



**CITY OF HOLLYWOOD, FLORIDA**  
**PROCUREMENT SERVICES DIVISION**

**DATE:** May 17, 2017

**FILE:** PR-17-170

**TO:** Sylvia Glazer, Director, Public Works

**FROM:** Linda Silvey, Contracts Officer, Procurement Services *LS*

**SUBJECT:** Blanket Purchase Order Final Renewal for B002503 with DRC Emergency Services, LLC for Emergency Response and Recovery Services.

**ISSUE:**

The current period of the above contract expires **July 23, 2017**. The contract is renewable for a one year period if it is determined to be in the City's best interest and the vendor agrees to the renewal in writing.

**EXPLANATION:**

Notification of Intent to Renew must be mailed to the vendor thirty (30) calendar days in advance of the contract expiration date. Accordingly, it is requested that you give this matter your immediate attention thereby providing a timely reply to preclude contract expiration.

If you do not want to renew this contract, please explain the reason(s) in a separate memo. Also note that this contract will expire on the date mentioned above and if a new contract is to be established, you must submit bid specifications.

**RECOMMENDATION:**

Please reply as soon as possible by returning this memo appropriately filled out, signed and dated.

Date: 5/18/17

To: Linda Silvey, Procurement Services

The Director recommends the following:

☒ RENEW the contract under the same terms and conditions. The Budget Account Number to be charged is 45.5121.00000.534.003117.

☐ DO NOT renew this contract. See attached memo explaining the reason(s).

☐ DO NOT renew this contract. DO NOT prepare a replacement bid (items/services no longer needed).

☒ Estimated annual usage/expenditure is \$25,000

By: *[Signature]*

Title: Public Works Director



## CITY OF HOLLYWOOD, FLORIDA

### PROCUREMENT SERVICES DIVISION

#### Department/Office Contract Renewal Evaluation

Date: <u>5/22/17</u>	
Department/Office: <u>5100</u>	Division/Area: <u>5121</u>
Contact Person: <u>Charles Lassiter</u>	Title: <u>Env Svcs. Supt</u>
Contact phone number: <u>4207</u>	Contact Email: <u>classiter@hollywoodfl.org</u>
Purchase Order/Blanket Purchase Order #: <u>3002503</u>	
Contract Expiration Date: <u>7/23/17</u>	
Vendor: <u>DRC Emergency Services</u>	Contact Person: <u>Bryan Fike</u>
Contact phone number:	Contact Email:
Good/Service:	Solicitation #:

1. How would you rate the quality of goods/services?

☐ Excellent ☐ Good ☐ Satisfactory ☐ Poor

2. How would you rate the courteousness vendor's personnel?

☐ Excellent ☐ Good ☐ Satisfactory ☐ Poor

3. With regards to the goods or services provided, how satisfied are you with the following items?  
(Please check one per category)

	Excellent	Good	Satisfactory	Poor
Overall Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequency of Contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness to request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Are all goods/services on the contract being performed at the agreed upon time and manner?

☐ Yes ☐ No

If no, please explain?

5. If you contacted the vendor, were all your questions or any issues resolved to your complete satisfaction?

☐ Yes ☐ No ☐ Did not need to contact

If no, please explain?



**CITY OF HOLLYWOOD, FLORIDA**  
**PROCUREMENT SERVICES DIVISION**

**Department/Office**  
**Contract Renewal Evaluation**

6. Has the invoicing been timely, accurate and in accordance with the contract?

☐ Yes ☐ No

If no, please explain?

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7. Does the Department/Office recommend renewing a contract based upon the available renewal options when the current agreement expires?

☒ Yes ☐ No

If no, please explain?

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8. Please state any additional comments about your experience with this vendor and the goods/services provided:

*Contract is for emergency services and has not been utilized.*

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Department/Office Director's Name:

*Sylvia Glazel*

Department/Office Director's Signature:

*[Handwritten Signature]*





## CITY OF HOLLYWOOD, FLORIDA

### PROCUREMENT SERVICES DIVISION

2600 HOLLYWOOD BLVD. • ROOM 303 • P. O. Box 229045 • ZIP 33022-9045  
PHONE: 954-921-3299 • FAX: 954-921-3086

2017 MAY 32 PM 3:37  
CITY OF HOLLYWOOD  
PROCUREMENT SERVICES  
DIVISION

May 17, 2017

DRC Emergency Services, LLC  
Attn: Bryan Fike  
740 Museum Drive  
Mobile, AL 36608

Dear Vendor:

Our Agreement for Emergency Response and Recovery Services for the Public Works Department based upon RFP-4361-13-IS, Blanket Purchase Order B002503, expires on July 23, 2017.

The Procurement Services Division would like to renew the agreement for a one (1) year period under the terms, conditions and pricing as the City of Hollywood Blanket Purchase Order B002503 (copy attached).

If you are willing to honor your bid pricing and renew this agreement, please sign below. If you are not, please sign and explain reason(s) in a separate letter.

**Renewal is subject to the receipt of all required insurance certificate(s).**

**Per the RFP document, you are responsible to furnish the City of Hollywood a performance/payment bond(s) to be in effect during the hurricane season(s) (June 1 through November 30) annually for the duration of the award period(s) in the total amount of the Agreement.**

**Please forward updated insurance certificates, bond documents and updated contact information directly to Procurement Services along with your response.**

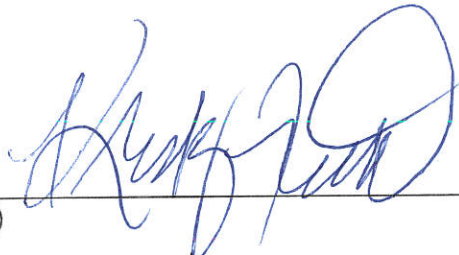
**If you have not already done so, please forward updated certificates directly to Procurement Services.**

Thanks for your help with this matter and as always, please contact me or Michelle Lemire at 954-921-3200 or e-mail [LSilvey@hollywoodfl.org](mailto:LSilvey@hollywoodfl.org) or [MLemire@hollywoodfl.org](mailto:MLemire@hollywoodfl.org) if you have any questions.

Sincerely,

  
Linda Silvey, Contracts Officer  
Procurement Services Division

I agree: \_\_\_\_\_  
(Signature)



I disagree: \_\_\_\_\_  
(Signature)

Name: Kristy Fwenes  
(Typed or Printed)

Date: 05/25/2017

2017 JUN - 1 PM 3:38  
CITY OF HOLLYWOOD  
PROCUREMENT SERVICES  
DIVISION



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/24/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> MCGRUFF, SEIBELS & WILLIAMS OF TEXAS, INC. 818 Town & Country Blvd, Suite 500 Houston, TX 77024-4549	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b> 713-877-8975	<b>FAX (A/C, No):</b> 713-877-8974
<b>INSURED</b> DRC Emergency Services, LLC P.O. Box 17017 Galveston, TX 77554	<b>E-MAIL ADDRESS:</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A :</b> Underwriters At Lloyd's, London	
	<b>INSURER B :</b> United States Fire Insurance Company	
	<b>INSURER C :</b> Texas Mutual Insurance Company	
	<b>INSURER D :</b> Argonaut Insurance Company	
	<b>INSURER E :</b> Crum & Forster Specialty Insurance Company	
<b>INSURER F :</b>		

## COVERAGES

CERTIFICATE NUMBER:Y9PNGQP2

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			B0621EMSSL000317	05/26/2017	05/26/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			1337407101	05/26/2017	05/26/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			B0621EMSSL000217	05/26/2017	05/26/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A			TSF0001307608 TX WC928318471754	05/26/2017	05/26/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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
E	Contractors Pollution & Errors & Omissions			PKC105162	05/26/2017	05/26/2018	Contractor's Pollution Errors & Omissions \$ 1,000,000 Policy Aggregate \$ 2,000,000 \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Emergency Response and Recovery Services RFP-4361-13-IS

The Certificate Holder is included as Additional Insured (except on Workers Compensation) as required by written contract.

## CERTIFICATE HOLDER

## CANCELLATION

City of Hollywood 2600 Hollywood Blvd. 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 



# PERFORMANCE BOND Annual Form

"The Surety shall have no obligation under this bond until Obligor issues a Notice To Proceed activating the Contract to the Response Phase, at which point in time the Surety's obligations under this bond will be in full force and effect. Upon issuance of a Notice to Proceed, Obligor shall provide written notice to Surety."

Bond No. 46BCSHL4868

**KNOW ALL BY THESE PRESENTS**, That we DRC Emergency Services, LLC, as Principal, and Hartford Fire Insurance Company, of Hartford, CT, authorized to do business in the State of Florida, as Surety, are held and firmly bound unto City of Hollywood, FL, as Obligor, in the maximum penal sum of Twenty Five Thousand Dollars and 00/100-- Dollars ( \$25,000.00 ), lawful money of the United States of America, for which payment well and truly to be made we bind ourselves, our heirs, executors and assigns, jointly and severally, firmly by this Bond.

**WHEREAS**, the Principal has entered, or is about to enter, into a written agreement with the Obligor to perform in accordance with the terms and conditions of the RFP 4361-13-IS Emergency Response and Recovery Services, Contract date July 24, 2013, (hereinafter referred to as the Contract), said Contract is hereby referred to and made a part hereof;

**NOW, THEREFORE**, the condition of this obligation is such that if the above named Principal, its successors and assigns, shall well and truly perform its obligations as set forth in the above mentioned Contract, then this Bond shall be void; otherwise to remain in full force and effect pursuant to its terms.

Notwithstanding anything to the contrary in the Contract, the Bond is subject to the following express conditions:

1. Whereas, the Obligor has agreed to accept this Bond, this Bond shall be effective for the definite period of July 24, 2017 to July 23, 2018. The Bond may be extended, at the sole option of the Surety, by continuation certificate for additional periods from the expiry date hereof. However, neither: (a) the Surety's decision not to issue a continuation certificate, nor (b) the failure or inability of the Principal to file a replacement bond or other security in the event the Surety exercises its right to not renew this Bond, shall itself constitute a loss to the Obligor recoverable under this Bond or any extension thereof.
2. No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against the Surety on this instrument unless such claim, action, suit or proceeding is brought or instituted upon the Surety within one year from termination or expiration of the bond term.
3. Regardless of the number of years this Bond is in force or the number of continuation certificates issued, the liability of the Surety shall not be cumulative in amounts from period to period and shall in no event exceed the amount set forth above, or as amended by rider.
4. Any notice, demand, certification or request for payment, made under this Bond shall be made in writing to the Surety at the address specified below. Any demand or request for payment must be made prior to the expiry date of this Bond.

Surety Address: The Hartford  
Hartford Financial Products, 2 Park Ave., 5th Floor  
New York, NY 10016  
Attn: \_\_\_\_\_

5. If any conflict or inconsistency exists between the Surety's obligations or undertakings as described in this Bond and as described in the underlying Contract, then the terms of this Bond shall prevail.

SIGNED, SEALED AND DATED this 26th day of May, 2017.

DRC Emergency Services, LLC

By: [Signature], Principal

Hartford Fire Insurance Company

By: [Signature]  
David T. Miclette, Attorney-in-Fact

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## PAYMENT BOND Annual Form

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WHEREAS, the Principal has entered, or is about to enter, into a written agreement with the Obligee, for RFP 4361-13-IS Emergency Response and Recovery Services, Contract date July 24, 2013 hereinafter referred to as the Contract) and more fully described in said Contract, said Contract is hereby referred to and made a part hereof.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said Principal shall pay all persons who shall have furnished labor or material directly to the Principal for use in the prosecution of the aforesaid work, each of which said persons shall have a direct right of action on this instrument in his/her own name and for his/her own benefit, subject, however, to the Obligee's priority, then this obligation to be void; otherwise to remain in full force and effect.

Notwithstanding anything to the contrary in the Contract, the Bond is subject to the following express conditions:

1. Whereas, the Obligee has agreed to accept this Bond, this Bond shall be effective for the definite period of July 24, 2017 to July 23, 2018. The Bond may be extended, at the sole option of the Surety, by continuation certificate for additional periods from the expiry date hereof. However, neither: (a) the Surety's decision not to issue a continuation certificate, nor (b) the failure or inability of the Principal to file a replacement bond or other security in the event the Surety exercises its right to not renew this Bond, shall itself constitute a loss to the Obligee recoverable under this Bond or any extension thereof.
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Surety Address:

The Hartford  
Hartford Financial Products, 2 Park Ave., 5th Floor  
New York, NY 10016  
Attn: \_\_\_\_\_


4. No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against the Surety on this instrument unless such claim, action, suit or proceeding is brought or instituted upon the Surety within one year from termination or expiration of the bond term; or after the expiration of ninety (90) days after the day on which any person last supplied the labor and/or materials for which the claim is made, whichever occurs first. If this limitation is void or prohibited by law, then the minimum period of limitation available to Surety as a defense in the jurisdiction of the suit shall be applicable.
5. The amount of this Bond shall be reduced by and to the extent of any payment or payments made in good faith hereunder.
6. If any conflict or inconsistency exists between the Surety's obligations or undertakings as described in this Bond and as described in the underlying Contract, then the terms of this Bond shall prevail.

SIGNED, SEALED AND DATED this 26th day of May, 2017.

DRC Emergency Services, LLC

By: \_\_\_\_\_, Principal

Hartford Fire Insurance Company

By:   
David T. Miclette, Attorney-in-Fact



# POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD

BOND, T-12

One Hartford Plaza

Hartford, Connecticut 06155

[Bond.Claims@thehartford.com](mailto:Bond.Claims@thehartford.com)

call: 888-266-3488 or fax: 860-757-5835

Agency Name: BOWEN MICLETTE & BRITT INS AGY LLC

Agency Code: 46-504809

## KNOW ALL PERSONS BY THESE PRESENTS THAT:

- ☒ Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☒ Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☒ Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
- ☐ Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of Unlimited :**

Joni Bowen, Kristi Lovett, Sam F. Bowen, Ashley Britt, Edward G. Britt, Jr., Robert C. Davis, Jennie Goonie, Rita G. Gulizo, Barry K. McCord, David G. Miclette, David T. Miclette, Tabitha Starkey, Susan Zapalowski of Fort Smith AR, New Orleans LA and of HOUSTON, Texas

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒, and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

**In Witness Whereof**, and as authorized by a Resolution of the Board of Directors of the Companies on May 6, 2015 the Companies have caused these presents to be signed by its Senior Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



*John Gray*

John Gray, Assistant Secretary

*M. Ross Fisher*

M. Ross Fisher, Senior Vice President

STATE OF CONNECTICUT

COUNTY OF HARTFORD

ss. Hartford

On this 11th day of January, 2016, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Senior Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.



CERTIFICATE

*Nora M. Stranko*

Nora M. Stranko  
Notary Public

My Commission Expires March 31, 2018

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of May 26, 2017

Signed and sealed at the City of Hartford.



*Kevin Heckman*

Kevin Heckman, Assistant Vice President



# PERFORMANCE BOND Annual Form

"The Surety shall have no obligation under this bond until Obligee issues a Notice To Proceed activating the Contract to the Response Phase, at which point in time the Surety's obligations under this bond will be in full force and effect. Upon issuance of a Notice to Proceed, Obligee shall provide written notice to Surety."

Bond No. 46BCSHL4868

**KNOW ALL BY THESE PRESENTS**, That we DRC Emergency Services, LLC, as Principal, and Hartford Fire Insurance Company, of Hartford, CT, authorized to do business in the State of Florida, as Surety, are held and firmly bound unto City of Hollywood, FL, as Obligee, in the maximum penal sum of Twenty Five Thousand Dollars and 00/100-- Dollars ( \$25,000.00 ), lawful money of the United States of America, for which payment well and truly to be made we bind ourselves, our heirs, executors and assigns, jointly and severally, firmly by this Bond.

**WHEREAS**, the Principal has entered, or is about to enter, into a written agreement with the Obligee to perform in accordance with the terms and conditions of the RFP 4361-13-IS Emergency Response and Recovery Services, Contract date July 24, 2013, (hereinafter referred to as the Contract), said Contract is hereby referred to and made a part hereof;

**NOW, THEREFORE**, the condition of this obligation is such that if the above named Principal, its successors and assigns, shall well and truly perform its obligations as set forth in the above mentioned Contract, then this Bond shall be void; otherwise to remain in full force and effect pursuant to its terms.

Notwithstanding anything to the contrary in the Contract, the Bond is subject to the following express conditions:

1. Whereas, the Obligee has agreed to accept this Bond, this Bond shall be effective for the definite period of July 24, 2017 to July 23, 2018. The Bond may be extended, at the sole option of the Surety, by continuation certificate for additional periods from the expiry date hereof. However, neither: (a) the Surety's decision not to issue a continuation certificate, nor (b) the failure or inability of the Principal to file a replacement bond or other security in the event the Surety exercises its right to not renew this Bond, shall itself constitute a loss to the Obligee recoverable under this Bond or any extension thereof.
2. No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against the Surety on this instrument unless such claim, action, suit or proceeding is brought or instituted upon the Surety within one year from termination or expiration of the bond term.
3. Regardless of the number of years this Bond is in force or the number of continuation certificates issued, the liability of the Surety shall not be cumulative in amounts from period to period and shall in no event exceed the amount set forth above, or as amended by rider.
4. Any notice, demand, certification or request for payment, made under this Bond shall be made in writing to the Surety at the address specified below. Any demand or request for payment must be made prior to the expiry date of this Bond.

Surety Address: The Hartford  
Hartford Financial Products, 2 Park Ave., 5th Floor  
New York, NY 10016  
Attn: \_\_\_\_\_


5. If any conflict or inconsistency exists between the Surety's obligations or undertakings as described in this Bond and as described in the underlying Contract, then the terms of this Bond shall prevail.

SIGNED, SEALED AND DATED this 26th day of May, 2017.

DRC Emergency Services, LLC

By: , Principal

Hartford Fire Insurance Company

By:   
David T. Miclette, Attorney-in-Fact

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## PAYMENT BOND Annual Form

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NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said Principal shall pay all persons who shall have furnished labor or material directly to the Principal for use in the prosecution of the aforesaid work, each of which said persons shall have a direct right of action on this instrument in his/her own name and for his/her own benefit, subject, however, to the Obligee's priority, then this obligation to be void; otherwise to remain in full force and effect.

Notwithstanding anything to the contrary in the Contract, the Bond is subject to the following express conditions:

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Surety Address:

The Hartford  
Hartford Financial Products, 2 Park Ave., 5th Floor  
New York, NY 10016  
Attn: \_\_\_\_\_

4. No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against the Surety on this instrument unless such claim, action, suit or proceeding is brought or instituted upon the Surety within one year from termination or expiration of the bond term; or after the expiration of ninety (90) days after the day on which any person last supplied the labor and/or materials for which the claim is made, whichever occurs first. If this limitation is void or prohibited by law, then the minimum period of limitation available to Surety as a defense in the jurisdiction of the suit shall be applicable.
5. The amount of this Bond shall be reduced by and to the extent of any payment or payments made in good faith hereunder.
6. If any conflict or inconsistency exists between the Surety's obligations or undertakings as described in this Bond and as described in the underlying Contract, then the terms of this Bond shall prevail.



SIGNED, SEALED AND DATED this 26th day of May, 2017.

DRC Emergency Services, LLC

By: \_\_\_\_\_, Principal

Hartford Fire Insurance Company

By: David T. Miclette  
David T. Miclette, Attorney-in-Fact

# POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD

BOND, T-12

One Hartford Plaza

Hartford, Connecticut 06155

[Bond.Claims@thehartford.com](mailto:Bond.Claims@thehartford.com)

call: 888-266-3488 or fax: 860-757-5835

Agency Name: BOWEN MICLETTE & BRITT INS AGY LLC

Agency Code: 46-504809

## KNOW ALL PERSONS BY THESE PRESENTS THAT:

- ☒ Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut  
☒ Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana  
☒ Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut  
☐ Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut  
☐ Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana  
☐ Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois  
☐ Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana  
☐ Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of Unlimited :**

Joni Bowen, Kristi Lovett, Sam F. Bowen, Ashley Britt, Edward G. Britt, Jr., Robert C. Davis, Jennie Goonie, Rita G. Gulizo, Barry K. McCord, David G. Miclette, David T. Miclette, Tabitha Starkey, Susan Zapalowski of Fort Smith AR, New Orleans LA and of HOUSTON, Texas

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒, and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

**In Witness Whereof**, and as authorized by a Resolution of the Board of Directors of the Companies on May 6, 2015 the Companies have caused these presents to be signed by its Senior Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



*John Gray*

John Gray, Assistant Secretary

*M. Ross Fisher*

M. Ross Fisher, Senior Vice President

STATE OF CONNECTICUT

COUNTY OF HARTFORD

ss. Hartford

On this 11th day of January, 2016, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Senior Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.



CERTIFICATE

*Nora M. Stranko*

Nora M. Stranko  
Notary Public

My Commission Expires March 31, 2018

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of May 26, 2017

Signed and sealed at the City of Hartford.



*Kevin Heckman*

Kevin Heckman, Assistant Vice President



**DRC Emergency Services, LLC**  
P.O. Box 17017, Galveston, TX 77552  
TTY: 888-721-4DRC • Phone: 504-482-2848 • Fax: 504-482-2852  
[www.drcusa.com](http://www.drcusa.com)

#### **DRC Contact List**

##### **DRC Corporate Address:**

P.O. Box 17017  
Galveston, TX 77558

##### **DRC Local Address:**

500 S. Australian Ave., Ste 600  
West Palm Beach, Florida 33401  
Office: 561.820.4877

##### **DRC Mailing Address:**

6258 Marshall Foch Street  
New Orleans, LA 70124

##### **DRC Physical Address:**

13 Evia Main  
Galveston, TX 77554

##### **Primary Contact:**

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DRC Emergency Services, LLC  
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Cell: 407.242.0116

##### **Additional DRC Contacts:**

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