

EXHIBIT A

**CITY OF ST. HELENA PUBLIC WORKS
PROJECT WORK ORDER NO. 17-016-GV6**

PROJECT NAME: Railroad Avenue Curb ramps
CITY PROJECT MANAGER: Tobias Barr
CONSULTANT PROJECT MANAGER: Liz Ellis, Green Valley

SCOPE OF SERVICE: See Consultant's Scope of Services/Proposal for Services and Fee Schedule dated April 17th 2017, attached as Exhibit B-1.

START DATE: June 13, 2017 COMPLETION DATE: December 29, 2017

NOT-TO-EXCEED AMOUNT FOR THIS PROJECT: \$16,745

TERMS AND CONDITIONS: This Project Work Order is issued and entered into as of the last date written below in accordance with the terms and conditions set forth in the "Master Professional Services Agreement with Green Valley Consulting Engineers, dated August 11th, 2015, which is hereby incorporated and made part of this Project Work Order. In the event of a discrepancy or conflict between the terms and conditions of the Project work Order and the Master Agreement, the Master Agreement shall govern.

CITY OF ST. HELENA

By: [Signature] Date: 6/1/17
Larry Pennell APRIL MITTS, ACTING CITY MANAGER
City Manager

[CONSULTANT]

A California corporation (or name other state, or LLC, sole proprietor, etc.)

By: [Signature] Date: 5-17-17
Name: Elizabeth Ellis
Title: President

By: _____ Date: _____
Name: _____
Title: _____

APPROVED AS TO FORM:

By: [Signature]
Name: Thomas B. Brown
Title: City Attorney

Attachments: Exhibit B-1 - Consultant's proposal and fee for services for this Project Work Order



CITY OF ST. HELENA
 RAILROAD AVE CURB RAMP
 REPLACEMENT
 Estimated Hours and Fees
 Green Valley Consulting Engineers
 APRIL 17, 2017



ESTIMATED DESIGN FEES

TASK NUMBER	DESCRIPTION	PROPOSED HOURS						Subtotal	Direct Costs	Task Total Fees
		PM/PE \$145	Staff \$140	Engr \$135	Design \$120	Admin \$75				
Task 1	Site Evaluation and Feasibility	1		12		2	\$1,915	\$	75	\$1,990
Task 2	Preliminary Plans, Specifications and Estimate	8		50	4	4	\$8,690	\$	50	\$8,740
Task 3	Final Plans, Specifications and Estimate	8		20	4	2	\$4,490	\$	50	\$4,540
Task 4	Contract Assistance			10		1	\$1,425	\$	50	\$1,475
Total Hours		17	0	92	8	9	\$16,520	\$	225	

Direct costs are for printing and misc expenses

Estimated Design Fee Total

\$16,745

Exhibit B-1

Railroad Avenue Curb Ramp Replacement Project

Scope of Service and Fee Schedule

April 17, 2017

Scope of Service

TASK 1 – Site Evaluation and Feasibility Analysis

Perform a site visit and review the topographic mapping to be prepared by a third party survey firm. Site visit to identify any constraints associated with the ramps to be replaced, such as right-of-way concerns, need for temporary construction easements, grade conforms, etc. Consultant to obtain relevant background information as available, including: base maps, existing record drawings in the Project vicinity and information on existing utilities that will need to adjust to grade or relocate.

TASK 2 – Preliminary Plans, Specifications and Cost Estimates

Consultant will prepare preliminary improvement plans that indicate horizontal and vertical grade and conforms, any foreseen conflicts associated with proposed improvements as well as limit of demolition, general notes and preliminary design details. Draft specifications will be provided and preliminary cost estimate will be prepared.

TASK 3 – Final Plans, Specifications and Cost Estimate

Consultant will address any comments made by the City of St. Helena and prepare final plans and specifications suitable for public works advertising and construction.

Consultant will submit final stamped and signed construction documents suitable for advertising at this stage. Plan will have incorporated all utility company comments.

TASK 4 – Contract Assistance

Consultant will assist throughout contract bidding and construction as requested by the City of St. Helena, including attendance at a pre-construction conference and construction reviews. We are available to review payment requests, assist with RFI's and provide services as requested. Consultant will prepare and submit formal site visit reports after each site visit and meeting. Assume 1 site visit during construction.

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15-002-CL1	Coastland (CL)	\$44,783.00	\$232,050.00
15-003-IW1	Interwest (IW)	\$2,600.00	\$187,267.00
15-004-RGH1	RGH (RGH)	\$8,533.00	\$184,667.00
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16-009-GV5	Green Valley (GV)	\$3,910.00	\$246,716.25
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17-017-GV7	Green Valley (GV)	\$48,500.00	\$155,044.25
			\$106,544.25
			\$106,544.25
			\$106,544.25
			\$106,544.25
			\$106,544.25



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/6/2017

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).

PRODUCER License # 0E67768 IOA Insurance Services 3875 Hopyard Road Suite 240 Pleasanton, CA 94588	CONTACT NAME: Cassandra Thompson	
	PHONE (A/C, No, Ext):	FAX (A/C, No): (925) 416-7869
E-MAIL ADDRESS: Cassandra.Thompson@ioausa.com		
INSURED Green Valley Consulting Engineers 335 Tesconi Circle Santa Rosa, CA 95401	INSURER(S) AFFORDING COVERAGE	
	INSURER A: RLI Insurance Company	NAIC # 13056
	INSURER B: Admiral Insurance Company	NAIC # 24856
	INSURER C:	
	INSURER D:	
	INSURER E:	

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 WYD	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"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PSB0005626	08/05/2016	08/05/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 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 checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			PSA0002077	08/05/2016	08/05/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			PSE0002472	08/05/2016	08/05/2017	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	PSW0003238	08/05/2016	08/05/2017	<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
B	Prof Liab; Clms-Made			EO000026184-03	08/05/2016	08/05/2017	Per Claim 2,000,000
B	Ded Per Claim \$25k			EO000026184-03	08/05/2016	08/05/2017	Aggregate 2,000,000

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

All operations of the Named Insured, including the aforementioned project, if any.
General Liability: The City of St Helena, its agent, officers, officials, employees, and volunteers are included as Additional Insured on Primary & Non-Contributory basis with Waiver of Subrogation Included, as required by written contract.
Auto Liability: The City of St Helena, its agent, officers, officials, employees, and volunteers are included as Additional Insured on Primary & Non-Contributory basis with Waiver of Subrogation Included, as required by written contract.
Workers' Compensation: Waiver of Subrogation is in favor of The City of St Helena, its agent, officers, officials, employees, and volunteers, as required by written contract. Excess coverage follows form of the underlying Employers Liability, General Liability and Auto Liability.

CERTIFICATE HOLDER

CANCELLATION

City of St Helena ATTN: Tracy Perkosky 1480 Main Street Saint Helena, CA 94574	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

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

RLIPack[®] FOR DESIGN PROFESSIONALS BLANKET ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM - SECTION II - LIABILITY

1. **C. WHO IS AN INSURED** is amended to include as an additional insured any person or organization that you agree in a contract or agreement requiring insurance to include as an additional insured on this policy, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused in whole or in part by you or those acting on your behalf:
 - a. In the performance of your ongoing operations;
 - b. In connection with premises owned by or rented to you; or
 - c. In connection with "your work" and included within the "product-completed operations hazard".
2. The insurance provided to the additional insured by this endorsement is limited as follows:
 - a. This insurance does not apply on any basis to any person or organization for which coverage as an additional insured specifically is added by another endorsement to this policy.
 - b. This insurance does not apply to the rendering of or failure to render any "professional services".
 - c. This endorsement does not increase any of the limits of insurance stated in D. Liability And Medical Expenses Limits of Insurance.
3. The following is added to SECTION III H.2. Other Insurance - COMMON POLICY CONDITIONS (BUT APPLICABLE ONLY TO SECTION II - LIABILITY)

However, if you specifically agree in a contract or agreement that the insurance provided to an additional insured under this policy must apply on a primary basis, or a primary and non-contributory basis, this insurance is primary to other insurance that is available to such additional insured which covers such additional insured as a named insured, and we will not share with that other insurance, provided that:

 - a. The "bodily injury" or "property damage" for which coverage is sought occurs after you have entered into that contract or agreement; or
 - b. The "personal and advertising injury" for which coverage is sought arises out of an offense committed after you have entered into that contract or agreement.
4. The following is added to SECTION III K. 2. Transfer of Rights of Recovery Against Others to Us - COMMON POLICY CONDITIONS (BUT APPLICABLE TO ONLY TO SECTION II - LIABILITY)

We waive any rights of recovery we may have against any person or organization because of payments we make for "bodily injury", "property damage" or "personal and advertising injury" arising out of "your work" performed by you, or on your behalf, under a contract or agreement with that person or organization. We waive these rights only where you have agreed to do so as part of a contract or agreement with such person or organization entered into by you before the "bodily injury" or "property damage" occurs, or the "personal and advertising injury" offense is committed.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

A. Broad Form Named Insured

The following is added to the **SECTION II – LIABILITY Coverage, Paragraph A.1. Who Is An Insured Provision:**

Any business entity newly acquired or formed by you during the policy period, provided you own fifty percent (50%) or more of the business entity and the business entity is not separately insured for Business Auto Coverage. Coverage is extended up to a maximum of one hundred eighty (180) days following the acquisition or formation of the business entity.

This provision does not apply to any person or organization for which coverage is excluded by endorsement.

B. Employees As Insureds

The following is added to the **SECTION II – LIABILITY COVERAGE, Paragraph A.1. Who Is An Insured Provision:**

Any "employee" of yours is an "insured" while using a covered "auto" you don't own, hire or borrow in your business or your personal affairs.

C. Blanket Additional Insured

The following is added to the **SECTION II – LIABILITY COVERAGE, Paragraph A.1. Who Is An Insured Provision:**

Any person or organization that you are required to include as an additional insured on this coverage form in a contract or agreement that is executed by you before the "bodily injury" or "property damage" occurs is an "insured" for liability coverage, but only for damages to which this insurance applies and only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in **SECTION II – LIABILITY COVERAGE.**

The insurance provided to the additional insured will be on a primary and non-contributory basis to the additional insured's own business auto coverage if you are required to do so in a contract or agreement that is executed by you before the "bodily injury" or "property damage" occurs.

D. Blanket Waiver Of Subrogation

The following is added to the **SECTION IV – BUSINESS AUTO CONDITIONS, A. Loss Conditions, 5. Transfer Of Rights Of Recovery Against Others To Us:**

We waive any right of recovery we may have against any person or organization to the extent required of you by a contract executed prior to any "accident" or "loss", provided that the "accident" or "loss" arises out of the operations contemplated by such contract. The waiver applies only to the person or organization designated in such contract.

E. Employee Hired Autos

1. The following is added to the **SECTION II – LIABILITY COVERAGE, Paragraph A.1. Who Is An Insured Provision:**

An "employee" of yours is an "insured" while operating an "auto" hired or rented under a contract or agreement in that "employee's" name, with your permission, while performing duties related to the conduct of your business.

2. Changes In General Conditions:

Paragraph 5.b. of the **Other Insurance Condition** in the **BUSINESS AUTO CONDITIONS** is deleted and replaced with the following:

b. For Hired Auto Physical Damage Coverage, the following are deemed to be covered "autos" you own:

- (1) Any covered "auto" you lease, hire, rent or borrow; and
- (2) Any covered "auto" hired or rented by your "employee" under a contract in that individual "employee's" name, with your permission, while performing duties related to the conduct of your business. However, any "auto" that is leased, hired, rented or borrowed with a driver is not a covered "auto".

F. Fellow Employee Coverage

SECTION II – LIABILITY COVERAGE, Exclusion B.5. does not apply if you have workers compensation insurance in-force covering all of your employees.

G. Auto Loan Lease Gap Coverage

SECTION III – PHYSICAL DAMAGE COVERAGE, C. Limit Of Insurance, is amended by the addition of the following:

In the event of a total "loss" to a covered "auto" shown in the Schedule of Declarations, we will pay any unpaid amount due on the lease or loan for a covered "auto", less:

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT-CALIFORNIA

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.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 2% of the California workers' compensation premium otherwise due on such remuneration.

Schedule

Person or Organization

All persons or organizations that are party to a contract that requires you to obtain this agreement, provided you executed the contract before the loss.

Job Description

Jobs performed for any person or organization that you have agreed with in a written contract to provide this agreement.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective Insured
Green Valley Consulting Engineers

Policy No PSW0003238
Insurance Company
RLI Insurance Company

Endorsement No.

Countersigned By Victoria Godfrey

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