



Purchase Order

[Print Form](#)

City of Newport
169, SW Coast Hwy
Newport, OR 97365

P.O. Date: 7/13/2020

P.O. Number: ENG-01

Deliver To:

Company: Carlson Testing, Inc.
Address: 4060 Hudson Ave NE
City: Salem
State: OR Zip: 97301
Phone: 503-589-1309
Fax:
Contact Name: Gabi McClelland

Company: City of Newport
Address: 169, SW Coast Hwy
City: Newport
State: OR Zip: 97365
Phone:
Fax:
Contact Name: Chris Janigo

Item	Description	Quantity	Unit Price	Amount
1	On-Call Testing and Inspection Service open ended PO	1		\$0.00
Total				\$0.00

THIS PURCHASE ORDER INCORPORATES THE TERMS ON THE REVERSE SIDE. BY ITS SIGNATURE HEREUNDER, CONTRACTOR AGREES TO PERFORM THE SERVICES/PROVIDE THE PRODUCTS DESCRIBED IN CITY'S RFP OR SOLICITATION AND VENDORS RESPONSE THERETO, ALL OF WHICH ARE ATTACHED, FOR THE FEE/AMOUNT SET FORTH THEREIN.

Fund/Dept	Line/GL Dept	Project Code	Charge Acct
403	6210	14018	60100

Notes:

Authorizations:


Department Director

Finance Director


City Manager (Acting)

Contractor's Authorized Signature

Contractor's Printed Name

Submit this for signature with all documentation

TERMS OF CITY'S PURCHASE ORDER

1. In the course of providing Services under this Purchase Order, Contractor may have contact with the public. Contractor will maintain good relations with the public. The City may treat the failure to maintain good relations with the public as a non-curable breach of this Purchase Order and may disqualify Contractor from future work for the City.
2. Contractor shall be compensated as described in the Purchase Order. Unless otherwise set forth in the Purchase Order, Contractor shall begin Services on the Effective Date and shall complete Services no later than such date set forth in the Purchase Order or as agreed upon in writing by the parties.
3. Contractor certifies that: (a) Contractor is an independent contractor as defined by ORS 670.700 and not an employee of City, shall not be entitled to benefits of any kind to which an employee of City is entitled and shall be solely responsible for all payments and taxes required by law. In the event that Contractor is found by a court of law or any administrative agency to be an employee of City for any purpose, City shall be entitled to offset compensation due, or to demand repayment of any amounts paid to Contractor under the terms of this Agreement, to the full extent of any benefits or other remuneration Contractor receives (from City or third party) as a result of the finding and to the full extent of any payments that City is required to make (to Contractor or to a third party) as a result of the finding. (b) Contractor is not an officer, employee or agent of the City as those terms are used in ORS 30.265. (c) No employee of the City, or any partnership or corporation in which a City employee has an interest, has or will receive any remuneration of any description from Contractor, either directly or indirectly, in connection with this Agreement, except as specifically declared in writing. (d) Contractor currently has a City business license or will obtain one prior to delivering Services under this Agreement.
4. City has relied upon the professional ability and training of Contractor as a material inducement to enter into this Agreement. Contractor warrants that all its work will be performed with good workmanship and in accordance with generally accepted professional practices and standards of the industry in which Contractor operates as well as the requirements of applicable federal, state and local laws. Contractor's work will conform to the requirements of this Purchase Order. Acceptance of Contractor's work by City shall not operate as a waiver or release of this warranty. Contractor is fully liable for the acts and omissions of Contractor and Contractor's subcontractors which cause any damage, injury, death, property damage or loss to any person or property. Contractor will indemnify and defend the City, its officers, agents, employees and volunteers and hold them harmless from any and all liability, causes of action, claims, losses, damages, judgments or other costs or expenses including attorney's fees that may be asserted by any person or entity which in any way arise from, during or in connection with the performance of the work described in this Agreement. Contractor's indemnification shall also cover claims brought against the City under state or federal workers' compensation laws. If any aspect of this indemnity shall be found to be illegal or invalid for any reason whatsoever, the illegality or invalidity shall not affect the validity of the remainder of this indemnification.
5. Contractor and its subcontractors shall maintain insurance acceptable to City in full force and effect throughout the term of this Agreement. The insurance shall cover all activities of the Contractor arising directly or indirectly out of Contractor's work performed hereunder, including the operations of its subcontractors of any tier.
6. At any time and without cause, City shall have the right in its sole discretion, to terminate this Agreement by giving notice to Contractor. If City terminates the Agreement pursuant to this Section due to no fault of Contractor, City shall pay Contractor for all approved and undisputed services rendered up to the date of termination. City may modify or terminate this Agreement without cause effective upon delivery of written notice to Contractor, or at such later date as may be established by City.
7. For a period of not less than three years after City's final payment to Contractor, Contractor shall permit the City, the State of Oregon and the Federal Government (if State or Federal funding is involved) to have access to all books, documents, papers and records of Contractor which are pertinent to the Services provided hereunder for purposes of audit, examination, excerpts and transcripts. Contractor shall retain those records for at least three years, or until litigation is resolved if litigation is instituted.
8. Neither City nor Contractor shall be considered in default because of any delays in completion and responsibilities due to causes beyond the control and without fault or negligence on the part of the parties so disabled, including but not restricted to, an act of nature or of a public enemy, civil unrest, earthquake, fire, flood, epidemic, quarantine restriction, strike, freight embargo, unusually severe weather, provided that the parties so disabled shall notify the other party in writing of the cause of delay. Each party shall make reasonable efforts to remove or eliminate the cause of delay or default and shall, upon cessation of the cause, diligently pursue performance of its obligations under the Agreement.
9. Contractor agrees to comply with all applicable requirements of federal and state civil rights and rehabilitation statutes, rules, and regulations, including, but not limited to those in Exhibit A. Contractor also shall comply with the Americans with Disabilities Act of 1990, ORS 659.425, and all regulations and administrative rules established pursuant to those laws.
10. Contractor will perform additional work as may be necessary to correct errors in Services performed under this Agreement without undue delay and without additional cost.
11. The provisions of this Agreement shall be construed in accordance with the laws of the State of Oregon. Any action or suits involving any question arising under this Agreement will be brought in the appropriate court of the State of Oregon. In any action arising under this Agreement, the losing party shall pay such sum as the court may adjudge including reasonable attorney fees and court costs. Contractor shall comply with all applicable federal, state and local laws, rules and regulations, including, but not limited to, requirements concerning working hours, overtime, medical care, workers compensation insurance, health care payments, payments to employees and subcontractors and income tax withholding contained in ORS Chapter 279, some provisions of which are attached to this Agreement as Exhibit A. All Contractor's work product accomplished under this Agreement, whether in the form of designs, drawings, as-builts, diagrams, specifications, reports, or other writings, shall become the exclusive property of the City. The City is the owner of any copyrights thereto, upon City's final payment to Contractor. This writing is intended both as a final expression of the Agreement between the parties with respect to the included terms and as a complete and exclusive statement of the terms of the Agreement.

EXHIBIT A

- 279B.220 Conditions concerning payment, contributions, liens, withholding.** The contractor shall: 1. Make payment promptly, as due, to all persons supplying to the contractor labor or material for the performance of the work provided for in the contract. 2. Pay all contributions or amounts due the Industrial Accident Fund from the contractor or subcontractor incurred in the performance of the contract. 3. Not permit any lien or claim to be filed or prosecuted against the state or a county, school district, municipality, municipal corporation or subdivision thereof, on account of any labor or material furnished. 4. Pay to the Department of Revenue all sums withheld from employees under ORS 316.167. 5. In addition to the conditions specific in subsection 1-4 above, every public improvement contract shall contain a condition that the contractor shall demonstrate that an employee drug testing program is in place. (279C 505)
- 279C.515 Conditions concerning payment of claims by public officers, payment to persons furnishing labor or materials and complaints.** 1. If the contractor fails, neglects or refuses to make prompt payment of any claim for labor or services furnished to the contractor or a subcontractor by any person in connection with the public improvement contract as the claim becomes due, the proper officer or officers representing a municipality, may pay such claim to the person furnishing the labor or services and charge the amount of the payment against funds due or to become due the contractor by reason of the contract. 2. If the contractor or a first-tier subcontractor fails, neglects or refuses to make payment to a person furnishing labor or materials in connection with the public improvement contract within thirty days after receipt of payment from the contracting agency or a contractor, the contractor or first-tier subcontractor shall owe the person the amount due plus interest charges commencing at the end of the ten day period that payment is due under ORS 279C 580 (4) and ending upon final payment, unless payment in ORS 279C 580. The rate of interest charged to the contractor or first-tier subcontractor on the amount due shall equal three times the discount rate on 90 day commercial paper in effect at the Federal Reserve Bank in the Federal Reserve district that includes Oregon on the date that is thirty days after the date when payment was received from the contracting agency or from the contractor, but the rate of interest may not exceed thirty percent. The amount of interest may not be waived. 3. If the contractor or a subcontractor fails, neglects or refuses to make payment to a person furnishing labor or materials in connection with the public improvement contract, the person may file a complaint with the Construction Contractors Board, unless payment is subject to a good faith dispute as defined in ORS 279C.580. 4. The payment of a claim in the manner authorized in this section does not relieve the contractor or the contractor's surety from obligation with respect to any unpaid claims.
- 279B.230 Condition concerning payment for medical care and providing workers' compensation.** (see 279C 530 for public improvement contracts) 1. The contractor shall promptly, as due, make payment to any person, co-partnership, association or corporation furnishing medical, surgical and hospital care services or other needed care and attention, incident to sickness or injury, to the employees of the contractor, of all sums that the contractor agrees to pay for the services and all moneys and sums that the contractor collected or deducted from the wages of employees under any law, contract or agreement for the purpose of providing or paying for the services. 2. All subject employers working under the contract are either employers that will comply with ORS 656.017 or employers that are exempt under ORS 656.126. [2003 c.794 §76c]
- 279B.020, 279B.235; 279C.520, 279C.540 Conditions concerning hours of labor.** 1. An employer must give notice in writing to employees who work on a public contract, either at the time of hire or before commencement of work on the contract, or by posting a notice in a location frequented by employees, of the number of hours per day and days per week that the employees may be required to work. 2. A person may not be employed for more than 10 hours in any one day, or 40 hours in any one week, except in cases of necessity, emergency or when the public policy absolutely requires it, and in such cases, except in cases of contracts for personal services designated under ORS 279A.055 (or 279C 100) the employee shall be paid at least time and a half pay. (a) For all overtime in excess of eight hours in any one day or 40 hours in any one week when the work week is five consecutive days, Monday through Friday; or (b) For all overtime in excess of ten hours in any one day or 40 hours in any one week when the work week is four consecutive days, Monday through Friday; and (c) For all work performed on Saturday and on any legal holiday specified in ORS 279B.020 (or ORS 279C 540). 3. In the case of contracts for personal services as described in ORS 279A.055, the contract shall contain a provision that the employee shall be paid at least time and a half for all overtime worked in excess of 40 hours in any one week, except for individuals under personal services contracts who are excluded under ORS 653.010 to 653.261 or under 29 U.S.C. 201 to 209 from receiving overtime. 4. Persons employed shall receive at least time and a half pay for work performed on the legal holidays specified in a collective bargaining agreement or in ORS 279B 020 (1)(b)(B) to (G) and for all time worked in excess of 10 hours in any one day or in excess of 40 hours in any one week, whichever is greater.
- 279C.830 Relating to prevailing rate of wage in public works contracts.** 1. In the event this contract is a public works contract, the parties shall state in the contract the existing state prevailing rate of wage and if applicable, the federal prevailing rate of wage required under the Davis-Bacon Act that may be paid to workers in each trade or occupation required for the public works employed in the performance of the contract either by the contractor or subcontractor or other person doing or contracting to do the whole or any part of the work contemplated by the contract. When the prevailing rates of wage are available electronically or are accessible on the Internet, the rates may be incorporated into the specifications by referring to the electronically accessible or Internet-accessible rates and by providing adequate information about how to access the rates. 2. Every contract and subcontract shall contain a provision that the workers shall contain a provision that the works shall be paid not less than the specified minimum hourly rate of wage in accordance with ORS 279C 838 and 279C 840. 3. Contractor will pay to the Commissioner of the Bureau of Labor and Industries (BOLI) a fee as provided in ORS 279C.825(1). The fee shall be paid to the commissioner under the administrative rule of the commissioner. 4. Every contract for public works shall contain a provision stating that the contractor and every subcontractor must have a public works bond filed with the Construction Contractors Board before starting work on the project, unless exempt under ORS 279C.836 (4), (7), (8) or (9).

Carlson Testing, Inc.

Bend Office (541) 330-9155
Geotechnical Office (503) 601-8250
Eugene Office (541) 345-0289
Salem Office (503) 589-1252
Tigard Office (503) 684-3460

Authorization To Proceed & Work Order

Please complete and return by fax or email to 503-589-1309 or Gabi McClelland at gmccllelland@carlsontesting.com

This document constitutes authorization for Carlson Testing, Inc. (CTI) to proceed with construction inspection and testing services under the terms of CTI's General Conditions (copy enclosed) dated 2/2015 for the project described below. **This Authorization must be completed, signed and returned prior to CTI performing services. Thank You.**

Date: 7/7/2020

Project Information

Project Name: WTP Generator Installation

Permit #: _____

Issued By: City of Newport

Project Address/City/State: 2510 NE Big Creek RD

(please specify street/drive/court/avenue, etc.)

Directions: From Hwy 101 Turn East on NE 31st St. Turn right on NE Harney St., Turn left on NE Big Creek Rd, make first right into driveway at base of reservoir dam. Project site is straight ahead.

Scope: ON-CALL INSPECTION & TESTING SERVICES

When CTI is providing Density (Compaction Testing Only), these services do not include engineering or engineering related recommendations, which are solely the responsibility of the Registered Design Professional in responsible charge for specifications and recommendations or the Geotechnical Engineer. That party's contact information must be completed on the distribution section under "Registered Design Professional in Responsible Charge for Specifications and Recommendations".

Superintendent Name/Phone: Scott Hoerauf (503)312-0694

☐ U.S. Army Corps of Engineers projects call for special reporting requirements. Please indicate if this is a U.S. Army Corps of Engineers project by checking the box. Do not check this box unless this is a U.S. Army Corps of Engineers project.

Please enter the following billing information:

Mail ☐ E-mail ☒ (Choose One)

Billing Information

Purchase Order Number (if applicable): _____

Company & Contact: City of Newport

Address: 169 SW Coast Hwy

City: Newport

State: OR

Zip: 97365

Phone: 541-574-3376

Email: c.janigo@newportoregon.gov

Unless otherwise agreed in writing, the ordering of work from CTI or use of any work product produced by CTI constitutes acceptance of the attached CTI's General Conditions dated 2/2015 and agreement to be bound by the terms and conditions incorporated therein.

The undersigned hereby agrees that preparation of any Final Summary Report or Letter (if required) will be billed in accordance with CTI's standard rate schedule.

I certify that I have the authority to sign and enter into this agreement and agree to be bound by its terms.

Signature of Authorized Representative: Margaret M. Hawker

Printed Name: MARGARET M. HAWKER

Company Name: City of Newport

Date: 7/13/2020

Phone: 541-574-0615

Carlson Testing, Inc.

Bend Office (541) 330-9155
Geotechnical Office (503) 601-8250
Eugene Office (541) 345-0289
Salem Office (503) 589-1252
Tigard Office (503) 684-3460

Authorization To Proceed & Work Order - Page 2

Please complete and return by fax or email to 503-589-1309 or Gabi McClelland at gmccllelland@carlsontesting.com

Project Name: WTP Generator Installation

Report Distribution Information

In addition to our client the International Building Code (IBC) requires that reports for permitted projects be distributed to the building official, the engineer or architect of record and the contractors.

Client: Mail ☐ Fax ☐ E-Mail ☒ (Choose One)

Company & Contact: City of Newport - Chris Janigo

Address: 169 SW Coast Hwy

City: Newport State: OR Zip: 97365

Phone: 541-574-3376

Mobile: 541-270-7515

Fax: _____

Email: c.janigo@newportoregon.gov

Contractor: Mail ☐ Fax ☐ E-Mail ☒ (Choose One)

Company & Contact: Andersen Constrction Company of Oregon LLC

Address: 309 West 4th Ave, Suite 201

City: Newport State: OR Zip: 97365

Phone: 503-969-9369

Mobile: _____

Fax: _____

Email: kanderson@andersen-const.com

Building Jurisdiction:

Municipality & Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Mobile: _____

Fax: _____

Email: _____

Structural Engineer: Mail ☐ Fax ☐ E-Mail ☐ (Choose One)

Company & Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Mobile: _____

Fax: _____

Email: _____

Carlson Testing, Inc.

Bend Office (541) 330-9155
Geotechnical Office (503) 601-8250
Eugene Office (541) 345-0289
Salem Office (503) 589-1252
Tigard Office (503) 684-3460

Authorization To Proceed & Work Order - Page 3

Please complete and return by fax or email to 503-589-1309 or Gabi McClelland at gmccllelland@carlsontesting.com

Project Name: WTP Generator Installation

Report Distribution Information

Owner or Developer: _____ Mail ☐ Fax ☐ E-Mail ☐ (Choose One)

Company & Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

Architect: _____ Mail ☐ Fax ☐ E-Mail ☐ (Choose One)

Company & Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

Registered Design Professional in Responsible Charge for Specifications and Recommendations:

Name and Address of the Registered Design Professional in Responsible Charge for specifications and recommendations must be included for any project including soil testing. An address is not required if CTI is the engineer of record. (Will only receive soils/rock density reports)

Mail ☐ Fax ☐ E-Mail ☐ (Choose One)

Company & Contact: HDR Engineering Inc.

Address: 1001 SW 5th Ave. Suite 1800

City: Portland State: OR Zip: 97204

Phone: 503-423-3756 Mobile: 503-317-8237 Fax: _____

Email: verena.winter@hdrinc.com

Masonry, Concrete, Subcontractor and Fabrication Shop are to be listed below.

Other Report Distribution _____ Mail ☐ Fax ☐ E-Mail ☐ (Choose One)

Company & Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
7/10/2020

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services NW CL1 825 NE Multnomah, Suite 1500 Portland, OR 97232 503 224-8390	CONTACT NAME: Maureen Schleich PHONE (A/C, No, Ext): 503 224-8390 FAX (A/C, No): 484-652-5241 E-MAIL ADDRESS: maureen.schleich@usi.com														
INSURED Carlson Testing Inc. PO Box 230997 Tigard, OR 97281	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Ohio Security Insurance Company</td> <td>24082</td> </tr> <tr> <td>INSURER B : Ohio Casualty Insurance Company</td> <td>24074</td> </tr> <tr> <td>INSURER C : SAIF Corporation</td> <td>36196</td> </tr> <tr> <td>INSURER D : Continental Casualty Company</td> <td>20443</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Ohio Security Insurance Company	24082	INSURER B : Ohio Casualty Insurance Company	24074	INSURER C : SAIF Corporation	36196	INSURER D : Continental Casualty Company	20443	INSURER E :		INSURER F :	
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COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		BKS53766339	12/01/2019	12/01/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 WA Stop Gap \$1,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY		BAS53766339	12/01/2019	12/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10000		USO53766339	12/01/2019	12/01/2020	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A	775128	12/01/2019	12/01/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D	Professional Liab "Claims Made" Retro: 3/4/1992		MCH591882437	12/01/2019	12/01/2020	\$3,000,000 per claim \$3,000,000 annl aggr. Deductible: \$75,000

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

** Workers Comp Information **

Proprietors/Partners/Executive Officers/Members Excluded:


Steven Leach - 50.42%, Sec/Tres

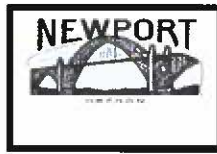
Scott Jordan - 49.58%, President

RE: Operations of the named insured.

CERTIFICATE HOLDER

CANCELLATION

City of Newport 169 SW Coast Hwy Newport, OR 97365	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 
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**AUTHORIZATION FOR
AGREEMENTS, MOUs, OR
OTHER DOCUMENTS OBLIGATING
THE CITY**

All contracts, agreements, grant agreements, memoranda of understanding, or any document obligating the city (with the exception of purchase orders), requires the completion of this form. The City Manager will sign these documents after all other required information and signatures are obtained.

Document: WTP Generator Installation Project - On-Call Testing Agency Work Order

Date: 7/7/20

Statement of Purpose: Agreement to retain Carlson Testing as the City's independent testing agency during the duration of the project.

Department Head Signature: [Signature]

Remarks, if any: _____

City Attorney Review and Signature: _____ Date: _____

Other Signatures as Requested by the City Attorney: _____

	Signature				Name/Position
	Date:				
Budget Confirmed:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>		
Certificate of Insurance Attached:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>		
City Council Approval Needed:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>			

After all the above requested information is complete and signatures obtained, return this form, along with the original document to the City Manager for signature. No documents should be executed prior to the City Manager's approval as evidenced by signature of this document.

City Manager Signature: [Signature] Date: July 13, 2020

Once all signatures and certificates of insurance have been obtained, return this document, along with the original, fully-executed agreement, MOU, or other document to the City Recorder. A copy of grant agreement and all project funding documents, must be forwarded to the Finance Department for tracking and audit purposes.

City Recorder Signature: [Signature] Date: 7/13/2020

Date posted on website: 7/15/20