

**INVITATION TO BID**

City of League City ITB #15-045 Roadway Markings On-call

**BID FORM (Page 1 of 2)****Unit Price Bid form for Roadway Markings**

This bid form shall be used to compare bids and to establish unit prices for actual work performed on work orders. Installation shall follow TMUTCD, City of League City striping details and shall conform to TxDOT Item 644, 666, 668, 672, 677, and 678. All traffic control for this project shall conform to TMUTCD.

Description	UOM	Quantity	Unit Price	Cost
Mobilization and Traffic Control Complete in Place per each work order	EA	10	500. <sup>00</sup>	5,000. <sup>00</sup>
Install Prefab Pav Mrk TY B (W) (4") (BRK)	LF	10,000	.50	5000. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (4") (SLD)	LF	600	.50	300. <sup>00</sup>
Install Prefab Pav Mrk TY C (Y) (4") (SLD)	LF	30,000	.50	15,000. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (8") (SLD)	LF	600	1.20	720. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (12") (SLD)	LF	2,500	2.65	6625. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (24") (SLD)	LF	1,000	5.00	5000. <sup>00</sup>
Install Prefab Pav Mrk TY C (Y) (24") (SLD)	LF	400	5.00	2000. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (WORD) incl surf prep	EA	15	150. <sup>00</sup>	2250. <sup>00</sup>
Install Prefab Pav Mrk TY A (W) (ARROW) incl surf prep	EA	30	150. <sup>00</sup>	4500. <sup>00</sup>
Install Prefab Pav Mrk TY C (Y) (Median Nose) incl surf prep	EA	30	120. <sup>00</sup>	3600. <sup>00</sup>
Install Refl Pav Mrk (2-say) TY II-R-C	EA	1,000	4.00	4,000. <sup>00</sup>
Install Non-Ref Pav Mrk TY I-A	EA	200	4.00	800. <sup>00</sup>
Install Refl Pav Mrk (2-way) TY II-A-A	EA	8,500	4.00	34,000. <sup>00</sup>
Eliminate Ext Pav Mrk & Marks	LF	40,000	.45	18,000. <sup>00</sup>
Pav Surf Prep for Mrks (4")	LF	40,000	.04	1600. <sup>00</sup>
Pav Surf Prep for Mrks (12")	LF	2,500	.15	375. <sup>00</sup>
Pav Surf Prep for Mrks (24")	LF	1,400	.20	280. <sup>00</sup>
<b>TOTAL</b>				<b>\$ 109,050.<sup>00</sup></b>

TOTAL

Bidder Signature

Date

\* TY A, B, C was Bid as TY I item \*\*  
Prepared price per item 666 TxDOT Spec

-per Earl Smith.

**INVITATION TO BID**

City of League City ITB #15-045 Roadway Markings On-call

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Description	UOM	Quantity	Unit Price	Cost
Install Refl Pav Mrk TY I (W) (4") (BRK)	LF	4,000	.50	2,000.00
Install Refl Pav Mrk TY I (B) (6") (BRK)	LF	4,00	.95	380.00
Install Refl Pav Mrk TY I (Y) (4") (SLD)	LF	12,000	.50	6000.00
Install Refl Pav Mrk TY I (Y) (Median Nose) incl surf prep	EA	30	120.00	3600.00
<b>SITE TOTAL</b>				11,980.00

Grand total = \$121,030.00

Stripe-A-line, Inc.

9-22-2015

Firm Name

Date

Nicholas Olivas

Operations Manager

Authorized Signature

Title

Nicholas Olivas

832-908-7830

Name (please print)

Telephone

Nick@stripealinetx.com

Email

5430 Killough ST.

Address

Houston

TX

77086

City

State

Zip



## **INVITATION TO BID**

*City of League City ITB #15-045 Roadway Markings On-call*

### **Applicable Specifications by Reference**

#### **Signing and Striping Standards for City of League City**

1. City of League City Pavement Markings Detail,
2. City of League City Typical Sign Detail,
3. City League City Traffic Control Detail,
4. City League City Traffic Control Detail,
5. City League City Traffic Control Detail.

#### **Signing and Striping TxDot Specifications**

1. TxDOT Item 644,
2. TxDOT Item 666,
3. TxDOT Item 668,
4. TxDOT Item 672,
5. TxDOT Item 677,
6. TxDOT Item 678.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/21/2015

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

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

<b>PRODUCER</b> Rust Ewing Watt and Haney, Inc. 7900 Emmett Lowry Expressway  Texas City TX 77591		<b>CONTACT NAME:</b> Amanda Plummer CIC <b>PHONE (A/C, No, Ext):</b> (409) 934-8000 <b>FAX (A/C, No):</b> (409) 935-1883 <b>E-MAIL ADDRESS:</b> amanda_plummer@rustewing.com															
<b>INSURED</b> Stripe-A-Line, Inc. 5430 Killough St  Houston TX 77086		<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Colony Insurance Co</td><td>39993</td></tr><tr><td>INSURER B: Imperium Insurance Company</td><td>35408</td></tr><tr><td>INSURER C: Alterra America Insurance Co.</td><td>21296</td></tr><tr><td>INSURER D: Great American Ins Co of N Y</td><td>22136</td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Colony Insurance Co	39993	INSURER B: Imperium Insurance Company	35408	INSURER C: Alterra America Insurance Co.	21296	INSURER D: Great American Ins Co of N Y	22136	INSURER E:		INSURER F:	
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**COVERAGES****CERTIFICATE NUMBER:** 15-16 All Lines**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		103 GL 0002929-01	3/14/2015	3/14/2016	<table><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 100,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr><tr><td>PERSONAL &amp; ADV INJURY</td><td>\$ 1,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr><tr><td></td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	MED EXP (Any one person)	\$ 5,000	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000		\$
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	\$																			
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS		ILR18-00713-00	3/14/2015	3/14/2016	<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$ 1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr><tr><td></td><td>\$</td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$		\$				
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C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		MKLA40LE100070	3/14/2015	3/14/2016	<table><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 1,000,000</td></tr><tr><td></td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	AGGREGATE	\$ 1,000,000		\$								
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	\$																			
	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				<table><tr><td>PER STATUTE</td><td>OTH-ER</td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$</td></tr></table>	PER STATUTE	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$						
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E.L. DISEASE - POLICY LIMIT	\$																			
D	Leased & Rented Equipment		IMP 066-61-01-01	3/14/2015	3/14/2016	<table><tr><td>Per Item</td><td>\$25,000</td></tr><tr><td>Any One Loss</td><td>\$25,000</td></tr></table>	Per Item	\$25,000	Any One Loss	\$25,000										
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Any One Loss	\$25,000																			

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

The General Liability & Auto policies include a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder and the General Liability & Auto policies include a blanket automatic waiver of subrogation endorsement that provides waiver of subrogation wording to the certificate holder. These endorsements, to the extent provided in the policy, all apply when there is a written contract between the named insured and the certificate holder that requires such status. The General Liability policy will pay for a covered loss on a primary basis and the Company will not seek contribution from the Certificate Holder for such loss until the Company's primary limits of liability

**CERTIFICATE HOLDER****CANCELLATION**

City of League City Purchasing Department 300 W Walker Street League City, TX 77573	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  J Blackshear Jr. CIC/ <i>J Blackshear Jr.</i>

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## COMMENTS/REMARKS

have been exhausted. The Excess Liability follows form over the General Liability only.



# CERTIFICATE OF LIABILITY INSURANCE

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<b>PRODUCER</b> TDECU Insurance Agency LLC 1235 North Loop West #1100  Houston TX 77008		<b>CONTACT NAME:</b> Marlene Fletcher <b>PHONE (A/C, No, Ext):</b> 281-501-6507 <b>FAX (A/C, No):</b> 281-501-6515 <b>E-MAIL ADDRESS:</b> mlfletcher@tdecuinsurance.org	
<b>INSURED</b> Stripe-A-Line, Inc 5430 Killough St  Houston TX 77086		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Texas Mutual Insurance Company <b>NAIC #</b> 22945 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

## COVERAGES

CERTIFICATE NUMBER: 15/16 WC only for

REVISION NUMBER:

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	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <b>DED</b> <input type="checkbox"/> <b>RETENTION \$</b> <input type="checkbox"/>					EACH OCCURRENCE \$ AGGREGATE \$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input type="checkbox"/> N	TSF0001220789	2/12/2015	2/12/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
ITB #15-045 Roadway Markings on-call

Workers Compensation policy includes a blanket automatic Waiver of Subrogation that provides this feature only when there is a written contract between the named insured and the certificate holder that requires it.

## CERTIFICATE HOLDER

## CANCELLATION

City of League City  
Purchasing Department  
300 W. Walker Street  
League City, TX 77573

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

S Margraves/MARLEN

**MERCHANTS**  
**BONDING COMPANY**

MERCHANTS BONDING COMPANY (MUTUAL) • MERCHANTS NATIONAL BONDING, INC.  
2100 FLEUR DRIVE • DES MOINES, IOWA 50321-1158 • (800) 678-8171 • (515) 243-3854 FAX

**BID BOND**  
**PUBLIC WORK**

Bond No. \_\_\_\_\_

KNOW ALL PERSONS BY THESE PRESENTS:

That Stripe-A-Line, Inc.

(hereinafter called the Principal) as Principal, and the MERCHANTS NATIONAL BONDING, INC., a corporation of the State of Iowa, with its Home Office in the City of Des Moines, Iowa, (hereinafter called Surety), as Surety, are held and firmly bound to City of League City, Texas

(hereinafter called the Obligor) in the full and just sum of ( 5% G.A.B.\*\*\* )  
Five Percent of Greatest Amount Bid\*\*\* Dollars

good and lawful money of the United States of America, to the payment of which sum of money well and truly to be made, the Principal and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Signed and dated this 22nd day of September, 2015

THE CONDITION OF THIS OBLIGATION IS SUCH, that, if the Obligor shall make any award to the Principal for

Roadway Markings On-Call, Bid No. 15-045

according to the terms of the proposal or bid made by the Principal therefore, and the Principal shall duly make and enter into a contract with the Obligor in accordance with the terms of said proposal or bid and award, and shall give bond for the faithful performance thereof with MERCHANTS NATIONAL BONDING, INC., and Surety, or with other Surety or Sureties approved by the Obligor; or if the Principal shall, in case of failure to do so, pay to the Obligor the damages which the Obligor may suffer by reason of such failure, not exceeding the penalty of this bond, then this obligation shall be null and void; otherwise it shall be and remain in full force and effect.

IN TESTIMONY WHEREOF, the Principal and Surety have caused these presents to be duly signed and sealed.

Witness:

Nicole Macomber

Stripe-A-Line, Inc.

By

Principal

Attest:

Kathy Kutz

MERCHANTS NATIONAL BONDING, INC.

By

Donna Wein  
Donna Wein, Attorney-in-Fact

