10056

CONTRACT BETWEEN THE CITY OF JACKSONVILLE AND XEYE INCORPORATED FOR

HANNA PARK LAKESIDE - ADA RESTROOM RENOVATIONS

THIS CONTRACT is executed as of this ______ day of ________, 2014, by and between the CITY OF JACKSONVILLE, FLORIDA, a municipal corporation in Duval County, Florida (hereinafter the "Owner" or the "City"), and XEYE INCORPORATED, a Florida profit corporation with principal office at 3035 Powers Avenue, #4, Jacksonville, Florida 32207 (hereinafter the "Contractor") for Hanna Park Lakeside - ADA Restroom Renovations.

WITNESSETH, that for the consideration and under the provisions hereinafter stated and referred to moving from each to the other of said parties respectively, it is mutually understood and agreed as follows:

- 1. That Contractor is the lowest and best responsible bidder for furnishing all labor, materials, and equipment and performing all operations necessary to make the ADA renovations to the Kathryn Abbey Hanna Park lakeside restroom, located at 500 Wonderwood Road, Jacksonville, Florida 32233, including but not limited to removing existing toilet partitions and toilets, installing new partitions to create ADA stall in men's and women's restrooms, removing existing tile and installing new tile in the ADA toilet stall, installing ADA grab bars, mirrors, and signage, lowering the urinal in the men's restroom, installing new hand dryers, painting all interior areas, replacing missing light fixture lens, wrapping all lavatories' plumbing, extending the rope pull and adjusting the pull pressure of the outdoor shower, installing new hi-lo drinking fountain and proper cane detection, and installing new ADA compliant handrails, all in accordance with plans and specifications hereafter referred to, and has been awarded this Contract for said work pursuant to award made October 7, 2014.
- 2. The Contractor will, at its own cost and expense, do the work required to be done and furnish the materials required to be furnished on said work in accordance with plans

and specifications prepared for the Department of Parks, Recreation and Community Services, bid numbered JCF-0137-14, bid date September 5, 2014, designated as "Bid Specifications for Kathryn Abbey Hanna Park - Lakeside Restrooms - ADA Renovations," and strictly in accordance with the advertisement calling for bids, plans, specifications, blueprints, addenda, requirements of the City of Jacksonville, proposal of said Contractor, and award therefor (hereinafter collectively the "Contract Documents") now on file in the Office of the Chief of the Procurement Division of the City of Jacksonville, all of which are hereby specifically made a part hereof by reference to the same extent as if fully set out herein, for the total base bid amount of THIRTY-SEVEN THOUSAND TWO HUNDRED TWENTY-NINE AND 35/100 DOLLARS (\$37,229.35), at and for the prices and on the terms contained in the Contract Documents.

- 3. On the faithful performance of this contract by the Contractor, the Owner will pay the Contractor in accordance with the terms and on the conditions stated in the Contract Documents.
- 4. This Contract and all amendments thereto may be executed in several counterparts, each of which shall be deemed to be an original, and all of such counterparts together shall constitute one and the same instrument.

[Remainder of page intentionally left blank. Signature page follows immediately.]

IN WITNESS WHEREOF, the parties hereto have duly executed this Contract in duplicate the day and year first above written.

ATTEST:	CITY OF JACKSONVILLE, FLORIDA
By James R. McCain, Jr. Corporation Secretary	By Sauen Bow Janes Alvin Brown, Mayor
Corporation Secretary	Karen Bowling Chief Administrative Officer For: Mayor Alvin Brown Under Authority of: Executive Order No. 2013-04
In accordance with Section 2	Ordinance Code of the City of Jacksonville, I
do hereby certify that there is an unexpended, une	
appropriation sufficient to cover the foregoing agree	eement, and that provision has been made for
the payment of monies provided therein to be paid.	Director of Finance 10056
	Director of Finance 10056
Form Approved:	
Office of General Counsel	
Ourice of General Counsel	
WIŢNESS:	XEYE NCORPORATED
- Kilaya M	
Signature	Signature
K Kar Muniz Type/Print Name	Joseph A Hwithinson Type/Print Name
Operations Manager Title	President Title

CONTRACTOR



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/29/2014

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 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 All Lines Insurance Agency, Inc. 4828 Blanding Blvd Suite 1 Jacksonville FL 32210-7390		CONTACT Peggy Logan PHONE (A/C, No, Ext): 904-384-0783 FAX (A/C, No): 9	904-384-0550
		E-MAIL ADDRESS; mlogan@all-lines.com	
		INSURER(S) AFFORDING COVERAGE	NAIC#
		INSURER A : Southern-Owners Insurance Co	10190
INSURED	XEYEI-1	INSURER B : Owners Insurance Company	32700
Xeye, Inc. 3035 Powers Ave #4 Jacksonville FL 32207		INSURER C : HOMELAND INS CO OF NY	34452
		INSURER D :	
		INSURER E :	
		INSURER F:	
	0070404	400	

COVERAGES CERTIFICATE NUMBER: 835010432

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.

1 :	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. IADDLISUBRI POLICY EXP.							
INSR LTR	TYPE OF INSURANCE	INSD V	WVD POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	X COMMERCIAL GENERAL LIABILITY		78591482	8/29/2014	8/29/2015	EACH OCCURRENCE	\$1,000,000	
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000	
	X Hired Auto					MED EXP (Any one person)	\$10,000	
	X Non-Owned Auto					PERSONAL & ADV INJURY	\$1,000,000	
ļ	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$2,000,000	
}	POLICY X PRO-			- 1		PRODUCTS - COMP/OP AGG	\$2,000,000	
	OTHER:					H/NO Auto	\$1,000,000	
В	AUTOMOBILE LIABILITY		4770694800	7/25/2014	7/25/2015	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
	ANY AUTO					BODILY INJURY (Per person)	\$	
	ALL OWNED X SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$	
	HIRED AUTOS NON-OWNED AUTOS	NON-OWNED			PROPERTY DAMAGE (Per accident)	\$		
							\$	
Α	X UMBRELLA LIAB X OCCUR		4782411901	8/29/2014	8/29/2015	EACH OCCURRENCE	\$4,000,000	
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$4,000,000	
	DED X RETENTION \$5,000	- [\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		78073057	9/1/2014	9/1/2015	X PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$1,000,000	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		""^			E.L. DISEASE - EA EMPLOYEE	\$1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below				,	E.L. DISEASE - POLICY LIMIT	\$1,000,000	
С	Pollution	İ	793-00-21-65-0000	5/12/2014	5/12/2015	Pollution Liability	1,000,000	
-]	ļ	1					
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Ref: Hanna Park Lakeside - ADA Restroom Renovations

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CANCELLATION

City of Jacksonville Procurement Division 214 N. Hogan St. #800, Ed Ball Bldg Jacksonville FL 32202 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

Oma S. Farhat

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