Policy

SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA





FROM: Economic Development Agency and Transportation Department

SUBMITTAL DATE: January 11, 2012

SUBJECT: Transportation Department Fuel Station - Approval of Construction Agreement and Project Budget

RECOMMENDED MOTION: That the Board of Supervisors:

- 1. Approve Addenda Nos. 1 and 2 to the specifications that were issued to all plan holders prior to the October 20, 2011 bid opening;
- Approve the attached construction agreement between the County of Riverside and Jenal Engineering Corporation of Lemon Grove, California, in the amount of \$299,191 and authorize the Chairman of the Board to execute the agreement on behalf of the county;
 REVIEWED BY CIP

 (Continued)

Christophe	r Hans		14	fuled			
Juan D. Perez, Di	rector		Robert Fi	eld			
Transportation De			Assistant	County Executive	e Officer/EDA		
	Current F.Y. Total Cost	:	\$516,837	In Current Year	Budget:	No	
FINANCIAL	Current F.Y. Net County	y Cost:	\$ O	Budget Adjustm	ent:	Yes	
DATA	Annual Net County Cos	st:	\$ 0	For Fiscal Year:		2011/12	
COMPANION ITE	M ON BOARD OF DI	RECTORS	AGENDA: No)			
SOURCE OF FUI	NDS: Gas Tax – (100)%)			Positions Deleted Per		
					Requires 4/5	Vote 🔽	
C.E.O. RECOMM	ENDATION:	APPROVE By Agr	is Bu	fal			
County Executiv	e Office Signature	Jennif	er L. Sargent	/			
	·	6	0				

Prev. Agn. Ref.: 3.45 of 8/16/11; 3.39 of 1/11/11

ATTACHMENTS FILED

WITH THE CLERK OF THE BOARD

District: 3

Agenda Number

Economic Development Agency and Transportation Department
Transportation Department Fuel Station – Approval of Construction Agreement and Project Budget
January 11, 2012
Page 2

RECOMMENDED MOTION: (Continued)

- 3. Authorize the Assistant County Executive Officer/EDA to administer the agreement in accordance with applicable Board policies;
- 4. Approve the total project budget of \$516,837;
- 5. Approve and direct the Auditor-Controller to make the budget adjustments as shown on Schedule A, attached; and
- 6. Delegate project management authority for the project to the Assistant County Executive Officer/EDA in accordance to applicable Board policies.

BACKGROUND:

On August 16, 2011, the Board of Supervisors approved the plans and specifications for the Transportation and Land Management Agency Fuel Station Upgrade project in Hemet, and authorized the Clerk of the Board to advertise for bids.

On October 5, 2011, fifteen contractors attended a mandatory job walk for the Transportation and Land Management Agency Fuel Station Upgrade project in Hemet. On October 20, 2011, a bid opening was conducted and Jenal Engineering Corporation was determined to be the lowest responsive and responsible bidder.

During the advertisement period, 2 addenda were issued to the plans and specifications for the project. Bidders were required to acknowledge and take into account the issued addenda on their bid proposal to be considered for award. The addenda were issued to clarify and modify the approved project contract documents. Addendum 1 included a \$3,000 allowance that will be used for the reinstallation of the existing fuel controller kiosk, and addendum 2 expanded the requirements for submittal of operation and maintenance manuals as part of the closeout documentation.

PROJECT BUDGET:

The approximate allocation of the project budget is as follows:

TOTAL	\$516,837
Contingency	46,985
Project Management, Fees, Permits	70,250
Construction	305,941
Specialty Inspections and Testing	14,511
Design	79,150

Economic Development Agency and Transportation Department
Transportation Department Fuel Station – Approval of Construction Agreement and Project Budget
January 11, 2012
Page 3

All costs associated with this project will be funded by the Gas Tax, thus no net county costs will be incurred.

Attachments:

Construction agreement Schedule A

Economic Development Agency and Transportation Department
Transportation Department Fuel Station – Approval of Construction Agreement and Project Budget
January 11, 2012
Page 4

SCHEDULE A

Increase Appropriations:

20000-3130100000-542060 - Improvements-Building

516,837

Use of Assigned Fund Balance:

20000-3130100000-321101 - Use of Restricted Program Money

516,837

AGREEMENT FORM

THIS AGRE	EMENT, entered into this day of, 201 _, hereinafter called the "Contractor", and the County of Riverside h	1 by and between nereinafter called the "Owner".
WITNESSE	TH : That the parties hereto have mutually covenanted and agreed	d as follows:
Instructions Specification	The Complete Contract includes all of the Contract Documento Bidders, the Contractor's Proposal, Wage Schedule, Payment and plus any Addenda thereto, the General Conditions, the Supplementement. All Contract Documents are intended to cooperate and be contracted in the other, or vice versa, is to be executed the	and Performance Bonds, the Plans and entary General Conditions, if applicable omplimentary so that any work called for
Project. In shereinafter	IT OF WORK: The Contractor hereby agrees to furnish all tools, eq on, labor and materials for the <u>Hemet Road Maintenance Yard Fu</u> strict accordance with the Plans and Specifications dated June 201° called the "Architect", including Addenda No. 1 and 2, thereto as listed a part hereof.	el Dispensing System Replacement 1. prepared by MRC Engineering, Inc.,
and shall be	COMPLETION: The work shall be commenced on a date to be specific completed within One Hundred Forty (140) calendar days from an or extensions of time duly granted in the manner and for the reasons the essence.	nd after said date. It is expressly agreed
full consider Conditions, the total of	ATION TO BE PAID TO CONTRACTOR: The Owner agrees to paration for the performance of the Contract, subject to additions and the sum of Two Hundred Ninety-Nine Thousand One Hundred Nithe base bid plus the following addenda: 01 and 02. The sum is to the General Conditions.	deductions as provided in the General inetv-One Dollars (\$ 299,191,00) being
Section 370 to undertake	Labor Code, Section 1861, the Contractor gives the following certifi 0 of the Labor Code which require every employer to be insured again e self-insurance in accordance with the provisions of that code, and g the performance of the work of this Contract.	nst liability for Worker's Compensation or
(5) counterp	S WHEREOF, the parties hereto on the day and year first above written parts. htractor's organization:	
Firm Name: Address: Contractor's	Jenal Engineering Corporation P.O. Box 459 Lemon Grove CA 91946 SLicense No.:	
IF OTHER	THAN CORPORATION EXECUTE HERE	
Signature:		– Affix Seal
Title:	RATION, FILL OUT FOLLOWING AND EXECUTE	If
	esident of Corporation: <u>Jennifer Westermeyer</u>	Corporation
Name of Se	ecretary of Corporation: Molly Reynolds Nouke	KI .
	is organized under the laws of State of California	-
Signature: Title:	President /	-
Owner:	COUNTY OF RIVERSIDE	
Signature:		
Title:	Chairman - Board of Supervisors	
Attest:	Clerk - Board of Supervisors	
By: Title:	\$ 	⇒
i ilie.		=

Hemet Road Maintenance Yard Fuel Dispensing System Replacement Project (20110122)

BY: MARSHAL VICTOR 1/5/12

ALL-PURPOSE ACKNOWLEDGMENT

basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.	~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
On	8	
personally appeared	8	County of Dan Viego
basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that ho/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.	3	On 12.6.2011, before me, Manganet F Wimbs, Notary Public,
and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.	8	personally appeared Jenniler & Westermeyer, who proved to me on the
laws of the State of California that the foregoing paragraph is true and correct. COMM. # 1911891 NOTARY PUBLIC -CALIFORNIA SAN DIEGO COUNTY MY COMM. EXP. NOV. 4, 2014 WITNESS my hand and official seal.	XXXXXXX	basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that ho/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
MY COMM. EXP. NOV. 4, 2014 T WITNESS MY HAND AND THE SEAT. NOTARY'S SIGNATURE	8	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
NOTARY'S SIGNATURE	Ö	NOTARY PUBLIC-CALIFORNIA WI SAN DIEGO COUNTY MY COMM. EXP. NOV. 4, 2014 WITNESS my hand and official seal.
PLACE NOTARY SEAL IN ABOVE SPACE	0000	Marqued Llumbs NOTARY'S SIGNATURE
	8	PLACE NOTARY SEAL IN ABOVE SPACE
OPTIONAL INFORMATION The information below is optional. However, it may prove valuable and could prevent fraudulent attachment of this form to an unauthorized document.	8	The information below is optional. However, it may prove valuable and could prevent fraudulent attachment
CAPACITY CLAIMED BY SIGNER (PRINCIPAL) DESCRIPTION OF ATTACHED DOCUMENT	8	CAPACITY CLAIMED BY SIGNER (PRINCIPAL) DESCRIPTION OF ATTACHED DOCUMENT
individual Corporate Officer President Title(s) Individual Title of Type of Document	8	
PARTNER(S) ATTORNEY-IN-FACT TRUSTEE(S) TRUSTEE(S) TITLE(S) NUMBER OF PAGES	8	ATTORNEY-IN-FACT ATTORNEY-IN-FACT NUMBER OF PAGES
GUARDIAN/CONSERVATOR OTHER: DATE OF DOCUMENT	8	
loonly of Riverside	8	County of Riverside
SIGNER (PRINCIPAL) IS REPRESENTING: NAME OF PERSON(S) OR ENTITY (IES) PRIGHT THUMBPRINT OF SIGNER OF SIGNER		NAME OF PERSON(S) OR ENTITY(IES) RIGHT THUMBPRINT OF SIGNER

This bond was issued in five(5) identical counterparts.

Bond No. 5125716 Premium: \$5,488.00

THE FINAL PREMIUM IS PREDICATED ON THE FINAL CONTRACT PRICE

The makers of this Bond, Jenal Engineering Corporation _, as Principal, and SureTec Insurance Company as Surety, are held and firmly bound unto County of Riverside, hereinafter called the Owner, in the sum of Two Hundred Ninety-Nine Thousand One Hundred Ninety-One Dollars (\$ 299,191.00) for the payment of which sum well and truly to be made, 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 entered into a certain contract, hereto attached, with the Owner, dated November 17th , 2011 for the Hemet Road Maintenance Yard Fuel Dispensing System Replacement Project. Now therefore, if the Principal shall well and truly perform and fulfill all the undertakings covenants, terms, conditions and agreements of said Contract during the original term of said Contract and any extension thereof that may be granted by the Owner, with or without notice to the Surety, and during the file of any guarantee required under the Contract, and shall also well and truly perform and fulfill all the undertakings, covenants, terms, conditions, and agreements of any and all duly authorized modifications of said Contract that may thereafter be made, then this obligation to be void, otherwise to remain in full force and virtue. Without notice, Surety consents to extension of time for performance, change in requirements, change in compensation or prepayment under said Contract. Signed and Sealed this ____12th ____ Day of _December ___, 2011. Jenal Engineering Corporation (Firm Name - Principal) Affix Seal P.O. Box 459, Lemon Grove, CA 91946 (Business Address) if Corporation By: (Signature - Attach Notary's Acknowledgment) J.E. C PRESIDENT VICE (Title) SureTec Insurance Company

PERFORMANCE BOND

(Business Address)

3033 5th Avenue, Suite 300 San Diego, CA 92103

Affix Corporate Seal

By:

(Signature - Attach Notary's Acknowledgment) Arturo Ayala,
Attorney-in-Fact

ATTORNEY-IN-FACT

(Title-Attach Power of Attorney)

(Corporation Name - Surety)

Hemet Road Maintenance Yard Fuel Dispensing System Replacement Project (20110122)

ALL-PURPOSE ACKNOWLEDGMENT

C	ag .
County of San Diego	SS.
On December 13, 2011 , before me,	Margaret F Wimbs , Notary Public,
personally appeared Alan Westermeyer	, who proved to mc on the
basis of satisfactory evidence to be the person(3)	whose name(*) is/axx subscribed to the within instrument and acknowledged to me that he/x/x/xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
MARGARET F. WIMBS	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
COMM. # 1911891 NOTARY PUBLIC-CALIFORNIA ON SAN DIEGO COUNTY MY COMM. EXP. NOV. 4, 2014	WITNESS my hand and official seal.
	Margaret 7 WIMS NOTARY'S SIGNATURE
	L INFORMATION as prove valuable and could prevent fraudulent attachment
The information below is optional. However, it m	
OPTIONAL The information below is optional. However, it m of this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond
The information below is optional. However, it most this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President	ay prove valuable and could prevent fraudulent attachment DESCRIPTION OF ATTACHED DOCUMENT
The information below is optional. However, it m of this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President PARTNER(S)	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond TITLE OR TYPE OF DOCUMENT
The information below is optional. However, it me of this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President PARTNER(S) ATTORNEY-IN-FACT	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond
The information below is optional. However, it most this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President PARTNER(S)	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond TITLE OR TYPE OF DOCUMENT One
The information below is optional. However, it most this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President PARTNER(S) ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER:	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond TITLE OR TYPE OF DOCUMENT One NUMBER OF PAGES
The information below is optional. However, it me of this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER Vice President PARTNER(S) ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR	DESCRIPTION OF ATTACHED DOCUMENT Performance Bond TITLE OR TYPE OF DOCUMENT One NUMBER OF PAGES 12/12/2011 DATE OF DOCUMENT

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

\\ \alpha\al	
STATE OF CALIFORNIA	١
County of Orange	}}
On 12/12/11 before me, Daniel Hucka	Abay, Notary Public Here Insert Name and Title of the Officer
personally appeared Arturo Ayala	Name(s) of Signer(s)
DANIEL HUCKABAY COMM #1796314 Notary Public-California @ ORANGE COUNTY My Comm. Expires Apr. 24, 2012 Place Notary Seal Above OPT Though the information below is not required by law, is and could prevent fraudulent removal and re-	who proved to me on the basis of satisfactory evidence to be the person(x) whose name(x) is/xxx subscribed to the within instrument and acknowledged to me that he/shx/thex executed the same in his/xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
Description of Attached Document Title or Type of Document: Performance Bond	
Document Date: 12/12/11	Number of Pages: 0πe
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer(s)	
Signer's Name: Arturo Ayala Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:	Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:

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PAYMENT BOND

THE FINAL PREMIUM IS PREDICATED ON THE FINAL CONTRACT PRICE

(Public Work - Civil Code Section 3247 et seq.)

The makers of this Bond are <u>Jenal Engineering Corporation</u> as Principal and Original Contractor and <u>SureTec Insurance Company</u>, a corporation, authorized to issue Surety Bonds in California, as Surety, and this Bond is issued in conjunction with that certain public works contract dated <u>November 17th</u>, 2011 between Principal and County of Riverside, a public entity, as owner, for **Two Hundred Ninety-Nine**Thousand One Hundred Ninety-One Dollars (\$ 299,191.00) the total amount payable. THE AMOUNT OF THIS BOND IS 100% OF SAID SUM. Said contract is for public work of the <u>Hemet Road Maintenance Yard Fuel Dispensing System Replacement Project.</u>

The beneficiaries of this Bond are as is stated in 3248 of the Civil Code and the requirements and conditions of this Bond are as is set forth in Sections 3248, 3249, 3250 and 3252 of said Code. Without notice, Surety consents to extension of time for performance, change in requirements, amount of compensation, or prepayment under said Contract.

Signed and Sealed this 12th Day of December 2011.	
Jenal Engineering Corporation (Firm Name - Principal)	
P.O. Box 459, Lemon Grove, CA 91946	Affix Seal
(Business Address) By:	if Corporation
(Signature - Attach Notary's Acknowledgment) Vice pressure J.E.C. (Title)	
SureTec Insurance Company	
(Corporation Name - Surety)	
3033 5th Avenue, Suite 300, San Diego, CA 92103 (Business Address) By: (Signature - Attached Notery's Acknowledgment) Arturo Ayala, Attorney-in-Fact	Affix Corporate Seal
ATTORNEY-IN-FACT	

Hernet Road Maintenance Yard Fuel Dispensing System Replacement Project (20110122)

(Title-Attach Power of Attorney)

ALL-PURPOSE ACKNOWLEDGMENT

State of California)
County of San Diego	SS.
	Margaret F Wimbs , Notary Public,
personally appeared Alan Westermeyer	, who proved to mc on the
basis of satisfactory evidence to be the person(s	whose name(*) is/****(subscribed to the within instrument and acknowledged to me that he/****(*****)**(*******)**, and that same in his/****(*********)** signature(*) on the instrument the person(*), or the entity upon behalf of which the person(*) acted, executed the instrument.
MARGARET F. WIMBS	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
NOTARY PUBLIC-CALIFORNIA SAN DIEGO COUNTY MY COMM. Exp. Nov. 4, 2014	WITNESS my hand and official seal.
	Margaret 2 WWS NOTARY'S SIGNATURE
	L INFORMATION may prove valuable and could prevent fraudulent attachment
CAPACITY CLAIMED BY SIGNER (PRINCIPAL)	DESCRIPTION OF ATTACHED DOCUMENT
☐ INDIVIDUAL	Payment Bond
CORPORATE OFFICER Vice President	TITLE OR TYPE OF DOCUMENT
PARTNER(S)	One
ATTORNEY-IN-FACT	NUMBER OF PAGES
☐ TRUSTEE(S) ☐ GUARDIAN/CONSERVATOR	
OTHER:	12/12/2011 DATE OF DOCUMENT
	DATE OF DOCUMENT
	OTHER
SIGNER (PRINCIPAL) IS REPRESENTING:	212
NAME OF PERSON(S) OR ENTITY(IES) Jenal Engineering Corporation	RIGHT thumberint of Signer of Oct
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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

STATE OF CALIFORNIA	l	
County of Orange		
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
On 12/12/11 before me, Daniel Huck	Abay, Notary Public Here Insert Name and Title of the Officer	
II. Arturo Avola		
personally appeared Arturo Ayala	Name(s) of Signer(s)	
DANIEL HUCKABAY COMM. #1796314 Notary Public-Culifornia ORANGE COUNTY My Comm. Expires Apr. 24, 2012	who proved to me on the basis of sabe the person(s) whose name(s) is/swithin instrument and acknowledged executed the same in his/mer/their au and that by his/mer/their signature(s) person(s), or the entity upon behalf cacted, executed the instrument. I certify under PENALTY OF PERJUTHE State of California that the foregonal correct. Witness my hand and official seal. Signature	are subscribed to the to me that he/she/they thorized capacity(ies), on the instrument the of which the person(s) IRY under the laws of bing paragraph is true
Place Notary Seal Above	Signature of Notary Public Daniel Hue	ckabay
OPT	IONAL ———	
Though the information below is not required by law, is and could prevent fraudulent removal and r	it may prove valuable to persons relvi	ng on the document locument.
Description of Attached Document		
Title or Type of Document: Payment Bond		
Document Date: 12/12/11	Number of Pages:	0ne
Signer(s) Other Than Named Above:		
Capacity(ies) Claimed by Signer(s)		
Signer's Name: Arturo Ayala Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Top of thumb here	Signer's Name: Individual Corporate Officer — Title(s): Attorney in Fact Trustee Guardian or Conservator Other:	
Signer Is Representing:	Signer Is Representing:	

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POA #: 510023

SureTec Insurance Company LIMITED POWER OF ATTORNEY

Know All Men by These Presents, That SURETEC INSURANCE COMPANY (the "Company"), a corporation duly organized and existing under the laws of the State of Texas, and having its principal office in Houston, Harris County, Texas, does by these presents make, constitute and appoint

Arturo Ayala, Daniel Huckabay, Dwight Reilly

its true and lawful Attorney-in-fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include waivers to the conditions of contracts and consents of surety for:

Five Million and 00/100 Dollars (\$5,000,000.00)

and to bind the Company thereby as fully and to the same extent as if such bond were signed by the President, sealed with the corporate seal of the Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney-in-Fact may do in the and is made under and by authority of the following premises. Said appointment shall continue in force until 10/31/2013 resolutions of the Board of Directors of the SureTec Insurance Company:

Be it Resolved, that the President, any Vice-President, any Assistant Vice-President, any Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on

behalf of the Company subject to the following provisions:

Attorney-in-Fact may be given full power and authority for and in the name of and of behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements or indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be binding upon the Company as if signed by the President and sealed and effected by the Corporate Secretary.

Be it Resolved, that the signature of any authorized officer and seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signature or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached. (Adopted at a meeting held on 20th of April,

In Witness Whereof, SURETEC INSURANCE COMPANY has caused these presents to be signed by its President, and its corporate seal to be hereto affixed this 3rd day of September, A.D. 2010.

State of Texas County of Harris

ss:

John Knox Jr..

On this 3rd day of September, A.D. 2010 before me personally came John Knox Jr., to me known, who, being by me duly sworn, did depose and say, that he resides in Houston, Texas, that he is President of SURETEC INSURANCE COMPANY, the company described in and which executed the above instrument; that he knows the seal of said Company; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Company; and that he signed his name thereto by like order

> JACQUELYN MALDONADO Notary Public, State of Texas My Commission Expires May 18, 2013

I, M. Brent Beaty, Assistant Secretary of SURETEC INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect; and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

Given under my hand and the seal of said Company at Houston, Texas this 12th day of 2011

M. Brent Beaty, Assistant Secretary

Any instrument issued in excess of the penalty stated above is totally void and without any validity. For verification of the authority of this power you may call (713) 812-0800 any business day between 8:00 am and 5:00 pm CST.

CONTRACTOR'S CERTIFICATE REGARDING WORKERS' COMPENSATION

Labor Code Section 3700

Every employer, except the State and all political subdivisions or institutions thereof, shall secure the payment of compensation in one or more of the following ways:

- (a) By being insured against liability to pay compensation in one or more insurers duly authorized to write compensation insurance in this State.
- (b) By securing from the Director of Industrial Relations, a Certificate of Consent to Self-Insure, which may be given upon furnishing proof satisfactory to the Director of Industrial Relations of ability to self-insure and to pay any compensation that may become due to his employees

I am aware of the provisions of Section 3700 of the Labor Code which requires every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions of that Code, and I will comply with such provisions before commencing the performance of this Contract.

Principal

Alan P Westermeyer

Principal

Vice President, Jenal Engineering Corporation

Title

(In accordance with Article 5 [commencing at Section 1860], Chapter, Part 7, Division 2 of the Labor Code, the above Certificate must be signed and filed with the Owner prior to performing any work under this Contract.)

Hemet Road Maintenance Yard Fuel Dispensing System Replacement Project (20110122)

CERTIFICATE OF LIABILITY INSURANCE

JENAL-1

OP ID: SJ

DATE (MM/DD/YYYY)

12/06/11

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 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). 619-291-7777 PRODUCER PHONE (A/C, No, Ext): E-MAIL Kettering-Rose Insurance FAX (A/C, No): 619-291-7776 3545 Camino Del Rio S., Ste. A San Diego, CA 92108 ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Westchester Surplus Lines Ins. INSURER B: General Insurance Company INSURED Jenal Engineering Corporation Alan & Jennifer Westermeyer 19682 INSURER C: Hartford Fire Ins. Co. P.O. Box 459 INSURER D : Lemon Grove, CA 91946 INSURER E: INSURER F **CERTIFICATE NUMBER:** REVISION NUMBER: **COVERAGES** 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. ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER 1,000,000 GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) G22074982006 06/01/11 06/01/12 50,000 X X \$ COMMERCIAL GENERAL LIABILITY 5.000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$ 1,000,000 Owner/Cont Prot. PERSONAL & ADV INJURY \$ 2,000,000 X Pollution Liab GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ GEN'L AGGREGATE LIMIT APPLIES PER 1,000,000 Poll/Prof \$ POLICY COMBINED SINGLE LIMIT (Ea accident) 1,000,000 **AUTOMOBILE LIABILITY** 06/01/12 BODILY INJURY (Per person) X 24CC2652403 06/01/11 \$ Χ В ANY AUTO ALL OWNED AUTOS SCHEDULED BODILY INJURY (Per accident) \$ AUTOS NON-OWNED PROPERTY DAMAGE \$ X X HIRED AUTOS AUTOS \$ 4,000,000 UMBRELLA LIAB EACH OCCURRENCE \$ X OCCUR 06/01/11 06/01/12 **EXCESS LIAB** G22074994005 X AGGREGATE CLAIMS-MADE \$ \$ DED RETENTION \$ WC STATU-TORY LIMITS OTH-WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT \$ N/A E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 264,495 72UUMKT3976 06/01/11 06/01/12 Equip Equipment Floater 264,495 Leased DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Re: Hemet Road Maintenance Yard Fuel Dispensing Replacement Project. Riverside County is named as additional insured in regards to the General Liability and Automobile policies per the attached endorsements. See holder notes for additional wording. CANCELLATION CERTIFICATE HOLDER **CTYRIVE** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN County of Riverside ACCORDANCE WITH THE POLICY PROVISIONS. **Economic Development Agency** 3403 10th Street, Suite 500 AUTHORIZED REPRESENTATIVE Riverside, CA 92501 Kohin Ketting

NOTEPAD:

HOLDER CODE

CTYRIVE INSURED'S NAME Jenal Engineering Corporation

JENAL-1 OP ID: SJ PAGE 2

DATE 12/06/11

Waiver of Subrogation applies to the General Liability and Automobile policies per the attached endorsements.

*30 day notice of cancellation, 10 day notice of cancellation in the event of non-payment of premium.

Policy Symbol	Policy Number	Policy Period			Effective Date of Endorsement
GLW	G22074982 006	06/01/2011	TO	06/01/2012	

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED ENDORSEMENT OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE CONTRACTOR'S POLLUTION LIABILITY COVERAGE

SCHEDULE:

Name of Person or Organization:

Any person or organization that is an owner of real property or personal property on which you are performing operations, or a contractor on whose behalf you are performing operations, and only at the specific written request of such person or organization to you, wherein such request is made prior to commencement of operations.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- A. SECTION II WHO IS AN INSURED is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.
- B. With respect to the insurance afforded to these additional insureds, the following exclusion is added:

2. Exclusions

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 site 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 a part of the same project.

olicy Symbol	ering Corporation	Policy Period			Effective Date of Endorsement
GLW	G22074982 006	06/01/2011	то	06/01/2012	Ellective Date of Ellipsisement

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED ENDORSEMENT – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE CONTRACTOR'S POLLUTION LIABILITY COVERAGE

SCHEDULE

Any person or organization that is an owner of real property or personal property on which you are performing operations, or a contractor on whose behalf you are performing operations, and only at the specific written request of such person or organization to you, wherein such request is made prior to commencement of operations.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

SECTION II - WHO IS AN INSURED is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

All other terms and conditions remain the same.

Named Insured					Endorsement Number
	ering Corporation	1			
Policy Symbol GLW	Policy Number G22074982 006	Policy Period 06/01/2011	то	06/01/2012	Effective Date of Endorsement
	Insurance Company)				
Westchester :	Surplus Lines Insurance	Company			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART CONTRACTORS POLLUTION LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

Any person or organization that is an owner of real property or personal property on which you are performing operations, or a contractor on whose behalf you are performing operations, and only at the specific written request of such person or organization to you, wherein such request is made prior to commencement of operations.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

The TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US Condition is amended by the addition of the following:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or your work done under a contract with that person or organization and included in the products-completed operations hazard. This waiver applies only to the person or organization shown in the Schedule above.

All other terms and conditions remain the same.

Policy Number: 24CC2652403

COMMERCIAL AUTO CA 71 10 03 07

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AUTO PLUS ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

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

EXTENDED CANCELLATION CONDITION

Paragraph **2.b.** of the CANCELLATION Common Policy Condition is replaced by the following:

b. 60 days before the effective date of cancellation if we cancel for any other reason.

TEMPORARY SUBSTITUTE AUTO — PHYSICAL DAMAGE COVERAGE

Under paragraph C. — CERTAIN TRAILERS, MOBILE EQUIPMENT AND TEMPORARY SUBSTITUTE AUTOS of SECTION 1 — COVERED AUTOS, the following is added:

If Physical Damage coverage is provided by this Coverage Form, then you have coverage for:

Any "auto" you do not own while used with the permission of its owner as a temporary substitute for a covered "auto" you own that is out of service because of its breakdown, repair, servicing, "loss" or destruction.

BROAD FORM NAMED INSURED

SECTION II — LIABILITY COVERAGE — A.1. WHO IS AN INSURED provision is amended by the addition of the following:

d. Any business entity newly acquired or formed by you during the policy period provided you own 50% or more of the business entity and the business entity is not separately insured for Business Auto Coverage. Coverage is extended up to a maximum of 180 days following acquisition or formation of the business entity. Coverage under this provision is afforded only until the end of the policy period.

BLANKET ADDITIONAL INSURED

SECTION II — LIABILITY COVERAGE — **A.1.** WHO IS AN INSURED provision is amended by the addition of the following:

- e. Any person or organization for whom you are required by an "insured contract" to provide insurance is an "insured", subject to the following additional provisions:
 - (1) The "insured contract" must be in effect during the policy period shown in the Declarations, and must have been executed prior to the "bodily injury" or "property damage".
 - (2) This person or organization is an "insured" only to the extent you are liable due to your ongoing operations for that insured, whether the work is performed by you or for you, and only to the extent you are held liable for an "accident" occurring while a covered "auto" is being driven by you or one of your employees.
 - (3) There is no coverage provided to this person or organization for "bodily injury" to its employees, nor for "property damage" to its property.
 - (4) Coverage for this person or organization shall be limited to the extent of your negligence or fault according to the applicable principles of comparative negligence or fault.
 - (5) The defense of any claim or "suit" must be tendered by this person or organization as soon as practicable to all other insurers which potentially provide insurance for such claim or "suit".

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- (6) The coverage provided will not exceed the lesser of:
 - (a) The coverage and/or limits of this policy;or
 - (b) The coverage and/or limits required by the "insured contract".
- (7) A person's or organization's status as an "insured" under this subparagraph d ends when your operations for that "insured" are completed.

EMPLOYEE AS INSURED

Under Paragraph **A.** of Section **II** — LIABILITY COVERAGE item f. is added as follows:

Your "employee" while using his owned "auto", or an "auto" owned by a member of his or her household, in your business or your personal affairs, provided you do not own, hire or borrow that "auto". This coverage is excess to any other collectible insurance coverage.

FELLOW EMPLOYEE COVERAGE

Exclusion **5.** FELLOW EMPLOYEE of SECTION **II** — LIABILITY COVERAGE — **B.** EXCLUSIONS is amended by the addition of the following:

However, this exclusion does not apply if the "bodily injury" results from the use of a covered "auto" you own or hire, and provided that any coverage under this provision only applies in excess over any other collectible insurance.

BLANKET WAIVER OF SUBROGATION

We waive the right of recovery we may have for payments made for "bodily injury" or "property damage" on behalf of the persons or organizations added as "insureds" under Section II — LIABILITY COVERAGE — A.1.D. BROAD FORM NAMED INSURED and A.1.e. BLANKET ADDITIONAL INSURED.

PHYSICAL DAMAGE — ADDITIONAL TRANS-PORTATION EXPENSE COVERAGE

The first sentence of paragraph A.4. of SECTION III — PHYSICAL DAMAGE COVERAGE is amended as follows:

We will pay up to \$50 per day to a maximum of \$1,500 for temporary transportation expense incurred by you because of the total theft of a covered "auto" of the private passenger type.

PERSONAL EFFECTS COVERAGE

A. SECTION III — PHYSICAL DAMAGE COVER-AGE, A.4. COVERAGE EXTENSIONS, is amended by adding the following:

c. Personal Effects Coverage

For any Owned "auto" that is involved in a covered "loss", we will pay up to \$500 for "personal effects" that are lost or damaged as a result of the covered "loss", without applying a deductible.

EXTRA EXPENSE — BROADENED COVERAGE

Paragraph A. — COVERAGE of SECTION III — PHYSICAL DAMAGE COVERAGE is amended to add:

5. We will pay for the expense of returning a stolen covered "auto" to you.

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.

NEW VEHICLE REPLACEMENT COST

Under Paragraph **C** — LIMIT OF INSURANCE of Section **III** — PHYSICAL DAMAGE COVERAGE section **2** is amended as follows:

- 2. An adjustment for depreciation and physical condition will be made in determining actual cash value in the event of a total loss. However, in the event of a total loss to your "new vehicle" to which this coverage applies, as shown in the declarations, we will pay at your option:
 - a. The verifiable "new vehicle" purchase price you paid for your damaged vehicle, not including any insurance or warranties purchased:
 - b. The purchase price, as negotiated by us, of a new vehicle of the same make, model and equipment, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership. If the same model is not available pay the purchase price of the most similar model available;

c. The market value of your damaged vehicle, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership.

This coverage applies only to a covered "auto" of the private passenger, light truck or medium truck type (20,000 lbs or less gross vehicle weight) and does not apply to initiation or set up costs associated with loans or leases.

TWO OR MORE DEDUCTIBLES

Under SECTION III — PHYSICAL DAMAGE COV-ERAGE, if two or more "company" policies or coverage forms apply to the same accident, the following applies to paragraph **D**. Deductible:

- a. If the applicable Business Auto deductible is the smaller (or smallest) deductible it will be waived; or
- b. If the applicable Business Auto deductible is not the smaller (or smallest) deductible it will be reduced by the amount of the smaller (or smallest) deductible; or
- c. If the loss involves two or more Business Auto coverage forms or policies the smaller (or smallest) deductible will be waived.

For the purpose of this endorsement "company" means:

- a. Safeco Insurance Company of America
- b. American States Insurance Company
- c. General Insurance Company of America
- d. American Economy Insurance Company
- e. First National Insurance Company of America
- f. American States Insurance Company of Texas
- g. American States Preferred Insurance Company
- h. Safeco Insurance Company of Illinois

LOAN/LEASE GAP COVERAGE

Under paragraph ${\bf C}$ — LIMIT OF INSURANCE of SECTION III — PHYSICAL DAMAGE COVERAGE, the following is added:

4. The most we will pay for a total "loss" in any one "accident" is the greater of the following, subject to a \$1,500 maximum limit:

- Actual cash value of the damaged or stolen property as of the time of the "loss", less an adjustment for depreciation and physical condition; or
- **b.** Balance due under the terms of the loan or lease that the damaged covered "auto" is subject to at the time of the "loss", less any one or all of the following adjustments:
 - (1) Overdue payment and financial penalties associated with those payments as of the date of the "loss".
 - (2) Financial penalties imposed under a lease due to high mileage, excessive use or abnormal wear and tear.
 - (3) Costs for extended warranties, Credit Life Insurance, Health, Accident or Disability Insurance purchased with the loan or lease.
 - (4) Transfer or rollover balances from previous loans or leases.
 - (5) Final payment due under a "Balloon Loan".
 - (6) The dollar amount of any un-repaired damage that occurred prior to the "total loss" of a covered "auto".
 - (7) Security deposits not refunded by a lessor.
 - (8) All refunds payable or paid to you as a result of the early termination of a lease agreement or any warranty or extended service agreement on a covered "auto".
 - (9) Any amount representing taxes.
 - (10) Loan or lease termination fees

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.

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

The requirement in LOSS CONDITION **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

EΡ

"accident" applies only when the "accident" is known to:

- (1) You, if you are an individual;
- (2) A partner, if you are a partnership; or
- (3) An executive officer or insurance manager, if you are a corporation.

UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

SECTION IV — BUSINESS AUTO CONDITIONS - ${\bf B.2.}$ is amended by the addition of the following:

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. However, this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

HIRED AUTO — LIMITED WORLD WIDE COVER-AGE

Under Section IV — Business Conditions, Paragraph B.7.b.e(1) is replaced by the following:

(1) The "accident" or "loss" results from the use of an "auto" hired for 30 days or less.

RESULTANT MENTAL ANGUISH COVERAGE

SECTION V — DEFINITIONS — C. is replaced by the following:

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

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.

The most we will pay for loss to any hired "auto" is \$50,000 or Actual Cash Value or Cost of Repair, whichever is smallest, minus a deductible. The deductible will be equal to the largest deductible applicable to any owned "auto" of the private passenger or light truck type for that coverage. 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.

HIRED AUTO PHYSICAL DAMAGE COVERAGE — LOSS OF USE

SECTION III — PHYSICAL DAMAGE A.4.b. Form does not apply.

Subject to a maximum of \$1,000 per accident, we will cover loss of use of a hired "auto" if it results from an accident, you are legally liable and the lessor incurs an actual financial loss.

RENTAL REIMBURSEMENT COVERAGE

- A. We will pay for rental reimbursement expenses incurred by you for the rental of an "auto" because of a covered "loss" to a covered "auto". Payment applies in addition to the otherwise applicable amount of each coverage you have on a covered "auto". No deductibles apply to this coverage.
- B. We will pay only for those expenses incurred during the policy period beginning 24 hours after the "loss" and ending, regardless of the policy's expiration, with the lesser of the following number of days:
 - The number of days reasonably required to repair or replace the covered "auto". If "loss" is caused by theft, this number of days is added to the number of days it takes to locate the covered "auto" and return it to you.
 - 2. 30 days.
- C. Our payment is limited to the lesser of the following amounts:
 - 1. Necessary and actual expenses incurred.
 - 2. \$50 per day.
- D. This coverage does not apply while there are spare or reserve "autos" available to you for your operations.
- E. If "loss" results from the total theft of a covered "auto" of the private passenger type, we will pay under this coverage only that amount of your rental reimbursement expenses which is not already provided for under the PHYSICAL DAM-AGE COVERAGE Coverage Extension.
- F. The Rental Reimbursement Coverage described above does not apply to a covered "auto" that is described or designated as a covered "auto" on

Rental Reimbursement Coverage Form CA 99 23.

AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT COVERAGE

A. Coverage

- 1. We will pay with respect to a covered "auto" for "loss" to any electronic equipment that receives or transmits audio, visual or data signals and that is not designed solely for the reproduction of sound. This coverage applies only if the equipment is permanently installed in the covered "auto" at the time of the "loss" or the equipment is removable from a housing unit which is permanently installed in the covered "auto" at the time of the "loss", and such equipment is designed to be solely operated by use of the power from the "auto's" electrical system, in or upon the covered "auto".
- We will pay with respect to a covered "auto" for "loss" to any accessories used with the electronic equipment described in paragraph A.1. above.

However, this does not include tapes, records or discs.

3. If Audio, Visual and Data Electronic Equipment Coverage form CA 99 60 or CA 99 94 is attached to this policy, then the Audio, Visual and Data Electronic Equipment Coverage described above does not apply.

B. Exclusions

The exclusions that apply to PHYSICAL DAM-AGE COVERAGE, except for the exclusion relating to Audio, Visual and Data Electronic Equipment, also apply to this coverage. In addition, the following exclusions apply:

We will not pay for either any electronic equipment or accessories used with such electronic equipment that is:

 Necessary for the normal operation of the covered "auto" for the monitoring of the covered "auto's" operating system; or

2. Both:

- a. an integral part of the same unit housing any sound reproducing equipment designed solely for the reproduction of sound if the sound reproducing equipment is permanently installed in the covered "auto"; and
- b. permanently installed in the opening of the dash or console normally used by

the manufacturer for the installation of a radio.

C. Limit of Insurance

With respect to this coverage, the LIMIT OF IN-SURANCE provision of PHYSICAL DAMAGE COVERAGE is replaced by the following:

- The most we will pay for "loss" to audio, visual or data electronic equipment and any accessories used with this equipment as a result of any one "accident" is the lesser of:
 - a. The actual cash value of the damaged or stolen property as of the time of the "loss"; or
 - **b.** The cost of repairing or replacing the damaged or stolen property with other property of like kind and quality.
 - **c.** \$1,000.
- 2. An adjustment for depreciation and physical condition will be made in determining actual cash value at the time of the "loss".
- If a repair or replacement results in better than like kind or quality, we will not pay for the amount of the betterment.

D. Deductible

- 1. If "loss" to the audio, visual or data electronic equipment or accessories used with this equipment is the result of a "loss" to the covered "auto" under the Business Auto Coverage Form's Comprehensive or Collision Coverage, then for each covered "auto" our obligation to pay for, repair, return or replace damaged or stolen property will be reduced by the applicable deductible shown in the Declarations. Any Comprehensive Coverage deductible shown in the Declarations does not apply to "loss" to audio, visual or data electronic equipment caused by fire or lightning.
- 2. If "loss" to the audio, visual or data electronic equipment or accessories used with this equipment is the result of a "loss" to the covered "auto" under the Business Auto Coverage Form's Specified Causes of Loss Coverage, then for each covered "auto" our obligation to pay for, repair, return or replace damaged or stolen property will be reduced by a \$100 deductible.
- If "loss" occurs solely to the audio, visual or data electronic equipment or accessories used with this equipment, then for each covered "auto" our obligation to pay for, repair,

- return or replace damaged or stolen property will be reduced by a \$100 deductible.
- 4. In the event that there is more than one applicable deductible, only the highest deductible will apply. In no event will more than one deductible apply.
- **SECTION V DEFINITIONS** is amended by adding the following:
 - Q. "Personal effects" means your tangible property that is worn or carried by you, except for tools, jewelry, money, or securities.
 - R. "New vehicle" means any "auto" of which you are the original owner and the "auto" has not been previously titled and is less than 365 days past the purchase date.



P.O. BOX 420807, SAN FRANCISCO, CA 94142-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ISSUE DATE: 12-06-2011

GROUP: 000467
POLICY NUMBER: 0000518-2011
CERTIFICATE ID: 234
CERTIFICATE EXPIRES: 04-01-2012
04-01-2011/04-01-2012

COUNTY OF RIVERSIDE ECONOMIC DEVELOPMENT AGENCY 3403 10TH ST STE 500 RIVERSIDE CA 92501-3658 SD

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon 30 days advance written notice to the employer.

We will also give you 30 days advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policy listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate of insurance may be issued or to which it may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions, and conditions, of such policy.

Authorized Representative

President and CEO

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000 PER OCCURRENCE.

ENDORSEMENT #1600 - JENNIER ROBIN WESTERMEYER PRESIDENT - EXCLUDED.

ENDORSEMENT #1600 - ALAN PAUL WESTERMEYER VICE PRESIDENT - EXCLUDED.

ENDORSEMENT #2065 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE 04-01-2001 IS ATTACHED TO AND FORMS A PART OF THIS POLICY.

ENDORSEMENT #2570 ENTITLED WAIVER OF SUBROGATION EFFECTIVE 2011-12-06 IS ATTACHED TO AND FORMS A PART OF THIS POLICY. THIRD PARTY NAME: COUNTY OF RIVERSIDE

EMPLOYER

JENAL ENGINEERING CORPORATION PO BOX 459 LEMON GROVE CA 91946 SD

[B1P,SD]

PRINTED: 12-06-2011