

Relocation Construction Agreement / Invoice

Requestor Information

Gary McColpin
City of Broken Arrow
220 S. First Street
Broken Arrow, OK 74012
GMcColpin@brokenarrowok.gov
O: 918.259.7000

Address Where Work to Be Performed

Broken Arrow Expressway at East 61st Street South

Cost Valid within 30 Days from

2/28/2025

Lumen Company Performing Work

CENTURYLINK COMMUNICATIONS, LLC
a Delaware limited liability company
Vanessa Ison
Agreement / Reimbursement PM
Dept: OSP RELO
931 14th Street
Denver, CO 80202
Vanessa.Ison@lumen.com

Advance Payment Required (Details Page 3)

Invoice Number: [RELO_115-250540](#)

Relocation Cost Estimate

\$42,005.66

This Relocation Construction Agreement (“**Agreement**”) is entered into by and between the Requestor and Lumen entities named above (respectively, “**Requestor**” and “**Lumen**”) and is effective the date that both parties have signed it. Subject to the terms and conditions of this Agreement and consistent with applicable law, Lumen agrees to perform the following relocation work (“**Work**”): Install one (1) handhole, install 3,108 FT of 96 count fiber optic cable, splice cable and remove 3,108 FT of cable.

STANDARD TERMS: (1) Performance of the Work is subject to Lumen’s ability to obtain required access and use authorizations from underlying property owner(s)/controller(s) where facilities are located. If use of adjacent properties is required, Requestor will obtain those rights. (2) The Work will be performed at Requestor’s sole expense. [The Relocation Cost Estimate, above, shall be paid to Lumen prior to start of the Work.](#) If actual costs exceed the Estimate, Requestor will pay the difference within 30 days of receipt of invoice. Delinquent payments accrue interest at the compounding monthly rate of 1.5%. All payments will be made by check/wire/ACH made out and sent to the Lumen Entity named above. (3) REQUESTOR ACCEPTS THE WORK “AS IS”. LUMEN DISCLAIMS ANY AND ALL WARRANTIES, WHETHER EXPRESS OR IMPLIED, INCLUDING, WITHOUT LIMITATION, WARRANTIES OF MERCHANTABILITY, SATISFACTORY QUALITY, OR FITNESS FOR A PARTICULAR PURPOSE. (4) Requestor will not be liable for any claims or damages under this Agreement, regardless of the cause, except as may be applicable under The Governmental Tort Claims Act (51 Okl. St. § 151 et seq.). Requestor otherwise does not waive any provision of The Governmental Tort Claims Act. (5) Requestor and Lumen shall each maintain the following insurance: (a) CGL with combined single limit of \$5M/occurrence; (b) Worker’s Comp in amounts required by law and Employer’s Liability of \$1M/accident; and (c) Automobile Liability including owned/leased, non-owned/hired with combined single limit of \$1M/accident. Evidence of Lumen’s insurance is at www.lumen.com/moi. (6) Each party represents that execution of this Agreement is authorized and will not violate any provision of law, any regulation or any contract or other obligation. This is the entire Agreement between the parties about the Work.

City of Broken Arrow

Signature / Date: Michael Spurgeon 4/1/2025
Name: Michael Spurgeon
Title: City manager

CENTURYLINK COMMUNICATIONS, LLC

Signature / Date: Caleb E Stiffler
Name: Caleb Stiffler
Title: SR MGR IMPLEMENTATION

03/21/2025

MC
Michael Casey

General instructions for requestor:

Agreement must be scanned back in color to RELO PM – via email to john.boedeker@lumen.com for counter execution. Lumen supports digital signatures and can route via Adobe Sign if requested as we support remote employee work locations.

- Please do not mail agreement. This will delay your project.
- A W-9 is included for your Accounts Payable team's use and payee information.
- Please scan/email a copy of your payment to john.boedeker@lumen.com RELO PM, once available.

Remit check payment via provided UPS RS label.

- **Invoice number must be listed on your check to avoid delays.**
- This address does not accept USPS Mail and is express payments only (UPS/FEDEX).
- All payments must have tracking info. Please utilize the provided UPS RS (return) label to drop check only.

C/O Wells Fargo Lockbox
Lumen Technologies, Inc
1700 Lincoln Street
Lower Level Three
Lockbox # 910182
Denver, CO 80203

Wire Transfer / ACH Payments

In both file types, the remittance, or addenda, information should be in the RMR*IV or RMT*IV segment of the file.

Example: RMR*IV*12345678915.00**

Where, 123456789 is the billing account or invoice number and 15.00 is the amount to be applied to the account.

Note: Lumen requires ACH be in CTX, EDI820, or CCD+ file format, with CTX being preferred. All remittance should be in the RMR*IV **addenda records of the bank file and should include your invoice number.** This allows for automated application of your payment, based on the information you populate in those fields.

CenturyLink Communications LLC - ACH / WIRE Include

ACH/WIR Information: RMR*IV* [RELO_115-xxxxxx](#)**amount\ ([Example Invoice Number](#))

Bank Name/ Phone Number: US BANK 800-937-6310

Address: 777 East Wisconsin Ave. Milwaukee, WI 53202

Account Name: CenturyLink Communications LLC

Account Number: 103674281664

Routing Number: 102000021

SWIFT Number: USBKUS44IMT

D. Graham Parker

Assistant City Attorney

City of Broken Arrow

D. Graham Parker

4/1/2025

Curtis Green

City Clerk

City of Broken

Curtis Green

4/1/2025



GM

4/1/2025

LB

4/1/2025



INVOICE

2/28/2025

Partial X
Final

Invoice Number: **115-250540**

Terms Net 30

Late Fee 1.5% per month compounded annually				Tracking Project	P-138058
Bill To				Project Code	N.852388
Company	City of Broken Arrow			GL Code	C.28 824222C
Attention	Gary McColpin			Requestor PO #	
Address	220 S. First Street			Project Type	Pre100,
City	Broken Arrow			RELO PM Name	Vanessa Ison
State	OK	Zip	74012	RELO PM Email	Vanessa.Ison@lumen.com
Project Scope					
Install one (1) handhole, install 3,108 FT of 96 count fiber optic cable, splice cable and remove 3,108 FT of cable.					
Description					Amount
Outside Plant Labor / Materials					12814.79
Engineering / Inspection					1762.0
Fiber Optic Cable Purchased					8437.0
Fiber Optic Testing / Splicing					9199.14
Subtotal					32,212.93
Internal General & Admin Cost					0.304
					9,792.73
Combined Subtotal					42,005.66
Received Amount					0.00
Amount Past Due					0.00
Late Fee @ 1.5%					0.00
Amount Due					42,005.66
Payment Payable to:		CenturyLink Communications LLC			
REMIT WITH PREPAID UPS LABEL			REMIT WIRE / ACH PAYMENT TO		
C/O Wells Fargo Lockbox			Reference Invoice # with ACH	115-250540	
CenturyLink Communications, LLC			Bank Name/Number: US BANK 800-937-6310		
1700 Lincoln Street			Bank Address 777 E. Wisconsin Ave Milwaukee		
Lower Level Three			Account Name: CenturyLink Communications		
Lockbox # 910182			Account Number: 103674281664		
Denver, CO 80203			Bank ABA Number: 102000021		
			Swift Number: USBKUS44IMT		

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) CenturyLink Communications, LLC	
	2 Business name/disregarded entity name, if different from above. dba Lumen Technologies Group	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) C Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 5 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) E (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 931 14th Street	
6 City, state, and ZIP code Denver, CO 80202		
7 List account number(s) here (optional)		
Requester's name and address (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-				-		
or									
Employer identification number									
0	4	-	6	1	4	1	7	3	9

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person *Vanessa Ison*

Date **01/02/2025**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

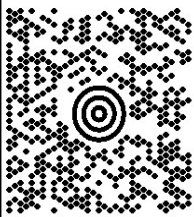
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

GARY MCCOLPIN
CITY OF BROKEN ARROW
485 N. POPLAR AVE
BROKEN ARROW OK 74012

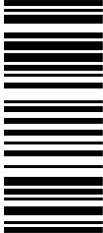
SHIP TO:
C/O WELLS FARGO LOCKBOX
LUMEN TECHNOLOGIES INC.
LOCKBOX # 910182
LOWER LEVEL THREE
1700 LINCOLN STREET
DENVER CO 80274

0.4 LBS LTR

1 OF 1



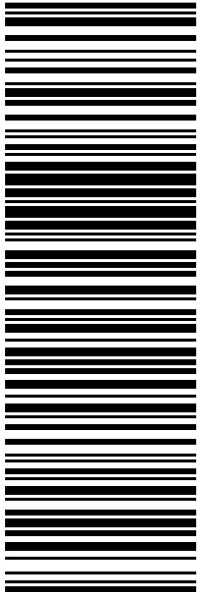
CO 802 9-50




UPS NEXT DAY AIR

1

TRACKING #: 1Z 9A3 15V NT 9925 3351



BILLING: P/P
ATTENTION UPS DRIVER: SHIPPER RELEASE

TM

Cost Center: K1005967
Reference Field 2: N 852388
CS 213.00. WNTNV50 9.0A 02/2025*












P-138058_N.852388 OK-51W & E 61st ST Broken Arrow invoice Package

Final Audit Report

2025-03-21

Created:	2025-03-20
By:	Vanessa Ison (vanessa.ison@lumen.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAGn_2xVgS_eqarAqHTvnQYjcv_egTThW

"P-138058_N.852388 OK-51W & E 61st ST Broken Arrow invoice Package" History

-  Document created by Vanessa Ison (vanessa.ison@lumen.com)
2025-03-20 - 5:45:25 PM GMT- IP address: 155.70.104.125
-  Document emailed to Michael Casey (michael.e.casey@lumen.com) for approval
2025-03-20 - 5:47:11 PM GMT
-  Email viewed by Michael Casey (michael.e.casey@lumen.com)
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-  Document approved by Michael Casey (michael.e.casey@lumen.com)
Approval Date: 2025-03-20 - 6:25:59 PM GMT - Time Source: server- IP address: 155.70.104.117
-  Document emailed to caleb.stiffler@lumen.com for signature
2025-03-20 - 6:26:01 PM GMT
-  Email viewed by caleb.stiffler@lumen.com
2025-03-21 - 4:33:44 PM GMT- IP address: 104.47.58.126
-  Signer caleb.stiffler@lumen.com entered name at signing as Caleb E Stiffler
2025-03-21 - 4:35:39 PM GMT- IP address: 155.70.104.117
-  Document e-signed by Caleb E Stiffler (caleb.stiffler@lumen.com)
Signature Date: 2025-03-21 - 4:35:41 PM GMT - Time Source: server- IP address: 155.70.104.117
-  Agreement completed.
2025-03-21 - 4:35:41 PM GMT