BID BOND				
KNOW ALL MEN BY THESE PRESENTS, that I/We Shaheen Beauchamp Builders LLC				
as Principal, hereinafter called Contractor, and <u>Western Surety Company</u>				
a corporation duly organized under the laws of the State bix saca, as Surety, hereinafter called the Surety, are held and firmly bound unto Carson City, Nevada a consolidated municipality of the State of Nevada, hereinafter called City, for the sum of \$ 5% of amount bid				
(state sum in words) five percent of amount 1	oid			
for the payment whereof Contractor and Surety bind them assigns, jointly and severally, firmly by these presents.	selves, their heirs, executors, administrators, successors and			
WHEREAS, the Principal has submitted a bid, identified a Facility".	s BID # 1415-143 and titled "Carson City Animal Services			
NOW, THEREFORE if the City shall accept the bid of the Principal and the Principal shall enter into a contract with the City in Accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Bid Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the City the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the City may in good faith contract with another party to perform work covered by said bid or an appropriate liquidated amount as specified in the Invitation for Bids then this obligation shall be null and void otherwise to remain in full force and effect.				
	Executed on this 3 day of 2015			
	Signature of Principal:			
(Seal)	Title: Mande			
BRENDA L. ERICKSON NOTARY PUBLIC	Firm: <u>Shaheen Beauchamp Builders L</u> LC Address: 3427 Goni Rd #109			
STATE OF NEVADA &	City/State/Zip Code: Carson City, NV 89706			
NO. TO SASSIFICATION OF THE PROPERTY OF THE PARTY OF THE	Written Name of Principal: Maril W. Blauchamp			
	ATTEST NAME			
	Signature of Notary: DIVID 2015 of HUGUST 2015 Notary Public for the State of IVID 2015 Nevada Resident Agent Information Complete for out of state bonding companies			
Name of Surety Western Surety Company	Name of Local Agent Alpine Insurance Associates			
Address P O Box 5077	Address 3352 Goni Rd #164			
City Sioux Falls SD 57117	City Carson City, NV 89706			
State/Zip Code	State/Zip Code			
Name Sylvia Forsythe	Agent's Name Sylvia Forsythe			
Title attorney-in-fact	Agent's Title			
Phone Surety's Acknowledgement Supuring Fluarith	Agents Phone 775–883–5000			
NOTICE: No substitution or revision to this bond form will be accepted. Sureties must be authorized to do business in and have an agent for services of process in the State of Nevada. Certified copy of Power of Attorney must be attached.				

Western Surety Company

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That WESTERN SURETY COMPANY, a South Dakota corporation, is a duly organized and existing corporation having its principal office in the City of Sioux Falls, and State of South Dakota, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

Glen Gonfiantini, Sylvia Forsythe, Chris Gonfiantini, Etta Marie Hixson, Ryan Garaventa, Cynthia J Sprole, Individually

of Reno, NV, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bunds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -

and to bind it thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the corporation and all the acts of said Attorney, pursuant to the authority hereby given, are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law printed on the reverse hereof, duly adopted, as indicated, by the shareholders of the corporation.

In Witness Whereof, WESTERN SURETY COMPANY has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 6th day of December, 2012.



WESTERN SURETY COMPANY

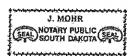
Paul T Rouflay Vice Precident

State of South Dakota County of Minnehaha > S5

On this 6th day of December, 2012, before me personally same Paul T. Bruffat, to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is the Vice President of WESTERN SURETY COMPANY described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporation and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporation.

My commission expires

June 23, 2015



CERTIFICATE

John Jahr Nama Bibl



WESTERN SURETY COMPANY

J. Relson

Authorizing By-Law

ADOPTED BY THE SHAREHOLDERS OF WESTERN SURETY COMPANY

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the shareholders of the Company.

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, and Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

BID # 1415-143

BID TITLE: "Carson City Animal Services Facility"

NOTICE:

No substitution or revision to this Bid Proposal form will be accepted. Carson City will reject any Bid that is received that has changes or alterations to this document. Although the Prevailing Wages are provided in this bid document, the bidder is responsible to verify with the Labor Commissioner if any addendums have been issued. The successful bidder will be required to provide the current Prevailing Wages used in preparation of their bid within 24 hours of bid submission.

PRICES will be valid for sixty (60) calendar days after the bid opening which is indicated in the Notice to Contractors.

A COPY OF CONTRACTOR'S "CERTIFICATE" of eligibility issued by the State of Nevada Contractors' Board as proof of Bidder's compliance with the provisions of N.R.S. 338.147 must be submitted with his/her bid for the preference to be considered. This Statute does not apply to projects expected to cost less than \$250,000.

COMPLETION of this project is expected **PURSUANT TO THE BID DOCUMENTS**.

BIDDER acknowledges receipt of _____ Addendums.

SUMMARY

	Description	Scheduled Value	Unit	Unit Price	Total Price
	Schedule A				
BP.1	Animal Services Facility –Total Project	1	LS		
BP.2 Total Bid Price (Schedule A)				\$3,063,0	900

BP.3 Total Base Schedule A Bid Price Written in Words:

Schedule A Bid Price Written in Words:

hree million Sixty three thousand.

BP.4 BIDDER INFORMATION:

Company Name: Shaheen Beauchamp Builders LLC

Federal ID No.: 88-0393318

Mailing Address: 3427 Goni Road, Suite # 109

City, State, Zip Code: Carson City, NV 89706

Complete Telephone Number: (775) 885-2294

Complete Fax Number: (775) 885-9791

Fax Number including area code: (775) 885-9791

E-mail: mark@sbbuilders.com

Contact Person / Title: Mark Beauchamp/Member

Mailing Address: 3427 Goni Road, Suite # 109

City, State, Zip Code: 3427 Goni Road, Suite # 109

Complete Telephone Number: (775) 885-2294

Complete Fax Number: (775) 885-9791

E-mail Address: mark@sbbuilders.com

BP.5 LICENSING INFORMATION:

Nevada State Contractor's License Number: #47712

License Classification(s): B-General Building Contractor

Limitation(s) of License: Unlimited

Date Issued: 1-5-1999

Date of Expiration: 1-31-2016

Name of Licensee: Shaheen Beauchamp Builders LLC

Carson City Business License Number: 12-00013536

Date Issued: 1-6-2012

Date of Expiration: 1-31-2016

Name of Licensee: Shaheen Beauchamp Builders LLC

BP.6 DISCLOSURE OF PRINCIPALS:

Individual and/or Partnership: LLC

Owner 1) Name: Jeff Shaheen

Address: 3427 Goni Road, Suite # 109

City, State, Zip Code: Carson City, NV 89706

Telephone Number: (775) 885-2294 ext. 105

Owner 2) Name: Mark Beauchamp

Address: 3427 Goni Road, Suite # 109

City, State, Zip Code: Carson City, NV 89706

Telephone Number: (775) 885-2294 ext. 106

Other 1) Title:	
Name	
Other 2) Title:	
Name:	
Corporation: N/A	
State in which Company is Incorporated:	
Date Incorporated:	
Name of Corporation:	110000
Mailing Address	
City, State, Zip Code:	
Telephone Number:	
President's Name:	
Vice-President's Name:	
Other 1) Name & Title:	
Persons and Positions	
	Years With Firm
Name 1) Mark Beauchamp	16
Title 1) Owner, Project Manager, Lead Estimator	
Name 2) Jeff Shaheen	16
Title 2) Owner, Project Manager	
Name 3) Dennis Martin	16

Title 3) General Superintendent

Name 4) Jeremy Kunter	6
Title 4) Project Manager	
Name 5) Joel Brugger	12
Title 5) Superintendent	
Name 6) Brenda Erickson	9

Title 6) Project Administrator

(If additional space is needed, attach a separate page)

BP.8 REFERENCES:

Instructions:

List at least three (3) contracts of a similar nature performed by your firm in the last three (3) years. If **NONE**, use your Company's letterhead (and submit with your bid proposal) to list what your qualifications are for this contract. Carson City reserves the right to contact and verify, with any and all references listed, the quality of and the degree of satisfaction for such performance.

Clients: (if additional space is needed attach a separate page)

Company Name 1): Carson City School District	
Contract Person: Mark Korinek	
Mailing Address: 1402 W. King Street	
City, State, Zip Code: Carson City, NV 89703	
Complete Telephone Number: (775) 283-2181	
E-Mail Address: MKorinek@carson.k12.nv.us	
Project Title: Mark Twain/Fremont Elementary School Boiler Replacement Project	
Amount of Contract: \$254,501.00 () 4 4 7 9	
Scope of Work: Replacement of Boilers and Pumps @ (2) Elementary Schools	17
Company Name 2): Johnson Family Revocable Trust	
Contract Person: Tom Johnson	
Mailing Address: 311 N. Carson Street	
City, State, Zip Code: Carson City, NV 89701	
Complete Telephone Number: (775) 883-3936	
E-Mail Address: johnsont@svn.com	
Project Title: 777 Center Street Remodel	
Amount of Contract: \$2,100,000.00	
Scope of Work: Shell renovation of an existing building including site, interior, and exterior improvements	s

Company Name 3): Western Nevada College

Contract Person: Kevin Gaffney

Mailing Address: 2201 West College Parkway

City, State, Zip Code: Carson City, NV 89703

Complete Telephone Number: (775) 445-4222

E-Mail Address: kevin.gaffney@wnc.edu

Project Title: WNC Nursing Lab Remodel

Amount of Contract \$87,530.00

Scope of Work: Tenant Improvement of the Cedar Building Nursing Lab

Company Name 4): Click Bond Inc.

Contract Person: Karl Hutter

Mailing Address: 2151 Lockheed Way

City, State, Zip Code: Carson City, NV 89706

Complete Telephone Number: (775) 885-8000

E-Mail Address: khutter@clickbond.com

Project Title: Click Bond Parking Lot Improvements

Amount of Contract: \$794,301.00

Scope of Work: Parking Area Improvements for the Click Bond Campus

BP. 9 CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS PRIMARY COVERED TRANSACTIONS

- The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal, State or Local department or agency.
- b) Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
- Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- d) Have not within a three-year period preceding this bid had one or more public transactions (Federal, State or Local) terminated for cause or default.
- 2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

August 28, 2015
Date
tached.
Date

Bidder's Safety Factors:

Year	"E-Mod" Factor ¹	OSHA Incident Rate ²
2014	0.87	0
2013	0.87	0

¹ E-Mod (Experience Modification) Factors are issued by the Employer's Insurance Company of Nevada.

² OSHA Incident Rate is the number of OSHA Recordable Accidents per 100 employees and is calculated as the number of accidents divided by 208,000.

SUBCONTRACTORS

BP.10 INSTRUCTIONS: for Subcontractors and General Contractors who self-perform in amounts exceeding five (5) percent of bid amount. This information must be submitted with your bid proposal. The bidder shall enter NONE under Name of Subcontractor if not utilizing subcontractors exceeding this amount and per NRS 338.141 the prime contractor shall list itself on the subcontractor's list if it will be providing any of the work on the project. (This form must be complete in all respects. If, additional space is needed, attach a separate page).

separate page).		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	itework	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	nccete	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	Jasonal	
Name of Subcontractor Keith Shamblin	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	spectal	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	ofire	

SUBCONTRACTORS

BP.10 INSTRUCTIONS: for Subcontractors and General Contractors who self-perform in amounts exceeding five (5) percent of bid amount. This information must be submitted with your bid proposal. The bidder shall enter NONE under Name of Subcontractor if not utilizing subcontractors exceeding this amount and per NRS 338.141 the prime contractor shall list itself on the subcontractor's list if it will be providing any of the work on the project. (This form must be complete in all respects. If, additional space is needed, attach a separate page).

Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	nechanic	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	Importal (
Name of Subcontractor	Address	
Phone Phone	Nevada Contractor License #	Limit of License
Description of work	lectoral	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	Drywall	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

SUBCONTRACTORS

BP.11 INSTRUCTIONS: for Subcontractors exceeding one (1) percent of bid amount or \$50,000 whichever is greater. This information must be submitted by the three lowest bidders within two (2) hours after the completion of the opening of the bids. The bidder may elect to submit this information with the bid proposal and, in that case, the bidder will be considered as having submitted this information within the above two hours.

Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	Proceedings of the second seco	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

SUBCONTRACTORS

BP. 12 INSTRUCTIONS: for all Subcontractors not previously listed on the 5% and 1% pages. This information must be submitted by the three lowest bidders within twenty four (24) hours after the completion of the opening of the bids. The bidder may elect to submit this information with the bid proposal and, in that case, the bidder will be considered as having submitted this information within the above twenty four hours.

Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work	***************************************	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

BP. 13

WORKERS EMPLOYED REPORT INSTRUCTIONS FOR COMPLETION

Effective July 1, 2013, contractors who receive a preference in bidding on a public work must submit an affidavit to the public body certifying that 50 percent of all workers employed on the public work, including any employees of the contractor and of any subcontractor, will hold a valid driver's license or identification card issued by the Nevada Department of Motor Vehicles. Pursuant to NRS 338.070(4), a contractor and each subcontractor engaged on a public work shall keep an accurate record showing, for each worker employed by the contractor or subcontractor in connection with the public work who has a driver's license or identification card, the name of the worker, the driver's license number or identification card number of the worker, and the state or other jurisdiction that issued the license or card. A copy of this record must be received by the public body no later than 15 days after the end of the month. Additionally, the contractor and any subcontractor will maintain and make available for inspection within Nevada his or her records concerning payroll relating to the public work.

- EACH contractor and subcontractor must complete the Workers Employed Report.
- You may make additional copies of the report as necessary.
- A copy of this report must be submitted with the monthly certified payroll report.
- Submit Identification log monthly listing all employees that worked for that month. The Identification log should correspo9nd with the certified payroll reports. If employees are not working in a given month then they should not be listed on said report.

This report is intended to serve as a cumulative list of all workers employed by the contractor and subcontractor over the duration of the project to verify compliance with the minimum requirements of the affidavit.



WORKERS EMPLOYED REPORT

Project Name:	Contract Number :			
General Contractor:		PWP#		
Subcontractor:		Date:		
Subcontractor: Date: Date:				
Contact Dorson and Dhana N	la secolo e se			
Contact Person and Phone N	lumber:			
Employee Name	Driver License Number or ID	Issuing State or Jurisdiction		
	Card Number			
		W-1/		

Local Preference Affidavit

(This form is required to receive a preference in bidding)

I, Mark W. Beauchamp , on behalf of the Contractor, Shaheen Beauchamp Builders , swear
and affirm that in order to be in compliance with NRS 338.XXX* and be eligible to receive a preference in
bidding on Project No. PWP #CC-2015-116, Project Name CC Animal Services Facilitertify that the
following requirement will be adhered to, documented and attained on completion of the contract. Upon
submission of this affidavit on behalf of Shaheen Beauchamp Builders recognize and accept that failure to
comply with any requirements is a material breach of the contract and entitles the City to damages. In addition,
the Contractor may lose their preference designation and/or lose their ability to bid on public works for one year,
pursuant to NRS 338. XXX*:
1. The Contractor shall ensure that 50 percent of the workers employed on the job possess a Nevada driver's
license or identification card;
2. The Contractor shall ensure all vehicles used primarily for the public work will be registered and (where
applicable) partially apportioned to Nevada;
3. The Contractor shall ensure at least 50 percent of the design professionals who work on the project (including
sub-contractors) have a Nevada driver's license or identification card.
4. The Contractor shall ensure payroll records related to this project are maintained and available within the State
of Nevada.
*Note that specific sections of NRS 338 detailing the continued procedures associated with the use of the
"bidder's preference" have been amended by the passage of Assembly Bill 172 effective 7/1/13, requiring
this affidavit and subsequent record keeping and reporting by the General Contractor using the preference
program and awarded this project. These requirements are not applicable to Contractors who do not use
the "Bidder's Preference" eligibility certificate in their bid.
By: Mark W. Beauchamp Title: Member
Trick by Budghamp
Signature Date: August 28, 2015
=======================================
Signed and sworn to (or affirmed) before me on this <u>28th</u> day of <u>August</u> , 20 15,
oy Mark W. Beauchamp (name of person making statement).
RRENDA L FRICKSON
State of Nevada) NOTARY PUBLIC STATE OF NEVADA
)ss. STATE OF NEVADA County of Carson City) No. 10-3456-3 My Appt. Exp. Nov. 5, 2018
O.C. A. T. T. C. WO. A.
DIVIDIO L. EN OWN STAMP AND SEAL

Notary Signature

BP.14 ACKNOWLEDGMENT AND EXECUTION:	
STATE OF Nevada)	
COUNTY OF <u>Carson City</u>) ss	
I Mark W. Beauchamp I am the Bidder or authorized agent of the Bidder; and that I have reincludes, but is not limited to the following documents: Notice to Cordination, Instructions to Bidders, Bid Bond, Proposal Summary, Sample Contract, Sample Performance Bond, Sample Labor and Ma Special Conditions, Standard Specifications, Prevailing Wage Rates Report (if any), Contract Drawings, Permits (if any), and any addend conditions, and requirements thereof; that if his/her bid is accepted to materials except those specified to be furnished by the City (Owner) "Carson City Animal Services Facility", contract number 1415-143 complete the work to be constructed in accordance with the Contract Specifications annexed hereto.	ntractors, Table of Contents, Project Contract Award Instructions and Information, aterial Payment Bond, General Conditions, , Technical Specifications, Geotechnical a issued and understands the terms, hat he/she agrees to furnish and deliver all and to do and perform all work for the b, together with incidental items necessary to
BIDDER:	
PRINTED NAME OF BIDDER: Mark W. Beauchamp	
TITLE: _Member	
FIRM: Shaheen Beauchamp Builders LLC	
Address: 3427 Goni Road, Suite # 109	
City, State, Zip: Carson City, NV 89706	
Telephone: (775) 885-2294 ext. 106	
Fax: (775) 885-9791	
E-mail Address: mark@sbbuilders.com	
(Signature of Bidder)	
DATED: August 28, 2015	
Signed and sworn (or affirmed) before me on this <u>28th</u> day of <u>Mark W. Beauchamp</u> .	August , 2015, by
Brunda L. En ULSON (Signature of Notary)	
(Cignature of Notaly)	(Notary Stamp)

BRENDA L

BRENDA L. ERICKSON
NOTARY PUBLIC
STATE OF NEVADA
My Appt Exp. Nov. 5, 2018



NEVADA STATE CONTRACTORS BOARD

9670 GATEWAY DRIVE, SUITE 100, RENO, NEVADA, 89521 (775) 688-11141 FAX (775) 688-1271, INVESTIGATIONS (775) 688-1150 2310 CORPORATE CIRCLE, SUITE 200, HENDERSON, NEVADA, 89074, (702) 486-1100 FAX (702) 486-1190, INVESTIGATIONS (702) 486-1110

CERTIFICATE OF ELIGIBILITY PER NRS 338.147 and NRS 338.1389

CERTIFICATE NUMBER: BPC-01-08-13-0198

NRS 338.147 AND NRS 338.1389. IN ACCORDANCE WITH THE PROVISIONS OF NRS 338.147(3), THE ABOVE-NAMED STATUS: ACTIVE, IS HEREBY ISSUED THIS CERTIFICATE BY THE NEVADA STATE CONTRACTORS' BOARD, BASED CONTRACTORS' LICENSE NUMBER: 0047712 ORIGINAL ISSUE DATE: 01/05/1999 BUSINESS TYPE: LIMITED GENERAL CONTRACTOR AND A CERTIFIED PUBLIC ACCOUNTANT HAVE SUBMITTED FULLY EXECUTED AND NEVADA STATE CONTRACTORS BOARD AS PROOF OF CONTRACTOR'S COMPLIANCE WITH THE PROVISIONS OF SHAMEEN BEAUCHAMP BUILDERS LLC (HEREIN THE "GENERAL CONTRACTOR") NEVADA STATE FORTH IN NRS 338.147 AND NRS 338.1389 AND OTHER MATTERS RELATING THERETO. CERTIFYING THAT THE GENERAL CONTRACTOR IS QUALIFIED TO RECEIVE A PREFERENCE IN BIDDING AS SET NOTARIZED SWORN AFFIDAVITS AS PROOF OF PREFERENTIAL BIDDER STATUS, UNDER PENALTY OF PERJURY (NRS) 338.147 AND NRS 338.1389 AND THE AFFIDAVIT OF CERTIFIED PUBLIC ACCOUNTANT SUBMITTED TO THE UPON THE INFORMATION CONTAINED IN THE STATEMENT OF COMPLIANCE WITH NEVADA REVISED STATUTES LIABILITY COMPANY CLASSIFICATION: B-GENERAL BUILDING MONETARY LICENSE LIMIT: UNLIMITED

THIS CERTIFICATE OF ELIGIBILITY IS ISSUED ON MARCH 4, 2015 AND EXPIRES ON JANUARY 31, 2016 UNLESS SOONER REVOKED OR SUSPENDED BY THE NEVADA STATE CONTRACTORS BOARD.



MANCY MATHIAS, LICENSING ADMINISTRATOR DATE FOR MARGI A. GREIN, EXECUTIVE OFFICER

of Certified Public Accountant as Proof of Contractors Compliance with the Provisions of NRS ascertain the accuracy and validity of the affidavits provided to support the issuance of this validity of the information contained in the Contractors Statement of Compliance or the Affidavit The Nevada State Contractors Board assumes no liability or responsibility for the accuracy or 338.147 and NRS 338.1389. The above-named General Contractor shall bear the responsibility to

Southern Nevada Office 2310 Corporate Circle, Suite 200 Henderson, Nevada 89074 (702) 486-1100

STATE CONTRACTORS BOARD

Northern Nevada Office 9670 Gateway Drive, Suite 100 Reno, Nevada 89521 (775) 688-1141

The Nevada State Contractors Board certifies that

SHAHEEN BEAUCHAMP BUILDERS LLC

Licensed since January 05, 1999

License No. 0047712

Is duly licensed as a contractor in the following classification(s):

PRINCIPALS:

MARK WILLIAM BEAUCHAMP, Member Q

JEFF FREDRICK SHAHEEN, Member Qual

B-GENERAL BUILDING

LIMIT: Unlimited EXPIRES: 01/31/2017

ONTRACTORS

Chajiman, Nevada State Contractors Board

CERTIFICATE OF LIABILITY INSURANCE

SHAHE-3

OP ID: SF

DATE (MM/DD/YYYY) 08/13/2015

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

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

3352 Goni Carson Ci	surance ity Branch Office I Road, Ste 164 ty, NV 89706	CONTACT NAME: Chris Gonfiantini, CIC PHONE (A/C, No, Ext): 775-883-5000 E-MAIL ADDRESS: FAX (A/C, No): 775-687-2534				
Chris Gon	fiantini, CIC	INSURER(S) AFFORDING COVERAGE	NAIC #			
INSURED	Shahaan Bassahanna Budala at a	INSURER A : Scottsdale Ins. Co.				
	Shaheen Beauchamp BuildersLLC 3427 Goni Road #109 Carson City, NV 89706	INSURER B : Contractors Bonding & Ins Co	37206			
		INSURER C : Benchmark Insurance Co				
	•	INSURER D :				
		INSURER E :	_			
0.01/22.0		INSURER F:				

COVERAGES

CERTIFICATE 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.

INSE	TYPE OF INSURANCE	ADD	SUB	POLICY NUMBER	POLICY EFF	POLICY EXP	·	- 		
	GENERAL LIABILITY	INGR	1000	TOLICT NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S		
la	X COMMERCIAL GENERAL LIABILITY	X	$ _{\mathbf{x}}$	CPS2132998	20/45/2045		EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000	
1		^	^	CF32132996	02/15/2015	02/15/2016	PREMISES (Ea occurrence)	\$	100,000	
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$	5,000	
ļ	\$1000 Ded	-					PERSONAL & ADV INJURY	\$	1,000,000	
	OF AN AGGREGATE AND AGGREGATE	-					GENERAL AGGREGATE	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$	2,000,000	
	AUTOMOBILE LIABILITY	+	├					\$		
В	w1						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
-	ANY AUTO ALL OWNED SCHEDULED			A31AAQ708	02/15/2015	02/15/2016	BODILY INJURY (Per person)	\$		
	AUTOS AUTOS NON-OWNED					!	BODILY INJURY (Per accident)	\$		
	HIRED AUTOS AUTOS	ļ	Ì				PROPERTY DAMAGE (PER ACCIDENT)	\$		
	Lumpor Lu	 	-					\$		
	WMBRELLA LIAB X OCCUR X EXCESS LIAB						EACH OCCURRENCE	\$	3,000,000	
Α	CLAIIVIS-IVIADI			XBS0047985	02/15/2015	02/15/2016	AGGREGATE	\$	3,000,000	
<u> </u>	DED X RETENTION\$	ــــــــــــــــــــــــــــــــــــ					GL,Auto	\$		
c	AND EMPLOYERS' LIABILITY							X WC STATU- TORY LIMITS OTH- ER		
٦	OFFICER/MEMBER EXCLUDED?	N/A	Х	BWC15013801	02/01/2015	02/01/2016	E.L. EACH ACCIDENT	\$	1,000,000	
	(Mandatory in NH)			E.L. DISEASE - EA EMPLOYEE	\$	1,000,000				
<u> </u>	DÉSCRIPTION OF OPERATIONS below	<u>.</u>	_				E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
									I	
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	IES /A	ttach	COPD 101 Additional Barrante Cala	alada de					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
City and County of Carson City, Nevada, its officers, employees and immune
contractors are additional insureds per CG2033, CG2503, CG2001, CG2404,
WC000313 attached

Re: PWP # CC-2015-116 Carson City Animal Services Facility

CERTIFICATE HOLDER	CANCELLATION		
Carson City Purchasing & Contracts 201 North Carson Street #3	CCPUR02	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
Carson City, NV 89701		Sylvia L Forsythe	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

- A. Section II Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured 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
 - The acts or omissions of those acting on your behalf:

in the performance of your ongoing operations for the additional insured.

However, the insurance afforded to such additional insured:

- Only applies to the extent permitted by law; and
- Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

- "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
 - The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
 - Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.

- "Bodily injury" or "property damage" occurring after:
 - a. 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
 - b. 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:

The most we will pay on behalf of the additional insured is the amount of insurance:

- Required by the contract or agreement you have entered into with the additional insured; or
- 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.

DESIGNATED CONSTRUCTION PROJECT(S) GENERAL AGGREGATE LIMIT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Designated Construction Project(s):

ALL OPERATIONS AWAY FORM PREMISES OWNED OR RENTED TO YOU

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

- A. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I Coverage A, and for all medical expenses caused by accidents under Section I Coverage C, which can be attributed only to ongoing operations at a single designated construction project shown in the Schedule above;
 - A separate Designated Construction Project General Aggregate Limit applies to each designated construction project, and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.
 - 2. The Designated Construction Project General Aggregate Limit is the most we will pay for the sum of all damages under Coverage A, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard", and for medical expenses under Coverage C regardless of the number of:
 - a. Insureds;
 - b. Claims made or "suits" brought; or
 - c. Persons or organizations making claims or bringing "suits".

- 3. Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the Designated Construction Project General Aggregate Limit for that designated construction project. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Designated Construction Project General Aggregate Limit for any other designated construction project shown in the Schedule above.
- 4. The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expense continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Designated Construction Project General Aggregate Limit.

- B. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I Coverage A, and for all medical expenses caused by accidents under Section I Coverage C, which cannot be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:
 - Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products-completed Operations Aggregate Limit, whichever is applicable; and
 - Such payments shall not reduce any Designated Construction Project General Aggregate Limit.
- C. When coverage for liability arising out of the "products-completed operations hazard" is provided, any payments for damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard" will reduce the Products-completed Operations Aggregate Limit, and not reduce the General Aggregate Limit nor the Designated Construction Project General Aggregate Limit.
- D. If the applicable designated construction project has been abandoned, delayed, or abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the project will still be deemed to be the same construction project.
- E. The provisions of Section III Limits Of Insurance not otherwise modified by this endorsement shall continue to apply as stipulated.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY - OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

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

The following is added to the Other Insurance Condition and supersedes any provision to the contrary:

Primary And Noncontributory 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.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

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

SCHEDULE

Name Of Person Or Organization:

ANY PERSON OR ORGANIZATION WITH WHOM THE INSURED HAS AGREED TO WAIVE RIGHTS OF RECOVERY PROVIDED SUCH AGREEMENT IS MADE IN WRITING AND PRIOR TO THE LOSS

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

The following is added to Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV - Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or darnage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

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(ed. 4-84)

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

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.)

This agreement shall not operate directly or inderectly to benefit anyone not named in the Schedule.

Schedule

Any person or organization as required by written contract.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The Information	below is	required or	nly when this	endorsement is issued	subsequent to preparation of the policy.)
Endorsement Effective		2/1/2015		BWC150138-01	Endorsement No.
Policy Effective Dates: 02/01/2015 - 02/01/2016 Insured: Shaheen Beauchamp Builders LLC					Premium \$
Carrier Name / Code:	Benchm	ark Insurance	e Company		

WC 00 03 13

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