



The City of  
**OKLAHOMA CITY**  
Department of Public Works

July 8, 2024

**APPROVED**  
8-13-2024

Greg Goodpasture  
Oklahoma Roofing & Sheet Metal LLC.  
1708 Lowry Ave  
Oklahoma City, OK 73129

BY THE CITY COUNCIL  
*Amy M. Simpson* CITY CLERK

RE: Project MC-0735 Annual Roofing Contract, – Contract Renewal

Dear Mr. Goodpasture:

The City of Oklahoma City and Oklahoma Roofing & Sheet Metal LLC., have the option of renewing the Contract for MC-0735 Annual Roofing Contract, for the term of July 1, 2024 to June 30, 2025, under the same terms, conditions and provisions as originally awarded, including prices. Please indicate your concurrence or non-concurrence below and return to Jeromy Smith at (at jeromy.smith@okc.gov by July 18, 2024, with a current certificate of insurance. Your concurrence does not guarantee renewal.

Yes, I would like to renew the above-mentioned contract.

No, I do not wish to renew the above-mentioned contract.

SIGNATURE BY PRESIDENT/ AUTHORIZED REPRESENTATIVE

Ronny Gilbreath  
PRINTED NAME OF SIGNATORY

Oklahoma Roofing & Sheet metal  
COMPANY NAME

P.O. Box 96528  
STREET ADDRESS

Oklahoma City , Oklahoma 73143  
CITY, STATE, ZIP CODE

(405) 670-1429  
BUSINESS TELEPHONE

**(CITY USE ONLY)**

The City of Oklahoma City chooses not to renew the above contract.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/9/2024

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> Rich & Cartmill, Inc. 9401 Cedar Lake Avenue Oklahoma City, OK 73114	<b>CONTACT NAME:</b> Diane Shepard <b>PHONE (A/C, No, Ext):</b> (405) 463-7520 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> dshepard@rcins.com
	<b>INSURER(S) AFFORDING COVERAGE</b>
<b>INSURED</b>  Oklahoma Roofing & Sheet Metal, LLC PO Box 96528 Oklahoma City, OK 73143	<b>INSURER A :</b> American Cas Co of Reading PA <b>NAIC #</b> 20427
	<b>INSURER B :</b> Continental Ins Co <b>35289</b>
	<b>INSURER C :</b> Valley Forge Ins Co <b>20508</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 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 OTHER:	X		7015064250	5/1/2024	5/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<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			BUA7012436951	5/1/2024	5/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 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 DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			CUE7014771981	5/1/2024	5/1/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	7012442765	5/1/2024	5/1/2025	<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
C	Inland Marine			7014939991	5/1/2024	5/1/2025	Leased/Rented 500,000
C	Installation			7014939991	5/1/2024	5/1/2025	All Projects 5,000,000

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

MC-0668 Annual Roofing Contract

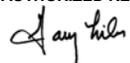
AS REQUIRED BY WRITTEN CONTRACT:

The Certificate Holder is additional insured, with regards to the Commercial General Liability, as afforded by form CNA75079XX.

The Certificate Holder is loss payee, with regards to the Valuable Papers.

### CERTIFICATE HOLDER

### CANCELLATION

The City of Oklahoma City and its beneficiary trusts 420 W. Main St., Suite 400 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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## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Rich &amp; Cartmill, Inc.</b>		NAMED INSURED <b>Oklahoma Roofing &amp; Sheet Metal, LLC</b> PO Box 96528 Oklahoma City, OK 73143	
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

## Other Coverages:

## Pollution Liability - Columbia Casualty Company

Effective Dates 05/01/2024 - 05/01/2025

Policy # 5099464562

Claims-Made Policy

Each Claim - \$2,000,000

Aggregate Limit - \$2,000,000

## Errors and Omissions - Columbia Casualty Company

Effective Dates 05/01/2024 - 05/01/2025

Policy # 5099464562

Claims-Made Policy

Each Claim - \$2,000,000

Aggregate Limit - \$2,000,000

Installation Floater Contains Property at a Temporary Storage Coverage - Limit - \$1,000,000

\*\*\*\*Referenced forms are available upon request.