

**MAINTENANCE BOND**  
(Private Contract)

Bond Number: GR60909

**KNOW ALL MEN BY THESE PRESENT:**

That We, All Roads Paving, Inc., as Principal, and Granite Re, Inc.  
, as Surety, are held and firmly bound unto THE CITY OF OKLAHOMA  
CITY in the full and just sum of Eight Hundred Seventy-four Thousand Five Hundred Nineteen & 05/100 Dollars  
(\$874,519.05), such sum being equal to the contract price for a period of two (2) year, for the payment  
of which, well and truly to be made, we, and each of us, bind ourselves, our heirs, executors, and  
assigns, themselves, and its successors and assigns, joint and severally, firmly by these presents.

Whereas, in a contract dated the 21<sup>st</sup> day of September, 2023 with  
Ideal Homes, the principal agreed to construct improvements in the City of  
Oklahoma City, being:  
Paving to Knox Farms Section 2

as more particularly described and in compliance with the plans and specifications on file in the  
Office of the City Engineer of The City of Oklahoma City. As a condition of said construction  
contract and as a condition of the issuance of a work order by the City Engineer, Principal has agreed  
and hereby agrees to construct and maintain said improvements in compliance with Oklahoma City  
standards and the aforementioned plans and specification against any failure due to workmanship or  
material for a period of two (2) years from the date of final formal acceptance of the improvements  
by the Council of the City of Oklahoma City.

**NOW, THEREFORE**, if said Principal shall pay or cause to be paid to the City, all damage,  
loss and expense which may result by reason of defective materials and/or workmanship in  
connection with said work occurring within a period of two (2) years from and after the final formal  
acceptance of said project by the City, then this obligation shall be null and void, otherwise to be and  
remain in full force and effect.

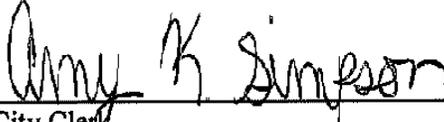
It is further agreed that if the said Principal or Surety herein shall fail to maintain said improvements against any failure due to defective workmanship and/or material for a period of two (2) years and at any time repairs shall be necessary that the cost of making said repairs shall be determined by the Council of THE CITY OF OKLAHOMA CITY, or some person or persons designated by them to ascertain the same, and if, upon thirty (30) days notice, the said amount ascertained shall not be paid by the Principal or Surety herein, or if the necessary repairs are not made, the said amount shall become due upon the expiration of thirty (30) days and suit may be maintained to recover the amount so determined in any Court of competent jurisdiction. And that the amount so determined shall be conclusive upon the parties as to the amount due on this bond for the repair or repairs included therein, and that the cost of all repairs shall be so determined from time to time during the life of this bond as the condition of the improvements may require.

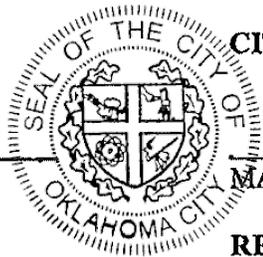
It is further expressly agreed and understood by the parties hereto that no changes or alterations in said contract and no deviations from the plan or mode of procedure herein fixed shall have the effect of releasing the sureties, or any of them, from the obligations of this bond.

**IN WITNESS WHEREOF**, the said Principal has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its duly authorized officers; and the said Surety has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its attorney-in-fact, duly authorized so to do, the day and year first above written.

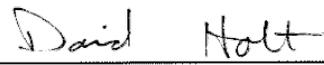
**REVIEWED** and **APPROVED** by the Council of THE CITY OF OKLAHOMA CITY  
this 13TH day of AUGUST, 2024.

**ATTEST:**

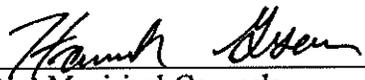
  
\_\_\_\_\_  
City Clerk



**CITY OF OKLAHOMA CITY**

  
\_\_\_\_\_  
MAYOR

**REVIEWED** for form and legality.

  
\_\_\_\_\_  
Assistant Municipal Counselor

EXECUTED this 22nd day of September, 2023

All Roads Paving, Inc.

ATTEST:

Principal

Secretary/Witness

By David D. Barnett

**NOTARY STATEMENT**

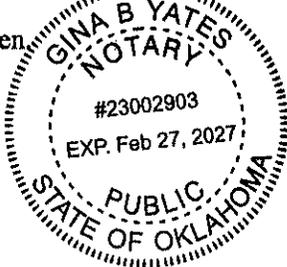
STATE OF Oklahoma )

) SS.

COUNTY OF Canadian )

Signed and sworn or affirmed before me on this 25 day of September, 2023,  
by David D. Barnett  
as a free and voluntary act on behalf of the Principal pursuant to authority conferred and for these  
uses and proposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year last  
above written.



(Seal)

Gina B. Yates  
Notary Public

My Commission expires: 2-27-27

My Commission No.: 23002903

EXECUTED this 22nd day of September, 2023

ATTEST: Granite Re, Inc.  
Surety

Carey Kennemer  
Secretary/Witness Carey Kennemer

By Vicki Wilson  
Vicki Wilson, Attorney-in-Fact

**NOTARY STATEMENT**

STATE OF Oklahoma )

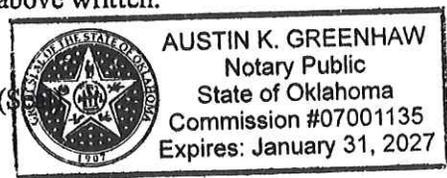
) SS.

COUNTY OF Oklahoma )

Signed and sworn or affirmed before me on this 22nd day of September, 2023  
by Vicki Wilson

as a free and voluntary act on behalf of the Surety pursuant to authority conferred and for these uses  
and proposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year last  
above written.



Austin K Greenhaw

Notary Public

My Commission expires: January 31, 2027

My Commission No.: 07001135







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/23/2024

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).

<b>PRODUCER</b> Wiedemann Insurance Agency, Inc. 112 South 4th Street  Yukon OK 73099	<b>CONTACT NAME:</b> Amanda Wiedemann <b>PHONE (A/C, No, Ext):</b> (405) 354-7920 <b>E-MAIL ADDRESS:</b> amanda@okinsurancepro.com	<b>FAX (A/C, No):</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> NATIONAL AMER INS CO	<b>NAIC #</b> 23663
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**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 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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	MP29940235	02/01/2024	02/01/2025	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
A	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	Y	MP29940235	02/01/2024	02/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 10,000.00	Y	MB60200235	02/01/2024	02/01/2025	EACH OCCURRENCE \$ 5,000,000.00 AGGREGATE \$ 5,000,000.00
A	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	CW50090235	02/01/2024	02/01/2025	<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)

Project: PD-3195 Inox Farms Section

The City of Oklahoma City and the Public Works Department are additional insureds with respect to liability arising out of the project or event."

**CERTIFICATE HOLDER****CANCELLATION**

The City of Oklahoma City and the Public Works Department  420 West Main 6th Floor 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 <i>Amanda Wiedemann</i>
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**NOTARY STATEMENT**

STATE OF Oklahoma )  
 ) SS.  
COUNTY OF Canadian )

I, Amanda Wiedemann, a Notary Public in and for said County and State, do hereby certify that on this 20th day of September, 2023 Travis Wiedemann personally known to me to be the said person and official who executed the above and foregoing instrument as representative, appeared before me in person and acknowledged that, as such official, he/she executed the above instrument as his free and voluntary act on behalf of National American Insurance Company pursuant to authority conferred and for these uses and proposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year last above written.

Amanda Wiedemann  
Notary Public

My Commission expires:

