

**Extension of
Professional Services Agreement
with Haynes Equipment Company, LLC (R21-C139011)**

APPROVED by the Trustees and signed by the Chairman of the Oklahoma City Water Utilities Trust this 16TH day of JANUARY, 2024.

ATTEST:

**OKLAHOMA CITY WATER UTILITIES
TRUST**

Amy K. Simpson
SECRETARY

[Signature]
CHAIRMAN

The seal is circular with a double-lined border. The outer ring contains the text "OKLAHOMA CITY WATER UTILITIES TRUST" at the top and "OKLAHOMA CITY" at the bottom. The center of the seal features the word "SEAL" in a bold, sans-serif font.

CONCURRED by the Council and signed by the Mayor of The City of Oklahoma City this 30TH day of JANUARY, 2024.

ATTEST:

THE CITY OF OKLAHOMA CITY

Amy K. Simpson
CITY CLERK

[Signature]
MAYOR

The seal is circular with a double-lined border. The outer ring contains the text "SEAL OF THE CITY OF OKLAHOMA CITY" at the top and "OKLAHOMA CITY" at the bottom. The center of the seal features the Great Seal of the State of Oklahoma, which depicts a shield with various symbols representing the city's history and industry.

REVIEWED for form and legality.

Craig Keith
Assistant Municipal Counselor

**Extension of
Professional Services Agreement
with Haynes Equipment Company, LLC (R21-C139011)
Telemetry & Supervisory Controls Improvements & Ongoing Support Services**

THIS extension to the Professional Services Agreement is entered into on 16TH day of JANUARY 2024 by and between the Oklahoma City Water Utilities Trust (hereinafter known as OCWUT) and Haynes Equipment Company, LLC (hereinafter referred to as the "CONTRACTOR"), both together jointly referred to as "PARTIES".

WITNESSETH:

WHEREAS, OCWUT and the CONTRACTOR entered into an Enterprise Service Contract (CONTRACT) for telemetry and supervisory controls improvements and ongoing support services on July 17, 2012; and

WHEREAS, the PARTIES have renewed and amended this CONTRACT ; and

WHEREAS, currently the CONTRACT is in full force and effect until December 31, 2023; and

WHEREAS, currently the contract allows for the General Manager of OCWUT or designee and an authorized representative of the CONTRACTOR to extend the CONTRACT; and

WHEREAS, the City is sending out a new Request for Proposal for a new Professional Services Agreement, but most likely will not be able to complete the Request for Proposal for the new Professional Services Agreement until after the December 31, 2023 date, when the CONTRACT is set to expire; and

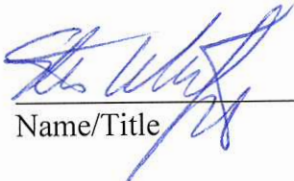
WHEREAS, the PARTIES wish to continue their contractual relationship through and beyond the expiration date with the extension of the Professional Services Agreement; and

NOW, THEREFORE, in mutual consideration herein described and other good and valuable consideration, receipt of which is hereby acknowledged, the parties agree as follows:

The CONTRACT expiration date is extended from December 31, 2023, until June 30, 2024.

APPROVED by the Haynes Equipment Company, LLC, and SIGNED by its authorized representative this 6th day of DECEMBER, 2023.

Haynes Equipment Company, LLC

 MANAGER/CEO
Name/Title



CERTIFICATE OF LIABILITY INSURANCE

1/1/2025

DATE (MM/DD/YYYY)

12/21/2023

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 Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906 (816) 960-9000 kcasu@lockton.com	CONTACT NAME:	FAX (A/C, No):	
	PHONE (A/C, No, Ext):	E-MAIL ADDRESS:	
INSURED 1484349 HAYNES EQUIPMENT CO., LLC 121 NW 132ND ST, OKLAHOMA CITY, OK 73114	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: The Charter Oak Fire Insurance Company		25615
	INSURER B: The Travelers Indemnity Company of Connecticut		25682
	INSURER C: Travelers Property Casualty Company of America		25674
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES**CERTIFICATE NUMBER:** 20025732**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"/> CONTRACTUAL LIAB <input checked="" type="checkbox"/> XCU COVERAGE INCL GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: \$10M TOTAL AGG	Y	N	630-8T447641	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 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 \$
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 checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	N	810-8T447604	1/1/2024	1/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y	N	CUP-8T520916	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$ XXXXXXXX
C	<input checked="" type="checkbox"/> 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	N/A	UB-8T447769 AOS Except: AK,OH,WY,ND,WA	1/1/2024	1/1/2025	<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

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

OCWUT AND THE CITY OF OKLAHOMA CITY ARE ADDITIONAL INSURED AS RESPECTS GL JOB: OCWUT 12-12 - TELEMETRY AND SCADA EQUIPMENT & SUPPORT SERVICES CONTRACT # C139011

CERTIFICATE HOLDER**CANCELLATION****20025732**

CITY OF OKLAHOMA CITY OCWUT 12-12
TELEMETRY & SCADA
EQUIPMENT & SUPPORT SERVICES
100 NORTH WALKER SUITE 200
OKLAHOMA CITY OK 73102

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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