



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
03/19/2025

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 Aon Risk Services Central, Inc. Chicago IL Office 200 East Randolph Chicago IL 60601 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED Silver Star Construction Co. 2401 S. Broadway Moore OK 73160 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Zurich American Ins Co	16535
	INSURER B: Great American Insurance Co.	16691
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

Holder Identifier :

COVERAGES**CERTIFICATE NUMBER:** 570111468489**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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GL0980960210	04/01/2025	04/01/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			BAP 9809603-10	04/01/2025	04/01/2026	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
B	<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			TU0557813920 SIR applies per policy terms & conditions	04/01/2025	04/01/2026	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 Products/Completed O \$5,000,000
A	<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	WC980960110	04/01/2025	04/01/2026	<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

Certificate No : 570111468489

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

The city of Oklahoma and its Beneficiary Trusts are included as Additional Insured in accordance with provisions of the General liability and Automobile liability policies. The city of Oklahoma City and its Beneficiary Trust is/are included as loss Payee where required by written contract. Priv. Pass. vehicles under \$40,000 and comm. vehicles: \$250 comp/\$500 coll; Priv. Pass. vehicles \$40,001 - \$50,000: 5% comp/coll (per vehicle); Priv. Pass. vehicles \$50,001+ at time of loss: 10% comp/coll (per vehicle); All other vehicles (except tractors): \$250 comp/\$500 coll; Tractors: \$1,000 comp/coll (per vehicle); If a trailer is attached to a tractor, then one deductible applies. *Actual cash value at time of loss

CERTIFICATE HOLDER**CANCELLATION**

City of Oklahoma City Attn: Julie Butler 420 W. Main Street, Suite 700 Oklahoma City OK 73102 USA	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 <i>Tracy Williams</i>

Silver Star Construction Co., Inc.

2401 S. Broadway - Moore, Oklahoma 73160 – (405) 793-1725 / 1-800-375-1725 / Fax (405) 793-9989

Proposal 24027 BC0240 Bridge Replacement

12/16/2024

Silver Star Construction Co., Inc.
2401 S. Broadway

Moore, OK 73160
Phone# (405) 793-1725
Fax# (405) 793-9989
Attn:

Amendment Items:

ITEM #	DESCRIPTION	QUAN	UNIT	UNIT PRICE	EXT PRICE
20	UNCLASSIFIED EXCAVATION	4,480.15	CY	\$18.00	\$80,642.70
320	TREE REMOVAL (OVER 12 INCH CALIPER)	3.000	EA	\$2100.00	\$6,300.00
	CONTRACT TIME	33	DAYS	N/A	
TOTAL:					\$86,942.70

Change Order Items:

None

Contract Time:

ITEM #	DESCRIPTION	QUAN	UNIT	UNIT PRICE	EXT PRICE
	CONTRACT TIME	33	DAYS	N/A	N/A

Description:

Cost associated with opening a deep hole in the river bank to confirm location and depth of a gas main.



Silver Star Construction Co., Inc.

2401 S. Broadway - Moore, Oklahoma 73160 – (405) 793-1725 / 1-800-375-1725 / Fax (405) 793-9989

Proposal BC-0240 BRIDGE REPLACEMENT (B&H)

12/16/2024

Silver Star Construction Co., Inc.
2401 S. Broadway

Moore, OK 73160
Phone# (405) 793-1725
Fax# (405) 793-9989
Attn:

Amendment Items:

ITEM #	DESCRIPTION	QUAN	UNIT	UNIT PRICE	EXT PRICE
20	UNCLASSIFIED EXCAVATION	2,527.89	CY	\$18.00	\$45,502.02
				TOTAL:	\$45,502.02

Change Order Items:

ITEM #	DESCRIPTION	QUAN	UNIT	UNIT PRICE	EXT PRICE
C01-1	CONSTRUCTION STAKING (CONSTRUCTION SURVEY)	2,527.89	LS	\$2,348.00	\$2,348.00
				TOTAL:	\$2,348.00

Contract Time:

ITEM #	DESCRIPTION	QUAN	UNIT	UNIT PRICE	EXT PRICE
	CONTRACT TIME	4	DAYS	N/A	N/A

Description:

Contractor will pothole from a top the road to located the main gas line in question. This is the second attempt to locate the gas main and was successful.

