



**The City of  
OKLAHOMA CITY**  
UTILITIES DEPARTMENT  
Chris Browning, Director

**APPROVED** BY THE OKLAHOMA CITY

WATER UTILITIES TRUST

AT THEIR MEETING April 8 2025

RENEWAL NO. 2

February 27, 2025

Cimarron Construction Company, LLC  
Attn: Don E Noble, President  
3501 NE 63<sup>rd</sup> Street  
Oklahoma City, OK 73121

RE: Contract Renewal for Project WC-1051, Lead Service Line Identification

Dear Mr. Noble:

The City of Oklahoma City (City) and/or the Oklahoma City Water Utilities Trust (OCWUT) and Cimarron Construction Company, LLC, (Contracting Vendor), have the option of renewing the contract for lead service line identification, for an additional term beginning May 1, 2025, through April 30, 2026, under the same terms, conditions and provisions as originally awarded, including price(s).

Please indicate whether or not you consent on behalf of the Contracting Vendor to the renewal of the above-mentioned Agreement by completing the information on the enclosed Agreement Renewal Form, including signature from an authorized officer of the business or corporation. If the individual signing the Agreement Renewal Form is not the owner or an authorized officer of the business or corporation, the Contracting Vendor must either complete and submit a Letter of Authorization or affix its corporate seal to the Agreement Renewal Form. For your convenience, a fillable standard Letter of Authorization has been included with this renewal letter.

Should the City of Oklahoma City and/or OCWUT decide not to renew the above-mentioned Agreement, you will be notified in writing by certified mail, postage prepaid, and by email. **This form may be mailed, emailed, scanned, or otherwise electronically submitted for Agreement renewal.**

Please complete and return the Agreement Renewal Form, current certificate of insurance, and if applicable, the Letter of Authorization by March 10, 2025.

**Contact the City of Oklahoma City Utilities Department Procurement Section at ww-procurement@okc.gov if any of the business or corporation information has changed (i.e. company name), as additional information may be required.**

If you have any questions, please contact me at (405) 297-3459 or email leigh.kitsmiller@okc.gov.

Thank you,

Leigh Ann Kitsmiller  
Regulatory Compliance Manager  
Utilities Department

Enclosure



The City of  
**OKLAHOMA CITY**  
UTILITIES DEPARTMENT

Agreement Renewal Form - (Agreement Number)

Select one of the following:

☒ Yes, I consent to the renewal  
pursuant to the terms  
of Project WC-1051

☐ No, I do not consent to the renewal of  
Project WC-1051.

Complete the information below:

D.J. NIEBRUGGE  
PRINTED NAME/TITLE

[Signature]  
AUTHORIZED OFFICER SIGNATURE

Cimarron Construction Company, LLC.  
COMPANY NAME  
(MUST MATCH AGREEMENT)

3501 NE 63<sup>rd</sup> Street  
STREET ADDRESS

Oklahoma City, OK 73121  
CITY, STATE AND ZIP CODE

405-728-1555  
BUSINESS TELEPHONE

dj@CimarronCCO.com  
CONTACT/E-MAIL

[CITY USE ONLY]

           The City of Oklahoma City and/or OCWUT chooses not to renew (Agreement Number).



CIMACON-01

AFRIZZELL

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/25/2025

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 Rich & Cartmill, Inc. 9401 Cedar Lake Avenue Oklahoma City, OK 73114	CONTACT NAME:		
	PHONE (A/C, No, Ext): (405) 418-8600	FAX (A/C, No): (405) 418-8641	
	E-MAIL ADDRESS: richcartmill@rcins.com		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Phoenix Insurance Company		25623
INSURED  Cimarron Construction Company, LLC 3501 NE 63rd Street Oklahoma City, OK 73121	INSURER B : Travelers Indemnity Co of Am		25666
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

## COVERAGES

## CERTIFICATE NUMBER:

## 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 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"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	X		CO4017P290PHX25	1/1/2025	1/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	X		8103L0829692526G	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	UB9J5941852526G	1/1/2025	1/1/2026	<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

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

Project: WC-1051 Lead Line Locating Project

The City of Oklahoma City and OCWUT are additional insured as required by contract

30 day notice of cancellation except for non-payment of premium

## CERTIFICATE HOLDER

## CANCELLATION

City of Oklahoma City & OCWUT  
420 W. Main Street, Suite 700  
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

*Travis E. Brown*