



PROCUREMENT AND
MATERIALS MANAGEMENT

City of Myrtle Beach
SOUTH CAROLINA

(843) 918-2170
FAX: (843) 918-2182

REQUEST FOR QUOTE

Date: October 24, 2023
Quote #102423A

The City of Myrtle Beach is interested in obtaining a price quote on the service listed below. Please see attached specifications for details. If you would like to provide a quote then please return this form with your quote information to asowers@cityofmyrtlebeach.com **NO LATER THAN 2:00PM on Tuesday, October 31, 2023.** Official time of receipt will be marked by the time the e-mail is received, and not by the time that it is sent. E-mail messages can take up to ten (10) minutes or more to be delivered to the intended recipient. If you have any questions, please call 843-918-2172.

<u>Line</u> <u>Item#</u>	<u>Qty.</u>	<u>Unit</u>	<u>Description</u>	<u>Unit Price</u>
1	1	ea	VO2 Max 12-Lead Stress Test Physical	\$_____

Company Name: _____

Authorized Signature: _____

Contact Name: _____

Telephone #: _____

Email Address: _____

SPECIFICATIONS

INTENT

It is the intent of this IFB to establish a contract for VO2 Max 12-lead stress test physicals for the City of Myrtle Beach Fire Department. The successful contractor shall provide all materials, supplies, parts, tools, equipment, labor, supervision, transportation, and all other items necessary to perform the work required under this contract.

PHYSICAL REQUIREMENTS

Contractor will provide VO2 Max 12-lead stress test physicals that meet or exceed the testing protocol established by NFPA 1582, specific to the Wellness Fitness Initiative (WFI) established by the IAFF/IAFC Fire Service Joint Labor/Management Wellness-Fitness Initiative. Testing will be conducted utilizing the established WFI fitness assessment protocols, with either a Commercial Treadmill or Stepmill. Physicals must be performed within the corporate limits of the City of Myrtle Beach. See Exhibit A for outlines of testing expectations.

Scheduling

Scheduling of physicals must be coordinated with the Myrtle Beach Fire Department Division Chief of Administration. Physicals will be scheduled in groups by assigned shifts, with no less than three (3) days per shift (minimum 9 days total per year) to facilitate the testing process.

Quantity

Estimated annual physicals is ninety (90) per year. This quantity should be considered reasonable for bidding purposes. However, the City reserves the right to add more or subtract less than the stated quantity based on the actual needs of the City.

Health Information Requirements

Contractor will collect all test data as per the Health Insurance Portability and Accountability Act (HIPAA) regulations. Contractor will be responsible for securely transmitting all data to the City of Myrtle Beach Occupational Medicine Clinic.

Personnel Qualifications

All company personnel performing a VO2 Max 12-lead stress test must meet minimum qualifications. This includes, but is not limited to, Basic Cardiac Life Support (BCLS), and/or CPR certification. Evidence of qualifications must be submitted with bid documents. An AED will be in place for the duration of the assessments, provided by the contractor or department (as requested).

ADDITIONAL CONTRACTOR REQUIREMENTS

Licenses, Registrations, Certifications, Permits, Fees, and Taxes

The Contractor must possess (or obtain and keep) all valid and current applicable licenses, registrations, certifications and permits required to perform the work required under this contract at all times during the term of the contract. The Contractor shall bear the cost of securing all

required licenses, registrations, certifications, and permits, and for the payment of all applicable fees and/or taxes. No license, registration, certification, or permit shall be applied for in the name of, or on behalf of, the City of Myrtle Beach.

During the term of the contract, should any applicable contractor license, registration, certification or permit expire, or be suspended or revoked, notice must be given to the City within one (1) working day of the expiration, suspension or revocation.

The City will reserve the right at any time during the term of the contract to request copies of all applicable licenses, registrations, certifications, permits and/or receipts, or other suitable documentation, showing fees and taxes paid.

Statutes, Regulations, Standards, Codes, and Ordinances

In addition to those referenced elsewhere in these bid documents, the Contractor shall comply with all other applicable federal, state, county, municipal, and local statutes, regulations, standards, codes, and ordinances at all times while performing the work required under this contract. The latest edition(s) adopted by the local authority having jurisdiction shall apply.

The Contractor shall pay all fines and/or penalties assessed the City by any law organization or entity having jurisdiction for the Contractor's violations of applicable statutes, regulations, standards, codes, ordinances and/or orders arising in connection with the Contractor's performance of work under the contract.

No plea of ignorance on the part of the Contractor shall, in any way, relieve the Contractor from responsibility for compliance with said statutes, regulations, standards, codes, and ordinances.

No Smoking Policy

The City has established a no smoking policy. Smoking is not allowed at any time on City premises or while performing work for the City.

TERM OF CONTRACT

The term of the contract shall be for a period of one (1) year with an option to renew for four (4) one-year periods. Award will be based solely on the original term of the contract. Upon successful completion of the contract term, renewal may be considered provided both parties agree, the terms and conditions remain the same, and the renewal is in the best interest of the City. Should the contract be renewed, the renewal shall be documented by contract and/or purchase order.

EXCLUSIVITY

This contract shall be for the work specified, however, this agreement should not be considered exclusive. The City will reserve the right to also obtain these services from other contractors when deemed necessary and determined to be in the best interest of the City.

QUOTE PRICES

All quote prices shall remain firm for the entire term of the contract. Quote prices shall be DELIVERED PRICE (FOB DESTINATION) excluding any sales tax which is to be applied at the time of invoicing. All other applicable costs, including but not limited to: supplies, tools, equipment, labor, supervision, delivery, loading/unloading, truck charges, mileage, travel time, per diem, fuel, fuel surcharges, energy surcharges, hazardous material handling fees, environmental impact fees, and waste disposal fees must be included in the bid prices. No other additional charges or incidental fees of any kind will be allowed.

PRICE INCREASE

Should the contract be renewed for an additional term, a price increase may be considered, if needed, at the beginning of the renewal period. Any price increase requested may not exceed five percent (5%.) At the City's discretion, proof may be requested to substantiate the need for a price increase.

INVOICING

Invoices shall be submitted for payment upon satisfactory completion and acceptance by the City each month. No invoice shall be submitted for payment prior to work being performed. Invoices shall

be submitted to: City of Myrtle Beach
Finance Department/Accounts Payable
PO Box 2468
Myrtle Beach, SC 29578-2468
Or: accountspayable@cityofmyrtlebeach.com

CONTRACT AWARD

Sellers understand that the City of Myrtle Beach ranks all quotes by price; however, please note that the award will be made to the responsible seller whose quote conforms to the solicitation that is most advantageous to the buyer on basis of price, technical capability, and delivery. No partial bids allowed. Bid will be awarded on an "all or none" basis.

Exhibit A – Testing Expectations

Wellness Fitness Initiative (WFI) Treadmill / Stepmill Evaluation

Wellness Fitness Initiative (WFI) Evaluation

Cardiorespiratory fitness is essential for Emergency Responders. The physiologic burden of wearing bulky protective clothing, breathing through a self-contained breathing apparatus and performing physically demanding work at the incident scene places an enormous strain on the body. Firefighter work environments are also known to contain toxic chemicals that may also contribute to the development of heart disease over time.

The IAFF/IAFC Fire Service Joint Labor/Management Wellness-Fitness Initiative recommends cardiopulmonary testing for Emergency Responders.

The WFI Treadmill/Step Mill Evaluation is a VO_2 max test to evaluate Firefighter applicant aerobic capacity under the direct supervision of a certified Exercise Physiologist. All test results are reviewed by an Occupational Physician. The minimum recruit time is 12 minutes and 30 seconds. The minimum time standard is based on the average VO_2 max at 12:30, which is 45 ml/kg/min. An aerobic capacity of 45 ml/kg/min is the recommended minimum cardiorespiratory fitness standard for Firefighters (Gledhill and Jamnik, 1992).

The WFI Treadmill Evaluation is completed using direct gas analysis, which means you will be wearing a Face Mask that will collect the expired air from your nose and mouth. You will wear the Face Mask while you run at increasing speeds and grades on the Treadmill or Stepmill. A continuous 12 lead ECG will be monitored and end of test 12 lead assessment attached as part of your official file. The assessment will continue until the participant can no longer continue or the subject exhibits the medical criteria for early termination of the test. The goal is to meet or exceed 12 minutes and 30 seconds. It is important that you train to be comfortable obtaining this level as it is the minimum. Please note that the additional information collected during this evaluation is a part of your baseline medical. As a result, it is important that you give us your absolute best effort during all testing.

Use caution when beginning an exercise program. It is important you have an awareness of your current health status and ability to partake in physical activity. Take a moment to complete the PAR-Q Physical Activity Readiness Questionnaire before beginning any exercise programs or aerobic fitness evaluations. Consult your Physician if you have questions about becoming more active.

WFI FITNESS Assessments

Table 5.5
Target Heart Rate for Respective Age

Age (yrs)	THR (BPM)	Age (yrs)	THR (BPM)	Age (yrs)	THR (BPM)	Age (yrs)	THR (BPM)
18	166	29	160	40	153	51	146
19	165	30	159	42	152	52	146
20	165	31	158	42	152	53	145
21	164	32	158	43	151	54	145
22	164	33	157	44	151	55	144
23	163	34	157	45	150	56	143
24	163	35	156	46	149	57	143
25	162	36	155	47	149	58	142
26	161	37	155	48	148	59	142
27	161	38	154	49	148	60	141
28	160	39	154	50	147	61	140

THR Formula: $[208 - (0.7 \times \text{age})] \times 0.85$

WFI AEROBIC CAPACITY EVALUATIONS

TREADMILL EVALUATION

Equipment

- Commercial Grade Treadmill
- Calculator
- Stopwatch
- Heart Rate MonitoH

Figure 5.12

TREADMILL EVALUATION

ASSESSMENT

The purpose of this assessment is to estimate the VO₂ max of each participant.

1. Conduct Pre-Evaluation Procedures.
2. The participant straddles the treadmill belt until it begins to move. When the treadmill reaches approximately 1 mph, instruct the participant to step onto the belt. Then increase the speed to 3 mph at 0% grade. Monitor the participant's heart rate continuously throughout the assessment.

Figure 5.12

Time	Speed mph	%Grade
0:00 - 1:00	3.0	0
1:01 - 2:00	3.0	0
2:01 - 3:00	3.0	0
3:01 - 4:00	4.5	0
4:01 - 5:00	4.5	2
5:01 - 6:00	5.0	2
6:01 - 7:00	5.0	4
7:01 - 8:00	5.5	4
8:01 - 9:00	5.5	6
9:01 - 10:00	6.0	6
10:01 - 11:00	6.0	8
11:01 - 12:00	6.5	8
12:01 - 13:00	6.5	10
13:01 - 14:00	7.0	10
14:01 - 15:00	7.0	12
15:01 - 16:00	7.5	12
16:01 - 17:00	7.5	14
17:01 - 18:00	8.0	14
Recovery Phase		
0:00 - 1:00	3.0	0
1:01 - 2:00	3.0	0
2:01 - 3:00	3.0	0

3. Start the stopwatch when the treadmill reaches 3 mph at 0% grade. Continue with this speed and grade for 3 minutes (steady state).
4. After completing the 3-minute steady state interval, inform the participant that the speed will increase to 4.5 mph.
5. Advise the participant that the assessment is a series of 1-minute intervals, alternating between speed and percent grade. All subsequent speed increases occur at 0.5 mph.
6. At 4:01 minutes, increase the grade from 0% to 2%. At this time, inform the participant that all subsequent grade increases occur at 2% intervals.
7. The assessment will continue until the participant's heart rate exceeds the THR rate for 15 seconds, or the subject exhibits the medical criteria for early termination.
8. Once the heart rate exceeds the Target Heart Rate (THR), note the time and continue the assessment for an additional 15 seconds. Do not make any changes to the assessment speed or grade during this time. If the participant's heart rate remains above the THR for the full 15 seconds, then stop the assessment and proceed to the cool-down phase. Record the total time, including the 3-minute warm-up, at which point the participant exceeds the THR. If the participant's heart rate exceeds the target, but then drops back to the THR or below within 15 seconds, then the assessment should continue.

The assessment is not complete until the participant's heart rate exceeds the THR for 15 seconds. If this does not occur within 18 minutes, then terminate the assessment and record the time.

9. Once the assessment is completed, the time is recorded. The participant should perform a cool-down for a minimum of 3 minutes at 3 mph, 0% grade. Continue to monitor the heart rate during the cool-down. Record the recovery heart rate at 1 minute of cool-down.

TERMINATE THE ASSESSMENT IF ANY OF THE FOLLOWING OCCURS:

- a. The THR is exceeded for 15 seconds.
- b. The THR has not been met after 18 minutes.
- c. The participant asks to terminate the exercise.
- d. The equipment malfunctions.
- e. Medical conditions arise that prohibit completing the assessment.

- Record the reason for terminating the assessment and the initial time the THR was exceeded (if applicable). Record time in minutes and convert second(s) into decimal. See Treadmill Formula and Table 5.6
- Use the test time (TT) the participant completed the assessment (i.e. exceeded the THR) along with the treadmill conversion formula to estimate VO₂ max.
- Record the VO₂ max.

STAIRMILL EVALUATION

Equipment

- StairMaster 7000 PT Stepmill
- 12 Lead Capable Recording Device.
-

Stairmill Evaluation

Figure 5.13



ASSESSMENT

The purpose of this assessment is to estimate the VO_2 max of each participant.

- Conduct Pre-Evaluation Procedures.
- Monitor the participant's heart rate continuously throughout the assessment.
- Instruct the participant to temporarily grasp the handrails to reduce the possibility of losing balance when the stairs begin to move.
- The starting position is approximately two-thirds of the way up the stairs.
- The assessment starts at level 4 for 2 minutes, then level 5 for 1 minute (warm-up period). Start the stopwatch once the Stepmill begins. Inform the participant that the evaluation is a series of 1-minute intervals with increasing work loads on each subsequent minute.
- Once the assessment commences, do not allow the participant to hold or lean on the handrails; this will result in overestimation of aerobic capacity.
- At the completion of the 3 minute-warm-up, proceed to level 7 for 1 minute. *Note: This is marked by increasing the workload from level 5 to level 7.
- Once the heart rate exceeds the Target Heart Rate (THR), note the time and continue the assessment for an additional 15 seconds. Do not make any changes to the assessment intensity level during this time. If the participant's heart rate remains above the THR for the

Time	Level	Step/min
0:00 – 1:00	4	46
1:01 – 2:00	4	46
2:01 – 3:00	5	53
3:01 – 4:00	7	65
4:01 – 5:00	8	75
5:01 – 6:00	9	82
6:01 – 7:00	10	89
7:01 – 8:00	11	97
8:01 – 9:00	12	104
9:01 – 10:00	13	111
10:01 – 11:00	14	118
11:01 – 12:00	15	126
12:01 – 13:00	16	133
13:01 – 14:00	17	140
14:01 – 15:00	18	147
15:01 – 16:00	19	155
Recovery Phase		
0:00 – 1:00	3	39
1:01 – 2:00	3	39

full 15 seconds, then the participant has completed the assessment. Stop the assessment and record the time at which the participant exceeded the THR. The total Test Time (TT) begins from the time the participant starts on the Stepmill, to the point at which the participant exceeds their THR. It does not include the final 15 second monitoring period that the heart rate was above the THR.

- The assessment is complete once the participant's heart rate exceeds the target for 15 seconds. If the participant's heart rate exceeds the target, but then drops down to the THR or below within 15 seconds, then the assessment should continue.
- Once the assessment is completed, the participant will cool down for a minimum of 2 minutes at level 3. Continue to monitor the heart rate during the cool-down. Record the recovery heart rate at one minute of cool-down. The participant may grasp the handrails during the cool-down phase.
- Upon completion of the cool-down, instruct the participant to grasp the handrails. Stop the stepmill and assist the participant off the apparatus.

TERMINATE THE ASSESSMENT IF ANY OF THE FOLLOWING OCCURS:

- The participant's heart rate exceeds THR for 15 seconds.
- The THR has not been met after 16 minutes.
- The participant asks to terminate the exercise.
- The equipment malfunctions.
- Medical conditions arise that prohibit completing the assessment.
- Record the reason for terminating the assessment and the initial time the heart rate had been exceeded (if applicable).
- Insert the test time (TT) at which the participant completed the assessment, along with the VO_2 Max
- Record the VO_2 max.

City of Myrtle Beach
INSURANCE REQUIREMENTS

PUBLIC LIABILITY AND PROPERTY DAMAGE

The Contractor shall purchase and thereafter maintain for the term of this agreement, and any subsequent extensions hereto, public liability insurance to protect Contractor from claims for bodily injury and/or property damage which may result from Contractor's performance of this agreement. The policy shall provide a combined single limit of liability of \$1,000,000 per occurrence for bodily injury and property damage with an aggregated limit of not less than \$1,000,000.

AUTOMOBILE LIABILITY

The Contractor shall purchase and thereafter maintain for the term of this agreement and any subsequent extensions hereto, comprehensive automobile liability insurance to protect the Contractor from claims for bodily injury and property damage which may arise from Contractor's use of motor vehicles in the performance of this agreement. The policy shall provide for a combined single limit of \$1,000,000 per occurrence for bodily injury and property damage.

WORKERS' COMPENSATION INSURANCE

Prior to beginning the work, the Contractor shall take out full compensation insurance for all persons which may be employed directly or indirectly in the performance of this agreement, coverage is to apply to all employees for statutory limits in compliance with the applicable state and federal laws. The policy must provide Employers Liability coverage in the amount of \$500,000 each accident; \$500,000 bodily injury by disease each employee and \$500,000 bodily injury by disease policy limit and shall be maintained in full force and effect during the term and any subsequent extensions hereto.

MEDICAL MALPRACTICE

The successful proposer shall maintain, for the term of this agreement, professional/malpractice liability insurance with \$1,000,000.00 limit per claim. Policy numbers and effective dates must be provided by the successful proposer within ten (10) days after Notice of Award. Policy must be maintained in full force and effect for three (3) years beyond acceptance by Owner.

EXCESS LIABILITY POLICY

At the option of the Contractor, the limits of the primary general liability, automobile liability and employer's liability policies may be less than stipulated herein, with an excess policy providing the additional limits needed. This form of coverage must be approved by the City and will only be acceptable when both the primary and excess policies include the coverage and endorsements required herein.

POLICY ENDORSEMENTS

The following requirements shall apply to the policy(s) indicated below:

A. General Liability and Automobile Liability

It is understood and agreed that the City of Myrtle Beach, its officials, agents and employees are recognized as additional insured under the policy and, as such, will be provided thirty (30) days written notice by mail of non-renewal, exhaustion of aggregate limit, modification of coverage or cancellation for any reason, and the company hereby agrees to provide such notice. Failure of the company to provide the required notice shall cause the coverage to continue in force for the benefit of the City, its officials, agents and employees until proper notification, as required herein, is provided, the provisions of the policy or any Certificate of Insurance to the contrary notwithstanding.

INSURANCE REQUIREMENTS continued

B. Workers' Compensation

The cancellation provision is hereby amended to provide that the City of Myrtle Beach will be provided thirty (30) days written notice via mail in the event of coverage cancellation.

NOTIFICATION OF INSURANCE COMPANIES

It is the responsibility of the Contractor to notify all insurance companies to familiarize themselves with all the terms and conditions of this agreement. The insurance companies shall waive their right of notification by the City of any change or modification of this contract, or of decreased or increased work, or of the cancellation of this agreement or of any other acts by the City or its authorized employees or agents under the terms of this agreement. The waiver by the insurance companies shall in no way relieve them of their obligations under this agreement.

CERTIFICATES OF INSURANCE

Contractor shall file with the City a Certificate of Insurance, which shall be approved by the City prior to the inception of any work. Renewal certificates shall be sent to the City thirty (30) days prior to any expiration date.

INSURER LICENSING AND RATING

All insurance companies providing coverage to the City, shall be licensed to do business in the State and have an A.M. Best rating of "A-" or better.

INSURANCE COVERAGE ADJUSTMENTS

In response to changing circumstance of loss exposures, the City reserves the right to modify the insurance coverage, limits of liability, policy endorsements and policy terms required in this contract. The City will provide written notice to the Contractor, which outlines such changes and allow Contractor a reasonable period of time in which to comply with the new requirements. However, in no event shall Contractor compliance period be longer than thirty (30) days.

COVERAGE CANCELLATION OR UNSATISFACTORY COVERAGE

If at any time any of the foregoing policies shall be or become unsatisfactory to the City, as to form or substance, or if a company issuing any such policy shall be or become unsatisfactory to the City, the Contractor shall, upon notice to that effect from the City, promptly obtain a new policy and submit the same for approval to the City. Upon failure of the Contractor to furnish, deliver and maintain the insurance coverage's required herein, this agreement, at the sole discretion of the City, may be forthwith declared suspended, discontinued or terminated. Failure of the Contractor to take out and/or maintain any required insurance shall not relieve the Contractor from any liability under this agreement, nor shall the insurance requirements be construed to conflict with or otherwise limit the obligations of the Contractor concerning indemnification.

HOLD HARMLESS

Contractor agrees to protect, defend, indemnify and hold the City, its officers, employees and agents free and harmless from and against any and all losses, penalties, damages, settlements, cost, charges, professional fees or other expenses and liabilities of every kind and character arising out of, or relating to, any and all claims, liens, demands, obligations, actions, proceedings or causes of action of every kind in connection with or arising out of this agreement, and/or the performance hereof, that are due to the negligence of the Contractor, its officers, employees or agents. The Contractor further agrees to investigate, handle, respond to, provide defense for and defend the same at its sole expense and agrees to bear all other costs and expenses related thereto.

INSURANCE REQUIREMENTS continued

SAMPLE

<i>CERTIFICATE OF INSURANCE</i>					CERTIFICATE NUMBER
PRODUCER Insurance Agent Name 4000 Insurance Pkwy Anytown, USA 99999		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.			
<i>COMPANIES AFFORDING COVERAGE</i>					
INSURED Bidding Firm's Name 1000 Any Street Anytown, USA 99999		COMPANY A ABC INSURANCE COMPANY COMPANY B COMPANY C COMPANY D			
<i>COVERAGES-THIS CERTIFICATE SUPERCEDES AND REPLACES ANY PREVIOUSLY ISSUED CERTIFICATE FOR THE POLICY NOTED BELOW</i>					
This is to certify that policies of insurance described herein have been issued to the insured named herein for the policy indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which the certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, conditions and exclusions of such policies. Aggregate limits shown may have been reduced by paid claims.					
CO LTR	<i>TYPE OF INSURANCE</i>	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<i>General Liability</i> <input checked="" type="checkbox"/> Commercial General Liability _ Claims Made <input checked="" type="checkbox"/> Occur _ Owners & Contractor's Prot	XYZ1234	00/00/00	00/00/00	General Aggregate Products-Comp/Op Agg \$ 1,000,000 Personal & Adv Injury \$ 1,000,000 Each Occurrence \$ 1,000,000 Fire Damage (any 1 fire) \$ 50,000
A	<i>Automobile Liability</i> <input checked="" type="checkbox"/> Any Auto _ All Owned Autos _ Scheduled Autos <input checked="" type="checkbox"/> Hired Autos <input checked="" type="checkbox"/> Non-Owned Autos	XYZ1234	00/00/00	00/00/00	Combined Single Limit \$ 1,000,000 Bodily Injury \$ (Per person) Bodily Injury \$ (Per accident) Property Damage \$
	<i>Garage Liability</i> _ Any Auto		00/00/00	00/00/00	Auto Only-Ea Accident \$ Other than auto only: Each Accident \$ Aggregate \$
	<i>Excess Liability</i> _ Umbrella Form _ Other than Umbrella Form		00/00/00	00/00/00	Each Occurrence \$ Aggregate \$
A	<i>Workers Compensation</i> (and Employer's Liability) The Proprietor/Partners Executive Officers Are: <input checked="" type="checkbox"/> Inc _ Excl	XYZ1234	00/00/00	00/00/00	<input checked="" type="checkbox"/> WC Statutory Limits _ Other EL Each Accident \$ 500,000 EL Disease-Policy Ltd \$ 500,000 EL Disease-Ea Employee \$ 500,000
	<i>Other</i>				
Description of Operations/Locations/Vehicles/Special Items: City of Myrtle Beach is named as additional insured with respect to General and Automobile Liability					
CERTIFICATE HOLDER			CANCELLATION		
City of Myrtle Beach Attn: Purchasing Division Drawer 2468 Myrtle Beach, SC 29578-2468			Should any of the policies described herein be cancelled before the expiration date thereof, the insurer affording coverage will endeavor to mail 30 days written notice to the certificate holder named herein, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer affording coverage, its agents or representatives, or the issuer of this certificate.		
<i>INSURANCE AGENT SIGNATURE</i>					