

CONSTRUCTION COMMITTEE

AGENDA

December 17, 2018

6:30 PM

304 E. Grand River, Conference Room 4, Howell, MI 48843

Pages

1. **CALL MEETING TO ORDER**
2. **APPROVAL OF MINUTES** 2
Minutes of meeting dated: November 13, 2018
3. **APPROVAL OF AGENDA**
4. **CALL TO THE PUBLIC**
5. **REPORTS**
6. **ACTION ITEMS**
 - a. **Facility Services Invoice** 5
Dental Clinic: \$650.31
 - b. **J.S. Vig Pay Application #5** 8
911 Central Dispatch Facility: \$358,856.28
 - c. **Lindhout Invoice #2018-1203** 55
911 Central Dispatch Facility: \$10,108.73
 - d. **Lindhout Invoice #2018-1204** 56
Sheriff Storage Facility: \$106.05
7. **NEW BUSINESS**
 - a. **Schedule next meeting**
8. **ADJOURNMENT**

CONSTRUCTION COMMITTEE

MEETING MINUTES

November 13, 2018

6:30 PM

304 E. Grand River, Conference Room 4, Howell, MI 48843

Members Present:

Dennis Dolan , Gary Childs, Douglas Helzerman

1. CALL MEETING TO ORDER

The meeting was called to order by Commissioner Dolan at 6:30 pm

2. APPROVAL OF MINUTES

Minutes of meeting dated: October 15, 2018

Motion to approve the minutes as presented.

Moved By D. Helzerman

Seconded By G. Childs

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

3. APPROVAL OF AGENDA

Agenda approved as modified by moving Reports to after New Business.

Moved By G. Childs

Seconded By D. Helzerman

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

4. CALL TO THE PUBLIC

None.

5. ACTION ITEMS

5.a J.S. Vig Pay Application #4

911 Central Dispatch Facility: \$301,602.47

Motion to approve payment.

Moved By D. Helzerman

Seconded By G. Childs

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

5.b J.S. Vig Request for Change Order #12

911 Central Dispatch Facility: \$8,690.00

Motion to approve the request for change order.

Moved By D. Helzerman

Seconded By G. Childs

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

5.c Lindhout Invoice #2018-1007

911 Central Dispatch Facility: \$10,852.20

Motion to approve payment.

Moved By D. Helzerman

Seconded By G. Childs

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

6. NEW BUSINESS

6.a Enviro Buildigs - Tower Shelter

911 Central Dispatch Facility: \$25,939.41

Joni Harvey, Deputy 911 Director, informed those present about the Tower Shelter.

Motion to approve the quote from Enviro Buildings dated 11/8/2018.

Moved By D. Helzerman

Seconded By D. Dolan

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

7. REPORTS

7.a Sheriff Storage Facility

Bid Results

Brett Levko, of J.S. Vig, informed Committee members regarding Bid Results.

Moved By D. Helzerman

Seconded By G. Childs

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

7.b 911 Central Dispatch Facility Update

Matthew Sangster of J.S. Vig updated those present on schedule of construction. Weather not cooperating. Strategizing on how to make up time. Contractors are willing to work with them. Dispatch floor block is complete so that utilities can be installed. Steel contractor will be following the block layer from north to south ends of the project.

Comm. Dolan expressed his concerns for safety while the steel work is being completed.

8. ADJOURNMENT

Motion to adjourn the meeting at 7:23 p.m.

Moved By G. Childs

Seconded By D. Helzerman

Yes (3): D. Dolan , G. Childs, and D. Helzerman

Motion Carried (3 to 0)

Respectfully submitted by:

Carol Sue Jonckheere,
Recording Secretary



LIVINGSTON COUNTY FACILITY SERVICES
420 S HIGHLANDER WAY, HOWELL MI 48843

Statement

Page 1

Statement Date	Customer Number
12/14/2017	1243
Statement Total	
\$650.31	

LIVINGSTON COUNTY DENTAL CLINIC
HOWELL, MI 48843

Please return this portion with payment

Remit Payment to: LIVINGSTON COUNTY TREASURER, 200 E GRAND RIVER, HOWELL MI, 48843

Statement

Description	Bill Number	Date	Bill Amount	Bill Adjusted	Amount Paid	Balance Due
LIVINGSTON COUNTY FACILITY SERVICES	4721	04/27/2017				
1 Charge: DENTAL CLINIC - FACILITY SERVICE COSTS - WO: DENT #8902 - RUN WATER LINE TO ICE MAKER		04/27/2017	\$116.78	\$0.00	\$0.00	\$116.78
Bill Summary			\$116.78	\$0.00	\$0.00	\$116.78
LIVINGSTON COUNTY FACILITY SERVICES	4724	04/28/2017				
1 Charge: DENTAL CLINIC - FACILITY SERVICE COSTS - WO: DENT #9030 - REMOVE RACCOON FROM ATTIC AND SEAL BUILDING VENTS. Removed raccoon from attic, re-set trap,		04/28/2017	\$510.00	\$23.53	\$0.00	\$533.53
Bill Summary			\$510.00	\$23.53	\$0.00	\$533.53
1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Interest	Other Fees	Total Due
\$0.00	\$0.00	\$0.00	\$650.31		\$0.00	\$650.31

Livingston County, Michigan



11/21/2018 08:53
Jennyn

Livingston County
Detail Totals Report

P 1
wmdtlrpt

Work Order	Svc Dept	Req Dept	Act Code	Status	Pri	Requested by	Sched Start	Sched End	Actual Start	Actual End
8902	26500	DENT	F9999	8-Accounti		Kelliep			02/28/17	03/21/17

Gen Cat: F99 Subj of Svc:
Sub Cat: Description:
Location:
Description:

WO Desc: DENT #8902 - RUN WATER LINE TO ICE MAKER Supv:
Addl Loc: Cont: kelliiep

Task: 1 Labor									
Task Description: DENT #8902 - RUN WATER LINE TO ICE MAKER									
			Regular	Estimated Other	Total	Regular	Actual Other	Total	Variance %
2265 - EGGLESTON, KEVIN P	Hrs	\$	0.00	0.00	0.00	2.00	0.00	2.00	-2.00 -100.00
			0.00	0.00	0.00	102.00	0.00	102.00	-102.00 -100.00
Total	Hrs	\$	0.00	0.00	0.00	2.00	0.00	2.00	-2.00 -100.00
			0.00	0.00	0.00	102.00	0.00	102.00	-102.00 -100.00
Purchased Supplies									
582 - COMPRESSION NUT						Estimated	Actual	Variance	%
						\$	0.00	-6.78	-100.00
16057 - COMPRESSION TEE AND REDUCER						\$	0.00	8.00	-100.00
Total						\$	0.00	14.78	-14.78 -100.00

Task: 1									
Work Order Total:									
Labor Costs	Estimated	Actual	Variance	%					
Equipment Costs	0.00	116.78	-116.78	-100.00					
Inventory Costs	Estimated	Actual	Variance	%					
Purchased Supplies Costs	0.00	102.00	-102.00	-100.00					
Outsourcing Costs	0.00	0.00	.00	.00					
Overhead Costs	0.00	14.78	-14.78	-100.00					
Contingency Cost	0.00	0.00	.00	.00					
Total Costs	0.0000	116.78	-116.78	-100.00					

** END OF REPORT - Generated by Jennifer Nash **

Livingston County, Michigan



11/21/2018 08:54
Jennyn

Livingston County Detail Totals Report

P 1
wmdtlrpt

Work Order	Svc Dept	Reg Dept	Act Code	Status	Pri	Requested by	Sched Start	Sched End	Actual Start	Actual End
2030	26500	DENT	F9999	8-Accounti		Kelliep			03/07/17	03/13/17

Gen Cat: F99 Subj of Svc:
Sub Cat: Description:
Location:
Description:

WO Desc: DENT #9030 - REMOVE RACCOON FROM ATTIC A Supv:
Addl Loc: Cont: kelliiep

Task: 1 Task Description: DENT #9030 - REMOVE RACCOON FROM ATTIC A

	Regular	Estimated	Total	Regular	Estimated	Total	Actual Other	Total	Variance Amount	Variance %
357 - GRISWOLD, TIMOTHY J	Hrs 0.00	0.00	0.00	5.00	0.00	5.00	0.00	5.00	-5.00	-100.00
	\$ 0.00	0.00	0.00	255.00	0.00	255.00	0.00	255.00	-255.00	-100.00
451 - KRAGER, PAIGE C	Hrs 0.00	0.00	0.00	5.00	0.00	5.00	0.00	5.00	-5.00	-100.00
	\$ 0.00	0.00	0.00	255.00	0.00	255.00	0.00	255.00	-255.00	-100.00
Total	Hrs 0.00	0.00	0.00	10.00	0.00	10.00	0.00	10.00	-10.00	-100.00
	\$ 0.00	0.00	0.00	510.00	0.00	510.00	0.00	510.00	-510.00	-100.00
Purchased Supplies										
582 - WIRE, WASHERS				\$	Estimated 0.00		Actual 23.53		Variance -23.53	-100.00
Total				\$	0.00		23.53		-23.53	-100.00

Task: 1

Work Order Total:	Estimated	Actual	Variance	%
Labor Costs	0.00	533.53	-533.53	-100.00
Equipment Costs	Estimated	Actual	Variance	%
Inventory Costs	0.00	510.00	-510.00	-100.00
Purchased Supplies Costs	0.00	0.00	.00	.00
Outsourcing Costs	0.00	23.53	-23.53	-100.00
Overhead Costs	0.00	0.00	.00	.00
Contingency Cost	0.0000	0.00	.00	.00
Total Costs	0.00	533.53	-533.53	-100.00

** END OF REPORT - Generated by Jennifer Nash **



Our Mission

Integrity

in architecture and design
in client relationships
in employee relationships
in community relationships

advancement

in all these efforts

December 11, 2018

Livingston County 911 Central Dispatch
300 S. Highlander Way
Howell, MI 48843

Attn: Chad Chewning, Director

Re: Application and Certificate for Payment No. 5

Dear Chad,

Attached please find the application and certificate for payment No. 5 from J.S. Vig Construction Company. We recently visited the site yesterday, December 10th, and observed the work in progress. This payment application includes portions of masonry, structural steel, dampproofing & waterproofing, entrances and storefronts, fire protection, electrical, landscaping, general conditions and portions of the Contractor's fee. It should also be noted that this payment application includes payment for portions of the bullet resistant glazing & framing, carpet tile & base, HVAC equipment and electrical items that are currently being stored off-site. The contractor has provided a detailed list of materials & costs, photos of stored materials, and insurance documentation per our request that have been attached to this application for your review. We have also joined you and Joni and have visited their storage facilities and have physically verified the quantities and condition of claimed materials. Partial unconditional waivers of lien are also included from previous payment application No. 4. In conclusion we find the completed work to be in general compliance with the requirements of the contract documents and the level of completeness to be equal to the amount indicated on the attached application.

If this action meets with your approval, please proceed with payment to J.S. Vig Construction Company in the revised amount indicated on the application.

Feel free to contact our office if you have any questions or concerns regarding this information.

A handwritten signature in black ink, appearing to read 'Bradley M. Alvord'. The signature is fluid and cursive, with the first name 'Bradley' being more prominent.

Bradley M. Alvord, Project Architect, Partner
Lindhout Associates architects aia pc

c.c. Natalie Hunt, Livingston County

APPLICATION AND CERTIFICATE FOR PAYMENT

TO OWNER:
Livingston County
304 E. Grand River Suite 202
Howell, MI 48843

PROJECT:
Livingston County 911 Central Dispatch
300 S. Highlander Way
Howell, MI 4843

APPLICATION No: 5
PERIOD TO: 11/30/2018
PROJECT NOS: 1673
CONTRACT DATE: 6/26/2018

Job # 00-1673

FROM CONTRACTOR:
J S Vig Construction Company
15040 Cleat Street
Plymouth, MI 48170

ARCHITECT:
Lindhout Associates Architects
10465 Citation Drive
Brighton, MI 48116

CONTRACT FOR: GENERAL TRADES

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment as shown below, in connection with the Contract
Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM.....	\$	5,444,173.00
2. Net Change by Change Orders.....	\$	-
3. CONTRACT SUM TO DATE.....	\$	5,444,173.00
4. TOTAL COMPLETED & STORED TO DATE.....	\$	1,937,973.88
5. Direct Checks Previously Issued by Owner.....	\$	-
6. Direct Checks to be Issued by Owner this Draw.....		
7. JS Vig Completed & Stored.....	\$	1,937,973.88
8. RETAINAGE		
Total Retainage.....	\$	176,764.51
9. TOTAL EARNED LESS RETAINAGE.....	\$	1,761,209.37
10. LESS PREVIOUS CERTIFICATES FOR PAYMENT.....	\$	1,402,353.09
11. Current Payment Due - JS Vig.....	\$	358,856.28
12. Current direct checks to Subcontractors.....		
13. BALANCE TO FINISH, INCLUDING RETAINAGE.....	\$	3,682,963.63

Change Order/Contract	ADDITIONS	DEDUCTIONS
Total Changes approved in Previous months by Owner	-	-
Total approved this month		
TOTALS	-	-
NET CHANGES by Change Order	-	-

The Contractor certified that the work covered by this pay request has been completed in accordance with the Contract Documents and that all progress payments previously paid by the Owner have been applied by the Contractor to discharge in full all of Contractor's obligations incurred in connection with the work covered by all prior pay requests.

Contractor: J S Vig Construction Company
STATE OF MICHIGAN, COUNTY OF WAYNE
Subscribed and sworn before me this 10 day of December, 2018
NOTARY PUBLIC: Elaine Kennedy

10-10-18
Date

My commission expires: April 28, 2023

Elaine Kennedy

ELAINE KENNEDY
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES Apr 28, 2023
ACTING IN COUNTY OF Wayne

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

\$ 358,856.28

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and the Continuation Sheet that are changed to conform with the amount certified.)

B. M. A. C.
Architect

12-11-18
Date

1673 Livingston County 911											
Item	Description	Original Contract	Change Orders	Revised Contract Value	Previously Billed	Billing this Period	Stored Materials	Total Billed	Balance to Bill	Overall %	Retention Held
1	Project Management, Engineer	\$ 82,340.00		\$ 82,340.00	\$ 28,495.00	\$ 4,117.00		\$ 32,612.00	\$ 49,728.00	40%	\$ 3,261.20
2	Supervision	\$ 166,055.00		\$ 166,055.00	\$ 53,919.00	\$ 9,963.00		\$ 63,882.00	\$ 102,173.00	38%	\$ 6,388.20
3	Project Labor	\$ 50,000.00		\$ 50,000.00	\$ 10,000.00	\$ 2,500.00		\$ 12,500.00	\$ 37,500.00	25%	\$ 1,250.00
4	Layout & Staking	\$ 20,000.00		\$ 20,000.00	\$ 10,818.00	\$ 8,586.00		\$ 19,404.00	\$ 596.00	97%	\$ 1,940.40
5	Safety	\$ 8,440.00		\$ 8,440.00	\$ 1,559.72	\$ 422.00		\$ 1,981.72	\$ 6,458.28	23%	\$ 198.17
6	Miscellaneous Rentals, Materials	\$ 40,000.00		\$ 40,000.00	\$ 4,704.87			\$ 4,704.87	\$ 35,295.13	12%	\$ 470.49
7	Blue Prints & Office Supplies	\$ 2,500.00		\$ 2,500.00	\$ 431.70	\$ 517.00		\$ 948.70	\$ 1,551.30	38%	\$ 94.87
8	Security (Allowance)	\$ 5,000.00		\$ 5,000.00				\$ -	\$ 5,000.00	0%	\$ -
9	Field Offices & Other Site Facilities	\$ 10,000.00		\$ 10,000.00	\$ 3,644.04	\$ 820.00		\$ 4,464.04	\$ 5,535.96	45%	\$ 446.40
10	Temporary Barricades & Signage	\$ 2,000.00		\$ 2,000.00	\$ 1,000.00	\$ 896.80		\$ 1,896.80	\$ 103.20	95%	\$ 189.68
11	Dumpsters	\$ 12,000.00		\$ 12,000.00				\$ -	\$ 12,000.00	0%	\$ -
12	Final Clean Up	\$ 5,000.00		\$ 5,000.00				\$ -	\$ 5,000.00	0%	\$ -
13	Building Demolition	\$ 30,000.00		\$ 30,000.00				\$ -	\$ 30,000.00	0%	\$ -
14	Building Asbestos Remediation	\$ 15,100.00		\$ 15,100.00				\$ -	\$ 15,100.00	0%	\$ -
15	Concrete Footings	\$ 141,245.00	\$ 2,682.50	\$ 143,927.50	\$ 91,142.50			\$ 91,142.50	\$ 52,785.00	63%	\$ 9,114.25
16	Concrete Flatwork Phase I	\$ 143,925.00		\$ 143,925.00				\$ -	\$ 143,925.00	0%	\$ -
17	Concrete Flatwork Phase II	\$ 37,535.00		\$ 37,535.00				\$ -	\$ 37,535.00	0%	\$ -
18	Masonry	\$ 549,900.00		\$ 549,900.00	\$ 297,320.00	\$ 115,479.00		\$ 412,799.00	\$ 137,101.00	75%	\$ 41,279.90
19	Structural Steel	\$ 237,000.00		\$ 237,000.00	\$ 164,150.00	\$ 26,070.00		\$ 190,220.00	\$ 46,780.00	80%	\$ 19,022.00
20	Architectural Woodwork	\$ 70,750.00	\$ (200.00)	\$ 70,550.00				\$ -	\$ 70,550.00	0%	\$ -
21	Dampproofing & Waterproofing	\$ 21,000.00		\$ 21,000.00	\$ 2,700.00	\$ 11,325.00		\$ 14,025.00	\$ 6,975.00	67%	\$ 1,402.50
22	Architectural Metal Panels	\$ 154,468.00		\$ 154,468.00	\$ 9,593.60			\$ 9,593.60	\$ 144,874.40	6%	\$ 959.36
23	Membrane Roofing	\$ 153,800.00		\$ 153,800.00				\$ -	\$ 153,800.00	0%	\$ -
24	Firestopping	\$ 2,500.00		\$ 2,500.00				\$ -	\$ 2,500.00	0%	\$ -
25	Spray Applied Fireproofing	\$ 2,700.00		\$ 2,700.00				\$ -	\$ 2,700.00	0%	\$ -
26	Caulking	\$ 4,000.00		\$ 4,000.00				\$ -	\$ 4,000.00	0%	\$ -
27	Doors, Frames & Hardware	\$ 145,472.00	\$ 2,511.00	\$ 147,983.00	\$ 3,000.00			\$ 3,000.00	\$ 144,983.00	2%	\$ 300.00
28	Entrances and Storefronts	\$ 138,000.00		\$ 138,000.00	\$ 31,500.00	\$ 4,700.00	\$ 36,500.00	\$ 72,700.00	\$ 65,300.00	53%	\$ 7,270.00
29	Drywall and Metal Studs	\$ 400,074.00	\$ 2,710.05	\$ 402,784.05				\$ -	\$ 402,784.05	0%	\$ -
30	Wall & Floor Tiling	\$ 32,215.00		\$ 32,215.00				\$ -	\$ 32,215.00	0%	\$ -
31	Carpet Tile and Base	\$ 42,446.00	\$ (885.00)	\$ 41,561.00			\$ 30,460.00	\$ 30,460.00	\$ 11,101.00	73%	\$ 3,046.00
32	Access Flooring; Dispatch	\$ 48,700.00	\$ 1,242.00	\$ 49,942.00				\$ -	\$ 49,942.00	0%	\$ -
33	Painting	\$ 22,858.00		\$ 22,858.00				\$ -	\$ 22,858.00	0%	\$ -
34	Markerboards	\$ 1,104.00		\$ 1,104.00				\$ -	\$ 1,104.00	0%	\$ -
35	Projector Screen	\$ 5,960.00		\$ 5,960.00				\$ -	\$ 5,960.00	0%	\$ -
36	Toilet Compartments	\$ 4,350.00		\$ 4,350.00				\$ -	\$ 4,350.00	0%	\$ -
37	Fire Extinguishers and Cabinets	\$ 1,170.00		\$ 1,170.00				\$ -	\$ 1,170.00	0%	\$ -
38	Lockers	\$ 10,035.00	\$ 563.70	\$ 10,598.70				\$ -	\$ 10,598.70	0%	\$ -
39	Benches	\$ 1,680.00		\$ 1,680.00				\$ -	\$ 1,680.00	0%	\$ -
40	Window Treatments	\$ 6,357.00		\$ 6,357.00				\$ -	\$ 6,357.00	0%	\$ -
41	Fire Protection	\$ 44,937.00		\$ 44,937.00	\$ 6,740.55	\$ 2,246.85		\$ 8,987.40	\$ 35,949.60	20%	\$ 898.74
42	Plumbing	\$ 114,400.00		\$ 114,400.00				\$ -	\$ 114,400.00	0%	\$ -
43	HVAC	\$ 226,630.00		\$ 226,630.00	\$ 63,940.00		\$ 66,294.00	\$ 130,234.00	\$ 96,396.00	57%	\$ 13,023.40
44	Electrical	\$ 903,150.00	\$ 2,216.00	\$ 905,366.00	\$ 76,357.95	\$ 17,851.05	\$ 39,016.50	\$ 133,225.50	\$ 772,140.50	15%	\$ 13,322.55
45	Site Excavation	\$ 365,345.00	\$ 144,164.00	\$ 509,509.00	\$ 425,099.00			\$ 425,099.00	\$ 84,410.00	83%	\$ 42,509.90
46	Asphalt Phase I	\$ 63,385.00		\$ 63,385.00				\$ -	\$ 63,385.00	0%	\$ -
47	Asphalt Phase II	\$ 48,805.00		\$ 48,805.00				\$ -	\$ 48,805.00	0%	\$ -
48	Fencing	\$ 87,013.00		\$ 87,013.00				\$ -	\$ 87,013.00	0%	\$ -
49	Perimeter Fence (Allowance)	\$ 4,000.00		\$ 4,000.00				\$ -	\$ 4,000.00	0%	\$ -
50	Landscaping	\$ 87,867.00	\$ 3,275.00	\$ 91,142.00		\$ 3,965.00		\$ 3,965.00	\$ 87,177.00	4%	\$ 396.50
51	Project Contingency	\$ 267,771.33	\$ (168,665.00)	\$ 99,106.33				\$ -	\$ 99,106.33	0%	\$ -
52	Performance and Payment Bond	\$ 47,998.00	\$ 1,522.00	\$ 49,520.00	\$ 49,520.00			\$ 49,520.00	\$ -	100%	
53	Building Permit	\$ 70,000.00		\$ 70,000.00	\$ 69,128.00			\$ 69,128.00	\$ 872.00	99%	
54	Testing and Inspecting Services	\$ 20,000.00		\$ 20,000.00	\$ 20,000.00			\$ 20,000.00	\$ -	100%	\$ 2,000.00
55	Insurance	\$ 38,398.00	\$ 1,282.75	\$ 39,680.75	\$ 39,680.75			\$ 39,680.75	\$ -	100%	
56	Preconstruction Fee	\$ 12,000.00		\$ 12,000.00	\$ 12,000.00			\$ 12,000.00	\$ -	100%	
57	Overhead & Profit	\$ 214,794.67	\$ 7,581.00	\$ 222,375.67	\$ 62,800.00	\$ 17,000.00		\$ 79,800.00	\$ 142,575.67	36%	\$ 7,980.00
		\$ 5,444,173.00	\$ -	\$ 5,444,173.00	\$ 1,539,244.68	\$ 226,458.70	\$ 172,270.50	\$ 1,937,973.88	\$ 3,506,199.12	36%	\$ 176,764.51

SWORN STATEMENT

Joseph Vig

being duly sworn, deposes and says that

J.S. Vig Construction Company

is the contractor for an improvement to the following real property situated in

described as follows : (address / legal)

300 South Highlander Way, Howell, MI 48843

City of Howell, Michigan

County of Livingston

Pay App #5 November 2018

That the following is a statement of each subcontractor and supplier and laborer, for which laborer the payment of wages or fringe benefits and withholdings is due but unpaid, with whom the (contractor)(subcontractor) has (contracted)(subcontracted) for performance under the contract with the owner thereof, and that the amounts due to the persons as of the date hereof are correctly and fully set forth opposite their names, as follows:

Subcontractor/Supplier/Laborer	Type of Improvement	Total Contract	Change Orders	Adjusted Contract	Amount Paid	Amount Due	Balance to Complete
JS Vig	Construction Management	1,024,793.00	(158,279.25)	866,513.75	337,072.05	35,752.92	493,688.78
BAC	Marker boards	1,104.00		1,104.00			1,104.00
BDS Environmental	Asbestos Removal	15,100.00		15,100.00			15,100.00
Boss Engineering	Layout & Staking	14,300.00		14,300.00	9,736.20	3,226.80	1,337.00
Brickman Construction	Masonry	549,000.00		549,000.00	267,588.00	103,931.10	177,480.90
Butcher & Butcher	Membrane Roofing	153,800.00		153,800.00			153,800.00
CEI Materials	Metal Siding	154,468.00		154,468.00	8,634.24		145,833.76
Conventional Carpet	Carpet	40,446.00	(885.00)	39,561.00		27,414.00	12,147.00
Crampton Electric	Electrical	903,150.00	2,216.00	905,366.00	66,727.75	52,540.69	786,097.56
Data Supplies	Access Flooring	48,700.00	1,242.00	49,942.00			49,942.00
EGD Glass & Door	Entrances and Storefronts	138,000.00		138,000.00	31,500.00	37,080.00	69,420.00
FBH	Doors, Frames, and Hardware	145,472.00	2,511.00	147,983.00	2,700.00		145,283.00
Future Fence	Fencing	87,013.00		87,013.00			87,013.00
G&T Commercial	Painting	22,858.00		22,858.00			22,858.00
George F. Wilbur	Plumbing	114,400.00		114,400.00			114,400.00
Hamish	Fireproofing	2,700.00		2,700.00			2,700.00
Huron Acoustic	Drywall	338,374.00	2,710.05	341,084.05			341,084.05
Joe Raica Excavating	Excavating	502,649.00	144,164.00	646,813.00	382,589.10		264,223.90
Leo's Concrete	Concrete Flatwork	181,460.00		181,460.00			181,460.00
Nagle Paving	Asphalt Paving	112,190.00		112,190.00			112,190.00
Novi Wall	Footings	141,245.00	2,682.50	143,927.50	82,028.25		61,899.25
Phantom Fire Protection	Fire Protection	44,937.00		44,937.00	6,066.50	2,022.17	36,848.33
Progressive Plumbing	Plumbing Accessories	13,160.00		13,160.00			13,160.00
RAM Construction	Masonry Caulking	25,000.00		25,000.00	2,430.00	10,192.50	12,377.50
S&G Fabricators	Steel	237,000.00		237,000.00	147,735.00	23,463.00	65,802.00
Shelving Inc.	Lockers	9,035.00	563.70	9,598.70			9,598.70
Shores Tile Company	Tile	32,215.00		32,215.00			32,215.00
Sobania	Architectural Millwork	70,750.00	(200.00)	70,550.00			70,550.00
The Sheer Shop	Window Treatments	6,357.00		6,357.00			6,357.00
WM Floyd Co.	HVAC	226,630.00		226,630.00	57,546.00	59,664.60	109,419.40
World Class Contracting	Landscaping	87,867.00	3,275.00	91,142.00		3,568.50	87,573.50
TOTAL AMOUNTS		5,444,173.00	(0.00)	5,444,173.00	1,402,353.09	358,856.28	3,682,963.64

The contractor has not procured material from, or subcontracted with, any person other than those set forth above and owes no money for the improvement other than the sums set forth.

I make this statement as the contractor or as CEO of J S Vig Construction Company to represent to the owner or lessee of the property and his or her agents that the property is free from claims of construction liens, or the possibility of construction liens, except as specifically set forth in this statement and except for claims of construction liens by laborers that may be provided under section 109 of the construction lien act, 1980 PA497, MCL 570-1109

WARNING TO OWNER: AN OWNER OR LESSEE OF THE PROPERTY SHALL NOT RELY ON THIS SWORN STATEMENT TO AVOID THE CLAIM OF A SUBCONTRACTOR, SUPPLIER, OR LABORER WHO HAS PROVIDED A NOTICE OF FURNISHING OR A LABORER WHO MAY PROVIDE A NOTICE OF FURNISHING UNDER SECTION 109 OF THE CONSTRUCTION LIEN ACT, 1980 PA 497, MCL 570.1109, TO THE DESIGNEE OR TO THE OWNER OR LESSEE IF THE DESIGNEE IS NOT NAMED OR HAS DIED.

IF THIS SWORN STATEMENT IS IN REGARD TO A RESIDENTIAL STRUCTURE, ON RECEIPT OF THE SWORN STATEMENT, THE OWNER OR LESSEE, OR THE OWNER'S OR LESSEE'S DESIGNEE, MUST GIVE NOTICE OF ITS RECEIPT, EITHER IN WRITING, BY TELEPHONE, OR PERSONALLY, TO EACH SUBCONTRACTOR, SUPPLIER, AND LABORER WHO HAS PROVIDED A NOTICE OF FURNISHING UNDER SECTION 109 OR, IF A NOTICE OF FURNISHING IS EXCUSED UNDER SECTION 108 OR 108A, TO EACH SUBCONTRACTOR, SUPPLIER, AND LABORER NAMED IN THE SWORN STATEMENT. IF A SUBCONTRACTOR, SUPPLIER, OR LABORER WHO IS ENTITLED TO NOTICE OF RECEIPT OF THE SWORN STATEMENT MAKES A REQUEST, THE OWNER, LESSEE, OR DESIGNEE SHALL PROVIDE THE REQUESTER A COPY OF THE SWORN STATEMENT WITH 10 BUSINESS DAYS AFTER RECEIVING THE REQUEST.

Joseph S. Vig

Joseph Vig

WARNING TO DEPONENT: A PERSON, WHO GIVES A FALSE SWORN STATEMENT WITH THE INTENT TO DEFRAUD IS SUBJECT TO CRIMINAL PENALTIES AS PROVIDED IN SECTION 110 OF THE CONSTRUCTION LIEN ACT, 1980 P.A. 497, MCL 570.1110.

Subscribed and sworn to before me this
10 day of December, 2018

Elaine Kennedy
Elaine Kennedy

Notary Public, Wayne County
My Commission Expires: 04/28/2023

ELAINE KENNEDY
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES Apr 28, 2023
ACTING IN COUNTY OF Wayne

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with Livingston County

to provide Construction Management


for the improvements to the property described as: Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien to the amount of \$26,524.98

for labor and/or materials provided through 10/31/18

This waiver, together with all previous waivers, if any ☒ does ☐ does not cover all amounts due to me/us for contract improvements through the date shown above.

If the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if i/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic

By: 
(Signature of Lien Claimant)

Address: JS Vig Construction Company
15040 Cleat Street
Plymouth, MI 48170

Telephone: 734-283-3002
Fax: _____

Signed On: 12/7/18

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with JS Vig Construction Company

to provide Masonry

for the improvements to the property described as: Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien to the amount of \$163,152.00

for labor and/or materials provided through 10/31/18

This waiver, together with all previous waivers, if any ☒ does ☐ does not cover
all amounts due to me/us for contract improvements through the date shown above.

If the owner or lessee of
the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us
or if i/we are not required to provide one, and the owner, lessee, or designee has not received this
waiver directly from me/one of us, the owner, lessee, or designee may not rely upon it without
contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic

By: 
(Signature of Lien Claimant)

Brickman Construction
Address: 124 W St. Clair
Suite B
Romeo, MI 48065

Telephone: _____
Fax: _____

Signed On: 12/11/18

Please fax or mail signed waiver to:
ekennedy@jsvig.com
Fax: 734-282-5320

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with J.S. Vig Construction Company to provide

Metal Siding

for the improvements to the property described as:

001673 - Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien rights to the amount of
for labor and/or materials provided through

\$8,634.24


10-31-2018

This waiver, together with all previous waivers, if any, does cover all amounts due to me/us for contract improvements through the date shown above.

If the improvement is provided to property that is a residential structure and if the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if I/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/ one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic.

CEI COMPOSITE MATERIALS

By:


(Signature of Lien Claimant)

Address:

800 E Duncan St
MANCHESTER, MI 48158

Telephone:

734-212-3006

Fax:

734-661-0360

Signed on:

11-30-18

Please email signed waiver to Elaine Kennedy - ekennedy@jsvig.com


DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY.

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with JS Vig Construction Company
to provide Electrical
for the improvements to the property described as: Livingston County 911 Dispatch
and by signing this waiver waive my/our construction lien to the amount of \$634.50
for labor and/or materials provided through 10/31/18

This waiver, together with all previous waivers, if any ☒ does ☐ does not cover
all amounts due to me/us for contract improvements through the date shown above.

If the owner or lessee of
the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us
or if I/we are not required to provide one, and the owner, lessee, or designee has not received this
waiver directly from me/one of us, the owner, lessee, or designee may not rely upon it without
contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic

By: 
(Signature of Lien Claimant)

Crampton Electric Co

Address: PO Box 380
Fowlerville, MI 48836

Telephone: 517-223-9691

Fax: 517-223-9970

Signed On: 12/5/18

Please fax or mail signed waiver to:
ekennedy@jvig.com
Fax: 734-282-5320

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with J.S. Vig Construction Company

to provide Glass

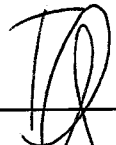
for the improvements to the property described as: Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien to the amount of \$31,500.00

for labor and/or materials provided through 08/31/18

This waiver, together with all previous waivers, if any ☒ does ☐ does not cover all amounts due to me/us for contract improvements through the date shown above.

If the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if i/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic

By:  (Signature of Lien Claimant)

EGD Glass & Door
Address: 10380 Highland Rd.
White Lake, MI 48386

Telephone: 248-305-8181
Fax: 248-305-8183

Signed On: E-20-18

Please fax or email signed waiver to:

klindstrom@jsvig.com

Fax: 734-282-5320

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY

PARTIAL UNCONDITIONAL WAIVER

I/we have a contact with J.S. Vig Construction Company to provide

Metal Doors, Fr

for the improvements to the property described as:

001673 - Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien rights to the amount of
for labor and/or materials provided through 10-31-2018

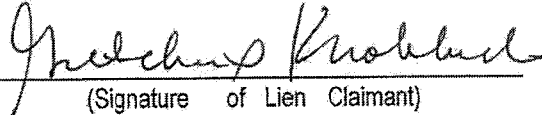
\$2,700.00

This waiver, together with all previous waivers, if any, does cover all amounts due to me/us for contract improvements through the date shown above.

If the improvement is provided to property that is a residential structure and if the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if I/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/ one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic.

FBH Architectural Security

By:


(Signature of Lien Claimant)

Address:

PO Box 1277
Flint, MI 48501

Telephone:

734-332-3740

Fax:

734-332-3746

Signed on:

11/30/18

Please email signed waiver to Elaine Kennedy - ekennedy@jsvig.com

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY.

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with J.S. Vig Construction Company to provide

Footings

for the improvements to the property described as:

001673 - Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien rights to the amount of
for labor and/or materials provided through

\$2,414.25

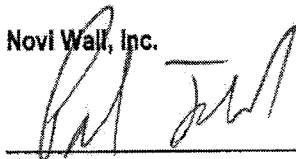
10-31-2018

This waiver, together with all previous waivers, if any, does cover all amounts due to me/us for contract improvements through the date shown above.

If the improvement is provided to property that is a residential structure and if the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if I/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/ one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic.

Novi Wall, Inc.

By:


(Signature of Lien Claimant)

Address: 25250 Seeley Road
Novi, MI 48375

Telephone: 248-474-1200
Fax: 248-474-7954

Signed on: 11-30-18

Please email signed waiver to Elaine Kennedy - ekennedy@jsvig.com

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY.

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with J.S. Vig Construction Company to provide

Fire Supression

for the improvements to the property described as:

001673 - Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien rights to the amount of
for labor and/or materials provided through

\$6,066.50

10-31-2018

This waiver, together with all previous waivers, if any, does cover all amounts due to me/us for contract improvements through the date shown above.

If the improvement is provided to property that is a residential structure and if the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if I/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/ one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic.

PHANTOM FIRE PROTECTION

By:



(Signature of Lien Claimant)

Address:

1570 S SAGE LAKEROAD
HALE, MI 48739

Telephone:

989-984-0210

Fax:

989-329-3209

Signed on: 11-30-18

Please email signed waiver to Elaine Kennedy - ekennedy@jsvig.com

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY.

PARTIAL UNCONDITIONAL WAIVER

206740

I/we have a contract with J.S. Vig Construction Company to provide

Sealant Work-Wa

for the improvements to the property described as:

001673 - Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien rights to the amount of
for labor and/or materials provided through

\$2,430.00

10-31-2018

This waiver, together with all previous waivers, if any, does cover all amounts due to me/us for contract improvements through the date shown above.

If the improvement is provided to property that is a residential structure and if the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if I/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/ one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic.

RAM CONSTRUCTION SERVICES

By:



Alex Cohen

(Signature of Lien Claimant)

Controller

Address: 13800 EKLES ROAD
LIVONIA, MI 48150

Telephone: 734-464-3800
Fax: 734-437-6201

Signed on: 11-30-18

Please email signed waiver to Elaine Kennedy - ekennedy@jsvig.com

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY.

PARTIAL UNCONDITIONAL WAIVER

I/we have a contract with JS Vig Construction Company

to provide HVAC

for the improvements to the property described as: Livingston County 911 Dispatch

and by signing this waiver waive my/our construction lien to the amount of \$57,546.00

for labor and/or materials provided through 10/31/18

This waiver, together with all previous waivers, if any ☒ does ☐ does not cover all amounts due to me/us for contract improvements through the date shown above.

If the owner or lessee of the property or the owner's or lessee's designee has received a notice of furnishing from me/one of us or if i/we are not required to provide one, and the owner, lessee, or designee has not received this waiver directly from me/one of us, the owner, lessee, or designee may not rely upon it without contacting me/one of us, either in writing, by telephone, or personally, to verify that it is authentic

By:

(Signature of Lien Claimant)

WM Floyd

Address: 716 Victory Drive
Howell, MI 48843

Telephone: 810-232-1160

Fax: _____

Signed On: 11/30/18

Please fax or mail signed waiver to:

ekennedy@jsvig.com

Fax: 734-282-5320

DO NOT SIGN BLANK OR INCOMPLETE FORMS. RETAIN A COPY



10380 Highland Road White Lake, MI 48386
300 Detroit Avenue Suite B Monroe, MI 48126
Phone: 517-375-1222
www.egdglassanddoor.net

December 7, 2018

Livingston County 911 Billing breakdown

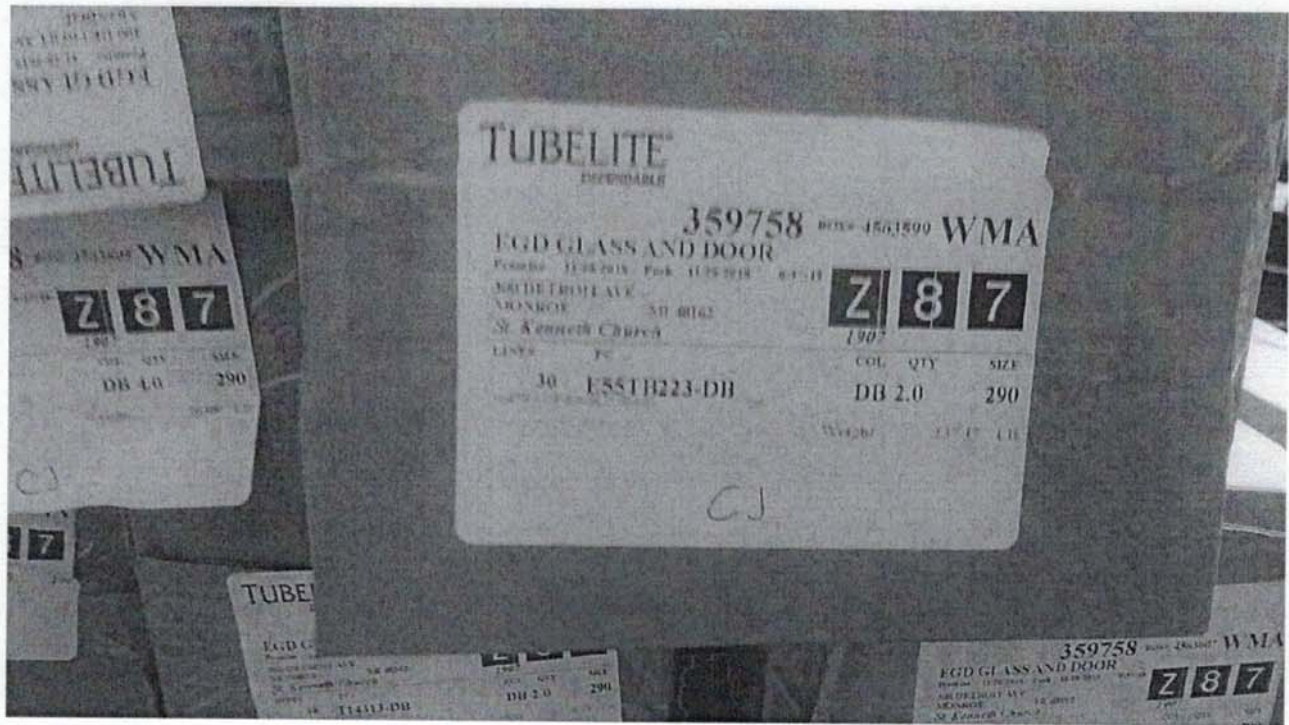
Hi Elaine, please see below for my breakdown of the Materials we have onsite at our shop from US Bulletproofing.

USAW400 FEMA Windows ballistics level 4 (Onsite)	\$68,000
FEMA Door and window framing (Awaiting on shipping)	\$14,577

Respectfully,

Travis Oliver







SHIP TO:

**EGD GLASS AND DOOR LLC
300 DETROIT AVE. STE B
MONROE, MI. 48162**

**ST. KENNETH
SANCTUARY**







EGDGL-1

OP ID: TE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/29/2018

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 Oakland Insurance Agency 8031 M-15, Ste. 100 Clarkston, MI 48348 Barry L Hunt		248-647-2500		CONTACT NAME:	
				PHONE (A/C, No, Ext): 248-647-2500	
				FAX (A/C, No): 248-647-4689	
				E-MAIL ADDRESS: certrequest@oaklandinsurance.com	
				INSURER(S) AFFORDING COVERAGE	
				INSURER A: Accident Fund National	
				INSURER B: Westfield Insurance Company	
				INSURER C:	
				INSURER D:	
				INSURER E:	
				INSURER F:	

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		CWP5588389	06/01/2018	06/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CWP5588389	06/01/2018	06/01/2019	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 DED RETENTION \$			CWP5588389	06/01/2018	06/01/2019	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WCV6144285	06/01/2018	06/01/2019	<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
B	Business Pers Prop			CWP5588389	06/01/2018	06/01/2019	BPP 500,000

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

Project: St. Kenneth Church - Plymouth
J.S. Vig Construction Company is Additional Insured with respect to General Liability and Loss Payee with respect to Door Hardware, \$65,000 value, and Storefront Metal, \$30,000 Value, stored at insureds location - 300 Detroit Ave, Monroe, MI

CERTIFICATE HOLDER J.S. Vig Construction Company 15040 Cleat St. Plymouth, MI 48170	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 <i>John D. Howney</i>
---	---

ACORD 25 (2016/03)

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Agenda Page 29 of 56



CONVENTIONAL CARPET INC.
EST. 1981

November 29, 2018

RE: Breakdown of values for stored material

Project: Livingston County 911

Interface Carpet - \$ 21,120.00


Armstrong VCT - \$ 1,526.00

Rubber Tile - \$ 1,669.00

Carpet Base - \$ 2,256.00

Misc. stock material - \$ 4,069.00

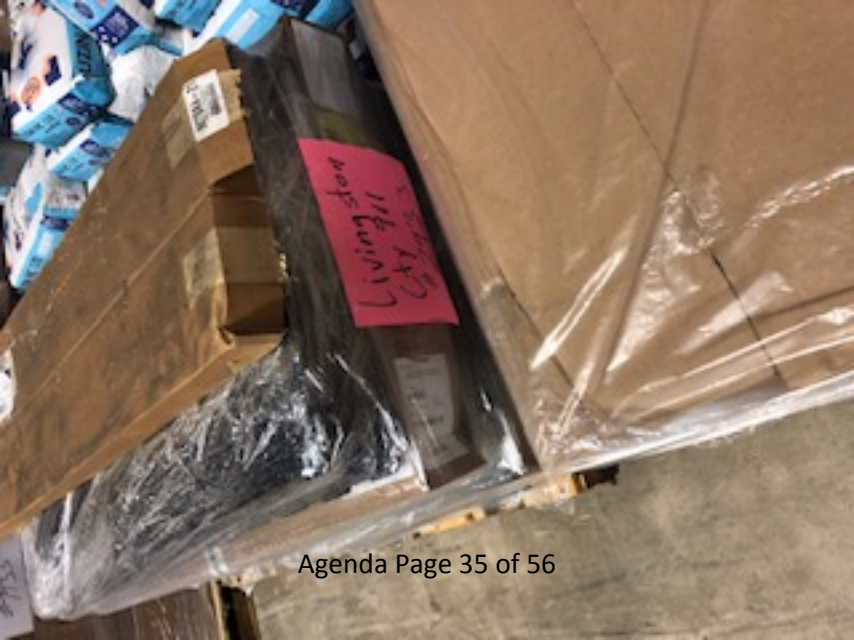




Livingston
County
#7933









CONVCAR-01

TMALECKI

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/27/2018

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 Insurance Exchange Agency 670 Griswold Suite 100 Northville, MI 48167	CONTACT NAME: Theresa Malecki	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
INSURED Conventional Carpet Inc 7155 19 Mile Road Sterling Heights, MI 48314	E-MAIL ADDRESS: tmalecki@ieagency.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Hastings Mutual Insurance Company	
	INSURER B: Accident Fund Insurance Company of America	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL 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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	X	CPP9491823	04/28/2018	04/28/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 EBL AGGREGATE \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		ACV9491824	04/28/2018	04/28/2019	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 <input checked="" type="checkbox"/> RETENTION \$ 0		ULC9495940	04/28/2018	04/28/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WCV6126851	04/28/2018	04/28/2019	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

Project no: 1673

J.S. Vig Construction, Livingston County 911-New Central Dispatch, Lindhout Associates Architects AIA PC, Livingston County are included as additional insureds on a primary and non contributory basis as per contract and/or agreement with the named insured. Coverage for material in the amount of \$30,640.00 is included while being stored on Conventional Carpet, Inc. premises.

CERTIFICATE HOLDER

CANCELLATION

J.S. Vig Construction
15040 Cleat St
Plymouth, MI 48170

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

Mary M. Williams



Wm. Floyd

MECHANICAL CONTRACTORS

Proudly Serving Michigan Since 1977

To: JS vig
Company:
Phone:
Date: 11/29/18

Project: Livingston County 911
Location: Howell, MI
Price: DETAILS BELOW
Terms: Net 30

Stored Materials – Livingston County 911

\$63,167.00- RTU's 1-4
\$3,127.00- (2) fans, (2) motorized dampers, (5) fire dampers, (1) louver

Stored at our facility 716 Victory Drive, Howell MI 48843

By Noah W Floyd



RTU-4
184512462L



IMPORTANT



RTU-1
184512458L





Web ID: 21401014 01/31/06
Trig Number: 2NA6025625
Delivery Number: **99270053**
Carrier: MEADOW LARK

Deliver To Customer:
WILLIAM FLOYD HEATING COMPANY 625073
718 VICTORY DR
OX LIVINGSTON COUNTY 911
HOWELL, MI 48940
Customer PO Number: 048713

Barcode: 18877112 Kodak BC M2P875A
Serial Order: 18877112

Job Name: Howell 911 Dispatch Center - Livingston County
16899 - Howland
Ship Date:
Add: Order Reference: M220227
Ship From: US Panama City FL 200 Aberdeen Loop
200 Aberdeen Loop
PANAMA CITY FL 32405

RTU-3
184614955L





Dear Policyholder,

Thank you for choosing Federated Insurance to handle your insurance and risk management needs. The attached certificate document(s) have been issued or updated.

Please feel free to contact us with any additional changes, additions or deletions that may be needed by contacting the Federated Client Contact Center at:

Phone: 1-888-333-4949

Fax: 507-446-4664

E-mail: clientcontactcenter@fedins.com

Thank you for your business!

Client Contact Center

Enclosed:

Certificate Document(s)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/24/2018

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 FEDERATED MUTUAL INSURANCE COMPANY HOME OFFICE: P.O. BOX 328 OWATONNA, MN 55060		CONTACT NAME: CLIENT CONTACT CENTER PHONE (A/C, No, Ext): 888-333-4949 FAX (A/C, No): 507-446-4664 E-MAIL ADDRESS: CLIENTCONTACTCENTER@FEDINS.COM	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: FEDERATED MUTUAL INSURANCE COMPANY	
		INSURER B: FEDERATED SERVICE INSURANCE COMPANY	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 176

REVISION NUMBER: 0

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
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	N	N	6048607	06/01/2018	06/01/2019	EACH OCCURRENCE
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)
							PERSONAL & ADV INJURY
GEN'L AGGREGATE LIMIT APPLIES PER:							
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE
	OTHER:						\$2,000,000
							PRODUCTS - COMP/OP AGG
							\$2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY	N	N	6048607	06/01/2018	06/01/2019	COMBINED SINGLE LIMIT (Ea accident)
	<input checked="" type="checkbox"/> ANY AUTO						\$1,000,000
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						
							BODILY INJURY (Per accident)
						PROPERTY DAMAGE (Per accident)	
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR	N	N	6048611	06/01/2018	06/01/2019	EACH OCCURRENCE
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						\$5,000,000
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION						AGGREGATE
							\$5,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N / A	N	6048612	06/01/2018	06/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						
	If yes, describe under DESCRIPTION OF OPERATIONS below						
							E.L. EACH ACCIDENT
							E.L. DISEASE - EA EMPLOYEE
		E.L. DISEASE - POLICY LIMIT					
							\$1,000,000
							\$1,000,000
							\$1,000,000

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

CERTIFICATE HOLDER

150-522-1
J.S. VIG CONSTRUCTION CO
15040 CLEAT ST
PLYMOUTH, MI 48170-6014

176 0

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

Michael G Ken

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ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY FEDERATED MUTUAL INSURANCE COMPANY		NAMED INSURED WM. FLOYD COMPANY 716 VICTORY DR HOWELL, MI 48843-7591
POLICY NUMBER SEE CERTIFICATE # 176.0		
CARRIER SEE CERTIFICATE # 176.0	NAIC CODE	EFFECTIVE DATE: SEE CERTIFICATE # 176.0

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

INSTALLATION FLOATER PROVIDES COVERAGE FOR STORED MATERIALS WITH A LIMIT OF \$250,000.
 THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED SUBJECT TO THE CONDITIONS OF THE ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU ENDORSEMENT FOR GENERAL LIABILITY.
 THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED SUBJECT TO THE CONDITIONS OF THE ADDITIONAL INSURED BY CONTRACT ENDORSEMENT FOR BUSINESS AUTO LIABILITY.



BREAK OUT STORED MATERIALS

December 7th, 2018

To: J.S. Vig Construction

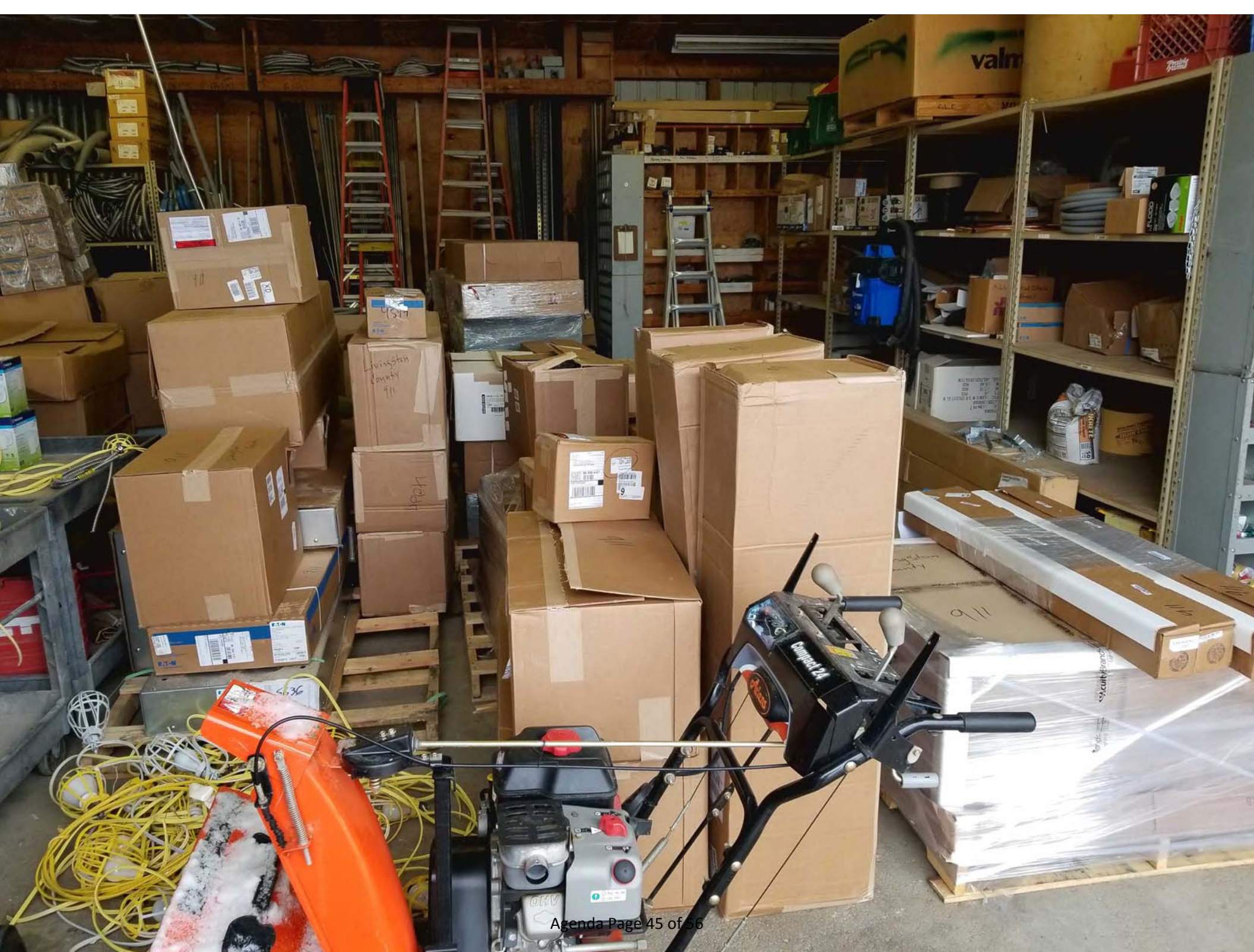
Attn: Elaine

Job Name: Livingston County 911 Central Dispatch Center

Kendall Electric Gear	\$34,100.00
Kendall Electric UPS System	\$62,000.00
Wyandotte Electric Lighting	\$86,000.00
Boynton Fire Fire Alarm	\$8,000.00

Respectfully,
RYAN ATHERTON

Estimator













007376864

N
A
M
E

Page 3/3

These items are controlled by the U.S. Government (when labeled with "ECCN" unequal "N") and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. Government or as otherwise authorized by U.S. law and regulations. Items labeled with "AL" unequal "N" are subject to European / national export authorization. Items without label, with label "AL:N" / "ECCN:N" or label "AL:9X9999" / "ECCN: 9X9999" may require authorization from responsible authorities

Order Status Summary

Material	Qty Ordered	Qty Already Shipped	Remaining Qty to Ship
S54400-A54-A1	1	1	0
S54400-A63-A1	1	1	0
S54400-B41-A1	1	1	0
S54400-B88-A1	1	1	0
S54400-C20-A1	1	1	0
S54400-C55-A1	1	1	0

From: Siemens Industry, Inc.

1000 Deerfield Parkway, BUFFALO GROVE, 60089

TO:

BOYNTON FIRE SAFETY SERVICES LLC
1031 NORTHCREST RD
LANSING 48906-1299 MI
US

Carton Id# SIH200083504752084



BOX: 01 OF 01
Box #: 5345084
End Customer PO: TC- Livingston 911
L12 Sales Order: 1264913
L3 PO: 4507270959
Customer PO: TC- LIVINGSTON 911

W
B
S

3007376864

N
A
M
E

Mark Shipment: CASEMARKING FROM S.O.: 3007376

Shipping/Packing Instructions: GRI: 3007376864 DR

PLEASE USE APPLICABLE FREIGHT ACCOUNT UPS ACCOUNT NUMBER: FEDEX ACCOUNT NUMBER:

Date: _____ Rec'd By: _____

Note(s): _____

007376864

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Page 2/3

These items are controlled by the U.S. Government (when labeled with "ECCN" unequal "N") and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. Government or as otherwise authorized by U.S. law and regulations. Items labeled with "AL" unequal "N" are subject to European / national export authorization. Items without label, with label "AL:N" / "ECCN:N" or label "AL:9X9999" / "ECCN: 9X9999" may require authorization from responsible authorities

Order Status Summary

Material	Qty Ordered	Qty Already Shipped	Remaining Qty to Ship
500-033300	4	4	0
500-033360	4	4	0
500-033370	2	2	0
500-033400	5	5	0
500-094151	8	8	0
500-649712	4	4	0
S54319-B22-A1	4	4	0
S54319-S27-A1	4	4	0
S54320-F4-A2	12	12	0
S54329-F22-A1	22	22	0
S54329-F25-A1	12	12	0
S54400-A39-A1	1	1	0

From: Siemens Industry, Inc.
1000 Deerfield Parkway, BUFFALO GROVE, 60089

TO: BOYNTON FIRE SAFETY SERVICES LLC 1031 NORTHCREST RD LANSING 48906-1299 MI US	Carton Id# SIH200083504752084
	 BOX: 01 OF 01 Box #: 5345084 End Customer PO: TC- Livingston 911 L12 Sales Order: 1264913 L3 PO: 4507270959 Customer PO: TC- LIVINGSTON 911

W
B
S

3007376864

N
A
M
E

Mark Shipment: CASEMARKING FROM S.O.: 3007376

Shipping/Packing Instructions: GRI: 3007376864 DR

PLEASE USE APPLICABLE FREIGHT ACCOUNT UPS ACCOUNT NUMBER: FEDEX ACCOUNT NUMBER:

Date: _____ Rec'd By: _____

Note(s): _____

007376864

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Page 1/3

"These items are controlled by the U.S. Government (when labeled with "ECCN" unequal "N") and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. Government or as otherwise authorized by U.S. law and regulations. Items labeled with "AL" unequal "N" are subject to European / national export authorization. Items without label, with label "AL:N" / "ECCN:N" or label "AL:9X9999" / "ECCN: 9X9999" may require authorization from responsible authorities depending on the final end-use, or the destination."

Item	Num	Part Number	Um	Part Description	Qty	Shpd	Line Marks
001	S54329-F22-A1	PC	SLHSWR-F	HRN/ST,WALL,RED	22.000		
	S54329-F22-A1						
	ECCN:EAR99	COO: MX		HTSUS: 8531809051			

Shipping/Packing Instructions: CUSTOMER PO:TC- LIVINGSTON 911NON-TAXABLECUSTOMER PO:TC- LIVINGSTON 911

From: Siemens Industry, Inc.
1000 Deerfield Parkway, BUFFALO GROVE, 60089

TO: BOYNTON FIRE SAFETY SERVICES LLC 1031 NORTHCREST RD LANSING 48906-1299 MI US	Carton Id# SIH200083504752084
	 BOX: 01 OF 01 Box #: 5345084 End Customer PO: TC- Livingston 911 L12 Sales Order: 1264913 L3 PO: 4507270959 Customer PO: TC- LIVINGSTON 911

W
B
S 3007376864N
A
M
E

Mark Shipment: CASEMARKING FROM S.O.: 3007376

Shipping/Packing Instructions: GRI: 3007376864 DR

PLEASE USE APPLICABLE FREIGHT ACCOUNT UPS ACCOUNT NUMBER: FEDEX ACCOUNT NUMBER:

Date: _____ Rec'd By: _____

Note(s): _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/27/2018

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 Al Bourdeau Insurance Agency - Williamston 138 W. Grand River Ave Williamston MI 48895	CONTACT NAME: Linda Snider PHONE (A/C, No, Ext): (517) 655-5421 E-MAIL ADDRESS: lindas@albourdeau.com FAX (A/C, No): (517) 655-1189
INSURED CRAMPTON ELECTRIC COMPANY, INC. PO BOX 380 10975 W GRAND RIVER RD FOWLerville MI 48836-0380	INSURER(S) AFFORDING COVERAGE INSURER A: EMCASCO Insurance Co INSURER B: Union Insurance Co. fo Prov. INSURER C: Employers Mutual Casualty Co INSURER D: ABC Workers' Comp. Fund INSURER E: INSURER F:
	NAIC # 21407 21423 21415 15105

COVERAGES**CERTIFICATE NUMBER:** 17-18 WC 18-19**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 INSD	SUBR 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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			5D40703	12/31/2017	12/31/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 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 type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			5E40703	12/31/2017	12/31/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			5J40703	12/31/2017	12/31/2018	COMBINED SINGLE LIMIT EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
D	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 <input type="checkbox"/>	N / A	CRAMP-C	05/01/2018	04/30/2019	<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
C	Leased/Rental Equipment			5C40703	12/31/2017	12/31/2018	Limit \$50,00 \$1,000

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

Project: Livingston County 911 Central Dispatch Center OWNER: Livingston County - 304 E Grand River Ave, Ste 202 - Howell, MI 48843 - J.S. Vig Construction is added as additional insured - 30 day notice of cancellation applies - Material held in storage \$50,000

CERTIFICATE HOLDER**CANCELLATION**

J.S. Vig Construction
15040 Sleat Street

Plymouth

MI 48170

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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MONTHLY INVOICE

BILL TO

Chad Chewning
911 Central Dispatch
300 S. Highlander Way
Howell, MI 48843

Date Dec 01, 2018
Invoice # 2018-1203
Project Name LC 911 - New Central Dispatch
Project No 17114
Please Remit By Dec 31, 2018
Payment Terms 30(days)
Balance Due: \$19,325.17
Project Description: LC 911 - New Central Dispatch

November, 2018 work included tower shelter coordination, pay app #4 review, stored materials visit, and attendance at multiple owner and on-site contractor meetings.

	Fee Summary		Previously Invoiced		Current Invoice		Remaining
	%	Stipulated	% phase Completed	Amount Billed	% complete	Value of Completed	Amount remaining
01 Schematic Design	7.00%	\$20,960.07	100.00%	\$20,960.07	0.00%	\$0.00	\$0.00
02 Design Development	15.00%	\$44,914.43	100.00%	\$44,914.43	0.00%	\$0.00	\$0.00
03 Construction Documents	50.00%	\$149,714.76	100.00%	\$149,714.76	0.00%	\$0.00	\$0.00
04 Bidding Administration	5.00%	\$14,971.48	100.00%	\$14,971.48	0.00%	\$0.00	\$0.00
05 Construction Administration	23.00%	\$68,868.79	41.02%	\$28,246.69	55.69%	\$10,108.73	\$30,513.36
	100.00%	\$299,429.52	86.43%	\$258,807.43	3.38%	\$10,108.73	\$30,513.35

Construction Cost	\$5,444,173.00
Fee Percentage	5.50%
Total Fee Amount	\$299,429.52

Invoice Total: \$10,108.73
Previous Balance: \$20,068.64
Payments Received: \$10,852.20
Account Balance: \$19,325.17

Please make payments to Lindhout Associates.



MONTHLY INVOICE

BILL TO

Jeff Warder
Livingston County Sheriff
150 S. Highlander Way
Howell, MI 48843

Date Dec 01, 2018
Invoice # 2018-1204
Project Name LC Sheriff - Storage Facility
Project No 18041
Please Remit By Dec 31, 2018
Payment Terms 30(days)
Balance Due: \$39,313.87
Project Description: LC Sheriff - Storage Facility

November, 2018 work included post bid meetings with metal building supplier, post bid addendum 1, and attendance at County review meeting.

	Fee Summary		Previously Invoiced		Current Invoice		Remaining
	%	Stipulated	% phase Completed	Amount Billed	% complete	Value of Completed	Amount remaining
01 Schematic Design	10.00%	\$3,766.02	100.00%	\$3,766.01	0.00%	\$0.00	\$0.00
02 Design Development	20.00%	\$7,532.03	100.00%	\$7,532.03	0.00%	\$0.00	\$0.00
03 Construction Documents	50.00%	\$18,830.08	100.00%	\$18,830.08	100.00%	\$0.00	\$0.00
04 Bidding Administration	3.00%	\$1,129.80	100.00%	\$1,129.80	0.00%	\$0.00	\$0.00
05 Construction Administration	17.00%	\$6,402.23	0.00%	\$0.00	1.66%	\$106.05	\$6,296.17
	100.00%	\$37,660.15	83.00%	\$31,257.92	0.28%	\$106.05	\$6,296.18

Invoice Total: \$106.05
Previous Balance: \$39,207.82
Account Balance: \$39,313.87

Please make payments to Lindhout Associates.