

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

568A



FROM: TLMA - Transportation Department

SUBMITTAL DATE:
November 20, 2014

SUBJECT: Machado Street Sidewalk Improvement Project, Community of West Elsinore. 1st/1st District; [\$507,103]; State Funds 47%, Local Funds 53%

RECOMMENDED MOTION: That the Board of Supervisors:

1. Accept the low bid of R-JS General Construction of Riverside, CA in the amount of \$507,103; and
2. Award the contract to R-JS General Construction and authorize the Chairman of the Board to execute the contract documents; and
3. Approve the project's proposed budget as shown on Attachment "A."

Patricia Romo
Assistant Director of Transportation
for Juan C. Perez
Director of Transportation and Land Management

JCP:jj:rr

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (Per Exec. Office)
COST	\$ 507,103	\$ 0	\$ 507,103	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	

SOURCE OF FUNDS: State Safe Routes to School (47%), Gas Tax (ABX8-9 Mar 2010 New HUTA) (53%). There are no General Funds used in this project.

Budget Adjustment: No
For Fiscal Year: 2014/2015

C.E.O. RECOMMENDATION:

APPROVE

BY:
Rohini Dasika

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Benoit, seconded by Supervisor Tavaglione and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Tavaglione, Benoit and Ashley
Nays: None
Absent: None
Date: December 9, 2014
xc: Transp.

Kecja Harper-Ihem
Clerk of the Board
By:
Deputy

Prev. Agn. Ref.: 09/30/14, Item 3-28 | District: 1/1 | Agenda Number:

3-33

FORM APPROVED COUNTY COUNSEL
BY:
ANITA C. WILLIS
DATE: 11-25-14

Departmental Concurrence

- A-30
- 4/5 Vote
- Positions Added
- Change Order

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA
FORM 11: Machado Street Sidewalk Improvement Project, Community of West Elsinore. 1st/1st District;
[\$507,103]; State Funds 47%, Local Funds 53%

DATE: November 20, 2014

PAGE: 2 of 2

BACKGROUND:

Summary

By Minute Order dated September 30, 2014 (Agenda Item 3-28), the Board of Supervisors authorized the Clerk of the Board to advertise for the construction of approximately 575 linear feet of sidewalk and associated improvements on the southerly side of Machado Street, from Tiller Lane to Lakeside High School Stadium Way, and approximately 1,320 linear feet of sidewalk on the northerly side, from Golondrina Street to the County of Riverside/City of Lake Elsinore border line, in the community of West Elsinore.

Seven bids were received on October 29, 2014, ranging from \$507,103 to \$758,005. The basis for the selection of a contractor is the lowest responsive and responsible bid. The lowest responsible bid was submitted by R-JS General Construction of Riverside, CA in the amount of \$507,103, which is \$36,068 (7.67%) more than the Engineer's Estimate.

The purpose of this project is to provide a safer pedestrian path for travel to and from the Lakeside High School. All existing access ramps that do not meet the current Americans with Disabilities Act (ADA) requirements will be improved or replaced to meet the new requirements. Several new access ramps will also be added. The existing obstructions, such as fences, road signs, irrigation systems, trees, and water meters will be removed or relocated as needed. Other project features include new curb and gutter, cross gutter, and accessible driveways.

Additional improvements include road widening on the southerly half between Tiller Lane and the Lakeside High School Stadium Way and on the northerly half near Marcolesco Lane.

The construction duration set for this project is for 40 working days, and construction is anticipated to be completed by March 2015.

The contractor is qualified to perform the work outlined in the bid. The contractor will execute the contract and provide bonds and insurance documents after Board of Supervisor award approval.

Project Number: C2-0134

Impact on Residents and Businesses

The proposed improvements will benefit the project area by significantly improving the existing infrastructure, as well as providing upgrades to enhance safety.

SUPPLEMENTAL:

Additional Fiscal Information

The contract is recommended to be awarded to R-JS General Construction for the total amount of \$507,103. The project is partially funded with State Safe Routes to School (SR2S) Funds, for which the County successfully competed. The remainder will be funded with Gas Tax (ABX8-9 Mar 2010 New Huta).

There are no General Funds used in this project.

Contract History and Price Reasonableness

N/A

Form 11 Attachment

Contract/Lease/Purchase Summary Data

Contract (for Services)

- Approval/Renewal
- Sole Source
- Personal Services
- Independent Contractor
- Other than Low Bid
- Change Order
- Public Works

Lease

- Approval/Renewal
- Multi-Year Lease
- Equipment
- Real Property
- Change Order

Purchase (for Materials)

- Sole Source
- Other than Low Bid
- Change Order

Selection Committee Member Names (RFP=s Only)

User Department:	Transportation Department
-------------------------	---------------------------

N/A

Vendor/Lessor Name:	R-JS General Construction
Vendor/Lessor Location:	Riverside, CA

Minority Status:

M W DV None

Local Preference Applied: Yes No N/A

Local Preference Award Cost \$
(5% maximum preference)

Local Preference FYTD: Cost \$

of Orders

Applicable Board Policy #

Comments:

RFQ/RFP Process:

Date Mailed:
Response Date:
of Responses:
of Qualified Responses:

Bidding Process:

Bid Range: \$507,103.65 to \$758,005.78
Local Bid Range: N/A
Responsive and Responsible Bid Range: \$507,103.65 to \$758,005.78

Note: Selection of low bid based on the sum of all bid schedules, whether or not all bid schedules are awarded.

Contract/Lease Renewals Only

Existing Agreement Items

Proposed Agreement Items

1. Rates
2. Terms
3. Conditions
4. Legal Issues
5. Accountability
6. Utilities

(continue on blank sheet if necessary)

NOTE: COMPETITIVELY BID PUBLIC WORKS CONTRACT

WHEN DOCUMENT IS FULLY EXECUTED RETURN
CLERK'S COPY

to Riverside County Clerk of the Board, Stop 1010
Post Office Box 1147, Riverside, Ca 92502-1147
Thank you.

Riverside County Contract No. 14-11-002

Contract

THIS CONTRACT is entered into at Riverside, California as of the date set forth below is between County of Riverside hereafter called "County" and **R-JS General Construction**, hereafter called "Contractor".

W I T N E S S E T H

Recitals:

1. Contractor has submitted to County his Contractor's Proposal for the construction of County Project, Machado Street, Sidewalk Improvement Project, Between Tiller Lane and Alvarado Street, In the Community of West Elsinore, Project No. C2-0134, in strict accordance with the Contract Documents identified below and County has accepted said Proposal.
2. Contractor states that he has reexamined his Contractor's Proposal and found it to be correct, has ascertained that his subcontractors are properly licensed and possess the requisite skill and forces, has reexamined the site and Contract Documents and is of the opinion that he can presently do the work in accordance with the Contract Documents for the money set forth in his Proposal to be paid as provided in the Contract Documents.

Agreement:

It is agreed by the parties as follows:

1. Contract Documents

The entire Contract consists of the following: (a) The Construction Contract, (b) The Notice Inviting Bids. (c) The Instruction to Bidders, (d) The Bid, (e) The Bid Bond, (f) The Payment Bond, (g) The Performance Bond, (h) The General Conditions, (i) The Special Provisions, (j) The Standard Specifications of the State of California Department of Transportation edition of **May 2006** as modified in other portions of the Contract Documents and as amended by the State of California Department of Transportation, (k) The Standard Plans of the Department of Transportation identified on the plans or in the Special Provisions, (l) The Plans, (m) Addenda **None**, (n) The Determination of Prevailing Wage Rates for Public Work, (o) Any Change Orders issued, (p) Any additional or supplemental specifications, notice, instructions and drawings issued in accordance with the provisions of the Contract Documents. All of said Documents presently in existence are by this reference incorporated herein with like effect as if here set forth in full and upon the proper issuance of other documents they shall likewise be deemed incorporated. The Bid Bond is exonerated upon execution of this Contract and the Payment Bond and Performance Bond.

2. The Work

Contractor shall do all tasks necessary to construct the work generally described in Recital No. 1 in accordance with the Contract Documents.

3. Liquidated Damages and Time of Completion

Attention is directed to the provisions in Section 8-1.06, "Time of Completion", and in Section 8-1.07 "Liquidated Damages", of the Standard Specifications and these Special Provisions.

Standard Specification Section 8-1.03, "Beginning of Work" is modified to read as follows:

The Contractor shall begin work within fifteen (15) calendar days, or as revised in the Special Provisions, of the date stated within the written "Notice to Proceed".

The Contractor shall notify the Engineer, in writing, of the Contractor's intent to begin work at least 72 hours before work is begun. If the project has more than one (1) location of work, Contractor shall submit a separate notice for each location. The notice shall be delivered to the Transportation Department's Construction Engineer and shall specify the date the Contractor intends to start at said location.

Should the Contractor begin work in advance of receiving a written "Notice to Proceed", any work performed by the Contractor in advance of the date stated in the "Notice to Proceed" shall be considered as having been done by the Contractor at his own risk and as a volunteer and subject to the following:

- A. The Contractor shall, on commencing operations, take all precautions required for public safety and shall observe all the provisions in the Specifications and the Special Provisions.
- B. All work done according to the Contract, prior to the issuance of the "Notice to Proceed", will be considered authorized work and will be paid for as provided in the contract.
- C. The Contractor shall not be entitled to any additional compensation or an extension of time for any delay, hindrance or interference caused by or attributable to commencement of work prior to the issuance of the "Notice to Proceed".

4. Compensation

Contractor shall be paid in the manner set forth in the Contract Documents the amount of his Proposal as accepted by County, the above rates, subject to additions and deductions as provided in the Contract Documents. Said Proposal is on file in the Office of the Clerk of the Board of Supervisors of County.

**Machado Street Sidewalk Improvement Project
Between Tiller Lane and Alvarado Street
In the Community of West Elsinore
Project No. C2-0134**

Contract

BASE BID SCHEDULE

ITEM No.	ITEM CODE	ITEM	UNIT	ESTIMATED QUANTITY	ITEM PRICE (IN FIGURES)	TOTAL (IN FIGURES)
1	066102	DUST ABATEMENT	LS	1	17,500.00	17,500.00
2	074020	WATER POLLUTION CONTROL	LS	1	5,000.00	5,000.00
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	9,000.00	9,000.00
4	160101	CLEARING AND GRUBBING	LS	1	9,000.00	9,000.00
5	170101	DEVELOP WATER SUPPLY	LS	1	5,000.00	5,000.00
6	190101	ROADWAY EXCAVATION	CY	760	25.00	19,000.00
7	260201	CLASS 2 AGGREGATE BASE	CY	420	48.00	20,160.00
8	390129	HOT MIX ASPHALT (TYPE C)	TON	875	90.00	78,750.00
9	011507	COLD PLANE ASPHALT CONCRETE PAVEMENT (.12')	SQYD	1,955	3.43	6,705.65
10	017003	CATCH BASIN (CURB INLET) (CRS 300)	EA	1	6,200.00	6,200.00
11	017104	JUNCTION STRUCTURE (RCFC&WCDS JS 228)	EA	1	2,000.00	2,000.00
12	000003	CONSTRUCT WINGWALL PER CALTRANS STD. D84, TYPE B	LS	1	12,000.00	12,000.00
13	000003	CONSTRUCT RETAINING WALL PER CALTRANS STD. B3-8, TYPE "6B" WALL	LS	1	9,500.00	9,500.00
14	000003	INSTALL METAL HAND RAILING PER "GREENBOOK" STD. 606-3, TYPE B	LS	1	9,800.00	9,800.00
15	017304	MINOR CONCRETE (CURB AND GUTTER) (CRS 200)	LF	45	35.00	1,575.00
16	017305	MINOR CONCRETE (CURB AND GUTTER) (CRS 201)	LF	760	38.00	28,880.00
17	017310	MINOR CONCRETE (DRIVEWAY) (CRS207)	EA	13	950.00	12,350.00
18	017315	MINOR CONCRETE (CURB RAMP) (CRS 403 - CASE A)	EA	5	1,800.00	9,000.00
19	017316	MINOR CONCRETE (CURB RAMP) (CRS 403 - CASE B)	EA	8	1,600.00	12,800.00
20	017317	MINOR CONCRETE (CROSS-GUTTER AND SPANDREL)	SQFT	4,700	14.14	66,458.00
21	731521	MINOR CONCRETE (SIDEWALK) [INCLUDING RETAINING CURB]	SQFT	8,900	5.50	48,950.00
22	650416	24" REINFORCED CONCRETE PIPE (CLASS IV)	LF	32	150.00	4,800.00
23	160120	REMOVE TREE	EA	8	1,000.00	8,000.00
24	152380	RELOCATE CHAIN LINK FENCE	LF	835	35.00	29,225.00

Contract (continued)

BASE BID SCHEDULE

ITEM No.	ITEM CODE	ITEM	UNIT	ESTIMATED QUANTITY	ITEM PRICE (IN FIGURES)	TOTAL (IN FIGURES)
25	000003	RELOCATE EXISTING RADAR FEEDBACK SIGNS	EA	2	7,000.00	14,000.00
26	000003	REMOVE AND REPLACE MAILBOX NEW	EA	8	150.00	1,200.00
27	151281	REMOVE AND SALVAGE ROADSIDE SIGNS	EA	15	250.00	3,750.00
28	066148	RELOCATE SIGNS	EA	8	275.00	2,200.00
29	566011	ROADSIDE SIGN - ONE POST	EA	16	250.00	4,000.00
30	150717	REMOVE TRAFFIC STRIPE AND PAVEMENT MARKING	SQFT	3,700	0.75	2,775.00
31	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	1,340	2.75	3,685.00
32	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	3,500	2.00	7,000.00
33	850102	PAVEMENT MARKER (REFLECTIVE)	EA	240	3.50	840.00
34	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	15,000.00	15,000.00
35	019901	DE-MOBILIZATION	LS	1	21,000.00	21,000.00

PROJECT

TOTAL:

ITEMS 1-35

“Five hundred seven thousand, one hundred three dollars and sixty five cents”

“WORDS”

\$507,103.65

Machado Street Sidewalk Improvement Project
Between Tiller Lane and Alvarado Street
In the Community of West Elsinore
Project No. C2-0134

IN WITNESS WHEREOF the parties hereto have executed this Contract as of the date set forth below.

COUNTY OF RIVERSIDE

R-JS General Construction

BY: Marion Ashley
MARION ASHLEY
Chairman, Board of Supervisors

BY: Ron Huff

DATED: DEC 09 2014

TITLE: president
(If Corporation, affix Seal)

ATTEST:
Kecia Harper-Ihem, Clerk of the Board

ATTEST: Ramon Medina

BY: Kyle Bayton
Deputy

TITLE: Vice President

Licensed in accordance with an act providing for the registration of Contractors,

License No. 928560

Federal Employer Identification Number:
26 3764 015

BY _____
"County"

"Corporation"
(Seal)

FORM APPROVED COUNTY COUNSEL
BY: J.B. Victor 11/25/14
MARSHAL VICTOR DATE

Performance Bond

Recitals:

1. **R-JS General Construction** (Contractor) has entered into a Contract with COUNTY OF RIVERSIDE (County) for construction of public work known as **Machado Street, Sidewalk Improvement Project, Between Tiller Lane and Alvarado Street, In the Community of West Elsinore, Project No. C2-0134.**

State National Insurance Company, Inc. administered by:

2. Contractor Managing General Insurance Agency, Inc. * a _____ Texas _____ corporation (Surety), is the Surety under this Bond.


*20335 Ventura Blvd. Suite 426 Woodland Hills, CA 91364

Agreement:

We, Contractor as Principal and Surety as Surety, jointly and severally agree, state, and are bound unto County, as obligee, as follows:

1. The amount of the obligation of this Bond is 100% of the estimated contract price for the Project of **\$507,103.65 (Five hundred seven thousand, one hundred three dollars and sixty five cents)** and inures to the benefit of County.
2. This Bond is exonerated by Contractor doing all things to be kept and performed by it in strict conformance with the Contract Documents for this project, otherwise it remains in full force and effect for the recovery of loss, damage and expense of County resulting from failure of Contractor to so act. All of said Contract Documents are incorporated herein.
3. This obligation is binding on our successors and assigns.
4. For value received, Surety stipulates and agrees that no change, time extension, prepayment to Contractor, alteration or addition to the terms and requirements of the Contract Documents or the work to be performed thereunder shall affect its obligations hereunder and waives notice as to such matters, except the total contract price cannot be increased by more than 10% without approval of Surety.

THIS BOND is executed as of December 2, 2014

By R-JS General Construction


By State National Insurance Company, Inc. administered by: Contractor Managing General Insurance Agency, Inc.


By _____

Type Name Stephanie Hope Shear

Title pres. Jeff

Its Attorney in Fact
"Surety"

"Contractor"

(Corporate Seal)

(Corporate Seal)

NOTE: This Bond must be executed by both parties with corporate seal affixed. All signatures must be acknowledged. (Attach acknowledgements).

MARIO DELGADILLO

NOTARY PUBLIC - CALIFORNIA

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

Section 1189 (a)(1) of the civil code is amended to read:

STATE OF: CALIFORNIA

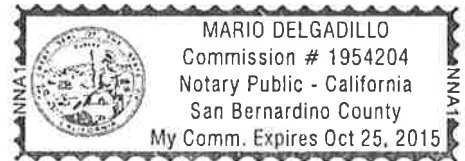
COUNTY OF: SAN BERNARDINO

On 12/22/2014, before me MARIO DELGADILLO (NOTARY PUBLIC), (name and title of the officer) Personally appeared RODRIGO C MEDINA proved to me on the 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.

(Official Seal)



[Handwritten Signature]
MARIO DELGADILLO
(Signature of Notary Public)

ADDITIONAL OPTIONAL INFORMATION

Title or Description of Attached Document PERFORMANCE BOND (Bond # CDGP101089)

Number of Pages : 8 Pages including this acknowledgment

Document date: 12/022014

Observations none

Capacity claimed by the Signer

- X Individual (s)
Corporate Officer (Title)
Partner(s)
Attorney-in-Fact
Trustee (s)

**State National Insurance Company, Inc. Administered by:
CONTRACTOR MANAGING GENERAL INSURANCE AGENCY, INC.**

POWER OF ATTORNEY

KNOW BY ALL THESE PRESENTS That STATE NATIONAL INSURANCE COMPANY, INC. a corporation organized and existing under the laws of the State of Texas, having its principal office in Bedford, Texas does hereby constitute and appoint

Stephanie Hope Shear

its true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, the following bond described as:
Machado Street, Sidewalk Improvement Project Between Tiller Lane and Alvarado Street in the Community of West Elsinore
Project No. C2-0134

for: Three Million and 00/100 Dollars (\$3,000,000)

and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise.

The execution of such instrument(s) in pursuance of these present, shall be as binding upon STATE NATIONAL INSURANCE COMPANY, INC. as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at the principal office.

RESOLVED that the signature of any authorized officer and the seal of the Company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, contracts of indemnity and other writings obligatory in the nature thereof, and such signature and seal when so used shall have the same force and effect as though manually affixed.

IN WITNESS WHEREOF, STATE NATIONAL INSURANCE COMPANY, INC. has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 24th day of March, 2014.

STATE NATIONAL INSURANCE COMPANY, INC.

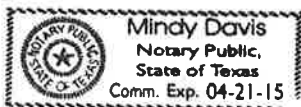
Terry L. Ledbetter, President

Trace Ledbetter, Secretary

STATE OF TEXAS
County of Tarrant

On this 24th day of March, 2014 before me came the individuals who executed the preceding instrument, to me personally known, and being by me duly sworn, said that each of the herein described and authorized officer of STATE NATIONAL INSURANCE COMPANY, INC.; that the seal affixed to said instrument is the Corporate Seal of said Company; that the Corporate Seal and each signature were duly affixed by order of the Board of Directors of said Company.

IN WITNESS WHEREOF, I have hereunto set my hand at Bedford, Texas the day and year above written.



[Notary Stamp]

Signature of Notary

I, Trace Ledbetter, Secretary of STATE NATIONAL INSURANCE COMPANY, INC., do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by STATE NATIONAL INSURANCE COMPANY, INC., which is still in full force and effect.

IN WITNESS WHEREOF, I have thereunto set my hand and attested the seal of said Company this 2nd day of December, 2014

Trace Ledbetter, Secretary

CALIFORNIA ALL – PURPOSE ACKNOWLEDGEMENT

State of California

County of Los Angeles

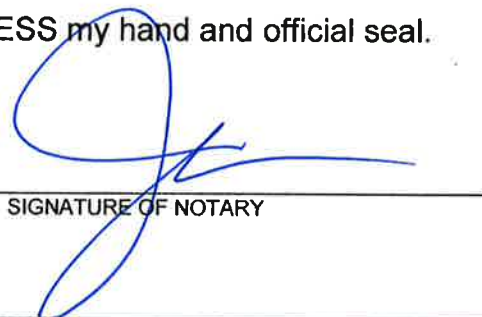
On DEC 02 2014 before me, JAN MICHELLE RIVERA, NOTARY PUBLIC
DATE NAME, TITLE OF OFFICER

Personally appeared STEPHANIE HOPE SHEAR.
NAME(S) OF SIGNER(S)

Who proved to me on the 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.


SIGNATURE OF NOTARY



NOTARY SEAL



- Company Profile
- Company Search
- Company Information
- Old Company Names
- Agent for Service
- Reference Information
- NAIC Group List
- Lines of Business
- Workers' Compensation Complaint and Request for Action/Appeals Contact Information
- Financial Statements PDF's
 - Annual Statements
 - Quarterly Statements
- Company Complaint
 - Company Performance & Comparison Data
 - Company Enforcement Action
 - Composite Complaints Studies
- Additional Info
 - Find A Company Representative In Your Area
 - View Financial Disclaimer

COMPANY PROFILE

Company Information

STATE NATIONAL INSURANCE COMPANY, INC.
1900 L. DON DODSON DRIVE
BEDFORD, TX 76021
800-877-4567

Old Company Names	Effective Date
STATE NATIONAL INSURANCE COMPANY INC	12/16/1994

Agent For Service

NANCY FLORES
 C/O CT CORPORATION SYSTEM
 818 WEST SEVENTH STREET
 LOS ANGELES CA 90017

Reference Information

NAIC #:	12831
California Company ID #:	4291-1
Date Authorized in California:	09/28/1995
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	TEXAS

[back to top](#)

NAIC Group List

NAIC Group #: **0093** STATE NATL GRP

Lines Of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the [glossary](#).

- AUTOMOBILE
- BOILER AND MACHINERY
- BURGLARY
- FIRE
- LIABILITY
- MARINE
- MISCELLANEOUS
- PLATE GLASS
- SPRINKLER
- SURETY
- WORKERS' COMPENSATION

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Payment Bond

(Public Works - Civil Code §9550 et seq.)

The makers of this Bond are **R-JS General Construction**, as Principal and Original Contractor and State National Insurance Company, Inc. administered by: Contractor Managing General Insurance Agency, Inc., a corporation, authorized to issue Surety Bonds in California, as Surety, and this Bond is issued in conjunction with that certain public works contract to be executed between Principal and COUNTY OF RIVERSIDE a public entity, as Owner, for **\$507,103.65 (Five hundred seven thousand, one hundred three dollars and sixty five cents)**, the total amount payable. The amount of this bond is one hundred percent (100%) of said sum. Said contract is for public work generally consisting **Machado Street, Sidewalk Improvement Project, Between Tiller Lane and Alvarado Street, In the Community of West Elsinore, Project No. C2-0134.**

*20335 Ventura Blvd. Suite 426 Woodland Hills, CA 91364

The beneficiaries of this Bond are as is stated in 9554 of the Civil Code and requirements and conditions of this Bond are as is set forth in 9554, 9558, 9560 and 9564 of said code. Without notice, Surety consents to extension of time for performance, change in requirements, amount of compensation, or prepayment under said contract.

Dated: December 2, 2014

R-JS General Construction
Original Contractor – Principal

State National Insurance Company, Inc. administered by:
Contractor Managing General Insurance Agency, Inc.

Surety

By *Ron M...*

By *[Signature]*
Stephanie Hope Shear
Its Attorney In Fact

Title *president*
(If corporation, affix seal)

(Corporate Seal)

(Corporate Seal)

STATE OF _____ }
COUNTY OF _____ } ss. SURETY'S ACKNOWLEDGEMENT

On _____ before me, _____ personally appeared, _____, known to me, or proved to me on the basis of satisfactory evidence, to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacities, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

** See attached **

Signature of Notary Public

Notary Public (Seal)

NOTE: This Bond must be executed by both parties with corporate seal affixed. All signatures must be acknowledged. (Attach acknowledgements).

MARIO DELGADILLO

NOTARY PUBLIC - CALIFORNIA

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

Section 1189 (a)(1) of the civil code is amended to read:

STATE OF: CALIFORNIA

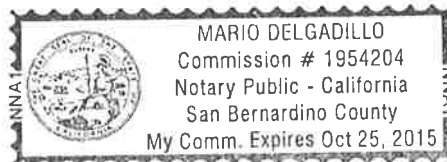
COUNTY OF: SAN BERNARDINO

On 12/22/2014, before me MARIO DELGADILLO (NOTARY PUBLIC), (name and title of the officer) Personally appeared RODRIGO C MEDINA proved to me on the 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.

(Official Seal)



Handwritten signature of Mario Delgadillo over a line, with the printed name MARIO DELGADILLO and (Signature of Notary Public) below it.

ADDITIONAL OPTIONAL INFORMATION

Title or Description of Attached Document PAYMENT BOND (Bond # CDGP101089)

Number of Pages : 8 Pages including this acknowledgment

Document date: 12/022014

Observations none

Capacity claimed by the Signer

- X Individual (s)
Corporate Officer (Title)
Partner(s)
Attorney-in-Fact
Trustee (s)

**State National Insurance Company, Inc. Administered by:
CONTRACTOR MANAGING GENERAL INSURANCE AGENCY, INC.**

POWER OF ATTORNEY

KNOW BY ALL THESE PRESENTS That STATE NATIONAL INSURANCE COMPANY, INC. a corporation organized and existing under the laws of the State of Texas, having its principal office in Bedford, Texas does hereby constitute and appoint

Stephanie Hope Shear

its true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, the following bond described as:
Machado Street, Sidewalk Improvement Project Between Tiller Lane and Alvarado Street in the Community of West Elsinore
Project No. C2-0134

for: Three Million and 00/100 Dollars (\$3,000,000)

and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise.

The execution of such instrument(s) in pursuance of these present, shall be as binding upon STATE NATIONAL INSURANCE COMPANY, INC. as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at the principal office.

RESOLVED that the signature of any authorized officer and the seal of the Company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, contracts of indemnity and other writings obligatory in the nature thereof, and such signature and seal when so used shall have the same force and effect as though manually affixed.

IN WITNESS WHEREOF, STATE NATIONAL INSURANCE COMPANY, INC. has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 24th day of March, 2014.

STATE NATIONAL INSURANCE COMPANY, INC.

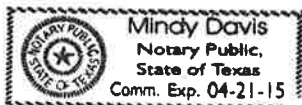
Terry L. Ledbetter, President

Trace Ledbetter, Secretary

STATE OF TEXAS
County of Tarrant

On this 24th day of March, 2014 before me came the individuals who executed the preceding instrument, to me personally known, and being by me duly sworn, said that each of the herein described and authorized officer of STATE NATIONAL INSURANCE COMPANY, INC.; that the seal affixed to said instrument is the Corporate Seal of said Company; that the Corporate Seal and each signature were duly affixed by order of the Board of Directors of said Company.

IN WITNESS WHEREOF, I have hereunto set my hand at Bedford, Texas the day and year above written.



[Notary Stamp]

Signature of Notary

I, Trace Ledbetter, Secretary of STATE NATIONAL INSURANCE COMPANY, INC., do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by STATE NATIONAL INSURANCE COMPANY, INC., which is still in full force and effect.

IN WITNESS WHEREOF, I have thereunto set my hand and attested the seal of said Company this 2nd day of December, 2014.

Trace Ledbetter, Secretary

CALIFORNIA ALL – PURPOSE ACKNOWLEDGEMENT

State of California

County of Los Angeles

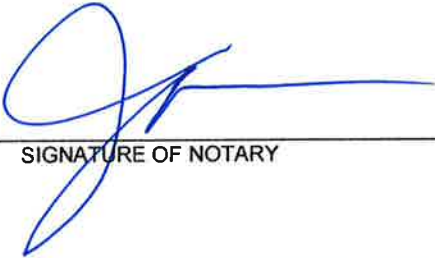
On DEC 02 2014 before me, JAN MICHELLE RIVERA, NOTARY PUBLIC
DATE NAME, TITLE OF OFFICER

Personally appeared STEPHANIE HOPE SHEAR.
NAME(S) OF SIGNER(S)

Who proved to me on the 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.



SIGNATURE OF NOTARY



NOTARY SEAL



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COMPANY PROFILE

Company Information

STATE NATIONAL INSURANCE COMPANY, INC.
1900 L. DON DODSON DRIVE
BEDFORD, TX 76021
800-877-4567

Old Company Names	Effective Date
STATE NATIONAL INSURANCE COMPANY INC	12/16/1994

Agent For Service

NANCY FLORES
 C/O CT CORPORATION SYSTEM
 818 WEST SEVENTH STREET
 LOS ANGELES CA 90017

Reference Information

NAIC #:	12831
California Company ID #:	4291-1
Date Authorized in California:	09/28/1995
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	TEXAS

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NAIC Group List

NAIC Group #: **0093** STATE NATL GRP

Lines Of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the [glossary](#).

AUTOMOBILE
 BOILER AND MACHINERY
 BURGLARY
 FIRE
 LIABILITY
 MARINE
 MISCELLANEOUS
 PLATE GLASS
 SPRINKLER
 SURETY
 WORKERS' COMPENSATION

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CERTIFICATE OF LIABILITY INSURANCE

RJSGE-1

OP ID: CAR

DATE (MM/DD/YYYY)

12/29/2014

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).

PRODUCER Orr and Associates Ins. Serv. CA License #0E63493 28780 Single Oak Drive #255 Temecula, CA 92590	CONTACT NAME:			
	PHONE (A/C, No, Ext):	FAX (A/C, No):		
	E-MAIL ADDRESS:			
	INSURER(S) AFFORDING COVERAGE			NAIC #
	INSURER A : INT'L INS CO OF HANNOVER LTD			086486
	INSURER B : THE INFINITY GROUP			20260
INSURED R-JS General Construction 19624 El Rivino Rd. Riverside, CA 92509	INSURER C : FINANCIAL PACIFIC INS CO			31453
	INSURER D : STATE COMPENSATION INS. FUND			35076
	INSURER E :			
	INSURER F :			

COVERAGES**CERTIFICATE NUMBER:****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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	X	X	IG011002837-00	08/15/2014	08/15/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY	X		504-61005-2521-001	06/16/2014	06/16/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Ded \$0						BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR	X		27303770	11/13/2014	08/15/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 1,000,000
D	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A	X	9014188-2014	06/01/2014	06/01/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

RE: MACHADO STREET SIDEWALK IMPROVEMENT PROJECT BETWEEN TILLER LANE AND ALVARADO STREET IN THE COMMUNITY OF WEST ELSINORE PROJECT NO. C2-0134 THE COUNTY OF RIVERSIDE, ITS ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS, & REPRESENTATIVES, THE CITY OF LAKE ELSINORE, ITS ELECTED & APPOINTED OFFICIALS, EMPLOYEES, AGENTS, REPRESENTATIVES ARE ADDITIONAL INSURED.

CERTIFICATE HOLDER**CANCELLATION**

THE COUNTY OF RIVERSIDE TRANSPORTATION DEPARTMENT 3525 14TH STREET RIVERSIDE, CA 92501	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 <i>Lori Schiavone</i>
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Effective Date: 08/15/2014

**ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS -
COMPLETED OPERATIONS - (PRIMARY APARTMENT INCLUSION)**

This endorsement modifies the insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART SCHEDULE:

Name of Additional Insured Person(s) Or Organization(s).	Location and Description of Completed Operations:
As required by written contract. No coverage is provided under this endorsement for single and multi family dwelling units, except for apartments.	Any operations as required under written contract.

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

Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and including in the "products-completed operations hazard."

If required by written contract or agreement, such insurance as is afforded by this policy shall be primary insurance, and any insurance or self insurance maintained by the above additional insured(s) shall be excess of the insurance afforded to the Named Insured and shall not contribute to it.

ALL OTHER TERMS CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.



Policy Number.: IG011002837-00
Effective Date: 08/15/2014

TMGL 175 10/11

**ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS -
COMPLETED OPERATIONS (PRIMARY)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART:

Name of Additional Insured Person(s) Or Organization.	Location and Description of Completed Operations:
<p>We shall name person(s) or organization(s) as additional insured(s) to this insurance as required under a written contract with the Named Insured entered into before the claim or loss for which this policy applies.</p> <p>No coverage, indemnity and/or defense obligations shall be provided under this endorsement to any person(s) or organization(s) claiming to be additional insured(s) for claims or losses which do not arise from the Named Insured's work or operations under a written contract and completed during the policy period. The Named Insured's mere presence at a work site shall not be deemed sufficient cause to require coverage, indemnity and/or defense to any person(s) or organization(s) claiming to be an additional insured under this endorsement.</p> <p>There shall be no coverage, indemnity, and/or duty to defend any person(s) or organization(s) claiming to be an additional insured under this endorsement if the claim or loss does not arise, in whole or in part, from the negligence and/or fault of the Named Insured.</p>	<p>Any operations as required under written contract</p>

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

Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and including in the "products-completed operations hazard."

If required by written contract or agreement, such insurance as is afforded by this policy shall be primary insurance, and any insurance or self insurance maintained by the above additional insured(s) shall be excess of the insurance afforded to the Named Insured and shall not contribute to it.

ALL OTHER TERMS, CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.

TMGL 175 10/11



Policy Number: IG011002837-00
 Effective Date: 08/15/2014

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS –
 AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION
 AGREEMENT WITH YOU (PRIMARY & NONCONTRIBUTORY)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Section II - Who is An Insured is amended to include as an insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf; in the performance of your ongoing operations for the additional insured.

A person's or organization's status as an insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded these additional insureds, the following additional exclusion apply:

This insurance does not apply to:

1. "Bodily injury", "property damage", "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
 - a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
 - b. Supervisory, inspection, architectural or engineering activities.
2. "Bodily injury", "property damage" occurring after:
 - a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 - b. 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; or
 - c. "Property Damage" which manifests after expiration of the Policy.

If required by written contract or agreement, such insurance as is afforded by this policy shall be primary insurance, and any insurance or self insurance maintained by the above additional insured(s) shall be excess of the insurance afforded to the Named Insured and shall not contribute to it.

ALL OTHER TERMS, CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.

John Savarella

POLICY #: IG011002837-00

Effective Date: 08/15/2014

COMMERCIAL
GENERAL LIABILITY
CG 24 04 10 93

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

SCHEDULE

Name of Person or Organization: All clients of the insured where required by written contract.

(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 (Section IV – COMMERCIAL GENERAL LIABILITY CONDITIONS) 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.

John Savarella



ENDORSEMENT AGREEMENT
WAIVER OF SUBROGATION
BLANKET BASIS

REP 02
9014188-14
RENEWAL
SK
5-56-07-33
PAGE 1

HOME OFFICE
SAN FRANCISCO

EFFECTIVE JUNE 1, 2014 AT 12.01 A.M.
AND EXPIRING JUNE 1, 2015 AT 12.01 A.M.

ALL EFFECTIVE DATES ARE
AT 12:01 AM PACIFIC
STANDARD TIME OR THE
TIME INDICATED AT
PACIFIC STANDARD TIME

R-JS GENERAL CONSTRUCTION

19624 EL RIVINO RD
RIVERSIDE, CA 92509

WE HAVE THE RIGHT TO RECOVER OUR PAYMENTS FROM ANYONE
LIABLE FOR AN INJURY COVERED BY THIS POLICY. WE WILL
NOT ENFORCE OUR RIGHT AGAINST THE PERSON OR
ORGANIZATION NAMED IN THE SCHEDULE.

THIS AGREEMENT APPLIES ONLY TO THE EXTENT THAT YOU
PERFORM WORK UNDER A WRITTEN CONTRACT THAT REQUIRES YOU
TO OBTAIN THIS AGREEMENT FROM US.

THE ADDITIONAL PREMIUM FOR THIS ENDORSEMENT SHALL BE
2.00% OF THE TOTAL POLICY PREMIUM.

SCHEDULE

<u>PERSON OR ORGANIZATION</u>	<u>JOB DESCRIPTION</u>
ANY PERSON OR ORGANIZATION FOR WHOM THE NAMED INSURED HAS AGREED BY WRITTEN CONTRACT TO FURNISH THIS WAIVER	BLANKET WAIVER OF SUBROGATION

NOTHING IN THIS ENDORSEMENT CONTAINED SHALL BE HELD TO VARY, ALTER, WAIVE
OR EXTEND ANY OF THE TERMS, CONDITIONS, AGREEMENTS, OR LIMITATIONS OF THIS
POLICY OTHER THAN AS STATED. NOTHING ELSEWHERE IN THIS POLICY SHALL BE
HELD TO VARY, ALTER, WAIVE OR LIMIT THE TERMS, CONDITIONS, AGREEMENTS OR
LIMITATIONS OF THIS ENDORSEMENT.

COUNTERSIGNED AND ISSUED AT SAN FRANCISCO:

JUNE 6, 2014

2572

AUTHORIZED REPRESENTATIVE

PRESIDENT AND CEO



Infinity Commercial Auto
 11700 Great Oaks Way, Suite 450
 Alpharetta, GA 30022

Underwritten by: Infinity Select Insurance Company

Customer Service: 800-722-3391

Claims Service: 800-334-1661

CERTIFICATE OF INSURANCE

Named Insured

R-JS General Construction Inc
 19624 El Rivino Rd

 Riverside, CA 92509-1832

Certificate Holder

County of Riverside Transportation Dept
 County of Riverside Agencies, Special
 Districts
 3525 14th Street
 Riverside, CA 92501

Producer

Orr & Associates Insurance Services
 13261 Spring Valley Parkway Ste 206
 Victorville, CA 92395
 Phone: 760-881-3361
 Agency #: 5507803

This certificate of insurance is issued for informational purposes only and confers no rights upon the certificate holder. This certificate is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policy listed below. The insurance coverages afforded by the policy listed below are subject to all the terms, exclusions, provisions, limitations, conditions, and endorsements of the policy.

Policy Effective Date: 06/16/2014

Policy Expiration Date: 06/16/2015

Insurer: Infinity Commercial Auto

Policy #: 504-61005-2521-001

Combined Single Limit (each accident)	Bodily Injury (per person)	Bodily Injury (per accident)	Property Damage (per accident)
\$1,000,000			

- Scheduled Autos Only
- Hired Autos Included
- Non-Owned Autos Included
- Any Auto

Cancellation

In the event of cancellation of the policy described in this certificate, notice will be delivered in accordance with policy provisions.


 Authorized Representative

Date: 11/05/2014

FINANCIAL PACIFIC INSURANCE COMPANY
 PO BOX 73909, CEDAR RAPIDS IA 52407

POLICY NUMBER: 27303770

ACCOUNT NUMBER: 3000266803 (4) COMMERCIAL EXCESS LIABILITY

AGENCY BILL -

COMMERCIAL EXCESS LIABILITY DECLARATIONS

ISSUE DATE 11-17-2014 SW4 REPLACEMENT OF NEW		DECLARATIONS	
1. NAMED R JS GENERAL CONSTRUCTION INSURED MEDINA RODRIGO DBA AND		AGENCY & CODE 440285 GLADIUS INS SERVICES LLC 6864 INDIANA AVE STE 201	
2. MAILING 19624 EL RIVINO RD ADDRESS RIVERSIDE CA 92509-1832		RIVERSIDE CA 92506	
3. POLICY 12:01 A.M. Standard time PERIOD:		FROM: 11-13-2014 TO: 08-15-2015 SHORT-TERM POLICY And for successive policy periods as stated below.	
We will provide the insurance described in this policy in return for the premium and compliance with all applicable policy provisions. If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period, subject to our premiums, rules and forms then in effect. You must pay us prior to the end of the current policy period or else this policy will expire, after appropriate notices are mailed to you. An insufficient funds check is not considered payment.			
4. LIMITS OF INSURANCE			
Policy Aggregate Limit		\$ 1,000,000	
Per Occurrence Limit		\$ 1,000,000	
5. SCHEDULE OF UNDERLYING INSURANCE			
Underlying Insurer, Policy Number, Policy Period	Type of Insurance	Limits of Liability	
INFINITY 504610052521001 06/16/2014 to 06/16/2015	Commercial Auto Liability	Bodily Injury Each Person Bodily Injury Each Accident Property Damage Each Accident	1,000,000 1,000,000 1,000,000
HANNOVER IG01100283700 08/15/2014 to 08/15/2015	Commercial General Liability	General Aggregate Products/Completed Operations Aggregate Personal and Advertising Injury Each Occurrence	2,000,000 2,000,000 1,000,000 1,000,000
STATE FUND 90141882014 06/01/2014 to 06/01/2015	Employers Liability	Each Accident Disease-Policy Limit Disease-Each Employee	1,000,000 1,000,000 1,000,000
6. BUSINESS DESCRIPTION: PAVING AND CONCRETE WORK FORM OF BUSINESS: CORPORATION			
7. Forms SEE UW7002			
8. AMEND REASON:			
9. PREMIUM FOR THIS COVERAGE PART \$ 3,163 Endorsement Adjustment Premium \$			
This Declarations Page together with any forms specified hereon, supersedes and replaces any preceding declarations page bearing the same policy number for this policy period.		X _____ (COUNTERSIGNED BY AUTHORIZED REPRESENTATIVE)	

NOTICE:

This Excess policy does not apply to any loss that, under the terms of the underlying insurance, is subject to a limit less than the limits indicated in this schedule, whether by the terms of the underlying policy or an endorsement thereon.

EXAMPLE:

(This generic example is for illustration purposes only. Please read your policy(ies) carefully to determine all coverages provided at lower limits than the policy limit.)

Underlying General Liability (GL) Policy limits:	\$1,000,000 Each Occurrence
	\$2,000,000 General Aggregate
GL coverage endorsement limit:	\$50,000
GL coverage endorsement loss amount:	\$100,000

The endorsed General Liability policy will provide up to \$50,000 for the covered loss. The Excess Liability policy will provide no coverage for the loss as the \$50,000 coverage limit provided by the underlying (General Liability) policy is less than the underlying (General Liability) policy limit of \$1,000,000 / \$2,000,000.

List of Approved Surplus Line Insurers (LASLI)

07/27/2000)	
Great American Fidelity Insurance Company (Delaware) (Name changed from American Dynasty Surplus Lines Insurance Company, effective 06/27/2001)	09/01/1995
Great Lakes Reinsurance (UK) PLC (UK)	12/01/1995
Gulf Underwriters Insurance Company (Connecticut) (Domicile changed from Missouri to Connecticut, effective 10/01/2001)	07/07/1995

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H - L

Insurer	Date Approved
Hallmark Specialty Insurance Company (Oklahoma)	07/01/2011
Health Care Indemnity, Inc. (Colorado)	03/21/2001
Homeland Insurance Company of New York (New York)	09/24/2003
Houston Casualty Company (Texas)	09/01/1995
Houston Specialty Insurance Company (Texas) (Name changed from Naxos Insurance Company effective 12/30/10) (Domicile changed from Delaware to Texas effective 12/30/2011)	10/08/2009
HSB Specialty Insurance Company (Connecticut)	09/26/2013
Hudson Specialty Insurance Company (New York) (Name changed from General Security Indemnity Company effective 12/29/03)	11/09/1995
Illinois Union Insurance Company (Illinois)	12/22/1995
Indian Harbor Insurance Company (Delaware) (Domicile changed from North Dakota to Delaware effective 07/01/2013)	12/08/1995
International Insurance Company of Hannover SE (UK) (Name changed from International Insurance Company of Hannover PLC effective 07/15/2014) (Name changed from International Insurance Company of Hannover Ltd effective 08/07/2013)	09/29/1998
Interstate Fire & Casualty Company (Illinois)	10/20/1995
Ironshore Insurance Ltd. (Bermuda)	07/20/2011
Ironshore Specialty Insurance Company (Arizona)	10/02/2008
James River Insurance Company (Ohio) (Name changed from Fidelity Excess and Surplus Insurance Company effective 07/07/03)	08/04/1995
Lancashire Insurance Company (UK) Limited (U.K.)	11/17/2010
Lancashire Insurance Company Limited (Bermuda)	11/19/2009



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COMPANY PROFILE

Company Information

INFINITY SELECT INSURANCE COMPANY
3700 COLONNADE PARKWAY, SUITE 600
BIRMINGHAM, AL 35243
800-782-2040

Old Company Names

Effective Date

Agent For Service

NANCY FLORES
 C/O CT CORPORATION SYSTEM
 818 WEST SEVENTH STREET
 LOS ANGELES CA 90017

Reference Information

NAIC #:	20260
California Company ID #:	4290-3
Date Authorized in California:	09/27/1995
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	INDIANA

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NAIC Group List

NAIC Group #: **3495** Infinity Prop & Cas Ins Grp

Lines Of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the [glossary](#).

- AUTOMOBILE
- LIABILITY
- TEAM AND VEHICLE

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COMPANY PROFILE

Company Information

FINANCIAL PACIFIC INSURANCE COMPANY

PO BOX 292220
SACRAMENTO, CA 95829-2220

Old Company Names

Effective Date

M. L. OATES INSURANCE COMPANY 12/30/1993

Agent For Service

MARY BIANCO
3880 ATHERTON ROAD
ROCKLIN CA 95765

Reference Information

NAIC #:	31453
California Company ID #:	3132-8
Date Authorized in California:	12/31/1987
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	CALIFORNIA

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NAIC Group List

NAIC Group #: 0248 UNITED FIRE & CAS GRP

Lines Of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the [glossary](#).

- AIRCRAFT
- AUTOMOBILE
- BOILER AND MACHINERY
- BURGLARY
- COMMON CARRIER LIABILITY
- CREDIT
- FIRE
- LIABILITY
- MARINE
- MISCELLANEOUS
- PLATE GLASS
- SPRINKLER
- SURETY
- TEAM AND VEHICLE
- WORKERS' COMPENSATION

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About State Fund



Established in 1914 by the state legislature State Fund has operated for 100 years, is California's largest provider of workers' compensation insurance, and a vital asset to California businesses. State Fund supports California's entrepreneurial spirit and plays a stabilizing role in the economy by providing fairly priced workers' compensation insurance, making California workplaces safe, and restoring injured workers.

State Fund offers diverse and comprehensive products and services that provide a strong and stable option for employers and injured employees with fast, reliable claims service and medical and indemnity benefits. State Fund's accident prevention services and return to work programs—provided to policyholders at no additional cost—ultimately help save businesses money.

With approximately 130,000 policyholders, more than \$1.2 billion in premium, and nearly \$20 billion in assets, Californians rely on the security and certainty offered by State Fund to the state's employers, particularly the small businesses and new ventures that are key to California's economic recovery.

OUR VISION, VALUES AND PURPOSE

VISION

To be recognized as the industry leader and best value in California.

VALUES

- Honesty
- Integrity
- Accountability
- Adaptability
- Collaboration

PURPOSE

State Fund's purpose is to provide fairly priced workers' compensation insurance, make workplaces safe, and restore injured workers.