

City Contract

Version 2.9 released on 7/3/18

This form should be used for all types of contracts including Agreements (excluding Grant Agreements), Contracts, CBAs, MOAs, and MOUs. In addition to requests for New Contracts, Amendments and Renewals, this form should be used for Statutory Change Orders, Quantity Adjustments, Final Payments and Permission to Continue requests.



Broken Arrow **5c**

CITY COUNCIL USE ONLY

Date Received: _____
Committee Date: _____
1st Agenda Date: _____

Tracking #: UB115925
Committee: _____
Hearing Date: _____
2nd Agenda Date: _____

CITY CLERK USE ONLY

Date: _____
Item #: _____

All department items requiring Council approval must be submitted through the Mayor's Office.

Primary Details

Contract Phase

☐ New Contract ☐ Renewal ☒ Amendment ☐ Statutory Change Order ☐ Quantity Adjustment ☐ Final Payment ☐ Permission to Continue ☐ Terminate/Cancel

Board Approval

Regional Metropolitan Utility Authority

Other Board Name

City Council Approval

☐ Yes ☒ No

Contract Number

33667

Department

Water and Sewer

Contact Name

Matt Vaughan

Email

mvaughan@cityoftulsa.org

Phone

918-596-9845

Vendor Names

Holloway, Updike and Bellen, Inc.

Vendor Number

899

Description (Subject)

HC O&M CAPITAL EQUIPMENT REPLACEMENTS

This should match the Munis description field

Contract Type

Arch & Engr Svcs

Contract Subtype

Registered Engr

Bid/Project Number

WPC 18-2

Contract Amount

\$40,800.00

Budget

Contract Funding Type

☐ No Payment Involved
☐ Revenue Contract

☒ Expense Contract

Affidavit of Claimant should be attached to the contract for Expense Contracts

Funding Source(s)

9508900 541101: \$40,800.00

TOTAL: \$40,800.00

Enter the funding source(s) using the appropriate Munis funding format: Org (Allocation Code)-Object-Amount (1001211-531401-\$10.00) or Project Sting-Amount (144104.AbstrTitle5413102.6001-4043122-541102-\$30,000.01)

Approvals

Department: _____

Legal: _____

Board: _____

Mayor: _____

Other: _____

Date: 9.12.2018

Date: _____

Date: 9.12.2018

Date: _____

Date: _____

Policy Statement

Background Information

Submitted is Amendment No. 1 to the Agreement for Professional Engineering Services between the Regional Metropolitan Utility Authority and Holloway, Updike, and Bellen, Inc. in the amount of \$40,800.00. The scope of the project consists of preliminary design, final design/bidding services, and general services during construction associated with adding WPC FY'19 Capital Equipment Replacements at Haikey Creek Wastewater Treatment Plant. The original Agreement in the amount of \$44,600.00 and Amendment No 1. in the amount of \$40,800.00 increases the total contract amount to \$85,400.00.

Provide background information on the requested action.

Summation of the Requested Action

We recommend approval of Amendment No. 1 to the Agreement for Professional Engineering Service with Holloway, Updike, and Bellen, Inc. in the amount of \$40,800.00

Summarize the pertinent details of the requested action

Other Pertinent Details

Provide any additional information that should be considered when considering approval of this contract document

AMENDMENT NO. 1
TO
THE AGREEMENT
FOR
PROFESSIONAL ENGINEERING SERVICES
FOR
HAIKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2

THIS AMENDMENT No. 1, to the Agreement for Professional Engineering Services is made and entered into this 12 day of September, 2018, between the Regional Metropolitan Utility Authority, a Public Trust of the State of Oklahoma, hereinafter referred to as **AUTHORITY**, and Holloway, Updike, and Bellen, Inc., an incorporation organized under the law of the State of Oklahoma, hereinafter referred to as **ENGINEER**;

WITNESSETH:

WHEREAS, **AUTHORITY** and **ENGINEER** entered into an **AGREEMENT**, dated November 15, 2017, under which the **ENGINEER** was to provide professional services to replace certain capital equipment identified in the strategic asset management plan, hereinafter referred to as the **AGREEMENT**, and

WHEREAS, **AUTHORITY** requires certain additional professional services in connection with the **PROJECT**, hereinafter referred to as the **SERVICES**, thereby necessitating the amending of the Agreement;

WHEREAS, **ENGINEER** is prepared to provide such **SERVICES**;

WHEREAS, funding is available for the **PROJECT** under Account Number 9508900-541101;

NOW, THEREFORE, in consideration of the promises contained herein, the parties agree to amend the Agreement as follows:

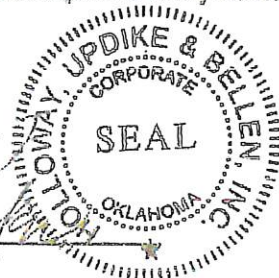
- 1.0 SERVICES TO BE PERFORMED BY ENGINEER. **ENGINEER** shall perform the **SERVICES**, described in Attachment B-1, SCOPE OF SERVICES, which is attached hereto and incorporated by reference as part of this **AMENDMENT NO. 1**.
- 2.0 COMPENSATION. The **AUTHORITY** and the **ENGINEER** agree that the **ENGINEER** shall be compensated for these additional services on a salary multiplier basis in accordance with Attachment D-1, COMPENSATION FOR ADDITIONAL SERVICES, which is attached hereto and incorporated by reference as part of this **AMENDMENT NO. 1**.

3.0 All other terms and conditions of the Agreement of November 15, 2017, as amended, shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this AGREEMENT in multiple copies on the respective dates herein below reflected to be effective on the date executed by the Chairman of the Regional Metropolitan Utility Authority.

(SEAL)
ATTEST:


Tammie Parker, Secretary




Holloway, Updike and Bellen, Inc.
(ENGINEER)



Stephen Tolar, Vice President

Date 8-22-2018

(SEAL)
APPROVED:


Secretary

REGIONAL METROPOLITAN UTILITY
AUTHORITY



Chairman

Date 9-12-2018

APPROVED AS TO FORM:


Attorney for Regional Metropolitan
Utility Authority

RECOMMENDED:


Director of Water and Sewer Department

RECOMMENDED:

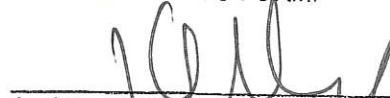
Broken Arrow Municipal Authority, Chairman

City of Broken Arrow, City Manager

ATTEST:

(Seal) City Clerk

APPROVED AS TO FORM:


Assistant City Attorney

AMENDMENT NO. 1
TO
THE AGREEMENT
FOR
PROFESSIONAL ENGINEERING SERVICES
FOR
HAIKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2
SCOPE OF SERVICES
ATTACHMENT B-1

B. SCOPE OF SERVICES. The Scope of Services shall be amended to include the following:

- B.1 Engineer will prepare plans and specifications for replacement of fiscal year 2019 equipment listed in Exhibit 1. All provisions identified in Scope of Services; Phase No. 1, Preliminary Design; Phase No. 2, Final Design; and Phase No. 3, General Services During Construction shall apply to development of plans and specifications and project management associated with identified fiscal year 2019 equipment.

SCHEDULE. ENGINEER agrees to complete all work described above within the timeframes outlined in Exhibit 2, Project Schedule.

AMENDMENT NO. 1
TO
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FOR
PROFESSIONAL ENGINEERING SERVICES
FOR
HAIKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2
ATTACHMENT D-1
COMPENSATION FOR ADDITIONAL SERVICES

D. COMPENSATION.

ENGINEER shall be paid as compensation for the professional services set forth in this Amendment No. 1 and itemized in Exhibit 3 (Fee Schedule), an amount not to exceed forty thousand eight hundred and 00/100 Dollars (\$40,800.00).

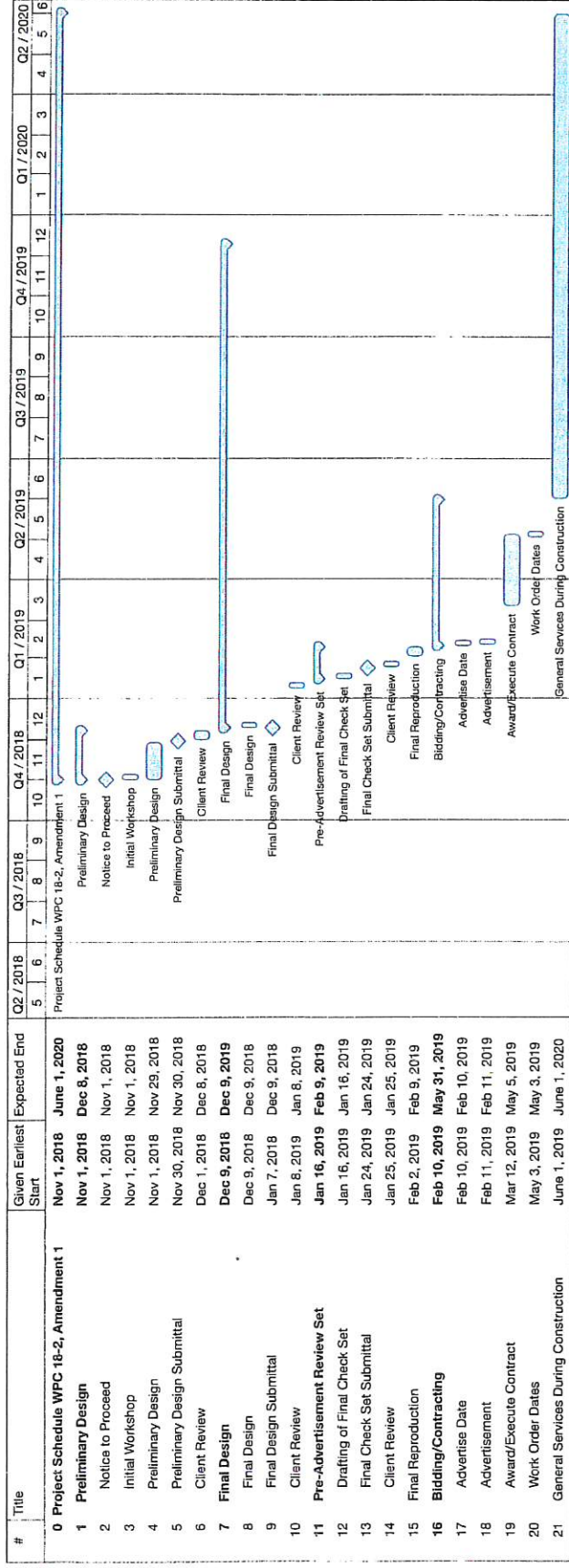
The ENGINEER acknowledges the following summary of modifications to the Fee Schedule as stated in the original Contract and modified by Amendment No. 1:

Original Contract Amount	\$44,600.00
Amendment No. 1	<u>\$40,800.00</u>
Total Amended Contract Amount	<u>\$85,400.00</u>

Exhibit 1 FY 2019 WPC Equipment Listing RMUA Project No. WPC 18-2, Amendment No. 1 Halkey Creek Operation & Maintenance Capital Equipment Replacements		
Equipment ID and Description		Estimated Replacement Cost
Halkey Creek Plant		
H001-OPS1-HVAC1	Operation Building HVAC Controls improvements	\$300,000
H070-THK1-PIT01	Scum pit safety platform and fall protection	\$48,000
H070-THK1-VLV02	Valve (power fail)	\$20,000
	New gas detection system for drywell of Halkey Creek LS	\$30,000
	Plant effluent discharge repair	\$100,000
H109-LFT1-PRV01	Power roof ventilator at Halkey Creek LS	\$20,000
H109-LFT1-HVAC1	Ventilation system at Halkey Creek LS	\$30,000
	New New roof access ladder and handrail for Halkey Creek LS	\$15,000
H001-OPS1-FMG01	Replacement front gate actuator	\$5,000
H109-LFT1-BLDG1	Paint exterior of Halkey Creek LS	\$10,000
	Halkey Creek WWTP Site Lighting Upgrades	\$15,000
RMUA Totals:		\$593,000

Haikey Creek Operation and Maintenance Capital Equipment Replacements RMUA Project No. WPC 18-2, Amendment 1

Exhibit 2- Project Schedule





Holloway, Updike and Bellen
Consulting Engineers
Muskegon • Broken Arrow

EXHIBIT 3

PROJECT FEE SCHEDULE
HAKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2
AMENDMENT NO. 1

PRINCIPLE (P)
SR. DESIGNER (SD):
DRAFTER / TECHNICIAN (DT):
PROJECT REPRESENTATIVE (RPR):
CLERICAL (C):

Stephen Tolar
Jason Ray
Jamie Sharp
Jason Ray
Tiffany Erb

Description:	Labor					Subcontracts			Direct Expenses	Total
	P	SD	DT	RPR	C	Survey Crew	Engineers			
WPC 19-2 Design, Bidding and Construction Phase										
Services										
Phase 1:										
Preliminary Design:										
Project Management	2					2				4
B.1.1 - Initial Workshop	2	2								4
B.1.2 - Research Existing Plans and Records	2	4								6
B.1.3 - Coordination with Authority/Regulatory Agencies	2									2
B.1.4 - Site Inspection	2	2								4
Civil/Process Design	2	6	12							20
Electrical Design Coordination	2									2
B.1.5 - Plan-In-Hand Meeting	2	4								6
B.1.6 - Preliminary Submittal		2				2				4
Total Hours:	16	20	12	0	4	0				52
Direct Labor Rate:	\$87	\$46	\$19	\$44	\$18	\$51				\$2,299
Total Direct Labor:	\$1,074	\$929	\$222	\$0	\$74	\$0				\$3,931
Indirect Labor (171% of Direct Labor):	\$1,836	\$1,589	\$380	\$0	\$127	\$0				\$623
Profit (10% of Labor):	\$291	\$252	\$60	\$0	\$20	\$0				\$2,000
Subcontracts:							\$2,000			\$100
Subcontract Profit (5%):							\$100	\$0		\$47
Direct Expenses:										\$47
General/Misc										\$47
Subtotal Phase 1:	\$3,201	\$2,770	\$662	\$0	\$221	\$0	\$2,100	\$0	\$47	\$9,000



Holloway, Updike and Bellen
Consulting Engineers
Muskegon • Broken Arrow

EXHIBIT 3

PROJECT FEE SCHEDULE
HAKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2
AMENDMENT NO. 1

PRINCIPLE (P)
SR. DESIGNER (SD):
DRAFTER / TECHNICIAN (DT):
PROJECT REPRESENTATIVE (RPR):
CLERICAL (C):

Stephen Tolar
Jason Ray
Jamie Sharp
Jason Ray
Tiffany Erb

Description:	Labor					Subcontracts			Total
	P	SD	DT	RPR	C	Survey	Crew	Engineers	
Phase 2:									
Final Design:									
Project Management	2				2				
B.2.1 - Final Field Investigations	2								
B.2.2 - Final Detailed Design									
Civil/Process Design	2	4	2						
Electrical Design Coordination	2								
B.2.3 - Final Design Submittal		4	2		2				
B.2.4 - Pre-Advertisement Review Set		2	2		2				
B.2.5 - Final Reproduction Coordination		2			2				
C.2.5.1 - Bidding Services	2	2	1		2				
Total Hours:	10	14	7	0	10	0			41
Direct Labor Rate:	\$67	\$46	\$19	\$44	\$18	\$51			
Total Direct Labor:	\$671	\$650	\$130	\$0	\$185	\$0			\$1,636
Indirect Labor (17% of Direct Labor):	\$1,148	\$1,112	\$221	\$0	\$316	\$0			\$2,796
Profit (10% of Labor):	\$182	\$176	\$35	\$0	\$50	\$0			\$443
Subcontract:								\$2,000	\$2,000
Subcontract Profit (5%):								\$100	\$100
Direct Expenses:								\$0	\$0
General/Misc								\$23	\$23
Subtotal Phase 2:	\$2,001	\$1,838	\$386	\$0	\$551	\$0	\$0	\$2,400	\$7,000



Holloway, Updike and Beilen
Consulting Engineers
Muskegon - Broken Arrow

EXHIBIT 3

PROJECT FEE SCHEDULE
HAKEY CREEK OPERATION & MAINTENANCE
CAPITAL EQUIPMENT REPLACEMENTS
RMUA PROJECT NO. WPC 18-2
AMENDMENT NO. 1

PRINCIPLE (P)

SR. DESIGNER (SD):

DRAFTER / TECHNICIAN (DT):

PROJECT REPRESENTATIVE (RPR):

CLERICAL (C):

Stephen Tolar
Jason Ray
Jamie Sharp
Jason Ray
Tiffany Erb

Description:	Labor					Subcontracts			Direct Expenses	Total
	P	SD	DT	RPR	C	Survey	Engineers			

Phase 3:

FY15 Services:

Construction / Bidding Services:

Project Management
B.3.1 - Assistance with Award
B.3.2 - Lead Pre-Construction Conference
B.3.3 - Submittal Review
B.3.4 - Monitor Construction Progress
B.3.5 - Final Inspection
B.3.7 - Record Drawings
Resident Inspection

Total Hours:

Direct Labor Rate:

Total Direct Labor:

Indirect Labor (171% of Direct Labor):

Profit (10% of Labor):

Subcontract:

Subcontract Profit (5%):

Direct Expenses:

General/Misc

Subtotal Phase 3:

Subtotal WPC 18-2 Services

Multiplier Calculation (M):

Indirect Labor + Profit / Direct Labor = IM
\$20,336 + \$3,223 / \$11,892 = 2.98

24	16	4	120	12	0					176
\$57	\$46	\$19	\$44	\$18	\$51					\$7,957
\$1,511	\$743	\$74	\$5,308	\$222	\$0					\$13,607
\$2,754	\$1,271	\$127	\$9,076	\$379	\$0					\$2,196
\$456	\$201	\$20	\$1,458	\$60	\$0		\$1,000	\$0	\$0	\$1,000
							\$50	\$0	\$0	\$50
									\$29	\$29
							\$1,050	\$0	\$29	\$24,800
										\$40,800

AFFIDAVIT OF CLAIMANT

STATE OF OKLAHOMA)

CONTRACT # RMUA WPC 19-2

) ss.

COUNTY OF TULSA)

The undersigned person, of lawful age, being first duly sworn on oath, says that all invoices to be submitted pursuant to this agreement with the Regional Metropolitan Utility Authority will be true and correct. Affiant further states that the work, services or material furnished will be completed or supplied in accordance with the plans, specifications, orders, requests or contract furnished or executed by the affiant. Affiant further states that (s)he has made no payment directly or indirectly to any elected official, officer or employee of the City of Tulsa and/or City of Broken Arrow or of any public trust where the City of Tulsa and/or City of Broken Arrow is a beneficiary, of money or any other thing of value to obtain payment of the invoice or procure the contract or purchase order pursuant to which an invoice is submitted. Affiant further certifies that (s)he has complied with all applicable laws regarding equal employment opportunity.

Company: Holloway, Updike and Bellen, Inc.

TIN: 73-0933101

Address: 905-A South 9th Street

City, State, Zip: Broken Arrow, Oklahoma 74012

Phone: 918-251-0717

Signature: 

Title: Stephen Tolar, Vice President

Subscribed and sworn to before me this 22nd day of August, 2018.


Notary Public

My commission expires:

10-01-20
Commission Number
04008955



THIS SIGNED AFFIDAVIT MUST BE RETURNED WITH THE AGREEMENT

INTEREST AFFIDAVIT

STATE OF OKLAHOMA)
)ss.
COUNTY OF TULSA)

I, Stephen Tolar, of lawful age, being first duly sworn, state that I am the agent authorized by Contractor, Engineer, Architect or provider of professional service ["Services Provider"] to submit the attached Agreement. Affiant further states that no officer or employee of the City of Tulsa and/or City of Broken Arrow either directly or indirectly owns a five percent (5%) interest or more in the Services Provider's business or such a percentage that constitutes a controlling interest. Affiant further states that the following officers and/or employees of the City of Tulsa and/or City of Broken Arrow own an interest in the Services Provider's business which is less than a controlling interest, either direct or indirect.

By SET

Signature

Title Vice President

Subscribed and sworn to before me this 22nd day of August, 2018.

Tiffany Hilton
Notary Public

My Commission Expires: 10-01-20

Notary Commission Number: 04008955

County & State Where Notarized: Tulsa, OK



The Affidavit must be signed by an authorized agent and notarized.

NON-COLLUSION AFFIDAVIT
(Required by Oklahoma law, 74 O.S. §85.22-85.25)

STATE OF OKLAHOMA)
)ss.
COUNTY OF TULSA)

I, Stephen Tolar, of lawful age, being first duly sworn, state that:
(Authorized Agent)

1. I am the authorized agent of Contractor, Engineer, Architect or provider of professional service ["Services Provider"] herein for the purposes of certifying facts pertaining to the existence of collusion between and among Services Provider and municipal officials or employees, as well as facts pertaining to the giving or offering of things of value to government personnel in return for special consideration in the letting of any contract pursuant to which this statement is attached.
2. I am fully aware of the facts and circumstances surrounding the making of the contract to which this statement is attached, and I have been personally and directly involved in the proceedings leading to the awarding of such contract; and
3. Neither the Services Provider nor anyone subject to the Services Provider's direction or control has been a party:
 - a. to any collusion with any municipal official or employee as to quantity, quality, or price in the prospective contract, or as to any other terms of such prospective contract, nor
 - b. in any discussions between Services Provider and any municipal official concerning exchange of money or other thing of value for special consideration in the letting of a contract.

By: 

Signature

Title: Vice President

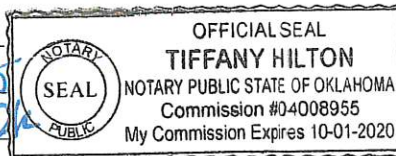
Subscribed and sworn to before me this 22nd day of August, 2018.


Notary Public

My Commission Expires: 10-01-20

Notary Commission Number: 044008955

County & State Where Notarized: Tulsa, OK



The Affidavit must be signed by an authorized agent and notarized.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/22/2018

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 Stephens Insurance, LLC
111 Center Street, Suite 100
Little Rock, AR 72201

www.stephens.com

INSURED
Holloway, Updike and Bellen, Inc.
P.O. Box 1543
Muskogee OK 74402

CONTACT NAME:
PHONE (A/C, No, Ext): 1-800-643-9891 FAX (A/C, No): 501-377-2317
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Charter Oak Fire Insurance Company	25615
INSURER B: Travelers Indemnity Company of America	25666
INSURER C: Travelers Casualty & Surety Company of America	31194
INSURER D: Travelers Property Casualty Company of America	25674
INSURER E:	
INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 43765346

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"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			680-6H440957-17-47	11/1/2017	11/1/2018	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
B	AUTOMOBILE LIABILITY <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			BA-6737M076-17-GRP	11/1/2017	11/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical Payments \$5,000
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10,000			CUP-1068T343-17-47	11/1/2017	11/1/2018	EACH OCCURRENCE \$2,000,000 AGGREGATE \$2,000,000 \$
C	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	N/A	UB-7J637827-17-47-G	11/1/2017	11/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
D	Professional Liability			106327272	7/1/2018	7/1/2019	Each Occurrence \$2,000,000 Deductible per Claim \$75,000

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

RMUA WPC 18-2, Amendment 1 -- Haikey Creek Operation and Maintenance Capital Equipment Replacements
30 Day Notice of Cancellation for all reasons other than non-payment of premium will be provided to the certificate holder.

CERTIFICATE HOLDER

CANCELLATION

Regional Metropolitan Utility Authority
Attn: Matt Vaughan
175 East 2nd Street
Suite 1400
Tulsa OK 74103

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

Ted Grace

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ACORD 25 (2016/03)

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