

No Addendums Issued

Acknowledge Receipt of Addendum(s) (if applicable circle):

#1 Yes ☒ No #2 Yes No #3 Yes No #4 Yes No

Bidder: Mike West

Company: Oracle Elevator Holdco, Inc.

Address: 250 National Place, Suite 152, Longwood, Florida 32750

Authorized Signature: 

Title: Senior Vice President

Clearly Print Name: Mike West

Phone: 800-526-6115

Fax: N/A

Date: April 28, 2021

Email Address: mike.west@oracleelevator.com

EXHIBIT A

BID FORM

BID: **22-8 Annual Elevator Services**

E-BID OPENING DATE: **2:00 pm, Wednesday, April 28, 2021**

TO: The County Commissioners, County of Alachua:

The undersigned, as Contractor, hereby declares that he has carefully read and examined the specifications and with full knowledge of all conditions, under which the equipment and services herein contemplated must be furnished, hereby proposes and agrees to furnish the equipment and services according to the requirements as set out in the specifications for said equipment and service:

Covered Services Rate Emergency After Hours Repairs		
Item		\$ Overtime Hours
Labor Rate For Repairs, per Hour, 1 st Person		\$350.00 /hour
Labor Rate For Repairs, per Hour, 2 st Person		\$175.00 /hour
Non-Covered Services Hourly Rate During Working Hours (8:00am to 5:00pm)		
Item		\$ Standard Hours
Labor Rate For Repairs, per Hour, 1 st Person		\$350.00 /hour
Labor Rate For Repairs, per Hour, 2 st Person		\$175.00 /hour
Mark up % for non-covered parts <u>10%</u>		
Non-Covered Services Rate Emergency After Hours Repairs		
Item		\$ Overtime Hours
Labor Rate For Repairs, per Hour, 1 st Person, 2 Hour Minimum		\$350.00 /hour
Labor Rate For Repairs, per Hour, 2 st Person, 2 Hour Minimum		\$175.00 /hour
Mark up % for non-covered parts <u>10%</u>		

COVERED SERVICES DURING WORKING HOURS

Building Location	Elevator/Dumbwaiter	Make	Type	# of Landings	Serial #	Monthly Cost
Administration Building	#1 (Elevator)	Otis	Traction	5	5719	\$190.00
Administration Building	#2 (Elevator)	Otis	Traction	5	5720	\$190.00
Administrative Annex	#1 (Elevator)	General Hydro	Hydro	3	33229	\$55.00
Civil Courthouse	#1 (Elevator)	Dover Traction	Traction	5	24338	\$190.00
Civil Courthouse	#2 (Elevator)	Dover Traction	Traction	5	24339	\$190.00
Civil Courthouse	#3 (Elevator)	Dover Traction	Traction	5	24340	\$190.00
Civil Courthouse	#4 (Elevator)	Mowrey/Hydro	Hydro	5	24343	\$75.00
Civil Courthouse	#1 (Dumbwaiter)	Miami Elevator	Traction	5	24342	\$40.00
Criminal Courthouse	#1 (Elevator)	Kone	Traction	4	73003	\$235.00
Criminal Courthouse	#2 (Elevator)	Kone	Traction	4	73008	\$235.00
Criminal Courthouse	#3 (Elevator)	Kone	Traction	4	73004	\$243.00
Criminal Courthouse	#5 (Elevator)	Kone	Traction	4	73005	\$235.00
Criminal Courthouse	#6 (Elevator)	Kone	Traction	4	73006	\$235.00
Criminal Courthouse	#7 (Elevator)	Kone	Traction	3	73009	\$235.00
Criminal Courthouse	#8 (Elevator)	Kone	Traction	3	73007	\$235.00
Josiah T Walls Building	#1 (Elevator)	General Hydro	Hydro	3	22343	\$65.00
Josiah T Walls Building	#2 (Elevator)	General Hydro	Hydro	3	62133	\$65.00
Main Street Center	#1 (Elevator)	Mowrey	Hydro	3	50151	\$65.00
New Public Defenders	#1 (Elevator)	ThyssenKrupp	Hydro	2	103399	\$65.00
State Attorney's Office	#1 (Elevator)	Mowrey	Hydro	3	8879	\$65.00
Wilson Building	#1 (Elevator)	SE Machine Hydro	Hydro	2	5249	\$55.00

***Criminal Courthouse #4 is currently not in use, there is a space for a future elevator**

Building Location	Elevator/Dumbwaiter	Make	Type	# of Landings	Serial #	Monthly Cost
Alachua County Jail	#1 (Elevator)	Miami Elevator	Hydro	2	46697	\$65.00
Alachua County Jail	#2 (Elevator)	Miami Elevator	Hydro	2	46698	\$65.00
Alachua County Jail	#1 (Dumbwaiter)	Sedgwick	Traction	2	46699	\$65.00

PART D – BIDDERS CHECK LIST

Bidders may use the boxes to the left to check off items when completed.

The checklist is intended as a reminder for certain important items and is not necessarily a complete list of what must be included in your BID submission.

- ☒ Bid Form (Remember to fill this form out completely) THIS FORM MUST BE SIGNED.
- ☒ Acknowledge all Addendum(s) issued with this solicitation. A place to check off acknowledgement is on the bid form.
- ☒ Fill out all of the exhibits as required, especially Exhibit D, Small Business Enterprise (SBE) Program Participation Form and Exhibit E Alachua County Government Minimum Wage (GMW) Form.
- ☒ Include any insurance requirements.
- ☒ Include any bonds that may be applicable. *N/A*
- ☒ Remember to post your Bid on DemandStar prior to the submittal deadline.

If you have questions concerning these items or other, sections of the bid solicitation please contact Procurement for clarification prior to submitting your bid.

EXHIBIT B

Oracle Elevator Holdco, Inc.

**CORPORATE RESOLUTION
GRANTING SIGNING AUTHORITY
AND AUTHORITY TO CONDUCT BUSINESS
Secretary's Certificate**

I am the General Counsel and Secretary for Oracle Elevator Holdco, Inc. I hereby certify that the resolution attached as Appendix authorizes the Company's CEO, CFO, COO, General, and Mike West to sign all documents with respect to Alachua County on behalf of the Company.

I have executed my name as Secretary and have hereunto affixed the corporate seal of the above-named Corporation this 28th day of 2021, and do hereby certify that the attached is a true record of a resolution duly adopted at a meeting of the Board of Directors of the Corporation and that said meeting was held in accordance with state law and the Bylaws of the Corporation, and that the resolution is now in full force and effect without modification or rescission.

The Company further certifies that these resolutions shall continue in full force and effect, and may be relied upon by Alachua County, until express written notice of their rescission or modification has been received by the Procurement Manager of Alachua County. The Company acknowledges that any revocation, modification or replacement of these resolutions must be accompanied by documentation satisfactory to the Procurement Manager of Alachua County, establishing the authority for the changes.

(Corporate Seal) Secretary of the Corporation

By: 

Jim Warner

(Print Secretary's Name)

Date: April 28, 20

Appendix

ORACLE ELEVATOR HOLDCO, INC.

UNANIMOUS WRITTEN CONSENT OF THE BOARD OF DIRECTORS

January 25, 2021

The undersigned, being all of the members of the Board of Directors (the "Board") of Oracle Elevator Holdco, Inc., a Delaware corporation (the "Company") hereby consent and agree, in lieu of a special meeting of the Board, to the approval and adoption of the following resolutions:

WHEREAS, the Company wishes to ensure appropriate safeguards for the execution of customer and supplier contracts following the addition of operations acquired through the acquisition of Premier Elevator Company, Inc. and Premier Elevator Services, LLC;

WHEREAS, under the terms of the Company Sales Policy, any contract for Maintenance, Repair or Modifications that either changes the Company's standard terms and conditions or is issued on the customer's contract terms must be signed by the Chief Executive Officer, the Chief Financial Officer, the Chief Operating Officer, or the General Counsel;

WHEREAS, the Company wishes to revise its signature authority and issue an updated Sales Policy and new Contract Administration Policy to formalize a revised signature authority; and,

WHEREAS, the Board has determined that it is advisable and in the best interests of the Company to amend the Sales Policy and to issue a Contract Administration Policy.

NOW, THEREFORE, BE IT:

RESOLVED, that, the Company shall amend the Sales Policy and issue a Contract Administration Policy to provide the following signature authority:

1. All contracts including, without limitation, all customer contracts, vendor contracts, leases, settlement agreements, and non-disclosure agreements that either modify the Company's standard terms and conditions or are issued on a third party's contract terms (collectively, "Contract") must be signed by one of the following: The Chief Executive Officer, the Chief Financial Officer, the Chief Operations Officer, or the General Counsel. In addition to these authorized signatories, the following members of senior management may execute Contracts as follows:
 - a. Contracts for Customers or Vendors in the Florida Region – Mike West – SVP Florida
 - b. Contracts for Customers or Vendors in the Premier Region (GA, AL, MS, TN and the Jacksonville, Florida region) – Hugh Bertschin – RVP

RESOLVED, that, in order to fully carry out the intent and effectuate the purposes of the foregoing resolutions, the Directors and officers of the Company be, and each of them hereby is, individually authorized in the name and on behalf of the Company from time to time (i) to prepare, execute, deliver and perform, as the case may be, such agreements, amendments, applications, approvals, certificates, communications, consents, demands, directions, documents, further assurances, instruments, notices, orders, requests, resolutions, supplements or undertakings, (ii) to pay or cause to be paid on behalf of the Company any related costs and expenses and (iii) to take such other actions, in the name and on behalf of the Company, as each such Director or officer, in such person's discretion, shall deem necessary or advisable to complete and effect the foregoing transactions or to carry out the intent and purposes of the foregoing resolutions and the transactions contemplated thereby, the preparation, execution, delivery and performance of any such agreements, amendments, applications, approvals, certificates, communications, consents, demands, directions, documents, further assurances, instruments, notices, orders, requests, resolutions, supplements or undertakings, the payment of any such costs or expenses and the performance of any such other acts shall be conclusive evidence of the approval of the Board thereof and all matters relating thereto.

RESOLVED FURTHER, that all actions heretofore taken by the Directors and officers of the Company with respect to the foregoing resolutions are hereby approved, adopted, ratified and confirmed.

[SIGNATURE PAGE TO FOLLOW]

(Signature Page to Written Consent of the Board of Directors of Oracle Elevator Holdco, Inc.)

This written consent is made pursuant to Section 141(f) of the General Company Law of the State of Delaware, and amended, shall be effective as of the date hereof, shall have the same force and effect as a vote of the Board at a duly called meeting and shall be filed with the minutes of the Company in the Company's minute book. A facsimile or electronic mail copy of a signature page hereto shall be deemed an original for all purposes. This consent may be executed in two or more counterparts, each of which shall be deemed an original but all of which shall together constitute one and the same document.

Dated as of the date first written above.

BOARD:

DocuSigned by:

392AEDC083D84C8
Sean P. Barrette

DocuSigned by:

734DD68DB806412
Jeffery Farrero

DocuSigned by:

6CAA38DAF67542A...
Paul M. Belliveau

EXHIBIT C

PUBLIC RECORD DECLARATION OR CLAIM OF EXEMPTION

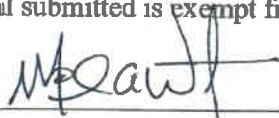
As a bidder or proposer, any document you submit to Alachua County may be a public record and be open for personal inspection or copying by any person. In Florida "public records" are defined as all documents, papers, letters, maps, books, tapes, photographs, films, sound recordings, data processing software, or other material, regardless of the physical form, characteristics, or means of transmission, made or received pursuant to law or ordinance or in connection with the transaction of official business by any agency. Section 119.011, F.S. A document is subject to personal inspection and copying unless it falls under one of the public records exemptions created under Florida law. Please designate what portion of your bid or proposal, if any, qualifies to be exempt from inspection and copying:

(Execute either section I. or II, but not both; bidder may not modify language)

I. NO EXEMPTION FROM PUBLIC RECORDS LAW

No part of the bid or proposal submitted is exempt from disclosure under the Florida public records law, Ch. 119, F.S.

Bidder's Signature: _____



Date: April 28th, 2021

--- OR ---

II. EXEMPTION FROM PUBLIC RECORDS LAW AND AGREEMENT TO INDEMNIFY AND DEFEND ALACHUA COUNTY

The following parts of the bid or proposal submitted are exempt from disclosure under the Florida public records law because: (list exempt parts and legal justification. i.e. trade secret):

By claiming that all or part of the bid or proposal is exempt from the public records law, the undersigned bidder or proposer agrees to protect, defend, indemnify and hold the County, its officers, employees and agents free and harmless from and against any and all claims arising out of a request to inspect or copy the bid or proposal. The undersigned bidder or proposer agrees to investigate, handle, respond to, provide defense (including payment of attorney fees, court costs, and expert witness fees and expenses up to and including any appeal) for and defend any such claim at its sole cost and expense through counsel chosen by the County and agrees to bear all other costs and expenses related thereto, even if they (claims, etc.) are groundless, false, or fraudulent.

Bidder's Signature: _____

Date: _____

EXHIBIT D

Small Business Enterprise (SBE) Program Participation Form

BID NUMBER: 22-8 Annual Elevator Services

OPTION 1

I certify that our Company is an Alachua County Certified Small Business Enterprise (SBE) registered prior to the Bid opening.

Circle One:

Yes (If yes, complete and sign the last page of this Exhibit)

No (If No, proceed to Option 2).

OPTION 2

I certify that our Company will perform ALL work and that no subcontractors will be utilized for this bid.

Circle One:

Yes (If yes, complete and sign the last page of this Exhibit)

No (If No, proceed to Option 3.)

EXHIBIT D

BID NUMBER: «22-8 Annual Elevator Services

OPTION 3

SBE Participation. I certify that our Company has contacted the Alachua County's Certified SBEs listed below. I state that the following information regarding SBE Subcontractors is true and correct to the best of my knowledge and belief.

Alachua County has adopted a 15% SBE participation goal and policies which encourage participation of Small Business Enterprises (SBE) in the provision of labor, time, supplies, services or construction items of any kind materials.

SBEs are located in the Alachua County Small Business Enterprise Directory.

Subcontractor (any business entity holding a subcontract with the prime vendor) services are defined as, "a contract with another business entity that obtains labor, time, supplies, services or construction items of any kind."

Vendors submitting bids under this solicitation are to identify the intended SBE subcontractors. These SBEs have agreed to perform the work for the total dollar value and percentage of the bid set forth below.

If SBE subcontractors are not utilized and listed below or if option 1 or 2 was not chosen, you must proceed to Option 4 and document your Good Faith Effort.

SBE Name of Contractor: _____
Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %
SBE Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

SBE Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %
40

EXHIBIT D

BID NUMBER: 22-8 Annual Elevator Services

OPTION 4

SBE Good Faith Effort. To be considered responsive all Vendors should have SBE Participation or demonstrate a good faith effort to utilize SBE subcontractors. If option 1, 2 or 3 was not chosen the Vendor should complete the section below substantiating compliance with good faith effort requirements.

In accordance with Article 11, of the Alachua County Procurement Code, I have solicited and received responses from the following Alachua County certified SBE companies. (The SBE vendor's response should be recorded in the section below.)

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

SBE Response when contacted: _____

EXHIBIT D

BID NUMBER: 22-8 Annual Elevator Services

I as the undersigned Vendor certify that I have completed one of the option(s) below (Circle One):

OPTION 1

OPTION 2

OPTION 3

OPTION 4

If you are unable to certify that, you have completed to the best of your knowledge and belief OPTION 1, OPTION 2, OPTION 3 or OPTION 4, CALL (48 hours prior to bid opening) Procurement at 352.374.5202, for direction.

Vendor Name: Oracle Elevator Holdco, Inc.

Date: 4-28-2021

Signature: 

Title: Senior Vice President

Printed Name: Mike West

EXHIBIT E

ALACHUA COUNTY GOVERNMENT MINIMUM WAGE (GMW) FORM

BID 22-8 Annual Elevator Services

The undersigned certifies that all employees, contracted and subcontracted, completing services as part of this Bid/RFP are paid, and will continue to be paid, in accordance with Chapter 22, Article 12 of the Alachua County Code.

Please mark the appropriate box below that applies to how you pay your employees:



Employees involved with Alachua County projects are paid a minimum of **\$14.50** hourly or the current prevailing wage and are provided health benefits?



Employees involved with Alachua County projects are paid a minimum of **\$16.50** hourly or the current prevailing wage but are not provided health benefits?

Bidder: Mike West Company: Oracle Elevator Holdco, Inc.

Address: 250 National Place, Suite 152, Longwood, Florida 32750

Authorized Signature:  Title: Senior Vice President

Clearly Print Name: Mike West

Phone: 954-918-2123 Fax: N/A Date: April 28, 2021

Email Address: mike.west@oracleelevator.com

EXHIBIT F

DRUG FREE WORKPLACE

Florida Statute, Section 287.087 states that whenever two or more bids, proposals, or replies that are equal with respect to price, quality, and service are received by the state or by any political subdivision for the procurement of commodities or contractual services, a bid proposal, or reply received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process.

The undersigned vendor in accordance with §287.087, Florida Statute hereby certifies that
Oracle Elevator Holdco, Inc.

Name of Business

Does:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.



Bidder's Signature

April 28, 2021

Date

EXHIBIT G

Proposed Subcontractors (Non-Small Business Enterprise) Form

BID NUMBER: 22-8 Annual Elevator Services

This form is for all Non-Small Business Enterprise subcontractors being utilized on this project that are not included on Exhibit B.

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

If additional space is required for your subcontractor listing, make copies of this **Exhibit G** and submit with you bid package.

EXHIBIT H

BIDDER'S QUESTIONNAIRE

Bidder's Name: Oracle Elevator Holdco, Inc.

Bidder's Address: 250 National Place, Suite 152, Longwood, Florida 32750 Phone: 800-526-6115

Number of years in this type of service? 17 Number of years licensed in Alachua County: Over 10

Number of employees "ON THE JOB" each week: 36 Number of employees "ON CALL" each week: 12

Will you subcontract any part of this work: Yes No

If so, give details:

No preventative maintenance, repair or callbacks will ever be subcontracted out. All work done by Oracle employees.

List all major equipment which will be available upon commencement of the agreement to perform the required service: Door Equipment, hydraulic/door motors, valves, push button lamps, controller boards, switches, lubrication, oil, relays, leveling sensors, drive components, hydraulic pumps, wiring, spirators/door closers, door interlocks, door rollers, jack seal kits, buffer springs, emergency lights and alarm bells

Do you currently hold any municipality contracts: Yes No

If so, please indicate below:

Yes, Marion County Facilities, City of Cocoa Beach, Marion County Facilities, City of Ocala, Sarasota County Polk County Facilities, University of North Florida, Eastern Florida State College, Embry Riddle University

List three references of firms receiving similar service to that requested in this bid (comparable facility size):

- | | | |
|----|---------------------------------------|----------------------------|
| 1) | Firm: <u>Embry Riddle University</u> | Phone: <u>386-405-5865</u> |
| | Contact Person: <u>Mike Garris</u> | |
| 2) | Firm: <u>Marion County Facilities</u> | Phone: <u>352-572-6582</u> |
| | Contact Person: <u>Wayne Newnan</u> | |
| 3) | Firm: <u>Valencia College</u> | Phone: <u>407-582-1179</u> |
| | Contact Person: <u>Shawn Andrews</u> | |

Are your employees screened by: (indicate below)

- 1) Polygraph
- 2) General Interview
- 3) Background Investigation
- 4) Police Record Check
- 5) Additional

Have any leases, contracts or agreements for services held by your firm ever been canceled or terminated before the end of the term by either party: Yes No X. If the answer is yes, state the location and circumstances on an "attachment" to this questionnaire.

What constitutes your normal business days and working hours: 8am - 5pm Mon - Fri

Describe below, your firm's operational plan for providing the services under this agreement:

Perform MONTHLY preventative maintenance utilizing the check charts and Alachua County Provided Documentation. Within 10 days install MCP and Service Logs
Check in/out and provide required follow up documentation for payment. Follow tasks required that are provided and enhance the service with Oracles Maintenance Plan

The undersigned swears to the truth and accuracy of all statements and answers contained herein:

DATE: April 28, 2021 AUTHORIZED SIGNATURE: 

EXHIBIT I
RESPONSIBLE AGENT FORM

The Contractor shall designate a responsible agent and alternate as necessary, for all dealings, communications, or notices or contracts between Alachua County and the contractor by completing and returning this Responsible Agent Form. Any notice or communication to or from the responsible agent shall be deemed to be a communication to the contractor

RESPONSIBLE AGENT: Harper Smith (Customer Service Manager and Day to Day Main Contact)

ADDRESS: 250 National Place, Suite 152, Longwood, Florida 32750

PHONE NO.: 352-745-4787 Direct Cell Phone

FAX NO.: N/A

EMAIL ADDRESS: harper.smith@oracleelevator.com

ALTERNATE RESPONSIBLE AGENT: Jose Olivarria (Service Manager and Lead Adjuster)

ADDRESS: 250 National Place, Suite 152, Longwood, Florida 32750

PHONE NO.: 321-441-6519 Direct Cell Phone

FAX NO.: N/A

EMAIL ADDRESS: jose.olivarria@oracleelevator.com

SIGNED: 

DATE: April 28, 2021



CERTIFICATE OF LIABILITY INSURANCE

1/1/2021

DATE (MM/DD/YYYY)

7/8/2020

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

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

PRODUCER Lockton Insurance Brokers, LLC CA License #0F15767 777 S. Figueroa Street, 52nd fl. Los Angeles CA 90017 213-689-0065	CONTACT NAME:	FAX (A/C, No):	
	PHONE (A/C, No, Ext):	E-MAIL ADDRESS:	
INSURED 1429777 Oracle Elevator Company c/o Oracle Elevator Holdco, Inc. 8800 Grand Oak Cir., Ste. 550 Tampa FL 33637	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Everest National Insurance Company		10120
	INSURER B : Transportation Insurance Company		20494
	INSURER C : Everest Indemnity Insurance Company		10851
	INSURER D : Continental Casualty Company		20443
	INSURER E :		
INSURER F :			

COVERAGES ORAEL01 **CERTIFICATE NUMBER:** 14749661 **REVISION NUMBER:** XXXXXXXX

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 <input checked="" type="checkbox"/> Proj Gen Agg \$10M <input checked="" type="checkbox"/> SIR: \$100,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	N	N	CF1GL00190-201	7/8/2020	7/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	N	N	6050346640	1/1/2020	1/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX Comp./Coll Ded. \$ 1,000
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	N	N	XC1EX00124-201	7/8/2020	7/1/2021	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ XXXXXXXX
D	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	650407419	1/1/2020	1/1/2021	<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
D	Installation Property	N	N	6050434104	1/1/2020	1/1/2021	Limit: \$2,058,681

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

CERTIFICATE HOLDER**CANCELLATION** See Attachment

14749661

Evidence of Coverage

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

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Evidence of Coverage

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To whom it may concern:

In our continuing effort to provide timely certificate delivery, Lockton Companies is transitioning to **paperless delivery** of Certificates of Insurance, thus, this is your final hard-copy delivery.

To ensure electronic delivery for future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing Certificate ID **14749661**.

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If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

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