

CITY CLERK ORIGINAL

C-7079-2
08/07/12

 <p>GLENDALE</p>	<p>Contract Amendment No. Four (4) RFQ# 10-06 – Contract #C-7079 Civic Center Landscape Maintenance</p>	<p>CITY OF GLENDALE Materials Management 5850 West Glendale Avenue, Suite 317 Glendale, Arizona 85301</p>
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In accordance with the Special Terms and Conditions, the above referenced contract is amended as follows:

The option to extend the term of the agreement is exercised this 3rd day of August, 2012. The term of the contract is hereby extended from October 22, 2012 through October 21, 2013, unless terminated, canceled or extended as provided within the contract.

Under Exhibit B the following pricing and service frequencies are hereby changed:

Mowing and edging will be performed on a base frequency of 24 times with a base fee of \$100 for an annual base fee of \$2,400.

Blowing and Cleaning will be performed on a base frequency of 12 times with a base fee of \$250 for an annual base fee of \$3,000.

The annual total cost is \$5,400 with payment issued monthly of \$450. Additional contracted services shall be performed upon written request and based on established contracted pricing per Exhibit A. All additional contracted services shall be invoiced separately from the monthly service fee and shall include an itemized list of landscape tasks performed.

All other provisions of the contract shall remain in their entirety.

With the extension of this agreement, a current insurance certificate is required. The certificate and policy shall name the City of Glendale as an additional insured and shall be primary coverage for the activity of the contractor.

In witness whereof, the parties hereto have executed this amendment to be effective the date first written above.

Contractor hereby acknowledges receipt of and is in agreement with the amendment. A signed copy must be filed with the City of Glendale Materials Management office. Please provide current information if the address has changed.

Pacheco Brothers Gardening, Inc.
795 Sandoval Way Hayward, CA 94544
Phone: 510-487-3580
Email: lynn@pachecobrothers.com



Authorized Signature

August 7, 2012

Date

Lynn D. Pacheco AR Manager

Printed Name and Title



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/6/2012

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

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

PRODUCER Beecher Carlson Insurance Services, LLC 8390 E. Crescent Parkway Suite 200 Greenwood Village CO 80111	CONTACT NAME: Richard Poling PHONE (A/C No. Ext.): (303) 388-5688 FAX (A/C No.): (303) 388-5585 E-MAIL ADDRESS: rpoling@beechercarlson.com	
	INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED Pacheco Brothers Gardening, Inc. 795 Sandoval Way Hayward CA 94544	INSURER A: Ecole Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES	CERTIFICATE NUMBER: Ecole 12-13	REVISION NUMBER:
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THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			861733-00	04/01/2012	04/01/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: Verification of Insurance This form is subject to policy terms, conditions, and exclusions.

CERTIFICATE HOLDER City of Glendale Civic Center 5750 W. Glenn Dr. Glendale, AZ 85301	CANCELLATION 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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CERTIFICATE OF LIABILITY INSURANCE

OP ID: LT

DATE (MM/DD/YYYY)

06/18/12

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

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

PRODUCER Barlocker Insurance - Salinas 371 Main Street Salinas, CA 93901 Tina Barlocker	831-540-4583	880-561-4927	CONTACT NAME: Oscar Huerta	PHONE (A/C, No, Ext): 831-771-5325	FAX (A/C, No): 888-561-4927
				E-MAIL: ohuerta@barlocker.com	
			PRODUCER ADDRESS: PACHE-5		
INSURED Pacheco Brothers Gardening, Inc Splash of Class Painting & Construction 795 Sandoval Way Hayward, CA 94544	INSURER(S) AFFORDING COVERAGE				NAIC #
	INSURER A: St. Paul Mercury Insurance Co.				24791
	INSURER B: St. Paul Fire & Marine Ins. Co				24767
	INSURER C: Golden Eagle Insurance Corp.				10836
	INSURER D:				
	INSURER E:				

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.

TRSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR LWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	X	CK08102662	06/19/12	06/19/13	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COMP/OP AGG \$ 2,000,000
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY		BA8159387	06/19/12	06/19/13	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS					\$
<input type="checkbox"/> NON-OWNED AUTOS		\$				
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		QK06503521	06/19/12	06/19/13	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 5,000,000
	<input checked="" type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A			WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$
A	Property		CK08102662	06/19/12	06/19/13	E.L. DISEASE - POLICY LIMIT \$
A	Contractors Equip.		CK08102662	06/19/12	06/19/13	rented 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
The City of Glendale is named additional insured.

CERTIFICATE HOLDER**CANCELLATION**

<p style="text-align: center;">GLEND A</p> <p>City of Glendale Civic Center 5750 West Glenn Glendale, AZ 85301</p>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p><i>[Signature]</i></p>
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**PERSONS OR ORGANIZATIONS FOR YOUR WORK AS REQUIRED BY
WRITTEN CONTRACT ENDORSEMENT - ADDITIONAL PROTECTED
PERSONS**

This endorsement changes your Commercial
General Liability Protection.

How Coverage Is Changed

There are two changes, which are
described below.

1. The following is added to the Who Is Protected Under This Agreement section. This change adds certain protected persons and limits their protection.

Persons or organizations for your work as required by written contract.

Any person or organization that:

- is not otherwise a protected person under this agreement; and
- you agree in a written contract for insurance to add as an additional protected person under this agreement for your work;

is a protected person. But only for covered injury or damage that results from your work for that person or organization.

However, such person or organization is a protected person only for the lesser of:

- the limits of coverage required by that written contract for insurance; or
- the limits of coverage available under this agreement.

But no such person or organization is a protected person for injury or damage that results from:

- that person's or organization's sole negligence; or
- the performance of, or failure to perform, architect, engineer, or surveyor professional services, if that person or organization is an architect, engineer, or surveyor.

Written contract for insurance means that part of any written contract or agreement in which you agree to add a person or organization as an additional

protected person under this agreement that:

- was made before; and
- is in effect when the bodily injury or property damage happens, or the personal injury offense or advertising injury offense is committed.

Additional protected person may also be called an additional insured in the written contract for insurance.

We explain the terms:

- your work in the Products and completed work total limit section; and
- architect, engineer or surveyor professional services in the Contract liability exclusion.

2. The following is added to the Primary or excess other insurance section. This change broadens coverage for certain additional protected persons.

If you specifically agree in a written contract that this insurance must be primary to and non-contributory with other insurance issued directly to a person or organization that you agree in a written contract for insurance to add as an additional protected person under this agreement for your work, we'll apply this agreement as primary insurance for, and we won't share with other insurance, any damages incurred by that additional protected person for:

- covered bodily injury or property damage that happens after that written contract was made; or
- covered personal injury or advertising injury that's caused by an offense committed after that written contract was made.

Other Terms

All other terms of your policy remain the same.