

### **ERIE COUNTY WATER AUTHORITY**

INTEROFFICE MEMORANDUM

August 21, 2018

To: Terrence D. McCracken, Secretary to the Authority

From: Leonard F. Kowalski, Senior Distribution Engineer

Subject: Contract GHD-007 Guenther Pump Station Rehabilitation ECWA Project No. 201800138

The following material is attached:

- Blue Authorization Form for Risk Manager and Legal Department approval. The Blue Authorization Form is requesting Board Authorization to execute the attached Professional Service Contract.
- Professional Service Contract for the above referenced project.

Guenther Pump Station is located on Pleasant Ave in the Town of Hamburg. The Pump Station was constructed in the 1970's and has had several minor upgrades since. The pump station utilizes a 5 MG ground storage tank when in operation and has five pumps; pump 3 is out of service, pumps 1, 2, and 4 are high capacity pumps (~17-28 MGD) and pump 5 is a 150 hp pump that is used to circulate water in the tank. As the station sits right now, it is typically used during periods of high system demand and during emergencies. The intent of this project is to rehabilitate the pump station, so it can be used on a daily basis which will help improve the hydraulic capacity of the distribution system and improve redundancy and resiliency.

LFK:jmf Attachments cc: R.Stoll CONT-GHD-007-1801-011

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Project No. 201800138 Contract GHD-007

### PROFESSIONAL SERVICES CONTRACT

AGREEMENT made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_, by and between

**ERIE COUNTY WATER AUTHORITY** 295 Main Street, Room 350 Buffalo, New York 14203

hereinafter referred to as the "Authority", and

### GHD

285 Delaware Avenue, Suite 500 Buffalo, New York 14202

hereinafter referred to as "Consultant".

WHEREAS, the Authority desires to contract with the Consultant to render professional services upon the terms and for the consideration hereinafter stated;

WHEREAS, the Consultant represents that it is properly qualified to render such services, and

WHEREAS, the parties desire to set forth herein the terms and conditions under which the said professional services will be furnished,

**NOW, THEREFORE,** in consideration of mutual promises herein set forth, the parties agree as follows:

### 1. **QUALIFICATIONS OF CONSULTANT:**

The Consultant shall perform its services under this agreement in a skillful and competent manner in accordance with the prevailing standards of the consulting profession. The Consultant will be responsible to the Authority for errors or omissions in the performance of its services and failure to perform thereof.

### 2. <u>SCOPE OF SERVICES:</u>

### A. PROJECT DESCRIPTION:

Guenther Pump Station is located on Pleasant Ave in the Town of Hamburg. The Pump Station was constructed in the 1970's and has had several minor upgrades since. The pump station utilizes a 5 MG ground storage tank when in operation. The pump station has five pumps; pump 3 is out of service, pumps 1, 2, and 4 are high capacity pumps (~17-28 MGD) and pump 5 is a 150 hp pump that is used to circulate water in the tank. Besides pump 5, the pump station is typically only used during periods of high system demand during the summer and will sometimes sit idle for several years. In addition to being used during high demand periods, the pump station is also used during emergencies to supply

additional pressure to the distribution system while the system is operating at a reduced capacity.

This scope of work for this contract is as follows:

- 1. Evaluate existing hydraulic capacity of the pump station and associated storage tank and provide options for either rehabilitating the existing pumps, installing new pumps or a combination of both rehabilitating and replacing pumps. The use of VFD's on existing pumps and new pumps shall be evaluated.
- 2. Replace existing 5 Kv electrical substation.
- 3. Provide standby electrical generator for either 480 volt or 4160 volt pumps.
- 4. Specification for Arcflash, short circuit and coordination study to be performed under the construction contract.
- 5. Electrical and instrumentation improvements including SCADA.
- 6. Evaluate existing valves and actuators. Make recommendations for rehabilitation or replacement.
- 7. Interior and yard piping improvements, including site drainage.
- 8. Architectural, structural, HVAC, and electrical improvements to the Pump Station including new roof, doors, floor grating, lighting, ventilation, brick façade, and bridge crane rehabilitation. The valve house near the tank will require similar building improvements.
- 9. Evaluate perimeter security fencing and lighting

### **B. ENGINEERING SERVICES:**

Consultant shall provide all engineering services necessary to design and install the improvements described in Section A, including, but not limited to, the following:

### 1. Design Report

Upon authorization from the Authority, the Consultant shall complete the following services:

- a. Organize and attend project kickoff meeting with Authority. Discuss project team, communications, goals, schedule, and information needs.
- b. Obtain and review plans, specifications, and other records furnished by the Authority.
- c. Conduct site visits with appropriate project personnel to identify extent of rehabilitation efforts to building envelope; building heating, ventilation, and electrical systems; interior and exterior doors; stairs and landings; bridge crane; and bathroom.
- d. Obtain and analyze two core samples of the roof, samples of the roof flashing, and two samples of pipe insulation to determine the presence of asbestos-containing materials (ACM). Paint samples from Pumps 3 and 4 will be

collected and analyzed for lead-based paint. Paint samples from piping will also be analyzed for lead based paint.

- e. Evaluate hydraulic capacity of pump station and evaluate options for rehabilitating existing pumps or installing new pumps or combination of new and existing pumps. The use of VFD's on new or existing pumps shall be evaluated.
  - Utilize the current ECWA water model to develop a technical approach, scope and budget for the analysis and design of the pump(s) for the Guenther Pump Station.
    - a) <u>Assumptions:</u> The existing model has been calibrated and no additional calibrations or updates (i.e., new/replacement pipelines, demand allocations, pump curves, tanks, etc.) are required.
  - 2) Review the primary Guenther pump Station service area and the different operational scenarios listed below:
    - a) Eden 1 (all subsystem pump stations and tanks)
    - b) Clark (secondary supply from Horner, which is supplied from Sturgeon Point)
    - c) Analyze the operation of Guenther PS on a continual basis with the interaction with Windom Pump Station and Tank. Guenther and Windom tank levels will need to be closely monitored with Guenther in continuous operation.
    - d) There are cone valves located on the discharge header in High Service at Sturgeon Point which allow the station to be operated at two different discharge gradients. The operation of Sturgeon Point at two different discharge gradients and the effect it has on Guenther Pump Station shall be evaluated.
    - e) The use of Guenther Pump Station to supply water to the Hamburg Pressure zone shall be evaluated.
    - f) **Note:** The model will be isolated to only the above mentioned scenarios for simulations.
  - 3) Authority will provide current pump control logic (ie.e., pump "ON" at XX, pump "OFF" at YY, etc.) of the Guenther service area pump stations.

- 4) Authority will provide the past 10 years of daily pumping records (flow and pressure) for the Guenther Pump Station and service area pump stations. This information will be utilized to determine minimum, average, maximum, and peak demands.
- 5) Develop a demand curve (diurnal curve) for minimum, average, maximum, and peak demands.
- 6) Develop up to four pump arrangement options with four flow scenarios (minimum, average, maximum, and peak) and run a 5-day (week days) extended period simulation and generate a report table.
- 7) Determine a recommended pump design point for the new Guenther pump based on the existing conditions simulation results.
- 8) Run the simulations with the recommended pump, identify which efficiently hits the design point under the above conditions, and generate a table to compare existing vs. proposed conditions.
- f. Develop approach, scope, and budget for replacing 5 kV substation. Prepare proposed one-line diagram and site schematic.
- g. Develop approach, scope, and budget for new standby generator for pump station.
- h. Evaluate existing valves and actuators making recommendations for rehabilitation or replacement.
- i. Evaluate interior and yard piping for improvements, developing approach, scope, and budget. CCTV existing sewer lateral to determine condition.
- j. Develop approach, scope, and budget for perimeter security fencing and site lighting rehabilitation.
- k. Summarize findings in a draft report and submit to the Authority for review and comment. Meet with Authority to discuss comments. Revise and report addressing comments and submit five copies of final report to Authority.
- 1. Evaluate construction staging and site constraints.
- m. Evaluate the operational needs of the Authority during construction.
- n. Develop project schedule and preliminary cost estimates, including cash flow projections.

### 2. <u>Survey</u>

Upon authorization from the Authority, the Consultant shall complete the following services.

a. Obtain field topographic survey data for the preparation of construction plans required for final design of the project.

Survey data is to be according to NAD83 and NAVD88 standards.

### 3. Design

Upon authorization from the Authority, the Consultant shall complete the following services.

- a. Prepare detailed design drawings, specifications and contract documents. Tasks include, but are not limited to:
  - 1) Conferences with the Authority, agencies, etc., as necessary and as required.
  - 2) Report to the Authority bi-weekly on the progress of the work via email, with the following information:
    - a) Work performed over the last two weeks.
    - b) Work scheduled for the next two weeks.
    - c) Schedule status/deliverable status. Attach an updated project schedule (in Microsoft Project format) identifying all project milestones and current project status.
    - d) Budget status/percent complete.
    - e) Input needed from ECWA or others.
    - f) Other issues/concerns.
    - g) Scope changes.
  - 3) Review of available drawings and records furnished by the Authority.
  - 4) Preparation of base drawings in AutoCAD version 2014 from the survey data obtained in the survey phase and the available records furnished by the Authority and other agencies.
  - 5) Preparation of engineering calculations to support the design of the improvements, including related civil, hydraulic, mechanical, electrical, structural, and architectural features of the project.
  - 6) Submission of the plans to various utility companies and agencies and all coordination, as required, to incorporate all existing utilities within the project limits.
  - 7) Preparation of final plans, profiles, and job specific detail drawings that include editing of the Authority's standard detail drawings where appropriate.
  - 8) Preparation of a "Project Manual", including contract specifications that include editing of the Authority's standard "front end" specifications and standard technical specifications where appropriate, preparation of additional technical specifications as

required, and inclusion of necessary appendices providing supporting information.

- 9) Obtaining New York State Wage Rates and inserting them into the specifications.
- 10) Preparation of a quantity take-off and a construction cost estimate.
- 11) Preparation of an engineering report and submission with contract specifications, drawings, application forms and fees to Erie County Health Department for approval.
- 12) Attendance at a final design meeting with the Authority.
- b. Prepare engineering data, where necessary, with regard to regulatory permit applications as required to obtain local, state, federal and public utility approval for the initiation and construction of the work.
- c. Furnish to the Authority five (5) sets of drawings, specifications and other contract documents, for final review by the Authority and other approving agencies. Supply electronic (.pdf) versions of drawings and Project Manual to the Authority.
- d. Prepare documentation for compliance with New York State SEQR (Type II actions) and SWPPP.
- e. Prepare a schedule for the project utilizing the Authority's standard format (Microsoft Project). The project schedule shall be updated as needed.

### 4. <u>General Services</u>

Upon authorization from the Authority, the Consultant shall complete the following services.

- a. Furnish twenty (20) sets of contract drawings, final specifications, and other documents required for bidding and construction purposes for each contract.
- b. Conduct a pre-bid meeting when appropriate.
- c. Prepare and distribute addenda.
- d. Provide assistance to the Authority in securing bids, tabulating bid results, analyzing bid results, and making recommendations on the award of each construction contract.
- e. Provide pre-construction meeting notice to all municipalities, utility companies, fire districts, and all other interested parties, conduct a pre-construction meeting and distribute minutes.
- f. Supply an approved contractor's schedule for construction of the project.

- g. Provide detailed initial stakeout (once only), including bench marks, reference and axis lines along the routes of the construction or where necessary.
- h. Give consultation and advice to the Authority during construction.
- i. Prepare elementary sketches and supplementary sketches, if required, to resolve actual field conditions encountered.
- j. Interpret contract documents and resolve problems as to amount, quality, acceptability, and fitness.
- k. Review the contractor's submittals of material and/or equipment for compliance with the Consultant's design concept and take appropriate action such as but not limited to: "approved", "approved as corrected", "revise and resubmit"; or "not approved".
- 1. Furnish general construction inspection as to quality and quantity of the contractor's work as the construction progresses in order to recommend partial payment.
- m. Coordinate with all Authority's customers within the project area regarding the construction work.
- n. Schedule and attend progress meetings.
- o. Report to the Authority bi-weekly on the progress of the work via email, with the following information:
  - 1) Summary of the work performed in the previous two-week period.
  - 2) Attach an updated project schedule (in Microsoft Project format) identifying all project milestones and current project status.
  - 3) Forecast of all upcoming work and project costs expected for the project. Identify any contract items which may exceed bid quantities.
  - 4) Attach copies of final inspection reports (in .pdf format) for reports in the previous two-week period.
- p. Notify the Authority when a change in the work is proposed which will cause an adjustment in the contract cost. Evaluate whether the proposed change is justified and reasonable, and if necessary prepare change orders, field directives, and make recommendations for approval. Discuss changes in the plans or procedures authorized by the Consultant with the Authority prior to implementation. Obtain approval for all change orders from the Board of Commissioners prior to implementation.
- q. When new waterlines are placed into service, notify the appropriate fire districts in writing, identifying addresses of new hydrants placed into service and existing hydrants soon to be removed from service. A copy of this letter shall also be sent to the Authority.

- r. Check line and grade for preparation of record drawings.
- s. Make a final inspection, furnish a report on project completion, and make recommendations for final payments to contractors and for the release of retained amounts, if any.

### 5. <u>Resident Inspection</u>

Upon authorization from the Authority, the Consultant shall complete the following services.

- a. Provide technical inspection of construction by a full-time resident engineer and/or inspectors as required, who will:
  - 1) Inspect all work to determine the progress, quality, quantity and conformance of the work in accordance with contract documents.
  - 2) Notify customers prior to start of construction.
  - 3) Prepare daily inspector reports.
  - 4) Review, verify and approve requests for monthly and final payments to contractors, based on quantities of work put in place.
  - 5) Provide bi-weekly updates via email summarizing the Resident Inspection costs and projecting future Resident Inspection costs for the duration of the project.

### 6. <u>Record Drawings</u>

Upon authorization from the Authority, the Consultant shall complete the following services.

- a. Provide record drawings, including the basemapping, (on AutoCAD Version 2014) of all completed work according to the latest ECWA As-Built Standards. Update the existing ECWA valve and hydrant details to reflect the completed work. Furnish one set of mylar transparencies and all AutoCAD files on CD of these drawings to the Authority.
- b. Provide horizontal and vertical coordinates using survey grade Real Time Kinematic (RTK) GPS with horizontal centimeter level accuracy and best possible vertical precision given the environmental conditions during collection for all mainline valves, hydrants, hydrant valves, permanent blow-offs, and meter pits. Coordinates shall be presented as points within an ESRI geodatabase feature class, or provided in Microsoft Excel, Microsoft Access, or .dbf format. At a minimum, the coordinate file shall contain a Northing, Easting, Elevation, horizontal precision, vertical precision, and Description for each feature.
- c. Record Drawings and coordinates to be based on the NY State Plane Coordinate System West Zone. Data is to be

according to NAD83 and NAVD88 datums. Coordinates shall be provided in Microsoft Excel, Microsoft Access, or .dbf format. At a minimum, the coordinate file shall contain a Northing, Easting, Elevation, and Description for each feature.

d. Submit two stamped/signed full size sets, AutoCAD files, .pdf version of the drawings and Project Manual (with addenda) and GPS coordinates no later than one month after final payment of the Construction Contract is recommended for approval and in accordance with Authority Standards.

### C. <u>SPECIAL SERVICES</u>

The Authority may require the Consultant to provide or arrange for and assist in obtaining one or more of the following special services in carrying out the project. Because it is not possible to determine in advance the need for or the cost of such services, these are included as separate elements of cost which shall be separately negotiated. These services include:

- 1. Soils Investigations including test borings, pavement cores, and the related analysis.
- 2. Detailed mill, shop and/or laboratory inspection of materials and equipment.
- 3. Land surveys, maps, plates, descriptions and title investigations which may be required to acquire lands, easements, and rights-of-way for the proposed facilities.
- 4. Additional copies of reports, contract drawings and documents.
- 5. Extra travel and subsistence for the Consultant and his staff beyond that normally required under ordinary circumstances, when authorized by the Authority.
- 6. Assistance to the Authority serving as an expert witness in litigation arising from project development or construction.
- 7. New York State SEQR (Type I and Unlisted Actions).
- 8. Air, water, and/or soil sampling, testing, and/or analysis.
- 9. Operation and maintenance manuals.
- 10. Start-up services.
- 11. Hazardous material testing and assessment.
- 12. Wetlands investigations, delineation, and mitigation.
- 13. Field or shop testing of existing mechanical or electrical equipment for vibration, insulation resistance, efficiency, net positive suction head, shutoff head, pump performance, system curve development or other tests that require calibrated testing equipment.

### 3. <u>PAYMENT FOR SERVICES:</u>

**A.** The Consultant agrees to accept a lump sum payment for all services to be provided herein except for Resident Inspection which shall be paid per the schedule included in paragraph 3.D.2. The methods of payment are as follows.

### 1. Design Report

For services described under Section 2B1, Design Report, the Authority shall pay Consultant a lump sum which will include all expense, labor and cost associated with this task. Payment will be made monthly based on the percentage of completion up to 100% of the total lump sum amount.

### 2. <u>Survey</u>

For services described under Section 2B2, Survey, the Authority shall pay Consultant a lump sum which will include all expense, labor and cost associated with this task. Payment will be made monthly based on the percentage of completion up to 100% of the total lump sum amount.

### 3. Design

For services described under Section 2B3, Design, the Authority shall pay Consultant a lump sum which will include all expense, labor, and cost associated with this task. Payment will be made monthly based on the percentage of completion up to 70% of the total lump sum amount. After submission by the Consultant to the Authority of a draft set of contract documents, payment will be made monthly based on the percentage of completion up to 90% of the total lump sum amount. The balance will be paid when the final contract documents are submitted to the Authority.

### 4. General Services

For services described under Section 2B4, General Services, the Authority shall pay Consultant a lump sum which will include all expense, labor and cost associated with this task. Payment will be made monthly based on the percentage of completion up to 100% of the total lump sum amount.

### 5. **<u>Resident Inspection</u>**

For services described under Section 2B5, Resident Inspection, the Authority shall pay Consultant the payable hourly rates listed under 3D2 and direct non-salary expenses. Overtime premium will be paid at 50% of the Resident Inspectors' direct hourly rate in addition to the payable hourly rate listed under 3D2. Payment for Resident Inspection and expenses will be made monthly.

### 6. <u>Record Drawings</u>

For services described under Section 2B6, Record Drawings, the Authority shall pay Consultant a lump sum which will include all expense, labor and cost associated with this task. Payment will be made monthly based on the percentage of completion up to 70% of the total lump sum amount. After submission by the Consultant to the Authority of draft record drawings, payment will be made monthly based on the percentage of completion up to 90% of the total lump sum amount. The balance will be paid when the final record drawings are submitted to the Authority.

### **B. SPECIAL SERVICES**

For services described under Section 2C, Special Services, the Authority shall pay Consultant an amount to be negotiated at the time such service is required. Costs for such special services shall not exceed \$40,000.00.

### C. AUDIT

The Authority reserves the right to audit the Consultant's records to verify bills submitted and representations made. For this purpose, the Consultant agrees to make company records available for inspection upon written notice by the Authority. The Authority shall have two years from the date of the Consultant's final bill to complete its audit. If the audit establishes an overcharge, Consultant agrees to refund the excess.

### D. ENGINEERING COST SCHEDULE

1. Engineering Costs:

Design Report	\$107,000.00
Survey	\$11,000.00
Design	\$209,700.00
General Services	\$91,100.00
Record Drawings	\$5,900.00
TOTAL ENGINEERING COST	\$424,700.00

### 2. Resident Inspection Hourly Rates

		Employee
	Payable	Direct Hourly
	Hourly Rate	Rate
Project Engineer/Inspector	\$128.00	\$42.60
Construction Engineer/NICET IV	\$160.00	\$53.30

The dollar amount for Estimated Resident inspection is based on the assumption of 1,600 hours of Project Engineer/Inspector Payable Hourly Rate and 160 hours of Construction Engineer/NICET IV Payable Hourly Rate during the duration of the project. Payment will be made for actual hours worked during the duration of construction. Actual hours will vary based on production rates of the Contractor during construction, unforeseen circumstances that develop during construction, and weather conditions.

Estimated Resident Inspection	\$230,400.00
TOTAL NOT TO EXCEED:	\$250,000.00

3. Other Costs:

Mileage	IRS rate
Subcontractor Expenses	Cost plus 5% maximum
All Other Direct Non-Salary Costs	At Cost
Estimated Direct Non-Salary Costs	\$10,500.00

- 4. <u>SUBCONTRACT AND ASSIGNMENT</u>: The Consultant may not subcontract or delegate any of the work, services, and/or other obligations of the Consultant without the express written consent of the Authority. The Authority and the Consultant bind themselves and their successors, administrators and assigns to the terms of this Agreement. The Consultant shall not assign, sublet or transfer its interest in the Agreement without the written consent of the Authority.
- 5. <u>AMENDMENTS</u>: No modification or variation from the terms of this Agreement shall be effective unless it is in writing and authorized by a resolution of the Board of Commissioners of the Authority and signed by all parties.
- 6. <u>**RIGHT TO TERMINATE:**</u> The Authority reserves the right to terminate the Consultant's services at any time, without cause, based on seven (7) days' written notice. Consultant shall not be entitled to lost profit and shall perform only such services, after notification of termination, as the Authority directs.
- 7. **INDEMNIFICATION:** The Consultant shall indemnify the Authority against any and all claims arising from the services performed by the Consultant herein and shall defend and hold harmless the Authority from and against all claims, suits, actions, costs, counsel fees, expenses, damages, judgments or decrees based upon or arising out of damage to property or injury to persons or other tortious conduct caused or contributed to it by the Consultant or anyone under its direction or control or on its behalf in the course of its performance under this Agreement. The Consultant further agrees to indemnify, defend and hold harmless the Authority from any and all claims in reference to the services performed by the Consultant hereunder which may infringe on a patent, copyright, trade secret or other proprietary right of any third party.
- 8. <u>CONFIDENTIAL INFORMATION</u>: In order to assist the Consultant in the performance of this Agreement, the Authority may provide the Consultant with confidential information including, but not limited to information relative to the services to be performed. All information received by the Consultant in any fashion and under any conditions resulting from the rendering of the services in consideration of this agreement, are considered confidential. The Consultant shall hold in confidence and not disclose to any person or any entity, any information regarding information learned during the performing of services including but not limited to information relative to the services to be performed.

The Consultant shall use at least the same degree of care to protect and prevent unauthorized disclosure of any confidential information as it would use to protect and prevent unauthorized disclosure of its own proprietary information. The Consultant shall use confidential information only in the performance of this Agreement. No other use of the confidential information whether for the consultant's benefit or for the benefit of others shall be permitted.

In no event is the Consultant authorized to disclose confidential information without the prior written approval of the Authority. Consultant may provide such information to its subconsultants for the purpose of performing the services; or disclose such information, with notice to the Authority, if such information is required to be disclosed by law or court order. The terms of this paragraph shall be binding during and subsequent to the termination of this agreement.

- 9. <u>INSURANCE</u>: The Consultant shall secure and maintain such insurance as will protect itself from claims under the Workers' Compensation Act; claims for damages because of bodily injury, including personal injury, sickness or disease, or death of any of its employees or of any person other than its employees; and from claims for damages because of injury to or destruction of property including loss of use resulting therefrom in the amounts indicated on Exhibit A. The Consultant shall provide and maintain insurance that will provide coverage for claims arising out of the negligent performance of its services. The Consultant shall provide Certificates of Insurance certifying the coverage required by this provision.
- 10. <u>COPYRIGHTS, TRADEMARKS, AND LICENSING</u>: All materials produced under this Agreement, whether produced by the Consultant alone or with others, and whether or not produced during regular working hours, shall be considered work made for hire and the property of the Authority. The Consultant shall, during and subsequent to the terms of this Agreement, assign to the Authority, without further consideration, all right, title and interest in all material produced under this Agreement. All material produced under this Agreement shall be and remain the property of the Authority whether or not registered.

In performing work under this agreement, the Consultant may be granted access to the Authority's GIS data, documents, and other information. The Consultant understands and agrees that the use of such data, documentation and information shall be treated as confidential information and the Consultant shall abide by the terms and conditions of any confidentiality and copyright leasing agreements (attached as Exhibit B).

11. <u>NEW YORK LAW AND JURISDICTION</u>: Notwithstanding any other provision of this Agreement, any dispute concerning any question of fact or law arising under this Agreement which is not disposed of by agreement between the Consultant and the Authority shall be governed, interpreted and decided by a Court of competent jurisdiction of the State of New York in accordance with the laws of the State of New York.

- 12. <u>CONFLICTS OF INTEREST</u>: The Consultant represents that it has advised the Authority in writing prior to the date of signing this Agreement of any relationships with third parties, including competitors of the Authority, which would present a conflict of interest with the rendering of the services, or which would prevent the Consultant from carrying out the terms of this Agreement or which would present a significant opportunity for the disclosure of confidential information. The Consultant will advise the Authority of any such relationships that arise during the term of this Agreement. The Authority shall then have the option to terminate the Agreement without further liability of the Consultant, except to pay for services actually rendered.
- 13. <u>ADDITIONAL CONDITIONS</u>: The Consultant and the Authority acknowledge that there may be additional conditions, terms and provisions which shall apply specifically to the services to be performed. The parties agree to negotiate in good faith to agree upon such additional terms.
- 14. <u>ENTIRE AGREEMENT</u>: This Agreement constitutes the entire understanding of the parties and no representations or agreements, oral or written, made prior to its execution shall vary or modify the terms herein. This Agreement supersedes all prior contemporaneous communications, representations, or agreements, whether oral or written with respect to the subject matter hereof and has been induced by no representations, statements or agreements other than those herein expressed. No agreement hereafter made between the parties shall be binding on either party unless reduced to writing and signed by an authorized officer of the party sought to be bound thereby.
- **15. INDEPENDENT STATUS**: Nothing contained in the Agreement shall be construed to render either the Authority or the Consultant a partner, employee or agent of the other, nor shall either party have authority to bind the other in any manner, other than as set forth in this Agreement, it being intended that the Consultant shall remain an independent contractor responsible for its own actions. The Consultant is retained by the Authority only for the purpose and to the extent set forth in this Agreement.

The Consultant is free to choose the aggregate number of hours worked and substantially all of the scheduling of such hours as it shall see fit at its discretion within the limitations set forth hereinbefore in Paragraph 2.

Neither the Consultant nor its employees shall be considered under the provisions of this Agreement or otherwise as having an employee, servant or agency status or as being entitled to participate in any plans, arrangements or distributions of the Authority.

In providing the services under this Agreement, the Consultant represents and warrants that it has complied with all applicable federal, state and local laws particularly with respect to licenses, withholdings, reporting and payment of taxes. The Consultant agrees to furnish copies of documentation to the Authority evidencing its compliance with such laws. The Consultant further represents and warrants that any income accruing to the Consultant and its employees from the Agreement shall be reported as such to the appropriate taxation authorities.

- 16. <u>COMPLIANCE</u>: The Consultant agrees that the Agreement herein shall be in compliance with and governed by the provisions of Section 2875, 2876 and 2878 of the Public Authorities Law of the State of New York. The Consultant further affirms under the penalties of perjury that there was no collusion in the proposal submitted herein to ECWA which forms the basis of the within Agreement.
- 17. <u>GRATUITIES</u>: The Consultant prohibits its employees from using their positions for personal financial gain, or from accepting any personal advantage from anyone under circumstance which might reasonably be interpreted as an attempt to influence the recipients in the conduct of their official duties. The Consultant or its employees shall not, under circumstances which might be reasonably interpreted as an attempt to influence the recipients to influence the recipients in the conduct of their official duties.
- **18. <u>NOTICE</u>:** Any notices required by this Agreement or otherwise shall be delivered by United States Postal mail or personal delivery upon the addresses hereinbefore stated. Any change in such addresses shall be required to be in writing to the other party and acknowledged as such.
- 19. <u>SEVERABILITY:</u> If any provision of this agreement shall be held invalid or unenforceable, in whole or in part, such provision shall be modified to the minimum extent necessary to make it valid and enforceable, and the validity and enforceability of all other provisions of this agreement shall not be affected thereafter.
- 20. <u>**TERMINATION:**</u> The Authority reserves the right to terminate this contract in the event it is found that the Certification filed by the Consultant in accordance with New York State Finance Law §139-k was intentionally false or intentionally incomplete. Upon such finding, the Authority may exercise its termination right by providing written notification to the Consultant in accordance with the written notification terms of this contract.

### ERIE COUNTY WATER AUTHORITY

By

Jerome D. Schad, Chairman

GHD

By\_\_\_

Robert P. Lannon, Jr., PE, Vice President

### STATE OF NEW YORK ) COUNTY OF ERIE ) ss:

On the \_\_\_\_\_ day of \_\_\_\_\_, in the year 20\_\_\_, before me personally came Jerome D. Schad, to me known, who, being by me duly sworn, did depose and say that he resides in Amherst, New York, that he is the Chairman of the Corporation described in the above instrument; and that he signed his name thereto by order of the Board of Directors of said Corporation.

Notary Public

STATE OF NEW YORK ) COUNTY OF ERIE ) ss:

On the \_\_\_\_\_ day of \_\_\_\_\_, in the year 20\_\_\_, before me personally came Robert P. Lannon, Jr., PE, to me known, who, being by me duly sworn, did depose and say that he resides in \_\_\_\_\_\_, New York, that he is the Associate of the Corporation described in the above instrument; and that he signed his name thereto by order of the Board of Directors of said Corporation.

Notary Public

### EXHIBIT A

### **INSURANCE REQUIREMENTS**

### ERIE COUNTY WATER AUTHORITY

	-								[		20/2018
C B	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.										
IN If	IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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										
		ertificate does not confer rights to	o the	cert	ificate holder in lieu of su	uch en CONTA		)			
PROP Will		of Massachusetts, Inc.				NAME:	. Exi): 1-877-	015-7379	FAX	1-898	-467-2378
		Century Blvd ox 305191				E-MAIL	ss: certific	ates@willi	16401 001		107 2070
		Lie, TN 372305191 USA				ADDIG			DING COVERAGE		NAIC #
									rance Company US Inc		19489
INSU GHD		sulting Services Inc.							nsurance Company		16535
		ington Park Drive					RC: Lexing	ton Insurar	ice Company		19437
Laze	31104	ia, NY 13035 USA				INSURE					
						INSURE					
·····					NUMBER: W7229167			the second s	REVISION NUMBER:		
IN Cl	DIC. ERT	IS TO CERTIFY THAT THE POLICIES ATED. NOTWITHSTANDING ANY RE IFICATE MAY BE ISSUED OR MAY I JSIONS AND CONDITIONS OF SUCH I	OUIA	EME AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	of an' Ed by	Y CONTRACT	or other i s describei	Document with Respect D Herein is subject to	OT TO	WHICH THIS
INSR LTR		TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	8	
	×	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			1				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
A			Y	¥	0310-4497		12/01/2017	12/01/2018	MED EXP (Any one person) PERSONAL & ADV INJURY	\$\$	1,000,000
	GE	I N'L AGGREGATE LIMIT APPLIES PER:		-	12525				GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO-			19489 AX	$\mathbf{V}$	1		PRODUCTS - COMP/OP AGG	\$	2,000,000
	[	OTHER:				V	·			\$	
									COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
в	×	ANY AUTO OWNED SCHEDULED	Y		BAP 3757423-03		07/01/2018	07/01/2019	BODILY INJURY (Per person) BODILY INJURY (Per accident)	\$ \$	
	×	AUTOS ONLY AUTOS HIRED X NON-OWNED			02562	,		• • • • • • • • • • • • •	PROPERTY DAMAGE (Per accident)	\$	
	X	CONTOPEDING			16535 A+XV				Bired Physical Damag	\$	100000
A	L	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	1,000,000
	×	EXCESS LIAB CLAIMS-MADE	x		1252519489	AVI	12/01/2017	12/01/2018	AGGREGATE	\$	1,000,000
	wo	DED RETENTION \$			1487	nN			X PER OTH-	\$	
в	ANI	EMPLOYERS' LIABILITY Y/N							E.L. EACH ACCIDENT	\$	1,000,000
-	OFF (Ma	ICER/MEMBEREXCLUDED?	N/A	Y	WC 0380936-03		07/01/2018	07/01/2019	E.L. DISEASE - EA EMPLOYEE		1,000,000
	lí ye DES	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000
С	Pr	ofessional Liab.		Y	031710989		12/01/2017	12/01/2018	Claim:\$1,000,000/Agg	\$2,00	D,000
					194350 AX						
		TION OF OPERATIONS / LOCATIONS / VEHICL									
GUL	, F.J	roject no.: 11158024, Guent	.ec	z citu <u>j</u>	, Practon VenaDitita	CTOR!	rro.	PULT T	901800030		
Certificate Holder is included as an Additional Insured as respects to General Liability, Auto Liability and Umbrella/Excess Liability where required by contract or agreement.											
General Liability where required by contract or agreement and Umbrella/Excess Liability policies shall be Primary and											
CE	RTI	FICATE HOLDER	<u> </u>			CAN	CELLATION				······································
APPROVED AUG 2 1 2018 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.											
		County Water Authority				AUTHO	RIZED REPRESE	NTATIVE	·····		<u></u>
		Anthony Alessi ain Street, Suite 350				1					
		lo, NY 14203					Julami		·····		
							© 19	88-2016 AC	ORD CORPORATION.	All rig	hts reserved.

ACORD 25 (2016/03)

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BATCH: 834329

Page 1 of 2 DATE (MM/DD/YYYY)

ACORD	
ACCAD	

### CERTIFICATE OF LIABILITY INSURANCE

AGENCY CUSTOMER ID: \_\_\_\_\_\_



ADDITIONAL REMARKS SCHEDULE

Page \_2\_of \_2\_

AGENCY		NAMED INSURED
Willis of Massachusetts, Inc.		GHD Consulting Services Inc.
POLICY NUMBER		One Remington Park Drive Cazenovia, NY 13035 USA
See Page 1		CARMICITAL NI ITATA AND
	NAIC CODE	
CARRIER See Page 1	NAIC CODE See Page 1	
	raye 1	EFFECTIVE DATE: See Page 1
ADDITIONAL REMARKS		· · · · · · · · · · · · · · · · · · ·
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACO	RD FORM,	
FORM NUMBER: 25 FORM TITLE: Certificate of		Insurance
Non-contributory with any other insurance in force		
The concernences with and concerning the role		
Waiver of Subrogation applies in favor of Certifi	icate Holde	r with respects to General Liability and Workers
		or permit where permissible by law or statute and
Professional Liability.		
Excess Liability follows form over General Liabil	lity, Auto	Liability and Employer's Liability.
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ACORD 101 (2008/01)		© 2008 ACORD CORPORATION. All rights reserved.
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Allied World Assurance Company (U.S.) Inc. - Company Profile - Best ... http://ratings.ambest.com/SearchResults.aspx?URatingId=2652973& ...

# **Rating Services**

# Allied World Assurance Company (U.S.) Inc.

A.M. Best #: 012525 NAIC #: 19489 Administrative Office 199 Water Street New York, NY 10038 United States

Web: www.awac.com

Phone: 646-794-0500 Fax: 212-635-5532 FEIN #: 954387273 View Additional Address Information

Assigned to insurance companies Financial Strangth Rating

that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on A.M. Best's analysis, 058364 - Fairfax Financial Holdings Limited is the AMB Ultimate Parent and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Financial Strength	Rating View Definition	Best's Credit Rating Analyst
Rating: Affiliation Code:	A (Excellent) g (Group)	Rating issued by: A.M. Best Rating Services, Inc.
Financial Size	XV (\$2 Billion or	Senior Financial Analyst: Darian Ryan
Category: Outlook: Action:	greater) Stable Affirmed	Director: Jennifer Marshall, CPCU, ARM
Effective Date: Initial Rating Date:	December 20, 2017 July 25, 2002	Disclosure Information Disclosure Information Form
Long-Term Issuer ( Definition	Credit Rating View	View A.M. Best's Rating Disclosure Form <b>Press Release</b> A.M. Best Removes From Under Review With Negative Implications, Affirms Credit Ratings of Allied World Assurance and Its Subs December 20, 2017
Long-Term:	a+	:
Outlook:	Stable	
Action:	Affirmed	
Effective Date:	December 20, 2017	

Lexington Insurance Company - Company Profile - Best's Credit Rati ...

http://ratings.ambest.com/SearchResults.aspx?URatingId=2652973& ....

# **Rating Services**

# Lexington Insurance Company

A.M. Best #: 002350 NAIC #: 19437 Administrative Office 99 High Street 23rd Floor Boston, MA 02110 United States

Web: www.aig.com

Phone: 617-330-1100

FEIN #: 251149494 View Additional Address Information

Assigned to insurance companies

anolal Strength Rat	ing
(LBEST)	
A Excellent	999 1

that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on A.M. Best's analysis, 058702 - American International Group, inc. is the AMB Ultimate Parent and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Rating	S	
Financial Strength	Rating View Definition	Best's Credit Rating Analyst
Rating: Affiliation Code:	A (Excellent) p (Pooled)	Rating Issued by: A.M. Best Rating Services Inc.
Financial Size Category: Outlook:	XV (\$2 Billion or greater) Stable	Senior Financial Analyst: Darian Ryan Senior Director: Michael J. Lagomarsino, CFA, FRM
Action: Effective Date: Initial Rating Date:	Affirmed June 20, 2018 June 30, 1966	Disclosure Information
Long-Term Issuer Credit Rating View Definition		<b>Disclosure Information Form</b> View A.M. Best's Rating Disclosure Form <b>Press Release</b> A.M. Best Affirms Credit Ratings of American
Long-Term: Outlook: Action: Effective Date:	a Stable Affirmed June 20, 2018	International Group, Inc. and Certain Subsidiaries June 20, 2018

### STATE OF NEW YORK WORKERS' COMPENSATION BOARD

### **CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE**

1a. Legal Name & Address of Insured (Use street address only) GHD Inc.	1b. Business Telephone Number of Insured
GHD Services Inc. GHD Consulting Services Inc. GHD Consulting Engineers, LLC One Remington Park Drive Cazenovia, NY 13035 Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy)	<ol> <li>NYS Unemployment Insurance Employer Registration Number of Insured 917814561</li> <li>Federal Employer Identification Number of Insured or Social Security Number</li> <li>98-0425935, 15-0430700, 16-1229774</li> </ol>
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)	3a. Name of Insurance Carrier Zurich American Insurance Company
Erie County Water Authority Attn: Anthony Alessi 295 Main Street, Suite 350 Buffalo, NY 14203	3b. Policy Number of entity listed in box "1a"         WC0380936       025 63         3c. Policy effective period         07/01/2018       07/01/2019
	3d. The Proprietor, Partners or Executive Officers are X included. (Only check box if all partners/officers included) all excluded or certain partners/officers excluded.

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. (To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy). The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The Insurance Carrier will also notify the above certificate holder within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.

Please Note: Upon the cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved by:	Leighton Thomas				
	(Print name of authorized representative or licensed agent of insurance carrier)				
Approved by:	highter Thomas	6/18/2018			
	(Signature)	(Date)			
Title:	Account Manager				

Telephone Number of authorized representative or licensed agent of insurance carrier:

Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue It.

C-105.2 (9-07)

APP	R	01	ED	AUG	2	ĩ	2018
					÷		T

www.wcb.state.ny.us

# **Rating Services**

# **Zurich American Insurance Company**

A.M. Best #: 002563 NAIC #: 16535 Administrative Office 1299 Zurich Way Schaumburg, IL 60196-1056 United States FEIN #: 364233459 View Additional Address Information

Web: www.zurichna.com Phone: 800-987-3373 Fax: 877-962-2567 Assigned to insurance companies that have, in our opini



that have, in our opinion, a superior ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on A.M. Best's analysis, 050457 - Zurich Insurance Group Ltd is the AMB Ultimate Parent and Identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Financial Strength Rating View Definition		Best's Credit Rating Analyst
Rating: Affiliation Code:	A+ (Superior) g (Group)	Rating Issued by: A.M. Best Rating Services, Inc.
Financial Size	XV (\$2 Billion or	Senior Financial Analyst: Darian Ryan
Category: Outlook: Action:	greater) Stable Affirmed	Senior Director: Michael J. Lagomarsino, CFA, FRM
Effective Date:	December 08, 2017	
Initial Rating Date	June 30, 1922	Disclosure Information
Long-Term Issuer Credit Rating View Definition		Disclosure Information Form View A.M. Best's Rating Disclosure Form
		<b>Press Release</b> A.M. Best Revises Outlooks to Stable for Zurich Insurance Group Ltd and Its Main Rated Subsidiarles
Long-Term:	aa-	December 08, 2017
Outlook:	Stable	:
Action:	Affirmed	
Effective Date:	December 08, 2017	

### STATE OF NEW YORK WORKERS' COMPENSATION BOARD

### CERTIFICATE OF INSURANCE COVERAGE UNDER THE NYS DISABILITY BENEFITS LAW

PART 1. To be completed by Disability Benefits Carrier or Licensed Insurance Agent of that Carrier					
ia. Legal Name and Address of Insured (Use street address only)	1b. Business Telephone Number Of Insured				
GHD INC. GHD Services Inc. GHD Consulting Services Inc.	1c. NYS Unemployment Insurance Employer Registration Number of Insured				
GHD Consulting Services Inc. GHD Consulting Engineers, LLC ONE REMINGTON PARK DRIVE CAZENOVIA, NY 13035	1d. Federal Employer Identification Number of Insured or Social Security Number				
Work Location Of Insured (Only required If coverage Is specifically limited To certain locations In New York State, i.e., a Wrap-Up Policy)	98-0425935, 15-0430700, 16-1229774				
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)	3a. Name of Insurance Carrier WESCO INSURANCE COMPANY				
	WESCO INSURANCE COMPANY				
Erie County Water Authority	3b. Policy Number of entity listed in box "la.":				
Attn: Anthony Alessi	60/620				
295 Main Street, Suite 350					
Buffalo, NY 14203	3c. Policy effective period: $A - \chi V$				
	6/18/17 to 12/31/2019				
<ul> <li>4. Policy covers:</li> <li>a. ⊠ All of the employer's employees eligible under the New York Disability Benefits</li> <li>b. □ Only the following class or classes of the employer's employees:</li> <li>Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insuran</li> </ul>					
named insured has NYS Disability Benefits insurance coverage as described above.					
Date Signed 6/18/17 By Kathlan Data					
(Signature of insurance carrier's authorized representative or NYS Licensed Ins	urance Agent of that insurance carrier)				
Telephone Number 800-535-2711 Title Vice Presider	nt				
IMPORTANT: If box "4a" is checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder. If box "4b" is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the Disability Benetits Law. It must be mailed for completion to the Workers' Compensation Board, DB Plans Acceptance Unit, 328 State Street, Schenectady, NY 12305.					
PART 2. To be completed by NYS Workers' Compensation Board (Only if box "4b" o	f Part 1 has been checked)				
State of New York Workers' Compensation Board					
According to information maintained by the NYS Workers' Compensation Board, the above-named emp Benefits Law with respect to all of his/her employees.	ployer has complied with the NYS Disability				
Date Signed By					
(Signature of NYS Workers' Compensation Board	Employee)				
Telephone Number Title					
Please Note: Only insurance carriers licensed to write NYS disability benefits insurance policies and NY	S licensed insurance agents of those				
insurance carriers are authorized to issue Form DB-120.1. Insurance brokers are NOT authorized to is	ssue this form.				
DB-120.1 (9-15)					
APPROVED AUG 2	1 2018				

Wesco Insurance Company - Company Profile - Best's Credit Rating ...

# **Rating Services**

# Wesco Insurance Company

A.M. Best #: 002468 NAIC #: 25011 Administrative Office 59 Maiden Lane 6th Floor New York, NY 10038 United States FEIN #: 850165753 View Additional Address Information

Web: www.amtrustgroup.com Phone: 212-220-7120 Fax: 212-220-7130 Assigned to insurance companies



that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on A.M. Best's analysis, 051002 - AmTrust Financial Services, Inc is the AMB Ultimate Parent and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

est's Credit Rating		
Financial Strength Rating View Definition		Best's Credit Rating Analyst
Rating: Affiliation Code:	A- (Excellent) p (Pooled)	Rating issued by: A.M. Best Rating Services, Inc.
Financial Size	XV (\$2 Billion or	Director: Jennifer Marshall, CPCU, ARM
Category: Outlook:	greater) Stable	Senior Director: Michael J. Lagomarsino, CFA, FRM
Action: Effective Date: Initial Rating Date:	Downgraded July 03, 2018 June 30, 1964	Disclosure information
Long-Term Issuer	Credit Rating View	Disclosure Information Form View A.M. Best's Rating Disclosure Form
Definition		<b>Press Release</b> A.M. Best Removes from Under Review, Downgrades Credit Ratings of AmTrust Financial Svcs. and Most Subs.; Assigns Stable
Long-Term:	a-	Outlook
Outlook:	Stable	July 03, 2018
Action:	Downgraded	
Effective Date:	July 03, 2018	

### 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 Person or Organization:

Where required by written contract

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- A. Section II Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.
- **B.** With respect to the insurance afforded to these additional insureds, the following exclusion is added:
  - 2. Exclusions

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 site 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.

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

### SCHEDULE

Name of Person or Organization:

Where required by written contract

Location And Description of Completed Operations:

Where required by written contract

Additional Premium:

N/A

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

Section II – Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" at the location designated and described in the schedule of this endorsement performed for that insured and included in the "products-completed operations haz-ard".

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## **PRIMARY AND NON-CONTRIBUTORY**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Notwithstanding any other provision of this policy to the contrary, the insurance afforded to an additional insured under this policy will be primary to, and non-contributory with, any other insurance available to that person or organization in the event a contract or agreement you enter into requires you to furnish insurance to that person or organization of the type provided by this policy.

## 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:

Where required by written contract

Where required by written contract 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 damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "productscompleted operations hazard". This waiver applies only to the person or organization shown in the Schedule above.



## **Coverage Extension Endorsement**

Policy No.	Eff. Date of Pol.	Exp. Date of Pol.	Eff. Date of End.	Producer No.	Add'l. Prem	Return Prem.
BAP 3757423-03	7/1/2018	7/1/2019	7/1/2018		****	

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the:

Business Auto Coverage Form Motor Carrier Coverage Form

### A. Amended Who Is An Insured

1. The following is added to the Who Is An Insured Provision in Section II - Covered Autos Liability Coverage:

The following are also "insureds":

- a. Any "employee" of yours is an "insured" while using a covered "auto" you don't own, hire or borrow for acts performed within the scope of employment by you. Any "employee" of yours is also an "insured" while operating an "auto" hired or rented under a contract or agreement in an "employee's" name, with your permission, while performing duties related to the conduct of your business.
- **b.** Anyone volunteering services to you is an "insured" while using a covered "auto" you don't own, hire or borrow to transport your clients or other persons in activities necessary to your business.
- c. Anyone else who furnishes an "auto" referenced in Paragraphs A.1.a. and A.1.b. in this endorsement.
- d. Where and to the extent permitted by law, any person(s) or organization(s) where required by written contract or written agreement with you executed prior to any "accident", including those person(s) or organization(s) directing your work pursuant to such written contract or written agreement with you, provided the "accident" arises out of operations governed by such contract or agreement and only up to the limits required in the written contract or written agreement, or the Limits of insurance shown in the Declarations, whichever is less.
- 2. The following is added to the Other Insurance Condition in the Business Auto Coverage Form and the Other Insurance Primary and Excess Insurance Provisions Condition in the Motor Carrier Coverage Form:

Coverage for any person(s) or organization(s), where required by written contract or written agreement with you executed prior to any "accident", will apply on a primary and non-contributory basis and any insurance maintained by the additional "insured" will apply on an excess basis. However, in no event will this coverage extend beyond the terms and conditions of the Coverage Form.

All other terms, conditions, provisions and exclusions of this policy remain the same.

#### WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

WC 00 03 13

(Ed. 4-84)

#### WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone llable 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 indirectly to benefit anyone not named in the Schedule.

Schedule

#### ANY PERSON OR ORGANIZATION FOR WHOM YOU ARE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT TO OBTAIN THIS WAIVER OF RIGHTS FROM US

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 only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement No.

Countersigned By Lighth Thoma

Premium \$

Endorsement Effective Policy No: WC 0380936-03

Insured: GHD Inc.

Insurance Company: Zurich American Insurance Company

WC 00 03 13 (Ed. 4-84)

Copyright 1983 National Council on Compensation Insurance

INS2013-PS Revision date: 03/01/2013

Erie County Water Authority Insurance Requirements for Professional Services

<b>Project Number:</b>	201800030
Description:	RFP for Engineering Services for design and construction of a new tank at Ball PS (4MG), Capital Improvement Study at Ball PS, design and construction for improvements at Guenther PS and Hydraulic Integrity study of distribution system. Design and construction for improvements at Guenther PS and Hydraulic Integrity study of distribution system. Multiple design contracts will be awarded to the selected firms per a Request for Proposals.

The following minimum insurance requirements shall apply to professional service providers under agreement with the Erie County Water Authority (ECWA). The professional service provider carries relevant insurance for the services covered. If at anytime, in the opinion of ECWA, there is an unusual or exceptional risk, ECWA may establish additional insurance requirements for the duration of the agreement. All insurance required herein shall be obtained at the sole cost and expense of the professional service provider, including deductibles and self-insured retentions. These requirements include but are not limited to the minimum insurance requirements.

An  $\underline{\mathbf{X}}$  indicates insurance coverage is required.

X Commercial General Liability Insurance: (including, but not limited to, Bodily (Personal) Injury, Premises Operations, Property Damage Liability (broad form), Contractual Liability, Advertising Injury, Independent Contractors, Product Liability, Completed Operations Liability and Explosion, Collapse and Underground Coverage) – in an amount not less than \$1,000,000 combined single limit and \$2,000,000 in the aggregate:

X Per Policy

\_\_\_\_ Per Project or Job

\_\_\_\_ Per Location

There should be no exclusions for any claims filed, actual or alleged, for violation of any applicable statute including, but not limited to, the New York State or federal labor laws, ordinances, administrative orders, executive orders, rules, regulations, or decrees of any court of competent jurisdiction.

Page 1 of 3 - Professional Services

X Commercial Business Automobile Insurance in an amount of not less than \$1,000,000 each accident and shall cover liability arising out of any automobile owned, leased, hired, borrowed and non-owned automobiles. Additionally, if vehicles are used for transporting hazardous materials, the contractor shall obtain and maintain the "broadened" coverage (endorsement CA 99 48 10 01 or CA 99 48 12 93), as well as proof of MCS 90 04 00.

### X Excess Umbrella Liability Insurance:

- **X** \$1,000,000 in the aggregate
- \_\_\_\_\_ \$2,000,000 in the aggregate
- \_\_\_\_\_ \$3,000,000 in the aggregate
- \_\_\_\_\_ \$4,000,000 in the aggregate
- \_\_\_\_\_ \$5,000,000 in the aggregate
  - \_\_\_\_ Per Policy
  - \_\_\_\_ Per Project or Job
  - \_\_\_\_ Per Location
- X Professional Liability Insurance: Per each occurrence and in the aggregate. Continuous coverage shall be maintained, or on an extended discovery period ("tail coverage"), for a period of not less than two years from the time the agreement has been completed in an amount of not less than:
  - X \$1,000,000 in the aggregate
  - \$2,000,000 in the aggregate
  - \_\_\_\_\_ \$3,000,000 in the aggregate
  - \_\_\_\_\_ \$4,000,000 in the aggregate
  - \_\_\_\_\_ \$5,000,000 in the aggregate
    - X Per Policy
    - \_\_\_\_ Per Project or Job
    - \_\_\_\_ Per Location

### X Workers' Compensation and Employers' Liability and New York State Disability Benefits Insurances, as required by New York State statute.

Certificates of Insurance and renewals, on forms approved by the New York State Department of Insurance, must be submitted to ECWA prior to the award of contract. Each insurance carrier issuing a Certificate of Insurance shall be rated by A. M. Best no lower than "A-" with a Financial Strength Code (FSC) of at least VII. The professional service provider shall name ECWA, its officers, agents and employees as additional insured on a Primary and Non-Contributory Basis, including a Waiver of Subrogation endorsement (form CG 20 26 11 85 or equivalent), on all applicable liability policies. Any liability coverage on a "claims made" basis should be designated as such on the Certificate of Insurance.

To avoid confusion with similar insurance company names and to properly identify the insurance company, please make sure that the insurer's National Association of Insurance Commissioners (N.A.I.C.) identifying number or A. M. Best identifying number appears on the Certificate of Insurance.

Acceptance of a Certificate of Insurance and/or approval by ECWA shall not be construed to relieve the professional service provider of any obligations, responsibilities or liabilities.

Certificates of Insurance should be e-mailed to <u>AALESSI@ECWA.ORG</u>. or mailed to Mr. Anthony Alessi, ECWA Claims Representative/Risk Manager, Erie County Water Authority, 295 Main Street – Room 350, Buffalo, New York 14203-2494, or If you have any questions you can contact Mr. Alessi by e-mail or phone (716) 849-8477.

Please refer to the bid and the contract document(s) for additional information regarding insurance requirements.

### EXHIBIT B

### ERIE COUNTY WATER AUTHORITY CONFIDENTIALITY AND COPYRIGHT LICENSING AGREEMENT

### LICENSE:

Upon execution of this Agreement, the Licensee acquires from the Licensor a license to use the aforementioned property of the Licensor for the purpose of completing the work under this Agreement.

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State Plane Coordinates and North American Datum 1983. The parcels are from Erie County Tax Maps which were available in the County Finance office in June of 1993.

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### TERMINATION:

The License to use data terminates upon completion of the work under this Agreement.

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The parties agree that if Licensee breaches the Agreement and uses or discloses any of the copyrighted information in any way other than that allowed, during or subsequent to the terms of this Agreement for any purpose whatsoever, the damages of the Licensor shall be deemed liquidated at three times the amount of the total value of the data as determined by the Erie County Water Authority.

In addition to treble damages for breach of Agreement, Licensee will additionally forfeit the license acquired to use aforementioned copyrighted property of the Licensor.

### SPECIFIC TERMS OF ACCEPTANCE:

This Agreement constitutes the entire agreement between the parties.