

PHONE574/235-9251FAX574/235-9171

CITY OF SOUTH BEND JAMES MUELLER, MAYOR BOARD OF PUBLIC WORKS

June 25, 2024

Mr. Dustin Hilary Milestone Contractors North, Inc. 24358 State Road 23 South Bend, IN 46614 <u>akrueger@milestonelp.com</u>

RE: Project Completion Affidavit – West Race Gate Repair – Project No. 122-063

Dear Mr. Hilary:

At its June 25, 2024 meeting, the Board of Public Works approved the Project Completion Affidavit for this project in the amount of \$628,529.28.

A copy of the Project Completion Affidavit is enclosed for your records.

If you have any further questions, please call this office at (574) 235-9251.

Sincerely,

/s/ Theresa Heffner

Theresa Heffner, Clerk

Enclosures TH/lh

CITY OF SOUTH BEND, INDIANA BOARD OF PUBLIC WORKS PROJECT COMPLETION AFFIDAVIT



PROJECT NAME PROJECT NO	West Race Gate Repair 122-063	EDIAL COST \$628 520	1.78	•	
CONTRACT SIGNED	6/13/2023	FINAL COST \$628,529.28 MAINTENANCE AGREEMENT ENDS			
		te at Century Center West Race, and installation of new walkway,			way,
PROJECT DESCRIPTION	wall, and mechanical ga	te.			
WITNESSETH: The work under the above co	ontract between the City o	of South Bend and the under	rsigned contracto	or having been	
completed, the City of South	Bend, its officials and ag	gents are hereby released fro	om all claims and	demands whats	oever
arising under or by such con Standards of the City of Soy	tract, and that the contrac	tor performed the work with to f the above Contract.	hin the scope of t	ine Specifications	s and
Executed this 29th day	of May	202_4		ractors North, Inc	<u>c.</u>
- Inthe	$l \longrightarrow l$		Company Name	3	
Signature	<u> </u>		24358 State Roa		
Dustin P. Hilary, Direc	ctor of Estimating	_	Company Address		
Printed Name			South Bend, IN 46614		
•			City, State, Zip		
WITNESSESS:	ING DING to and	for and accurate and stat		maanad	
Before me, the undersigne Dustin P. Hilary , a					n
the 29th day of Ma	Y, 202 <u>4</u> .				
Notary Signature	1 mages	My Commission Expires	6/5/2030		ALISHA KRUEGER
Alisha Krueger	U			OCH BIG	My Commission Expires
Printed Name		County of Residence	LaPorte	* SEAL *	June 5, 2030 Commission Number NP0653544
If the Contractor is a corpora	ation, the following certifi	cate will be executed.		OF INO	La Porte County
I, Danielle Payne		y that I am Secretary of the			
Dustin P. Hilary		who signed this release on	behalf of the con	tractor was then	111140
Director of Estimating Corporation by Authority of	OI Said Cor	poration; that said release v	vas duly signed i	or and on behalit	N SAN IN
	ns governing body, and is	s within the scope of corpor	ate powers.	110.	0,11
Secretary's Signature	epile	who signed this release on poration; that said release v s within the scope of corpor — — F PUBLIC WORKS APPI		E S CORPOR	RATE
Desielle Deurse	\mathcal{I}			E Si Corpôi	rate Seal
Danielle Payne				EZ: DE	
T Innext Name	NEDA DTRAFENT OF	DIDITC WODKS ADD	DOVAT	THE HAIL	in I III
This project is acceptable for	r final approval and we re	commend to the Board of P	ublic Works that	it be ordafied st	unnin
Kula Ludlau	Dote	· 6/11/2021			
Construction Manager	Daic	. 0/14/2024			
- ()	SOUTH BEND BOA	RD OF PUBLIC WORK	s		
Secretary's Signature Danielle Payne Printed Name This project is acceptable for Kyle Lucllow Construction Manager					
CITY OF SOUTH BOARD OF PUB	I BEND, INDIANA LIC WORKS		6		
BILLAK		ZM	¢		
Elizabeth A. Mara	dik, President	Joseph R. Molnar, Vice Pres	sident		
Drodzi	hat	Frien Ban			
Gary A. Gilot, Me	mber	Briana Micou, Member			
mary & n	nella	(Hell Hom			

Murray L. Miller, Member

Attest: Theresa M. Heffner, Clerk Date: June 25, 2024

Final Waiver of Lien

State	of Indiana, County	of SAIN	T JOSEPH	SS:			
JEN	JEN TIMMONS (Name of Officer)		being duly sworn that he/she is t	PROJECT ACCOUNTANT			
				(Title)			
of	MILESTONE CON	TRACTORS NORTH, INC	having contracted with	City of South Bend			
	(Contractor)			(Owner)			
to fur	nish certain materia	ls and/or labor as follows:	REMOVAL OF EXISTING GATE,	INSTALL NEW WALKWAY & MECHANICAL GATE			
				(Description)			
for a p	project known as	122-063 WEST F					
located	d at		(Name of	Project)			
and ov	wned by		City of Sout	h Bend			
		• • • • • • • • • • • • • • • • • • •	(Owner)				
and do	es hereby further st	ate on the behalf of the afo	rementioned subcontractor/supplie	r:			
(PARI	TIAL WAIVER) the	at there is due from the Con	tractor the sum of				
			Dollars	(\$.)			
	receipt of which i	s hereby acknowledged; or					
	the payment of wi solely with respec undersigned;	hich has been promised as t at to said amount, and which	the sole consideration for this Affic h waiver shall be effective only up	davit and Final Waiver of Lien which is given on receipt of payment thereof by the			
(FINAI	WAIVER) that th	e final balance due from th	e contractor is the sum of				
	receipt of which is	hereby acknowledged; or					
\boxtimes	the payment of wh become effective of	lich has been promised as the set of the set of the second s	he sole consideration for this Affic ayment.	lavit and Final Waiver of Lien which shall			
thereto, lien on a and Wai	bove-described pro subject to limitation account of any work iver of Lien.	perty and improvements the us or conditions expressed l c performed or material fur	ereon an account of labor or mater herein, if any; and further certified nished to the undersigned for said	mises, any and all liens or claims whatsoever ial or both, furnished b the undersigned that no other party has any claim or right to a project, and within the scope of this Affidavit			
MILESTO	NE CONTRACTORS	·····	By Jen /	(Authorized Representative)			
STATE	(Firm OF INDIANA) (THRY PUR	JOHN CONWAY	(Authorized Representative)			
	EPH COUNTY Before me, the und) SS: (*(SEAL)*)	Commission Number: NP0746553 My Commission Expires	personally appeared JEN TIMMONS			
and ackn	lowledged the exect	ution of the foregoing Affic	lavit and Walver of Lien. ibscribed my name and affixed my				
			202 4				
				Notary Public Signature			
My Com	mission Expires;	02/01/2031					
· · · ·	in LA PORTE	County, INDIANA		JOHN CONWAY Notary Public Name			

MAINTENANCE BOND

Bond No. MNT30193005

KNOW ALL PERSONS BY THESE PRESENTS, That we Milestone Contractors North, Inc.

of 24358 State Road 23, South Bend, IN 46614 _____, hereinafter referred to as the Principal, and <u>Continental Casualty Company</u> as Surety, are held and firmly bound unto City of South Bend of _227 West Jefferson Blvd., South Bend, IN 46601 _____, hereinafter referred to as the Obligee, in the sum of Sixty Two Thousand Eight Hundred Fifty Two Dollars and 93/100 Dollars (\$ 62,852.93 __), for the payment of which we bind ourselves, our legal representatives, successors and assigns, jointly and severally, firmly by these presents. WHEREAS, the said Principal entered into a contract with the City of South Bend ____ dated June 13 2023 , for Project No. 122-063; West Race Gate Repair WHEREAS, said contract provides that the Principal will furnish a bond conditioned to guarantee for the period of Three _ (____3__) year(s) after approval of the final estimate on said job, by the owner, against all defects in workmanship and materials which may become apparent during said period, and WHEREAS, the said contract has been completed, and was approved on _____ NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH that, if the Principal shall indemnify the Obligee for all loss that the Obligee may sustain by reason of any defective materials or workmanship which become apparent during the period of <u>Three</u> (<u>3</u>) year(s) from and after_ then this obligation shall be void, otherwise to remain in full force and effect. SIGNED, SEALED AND DATED this _____28th ____ day of ____ Mav 2024 Milestone Contractors North, Inc. (Principal) By (Seal) Dustin P. Hilary **Director of Estimating** Continental Casualty Company (Surety B Angela M. Riley Attorney Form F4591

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company (herein called "the CNA Companies"), are duly organized and existing insurance companies having their principal offices in the City of Chicago, and State of Illinois, and that they do by virtue of the signatures and seals herein affixed hereby make, constitute and appoint

Angela M. Riley , Individually of

their true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on their behalf Carmel, IN bonds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -

Surety Bond No: MNT30193005 Principal: Milestone Contractors North, Inc.

Obligee: City of South Bend

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of their insurance companies and all the acts of said Attomey, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Laws and Resolutions, printed below, duly adopted, as indicated, by the Boards of Directors of the insurance companies.

In Witness Whereof, the CNA Companies have caused these presents to be signed by their Vice President and their corporate seals to be hereto affixed on this 9th day of January, 2024.



Continental Casualty Company National Fire Insurance Company of Hartford American Casualty Company of Reading, Pennsylvania

uni Larry Kasten Vice President

State of South Dakota, County of Minnehaha, ss:

On this 9th day of January, 2024, before me personally came Larry Kasten to me known, who, being by me duly swom, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company described in and which executed the above instrument; that he knows the seals of said insurance companies; that the seals affixed to the said instrument are such corporate seals; that they were so affixed pursuant to authority given by the Boards of Directors of said insurance companies and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance companies.

My commission expires

March 2, 2026



Notary Public

CERTIFICATE

M. Bent

I, D. Johnson, Assistant Secretary of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Laws and Resolutions of the Board of Directors of the insurance companies printed below are still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance companies this 28th day of May . 2024 . CASU



Continental Casualty Company National Fire Insurance Company of Hartford American Casualty Company of Reading, Pennsylvania

D. Johnson Assistant Secretary

Authorizing By-Laws and Resolutions

ADOPTED BY THE BOARD OF DIRECTORS OF EACH OF CONTINENTAL CASUALTY COMPANY, NATIONAL FIRE INSURANCE COMPANY OF HARTFORD, and AMERICAN CASUALTY COMPANY OF READING, PENNSYLVANIA (as defined above, the "CNA Companies"):

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of each of the above CNA Companies at a meeting held on May 12, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective.

This Power of Attorney is signed by Larry Kasten, Vice President, who has been authorized pursuant to the above resolution to execute power of attorneys on behalf of each of the CNA Companies.

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of each of the above Companies by unanimous written consent dated the 25th day of April, 2012:

"Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the "Authorized Officers") to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, "Electronic Signatures"); Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company.

This Power of Attomey may be signed by digital signature and sealed by a digital or otherwise electronic-formatted corporate seal under and by the authority of the following Resolution adopted by the Board of Directors of each of the above CNA Companies by unanimous written consent dated the 27th day of April, 2022:

"RESOLVED: That it is in the best interest of the Company to periodically ratify and confirm any corporate documents signed by digital signatures and to ratify and confirm the use of a digital or otherwise electronic-formatted corporate seal, each to be considered the act and deed of the Company.

Go to www.cnasurety.com > Owner / Obligee Services > Validate Bond Coverage, if you want to verify bond authenticity.

Form F6853-6/2023



May 28, 2024

Ms. Alisha Krueger Milestone Contractors North, Inc. 24358 State Road 23 South Bend, IN 46614

RE:	Type of Bond: Bond Number: Obligee: Description: Bond Amount: Premium Due:	Maintenance Bond MNT30193005 City of South Bend Project No. 122-063; West Race Gate Repair \$62,852.93 \$157.00
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Dear Alisha,

We are pleased to enclose the bond you requested. The bond issued was based upon the information you provided. We suggest you check all the documents enclosed, including the Power of Attorney, signatures, dates, amounts, description, and any other attachments. Please verify that the bond form attached is the form required and be sure to execute the bond with the proper signature and seal.

Thank you and please call me should you have any questions.

Sincerely, Angela M. Riley Surety Senior Account Manager, AssuredPartners

Angela.Riley@AssuredPartners.com

Enclosures

assuredpartners.com

BOARD OF PUBLIC WORKS AGENDA ITEM REVIEW REQUEST FORM

Date	06/14/2024								
Name Kyle Ludlow			Department Public Works						
BPW Date 06/25/2024				Phone	Extension	1	9157		
	-							-	
		Review	v and Approv	al Required	l Prior t	o Submitt	al to Board		
Diversity Co and Inclusio			Officer Nar	ne					
BPW Attorn	ney		Attorney N	ame					
Dept. Attorr	ney		Attorney 1	Name					
Purchasing									
	Cl	neck the	Appropriate	Item Type	– Requ	ired for Al	ll Submissions	1	
 Professiona Open Mark Bid Openin Quote Open Proposal O Chg. Order Other: 	al Services Ag tet Contract ng ning pening		nt Con Amendu Bid Aw Quote A	tract nent/Adden ard ward PCA No.	dum	Propos	sal al Purchase, Q o Advertise Bids/Quotes		Title Sheet
			I	Required Inf	ormatio	on			
Company or V	endor Name			Contractors 1 f Yes, Appr			nσ		
New Vendor			No		orea o) 1 41 011451			
MBE/WBE Co	ontractor		MBE UWBE	Completed		ify Form A	Attached		Yes
Project Name				Gate Repair					
Project Numbe			122-063		/ 0 /				
Funding Sourc	e			nter Capital		water			
	Account No. <u>PR-00024383 PO-0</u>			JZ4346					
Amount Terms of Cont	ract		\$628,529.2	5					
Purpose/Description <u>Project Closeout</u>									
For Change Orders Only									
Amount of		Increa Decre	se <u></u> \$)		2			
Previous Amor	unt		\$)					
			Increase	%					
Current Percen	t of Change:		Decrease	(%)				
New Amount	Ĵ.		\$						
			Increase	%					
Total Percent of	•		Decrease	(%)				
Time Extensio									
New Completi	on Date:								