



R.D. JOHNSON
EXCAVATING COMPANY

PROPOSAL

Carolyn Woodhead
City of Lawrence

Date: *September 21, 2018*

Project: *RFP #R1816: Lime Lagoon Cleaning
Lime Removal*

Location: *11th Street WWTP*

Job No.: *170308*

Terms: *Monthly Progress*

Mrs. Woodhead:

We propose to furnish *labor, equipment and materials* for use on project in caption, per the following scope of work, dated September 25, 2018 as follows:

PRICE

1 Removal of lime per cubic yard \$13.25

SCOPE CLARIFICATIONS:

- 1 Our schedule is flexible and can be suited to fit the City's schedule.
- 2 The City of Lawrence has our qualifications and we have performed this work over the past 7 years.
- 3 Final volumes for payment will be quantified by using Drone or handheld GPS technology. The existing pond will be surveyed prior to and upon completion of the excavation for total volumes. A conversion factor of 1.50 will be applied to the measured quantities for tons hauled off.
- 4 Project manager for this job will be Jason Dahl.
- 5 We will perform the dewatering as necessary.
- 6 Slurry will be hauled off site to an approved location.
- 7 Equipment to be used will be track hoes, track dozers, and dump trucks.
- 8 We will update costs as necessary to ensure keeping costs below the \$135,000.00 allowance.

This proposal may be withdrawn if not accepted within 30 days.

Authorized

Signature: *[Handwritten Signature]*

Date of Acceptance: *September 27, 2018*

[Handwritten Signature]
By: _____

Brad Ikenberry, Estimator
R.D. Johnson Excavating Company

Attachment B. Proposal Pricing Form

Date: 8/24/18

Proposal of: RFP # R1816 Lime lagoon cleaning

Address: Clinton WTP lagoon 2121 Wakarusa DR.
Kansas river WWTP lagoon 1400 East 8th Street

This proposal is submitted to:

Carolyn Woodhead
City of Lawrence

The undersigned contractor proposes and agrees, if this proposal is accepted, to enter into a contract with the Generator to complete all work as specified or indicated in the Proposal for the specified price, within the time frames outlined and in accordance with the Request for Proposal.

In submitting this Proposal, Contractor represents, as more fully set forth in the information for Contractors, that:

- Contractor has examined copies of the RFP and attachments.
- Contractor has examined the site and locality where the work is to be performed, the legal requirements (federal, state, and local laws, ordinances, rules, regulations, and the conditions affecting cost, progress or performance of the work and has made such independent investigations as contractor deems necessary.
- This Proposal is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; contractor has not directly or indirectly induced or solicited any other contractor to submit a false or sham proposal; contractor has not solicited or induced any person, firm or a corporation to refrain from proposing; and contractor has not sought by collusion to obtain for himself any advantage over any other contractor or over the generator.


The price shall be quoted on a per cubic yard basis. Contractor will complete the work as described in the RFP for the following price:

Price
\$13.25 per cubic yard

Contractor certifies that he has read, fully understands and will comply with applicable provisions of the United States Environmental Protection Agency (U.S.EPA), applicable state and local agencies, and the City of Lawrence Utilities Management System.

The undersigned is:

1. A Corporation, incorporated in the State of Kansas.
2. A partnership, consisting of the following partners, whose full names are:

3. An individual whose full name is: RD Johnson Excavating
Contractor (Firm Name)

Signature
Brad Ikenberry Estimator
Name and Title

Date: 8/24/18

Address: 1705 N 13th Road
Lawrence KS 66046

Phone Number: 842 9100

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. R.D. Johnson Excavating Co, LLC</p> <p>2 Business name/disregarded entity name, if different from above</p> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____ </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: x-small;">(Applies to accounts maintained outside the U.S.)</p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. 1705 N 1399 Rd</p> <p>6 City, state, and ZIP code Lawrence, KS 66046</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
4	8	-	0	8	1	6	6	4	1

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶ <u>1/10/18</u>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



Lindsey Plattner

Marsh USA Inc.
15 West South Temple, Suite 700
Salt Lake City, UT 84101
801 533-3625 Fax 801 533 3610
Lindsey.plattner@marsh.com
www.marsh.com

September 21, 2018

City of Lawrence
Department of Municipal Services & Operations
PO Box 708
Lawrence, KS 66044

Re: R.D. JOHNSON EXCAVATING CO. PREQUALIFICATION – RFP# R1816: LIME LAGOON CLEANING

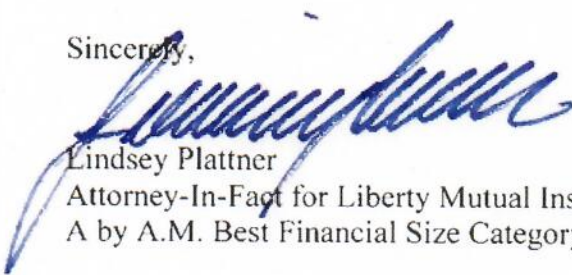
TO WHOM IT MAY CONCERN:

LIBERTY MUTUAL INSURANCE COMPANY, a corporation under the laws of the State of Massachusetts with an office and place of business located at 175 Berkeley St., Boston, MA 02117, represents R.D. JOHNSON EXCAVATING CO. for its surety bonding needs. As of the date of this writing, R.D. JOHNSON EXCAVATING CO. remains in good standing with LIBERTY MUTUAL INSURANCE COMPANY, which is affording continued surety credit for bonded obligations with single project sizes up to \$15,000,000 within an aggregate bonded surety program of \$350,000,000.

This letter is not to be construed as an agreement to provide surety bonds for any particular project, but is offered as an indication of LIBERTY MUTUAL INSURANCE COMPANY'S past experience and confidence in the firm. We reserve the right to review terms and conditions of any proposals, contract documents, bond forms, financial arrangements and other underwriting considerations at the time the contract is awarded.

If you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,


Lindsey Plattner
Attorney-In-Fact for Liberty Mutual Insurance Company
A by A.M. Best Financial Size Category A pXV



THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Certificate No. 8173118

Liberty Mutual Insurance Company
The Ohio Casualty Insurance Company West American Insurance Company

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS. That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Lisa Hall; Linda Lee Nipper; Tina Davis; Lindsey Plattner

all of the city of Salt Lake City, state of UT, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 7th day of August, 2018.



The Ohio Casualty Insurance Company
Liberty Mutual Insurance Company
West American Insurance Company

By: [Signature]
David M. Carey, Assistant Secretary

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 7th day of August, 2018, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written



COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public
Upper Merion Twp., Montgomery County
My Commission Expires March 28, 2021
Member Pennsylvania Association of Notaries

By: [Signature]
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV – OFFICERS – Section 12 Power of Attorney Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII – Execution of Contracts – SECTION 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 21ST day of SEPTEMBER, 2018



By: [Signature]
Renee C. Llewellyn, Assistant Secretary

currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.