#14,019

FORMAL BID NO. 198-20, CLEAR SPAN CONCRETE BRIDGES AND BOX CULVERTS Effective 4/14/20 through 4/13/21 **BID AWARD**

HUNT JUNTY

| PROOF OF INSURANCE PROVIDED | Yes | PROOF OF INSURANCE PROVIDED | Yes | | ridge |
|--------------------------------|--------------|--------------------------------|--------------|--|--|
| FIFTY FOOT BRIDGE | \$86,100.00 | 10 x 10 x 24 Triple | \$77,522.00 | | f this bid to Yoder B |
| FORTY FOOT BRIDGE | \$72,030.00 | 9 x 10 x 24 Double | \$61,792.00 | | commends award o |
| THIRTY FOOT BRIDGE | \$61,425.00 | 7 x 10 x 24 Double | \$55,230.00 | | asing Department re |
| TWENTY FOOT BRIDGE | \$46,305.00 | 7 x 10 x 24 Single | \$39,480.00 | | The Hunt County Purchasing Department recommends award of this bid to Yoder Bridge |
| BRIDGE VENDOR | Yoder Bridge | BOX CULVERT VENDOR | Yoder Bridge | | The |

the lowest and best bidder - the only responsive vendor

±16.019 County of Hunt

PURCHASING DEPARTMENT 2507 Lee Street, Room 104 Greenville, Texas 75401



EILED FOR RECORD

PHONE: (903) 408-4148 FAX: (903) 408-4242 lowry@huntcounty.net

JENNIFER LINDENZWEIG

Invitation To Bid

Formal Bid #198-20, CLEAR SPAN CONCRETE BRIDGE – 20, 30, 40 & 50 FOOT AND CONCRETE BOX CULVERTS, (12) MONTH CONTRACT

Sealed bids in single copy unless otherwise stated, subject to Terms and Conditions of this Invitation to Bid and other contract provisions, will be received at the office of the Hunt County Purchasing Agent, 2507 Lee Street, Room 104, Greenville, Texas, 75401 until 10:00 A.M. Central Time, Thursday, March 5, 2020.

The Hunt County Purchasing Department is willing to assist any bidder(s) in the interpretation of bid provisions or explanation of how bid forms are to be completed. Assistance can be received by visiting the Purchasing Office at 2507 Lee Street, Room 104, Greenville, TX 75401 or by calling (903) 408-4148 or (903) 408-4292.

READ CAREFULLY

Please quote prices on the articles on the attached bid sheet. The right is reserved to accept or reject all or any part of your offer, and to accept the offer the Commissioners' Court considers the lowest responsible bid. Bids are to be returned sealed in an envelope clearly indicating that a bid is enclosed and reflecting the bid number.

By submitting this bid, the undersigned hereby certifies that said bid has been independently arrived at and that price, terms, or conditions appearing or applicable hereto, have not and will not be disclosed by or on behalf of the bidder to another bidder or competitor.

The undersigned by his/her signature represents that he/she is authorized to bind the bidder to fully comply with the terms and conditions of the attached Invitation to Bid, Specifications, and Special Provisions for the amount(s) shown on the accompanying bid sheet(s). By signing below, you have read the entire document and agreed to the terms therein. You must sign below in INK; failure to sign and return WILL disqualify the offer. All prices must be typewritten or written in ink.

Company Name:

Contact Name:

Telephone Number:

FAX Number:

Authorized Representative - Typed or Printed

Authorized Representative - Signed by Hand

(THIS BID IS VALID FOR 60 DAYS UNLESS OTHERWISE STATED)

FORMAL BID #198-20; CLEAR SPAN CONCRETE BRIDGE AND BOX CULVERT CONTRACT TWELVE (12) MONTHS

| 20 (twenty-foot) Clear Span Concrete Bridge constructed on site in accordance with Hunt County Specifications |
|---|
| Estimated use for twelve months: 2 |
| Firm Fixed Price for 20 foot bridge: \$ 46,305.00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING |
| Describe any additional pricing (if any) of your company: |
| |
| |
| ********************** |
| 30 (thirty-foot) Clear Span Concrete Bridge constructed on site in accordance with Hunt County Specifications |
| Estimated use for twelve months: 0 |
| Firm Fixed Price for 30 foot bridge: \$ 61, 425.00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING |
| Describe any additional pricing (if any) of your company: |
| |

FORMAL BID #198-20; CLEAR SPAN CONCRETE BRIDGE AND BOX CULVERT CONTRACT TWELVE (12) MONTHS

40 (forty-foot) Clear Span Concrete Bridge constructed on site in accordance with Hunt County **Specifications** Estimated use for twelve months: 1 Firm Fixed Price for 40 foot bridge: \$ 72,030.00 per installation State your estimated time to complete each project after Notice to Proceed is received: 3 weeks ADDITIONAL PRICING Describe any additional pricing (if any) of your company: ************************************* 50 (fifty-foot) Clear Span Concrete Bridge constructed on site in accordance with Hunt County Specifications Estimated use for twelve months: 0 Firm Fixed Price for 50 foot bridge: \$ 86, 100.00 per installation State your estimated time to complete each project after Notice to Proceed is received: 3 weeks ADDITIONAL PRICING Describe any additional pricing (if any) of your company:

FORMAL BID #198-20; CLEAR SPAN CONCRETE BRIDGE AND BOX CULVERT CONTRACT TWELVE (12) MONTHS

| 7 x 10 x 24 Single Box Culvert less dirt work |
|---|
| Estimated use for twelve months: 0 |
| Firm Fixed Price for 7 x 10 x 24 Single Culvert: \$ 39, 480,00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING |
| Describe any additional pricing (if any) of your company: |
| |
| ************************************** |
| 7 x 10 x 24 Double Box Culvert less dirt work |
| Estimated use for twelve months: 0 |
| Firm Fixed Price for 7 x 10 x 24 Double Culvert: \$ 55,230.00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING Describe any additional pricing (if any) of your company: |
| |

9 x 10 x 24 Double Box Culvert less dirt work

FORMAL BID #198-20; CLEAR SPAN CONCRETE BRIDGE AND BOX CULVERT CONTRACT TWELVE (12) MONTHS

| Estimated use for twelve months: 0 |
|---|
| Firm Fixed Price for 9 x 10 x 24 Double Culvert: \$ 61, 792.00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING |
| Describe any additional pricing (if any) of your company: |
| |
| ************************************* |
| 10 x 10 x 24 Triple Box Culvert less dirt work |
| Estimated use for twelve months: 0 |
| Firm Fixed Price for 10 x 10 x 24 Triple Culvert: \$ 77, 522,00 per installation |
| State your estimated time to complete each project after Notice to Proceed is received: |
| 3 weeks |
| ADDITIONAL PRICING |
| Describe any additional pricing (if any) of your company: |
| |
| |

NOTE:

- 1. The contractor shall remove old bridge or culvert to be replaced.
- 2. The contractor shall insure that all trash and debris are removed from the site at completion of construction.
- 3. Where the creeks cross the road at an angle, the culverts will be built at an angle to line up with the creek.

FORMAL BID #198-20; CLEAR SPAN CONCRETE BRIDGE AND BOX CULVERT CONTRACT TWELVE (12) MONTHS

| The state of the s | | |
|--|-------------------------|--|
| | | OVERNMENTAL ENTITIES TO PIGGYBACK OFF SAME TERMS AND CONDITIONS: |
| | YES | NO |
| COMMENTS or EXCEPTIONS | | |
| | | |
| Payment Terms: | | |
| The undersigned bidder has careful the Standard Terms and Conditions | - | itation to Bid and the Certification included therein, Specifications. |
| with Hunt County in accordance w | ith the requirements of | ure affixed below, he/she agrees to enter into a contract of the County as stated in the above-referenced contract forms and terms of agreement from bidder's company as |
| You must sign below in INK; fail typewritten or written in ink. | lure to sign and retu | urn WILL disqualify the offer. All prices must be |
| Yoder Bridge Company Name | Aut | Mys Goden uthorized Signature |
| 1418 19+h NW Address | Nar | ame (Printed or Typed) |
| Paris Tx 75460 City, State, Zip | <u>/</u> <u>I</u> | vice-president |
| 903-782-1945 Phone | | 2-29-2020 ate |
| NA Fax | | y <u>oderbsidge @ yahoo.c</u> om Mail |



Organization Name Israel Boycott Verification

| I, Arlyn Yoder representative of Yoder B. | ridge , the undersigned |
|---|--|
| undersigned notary, do hereby de | (hereafter referred to as company) being (18) years of age, after being duly sworn by the cose and verify under oath that the company namedotitle F, Title 10, Government Code Chapter 2270: |

- 1. Does not boycott Israel currently; and
- 2. Will not boycott Israel during the term of the contract.

Pursuant to Section 2270.001, Texas Government Code:

- "Boycott Israel" means refusing to deal with, terminating business activities with, or
 otherwise taking any action that is intended to penalize, inflict economic harm on, or
 limit commercial relations specifically with Israel, or with a person or entity doing
 business in Israel or in an Israeli-controlled territory, but does not include an action made
 for ordinary business purposes; and
- 2. "Company" means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit, but does not include a sole proprietorship.

Pursuant to Section 2270.001, Texas Government Code:

- (a) This section applies only to a contract that:
 - Is between a governmental entity and a company with 10 or more full-time employees;
 - Has a value of \$100,000.00 or more that is to be paid wholly or partly from public funds of the governmental entity.

Israel Boycott Verification

| 2-29-2020 DATE | SIGNATURE OF COMPANY REPRESENTATIVE |
|--|---|
| On this the Ath day of Feb. Hr yn yode R by me being duly sworn, did swe | , 20 <u>20</u> , personally appeared, the above-named person, who after ear and confirm that the above is true and correct. |
| NOTARY SEAL | Sulinda Daniel NOTARY SIGNATURE |
| NOTATY PUBLIC D= 1322*1566 | 2-29-2020 Date |

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

| This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session. | OFFICE USE ONLY | | | | | | | |
|---|------------------------------------|--|--|--|--|--|--|--|
| This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a). | | | | | | | | |
| By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code. | | | | | | | | |
| A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor. | | | | | | | | |
| Name of vendor who has a business relationship with local governmental entity. | • | | | | | | | |
| | | | | | | | | |
| Yoder Bridge | | | | | | | | |
| Check this box if you are filing an update to a previously filed questionnaire. (The law recompleted questionnaire with the appropriate filing authority not later than the 7th business you became aware that the originally filed questionnaire was incomplete or inaccurate.) | ss day after the date on which | | | | | | | |
| Name of local government officer about whom the information is being disclosed. | | | | | | | | |
| Hunt County Commissioners | | | | | | | | |
| Name of Officer | | | | | | | | |
| 4 Describe each employment or other business relationship with the local government off | cer, or a family member of the | | | | | | | |
| officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with | th the local government officer. | | | | | | | |
| Complete subparts A and B for each employment or business relationship described. Attac | n additional pages to this Form | | | | | | | |
| CIQ as necessary. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| A. Is the local government officer or a family member of the officer receiving or other than investment income, from the vendor? | likely to receive taxable income, | | | | | | | |
| Yes No | | | | | | | | |
| B. Is the vendor receiving or likely to receive taxable income, other than investmen | t income, from or at the direction | | | | | | | |
| of the local government officer or a family member of the officer AND the taxable local governmental entity? | income is not received from the | | | | | | | |
| Yes X No | | | | | | | | |
| Describe each employment or business relationship that the vendor named in Section 1 r | naintaina with a compania | | | | | | | |
| Describe each employment or business relationship that the vendor named in Section 1 r other business entity with respect to which the local government officer serves as an ownership interest of one percent or more. | | | | | | | | |
| none | | | | | | | | |
| 6 | | | | | | | | |
| Check this box if the vendor has given the local government officer or a family membe as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a)(a)(b) (c) (c) (d) (d) (d) (d) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e | | | | | | | | |
| 3 Signature of vergion doing business with the governmental entity | 29-2020 Date | | | | | | | |

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

| _ | | | | | 1 of 1 | |
|---|---|--|--------------------|-------------------------------|----------------------------------|--|
| | Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. | | | OFFICE USE | | |
| | Name of business entity filing form, and the city, state and count of business. Yoder Bridge | try of the business entity's place | Certifi 2020- | icate Number: -593932 | | |
| 2 | Paris, TX United States Name of governmental entity or state agency that is a party to the | e contract for which the form is | Date F 02/29/ | Filed: 9/2020 | | |
| | being filed. Hunt County Tx | The state of the state of | Date Acknowledged: | | | |
| 3 | Provide the identification number used by the governmental entitidescription of the services, goods, or other property to be provided 198-20 construction of bridges and box culverts | ity or state agency to track or identify ded under the contract. | the co | | | |
| 4 | Name of Interested Party | City, State, Country (place of busine | ess) | Nature of (check ap | plicable) | |
| | Toby Ynder | Paris Tx 115 A | | Controlling | Intermediary | |
| | Arlun Yoder | Paris TX USA Paris TX USA | | | | |
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| | | | | | | |
| | Check only if there is NO Interested Party. | | | | | |
| 6 | My name is Aryn Yoder | , and my date of | birth is | 1-6-6 | 6 | |
| | My address is 1418 19th NW (street) | Par's 7 (city) | state) | 75 460 (zip code) | , USA . (country) | |
| | I declare under penalty of perjury that the foregoing is true and correct | ct. | | | | |
| | Executed in Lamar Count | ty, State of TX , on the | 29° | day of <u>Feb.</u> (month) | , 20 <i><u>20</u>.</i> (year) | |
| | | Signature of authorized agent of con (Declarant) | ntracting |) business entity | | |

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

| _ | | | | | | | | | |
|------------------|--|---|------------|----------------------------|--------------|--|--|--|--|
| | Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. | | CEF | OFFICE USE | - 4 | | | | |
| 1 | Name of business entity filing form, and the city, state and country of business. | ry of the business entity's place | H | ficate Number: 0-593932 | | | | | |
| | Yoder Bridge | | 12020 | | 1 | | | | |
| | Paris, TX United States | Date | Filed: | | | | | | |
| 2 | Name of governmental entity or state agency that is a party to the | 02/29 | 9/2020 | | | | | | |
| ~ | being filed. | e contract for which the form is | | | | | | | |
| | Hunt County Tx | | Date | Acknowledged: | | | | | |
| | | | 03/10 | 0/2020 | | | | | |
| 3 | Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided. | ty or state agency to track or identified under the contract. | y the c | ontract, and prov | ride a | | | | |
| | 198-20 | | | | | | | | |
| | construction of bridges and box culverts | | | | | | | | |
| _ | | | | | | | | | |
| 4 | | | | Nature of | | | | | |
| _ | Name of Interested Party | City, State, Country (place of busin | ness) | (check ap | | | | | |
| _ | | | | Controlling | Intermediary | | | | |
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| 5 | Check only if there is NO Interested Party. | <u>L </u> | | <u> </u> | | | | | |
| 6 | UNSWORN DECLARATION | | | | | | | | |
| | My name is | , and my date o | of birth i | s | | | | | |
| | My address is | | | | · | | | | |
| | (street) | (city) | (state) | (zip code) | (country) | | | | |
| | I declare under penalty of perjury that the foregoing is true and correct | ct. | | | | | | | |
| and a | Executed inCount | ty, State of, on the | 9 | day of | . 20 | | | | |
| | Executed inCoulit | ty, State of, Of the | | (month) | | | | | |
| Name of the last | | | | (monut) | () 54.7 | | | | |
| | | | | | | | | | |
| | Signature of authorized agent of contracting business entity (Declarant) | | | | | | | | |
| ti . | | · | | | | | | | |



PRODUCER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/02/2020

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

CONTACT Marty Brunson

| Pierson & Fendley | | | | PHONE (903) 784-0836 FAX (A/C, No. Ext); (903) 785-8434 | | | | | | | |
|---------------------|---|--------------|------|---|---|---------------------------|-------------------|----------------------------------|--|-------------|--------|
| 1705 Lamar Avenue | | | | | E-MAIL ADDRESS: marty@pierson-fendley.com | | | | | | |
| P.O. Box 459 | | | | | Insurer(s) Affording Coverage | | | | NAIC# | | |
| Paris TX 75461-0459 | | | | | INSURER A: CSU Producer Resources, Inc. | | | | | 13037 | |
| INSU | ED | | | | INSURE | Cincinno | i Insurance Co | mpanies | | | 10677 |
| | Yoder Construction | | | F | INSURER C: Combined Agents of America | | | | | | |
| | 1418 N.W. 19th | | | F | INSURER D: | | | | | | |
| | | | | F | INSURER E: | | | | | | |
| | Paris | | | TV 75460 | INSURE | | | | | | |
| COV | ERAGES CERT | TIFIC | ATE | NUMBER: CL203207638 | INSURE | KF: | | REVISION NUM | 3ED. | | |
| _ | IS IS TO CERTIFY THAT THE POLICIES OF I | - | _ | | ISSUED | TO THE INSUE | | | tone on the life of the last o | D | - |
| | DICATED. NOTWITHSTANDING ANY REQUIR | | | | | | | | | | |
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| | CLUSIONS AND CONDITIONS OF SUCH PO | ADDLI | SUBR | | KEDUC | POLICY FEE | POLICY EXP | | | | |
| INSR LTR | TYPE OF INSURANCE | INSD | WVD | POLICY NUMBER | | (MMIDDIYYYY) | (MM/DD/YYYY) | | LIMITS | 1,000 | 000 |
| | COMMERCIAL GENERAL LIABILITY | | | | 1 | | | EACH OCCURRENCE DAMAGE TO RENTE | D | 400.0 | |
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| | | | | | | | | MED EXP (Any one p | erson) \$ | | |
| Α | | | | CSU0035992 | ĺ | 04/09/2019 | 04/09/2020 | PERSONAL & ADV II | JURY \$ | | |
| | GEN'LAGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGA | ATE S | 1,000 | ,000 |
| | POLICY PRO- LOC | | | | | | | PRODUCTS - COMP | OP AGG | 1,000 | ,000 |
| | OTHER: | | | | | | | | | 3 | |
| | AUTOMOBILE LIABILITY | | | | | | | COMBINED SINGLE (Ea accident) | LIMIT | 1,000 | ,000 |
| | ANYAUTO | | | | | İ | | BODILY INJURY (Per | person) \$ | | |
| В | OWNED SCHEDULED | | | EBA 0269413 | | 08/30/2019 | 08/30/2020 | BODILY INJURY (Per | accident) \$ | 5 | |
| 1 | AUTOS ONLY AUTOS NON-OWNED NON-OWNED | | | | | | | PROPERTY DAMAG (Per accident) | E s | | |
| | AUTOS ONLY AUTOS ONLY | | | | | | | Underinsured mo | otorist | 1,000 | ,000 |
| \vdash | UMBRELLA LIAB OCCUP | | _ | | | | | EACH OCCURRENCE | E S | | |
| l | EVOCEDE LIAD | | | | | | | | ,= | | |
| 1 | CDAING-MADE | | | | | | | AGGREGATE | | | |
| ├ | DED RETENTION \$ WORKERS COMPENSATION | | - | | | | | I PER | ETH- | <u> </u> | |
| | AND EMPLOYERS' LIABILITY Y/N | ĺ | | | | 1 | | STATUTE | | | |
| l | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | N/A | 1 | | | | | E.L. EACH ACCIDEN | | \$ | |
| l | (Mandatory in NH) If yes, describe under | l | | Ì | | İ | 1 | E.L. DISEASE - EA E | MPLOYEE | \$ | |
| L_ | DESCRIPTION OF OPERATIONS below | | | | | ļ | | E.L. DISEASE - POL | ICY LIMIT | \$ 450.6 | |
| | Contractors Equipment | | 1 | | | | | | | 150,0 | 000 |
| C | - | l | | IMP 4097304-02 | | 06/22/2019 | 06/22/2020 | | | | |
| | | | L_ | | | | | | | | |
| DES | CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI | ES (AC | CORD | 101, Additional Remarks Schedule, | may be a | ttached if more s | pace is required) | | | | |
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| 1 | | | | | | | | F, NOTICE WILL B | E DELIVERE | ED IN | |
| 1 | FOR VERIFICATION ONLY | | | | ACC | CKDAMCE WI | IN INC POLIC | Y PROVISIONS. | | | |
| | | | | | AUTUO | DIZEN DEDDECE | NTATIVE | | | | |
| | | | | | | AUTHORIZED REPRESENTATIVE | | | | | |
| | | | | | | | Pie | reon & Jend | ley | | |
| | | | /h | | L | | | | | THE AVER | |