repair, replacement work, or periodic inspection performed by an insured at or in connection with a "wrap project or premises", in order to replace or repair an insureds completed work

"Wrap project or premises" means any premises or construction, erection, improvement or renovation project subject to a "consolidated insurance (wrap-up) program".

**10 ACCESS OR DISCLOSURE OF CONFIDENTIAL
OR PERSONAL INFORMATION AND
DATA-RELATED LIABILITY**

A Exclusion p. of Section I - Coverage A Bodily Injury And Property Damage Liability is replaced by the following:

p. Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability

Damages arising out of:

1. Any access to or disclosure of any persons or organizations confidential or personal information, including patents, trade secrets, processing methods, customer lists, financial information, credit card information, health information or any other type of nonpublic information; or
2. the loss of, loss of use of, damage to, corruption of, inability to access, or inability to manipulate "electronic data" that does not result from physical injury to tangible property.

This exclusion applies even if damages are claimed for notification costs, credit monitoring expenses, forensic expenses, public relations expenses or any other loss, cost or expense incurred by you or others arising out of that which is described in Paragraph **(1)** or **(2)** above.

However, unless Paragraph **(1)** above applies, this exclusion does not apply to liability for damages because of "bodily injury".

B. Exclusion w. of Section 1 - Coverage B Personal and Advertising Injury is replaced by the following: :

w. Access Or Disclosure Of Confidential Or Personal Information

"Personal and advertising injury" arising out of any access to or disclosure of any persons or organizations confidential or personal information, including patents, trade secrets, processing methods, customer lists, financial information, credit card information, health information or any other type of nonpublic information

This exclusion applies even if damages are claimed for notification costs, credit monitoring expenses, forensic expenses, public relations expenses or any other loss, cost or expense incurred by you or others arising out of any access to or disclosure of any persons or organizations confidential or personal information

C. The following Paragraph is added to Section III - Limits Of Insurance:

Subject to Paragraph **5. Each Occurrence Limit**, the most we will pay under **Coverage A** for "property damage" because of all loss of "electronic data" arising out of any one "occurrence" is \$100,000, unless modified by endorsement

D. The following definition is added to Section V Definitions:

"Electronic data" means information, facts or programs:

a= Stored as or on;

- a. Created or used on; or
 - b. Transmitted to or from;
computer software, (including systems and applications software) hard or floppy disks, CD-ROMS, tapes, drives, cells, data processing devices or any other media which are used with electronically controlled equipment.
 - E. For the purposes of the coverage provided by this provision, the definition of "property damage" in Section V - Definitions is replaced by the following:**
"Property damage" means:
 - a. Physical injury to tangible property, including all resulting loss of use of that property, All such loss of use shall be deemed to occur at the time of the physical injury that caused it;
 - b. Loss of use of tangible property that is not physically injured. All such loss of use shall be deemed to occur at the time of the "occurrence" that caused it; or
 - c. Loss of, loss of use of, damage to, corruption of, inability to access, or inability to properly manipulate "electronic data", resulting from physical injury to tangible property, All such loss of "electronic data" shall be deemed to occur at the time of the "occurrence" that caused it.
- For the purposes of this insurance, "electronic data" is not tangible property,

11. SUPPLEMENTARY PAYMENTS

In the **Supplementary Payments - Coverages A and B** provision:

The limit for the cost of bail bonds is increased to \$2,500.

12 TWO OR MORE COVERAGE PARTS OR POLICIES ISSUED BY US

If this policy and any other policy issued to an insured by us or any affiliated company provides coverage that applies to the same claim or damages, the maximum applicable limit(s) of liability or limit of insurance under all the policies will not exceed the highest applicable limit of liability or limit of insurance under any one policy. This condition does not apply to any policy issued by us or an affiliated company specifically written to apply as excess insurance over this policy.

13. NOTICE OF CANCELLATION TO CERTIFICATE HOLDER(S)

This policy is subject to the following additional Conditions:

A If this policy is cancelled by the Company, other than for nonpayment of premium, notice of such cancellation will be provided at least thirty (30) days in advance of the cancellation effective date to the certificate holder(s) with mailing addresses on file with the agent of record or the Company.

B. If this policy is cancelled by the Company for nonpayment of premium, or by the insured, notice of such cancellation will be provided within (10) days of the cancellation effective date to the certificate holder(s) with mailing addresses on file with the agent of record or the Company,

If notice is mailed, proof of mailing to the last known mailing address of the certificate holder(s) on file with the agent of record or the Company will be sufficient proof of notice.

Any notification rights provided by this endorsement apply only to active certificate holder(s) who were issued a certificate of insurance applicable to this policy's term

Failure to provide such notice to the certificate holder(s) will not amend or extend the date the cancellation becomes effective, nor will it negate cancellation of the policy. Failure to send notice shall impose no liability of any kind upon the Company or its agents or representatives.

14 CONTRACTUAL LIABILITY COVERAGE FOR PERSONAL AND ADVERTISING INJURY

Exclusion e of SECTION I - COVERAGE B PERSONAL AND ADVERTISING INJURY LIABILITY is replaced by the following:

This insurance does not apply to:

e Contractual Liability

"Personal and advertising injury" for which the insured has assumed liability in a contract or agreement This exclusion does not apply to liability for damages:

- (1)** That the insured would have in the absence of the contract or agreement; or

(2) Assumed in a contract or agreement that is an "insured contract", provided the "personal and advertising injury" occurs subsequent to the execution of the contract or agreement Solely for the purposes of liability assumed in an "insured contract", reasonable attorney fees and necessary litigation expenses incurred by or for a party other than an insured are deemed to be damages because of "personal and advertising injury", provided:

- a. Liability to such party for, or for the cost of, that party's defense has also been assumed in the same "insured contract"; and
- b. Such attorney fees and litigation expenses are for defense of that party against a civil or alternative dispute resolution proceeding in which damages to which this insurance applies are alleged.

15 INSURED CONTRACT DEFINITION

a INSURED CONTRACT-CONSTRUCTION OPERATIONS AND MUNICIPAL WORK

Paragraph d, of the definition of "insured contract" in **Section V - Definitions** is deleted and replaced by the following:

An obligation, as required by ordinance, to indemnify a municipality,

b. CONTRACTUAL LIABILITY

Paragraph **f** of the definition of "insured contract" is deleted and replaced by the following:

That part of any other contract or agreement pertaining to your business (including an indemnification of a municipality in connection with work performed for a municipality) under which you assume the tort liability of another party to pay for "bodily injury", "property damage", or "personal and advertising injury" to a third person or organization Tort liability means a liability that would be imposed by law in the absence of any contract or agreement

Paragraph **f** includes that part of any contract or agreement that indemnifies a railroad for "bodily injury", "property damage", or "personal and advertising injury" arising out of construction or demolition operations, within 50 feet of any railroad property and affecting any railroad bridge or trestle, tracks, roadbeds, tunnel, underpass or crossing.

However, Paragraph **f** does not include that part of any contract or agreement:

- (1)** That indemnifies an architect, engineer or surveyor for injury or damage arising out of:

- a. Preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- B. Giving directions or instructions, or failing to give them, if that is the primary cause of the injury or damage; or

(2) Under which the insured, if an architect, engineer or surveyor, assumes liability for an injury or damage arising out of the insureds rendering or failure to render professional services, including those listed in **(1)** above and supervisory, inspection, architectural or engineering activities.

All other terms and conditions in the policy remain unchanged.

Policy Number: 37CSEQU3414

**COMMERCIAL GENERAL LIABILITY
CG 20 01 12 19**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY - OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

POLICY NUMBER: 37CSEQU3414

**COMMERCIAL GENERAL LIABILITY
CG 20 10 07 04**

**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)
Organization(s):**

**Location And Description Of Completed Or
Operations**

ANY OWNER, LESSEE, OR CONTRACTOR FOR WHOM
YOU HAVE AGREED IN WRITING PRIOR TO A LOSS TO
PROVIDE LIABILITY INSURANCE.

Information required to complete this Schedule, if not

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.

ALL LOCATIONS AS REQUIRED BY A WRITTEN
CONTRACT OR AGREEMENT ENTERED INTO PRIOR
TO AN OCCURRENCE OR OFFENSE

shown above, will be shown in the Declarations.

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 part of the
same project.

POLICY NUMBER: 37CSEQU3414

**COMMERCIAL GENERAL LIABILITY
CG 20 37 07 04**

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

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following;
COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

**Name Of Additional Insured Person(s)
Organization(s):**

ANY OWNER, LESSEE, OR CONTRACTOR FOR
WHOM YOU HAVE AGREED IN WRITING
PRIOR TO A LOSS TO PROVIDE LIABILITY
INSURANCE.

**Location And Description Of Completed Or
Operations**

ALL LOCATIONS AS REQUIRED BY A WRITTEN
CONTRACT OR AGREEMENT ENTERED INTO
PRIOR TO AN OCCURANCE OR OFFENSE.

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

**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" or
"property damage" caused, in whole or
in part, by "your work" at the location
designated and described in the
schedule of this endorsement performed
for that additional insured and included
in the "products-completed operations
hazard".**

Policy Number: 37CSEQU3414

**COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED 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)

ANY OWNER, LESSEE, OR CONTRACTOR FOR WHOM YOU HAVE AGREED IN WRITING PRIOR TO A LOSS TO PROVIDE LIABILITY INSURANCE.

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

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 your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF OUR RIGHT TO RECOVER
FROM OTHERS ENDORSEMENT**

Policy Number: 37 WN QU3411

Endorsement Number: 69

Effective Date: 02/28/2025

Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address: PRIMORIS SERVICES CORPORATION
26000 COMMERCENTRE DR
LAKE FOREST, CA 92630

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule.

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

SCHEDULE
BLANKET AS REQUIRED BY WRITTEN CONTRACT

Countersigned by _____
Authorized Representative

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NOTICE OF CANCELLATION TO DESIGNATED CERTIFICATE HOLDER

Policy Number: 37WBRQU3412 (WI)

Endorsement Number: 161

Effective Date: 2/28/2025 Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address: PRIMORIS SERVICES CORPORATION
26000 COMMERCENTRE DR
LAKE FOREST, CA 92630

This policy is subject to the following additional Conditions when a number of days are shown in the schedule for any of the below Parts:

A. If this policy is cancelled by the Company, other than for non-payment of premium, notice of such cancellation will be provided to the certificate holder in the schedule, at least the number of days in advance of the cancellation effective date, as shown in Part A.

B. If this policy is cancelled by the Company for non-payment of premium, notice of such cancellation will be provided to the certificate holder in the schedule within the number of days notice of the cancellation effective date, as shown in Part B.

C. If this policy is cancelled by the insured, notice of such cancellation will be provided to the certificate holder in the schedule, within the

number of days notice of the cancellation effective date, as shown in Part C.

If notice is mailed, proof of mailing notice to the certificate holder's mailing address as shown in the schedule will be sufficient proof of notice. If the number of days notice in the schedule for any Part is left blank or is shown as zero, no notice will be provided to the scheduled certificate holder under that Part. Any notification rights provided by this endorsement apply only to active certificate holder(s) who were issued a certificate of insurance applicable to this policy's term.

Failure to provide such notice to the certificate holder(s) will not amend or extend the date the cancellation becomes effective, nor will it negate cancellation of the policy. Failure to send notice shall impose no liability of any kind upon the company or its agents or representative.

Schedule

Number of Days Notice:

Name and Mailing Address of Certificate Holder

Part A: 90

Part B: 10

Part C: 90

BLANKET AS REQUIRED BY WRITTEN CONTRACT

Form WC 99 05 28 Printed in U.S.A.
Process Date:

Policy Expiration Date:

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF OUR RIGHT TO RECOVER
FROM OTHERS ENDORSEMENT**

Policy Number: 37XWEQU3410

Endorsement Number: 29

Effective Date: 2/28/2025 Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address: PRIMORIS SERVICES CORPORATION
26000 COMMERCE CENTRE DR
LAKE FOREST, CA 92630

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule.

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

SCHEDULE

ANY PERSON OR ORGANIZATION FROM WHOM YOU ARE REQUIRED BY CONTRACT OR AGREEMENT TO OBTAIN THIS WAIVER FROM US.

ENDORSEMENT IS NOT APPLICABLE IN KY, NH, NJ OR ANY MO CONSTRUCTION RISK.

Countersigned By: _____
Authorized Representative

Form WC 00 03 13 Printed in U.S.A.

Process Date:

Policy Expiration Date:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NOTICE OF CANCELLATION OR NONRENEWAL TO DESIGNATED

CERTIFICATE HOLDER

Policy Number: 37WNQU3411 (AOS) **Endorsement Number:** 30
Effective Date: 2/28/2025 Effective hour is the same as stated on the Information Page of the policy.
Named Insured and Address: PRIMORIS SERVICES CORPORATION
26000 COMMERCENTRE DR
LAKE FOREST, CA 92630

This policy is subject to the following additional Conditions when a number of days are shown in the schedule for any of the below Parts:

A. If this policy is cancelled by the Company, other than for non-payment of premium, notice of such cancellation will be provided to the certificate holder in the schedule, at least the number of days in advance of the cancellation effective date, as shown in Part A.

B. If this policy is cancelled by the Company for non-payment of premium, notice of such cancellation will be provided to the certificate holder in the schedule within the number of days notice of the cancellation effective date, as shown in Part B.

C. If this policy is cancelled by the insured, notice of such cancellation will be provided to the certificate holder in the schedule, within the

number of days notice of the cancellation effective date, as shown in Part C.

D. If this policy is nonrenewed by the Company, notice of such nonrenewal will be provided to the certificate holder in the schedule, at least the number of days in advance of the nonrenewal effective date as shown in Part D.

If notice is mailed, proof of mailing notice to the certificate holder's mailing address as shown in the schedule will be sufficient proof of notice. If the number of days notice in the schedule for any Part is left blank or is shown as zero, no notice will be provided to the scheduled certificate holder under that Part. Any notification rights provided by this endorsement apply only to active certificate holder(s) who were issued a certificate of insurance applicable to this policy's term. Failure to provide such notice to the certificate holder(s) will not amend or extend the date the cancellation becomes effective, nor will it negate cancellation of the policy. Failure to send notice shall impose no liability of any kind upon the company or its agents or representative.

Number of Days Notice:

Part A: 90
Part B: 10
Part C: 90

Schedule
Name and Mailing Address of Certificate Holder

BLANKET AS REQUIRED BY WRITTEN CONTRACT

Form WC 99 05 29 Printed in U.S.A.
Process Date:

© 2011, The Hartford

Policy Expiration Date:

NON-CONTRIBUTORY ENDORSEMENT

This endorsement modifies insurance provided under the following:

Commercial Excess Liability

Schedule
Name of Additional Insured Person(s) or Organization(s): Any person or organization when you have executed a written contract or other written agreement, prior to an "occurrence" that causes "bodily injury," "property damage," or "personal and advertising injury," and that contract or agreement stated, at the time of execution, that such person or organization would be added as an additional insured on your policy.

Paragraph 8. of **Section III – Conditions** is replaced by the following:

8. Other Insurance

a. This insurance is excess over, and shall not contribute with other insurance, whether primary, excess, contingent or on any other basis. However:

1. This condition will not apply to other insurance specifically written as excess over this Coverage Part.
2. This policy will not seek contribution from any other Commercial General Liability insurance, Commercial Excess Liability insurance, or when included in the Schedule of Underlying, Auto Liability insurance or Employers Liability insurance, that is available to an additional insured, but only if:
 - a. The additional insured is a Named Insured under such other insurance;
 - b. The additional insured is identified in, or otherwise falls within the language of, the above Schedule or the Schedule of any other Noncontributory-Other Insurance Condition endorsement form made part of this policy;
 - c. The "controlling underlying insurance" provides primary and non-contributory coverage to the same additional insured; and
 - d. Prior to the effective date of this policy, you agreed in writing in a contract or agreement that this insurance would not seek contribution from such other insurance.
 - b. When this insurance is excess, if no other excess insurer defends, we may undertake to do so, but we will be entitled to the insured's rights against all other insurers.
 - c. When this insurance is excess, the most we will pay will be a share of "ultimate net loss" that exceeds the sum of:
 1. The total amount that all other insurance would pay for the loss in the absence of the insurance provided under this Coverage Part; and
 2. The total of all deductible and self-insured amounts under all other insurance.

Notwithstanding any part of this endorsement, coverage granted to an additional insured remains subject to all terms, conditions, limitations, and exclusions set forth in the endorsement form that conferred the additional insured status.

All other terms and conditions of this Policy remain unchanged.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGE NOTICE

This endorsement modifies insurance provided under the following:

COMMERCIAL EXCESS LIABILITY POLICY PART

Follow Form Waiver of Subrogation

It is understood and agreed that, with respect to any waiver of subrogation provisions made part of applicable "controlling underlying insurance", this policy shall follow form.

No part of this policy shall differ from or contradict any waiver of subrogation provisions made part of applicable "controlling underlying insurance."

ALL OTHER TERMS, CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.

Form 13

Bid Guaranty Form

(Construction)

STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we Cardinal Contractors, Inc., as Principal, and Federal Insurance Company as

Surety, are held and firmly bound unto the City of Hollywood in the sum of Five Percent

of the Total Solicitation Price _____ Dollars (\$ 5% TSP) lawful money

of the United States, amounting to 5% of the total SOLICITATION Price, for the payment of said sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has submitted the accompanying SOLICITATION, dated June 5, 2025 20 for

Water Treatment Plant Aeration Building Pump Station Upgrade Project Project No. 19-4253

NOW, THEREFORE, if the principal shall not withdraw said SOLICITATION within 90 days after date of the same and shall within ten days after the prescribed forms are presented to him for signature, enter into a written contract with the CITY, in accordance with the SOLICITATION as accepted, and give bond with good and sufficient surety or sureties, and provide the necessary Insurance Certificates as may be required for the faithful performance and proper fulfillment of such Contract, then this obligation shall be null and void.

Approved SOLICITATION Bond

In the event of the withdrawal of said SOLICITATION within the specified period, or the failure to enter into such contract and give such bond and insurance within the specified time, the principal and the surety shall pay to the City of Hollywood the difference between the amount specified in said SOLICITATION and such larger amount for which the City of Hollywood may in good faith contract with another party to perform the work and/or supply the materials covered by said SOLICITATION.

IN WITNESS WHEREOF, the above bound parties have executed this statement under their several seals this 23rd day of May, 2025, 20, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

WHEN THE PRINCIPAL IS AN INDIVIDUAL:

Signed, sealed and delivered in the presence of:

Witness

Signature of Individual

Address

Printed Name of Individual

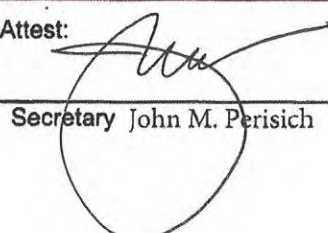
Witness

Address

Approved SOLICITATION Bond

WHEN THE PRINCIPAL IS A CORPORATION:

Attest:


Secretary John M. Perisich

Cardinal Contractors, Inc.

Name of Corporation

13794 NW 4th Street, Suite 200, Sunrise, FL 33325

Business Address

By:


(Affix Corporate Seal)

Robert Bridges

Printed Name

President, Director

Official Title

CERTIFICATE AS TO CORPORATE PRINCIPAL

I, John M. Perisich, certify that I am the secretary of the Corporation named as Principal in the attached bond; that Robert Bridges who signed the said bond on behalf of the Principal, was then President, Director of said Corporation; that I know his signature, and his signature thereto is genuine and that said bond was duly signed, sealed and attested for and on behalf of said Corporation by authority of its governing body.

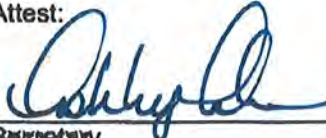

Secretary John M. Perisich

(SEAL)

Approved SOLICITATION Bond

TO BE EXECUTED BY CORPORATE SURETY:

Attest:



Secretary
Ashley Coleman, Attorney-in-Fact

Federal Insurance Company

Corporate Surety

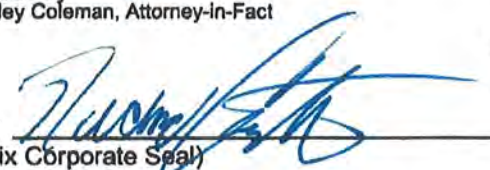
202B Hall's Mill Road

Business Address

Whitehouse Station, NJ 08889

BY:

(Affix Corporate Seal)



Richard Covington

Attorney-in-Fact

Benjamin R. Campbell Jr., Florida Resident License No. W501312

McGriff, a Marsh & McLennan Agency LLC Company

Business Address

3522 Thomasville Rd FL 3, Tallahassee, FL 32309-3479



Name of Local Agency

STATE OF FLORIDA

Before me, a Notary Public, duly commissioned, qualified and acting, personally appeared,
Richard Covington to me well known, who being by me first duly sworn upon
oath says that he is the attorney-in-fact for the Federal Insurance Company and
that the has been authorized by Federal Insurance Company to execute the forgoing
bond on behalf of the CONTRACTOR named therein in favor of the City of Hollywood, Florida.
Subscribed and sworn to before me this 23rd day of May, 2025



Notary Public, State of ~~Florida~~ Texas

Diana Castillo
Notary ID 132737564

My Commission Expires:

- END OF SECTION-





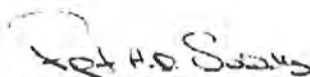
Power of Attorney

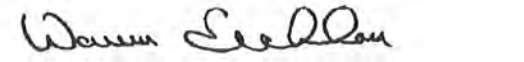
Federal Insurance Company | Vigilant Insurance Company | Pacific Indemnity Company
Westchester Fire Insurance Company | ACE American Insurance Company

Know All by These Presents, that **FEDERAL INSURANCE COMPANY**, an Indiana corporation, **VIGILANT INSURANCE COMPANY**, a New York corporation, **PACIFIC INDEMNITY COMPANY**, a Delaware corporation, **WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** corporations of the Commonwealth of Pennsylvania, do each hereby constitute and appoint **Namesia Anderson, Joseph R. Aulbert, Marc W. Boots, Ashley Coleman, Richard Covington, Michael Garcia, Stephanie Moore Harold, Ashley Koletar, Vickie Lacy, Melanie Salinas, Ryan Varela, Dylan Young and Maria D. Zuniga** of Houston, Texas; **Susan Golla** of San Antonio, Texas

each as their true and lawful Attorney-in-Fact to execute under such designation in their names and to affix their corporate seals to and deliver for and on their behalf as surety thereon or otherwise, bonds and undertakings and other writings obligatory in the nature thereof (other than bail bonds) given or executed in the course of business, and any instruments amending or altering the same, and consents to the modification or alteration of any instrument referred to in said bonds or obligations.

In Witness Whereof, said **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** have each executed and attested these presents and affixed their corporate seals on this 28th day of January, 2025.


Rupert HD Swindells, Assistant Secretary


Warren Eichhorn, Vice President



STATE OF NEW JERSEY
County of Hunterdon

SS.

On this 28th day of January, 2025 before me, a Notary Public of New Jersey, personally came **Rupert HD Swindells** and **Warren Eichhorn**, to me known to be Assistant Secretary and Vice President, respectively, of **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY**, the companies which executed the foregoing Power of Attorney, and the said **Rupert HD Swindells** and **Warren Eichhorn**, being by me duly sworn, severally and each for himself did depose and say that they are Assistant Secretary and Vice President, respectively, of **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** and know the corporate seals thereof, that the seals affixed to the foregoing Power of Attorney are such corporate seals and were thereto affixed by authority of said Companies; and that their signatures as such officers were duly affixed and subscribed by like authority.

Notarial Seal



Albert Contural
NOTARY PUBLIC OF NEW JERSEY
No 50202369
Commission Expires August 22, 2027


Notary Public

CERTIFICATION

Resolutions adopted by the Boards of Directors of **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, and PACIFIC INDEMNITY COMPANY** on August 30, 2016; **WESTCHESTER FIRE INSURANCE COMPANY** on December 11, 2006; and **ACE AMERICAN INSURANCE COMPANY** on March 20, 2009:

"RESOLVED, that the following authorizations relate to the execution, for and on behalf of the Company, of bonds, undertakings, recognizances, contracts and other written commitments of the Company entered into in the ordinary course of business (each a "Written Commitment"):

- (1) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise.
- (2) Each duly appointed attorney-in-fact of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise, to the extent that such action is authorized by the grant of powers provided for in such person's written appointment as such attorney-in-fact.
- (3) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to appoint in writing any person the attorney-in-fact of the Company with full power and authority to execute, for and on behalf of the Company, under the seal of the Company or otherwise, such Written Commitments of the Company as may be specified in such written appointment, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.
- (4) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to delegate in writing to any other officer of the Company the authority to execute, for and on behalf of the Company, under the Company's seal or otherwise, such Written Commitments of the Company as are specified in such written delegation, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.
- (5) The signature of any officer or other person executing any Written Commitment or appointment or delegation pursuant to this Resolution, and the seal of the Company, may be affixed by facsimile on such Written Commitment or written appointment or delegation.

FURTHER RESOLVED, that the foregoing Resolution shall not be deemed to be an exclusive statement of the powers and authority of officers, employees and other persons to act for and on behalf of the Company, and such Resolution shall not limit or otherwise affect the exercise of any such power or authority otherwise validly granted or vested."

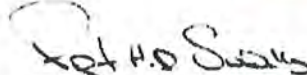
I, **Rupert HD Swindells**, Assistant Secretary of **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** (the "Companies") do hereby certify that

- (i) the foregoing Resolutions adopted by the Board of Directors of the Companies are true, correct and in full force and effect,
- (ii) the foregoing Power of Attorney is true, correct and in full force and effect.

Given under my hand and seals of said Companies at Whitehouse Station, NJ, this

23rd Day of May, 2025




Rupert HD Swindells, Assistant Secretary

IN THE EVENT YOU WISH TO VERIFY THE AUTHENTICITY OF THIS BOND OR NOTIFY US OF ANY OTHER MATTER, PLEASE CONTACT US AT:
Telephone (908) 903-3493 Fax (908) 903-3656 e-mail: surety@chubb.com