

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



**ITEM: 3.63  
(ID # 27663)**

**MEETING DATE:**  
Tuesday, May 20, 2025

**FROM :** TLMA-TRANSPORTATION

**SUBJECT:** TRANSPORTATION AND LAND MANAGEMENT AGENCY/TRANSPORTATION:  
Accept the Low Bid and Award the Contract for the Construction of the Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project, in the Community of French Valley; District 3. [\$581,018 Total Cost – Local Funds 100% / \$5,500 Ongoing Cost – Gas Tax 100%]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Waive any and all immaterial irregularities and accept the low bid of PTM General Engineering Services, Inc. (PTM) of Riverside, California in the amount of \$581,018.00;
2. Award the contract to PTM and authorize the Chair of the Board to execute the contract documents; and
3. Approve the project proposed budget as shown on Attachment "A".

**ACTION:Policy**

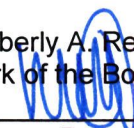
  
Dennis Acuna, Director of Transportation 4/30/2025

---

**MINUTES OF THE BOARD OF SUPERVISORS**

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

Ayes: Medina, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: May 20, 2025  
xc: TLMA-Transp.

Kimberly A. Rector  
Clerk of the Board  
By:   
Deputy

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

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$ 0	\$ 581,018	\$ 581,018	\$ 5,500
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS:</b> West County DIF Signal Mitigation Funds (100%) Ongoing Cost – Gas Tax (100%)  There are no General Funds used for this project.			<b>Budget Adjustment:</b> No  <b>For Fiscal Year:</b> 25/26	

**C.E.O. RECOMMENDATION:** Approve

**BACKGROUND:**

**Summary**

By Minute Order dated February 25, 2025 (Agenda Item 3.49), the County of Riverside Board of Supervisors authorized the Clerk of the Board to advertise for the construction of the Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project in the Community of French Valley of Riverside County.

At this intersection, Pourroy Road is currently a five-lane local road that travels in the north-south directions. Vehicles on Pourroy Road continue driving without having to stop at the intersection. Rosales Avenue is a two-lane facility that travels in the east-west directions. Rosales Avenue is currently controlled by stop signs at Pourroy Road. The area in the immediate vicinity is residential with single family dwellings and there are two nearby schools.

Project construction will include installation of traffic signal poles with mast-arms, safety lighting, traffic signal cabinets, installation of new thermoplastic and paint traffic striping and markings, roadside signs, and other associated work.

Additional improvements include construction of Americans with Disabilities Act (ADA) compliant curb ramps.

The Contract includes the following schedule of work:

Base Bid Schedule:      Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project, and associated work

The contractor, PTM, is qualified to perform the work as outlined in the bid, has executed the contract, and has provided bonds and insurance documents which meet the requirements of the contract documents.

Project No. D3-0081

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

**Impact on Residents and Businesses**

The traffic signal will improve traffic safety by providing controlled traffic movements, including pedestrian crossings, at the Pourroy Road and Rosales Avenue intersection.

The work will be phased to keep the road open during construction as much as possible and will take approximately two months to complete.

**SUPPLEMENTAL:**

**Additional Fiscal Information**

Construction is expected to be completed in Fiscal Year 2025/2026 and will be funded with West County DIF Signal Mitigation Funds.

Annual traffic signal operation and maintenance costs are estimated at \$5,500 to be funded from Gas Tax.

There are no General Funds used in this project.

**Contract History and Price Reasonableness**

A total of six bids were received on Wednesday, March 19, 2025, ranging from \$581,018 to \$712,006. The basis for the selection of a contractor is the lowest responsive and responsible bid. The lowest responsive and responsible bid was submitted by PTM in the amount of \$581,018 which is \$76,068 (15%) above the engineer's cost estimate.

The Transportation Department recommends the award of the contract to PTM in the amount of \$581,018.

**ATTACHMENTS:**

Vicinity Map  
Attachment "A"  
Summary of Bids  
Contract/Bonds/Insurance  
Contractor's Bid Proposal



Jason Farin, Principal Policy Analyst

5/14/2025



Aaron Gettis, Chief of Deputy County Counsel

5/6/2025

## 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 **PTM General Engineering Services, Inc.**, 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, **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081**, 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 to Bidders, (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 **2018** 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, (n) The Determination of Prevailing Wage Rates for Public Works, (o) Any Change Orders issued, and (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. Prosecution, Progress and Liquidated Damages

Attention is directed to the provisions in Section 8-1.04, "Start of Job Site Activities", Section 8-1.05, "Time", and in Section 8-1.10 "Liquidated Damages" of the Standard Specifications and these Special Provisions.

Standard Specification Section 8-1.04B, "Standard Start" 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.

**Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081**

**Contract**

ITEM No.	ITEM CODE	ITEM	UNIT	ESTIMATED QUANTITY	ITEM PRICE (IN FIGURES)	TOTAL (IN FIGURES)
<b>BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project</b>						
1	066100	DUST ABATEMENT	LS	1	750.00	750.00
2	100100	DEVELOP WATER SUPPLY	LS	1	750.00	750.00
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	16,000.00	16,000.00
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	2,000.00	2,000.00
5	170103	CLEARING AND GRUBBING	LS	1	6,000.00	6,000.00
6	015602	FUNDING AWARENESS SIGN	EA	1	1,200.00	1,200.00
7	730010	MINOR CONCRETE (CURB)	LF	15	180.00	2,700.00
8	820410	SALVAGE ROADSIDE SIGN	EA	3	18.00	54.00
9	820840	ROADSIDE SIGN - ONE POST	EA	3	492.00	1,476.00
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	21,000.00	84,000.00
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	11.40	7,980.00
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	26.40	2,640.00
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	15.00	750.00
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	429,718.00	429,718.00
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00

PROJECT TOTAL: Five hundred eighty-one thousand, eighteen dollars and zero cents **\$581,018.00**  
ITEMS 1 – 15 "WORDS"



Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081

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

COUNTY OF RIVERSIDE

PTM GENERAL ENGINEERING SERVICES, INC.

BY: \_\_\_\_\_

Chair, Board of Supervisors

BY: \_\_\_\_\_

*Elizabeth H. Monahan*

TITLE: \_\_\_\_\_

*President / CEO*  
(If Corporation, affix Seal)

DATED: \_\_\_\_\_

ATTEST:

Kimberly A. Rector, Clerk of the Board

ATTEST: \_\_\_\_\_

*Brian Monahan*

BY: \_\_\_\_\_

Deputy

TITLE: \_\_\_\_\_

*Vice President / Secretary*

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

License No.: 891265

FORM APPROVED COUNTY COUNSEL

BY: \_\_\_\_\_

*Danielle D. Maland*  
DANIELLE D. MALAND

Federal Employer Identification Number:

20-5693645

Department of Industrial Relations Registration Number:

1000001433

BY \_\_\_\_\_

"County"

\_\_\_\_\_

"Corporation"  
(Seal)

### Corporate Resolution of Signing Authority

WHEREAS, the Corporation is determined to grant signing and authority to certain person(s) described hereunder.

RESOLVED, that the Board of Directors is hereby authorized and approved to authorize and empower the following individual to make, execute, endorse and deliver in the name of and on behalf of the corporation, but shall not be limited to, any and all written instruments, agreements, documents, execution of deeds, powers of attorney, transfers, assignments, contracts, obligations, certificates and other instruments of whatever nature entered into by this Corporation.

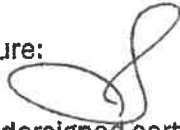
Name: Elizabeth H. Mendoza

Position/Title: President/ CFO

Telephone Number: 951.722.5678

Email Address: elizabeth@ptm-eng.com

Signature:



The undersigned certifies that she is the properly elected and qualified Secretary of the books, records and seal of PTM General Engineering Services, Inc., a corporation duly conformed pursuant to the laws of the state of California, and that said meeting was held in accordance with state law and with the Bylaws of the above-named corporation.

This resolution has been approved by the Board of Directors of PTM General Engineering Services, Inc. on 3.27, 2025.

I, as authorized by the Company, hereby certify and attest that all the information above is true and correct.



Secretary

## Performance Bond

### Recitals:

1. **PTM General Engineering Services, Inc.** (Contractor) has entered into a Contract with COUNTY OF RIVERSIDE (County) for construction of public work known as **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081.**
2. \_\_\_\_\_, a \_\_\_\_\_ corporation (Surety), is the Surety under this Bond.

### 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 **\$581,018.00 (Five hundred eighty-one thousand, eighteen dollars and zero 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 \_\_\_\_\_.

By \_\_\_\_\_

By \_\_\_\_\_

By \_\_\_\_\_

Type Name \_\_\_\_\_

Its Attorney in Fact  
"Surety"

Title \_\_\_\_\_

"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).**

## Payment Bond

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

The makers of this Bond are **PTM General Engineering Services, Inc.** as Principal and Original Contractor and \_\_\_\_\_, 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 **\$581,018.00 (Five hundred eighty-one thousand, eighteen dollars and zero 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 of **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081.**

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: \_\_\_\_\_

Original Contractor – Principal

\_\_\_\_\_  
Surety

By \_\_\_\_\_

By \_\_\_\_\_

Its Attorney In Fact

Title \_\_\_\_\_

(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.

\_\_\_\_\_  
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).**

PREMIUM \$7,905.00 IS SUBJECT TO  
CHANGE BASED ON FINAL  
CONTRACT PRICE.

## Performance Bond

### Recitals:

1. **PTM General Engineering Services, Inc.** (Contractor) has entered into a Contract with COUNTY OF RIVERSIDE (County) for construction of public work known as **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081.**
2. NATIONWIDE MUTUAL INSURANCE COMPANY, a OHIO corporation (Surety), is the Surety under this Bond.

### 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 **\$581,018.00 (Five hundred eighty-one thousand, eighteen dollars and zero 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 MARCH 26TH, 2025

By *Elizabeth H. Mendoza* President / CFO

By *[Signature]*

By *Brian Mendoza* Vice President / Secretary

Type Name BRITTON CHRISTIANSEN, ATTORNEY-IN-FACT

Its Attorney in Fact  
"Surety"

Title \_\_\_\_\_

"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).

CLEAR

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )

On 3.27.25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer

Personally appeared Elizabeth H. Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

CLEAR

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )

On 3.27.25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer

Personally appeared Brian Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_ Signer Is Representing \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

CIVIL CODE § 1189

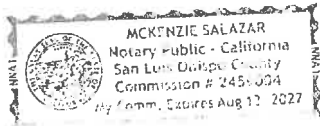
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of SAN LUIS OBISPO )  
On MAR 26 2025 before me, McKENZIE SALAZAR, NOTARY PUBLIC,  
Date Here Insert Name and Title of the Officer  
personally appeared BRITTON CHRISTIANSEN  
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 M Salazar  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

## Power of Attorney

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:

**BRITTON CHRISTIANSEN; KEVIN VEGA; PHILIP E VEGA;**

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf any and all bonds and undertakings, and other obligatory instruments of similar nature, in penalties not exceeding the sum of

### UNLIMITED

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 1st day of April, 2024.



Antonio C. Albanese, Vice President of Nationwide Mutual Insurance Company

### ACKNOWLEDGMENT

STATE OF NEW YORK COUNTY OF KINGS: ss

On this 1st day of April, 2024, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.



Sharon Laburda  
Notary Public, State of New York  
No. 01LA6427697  
Qualified in Kings County  
Commission Expires January 3, 2028

### CERTIFICATE

I, Lezlie F. Chimienti, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 1st day of

MARCH 2025

Notary Public  
My Commission Expires  
January 3, 2028

Assistant Secretary



## Company Profile

## COMPANY PROFILE

Company Search

## Company Information

Company Search  
Results

## NATIONWIDE MUTUAL INSURANCE COMPANY

Company  
Information

1 NATIONWIDE BLVD, FRAP SOLUTIONS  
COLUMBUS, OH 43215  
800-523-7828

Old Company  
Names

Agent for Service

## Old Company Names

## Effective Date

Reference  
Information

NAIC Group List

## Agent For Service

Lines of Business

Melissa DeKoven  
2710 Gateway Oaks Drive, Suite 150N  
Sacramento CA 95833-3505

Workers'  
Compensation  
Complaint and  
Request for  
Action/Appeals  
Contact Information

## Reference Information

Financial Statements  
PDF's

NAIC #:	23787
California Company ID #:	1805-1
Date Authorized in California:	08/03/1965
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	OHIO

Annual Statements

Quarterly  
Statements

Company Complaint

Company  
Performance &  
Comparison DataCompany  
Enforcement ActionComposite  
Complaints Studies[back to top](#)

Additional Info

## NAIC Group List

Find A Company  
Representative In  
Your Area

NAIC Group #: 0140 NATIONWIDE CORP GRP

View Financial  
Disclaimer

## 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  
DISABILITY  
FIRE  
LEGAL INSURANCE  
LIABILITY  
MARINE  
MISCELLANEOUS  
PLATE GLASS  
SPRINKLER  
SURETY  
TEAM AND VEHICLE  
WORKERS' COMPENSATION

**Payment Bond**

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

The makers of this Bond are **PTM General Engineering Services, Inc.** as Principal and Original Contractor and **NATIONWIDE MUTUAL INSURANCE COMPANY**, 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 **\$581,018.00 (Five hundred eighty-one thousand, eighteen dollars and zero 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 of **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081.**

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: MARCH 26TH, 2025

PTM GENERAL ENGINEERING SERVICES, INC.

Original Contractor – Principal

*Elizabeth H. Mendora*By *President / CEO**Brian Mendora*Title *Vice President / Secretary*

(If corporation, affix seal)

NATIONWIDE MUTUAL INSURANCE COMPANY

Surety

By 

ERIC OLSON CHRISTENSEN

Its Attorney In Fact

(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.

\_\_\_\_\_  
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).

CLEAR

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )

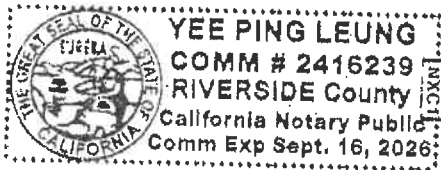
On 3.27.25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer

Personally appeared Elizabeth H. Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

CLEAR

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

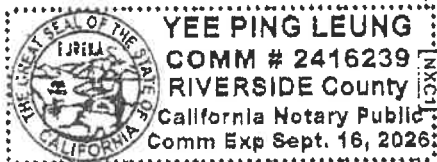
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of Riverside )  
On 3.27.25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer  
Personally appeared Brian Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer's Name \_\_\_\_\_  
☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_ Signer Is Representing \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT****CIVIL CODE § 1189**

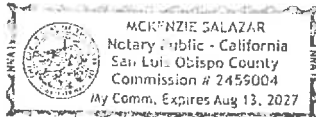
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of SAN LUIS OBISPO )  
On MAR 26 2025 before me, McKENZIE SALAZAR, NOTARY PUBLIC,  
Date Here Insert Name and Title of the Officer  
personally appeared BRITTON CHRISTIANSEN  
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 M Salazar  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:

**BRITTON CHRISTIANSEN; KEVIN VEGA; PHILIP E VEGA;**

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf any and all bonds and undertakings, and other obligatory instruments of similar nature, in penalties not exceeding the sum of

**UNLIMITED**

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 1st day of April, 2024.



Antonio C. Albanese, Vice President of Nationwide Mutual Insurance Company

**ACKNOWLEDGMENT**

STATE OF NEW YORK COUNTY OF KINGS: ss

On this 1st day of April, 2024, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.



Notary Public  
My Commission Expires  
January 3, 2025

**CERTIFICATE**

I, Lezlie F. Chimienti, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 2nd day of

MARCH 2025



## Company Profile

Company Search

Company Search  
ResultsCompany  
InformationOld Company  
Names

Agent for Service

Reference  
Information

NAIC Group List

Lines of Business

Workers'  
Compensation  
Complaint and  
Request for  
Action/Appeals  
Contact InformationFinancial Statements  
PDF's

Annual Statements

Quarterly  
Statements

Company Complaint

Company  
Performance &  
Comparison DataCompany  
Enforcement ActionComposite  
Complaints Studies

Additional Info

Find A Company  
Representative In  
Your AreaView Financial  
Disclaimer**COMPANY PROFILE****Company Information****NATIONWIDE MUTUAL INSURANCE COMPANY****1 NATIONWIDE BLVD, FRAP SOLUTIONS  
COLUMBUS, OH 43215  
800-523-7828****Old Company Names****Effective Date****Agent For Service**Melissa DeKoven  
2710 Gateway Oaks Drive, Suite 150N  
Sacramento CA 95833-3505**Reference Information**

NAIC #:	23787
California Company ID #:	1805-1
Date Authorized in California:	08/03/1965
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	OHIO

**back to top****NAIC Group List**

NAIC Group #: 0140 NATIONWIDE CORP 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  
 DISABILITY  
 FIRE  
 LEGAL INSURANCE  
 LIABILITY  
 MARINE  
 MISCELLANEOUS  
 PLATE GLASS  
 SPRINKLER  
 SURETY  
 TEAM AND VEHICLE  
 WORKERS' COMPENSATION



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/07/2025

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

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

PRODUCER	<b>McRae Associates Insurance Services</b> <b>1265 N. Manassero St Suite 303</b> <b>Anaheim, CA 92807</b> <b>License #: 0637431</b>	CONTACT NAME: <b>Maricela Aguirre</b> PHONE (A/C, No, Ext): <b>(714)779-6999</b> FAX (A/C, No): <b>(714)779-6903</b> E-MAIL ADDRESS: <b>maricela@mcraeinsurance.insure</b>
INSURED	<b>PTM GENERAL ENGINEERING SERVICES, INC.</b> <b>PO BOX 7745</b> <b>RIVERSIDE, CA 92503</b>	INSURER(S) AFFORDING COVERAGE INSURER A: <b>ADMIRAL INSURANCE COMPANY</b> NAIC # <b>24856</b> INSURER B: <b>EVEREST NATIONAL INSURANCE COMPANY</b> <b>10120</b> INSURER C: <b>Ace American Insurance Co</b> <b>22667</b> INSURER D: INSURER E: INSURER F:

## COVERAGES

CERTIFICATE NUMBER: 00000180-1506381

REVISION NUMBER: 76

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Deductible \$5,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	CA000033335-07	01/29/2025	01/29/2026 EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> Deduc. Comp/Co. \$2,000	Y	Y	CF1CA00225-221	02/09/2025	02/09/2026 COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	GX000005151-04	01/29/2025	01/29/2026 EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 In Excess of \$ GL & Auto
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	C58817569	08/01/2024	08/01/2025 <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000

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

PROJECT DESC: POURROY ROAD AND ROSALES AVENUE TRAFFIC SIGNAL AND SAFETY LIGHTING PROJECT, COMMUNITY OF FRENCH VALLEY, PROJECT NO. D3-0081; RIVERSIDE COUNTY CONTRACT NO. 25-03-004 (PTM JOB P25-04)

COUNTY OF RIVERSIDE, ITS AGENCIES, SPECIAL DISTRICTS AND DEPARTMENTS, THEIR RESPECTIVE DIRECTOR, OFFICERS, BOARD OF SUPERVISORS, ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS, AND REPRESENTATIVES ARE NAMED AS ADDITIONAL INSURED WITH RESPECTS TO THE ABOVE-MENTIONED POLICIES PER (continued on ACORD 101 Additional Remarks Schedule)

## CERTIFICATE HOLDER

## CANCELLATION

COUNTY OF RIVERSIDE  
TRANSPORTATION DEPARTMENT  
ATTN: CONTRACTS/ BIDDING UNIT  
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

(MAG)

© 1988-2015 ACORD CORPORATION. All rights reserved.

AGENCY CUSTOMER ID: 00000180

LOC #: \_\_\_\_\_



## ADDITIONAL REMARKS SCHEDULE

Page 2 of \_\_\_\_\_

AGENCY <b>McRae Associates Insurance Services</b>		NAMED INSURED <b>PTM GENERAL ENGINEERING SERVICES, INC.</b>	
POLICY NUMBER <b>N/A</b>		EFFECTIVE DATE:	
CARRIER <b>Multiple Carriers</b>	NAIC CODE		

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

(continued from Description of Operations)  
ATTACHED ENDORSEMENT(S). COVERAGE IS PRIMARY & NON-CONTRIBUTORY AS REQUIRED BY WRITTEN CONTRACT, PER ATTACHED ENDORSEMENT FORMS. WAIVER OF SUBROGATION APPLIES, IF REQUIRED BY WRITTEN CONTRACT.

\* SHOULD ANY OF THE ABOVE-DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THERE OF, A 30 DAY WRITTEN NOTICE WILL BE ISSUED.

### Workers' Compensation and Employers' Liability Policy

Named Insured

P.T.M. GENERAL ENGINEERING SERVICES, INC.  
5942 ACORN STREET,  
RIVERSIDE, CA 92504

Endorsement Number

Policy Number

Symbol: WLR Number: C58817569

Policy Period

8/1/2024 TO 8/1/2025

Effective Date of Endorsement

8/1/2024

Issued By (Name of the Insurance Company)

Ace American 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 to which it is attached and is effective on the date issued unless otherwise stated.

#### CALIFORNIA WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because California is shown in Item 3.A. of the Information Page.

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, but this waiver applies only with respect to bodily injury arising out of the operations described in the Schedule, where you are required by a written contract to obtain this waiver from us.

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

#### Schedule

1. ☐ Specific Waiver

Name of person or organization:

☒ Blanket Waiver

Any person or organization for whom the Named Insured has agreed by written contract to furnish this waiver.

2. Operations:

ALL CALIFORNIA OPERATIONS

3. Premium:

The premium charge for this endorsement shall be 1.0 percent of the California premium developed on payroll in connection with work performed for the above person(s) or organization(s) arising out of the operations described.

4. Minimum Premium: \$0



Authorized Agent

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization that is an owner or manager of real property or personal property on which you are performing ongoing operations, or a contractor on whose behalf you are performing ongoing operations, but only if coverage as an additional insured is required by a written contract or written agreement that is an "insured contract", and provided the "bodily injury" or "property damage" first occurs, or the "personal and advertising injury" offense is first committed, subsequent to the execution of the contract or agreement.	All locations at which the Named Insured is performing ongoing operations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. 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", "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(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

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

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 location 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.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

A handwritten signature in black ink, appearing to read "D. M. H. S.", is located in the bottom right corner of the page.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**  
**ADDITIONAL INSURED – OWNERS, LESSEES OR**  
**CONTRACTORS – COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
 PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization that is an owner or manager of real property or personal property for whom you work or have worked, or a contractor on whose behalf you work or have worked, but only if coverage as an additional insured extending to "bodily injury" or "property damage" included in the "products-completed operations hazard" is required by a written contract or written agreement that is an "insured contract" and provided that the "bodily injury" or "property damage" first occurs subsequent to the execution of the contract or agreement.	All locations except locations where "your work" is or was related to a job or project involving single-family dwellings, multi-family dwellings (other than rental apartments in an apartment building: (a) originally constructed and at all times used for such purpose, or (b) converted from a commercial building), condominiums, townhomes, townhouses, time-share units, fractional-ownership units, cooperatives and/or any other structure or space used or intended to be used as a residence.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

- A. 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 included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



### 3. Limits of Insurance

- a. The amount we will pay for damages is limited as described below with respect to damages covered under this endorsement:
- (1) The Aggregate Limit shown in the Schedule is the most we will pay for the sum of all damages because of "property damage";
  - (2) The Each Occurrence Limit shown above is the most we will pay for the sum of all damages because of "property damage" arising out of any one "occurrence";
  - (3) Supplementary Payments will reduce the Each Occurrence and Aggregate Limits of Insurance shown in the Schedule; and
  - (4) All sums we pay for damages or Supplementary Payments under this endorsement will reduce the Each Occurrence Limit and the General Aggregate Limit shown in the Declarations.

### 4. Other Insurance

This insurance is excess over any other valid and collectible Property or Inland Marine insurance available to you, either as a Named Insured or an Additional Insured, whether primary, excess, contingent or any other basis.

#### **PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION**

**(Insurance Services Office Endorsement CG 20 01 04 13)**

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

#### **Primary And Noncontributory Insurance**

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and
- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

#### **WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

**(Insurance Services Office Endorsement CG 24 04 05 09)**

#### **SCHEDULE**

##### **Name Of Person Or Organization:**

Any person or organization, but only if the following conditions are met:

- (1) You have expressly agreed to the waiver in a written contract; and
- (2) The injury or damage first occurs subsequent to the execution of the written contract.

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

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

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.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED – DESIGNATED ORGANIZATION**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE PART

### **SCHEDULE**

<b>Name Of Additional Insured Organization</b>
<b>ALL ORGANIZATIONS THAT ARE REQUIRED BY WRITTEN CONTRACT WITH THE NAMED INSURED TO BE NAMED AS AN ADDITIONAL INSURED ON THIS POLICY WITH REGARD TO THEIR OPERATION, MAINTENANCE OR USE OF A COVERED "AUTO".</b>

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

The following is added to the **Who Is An Insured** paragraph under Section II – **Liability Coverage**:

The organization shown in the Schedule with respect to the operation, maintenance, or use of a covered "auto" if you are required to add such organization to this policy as an additional insured in order to comply with the terms of a written "insured contract" or written agreement. This does not apply when such contract or agreement:

**A.** Involves the owner or anyone else from whom you hire or borrow a covered "auto" unless it is a "trailer" connected to a covered "auto" you own; or

**B.** Is executed after the date of "loss".

This paragraph does not apply if:

1. The terms and conditions of the written "insured contract" had been agreed upon prior to the "accident" or "loss"; and
2. You can definitively establish that the terms and conditions of the written "insured contract" ultimately executed are the same as those which had been agreed upon prior to the "accident" or "loss".



**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:

AUTO DEALERS COVERAGE FORM  
BUSINESS AUTO COVERAGE FORM  
MOTOR CARRIER COVERAGE FORM

### **SCHEDULE**

**Name of Person or Organization:**

**ALL PERSONS OR ORGANIZATIONS AS REQUIRED BY WRITTEN CONTRACT WITH THE NAMED INSURED. THE WRITTEN CONTRACT MUST BE SIGNED PRIOR TO THE DATE OF THE "ACCIDENT".**

(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 an "accident" or "loss", provided that you are required under a written agreement to waive your rights of recovery. The written agreement must be made prior to the date of the "accident" or "loss". This waiver applies only to the person or organization shown in the Schedule above.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**PRIMARY AND NONCONTRIBUTORY –  
OTHER INSURANCE CONDITION – BLANKET**

This endorsement modifies insurance provided under the following:

**BUSINESS AUTO COVERAGE PART**

Paragraph **c.** of the **Other Insurance General Condition** is replaced by the following:

- c.** Regardless of the provisions of Paragraph **a.** above, this Coverage Form's Liability Coverage is primary and we will not seek contribution from any other insurance for any liability assumed under an "insured contract" that requires liability to be assumed on a primary noncontributory basis.

Additionally, only the coverage and limit of insurance requirements of the "insured contract" shall apply, and in no event shall those requirements exceed the coverage and limits of insurance provided under this policy.





**COMMERCIAL EXCESS LIABILITY POLICY  
DECLARATIONS**

**Carrier:** Admiral Insurance Company

**Policy No.:** GX000005151-04

**Renewal/Rewrite of:** GX000005151-03

Named Insured and Mailing Address

PTM GENERAL ENGINEERING SERVICES INC.  
PO BOX 7745  
RIVERSIDE, CA 92503

**POLICY PERIOD:** From 01/29/2025 to 01/29/2026 At 12:01 A.M. Standard Time at the address of the Named Insured as stated herein

In return for the payment of the premium and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

**THE NAMED INSURED IS:** ☐ Individual; ☐ Partnership; ☒ Corporation; ☐ Joint Venture; ☐ LLC; ☐ Other

**AUDIT PERIOD:** ☐ Annual ☐ Semi-Annual ☐ Quarterly ☐ Monthly ☒ N/A

**LIMITS OF INSURANCE:**

Each Loss Event Limit: \$5,000,000  
Policy Aggregate Limit: \$5,000,000

Premium ☐ \$250,000.00  
Broker Fee - RPS ☐ \$12,500.00  
CA Surplus Lines Tax ☐ \$7,500.00  
CA Stamping Office Fee ☐ \$450.00  
Total Charges ☐ \$270,450.00

**PREMIUM:**

Advance Premium: \$250,000.00  
Terrorism Premium: \$0.00  
Total Premium: \$250,000.00

**MINIMUM RETAINED PREMIUM:**

Company to retain no less than 25% of the Total Premium if the Insured cancels

**FORMS AND ENDORSEMENTS MADE A PART OF THIS POLICY AT INCEPTION:**

See Schedule of Forms AI 00 18 03 98

This policy is not binding unless countersigned by Admiral Insurance Company or its Authorized Representative.

Countersigned On: 01/30/2025

At: Seattle, WA

By:   
Authorized Representative

## COMMERCIAL EXCESS LIABILITY

Carrier: Admiral Insurance Company

Policy No.: GX000005151-04

### SCHEDULE OF CONTROLLING UNDERLYING INSURANCE

#### Commercial General Liability

Company ADMIRAL INSURANCE COMPANY

#### Minimum Applicable Limits of Insurance

General Aggregate (Other Than Products-Completed Operations Aggregate)	\$ 2,000,000
Products-Completed Operations Aggregate	\$ 2,000,000
Each Occurrence	\$ 1,000,000
Personal And Advertising Injury	\$ 1,000,000

#### Commercial Auto Liability

Company EVEREST NATIONAL INSURANCE COMPANY

#### Minimum Applicable Limits of Insurance

Any One Accident	\$ 1,000,000
------------------	--------------

#### Employee Benefits Liability

Company ADMIRAL INSURANCE COMPANY

#### Minimum Applicable Limits of Insurance

\$ 1,000,000	Each Employee
\$ 2,000,000	Aggregate Limit



## COMMERCIAL EXCESS LIABILITY COVERAGE FORM

Various provisions in this policy restrict coverage. Read the entire policy carefully to determine rights, duties and what is and is not covered.

Throughout this policy the words “you” and “your” refer to the “Named Insured” shown in the Declarations. The words “we”, “us” and “our” refer to the Company providing this insurance.

The first “Named Insured” is the person or organization first named in the Declarations and is responsible for the payment of all premiums. The first “Named Insured” will act on behalf of all other “Named Insureds” for giving and receiving notices of cancellation and for receiving any return premium that may become payable.

Other words and phrases that appear in quotation marks have special meaning. Refer to Section IV - Definitions and relevant references in the text of this policy.

Other words and phrases that are not defined under this policy but defined in the “controlling underlying insurance” will have the meaning described in the policy of “controlling underlying insurance”.

### SECTION I - EXCESS LIABILITY COVERAGE

#### 1. Insuring Agreement

- a. We will pay on behalf of the “insured” the “ultimate net loss” in excess of the “controlling underlying insurance limit” because of “injury or damage” caused by a “loss event” to which this insurance applies, provided the applicable limits of “controlling underlying insurance”, as shown in the Schedule Of Controlling Underlying Insurance, have been exhausted by payment of judgments, settlements and, if applicable, costs or expenses.
- b. The amount we will pay for the “ultimate net loss” is limited as described in Section II - Limits of Insurance.
- c. This insurance applies to “injury or damage” that is subject to a limit of applicable “controlling underlying insurance” that is specified in the Schedule Of Controlling Underlying Insurance. If any other limit, such as a sublimit, is specified in the “controlling underlying insurance”, this insurance does not apply to “injury or damage” arising out of that exposure unless that limit is specified in the Schedule Of Controlling Underlying Insurance.

- d. If the “controlling underlying insurance” requires, for a particular claim, that the “injury or damage” occur during its policy period in order for that coverage to apply, then this insurance will only apply to that “injury or damage” if it occurs during the policy period of this policy. If the “controlling underlying insurance” requires that the “loss event” causing the particular “injury or damage” take place during its policy period in order for that coverage to apply, then this insurance will apply to the claim only if the “loss event” causing that “injury or damage” takes place during the policy period of this policy.
- e. The insurance provided under this policy will follow the same provisions, exclusions and limitations that are contained in the applicable “controlling underlying insurance”, unless otherwise directed by this insurance. To the extent such provisions differ or conflict, the provisions of this policy will apply. However, the coverage provided under this policy will not be broader than that provided by the applicable “controlling underlying insurance”.
- f. In the event that the Schedule Of Controlling Underlying Insurance identifies more than one policy of “controlling underlying insurance”, the provisions, exclusions and limitations of the “controlling underlying insurance” applicable to the particular “loss event” for which a claim is made or “suit” is brought will apply to the extent not contradicted by the provisions of this policy.

#### 2. Insuring Agreement – Defense

- a. We will have no duty to investigate or defend any claim or “suit”. We will have the right and be given the opportunity to associate with any “insured” or “controlling underlying insurer” in the investigation, settlement or defense of any claim or “suit” that may involve this insurance.
- b. At our discretion, we may investigate and settle any claim or “suit”.
- c. If we exercise our rights as described in Paragraphs 2.a. and 2.b. above, we will pay, with respect to any claim we investigate or settle, or any “suit” against an “insured” we defend, the following costs or expenses:

- (1) All expenses we incur, including but not limited to attorney fees;
- (2) The cost of bonds to release attachments, but only for bond amounts within the applicable limit of insurance. We do not have to furnish these bonds;
- (3) All reasonable expenses incurred by the “insured” at our request to assist us in the investigation or defense of the claim or “suit”, including actual loss of earnings up to \$250 a day because of time off from work;
- (4) All costs taxed against the “insured” in the “suit”;
- (5) Prejudgment interest awarded against the “insured” on that part of the judgment we pay. If we make an offer to pay the applicable limit of insurance, we will not pay any prejudgment interest based on that period of time after the offer; and
- (6) All interest on the full amount of any judgment that accrues after entry of the judgment and before we have paid, offered to pay, or deposited in court the part of the judgment that is within the applicable limit of insurance.

These payments will not reduce the Each Loss Event Limit or Policy Aggregate Limit shown in the Declarations unless the policy of “controlling underlying insurance” specifies that its “controlling underlying insurance limit” is reduced by costs or expenses.

- d. If we exercise our rights as described in Paragraphs 2.a. and 2.b. above, we are under no obligation to continue any investigation, settlement or associated defense when the “controlling underlying insurance limit” has been exhausted, or if on such exhaustion we continue any investigation, settlement or associated defense, when we have used up the applicable Each Loss Event Limit or Policy Aggregate Limit shown in the Declarations in the payment of judgments, settlements and, if applicable, costs or expenses.
- e. When our limits of insurance have been exhausted, any defense provided by us under Paragraphs 2.a. and/or 2.d. will cease.

### 3. Exclusions

The following exclusions, and any other exclusions added by endorsement, apply to this policy. In addition, the exclusions applicable to any “controlling underlying insurance” apply to this insurance unless superseded by the following exclusions, or superseded by any other exclusions added by endorsement to this policy.

This insurance does not apply to:

#### a. Auto

Any loss, cost or expense payable under or resulting from any of the following auto coverages:

- (1) First-party physical damage coverage;
- (2) No-fault coverage;
- (3) Personal injury protection or auto medical payments coverage; or
- (4) Uninsured or underinsured motorists coverage.

#### b. Employers Liability

“Injury or damage” caused by a “loss event” covered under Employer’s Liability “controlling underlying insurance” in any jurisdiction where such insurance is or is required to be unlimited.

#### c. Medical Payments

Medical payments coverage or expenses that are provided without regard to fault, whether or not provided by the applicable “controlling underlying insurance”.

#### d. Pollution

- (1) “Injury or damage” which would not have occurred, in whole or in part, but for the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of pollutants at any time.
- (2) Any loss, cost or expense arising out of any:
  - (a) Request, demand, order or statutory or regulatory requirement that any “insured” or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of, pollutants; or
  - (b) Claim or “suit” by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of, pollutants.

This exclusion only applies when this policy is excess to a policy issued by an insurer other than us.

This exclusion does not apply to the extent that the applicable “controlling underlying insurance” for the pollution liability risks described in Paragraphs (1) and (2) above exist or would have

existed but for the exhaustion of the limit of such “controlling underlying insurance” for “injury or damage”.

**e. Workers' Compensation And Similar Laws**

Any obligation of any insured under a workers' compensation, disability benefits or unemployment compensation law or any similar law.

**SECTION II – LIMITS OF INSURANCE**

1. The Limits of Insurance shown in the Declarations, and the rules below fix the most we will pay regardless of the number of:
  - a. “Insureds”;
  - b. Claims made or “suits” brought, or number of vehicles involved;
  - c. Persons or organizations making claims or bringing “suits”; or
  - d. Limits available under any “controlling underlying insurance”.
2. The Limits of Insurance of this policy will apply as follows:
  - a. This insurance only applies in excess of the “controlling underlying insurance limit”.
  - b. The Policy Aggregate Limit is the most we will pay for the sum of all “ultimate net loss” for all “injury or damage” covered under this insurance.

However, this Policy Aggregate Limit only applies to “injury or damage” that is subject to an aggregate limit of insurance under the “controlling underlying insurance” applicable to the particular “loss event” for which a claim is made or “suit” is brought.
  - c. Subject to Paragraph 2.b. above, the Each Loss Event Limit is the most we will pay for the sum of all “ultimate net loss” under this insurance because of all “injury or damage” arising out of any one “loss event”.
  - d. If the Limits of Insurance of the “controlling underlying insurance” are reduced by costs or expenses by the terms of that policy, any payments for costs or expenses we make will reduce our applicable Limits of Insurance in the same manner.
3. If any “controlling underlying insurance” has a policy period that is different from the policy period of this policy then, for the purposes of this insurance, the “controlling underlying insurance limit” will only be reduced or exhausted by payments made for “injury or damage” covered under this insurance.

The Policy Aggregate Limit described in Paragraph 2. above applies to the policy period shown in the Declarations. Any extension of the policy period will be deemed part of the policy period that is being extended and therefore subject to the Policy Aggregate Limit.

**SECTION III – CONDITIONS**

The following conditions apply. In addition, the conditions applicable to any “controlling underlying insurance” are also applicable to the coverage provided under this insurance unless superseded by the following conditions.

**1. Appeals**

If the “controlling underlying insurer” or “insured” elects not to appeal a judgment in excess of the applicable “controlling underlying insurance limit”, we may do so at our own expense. We will be liable for taxable costs, pre- and post-judgment interest and disbursements. In no event will this provision increase our liability beyond the applicable Limits of Insurance described in Section II - Limits of Insurance.

**2. Bankruptcy**

**a. Bankruptcy Of Insured**

Bankruptcy or insolvency of the “insured” or of the “insured's” estate will not relieve us of our obligations under this policy.

**b. Bankruptcy Of Underlying Insurer**

Bankruptcy of the “controlling underlying insurer” will not relieve us of our obligations under this policy.

However, this insurance will not replace the “controlling underlying insurance” in the event of bankruptcy or insolvency of the “controlling underlying insurer”. This insurance will apply as if the “controlling underlying insurance” were in full effect.

**3. Cancellation**

- a. The first “Named Insured” shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.
- b. We may cancel this policy by mailing or delivering to the first “Named Insured” written notice of cancellation at least:
  - (1) 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
  - (2) 30 days before the effective date of cancellation if we cancel for any other reason.

- c. We will mail or deliver our notice to the first "Named Insured's" last mailing address known to us.
- d. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.
- e. If this policy is cancelled, we will send the first "Named Insured" any premium refund due. If we cancel, the refund will be pro rata. If the first "Named Insured" cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.
- f. If notice is mailed, proof of mailing will be sufficient proof of notice.

#### 4. Changes

This policy contains all the agreements between you and us concerning the insurance afforded. The first "Named Insured" shown in the Declarations is authorized to make changes in the terms of this policy with our consent. This policy's terms can be amended or waived only by endorsement issued by us and made a part of this policy.

#### 5. Duties In The Event Of A Loss Event, Claim Or Suit

- a. You must see to it that we are notified in writing as soon as practicable of any "loss event", regardless of the amount, which may reasonably be expected to result in a claim under this policy. To the extent possible, notice should include:
  - (1) How, when and where the "loss event" took place;
  - (2) The names and addresses of any injured persons and witnesses; and
  - (3) The nature and location of any "injury or damage" arising out of the "loss event".
- b. If a claim is made or "suit" is brought against any "insured", you must:
  - (1) Immediately record the specifics of the claim or "suit" and the date received; and
  - (2) Notify us in writing as soon as practicable.

You must see to it that we receive written notice of the claim or "suit" as soon as practicable.
- c. You and any other involved "insured" must:
  - (1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or "suit";
  - (2) Authorize us to obtain records and other information;

- (3) Cooperate with us in the investigation or settlement of the claim or defense against the "suit"; and

- (4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the "insured" because of "injury or damage" to which this insurance may also apply.

- d. No "insured" will, except at that "insured's" own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

#### 6. Examination Of Your Books And Records

We may examine and audit your books and records as they relate to this policy at any time during the policy period and up to three years afterward.

#### 7. Inspections And Surveys

- a. We have the right to:
  - (1) Make inspections and surveys at any time;
  - (2) Give you reports on the conditions we find; and
  - (3) Recommend changes.
- b. We are not obligated to make any inspections, surveys, reports or recommendations and any such actions we do undertake relate only to insurability and the premiums to be charged. We do not make safety inspections. We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public. We do not warrant that conditions:
  - (1) Are safe or healthful; or
  - (2) Comply with laws, regulations, codes or standards.

Paragraphs a. and b. of this condition apply not only to us, but also to any rating, advisory, rate service or similar organization which makes insurance inspections, surveys, reports or recommendations on our behalf.

#### 8. Legal Action Against Us

No person or organization has a right under this policy:

- a. To join us as a party or otherwise bring us into a "suit" asking for damages from an "insured"; or
- b. To sue us on this policy unless all of its terms have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an “insured”, but we will not be liable for damages that are not payable under the terms of this policy or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by us, the “insured” and the claimant or the claimant's legal representative.

#### **9. Other Insurance**

- a. This insurance is excess over, and shall not contribute with any other insurance, whether primary, excess, contingent or on any other basis. This condition will not apply to insurance specifically written as excess over this policy.
- b. When this insurance is excess over other insurance, we will pay only our share of the “ultimate net loss” that exceeds the sum of:
  - (1) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
  - (2) The total of all deductible and self-insured amounts under all that other insurance.

#### **10. Premium Audit**

- a. We will compute all premiums for this policy in accordance with our rules and rates.
- b. If this policy is auditable, the premium shown in this policy as advance premium is a deposit premium only. At the close of each audit period we will compute the earned premium for that period and send notice to the first “Named Insured”. The due date for audit premiums is the date shown as the due date on the bill.
- c. The first “Named Insured” must keep records of the information we need for premium computation and send us copies at such times as we may request.

#### **11. Representations Or Fraud**

By accepting this policy, you agree, represent and warrant that:

- a. The statements in the Declarations are accurate and complete;
- b. The statements and information contained in the application for insurance and any supplementary information are true and correct and that no facts have been suppressed or misstated;
- c. This policy is being issued in full reliance upon the statements and representations made in the application and any supplementary information;
- d. The application and any supplementary information are incorporated and made part of this policy by reference; and

- e. This policy is void in any case of fraud and/or misrepresentation by you as it relates to this policy or any claim under this policy.

#### **12. Separation Of Insureds**

Except with respect to the Limits of Insurance and any rights or duties specifically assigned in this policy to the first “Named Insured”, this insurance applies:

- a. As if each “Named Insured” were the only “Named Insured”; and
- b. Separately to each “insured” against whom claim is made or “suit” is brought.

However, nothing in this condition renders this policy applicable to any “insured” where the policy is otherwise void due to fraud or misrepresentations made by that “insured” or any other “insured”.

#### **13. Transfer Of Rights Of Recovery Against Others To Us**

If the “insured” has rights to recover all or part of any payment we have made under this policy those rights are transferred to us. The “insured” must do nothing after loss to impair them. At our request, the “insured” will bring “suit” or transfer those rights to us and help us enforce them.

#### **14. Transfer Of Rights And Duties Under This Policy**

The rights and duties of any “insured” under this policy may not be transferred without our written consent, except in the case of death of an individual named “insured”.

If any “insured” dies, that “insured’s” rights and duties will be transferred to that “insured’s” legal representative, but only while acting within the scope of duties as that “insured’s” legal representative. Until that “insured’s” legal representative is appointed, anyone having proper temporary custody of that “insured’s” property will have that “insured’s” rights and duties but only with respect to that property.

#### **15. No Duty To Notify If We Do Not Renew**

If we decide not to renew this policy, we are under no obligation to mail or deliver notice of the nonrenewal to any “insured” or others.

#### **16. Loss Payable**

Liability under this policy does not apply to a given claim unless and until:

- a. The “insured” or “insured’s” “controlling underlying insurer” has become obligated to pay the “controlling underlying insurance limit”; and

- b. The obligation of the “insured” to pay the “ultimate net loss” in excess of the “controlling underlying insurance limit” has been determined by a final settlement or judgment or written agreement among the “insured”, claimant, “controlling underlying insurer” (or a representative of one or more of these) and us.

#### 17. Maintenance Of Underlying Insurance

You must maintain the “controlling underlying insurance” affording in total the coverage and limits as stated in the Schedule Of Controlling Underlying Insurance in full force and effect during the policy period shown in the Declarations of this policy, except for reduction of aggregate limits, where applicable, solely as a result of the payment of claims, settlement or judgments for “loss events” which:

- a. Take place during the policy period of this policy; and
- b. Are for “injury or damage”, costs or expenses covered by this policy.

You must notify us in writing within thirty days if any company cancels, non-renews, replaces or otherwise terminates or changes any terms or conditions of any of the “controlling underlying insurance”. You must notify us immediately of the exhaustion of any aggregate limits of the “controlling underlying insurance”.

Your failure to comply with the foregoing will not invalidate this policy, but in the event of such failure we will be liable only to the extent that we would have been liable had you complied herewith.

#### SECTION IV – DEFINITIONS

The definitions applicable to any “controlling underlying insurance” also apply to this insurance. In addition, the following definitions apply.

1. “Controlling underlying insurance” means any policy of insurance or self-insurance listed in the Schedule Of Controlling Underlying Insurance that applies to the particular “loss event” for which a claim is made or “suit” is brought.
2. “Controlling underlying insurance limit” means the sum of amounts applicable to any claim or “suit” from:
  - a. “Controlling underlying insurance”, whether such “controlling underlying insurance” is collectible or not;

- b. Any other insurance, whether primary, excess, contingent or on any other basis, except such insurance as is specifically purchased to apply in excess of this policy’s Limits of Insurance; and
- c. Any applicable self-insured retention or deductible

3. “Controlling underlying insurer” means any insurer who provides any policy or coverages of “controlling underlying insurance”.
4. “Injury or damage” means any injury or damage covered by the applicable “controlling underlying insurance” arising from a “loss event”.
5. “Insured” means any person or organization qualifying as such under the “controlling underlying insurance”.
6. “Loss event” means an occurrence, offense, accident, act, or other event, to which the applicable “controlling underlying insurance” applies.
7. “Named Insured” means the entity(ies) or individual(s) named in the Declarations.
8. “Suit” means a civil proceeding in which damages because of a “loss event” to which this insurance applies are alleged. “Suit” includes:
  - a. An arbitration proceeding in which such damages are claimed and to which the “insured” must submit or does submit with our consent; or
  - b. Any other alternative dispute resolution proceeding in which such damages are claimed and to which the “insured” submits with our consent or the “controlling underlying insurer’s” consent.
9. “Ultimate net loss” means the total sum, after reduction for recoveries, or salvages collectible, that the “insured” becomes legally obligated to pay as damages by reason of:
  - a. Settlements, judgments, binding arbitration; or
  - b. Other binding alternate dispute resolution proceeding entered into with our consent.

“Ultimate net loss” includes costs and expenses if the “controlling underlying insurance” specifies that limits are reduced by costs or expenses.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **EXCLUSION OF CERTIFIED ACTS OF TERRORISM AND EXCLUSION OF OTHER ACTS OF TERRORISM COMMITTED OUTSIDE THE UNITED STATES**

This endorsement modifies insurance provided under the following:

### **EXCESS LIABILITY POLICY**

Any endorsement addressing acts of terrorism (however defined) in any "controlling underlying insurance" does not apply to this excess insurance. The following provisions addressing acts of terrorism apply with respect to this excess insurance:

**A. The following exclusion is added:**

This insurance does not apply to:

#### **TERRORISM**

Liability, injury or damage of any kind, including costs or expenses, arising out of, resulting from, caused or contributed by a "certified act of terrorism", or out of an "other act of terrorism" that is committed outside of the United States (including its territories and possessions and Puerto Rico), but within the coverage territory. However, with respect to an "other act of terrorism", this exclusion applies only when one or more of the following are attributed to such act:

1. The total of insured damage to all types of property exceeds \$25,000,000 (valued in US dollars). In determining whether the \$25,000,000 threshold is exceeded, we will include all insured damage sustained by property of all persons and entities affected by the terrorism and business interruption losses sustained by owners or occupants of the damaged property. For the purpose of this provision, insured damage means damage that is covered by any insurance plus damage that would be covered by any insurance but for the application of any terrorism exclusions; or
2. Fifty or more persons sustain death or serious physical injury. For the purposes of this provision, serious physical injury means:
  - a. Physical injury that involves a substantial risk of death; or

b. Protracted and obvious physical disfigurement; or

c. Protracted loss of or impairment of the function of a bodily member or organ; or

3. The terrorism involves the use, release or escape of nuclear materials, or directly or indirectly results in nuclear reaction or radiation or radioactive contamination; or
4. The terrorism is carried out by means of the dispersal or application of pathogenic or poisonous biological or chemical materials; or
5. Pathogenic or poisonous biological or chemical materials are released, and it appears that one purpose of the terrorism was to release such materials.

With respect to this exclusion, Paragraphs 1. and 2. describe the thresholds used to measure the magnitude of an incident of an "other act of terrorism" and the circumstances in which the threshold will apply for the purpose of determining whether this exclusion will apply to that incident.

**B. The following definitions are added:**

1. "Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in accordance with the provisions of the federal Terrorism Risk Insurance Act, to be an act of terrorism pursuant to such Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:
  - a. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act;

**b. The act resulted in damage:**

**(1)** Within the United States (including its territories and possessions and Puerto Rico); or

**(2)** Outside of the United States in the case of:

**(a)** An air carrier (as defined in Section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States), regardless of where the loss occurs; or

**(b)** The premises of any United States mission; and

**c.** The act is a violent act or an act that is dangerous to human life, property or infrastructure and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**2.** "Other act of terrorism" means a violent act or an act that is dangerous to human life, property or infrastructure that is committed by an individual or individuals and that appears to be part of an effort to coerce a civilian population or to influence the policy or affect the conduct of any government by coercion, and the act is not a "certified act of terrorism".

Multiple incidents of an "other act of terrorism" which occur within a seventy-two hour period and appear to be carried out in concert or to have a related purpose or common leadership shall be considered to be one incident.

**C.** The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for loss or damage that is otherwise excluded under this Coverage Part.

# List of Approved Surplus Line Insurers (LASLI)

List is current as of: March 3, 2025

Please use the "Find" option in the "Edit" menu of your browser to search for a particular company.

[A](#) | [B - D](#) | [E - G](#) | [H - L](#) | [M - P](#) | [Q - Z](#)

## A

Insurer	Date Approved
Acceptance Casualty Insurance Company (Nebraska)	10/23/2007
Admiral Insurance Company (Delaware)	06/30/1995
Adriatic Insurance Company (North Dakota)	06/30/1995
AIG Specialty Insurance Company (Illinois) (Name changed from Chartis Specialty Insurance Company effective 10/01/2013)	06/30/1995
AIX Specialty Insurance Company (Delaware)	06/05/2009
Allianz Global Corporate & Specialty SE (Germany) (Name Changed from Allianz Global Corporate Specialty AG effective 11/13/2013)	06/16/2004
Allied World National Assurance Company (New Hampshire) (Name changed from Newmarket Underwriters Insurance Company effective 10/03/2007)	12/18/1997
Allied World Surplus Lines Insurance Company (Arkansas) (Name changed from Darwin Select Insurance Company effective 06/03/2014) (Name changed from ULICO Indemnity Company Effective 05/13/2010)	12/22/1995
American Inter-Fidelity Exchange (Indiana)	04/18/2023
American Western Home Insurance Company (Oklahoma)	09/01/1995
Arch Insurance (UK) Limited (U.K.) (Name changed from Arch Insurance Company (Europe) Limited effective 03/18/2019)	10/19/2009
Arch Specialty Insurance Company (Missouri) (Name changed from Rock River Insurance Company effective 08/01/2002) (Domicile changed from Nebraska to Missouri effective 09/30/2014)	09/01/1995
Aspen Insurance UK Limited (U.K.)	12/29/2004
Aspen Specialty Insurance Company (North Dakota) (Name changed from Dakota Specialty Insurance Company, effective 10/22/2003)	03/03/1998
Associated Industries Insurance Company, Inc. (Florida)	01/11/2012
Atain Specialty Insurance Company (Michigan) (Name changed from USF Insurance Company effective 08/25/2011) (Domicile changed from Pennsylvania to Michigan effective 12/31/2007)	09/01/1995
Atlantic Casualty Insurance Company (North Carolina)	07/16/2009

**Company Profile**
[Company Search](#)
[Company Search Results](#)
[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**
**EVEREST NATIONAL INSURANCE COMPANY**

**100 EVEREST WAY  
WARREN, NJ 07059  
800-438-4375**

**Old Company Names**
**Effective Date**

DRYDEN GUARANTY INSURANCE COMPANY	10/20/1993
PRUDENTIAL NATIONAL INSURANCE COMPANY	06/17/1996

**Agent For Service**

Melissa DeKoven  
2710 Gateway Oaks Drive, Suite 150N  
Sacramento CA 95833-3505

**Reference Information**

NAIC #:	10120
California Company ID #:	3138-5
Date Authorized in California:	03/02/1988
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	DELAWARE

[back to top](#)
**NAIC Group List**

NAIC Group #:	1120	EVEREST REINS HOLDINGS 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  
FIRE  
LIABILITY  
MARINE  
MISCELLANEOUS  
PLATE GLASS  
SPRINKLER  
SURETY  
TEAM AND VEHICLE  
WORKERS' COMPENSATION

[back to top](#)

**Company Profile**

- Company Search
- Company Search Results
- 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**
**ACE AMERICAN INSURANCE COMPANY**

**436 WALNUT STREET  
PHILADELPHIA, PA 19106  
800-352-4462**

**Old Company Names**
**Effective Date**

ALLIED COMPENSATION INSURANCE COMPANY	04/03/1961
ALLIED INSURANCE COMPANY	12/14/1977
CIGNA INSURANCE COMPANY	11/01/1999
INA UNDERWRITERS INSURANCE COMPANY	12/31/1983

**Agent For Service**

AMANDA GARCIA  
330 N Brand Blvd Ste 700  
Glendale CA 91203

**Reference Information**

NAIC #:	22667
California Company ID #:	1325-0
Date Authorized in California:	12/20/1945
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	PENNSYLVANIA

**back to top**

**NAIC Group List**

NAIC Group #: 0626 Chubb Ltd 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  
DISABILITY  
FIRE  
LIABILITY  
MARINE  
MISCELLANEOUS  
PLATE GLASS  
SPRINKLER  
SURETY  
TEAM AND VEHICLE  
WORKERS' COMPENSATION

## Bid

Date: 03.19.25

To: County of Riverside, hereafter called "County";

Bidder: PTM General Engineering Services, Inc.  
(hereafter called "Contractor")

The undersigned, Contractor, having carefully examined the site and the Contract Documents for the construction of **Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081** hereby proposes to construct the work in accordance with the Contract Documents, including Addenda Number(s) \_\_\_\_\_ (Fill in addenda numbers if addenda have been issued.) for the amount stated in this Bid.

By submitting this Bid, Contractor agrees with County:

1. That unless withdrawn in person by Contractor or some person authorized in writing by Contractor (not by telephone or facsimile) before the time specified in the Notice Inviting Bids for the public opening of bids, this Bid constitutes an irrevocable offer for 90 calendar days after that date.
2. County has the right to reject any or all Bids and to waive any irregularities or informalities contained in a Bid.
3. To execute the Contract and deliver the Performance Bond, Payment Bond and Insurance Certificate with endorsements, that comply with the requirements set forth in the Instruction to Bidders and General Conditions, within ten (10) business days of the date of the Notice of Acceptance of Bid and Intent to Award as issued by the County.
4. That the contract shall be awarded upon a resolution or minute order to that effect duly adopted by the governing body of County; and that execution of the Contract shall constitute a written memorial thereof.
5. To submit to the County such information as County may require determining whether a particular Bid is the lowest responsible bid submitted.
6. That the accompanying Bid Bond, certified check or cashier's check is in an amount not less than 10% of the total bid submitted and constitutes a guarantee that if awarded the contract, Contractor will execute the Contract and deliver the required bonds within ten (10) business days after notice of award. If Contractor fails to execute and deliver said documents, the bond or check is to be charged with the costs of the resultant damages to the County, including but not limited to: publication costs, the difference in money between the amount bid and the amount in excess of the bid which it costs County to do or cause to be done for the work involved, lease and rental costs, additional salaries and overhead, increased interest and costs of funding the project, attorney expense, additional engineering and architectural expense and cost of maintaining or constructing alternate facilities occasioned by the failure to execute and deliver said documents.
7. By signing this Bid the Contractor certifies that the representations made therein are made under penalty of perjury.

**Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081**

**PROPOSAL**

ITEM No.	ITEM CODE	ITEM	UNIT	ESTIMATED QUANTITY	ITEM PRICE (IN FIGURES)	TOTAL (IN FIGURES)
<b>BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project</b>						
1	066100	DUST ABATEMENT	LS	1	750 -	750 -
2	100100	DEVELOP WATER SUPPLY	LS	1	750 -	750 -
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	16000 -	16000 -
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	2000 -	2000 -
5	170103	CLEARING AND GRUBBING	LS	1	6000 -	6000 -
6	015602	FUNDING AWARENESS SIGN	EA	1	1200 -	1200 -
7	730010	MINOR CONCRETE (CURB)	LF	15	180 -	2700 -
8	820410	SALVAGE ROADSIDE SIGN	EA	3	18 -	54 -
9	820840	ROADSIDE SIGN - ONE POST	EA	3	492	1476 -
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	21000 -	84000 -
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	11.40 -	7980 -
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	26.40 -	2640 -
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	15 -	750 -
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	429718 -	429718 -
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00

PROJECT TOTAL  
TOTAL:  
ITEMS 1 - 15

*Five Hundred Eighty One Thousand Eighteen Dollars* \$ 581,018.00  
"WORDS"  
*No cents.*

## Bidder Data and Signature

Name of Bidder: PTM General Engineering Services, Inc.

Type of organization: Corporation

Person(s) authorized to sign for Bidder: \_\_\_\_\_

Elizabeth H. Mendoza, President/CFO or Brian Mendoza, Vice President/Secretary

Note:

If Bidder is a **Corporation**, state legal name of Corporation and also names of the president, vice-president, secretary, treasurer and manager thereof.

If Bidder is a **Co-Partnership**, state true name of firm and also names of all individual co-partners composing firm.

If Bidder is a sole proprietorship or an **Individual**, state first and last name(s) in full.

If Bid is signed by an agent other than an owner, partner or corporate officer, Bid shall be accompanied by a power-of-attorney.

Business Street Address: 5942 Acorn St.

(Please include business address even if P.O. Box is used.)

Business City, State, Zip Code: Riverside, CA 92504

P.O. Box- Number: P.O. Box 7745

P.O. Box- City, State, Zip Code: Riverside, CA 92513

Phone: ( 951 ) 710.1000

Facsimile: ( 951 ) 710.1006

E-mail: elizabeth@ptm-eng.com; brian@ptm-eng.com

Contractor's license number: 891265

License Classification(s): A; C10

Expiration date: 02.28.2027

Department of Industrial Relations Registration Number: 1000001433

### **Bidder Data and Signature (continued)**

Accompanying this Bid is a certified check, cashier check or bid bond in an amount equal to at least ten (10) percent of the total bid for:

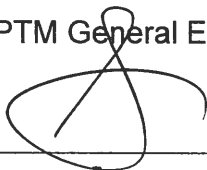
**Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081**

By my signature on this Bid, I certify, under penalty of perjury under the laws of the State of California, that all the information on this form is true and correct.

IN WITNESS WHERE OF Bidder/Contractor executed this Bid as of the date set forth on page **B1** of this Bid.

PTM General Engineering Services, Inc.

**Signature:**



**Name (printed):**

Elizabeth H. Mendoza

**Title:**

President/CFO

"Contractor"

## Subcontractor List

Bidder/Contractor submits the following complete list of each Subcontractor who will perform work, labor or render service in or about the construction in an amount in excess of 1/2 of 1% of the total bid or \$10,000 whichever is greater.

Check box on right side of row if any construction item, for the listed Subcontractor, is partial work. If partial work is to be performed within a certain construction item or trade, the Bidder/Contractor shall specify the portion(s) of the work to be performed by the different subcontractors or Bidder/Contractor will be subject to provisions of Public Contract Code Section 4106.

Name of Bidder (Prime/General Contractor): PTM General Engineering Services, Inc.

	Subcontractor Name	License Number	DIR Registration Number	Business Address (City, State)	Construction Item(s) [Item Number and Description]	Check if Partial Work
1.	DT Stellar General Engineering	999662	1000993266	31941 Silkvine Winchester, CA 92596	#3 Ptn T/C #5 Clear & Grub #7 Minor concrete #10 Curb RAMP	<input checked="" type="checkbox"/>
2.	Superior Pavement Marking	776306	1000001476	P.O Box 278 Braumont, CA 92223	#8 Sign #13 Stripe #9 Post #11 Marking #12 Stripe	<input type="checkbox"/>
3.	Crosstown Electrical & Data Inc. 5454 Diaz St. Irwindale, CA 91706 License No: 756309 Exp: 11.30.2026 <i>ML</i> Class: A; C10 Tel. (626) 813-6693 Email: <a href="mailto:aheermance@crosstowndata.com">aheermance@crosstowndata.com</a> DIR: 1000000155 Exp: 06.30.25				#14 - Antenna and modem	<input checked="" type="checkbox"/>
4.						<input type="checkbox"/>
5.						<input type="checkbox"/>
6.						<input type="checkbox"/>

Additional Subcontractor List(s) may be attached to the Bid.

(A copy of this form may be attached with additional Subcontractor information.)

Percent of work to be performed by Subcontractors: 39 %

Note: A minimum of 50% of the work is required to be performed by the prime/general Contractor.

## Non-Collusion Declaration

To be executed by bidder and submitted with bid.  
(Title 23 United States Code Section 112 and Public Contract Code Section 7106)

The undersigned declares:

I am the Elizabeth H. Mendoza (Title) of PTM General Engineering Services, Inc. (Company),  
the party making the foregoing bid.

The bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation. The bid is genuine and not collusive or sham. The bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham bid. The bidder has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham bid, or that anyone shall refrain from bidding. The bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder.

All statements contained in the bid are true. The bidder has not, directly or indirectly, submitted his or her bid price of any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, to any corporation, partnership, company, association, organization, bid depository, or to any member or agent thereof to effectuate a collusive or sham bid, and has not paid, and will not pay, any person or entity for such purpose.


Any person executing this declaration on behalf of a bidder that is a corporation, partnership, joint venture, limited liability company, limited liability partnership, or any other entity, hereby represents that he or she has full power to execute, and does execute, this declaration on behalf of the bidder.

I declare under penalty of perjury under the applicable laws that the foregoing is true and correct and that this declaration is executed on

March (Month) 19 (Day) of 2025 (Year),

at Riverside (City), Ca (State).

Signature of Declarant:



Printed name of Declarant: Elizabeth H. Mendoza

Name of Bidder (Company): PTM General Engineering Services, Inc.

Title or Office: President/CFO

Note: Notarization of signature required.

☒ Check box if attachment is included.

CLEAR

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )

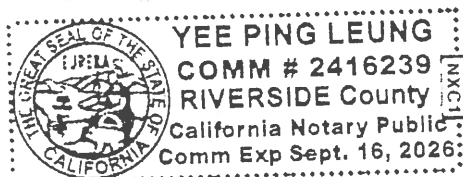
On 3-19-25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer

Personally appeared Elizabeth H. Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name \_\_\_\_\_

- ☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

Signer's Name \_\_\_\_\_

- ☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

**Iran Contracting Act**  
(Public Contract Code sections 2200-2208)

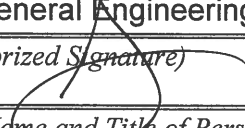
Prior to bidding on, submitting a proposal or executing a contract or renewal for a County of Riverside contract for goods or services of **\$1,000,000 or more**, a Contractor must either:

- a) Certify it is not on the current list of persons engaged in investment activities in Iran created by the California Department of General Services (“DGS”) pursuant to Public Contract Code section 2203(b) and is not a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person, for 45 days or more, if that other person will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS; or
- b) Demonstrate it has been exempted from the certification requirement for that solicitation or contract pursuant to Public Contract Code section 2203(c) or (d).

To comply with this requirement, please insert your Contractor or financial institution name and Federal ID Number (if available) and complete one of the options below. Please note: California law establishes penalties for providing false certifications, including civil penalties equal to the greater of \$250,000 or twice the amount of the contract for which the false certification was made; contract termination; and three-year ineligibility to bid on contracts. (Public Contract Code section 2205.)

**Option #1 – Certification**

I, the official named below, certify I am duly authorized to execute this certification on behalf of the vendor/financial institution identified below, and the vendor/financial institution identified below is **not** on the current list of persons engaged in investment activities in Iran created by DGS and is not a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person/vendor, for 45 days or more, if that other person/vendor will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS.

<i>Contractor Name/Financial Institution (Printed)</i> PTM General Engineering Services, Inc.		<i>Federal ID Number (or n/a)</i> 20-5693645
<i>By (Authorized Signature)</i> 		
<i>Printed Name and Title of Person Signing</i> Elizabeth H. Mendoza, President/CFO		
<i>Date Executed</i> 03.19.2025	<i>Executed in</i> Riverside, CA	

**Option #2 – Exemption**

Pursuant to Public Contract Code sections 2203(c) and (d), a public entity may permit a Contractor/financial institution engaged in investment activities in Iran, on a case-by-case basis, to be eligible for, or to bid on, submit a proposal for, or enters into or renews, a contract for goods and services.

**If you have obtained an exemption** from the certification requirement under the Iran Contracting Act, please fill out the information below, and **attach documentation demonstrating the exemption approval.**

<i>Contractor Name/Financial Institution (Printed)</i>		<i>Federal ID Number (or n/a)</i>
<i>By (Authorized Signature)</i>		
<i>Printed Name and Title of Person Signing</i>		
<i>Date Executed</i>	<i>Executed in</i>	

## **Opt Out of Payment Adjustments for Price Index Fluctuations**

**Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081**

To opt out of the payment adjustments for price index fluctuations, as specified in Standard Specifications Section 9-1.07 "Payment Adjustments for Price Index Fluctuations," completely fill in, date, sign, and submit this form with the Bid documents.

By signing and submitting this form, our company hereby opts out of the payment adjustments for price index fluctuations for the above-named project.

Date: 03.19.25

Company Name (Bidder): PTM General Engineering Services, Inc.

Signature:  \_\_\_\_\_

(Signature of Company's authorized officer or designated representative)

Name (printed): Elizabeth H. Mendoza

President/CFO

Title: \_\_\_\_\_

## Bid Bond

### Recitals:

1. PTM GENERAL ENGINEERING SERVICES, INC. "Contractor", has submitted his/her Contractor's Proposal to County of Riverside, "County", for the construction of public work for Pourroy Road and Rosales Avenue, Traffic Signal and Safety Lighting Project, Community of French Valley, Project No. D3-0081 in accordance with a Notice Inviting Bids from the County.
2. NATIONWIDE MUTUAL INSURANCE COMPANY a OHIO corporation, hereafter called "Surety", is the surety of this bond.

### Agreement:

We, Contractor as Principal and Surety as Surety, jointly and severally agree and state as follows:

1. The amount of the obligation of this bond is 10% of the amount of the Contractor's Proposal, including bid alternates, and inures to the benefit of County.
2. This Bond is exonerated by (1) County rejecting said Proposal or, in the alternate, (2) if said Proposal is accepted, Contractor executes the Contract and furnishes the Bonds as agreed to in its Proposal, otherwise it remains in full force and effect for the recovery of loss, damage and expense of County resulting from failure of Contractor to act as agreed to in its Proposal. Some types of possible loss, damage and expense are specified in the Contractor's Proposal.
3. Surety, for value received, stipulates and agrees that its obligations hereunder shall in no way be impaired or affected by any extension of time within which County may accept the Proposal and waives notice of any such extension.
4. This Bond is binding on our heirs, executors, administrators, successors and assigns.

Dated: MARCH 19TH, 2025

Signatures:

NATIONWIDE MUTUAL INSURANCE COMPANY

By: 

KEVIN VEGA, ATTORNEY-IN-FACT

Title:

Attorney in Fact  
"Surety"

PTM GENERAL ENGINEERING SERVICES, INC.

By: 

Title:

Elizabeth H. Mendoza, President  
"Contractor"

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/she executed the same in his/her authorized capacities, and that by his/her 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.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Notary Public (Seal)

**Note: This Bond must be executed by both Contractor and Surety with corporate seal affixed. All signatures must be notarized. (Attach acknowledgements).**

CLEAR

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )

On 3.19.25 before me, Yee Ping Leung, Notary Public  
Date Here Insert Name and Title of the Officer

Personally appeared Elizabeth H. Mendoza  
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 Yee Ping Leung  
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document \_\_\_\_\_ Document Date \_\_\_\_\_

Number of Pages \_\_\_\_\_ Signer(s) Other Than Named Above \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name \_\_\_\_\_

- ☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

Signer Is Representing \_\_\_\_\_

Signer's Name \_\_\_\_\_

- ☐ Corporate Officer—Title(s) \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other \_\_\_\_\_

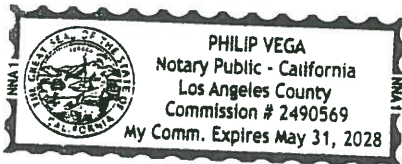
Signer Is Representing \_\_\_\_\_

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }  
 } ss.  
County of LOS ANGELES }

On March 19th, 2025 before me, Philip Vega, Notary Public  
Here Insert Name and Title of the Officer  
personally appeared Kevin Vega, Attorney-in-Fact  
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:

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title of Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer Title(s): \_\_\_\_\_  
☐ Partner - ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Right Thumbprint of Signer  
Top of thumb here

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer Title(s): \_\_\_\_\_  
☐ Partner - ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Right Thumbprint of Signer  
Top of thumb here

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:

**BRITTON CHRISTIANSEN; KEVIN VEGA; PHILIP E VEGA;**

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf any and all bonds and undertakings, and other obligatory instruments of similar nature, in penalties not exceeding the sum of

**UNLIMITED**

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 1st day of April, 2024.



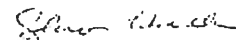
Antonio C. Albanese, Vice President of Nationwide Mutual Insurance Company

**ACKNOWLEDGMENT**

STATE OF NEW YORK COUNTY OF KINGS: ss

On this 1st day of April, 2024, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.

Sharon Laburda  
Notary Public, State of New York  
No. 01LA8427697  
Qualified in Kings County  
Commission Expires January 3, 2026

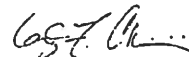


Notary Public  
My Commission Expires  
January 3, 2026

**CERTIFICATE**

I, Lezlie F. Chimienti, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 19th day of March, 2025.



Assistant Secretary

STATE OF CALIFORNIA  
DEPARTMENT OF INSURANCE  
SAN FRANCISCO

Amended  
Certificate of Authority

THIS IS TO CERTIFY *that, pursuant to the Insurance Code of the State of California,*

**Nationwide Mutual Insurance Company**

*of Ohio, organized under the laws of Ohio, subject to its Articles of Incorporation or other fundamental organizational documents, is hereby authorized to transact within this State, subject to all provisions of this Certificate, the following classes of insurance:*

**Fire, Marine, Surety, Disability, Plate Glass, Liability, Workers' Compensation,**

**Common Carrier Liability, Boiler and Machinery, Burglary, Sprinkler,**

**Team and Vehicle, Automobile, Aircraft, Legal, and Miscellaneous**

*as such classes are now or may hereafter be defined in the Insurance Laws of the State of California.*


THIS CERTIFICATE *is expressly conditioned upon the holder hereof now and hereafter being in full compliance with all, and not in violation of any, of the applicable laws and lawful requirements made under authority of the laws of the State of California as long as such laws or requirements are in effect and applicable, and as such laws and requirements now are, or may hereafter be changed or amended.*

IN WITNESS WHEREOF, *effective as of the 22<sup>nd</sup> day of May, 2013,*  
*I have hereunto set my hand and caused my official seal to be affixed*  
*this 22<sup>nd</sup> day of May, 2013.*



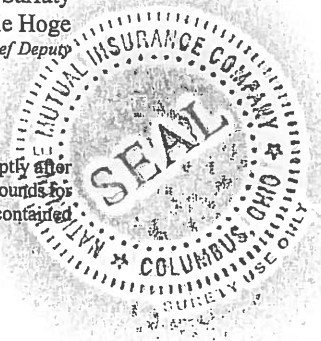
Dave Jones  
Insurance Commissioner

By

  
Valerie J. Sarfaty  
for Nettie Hoge  
Chief Deputy

**NOTICE:**

Qualification with the Secretary of State must be accomplished as required by the California Corporations Code promptly after issuance of this Certificate of Authority. Failure to do so will be a violation of Insurance Code section 701 and will be grounds for revoking this Certificate of Authority pursuant to the covenants made in the application therefor and the conditions contained herein.





## Company Profile

**COMPANY PROFILE**

Company Search

**Company Information**

Company Search Results

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 &amp; Comparison Data

Company Enforcement Action

Composite Complaints Studies

Additional Info

Find A Company Representative In Your Area

View Financial Disclaimer

**NATIONWIDE MUTUAL INSURANCE COMPANY**

**1 NATIONWIDE BLVD, FRAP SOLUTIONS**  
**COLUMBUS, OH 43215**  
**800-523-7828**

**Old Company Names****Effective Date****Agent For Service**

Melissa DeKoven  
 2710 Gateway Oaks Drive, Suite 150N  
 Sacramento CA 95833-3505

**Reference Information**

NAIC #:	23787
California Company ID #:	1805-1
Date Authorized in California:	08/03/1965
License Status:	UNLIMITED-NORMAL
Company Type:	Property & Casualty
State of Domicile:	OHIO

[back to top](#)**NAIC Group List**

NAIC Group #: **0140** NATIONWIDE CORP 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  
 DISABILITY  
 FIRE  
 LEGAL INSURANCE  
 LIABILITY  
 MARINE  
 MISCELLANEOUS  
 PLATE GLASS  
 SPRINKLER  
 SURETY  
 TEAM AND VEHICLE  
 WORKERS' COMPENSATION

## ***PTM General Engineering Services Inc.***

***Electrical Installation; Fiber Optic; Dry/Wet Utilities; Concrete & Asphalt;  
Street Improvements; Project Design & Development; Public & Private***

March 19, 2025

County of Riverside Transportation  
Dept. 3525 14<sup>th</sup> St.  
Riverside, CA 92501

### **Identity of Officer & Authority to Bind**

To Whom It May Concern:

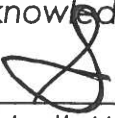
PTM General Engineering Services, Inc., requires only one officer to sign for the full execution of a bid, contract, or any other contractual document on its behalf by either one of the identified below who have full binding authority.


Elizabeth H. Mendoza de McRae, President/CFO  
Brian Mendoza, Vice President/Secretary

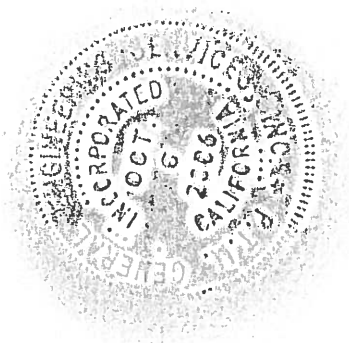
You may contact us directly for any verification of the statement made above at 951.722.5678.

Acknowledged by:

Corporate Seal

  
Elizabeth H. Mendoza  
President/CFO

  
Brian Mendoza  
Vice President/Secretary



**5942 Acorn St. Riverside, CA 92504 Tel: 951.710.1000 Fax 951.710.1006  
License No. 891265 Class A; C10; C31**

**Riverside County Transportation Department  
Summary of Bids**

Advertised: February 25, 20225 (Agenda Item: 3.49)  
Addenda: None  
Bids Open: 2 pm Date: Wednesday, March 19, 2025

**PROJECT: Pourroy Road and Rosales Avenue  
Traffic Signal and Safety Lighting Project  
Community of French Valley  
Project No. D3-0081**

Company Name	Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project	Project Total
<b>COUNTY'S ESTIMATE</b>	504,950.00	<b>\$504,950.00</b>
<b>1 PTM General Engineering Services, Inc.</b>	581,018.00	<b>\$581,018.00</b>
<b>2 Comet Electric, Inc.</b>	593,404.00	<b>\$593,404.00</b>
<b>3 Alfaro Communications Construction, Inc.</b>	655,665.07	<b>\$655,665.07</b>
<b>4 Crosstown Electrical &amp; Data, Inc.</b>	657,859.00	<b>\$657,859.00</b>
<b>5 California Professional Engineering, Inc.</b>	667,212.20	<b>\$667,212.20</b>
<b>6 DBX, Inc.</b>	712,006.00	<b>\$712,006.00</b>
<b><i>Average Bid Prices</i></b>	<b><i>\$644,527.38</i></b>	<b><i>\$644,527.38</i></b>

**Riverside County Transportation Department**  
**Summary of Bids**

**PROJECT: Pourroy Road and Rosales Avenue**  
**Traffic Signal and Safety Lighting Project**  
**Community of French Valley**  
**Project No. D3-0081**

**Advertised: February 25, 20225 (Agenda Item: 3.49)**

**Addenda: None**

**Bids Open: 2 pm Date: Wednesday, March 19, 2025**

BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project					COUNTY'S ESTIMATE		1 PTM General Engineering Services, Inc. Riverside, CA 92504	
ITEM NO.	ITEM CODE	CONTRACT ITEM	UNITS	QUANTITY	UNIT PRICE	ENG ESTIMATE	BID UNIT PRICE	BID ESTIMATE
1	066100	DUST ABATEMENT	LS	1	5,000.00	5,000.00	750.00	750.00
2	100100	DEVELOP WATER SUPPLY	LS	1	5,000.00	5,000.00	750.00	750.00
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	25,000.00	25,000.00	16,000.00	16,000.00
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	5,000.00	5,000.00	2,000.00	2,000.00
5	170103	CLEARING AND GRUBBING	LS	1	5,000.00	5,000.00	6,000.00	6,000.00
6	015602	FUNDING AWARENESS SIGN	EA	1	2,000.00	2,000.00	1,200.00	1,200.00
7	730010	MINOR CONCRETE (CURB)	LF	15	150.00	2,250.00	180.00	2,700.00
8	820410	SALVAGE ROADSIDE SIGN	EA	3	300.00	900.00	18.00	54.00
9	820840	ROADSIDE SIGN - ONE POST	EA	3	300.00	900.00	492.00	1,476.00
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	1,000.00	4,000.00	21,000.00	84,000.00
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	6.00	4,200.00	11.40	7,980.00
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	6.00	600.00	26.40	2,640.00
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	2.00	100.00	15.00	750.00
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	420,000.00	420,000.00	429,718.00	429,718.00
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00	25,000.00	25,000.00
<b>PROJECT TOTAL ITEMS 1 - 15</b>					<b>504,950.00</b>		<b>581,018.00</b>	

**Riverside County Transportation Department**  
**Summary of Bids**

**PROJECT: Pourroy Road and Rosales Avenue**  
**Traffic Signal and Safety Lighting Project**  
**Community of French Valley**  
**Project No. D3-0081**

**Advertised: February 25, 20225 (Agenda Item: 3.49)**

**Addenda: None**

**Bids Open: 2 pm Date: Wednesday, March 19, 2025**

BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project					2 Comet Electric, Inc. Chatsworth, CA 91311		3 Alfaro Communications Construction, Inc. Compton, CA 90221	
ITEM NO.	ITEM CODE	CONTRACT ITEM	UNITS	QUANTITY	BID UNIT PRICE	BID ESTIMATE	BID UNIT PRICE	BID ESTIMATE
1	066100	DUST ABATEMENT	LS	1	19,000.00	19,000.00	4,480.00	4,480.00
2	100100	DEVELOP WATER SUPPLY	LS	1	4,000.00	4,000.00	4,480.00	4,480.00
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	10,000.00	10,000.00	20,032.00	20,032.00
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	8,800.00	8,800.00	3,820.80	3,820.80
5	170103	CLEARING AND GRUBBING	LS	1	4,700.00	4,700.00	6,988.80	6,988.80
6	015602	FUNDING AWARENESS SIGN	EA	1	1,000.00	1,000.00	3,929.60	3,929.60
7	730010	MINOR CONCRETE (CURB)	LF	15	134.00	2,010.00	160.21	2,403.15
8	820410	SALVAGE ROADSIDE SIGN	EA	3	230.00	690.00	120.00	360.00
9	820840	ROADSIDE SIGN - ONE POST	EA	3	553.00	1,659.00	540.00	1,620.00
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	28,000.00	112,000.00	12,345.60	49,382.40
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	10.00	7,000.00	10.20	7,140.00
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	6.00	600.00	6.00	600.00
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	30.50	1,525.00	30.00	1,500.00
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	395,420.00	395,420.00	523,928.32	523,928.32
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00	25,000.00	25,000.00
<b>PROJECT TOTAL ITEMS 1 - 15</b>					<b>593,404.00</b>		<b>655,665.07</b>	

**Riverside County Transportation Department**  
**Summary of Bids**

**PROJECT: Pourroy Road and Rosales Avenue**  
**Traffic Signal and Safety Lighting Project**  
**Community of French Valley**  
**Project No. D3-0081**

**Advertised: February 25, 20225 (Agenda Item: 3.49)**

**Addenda: None**

**Bids Open: 2 pm Date: Wednesday, March 19, 2025**

BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project					4 Crosstown Electrical & Data, Inc. Irwindale, CA 91706		5 California Professional Engineering, Inc. La Puente, CA 91748	
ITEM NO.	ITEM CODE	CONTRACT ITEM	UNITS	QUANTITY	BID UNIT PRICE	BID ESTIMATE	BID UNIT PRICE	BID ESTIMATE
1	066100	DUST ABATEMENT	LS	1	3,500.00	3,500.00	1,500.00	1,500.00
2	100100	DEVELOP WATER SUPPLY	LS	1	2,500.00	2,500.00	1,000.00	1,000.00
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	16,500.00	16,500.00	15625.00	15,625.00
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	850.00	850.00	2,500.00	2,500.00
5	170103	CLEARING AND GRUBBING	LS	1	7,500.00	7,500.00	10,000.00	10,000.00
6	015602	FUNDING AWARENESS SIGN	EA	1	2,950.00	2,950.00	1,500.00	1,500.00
7	730010	MINOR CONCRETE (CURB)	LF	15	125.00	1,875.00	115.00	1,725.00
8	820410	SALVAGE ROADSIDE SIGN	EA	3	125.00	375.00	17.40	52.20
9	820840	ROADSIDE SIGN - ONE POST	EA	3	555.00	1,665.00	471.00	1,413.00
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	25,980.00	103,920.00	24,150.00	96,600.00
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	10.50	7,350.00	11.00	7,700.00
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	6.00	600.00	25.00	2,500.00
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	31.00	1,550.00	15.00	750.00
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	481,724.00	481,724.00	499,347.00	499,347.00
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00	25,000.00	25,000.00
<b>PROJECT TOTAL ITEMS 1 - 15</b>					<b>657,859.00</b>		<b>667,212.20</b>	

**Riverside County Transportation Department**  
**Summary of Bids**

**PROJECT: Pourroy Road and Rosales Avenue**  
**Traffic Signal and Safety Lighting Project**  
**Community of French Valley**  
**Project No. D3-0081**

**Advertised: February 25, 20225 (Agenda Item: 3.49)**

**Addenda: None**

**Bids Open: 2 pm Date: Wednesday, March 19, 2025**

BASE BID SCHEDULE - Pourroy Road and Rosales Avenue Traffic Signal and Safety Lighting Project					6 DBX, Inc. Temecula, CA 92590			
ITEM NO.	ITEM CODE	CONTRACT ITEM	UNITS	QUANTITY	BID UNIT PRICE	BID ESTIMATE		
1	066100	DUST ABATEMENT	LS	1	2,000.00	2,000.00		
2	100100	DEVELOP WATER SUPPLY	LS	1	2,400.00	2,400.00		
3	120100	TRAFFIC CONTROL SYSTEM	LS	1	19,000.00	19,000.00		
4	130200	PREPARE WATER POLLUTION CONTROL PROGRAM	LS	1	1,500.00	1,500.00		
5	170103	CLEARING AND GRUBBING	LS	1	3,500.00	3,500.00		
6	015602	FUNDING AWARENESS SIGN	EA	1	2,500.00	2,500.00		
7	730010	MINOR CONCRETE (CURB)	LF	15	400.00	6,000.00		
8	820410	SALVAGE ROADSIDE SIGN	EA	3	20.00	60.00		
9	820840	ROADSIDE SIGN - ONE POST	EA	3	500.00	1,500.00		
10	017306	MINOR CONCRETE (CURB RAMP) (CRS 403)	EA	4	20,000.00	80,000.00		
11	840515	THERMOPLASTIC PAVEMENT MARKING	SQFT	700	10.00	7,000.00		
12	840656	PAINT TRAFFIC STRIPE (2-COAT)	LF	100	25.00	2,500.00		
13	846020	REMOVE PAINTED TRAFFIC STRIPE	LF	50	14.00	700.00		
14	870400	SIGNAL AND LIGHTING SYSTEM	LS	1	558,346.00	558,346.00		
15	010602	MISCELLANEOUS WORK (AS DIRECTED)	FA	1	25,000.00	25,000.00		
<b>PROJECT TOTAL ITEMS 1 - 15</b>					<b>712,006.00</b>			

# Attachment "A"

Riverside County Transportation Department

Project: **Pourroy Rd and Rosales Ave Traffic Signal Installation Project**

Project No.(s): **D3-0081**

Expenses as of: **4/8/2025**

## Project Costs and Budget

Activity	Incurred Costs	Projected Costs	Total Costs	Existing Budget	Proposed Budget
A Preliminary Survey	13,759		14,000	14,000	14,000
B Design	178,252	10,000	189,000	139,000	189,000
C Environmental	1,853		2,000	1,000	2,000
D Right-of-way					
E Construction	75,090	581,018	715,000	748,000	715,000
Construction Contingency 10%		58,102			
F Construction Engineering & Inspection 15%	813	86,340	88,000	52,000	88,000
G Construction Survey 5%		29,051	30,000	12,000	30,000
H Utilities					
Totals:	269,766	764,511	1,038,000	966,000	1,038,000

## Project Funding

Code	Name	Existing Budget	Proposed Budget
369	West County DIF Signal Mitigation Funds	966,000	1,038,000
Totals:		966,000	1,038,000

## Comments

Printed: April 16,25 5:40 PM

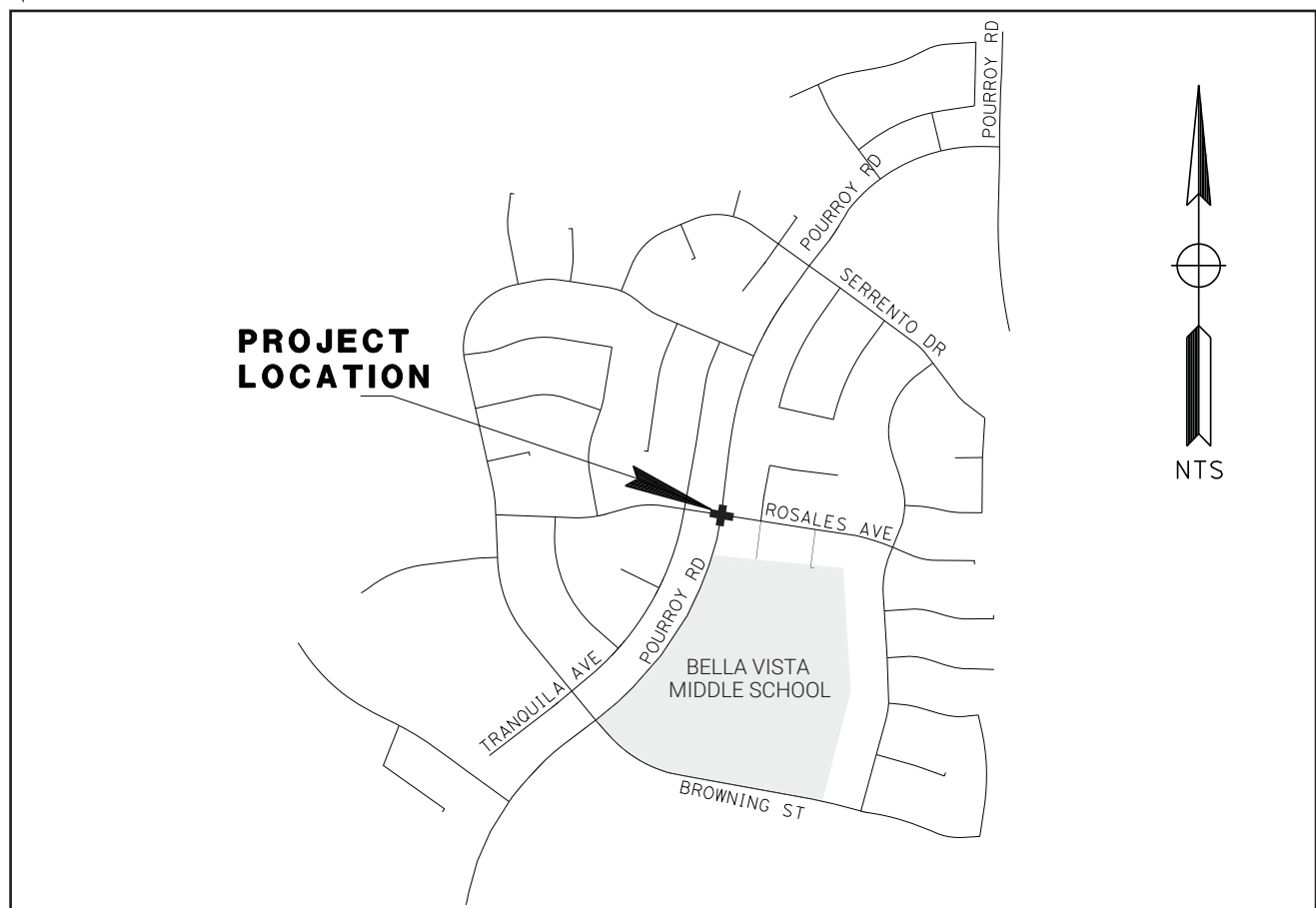
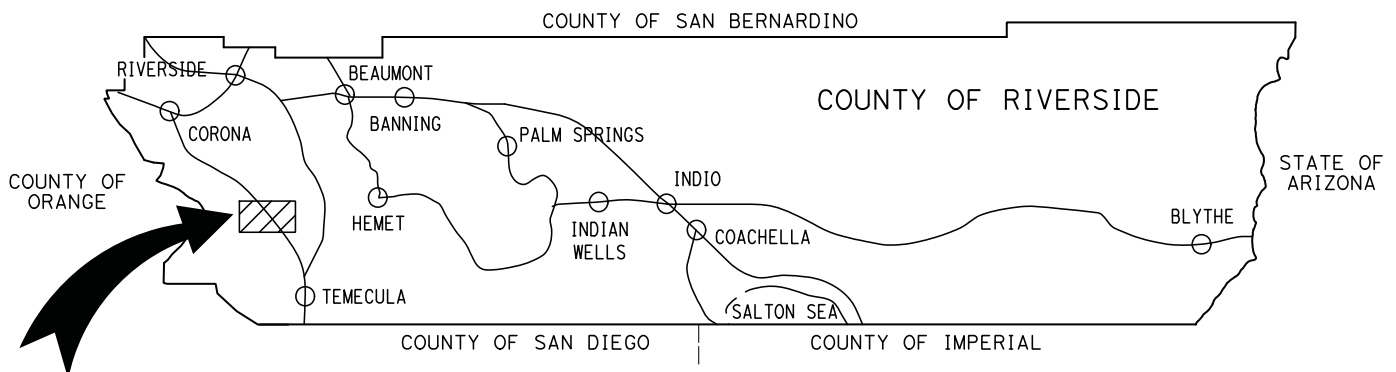
BY: Susan Vombaur

# COUNTY OF RIVERSIDE TRANSPORTATION DEPARTMENT

## POURROY ROAD AND ROSALES AVENUE TRAFFIC SIGNAL AND SAFETY LIGHTING PROJECT

COMMUNITY OF FRENCH VALLEY

PROJECT No. D3-0081



**VICINITY MAP**