ORIGINAL

THIRD AMENDMENT TO AGREEMENT

RECITALS:

- A. On September 6, 2017, an agreement was entered into by and between City and Provider (hereinafter "Agreement"), in an amount not to exceed \$20,680.
- B. On July 1, 2018, a First Amendment to Agreement was entered into by and between City and Provider (hereinafter "First Amendment to Agreement"), in an amount not to exceed \$20,248.89.
- C. On July 1, 2019, a Second Amendment to Agreement was entered into by and between City and Provider (hereinafter "Second Amendment to Agreement"), in an amount not to exceed \$107,718.02.
- D. City and Provider desire to modify the Agreement on the terms and conditions set forth herein.

NOW, THEREFORE, it is mutually agreed by and between the undersigned parties as follows:

- 1. Paragraph 1, TERM, of the Agreement is modified to read as follows: The term of this Agreement shall commence on the 6th day of September, 2017, and shall terminate on the 30th day of June, 2022, unless terminated earlier as set forth herein.
- 2. Paragraph 3b, COMPENSATION TO PROVIDER, of the Agreement is modified to read as follows: Total compensation for work to be done under this Agreement, shall not exceed \$148,218.02 per the table below.

Contract	Current Yearly Total	Amount Increased	Total ·
FY17-18	\$ 20,680.00		\$ 20,680.00
FY18-19	\$ 20,248.89	·	\$ 20,248.89
FY19-20	\$ 21,829.47	\$13,500.00	\$ 35,329.47
FY20-21	\$ 22,260.17	\$13,500.00	\$ 35,760.17
FY21-22	\$ 22,699.49	\$13,500.00	\$ 36,199.49
Total Five Year Amount	\$107,718.02	\$40,500.00	\$148,218.02

3. Except as expressly modified herein, all other terms and covenants set forth in the Agreement shall remain the same and shall be in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this modification of Agreement to be executed on the day and year first above written.

Signatures on following page

DREAM RIDE ELEVATOR A California Corporation

Ivan Werblow Vice-President

Kurt R. Nelson Secretary/Treasurer CITY OF ALAMEDA

A Municipal Corporation

Eric J. Levitt/ City Manager

RECOMMENDED FOR APPROVAL

Erin Smith

Public Works Director (Interim)

APPROVED AS TO FORM:

City Attorney

Lisa Maxwell

Assistant City Attorney

Unit prices are to include and cover the furnishing of all labor, materials, equipment, incidentals, and any other overhead necessary to perform the work described in the Scope of Services in a manner specified in the Project Specifications. Proposal prices are also to include any required reporting to the City of work performed.

Item		Items with Unit Prices	Unit	Total
No.	Quantity	Written in Words	Price	Price
1.	12 Month	PM and Special Testing Program		
		City Hall Elevator	\$ <u>166.15</u>	\$ <u>1,993.80</u>
2.	12 Month	PM and Special Testing Program		
		Alameda Police Department Eleva	tor \$ <u>166.15</u>	\$ <u>1,993.80</u>
3.	12 Month	PM and Special Testing Program		
		Main Library Elevator	\$ <u>166.15</u>	\$ <u>1,993.80</u>
4.	12 Month	PM and Special Testing Program		
		Veterans Building Elevator	\$ <u>166.15</u>	\$1,993.80
5.	12 Month	PM and Special Testing Program		
		Civic Center Parking Elevator	\$ <u>166.15</u>	\$ <u>1,993.80</u>
6.	12 Month	PM and Special Testing Program		
		City Hall West Elevator	\$ <u>166.15</u>	\$ <u>1,993.80</u>
7.	12 Month	PM and Special Testing Program		
		EOC Elevator	\$ <u>166.15</u>	\$ <u>1,993.80</u>
8.	14 Hours	Emergency Service Call-Out		
		Business Hours*	\$ <u>217.44</u>	\$3,044.16
*Mon	-Fri, 7AM-5P	M, excluding holidays		
9.	10 Hours	Emergency Service Call-Out		
		Non Business Hours/Holidays	\$260.10	\$2,601.00
10.		Standard Material Mark-up		20%
11.		Preliminary Orders from State		\$13,500.00
	·		·	

TOTAL BID \$33,101.76



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/10/2021

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).

una cerunicate does not confer	rights to the certificate holder in hea of	such endorsement(s).				
PRODUCER	925-283-5750	CONTACT Julie Rector				
ISU Massie & Beck Ins. Serv. License #0B29340 315 Lennon Lane Walnut Creek, CA 94598 Dean Sigmundson INSURED Dream Ride Engineering, Inc. Dream Ride Engineering Elevators Dream Ride Elevators 4780 E. Second Street		PHONE (A/C, No, Ext): 925-283-5750 FAX (A/C, No.	925-283-5751			
		E-MAI ADDRESS: Julie@isumassie.com				
		INSURER(S) AFFORDING COVERAGE	NAIC #			
		INSURER A : Great American Ins. Comp.	16691			
INSURED		INSURER B : Ohio Security Ins/Liberty Mut.	24082			
Dream Ride Engineering, Inc. Dream Ride Engineering		INSURER C: National Union Fire Insurance	19445			
Elevators		INSURER D : State Comp. Ins. Fund	35076			
4780 E. Second Street		INSURER E :				
Benicia, CA 94510		INSURER F:				
00)/ED40E0	OFFICIOATE MUMBER.	DEMONAL NUMBER.				

Be	nici	ia, CA 94510			INS	URER F :			-	
C	OVE	ERAGES CER	TIFK	CATE	NUMBER:			REVISION NUMBER:		
	INDI CER	S IS TO CERTIFY THAT THE POLICIES ICATED. NOTWITHSTANDING ANY RE RTIFICATE MAY BE ISSUED OR MAY I CLUSIONS AND CONDITIONS OF SUCH I	QUIF PERT POLIC	REME AIN, DIES.	NT, TERM OR CONDITION OF A THE INSURANCE AFFORDED I LIMITS SHOWN MAY HAVE BEE!	ANY CONTRACT BY THE POLICIE	OR OTHER I	DOCUMENT WITH RESPECT	TO	WHICH THIS
INS	R	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
Δ		X COMMERCIAL GENERAL LIABILITY	,				,	EACH OCCURRENCE \$		1,000,000
		CLAIMS-MADE X OCCUR	x	x	GLP132480404	07/01/2021	07/01/2022	DAMAGE TO RENTED PREMISES (Ea occurrence) \$		300,000
			``	``		-		MED EXP (Any one person) \$	i	10,000
								PERSONAL & ADV INJURY \$	i	1,000,000
	G	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$		4,000,000
		POLICY X PRO-						PRODUCTS - COMP/OP AGG \$,	4,000,000
		OTHER:						Max Aggr.	3	10,000,000
E	3 A	AUTOMOBILE LIABILITY		Ì				COMBINED SINGLE LIMIT (Ea accident) \$	5	1,000,000
)	X ANY AUTO	х	Х	BAS56658381	08/06/2020	08/06/2021	BOD(LY INJURY (Per person) \$		
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	i	
)	X HIREDS ONLY X NOTHS WHEE						PROPERTY DAMAGE (Per accident) \$	3	
		χ \$250 Comp χ \$500 Coll.		ļ				\$	3	
۹ ا	፡ _	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE \$	3	5,000,000
	2	X EXCESS LIAB CLAIMS-MADE			BE034214255	07/01/2021	07/01/2022	AGGREGATE \$	\$	5,000,000
L.	_	DED RETENTION \$						ST. ST.	}	
[A	VORKERS COMPENSATION IND EMPLOYERS' LIABILITY Y / N				07/04/0004	02/04/0000	X PER STATUTE ER OTH-		
ļ	Al	MY PROPRIETOR/PARTNER/EXECUTIVE DEFICER/MEMBER EXCLUDED?	N/A		9104272-21	07/01/2021	07/01/2022	E.L. EACH ACCIDENT \$	3	1,000,000
		Mandatory in NH) yes, describe under						E.L. DISEASE - EA EMPLOYEE \$	<u> </u>	1,000,000
	Ü	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$	<u> </u>	1,000,000
	ļ				i					
_	!_		l <u>.</u>				ļ	1		
		RIPTION OF OPERATIONS / LOCATIONS / VEHIC				-	re space is requi	red)		
K 94	⊑ J0 I501	ob: Full Service Elevator Mainte 1. City. its City Council, boards a	nan and	ce a com	na Repair City-Wide, Alam missions. officers. and	eda, CA				
en	nplo	1. City, its City Council, boards a oyees shall be named as an add	litio	nal i	nsured under all insuranc	e				
Icc	iver	ráges, except worker's compens	satio	ın. A	inv otner insurance held b	van				

additional insured shall not be required to contribute anything toward any

CERI	<u>IFICAI</u>	<u> DER</u>

CANCELLATION

CITYALA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

City of Alameda

Attn: Public Works Department

Attn: Gail Carlson

950 W. Mall Square, Room 110

Alameda, CA 94501

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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NOTEPAD:

HOLDER CODE

CITYALA

INSURED'S NAME Dream Ride Engineering, Inc.

DREAM-1 OP ID: JR

PAGE 2

Date 06/10/2021

loss or expense covered by the insurance provided by this policy. Waiver of Subrogation is included with respects to Auto Liability and General Liability. *10 days cancellation notice applies for non-payment of premium. (E,P,W,X)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
ANY PERSON OR ORGANIZATION THAT YOU ARE REQUIRED AND AGREED TO NAME	ANY LOCATION WITHIN THE "COVERAGE TERRITORY".
AS AN ADDITIONAL INSURED ON YOUR POLICY UNDER:	
1. WRITTEN CONTRACT OR AGREEMENT THAT IS IN EFFECT DURING THE TERM	
OF THIS POLICY AND SUCH CONTRACT IS ENTERED INTO PRIOR TO THE	
"OCCURRENCE" OF ANY "BODILY INJURY", "PROPERTY DAMAGE", "PERSONAL	
INJURY" OR "ADVETISING INJURY",	
OR	
2. AN ORAL CONTRACT OR ORAL AGREEMENT WITH A PERSON OR ORGANIZATION	
WHEN A CERTIFICATE OF INSURANCE SHOWING THAT PERSON OR ORGANIZATION	
AS AN ADDITIONAL INSURED HAS BEEN ISSUED; AND SUCH ORAL CONTRACT OR	
ORAL AGREEMENT IS IN EFFECT DURING THE TERM OF THIS POLICY AND IS	
ENTERED INTO PRIOR TO THE "OCCURRENCE" OF ANY "BODILY INJURY"	
"PROPERTY DAMAGE", "PERSONAL INJURY", OR "ADVERTISING INJURY".	
Information required to complete this Schedule, if not show	n above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or

2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- 1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- C. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable limits of insurance:

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations:
ANY PERSON OR ORGANIZATION THAT YOU ARE REQUIRED AND AGREED TO NAME	ANY LOCATION WITHIN THE "COVERAGE TERRITORY", AND FOR ALL COMPLETED
AS AN ADDITIONAL INSURED ON YOUR POLICY UNDER:	OPERATIONS.
1. A WRITTEN CONTRACT OR AGREEMENT THAT IS IN EFFECT DURING THE TERM	
OF THIS POLICY AND SUCH CONTRACT IS ENTERED INTO PRIOR TO THE	
"OCCURRENCE" OF ANY "BODILY INJURY", "PROPERTY DAMAGE", "PERSONAL	
INJURY", OR "ADVERTISING INJURY",	
OR	
2. AN ORAL CONTRACT OR ORAL AGREEMENT WITH A PERSON OR ORGANIZATION	
WHEN A CERTIFICATE OF INSURANCE SHOWING THAT PERSON OR ORGANIZATION	
AS AN ADDITIONAL INSURED HAS BEEN ISSUED; AND SUCH ORAL CONTRACT OR	
ORAL AGREEMENT IS IN EFFECT DURING THE TERM OF THIS POLICY AND IS	
ENTERED INTO PRIOR TO THE "OCCURRENCE" OF ANY "BODILY INJURY",	
"PROPERTY DAMAGE", "PERSONAL INJURY", OR "ADVERTISING INJURY".	
Information required to complete this Schedule, if not show	above, will be shown in the Declarations.

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

if coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

Policy Number: GLP132480404

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ELEVATOR CONTRACTOR PLUS ENDORSEMENT

Blanket Waiver of Subrogation

This endorsement modifies insurance provided under the following:

COMMON POLICY CONDITIONS
COMMERCIAL GENERAL LIABILITY COVERAGE PART

Section Extracted from Endorsement CG 90 53 (Ed. 04/16)

T. In SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, the following is added at the end of Condition 8. Transfer of Rights of Recovery Against Others to Us:

We waive any right of recovery we may have against a person or organization because of payments we make for injury or damage arising out of:

- a. your ongoing operations; or
- b. "your work" pursuant to a written contract between you and that person or organization and included in the "products-completed operations hazard";

but only if:

- c. you and that person or organization have agreed, in a written contract or agreement, that you waive such rights against that person or organization; and
- d. the injury or damage occurs only after you and that person or organization have signed the written contract or agreement described in **c.**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/29/2020

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

PRODUCER	925-283-5750	CONTACT Julie Rector	
ISU Massie & Beck Ins. Serv. License #0B29340		PHONE (A/C, No, Ext): 925-283-5750 FAX (A/C, No)	925-283-5751
315 Lennon Lane		E-MAIL ADDRESS: Julie@isumassie.com	
Walnut Creek, CA 94598 Dean Sigmundson		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: Great American Ins. Comp.	16691
INSURED		INSURER B. Ohio Security Ins/Liberty Mut.	24082
Dream Ride Engineering, Inc. Dream Ride Engineering		INSURER C: National Union Fire Insurance	19445
INSURED Dream Ride Engineering, Inc. Dream Ride Engineering Elevators Dream Ride Elevators 4780 E. Second Street Benicia, CA 94510		INSURER D. State Comp. Ins. Fund	35076
4780 E. Second Street Benicia, CA 94510		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

	DICATED. NOTWITHSTANDING ANY RE								
	ERTIFICATE MAY BE ISSUED OR MAY I KCLUSIONS AND CONDITIONS OF SUCH I						HEREIN IS SUBJECT TO	O ALL TI	HE TERMS,
INSR			SUBF		POLICY FEE	POLICY EXP	LIMIT	s	
A	X COMMERCIAL GENERAL LIABILITY	Man	4440		(MM(DD(TTT)	I CANADOLI I I I	EACH OCCURRENCE	s	1,000,000
	CLAIMS-MADE X OCCUR	x	x	GLP132480403	07/01/2020	07/01/2021	DAMAGE TO RENTED PREMISES (Ea occurrence)	5	300,000
		1	,				MED EXP (Any one person)	s	10,000
							PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	4,000,000
	POLICY X PRO-						PRODUCTS - COMPIOP AGG	\$	4,000,000
	OTHER:						Max Aggr.	\$	10,000,000
В	AUTOMOBILE LIABILITY						COMBINEO SINGLE LIMIT (Ea accident)	\$	1,000,000
	X ANY AUTO	X	X	BAS56658381	08/06/2020	08/06/2021	BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X HIREDS ONLY X NON-SWINED			3			PROPERTY DAMAGE (Per accident)	\$	
_	X \$250 Comp X \$500 Coll.							\$	
C	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	4,000,000
	X EXCESS LIAB CLAIMS-MADE			BE045414942	07/01/2020	07/01/2021	AGGREGATE	\$	4,000,000
_	DED RETENTION \$		-				1050	\$	
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1		0404070.00			X PER STATUTE ER		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	1	9104272-20	07/01/2020	07/01/2021	E.L. EACH ACCIDENT	\$	1,000,000
1	If yes, describe under					,	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
-	DÉSCRIPTION OF OPERATIONS below	-	-		ļ		E.L. DISEASE - POLICY LIMIT	\$	1,000,000
			1	1			2 1 1		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE Job: Full Service Elevator Maintenance and Repair City-Wide, Alameda, CA
94501. City, its City Council, boards and commissions, officers, and
employees shall be named as an additional insured under all insurance
coverages, except worker's compensation. Any other insurance held by an

additional insured shall not be required to contribute anything toward any

OK 8-25-20 LC

CERTIFICATE HOLDER		CANCELLATION
	CITYALA	
City of Alameda		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Attn: Public Works Department Attn: Gail Carlson 950 W. Mall Square, Room 110 Alameda, CA 94501		AUTHORIZED REPRESENTATIVE ALAM STORIES

CG 20 10 (Ed. 04 13)

Policy Number: GLP132480403

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Schedule

Name of Additional Insured Person(s) or Organization(s)	Location(s) of Covered Operations
Any person or organization that you are required and agreed to name as an additional insured on your policy under:	Any location within the "coverage territory"
1. A written contract or agreement that is in effect during the term of this policy and such contract is entered into prior to the "occurrence" of any "bodily injury", "property damage", "personal injury", or "advertising injury"; or, 2. An oral contract or oral agreement with a person or organization when a certificate of insurance showing that person or organization as an Additional insured has been issued; and such oral contract or oral agreement is in effect during the term of this policy and is entered into prior to the "occurrence" of any "bodily injury", "property damage", "personal injury", or "advertising injury".	

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. SECTION II WHO IS AN INSURED is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. your acts or omissions; or
 - 2. the acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the Additional Insured(s) at the location(s) designated above.

However:

- 1. the insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. if coverage provided to the Additional Insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these Additional Insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. all work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the Additional Insured(s) at the location of the covered operations has been completed; or

- 2. that portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- C. With respect to the insurance afforded to these Additional Insureds, the following is added to SECTION III LIMITS OF INSURANCE:

If coverage provided to the Additional Insured is required by a contract or agreement, the most we will pay on behalf of the Additional Insured is the amount of insurance:

- 1. required by the contract or agreement; or
- 2. available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY,

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

Schedule

Name of Additional Insured Person(s) or Organization(s)

Any person or organization that you are required and agreed to name as as an additional insured on your policy under:

Location and Description of Completed Operations

Any location within the "coverage territory", and for all completed operations

- 1. A written contract or agreement that is in effect during the term of this policy and such contract is entered into prior to the "occurrence" of any "bodily injury", "property damage", "personal injury", or "advertising injury";
- Or,

 2. An oral contract or an oral agreement with a person or organization where a certificate of insurance showing that person or organization as an Additional Insured has been issued; and such oral contract or oral agreement is in effect during the term of this policy and such contract is entered into prior to the "occurrence" of any "bodily injury", "property damage", "personal injury", or "advertising injury";

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. SECTION II - WHO IS AN INSURED is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that Additional Insured and included in the "products-completed operations hazard."

However:

- 1. the insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. if coverage provided to the Additional Insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these Additional Insureds, the following is added to SECTION III LIMITS OF INSURANCE:

If coverage provided to the Additional Insured is required by a contract or agreement, the most we will pay on behalf of the Additional Insured is the amount of insurance:

1. required by the contract or agreement; or

This endorsement shall not in	crease the	applicable	Limits of	fInsurance	shown	in the	Declaration	s. .
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2. available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

Policy Number: GLP132480403

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

ELEVATOR CONTRACTOR PLUS ENDORSEMENT

Primary and Non-Contributory Additional Insured Extension

This endorsement modifies insurance provided under the following:

COMMON POLICY CONDITIONS
COMMERCIAL GENERAL LIABILITY COVERAGE PART

Section Extracted from Endorsement CG 90 53 (Ed. 04/16)

K. Primary and Non-Contributory Additional Insured Extension

This provision applies to any person or organization who qualifies as an Additional Insured under any form or endorsement under this Policy.

Condition 4. Other Insurance of SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS is amended as follows:

a. The following is added to Paragraph a. Primary Insurance:

This insurance is primary to and will not seek contribution from any other insurance available to an Additional Insured under your policy provided that:

- (1) the Additional Insured is a Named Insured under such other insurance; and
- (2) you have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the Additional Insured.

Policy Number: GLP132480403

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

ELEVATOR CONTRACTOR PLUS ENDORSEMENT

Blanket Waiver of Subrogation

This endorsement modifies insurance provided under the following:

COMMON POLICY CONDITIONS
COMMERCIAL GENERAL LIABILITY COVERAGE PART

Section Extracted from Endorsement CG 90 53 (Ed. 04/16)

T. In SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS, the following is added at the end of Condition 8. Transfer of Rights of Recovery Against Others to Us:

We waive any right of recovery we may have against a person or organization because of payments we make for injury or damage arising out of:

- a. your ongoing operations; or
- b. "your work" pursuant to a written contract between you and that person or organization and included in the "products-completed operations hazard";

but only if:

- c. you and that person or organization have agreed, in a written contract or agreement, that you waive such rights against that person or organization; and
- d. the injury or damage occurs only after you and that person or organization have signed the written contract or agreement described in c.

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

CALIFORNIA BUSINESS AUTO COVERAGE ENHANCEMENT ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage afforded by this endorsement, the provisions of the policy apply unless modified by the endorsement.

If the policy to which this endorsement is attached also contains a Business Auto Coverage Enhancement Endorsement with a specific state named in the title, this endorsement does not apply to vehicles garaged in that specified state.

COVERAGE INDEX

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TWO OR MORE DEDUCTIBLES		18
UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS		19
WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US		21

SECTION II - LIABILITY COVERAGE is amended as follows:

1. NEWLY FORMED OR ACQUIRED SUBSIDIARIES

SECTION II - LIABILITY COVERAGE, Paragraph A.1. Who is An Insured is amended to include the following as an "insured":

- d. Any legally incorporated subsidiary of which you own more than 50 percent interest during the policy period. Coverage is afforded only for 90 days from the date of acquisition or formation. However, "insured" does not include any organization that:
 - (1) Is a partnership or joint venture; or
 - (2) Is an "insured" under any other automobile policy except a policy written specifically to apply in excess of this policy; or
 - (3) Has exhausted its Limit of Insurance or had its policy terminated under any other automobile policy.

Coverage under this provision d, does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization.

2. EMPLOYEES AS INSUREDS

SECTION II - LIABILITY COVERAGE, Paragraph A.1. Who Is An Insured is amended to include the following as an "insured":

- e. Any "employee" of yours while using a covered "auto" you do not own, hire or borrow but only for acts within the scope of their employment by you. Insurance provided by this endorsement is excess over any other insurance available to any "employee".
- f. Any "employee" of yours while operating an "auto" hired or borrowed under a written contract or agreement in that "employee's" name, with your permission, while performing duties related to the conduct of your business and within the scope of their employment. Insurance provided by this endorsement is excess over any other insurance available to the "employee".

3. ADDITIONAL INSURED BY CONTRACT, AGREEMENT OR PERMIT

SECTION II - LIABILITY COVERAGE, Paragraph A.1. Who Is An Insured is amended to include the following as an "insured":

g. Any person or organization with respect to the operation, maintenance or use of a covered "auto", provided that you and such person or organization have agreed in a written contract, written agreement, or permit issued to you by governmental or public authority, to add such person, or organization, or governmental or public authority to this policy as an "insured".

However, such person or organization is an "insured":

- (1) Only with respect to the operation, maintenance or use of a covered "auto";
- (2) Only for "bodily injury" or "property damage" caused by an "accident" which takes place after you executed the written contract or written agreement, or the permit has been issued to you; and
- (3) Only for the duration of that contract, agreement or permit.

The "insured" is required to submit a claim to any other insurer to which coverage could apply for defense and indemnity. Unless the "insured" has agreed in writing to primary noncontributory wording per enhancement number 24, this policy is excess over any other collectible insurance.

4. SUPPLEMENTARY PAYMENTS

SECTION II - LIABILITY COVERAGE, Coverage Extensions, 2.a. Supplementary Payments, Paragraphs (2) and (4) are replaced by the following:

- (2) Up to \$3,000 for cost of bail bonds (including bonds for related traffic violations) required because of an "accident" we cover. We do not have to furnish these bonds.
- (4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to \$500 a day because of time off from work.

5. AMENDED FELLOW EMPLOYEE EXCLUSION

In those jurisdictions where, by law, fellow "employees" are not entitled to the protection afforded to the employer by the workers compensation exclusivity rule, or similar protection, the following provision is added:

SECTION II - LIABILITY, Exclusion B.5. Fellow Employee does not apply if the "bodily injury" results from the use of a covered "auto" you own or hire if you have workers compensation insurance in force for all of your "employees" at the time of "loss".

This coverage is excess over any other collectible insurance.

SECTION III - PHYSICAL DAMAGE COVERAGE is amended as follows:

6. HIRED AUTO PHYSICAL DAMAGE

Paragraph A.4. Coverage Extensions of SECTION III - PHYSICAL DAMAGE COVERAGE, is amended by adding the following:

If hired "autos" are covered "autos" for Liability Coverage, and if Comprehensive, Specified Causes of Loss or Collision coverage are provided under the Business Auto Coverage Form for any "auto" you own, then the Physical Damage coverages provided are extended to "autos":



The "loss" must be reported to the police authorities within 24 hours of known damage.

The total amount of the damage to the covered "auto" must exceed the deductible shown in the Declarations.

This provision does not apply to any "loss" if the covered "auto" is in the charge of any person or organization engaged in the automobile business.

18. TWO OR MORE DEDUCTIBLES

Under SECTION III - PHYSICAL DAMAGE COVERAGE, if two or more company policies or coverage forms apply to the same "accident", the following applies to Paragraph D. Deductible:

- a. If the applicable Business Auto deductible is the smaller (or smallest) deductible, it will be waived;
 or
- b. If the applicable Business Auto deductible is not the smaller (or smallest) deductible, it will be reduced by the amount of the smaller (or smallest) deductible; or
- c. If the "loss" involves two or more Business Auto coverage forms or policies, the smaller (or smallest) deductible will be waived.

For the purpose of this endorsement, company means any company that is part of the Liberty Mutual Group.

SECTION IV - BUSINESS AUTO CONDITIONS is amended as follows:

19. UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

SECTION IV- BUSINESS AUTO CONDITIONS, Paragraph B.2. is amended by adding the following:

If you unintentionally fail to disclose any hazards, exposures or material facts existing as of the inception date or renewal date of the Business Auto Coverage Form, the coverage afforded by this policy will not be prejudiced.

However, you must report the undisclosed hazard of exposure as soon as practicable after its discovery, and we have the right to collect additional premium for any such hazard or exposure.

20. AMENDED DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS

SECTION IV - BUSINESS AUTO CONDITIONS, Paragraph A.2.a. is replaced in its entirety by the following:

- a. In the event of "accident", claim, "suit" or "loss", you must promptly notify us when it is known to:
 - (1) You, if you are an individual:
 - (2) A partner, if you are a partnership;
 - (3) Member, if you are a limited liability company;
 - (4) An executive officer or the "employee" designated by the Named Insured to give such notice, if you are a corporation.

To the extent possible, notice to us should include:

- (a) How, when and where the "accident" or "loss" took place;
- (b) The "insured's" name and address; and
- (c) The names and addresses of any injured persons and witnesses.

21. WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

SECTION IV - BUSINESS AUTO CONDITIONS, Paragraph A.5. Transfer Of Rights Of Recovery Against Others To Us, is amended by the addition of the following:

If the person or organization has in a written agreement waived those rights before an "accident" or "loss", our rights are waived also,

22. HIRED AUTO COVERAGE TERRITORY

SECTION IV - BUSINESS AUTO CONDITIONS, Paragraph B.7. Policy Period, Coverage Territory, is amended by the addition of the following:

f. For "autos" hired 30 days or less, the coverage territory is anywhere in the world, provided that the "insured's" responsibility to pay for damages is determined in a "suit", on the merits, in the United States, the territories and possessions of the United States of America, Puerto Rico or Canada or in a settlement we agree to.

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This extension of coverage does not apply to an "auto" hired, leased, rented or borrowed with a

23. PRIMARY AND NON-CONTRIBUTING IF REQUIRED BY WRITTEN CONTRACT OR WRITTEN AGREE-MENT

The following is added to SECTION IV - BUSINESS AUTO CONDITIONS, General Conditions, B.5. Other Insurance and supersedes any provision to the contrary:

This Coverage Form's Covered Autos Liability Coverage is primary to and will not seek contribution from any other insurance available to an "insured" under your policy provided that:

- 1. Such "insured" is a Named Insured under such other insurance; and
- 2. You have agreed in a written contract or written agreement that this insurance would be primary and would not seek contribution from any other insurance available to such "insured".

SECTION V - DEFINITIONS is amended as follows:

24. BODILY INJURY REDEFINED

Under SECTION V - DEFINITIONS, Definition C. is replaced by the following:

"Bodily injury" means physical injury, sickness or disease sustained by a person, including mental anguish, mental injury, shock, fright or death resulting from any of these at any time.



ENDORSEMENT AGREEMENT

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9104272-20 RENEWAL NA 5-38-30-16 PAGE 1 OF

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HOME OFFICE SAN FRANCISCO

ALLEFFECTIVE DATES ARE AT 12:01 AM PACIFIC STANDARD TIME OR THE TIME INDICATED AT PACIFIC STANDARD TIME

EFFECTIVE JULY 1, 2020 AT 12.01 A.M.
AND EXPIRING JULY 1, 2021 AT 12.01 A.M.

DREAM RIDE ENGINEERING, INC. 4780 E 2ND ST BENICIA, CA 94510

WE HAVE THE RIGHT TO RECOVER OUR PAYMENTS FROM ANYONE LIABLE FOR AN INJURY COVERED BY THIS POLICY. WE WILL NOT ENFORCE OUR RIGHT AGAINST THE PERSON OR ORGANIZATION NAMED IN THE SCHEDULE.

THIS AGREEMENT APPLIES ONLY TO THE EXTENT THAT YOU PERFORM WORK UNDER A WRITTEN CONTRACT THAT REQUIRES YOU TO OBTAIN THIS AGREEMENT FROM US.

THE ADDITIONAL PREMIUM FOR THIS ENDORSEMENT SHALL BE 2.00% OF THE TOTAL POLICY PREMIUM.

SCHEDULE

PERSON OR ORGANIZATION

JOB DESCRIPTION

ANY PERSON OR ORGANIZATION
FOR WHOM THE NAMED INSURED
HAS AGREED BY WRITTEN
CONTRACT TO FURNISH THIS
WAIVER

BLANKET WAIVER OF SUBROGATION

NOTHING IN THIS ENDORSEMENT CONTAINED SHALL BE HELD TO VARY, ALTER, WAIVE OR EXTEND ANY OF THE TERMS, CONDITIONS, AGREEMENTS, OR LIMITATIONS OF THIS POLICY OTHER THAN AS STATED. NOTHING ELSEWHERE IN THIS POLICY SHALL BE HELD TO VARY, ALTER, WAIVE OR LIMIT THE TERMS, CONDITIONS, AGREEMENTS OR LIMITATIONS OF THIS ENDORSEMENT.

COUNTERSIGNED AND ISSUED AT SAN FRANCISCO:

MAY 28, 2020

AUTHORIZED REPRESENTATIVE

PRESIDENT AND CEO

2572

SCIF FORM 10217 (REV.7-2014)

QLD DP 217