



ARLINGTON COUNTY, VIRGINIA
AGREEMENT NO. 17-050-ITB-LW-5

AMENDMENT NUMBER 1

This Amendment Number 1 ("Amendment") is made on the date of execution by the County and amends Arlington County Agreement Number 17-050-ITB-LW-5, dated December 1, 2016 ("Main Agreement"), and made between R.E. Lee Electric Company, Inc., P.O. Box 280, Newington, VA 22122 ("Contractor"), a Virginia Corporation authorized to transact business in the Commonwealth of Virginia, and the County Board of Arlington County, Virginia ("County").

Whereas the County and the Contractor desire to amend the Contract Term of the Main Agreement, the Contractor and the County, in consideration of the promises and other good and valuable consideration specified in this Amendment, amend the Main Agreement as follows:

I. Amend Paragraph 3 ("Contract Term"), Page 1 of the Main Agreement to read as follows:

3. CONTRACT TERM

The Work shall commence on the date of the execution of the Agreement by the County, and shall be completed no later than October 31, 2018 ("First Subsequent Contract Term"), subject to any modifications as provided for in the Contract Documents. Upon satisfactory performance by the Contractor and with the concurrence of the Contractor, the County may, through issuance of an amendment executed by the parties, authorize continued operations of the Contractor under the same contract prices for not more than three (3) additional twelve (12) month periods from November 1, 2018 to October 31, 2021 (each such period shall be referred to as a "Subsequent Contract Term").

All other terms and conditions of the Main Agreement, as amended, shall remain in full force and effect.

WITNESS THESE SIGNATURES:

THE COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA

R.E. LEE ELECTRIC COMPANY, INC.

AUTHORIZED SIGNATURE: [Signature]

AUTHORIZED SIGNATURE: [Signature]

FOR TADJ SCHEERAKOV

[Signature]

PRINT NAME: MICHAEL BEVIS

PRINT NAME: ROY E LEE

TITLE: PURCHASING AGENT

TITLE: PRESIDENT

DATE: 10/31/2017

DATE: 10-26-2017

ARLINGTON COUNTY AGREEMENT 17-050-ITB-LW-5
AWARDED EQUIPMENT LIST

The following line items are awarded to R.E. LEE ELECTRIC CO, INC under contract 17-050-ITB-LW-5

ITM NO	DESCRIPTION	Qty Awarded, EA	Hourly rate, USD	Hourly standby rate, USD	Moving Charge USD
5	Walk Behind Snow Blower w/Operator	8	83.00	83.00	83.00
13	Backhoe w/Bucket & Operator	3	195.00	195.00	195.00
16	Small Dump Truck (1 ton), Plow only & Operator	5	145.00	145.00	145.00
26	Supervisor	As Needed	95.00	95.00	95.00
27	Mechanic	As Needed	68.00	68.00	68.00

Other equipment offered by the Bidder may be requested by the County for large snow events at the rates indicated on the bid form.

PRICING

Type of Equipment/Operators Required Locations

Item to be Used	Roads/Bridges/ Sidewalks	Hauling & Snow Melter	Wastewater Treatment Plant	Facilities	Bus Stops, Shelters & Facilities	Trades Center	Trails & Parks	Hourly Rate Work	Hourly Rate Standby	Moving Charge	Notice Required to Mobilize to a County location (Hours)	# of Units Available
Equipment To be used												
1 Non Skilled Operator w/ Transportation	X			X	X	X	X	58.00	58.00	58.00	2	12
2 Semi-Skilled Operator w/ Transportation	X			X	X	X	X	68.00	68.00	68.00	2	8
3 Non Mechanized Hand Tool with Operator	X		X	X	X	X	X	n/a				
4 Walk behind Power Brush with Operator	X		X	X	X	X	X	n/a				
5 Walk behind Snow Blower with Operator	X		X	X	X	X	X	83.00	83.00	83.00	2	8
6 Utility Work Machine with Operator (plow)			X	X	X	X	X	145.00	145.00	145.00	2	4

Continued on next page



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/27/2017

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).

PRODUCER Georgetown Insurance Service, Inc. 10010 Colesville Road Suite A Silver Spring MD 20901	CONTACT NAME: Lauri Schloz	
	PHONE (A/C No. Ext): (301) 681-9645	FAX (A/C, No): (301) 593-2590
E-MAIL ADDRESS: lauri@georgetownins.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Selective Insurance		12572
INSURER B: Hartford		34690
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 07-01-17/18 **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 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		S2226756	7/1/2017	7/1/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS	X		S2226756	7/1/2017	7/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0	X		S2226756	7/1/2017	7/1/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	42WBQ10175	7/1/2017	7/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Installation Floater Leased/Rented Equipment			S2226756	7/1/2017	7/1/2018	\$ 500,000 \$ 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Arlington County Agreement 17-050-ITB-LW-5 for Snow Removal Services. Arlington County, VA is named as additional insured per attached form CG7300.

CERTIFICATE HOLDER

The County Board of Arlington County, VA
 c/o The Purchasing Agent
 2100 Clarendon Boulevard
 Suite 500
 Arlington, VA 22201

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Remie Butchko/LAURI 

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