



Please send the invoice for this order to the address shown. Failure to use our order number on any documentation pertaining to this order may result in return of shipment or delayed payment.

**Supplier:**

TS&L LLC  
PO BOX 1240  
Grand Junction, CO 81502

**Ship To:**

244 North 7th Street  
GRAND JUNCTION, CO 81501  
UNITED STATES

**Bill To:**

Park Operations  
2529 High Country Court  
GRAND JUNCTION, CO 81501  
UNITED STATES

SUPPLIER #: 10027  
FAX#:  
EMAIL:

**Order Number**  
**GJPO100313**

**Order Date**  
**04/29/2025**

SOLICITATION #:  
NOTES:

<i>Tax Terms</i>		<i>For the tax-exempt purchase, Grand Junction's tax ID is 84-6000592</i>			
		<i>All Library Purchases are Tax Exempt - Tax ID 98-03544</i>			
Requestor gailh@gjcity.org		Phone 1-970-256-4082	Net Terms Net 30	Date Required 04/29/2025	
QUANTITY	UNIT	ITEM	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
			Emergency Purchase for TS&L to install signal pole foundations - Monument Rd Trail		41,216.00
<b>Total</b>					<b>41,216.00</b>

Approved:



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Requestor gailh@gjcity.org		Phone 1-970-256-4082	Net Terms Net 30	Date Required 04/29/2025	
QUANTITY	UNIT	ITEM	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
			Emergency Purchase for TS&L to install signal pole foundations - Monument Rd Trail		25,000.00
<b>Total</b>					<b>25,000.00</b>

Approved:



CITY OF GRAND JUNCTION, COLORADO

\*\*\*\*\*

## CONTRACT

This CONTRACT made and entered into this **17th of April 2025** by and between the **City of Grand Junction, Colorado**, a government entity in the County of Mesa, State of Colorado, hereinafter in the Contract Documents referred to as the "Owner" and **TS&L LLC** hereinafter in the Contract Documents referred to as the "Contractor."

WITNESSETH:

WHEREAS, the Contractor has agreed to furnish all labor, tools, supplies, equipment, materials, and everything necessary and require for the Project describe by the Contract Documents and known as **Emergency Purchase Installation of Signal Pole Foundations #5666-25-DD**.

WHEREAS, the Contract has been awarded to the above-named Contractor by the Owner, and said Contractor is now ready, willing and able to perform the Work specified in accordance with the Contract Documents.

NOW, THEREFORE, in consideration of the compensation to be paid the Contractor, the mutual covenants hereinafter set forth and subject to the terms hereinafter stated, it is mutually covenanted and agreed as follows:

### TITLE 1

**Contract Documents**: It is agreed by the parties hereto that the following list of instruments, drawings, and documents which are attached hereto, bound herewith, or incorporated herein by reference constitute and shall be referred to either as the "Contract Documents" or the "Contract", and all of said instruments, drawings, and documents taken together as a whole constitute the Contract between the parties hereto, and they are fully a part of this agreement as if they were set out verbatim and in full herein:

The order of contract document governance shall be as follows:

- a. The body of this contract agreement.
- b. Contractors' Proposal.
- c. Work Change requests (directing that change work be performed);  
    . iel Orders.
- e. Change Orders.

## ARTICLE 1

Contract Work: The Contractor agrees to furnish all labor, tools, supplies, equipment, materials, and all that is necessary and required to complete the tasks associated with the Work described, set forth, shown, and included in the Contract Documents.

## ARTICLE 2

Contract Time: Time is of the essence with respect to this Contract. The Contractor hereby agrees to commence Work under the Contract no later than the date specified in the Solicitation from the Owner, and to achieve Substantial Completion and Final Completion of the Work within the time periods specified in the Solicitation.

## ARTICLE 3

Contract Price and Payment Procedures: The Contractor shall accept as full and complete compensation for the performance and completion of all of the Work specified in the Contract Documents, the sum of **Twenty-Five Thousand, and 00/100 Dollars (\$25,000.00)**. If this Contract contains unit price items, the Contract Price shall be adjusted in accordance with the actual quantities of items completed and accepted by the Owner at the unit prices quoted in the Contractor's proposal. The amount of the Contract Price is and has heretofore been appropriated by the Grand Junction City Council Board of Commissioners for the use and benefit of this Project. The Contract Price shall not be modified except by Change Order or other written directive of the Owner. The Owner shall not issue a Change Order or other written directive which requires additional work to be performed, which work causes the aggregate amount payable under this Contract to exceed the amount appropriated for this Project, unless and until the Owner provides Contractor written assurance that lawful appropriations to cover the costs of the additional work have been made.

Unless otherwise provided in the Contract Documents, monthly partial payments shall be made as the Work progresses. Applications for partial and Final Payment shall be prepared by the Contractor and approved by the Owner in accordance with the Contract Documents.

## ARTICLE 4

Contract Binding: The Owner and the Contractor each bind itself, its partners, successors, assigns and legal representatives to the other party hereto in respect to all covenants, agreements and obligations contained in the Contract Documents. The Contract Documents constitute the entire agreement between the Owner and Contractor and may only be altered, amended or repealed by a duly executed written instrument. Neither the Owner nor the Contractor shall, without the prior written consent of the other, assign or sublet in whole or in part its interest under any of the Contract Documents and specifically, the Contractor shall not assign any moneys due or to become due without the prior written consent of the Owner.

## ARTICLE 5

Severability: If any part, portion or provision of the Contract shall be found declared null, void or unenforceable for any reason whatsoever by any court of competent jurisdiction or

any governmental agency having the authority thereunder, only such parties, persons or entities shall be affected thereby and all the parties, persons and entities of the Contract shall remain in full force and effect.

IN WITNESS WHEREOF, City of Grand Junction, Colorado, has caused this Contract to be subscribed and sealed and attested in its behalf; and the Contract has signed this Contract this day and the year aforesaid in.

This Contract is executed in two counterparts.

CITY OF GRAND JUNCTION, COLORADO

DocuSigned by:  
By: Dolly Daniels 4/18/2025  
Dolly Daniels, Senior Buyer Dat

TS&L LLC

Signed by:  
By: Chad Harris 4/17/2025  
Chad Harris, General Manager Dat



RE: Monument Rd HAWK signal

From Chad Harris <chad@tsandlllc.com>  
Date Thu 4/10/2025 8:51 AM  
To Ken Haley <kennethh@gjcity.org>

⚠️ [EXTERNAL SENDER](#) ⚠️

Only open links and attachments from known senders. DO NOT provide sensitive information.

Ken

Here is our complete pricing to install the caissons for the Monument Rd HAWK Signal Project.

1	EA	24"x6' Caisson for Ped Pole	\$ 2,000.00	\$ 2,000.00
4	EA	24"x6' Caisson for Advanced Warning Pole	\$ 2,000.00	\$ 8,000.00
1	EA	36"x15' Caisson for Signal Pole	\$ 13,000.00	\$ 13,000.00
1	LS	Mobilization	\$ 2,000.00	\$ 2,000.00
			Total	\$ 25,000.00

From: Ken Haley <kennethh@gjcity.org>  
Sent: Wednesday, April 9, 2025 3:55 PM  
To: Chad Harris <chad@tsandlllc.com>  
Subject: Fw: Monument Rd HAWK signal

Hi Chad,

The City of Grand Junction is working to install a pedestrian signal on Monument Road for a trail crossing. Our crews have poles/equipment and will be performing the majority of the installation. We are looking for someone to help install the signal pole foundations and wanted to reach out to see if you had any recommendations.

For your reference, I have attached a copy of some plans and we are specifically looking for help in installing the following:

- (1) 36" x 15' caisson for signal pole foundation
- (1) 18" x 6' caisson for pedestrian pole
- (4) 18" x 6' caissons for advanced warning beacons

We are shooting to have signal operational by early May, so we recognize this is a short turn around. Please call when you can if you have any suggestions.

Thank you,

**Kenneth Haley, P.E.**

Engineering Manager

City of Grand Junction

244 N. 7<sup>th</sup> Street

Grand Junction, CO 81501

O: 970-244-1543

M: 970-250-7761

[gjcity.org](http://gjcity.org) | [EngageGJ](#)





## *Memorandum*

**TO:** Mike Bennett, City Manager  
Trent Prall, Engineering & Transportation Director  
Jay Valentine, General Services Director

**FROM:** Ken Haley, Engineering Manager

**DATE:** April 15, 2025

**SUBJECT:** Emergency Purchase for TS+L to install signal pole foundations

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Construction is currently in process for the new section of the Monument Connect Trail project to connect the existing trail at Lunch Loop Trailhead to South Camp Road. The proposed trail will cross Monument Road approximately 170 feet north of Stone Creek Court. The City was in process of completing a speed study to pursue implementing a speed reduction at this location to improve safety at the time of procurement for the construction project. The resulting speed study did not support a speed reduction and warranted a higher level of safety improvements for the crosswalk than was in the construction contract, which includes installation of a pedestrian signal with advanced warning beacons.

The City Traffic Division is able to obtain the necessary signal poles and equipment for the crossing and are able to complete the majority of the installation with the exception of the signal pole foundations. Engineering did request a proposal from the project's construction contractor to assist with installation of the foundations for the signal poles due to the specialized nature of work, but they have been unresponsive to this request. The project is scheduled for completion by May 2, 2025 and it is necessary to have the signalized crosswalk installed prior to completion due to the potential safety hazards.

Due to the extremely short duration to complete the work and dangerous conditions associated with not having the signal operational, Engineering is requesting authorization to proceed with an Emergency Purchase in compliance with the protocols outlined in Chapter 20 of the Purchasing Manual. Engineering has already reached out to TS&L due to their expertise in this type of work. TS&L has availability to install the foundations necessary to meet the project schedule. **TS&L has provided a proposal of \$25,000** for turnkey installation of foundations for one (1) signal pole, (1) pedestrian pole, and (4) advanced warning beacons. These costs appear to be comparative, or less than, other recent projects that the City has contracted through a competitive bidding process.

We appreciate your consideration of this request. If you concur with the direction described above, please sign below indicating your approval.

  
Michael P. Bennett, City Manager

4.16.25  
Date





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/16/2025

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).

<b>PRODUCER</b> Pinnacol Assurance 7501 E. Lowry Blvd. Denver, CO 80230-7006		<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> <b>E-MAIL:</b> <b>ADDRESS:</b>		<b>FAX (A/C, No):</b>
<b>INSURED</b> T S & L LLC P.O. Box 1240 Grand Junction, CO 81502		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Pinnacol Assurance <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>		
				<b>NAIC #</b> 41190

<b>COVERAGES</b>	<b>CERTIFICATE NUMBER:</b>	<b>REVISION NUMBER:</b>
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
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input 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					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE  DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y / N <input type="checkbox"/> N / A		4211167	07/01/2024	07/01/2025	<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)  
Unless otherwise stated in the policy provisions, coverage in Colorado only.

<b>CERTIFICATE HOLDER</b> 2472248 City of Grand Junction 244 N 7TH Street Grand Junction, CO 81501	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  <b>AUTHORIZED REPRESENTATIVE</b> R-T Specialty/Best Buy Insurance
--	---

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## **CERTIFICATE HOLDER COPY**

City of Grand Junction  
244 N 7TH Street  
Grand Junction, CO 81501

### **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

### **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT (CONT)

NCCI #: WC000313  
Policy #: 4211167

T S & L LLC  
P.O. Box 1240  
Grand Junction, CO 81502

R-T Specialty/Best Buy Insurance  
5660 South Greenwood Plaza Blvd STE 500  
Greenwood Village, CO 80111  
(303) 984-0200

**ENDORSEMENT: Waiver Of Subrogation**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

**SCHEDULE**

City of Grand Junction  
244 N 7TH Street  
Grand Junction, CO 81501

Effective Date: April 16, 2025  
Pinnacol Assurance has issued this endorsement April 16, 2025



TS&amp;LLC-01

MGALLEGOS

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/17/2025

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PRODUCER License # 0757776

HUB International Insurance Services (COL)  
743 Horizon Ct., Suite 201  
Grand Junction, CO 81506

CONTACT NAME: Margaret Gallegos

PHONE  
(A/C, No, Ext):FAX  
(A/C, No):

E-MAIL ADDRESS: Margaret.Gallegos@hubinternational.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Employers Mutual Casualty Company

21415

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED

T S & L, LLC  
PO Box 1240  
Grand Junction, CO 81502

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

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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	X	X	6X19433	4/15/2025	4/15/2026	EACH OCCURRENCE \$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
							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
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> OWNED AUTOS ONLY						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS ONLY						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			6X19433	4/15/2025	4/15/2026	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 1,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

City of Grand Junction is included as additional insured under General Liability including ongoing and completed operations on a primary and non-contributory basis. A waiver of subrogation in favor of the additional insured applies to General Liability.

## CERTIFICATE HOLDER

## CANCELLATION

City of Grand Junction  
244 N 77th Street  
Grand Junction, CO 81501

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






# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/14/2025

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<b>PRODUCER</b>  KATIE RILEY, AGENT 5961 Middlefield Rd Ste 102 Littleton CO 80123	<b>CONTACT NAME:</b> Valerie M Lopez <b>PHONE (A/C, No, Ext):</b> 303 798 8880 <b>E-MAIL ADDRESS:</b> info@katieriley.net <b>FAX (A/C, No):</b> <b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Farm Mutual Automobile Insurance Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	<b>NAIC #</b> 25178
<b>INSURED</b> TS & L LLC 1503 W McCowan Ln Queen Creek AZ 85140		

**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG \$ \$ \$ \$ \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	589 2067-E03-06 502 9099-F15-06 664 4207-C10-06	11/03/2024 12/15/2024 03/10/2024	05/03/2025 06/15/2025 09/10/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) \$ 2,000,000 \$ \$ \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE AGGREGATE \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT \$ \$ \$

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

2020 GMC, VIN# 1GD29LE79LF308299  
2024 CHEVR, VIN# 2GC4YNE77R1244520  
2024 GMC: VIN# 1GD49SE79RF414859

<b>CERTIFICATE HOLDER</b> CITY OF GRAND JUNCTION 244 N 7TH STREET GRAND JUNCTION CO 81501	<b>CANCELLATION</b> 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 Completed by an authorized State Farm representative. If signature is required, please contact a State Farm agent.
--	--

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