



# CITY OF SOUTH BEND

## BOARD OF PUBLIC WORKS

February 24, 2026

Ms. Jen Timmons  
Milestone Contractors, L.P.  
24358 SR 23  
South Bend, IN 46614  
[akrueger@milestonelp.com](mailto:akrueger@milestonelp.com)

RE: Project Completion Affidavit – 2024 CCMG Rd. 1 – Project No. 124-006

Dear Ms. Timmons:

At its February 24, 2026 meeting, the Board of Public Works approved the Project Completion Affidavit for this project in the amount of \$2,722,927.27.

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/ Hillary Horvath

Hillary Horvath, Clerk

Enclosures  
HH/cb

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



PROJECT NAME 2024 Community Crossing  
PROJECT NO 124-006 FINAL COST \$2,722,927.27  
CONTRACT SIGNED 5/3/2024 MAINTENANCE AGREEMENT ENDS  
PROJECT DESCRIPTION Paving of multiple city roadways and updating striping layouts.

WITNESSETH:

The work under the above contract between the City of South Bend and the undersigned contractor having been completed, the City of South Bend, its officials and agents are hereby released from all claims and demands whatsoever arising under or by such contract, and that the contractor performed the work within the scope of the Specifications and Standards of the City of South Bend which were a part of the above Contract.

Executed this 7TH day of JANUARY, 2026.

[Signature]  
Signature  
JEN TIMMONS  
Printed Name

Milestone Contractors, L.P.  
Company Name  
24358 SR 23  
Company Address  
South Bend, IN  
City, State, Zip

WITNESSESS:

Before me, the undersigned Notary Public in and for said country and state, personally appeared JEN TIMMONS, and acknowledged his/her signature to the above Project Completion Affidavit on the 7TH day of JANUARY, 2026.

[Signature]  
Notary Signature  
JOHN CONWAY  
Printed Name

My Commission Expires 02/01/2031  
County of Residence LA PORTE



If the Contractor is a corporation, the following certificate will be executed.  
I, \_\_\_\_\_, certify that I am Secretary of the Corporation executing this release; that \_\_\_\_\_ who signed this release on behalf of the contractor was then \_\_\_\_\_ of said Corporation; that said release was duly signed for and on behalf of said Corporation by Authority of its governing body, and is within the scope of corporate powers:

\_\_\_\_\_  
Secretary's Signature  
\_\_\_\_\_  
Printed Name

Corporate Seal

DEPARTMENT OF PUBLIC WORKS APPROVAL

This project is acceptable for final approval and we recommend to the Board of Public Works that it be ordained so.

Kyle Ludlow Date: 2/11/2026  
Construction Manager

CITY OF SOUTH BEND, INDIANA  
BOARD OF PUBLIC WORKS

[Signature]  
Elizabeth A. Maradik, President  
[Signature]  
Murray L. Miller, Member  
[Signature]  
Abigail E. Magas, P.E.  
Abigail E. Magas, Member

[Signature]  
Joseph R. Molnar, Vice President  
[Signature]  
Breana N. Micou, Member  
[Signature]  
Attest: Hillary R. Horvath, Clerk  
Date: February 24, 2026

Final Waiver of Lien

State of Indiana, County of SAINT JOSEPH SS: JEN TIMMONS being duly sworn that he/she is the PROJECT ACCOUNTANT (Name of Officer) (Title)

of MILESTONE CONTRACTORS LP having contracted with CITY OF SOUTH BEND (Contractor) (Owner)

to furnish certain materials and/or labor as follows: ASPHALT AND CONCRETE (Description)

for a project known as 2024 CCMG (Name of Project)

located at VARIOUS LOCATIONS WITH IN THE CITY OF SOUTH BEND, IN and owned by CITY OF SOUTH BEND (Owner)

and does hereby further state on the behalf of the aforementioned subcontractor/supplier: (PARTIAL WAIVER) that there is due from the Contractor the sum of Dollars (\$ . )

- checkbox receipt of which is hereby acknowledged; or checkbox the payment of which has been promised as the sole consideration for this Affidavit and Final Waiver of Lien which is given solely with respect to said amount, and which waiver shall be effective only upon receipt of payment thereof by the undersigned;

(FINAL WAIVER) that the final balance due from the contractor is the sum of \$163,207.92 (\$ . )

- checkbox receipt of which is hereby acknowledged; or checkbox the payment of which has been promised as the sole consideration for this Affidavit and Final Waiver of Lien which shall become effective only upon receipt of such payment.

THEREFORE, the undersigned waives and releases unto the Owner of said premises, any and all liens or claims whatsoever on the above-described property and improvements thereon an account of labor or material or both, furnished b the undersigned thereto, subject to limitations or conditions expressed herein, if any; and further certified that no other party has any claim or right to a lien on account of any work performed or material furnished to the undersigned for said project, and within the scope of this Affidavit and Waiver of Lien.

MILESTONE CONTRACTORS, LP (Firm) By [Signature] (Authorized Representative)

STATE OF INDIANA ) ST. JOSEPH COUNTY ) SS:

Before me, the undersigned, a Notary Public, in and for said County and State, personally appeared JEN TIMMONS and acknowledged the execution of the foregoing Affidavit and Waiver of Lien.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal on the 7TH day of JANUARY 2026

[Signature] Notary Public Signature

My Commission Expires: 02/01/2031 JOHN CONWAY

Residing in LA PORTE County, INDIANA



**BOARD OF PUBLIC WORKS  
AGENDA ITEM REVIEW REQUEST FORM**

Date	<b>02/17/2026</b>	Department	<b>Public Works</b>
Name	<b>Kyle Ludlow</b>	Phone Extension	<b>9157</b>
BPW Date	<b>02/24/2026</b>		

**Review and Approval Required Prior to Submittal to Board**

Diversity Compliance and Inclusion Officer	<input type="checkbox"/>	Officer Name	_____
BPW Attorney	<input type="checkbox"/>	Attorney Name	_____
Dept. Attorney	<input type="checkbox"/>	Attorney Name	_____
Purchasing	<input type="checkbox"/>		_____

**Check the Appropriate Item Type – Required for All Submissions**

<input type="checkbox"/> Professional Services Agreement	<input type="checkbox"/> Contract	<input type="checkbox"/> Proposal	
<input type="checkbox"/> Open Market Contract	<input type="checkbox"/> Amendment/Addendum	<input type="checkbox"/> Special Purchase, QPA	
<input type="checkbox"/> Bid Opening	<input type="checkbox"/> Bid Award	<input type="checkbox"/> Req. to Advertise	<input type="checkbox"/> Title Sheet
<input type="checkbox"/> Quote Opening	<input type="checkbox"/> Quote Award	<input type="checkbox"/> Reject Bids/Quotes	
<input type="checkbox"/> Proposal Opening	<input type="checkbox"/> C/O & PCA No. _____	<input checked="" type="checkbox"/> PCA	
<input type="checkbox"/> Chg. Order, No.	<input type="checkbox"/> Traffic Control	<input type="checkbox"/> Resolution	
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Ease. /Encroach	

**Required Information**

Company or Vendor Name	Milestone Contractors LP
New Vendor	<input type="checkbox"/> Yes <input type="checkbox"/> If Yes, Approved by Purchasing <input checked="" type="checkbox"/> No
MBE/WBE Contractor	<input type="checkbox"/> MBE <input type="checkbox"/> WBE Completed E-Verify Form Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
Project Name	2024 CCMG Rd. 1
Project Number	124-006
Funding Source	River West TIF, Local Road & Bridge, LRS
Account No.	PR-00031357 PO-0031157
Amount	\$2,722,927.27
Terms of Contract	
Purpose/Description	Project Closeout

**For Change Orders Only**

Amount of	<input type="checkbox"/> Increase \$ _____ <input type="checkbox"/> Decrease (\$)
Previous Amount	\$ _____
Current Percent of Change:	Increase % _____ Decrease (%) _____
New Amount	\$ _____
Total Percent of Change:	Increase % _____ Decrease (%) _____
Time Extension Amount:	0
New Completion Date:	