

SECTION C

CONTRACT AGREEMENT

ANNUAL MAINTENANCE SERVICES
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)
FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

This agreement, made and concluded, in triplicate, this 21st day of June, 2011, between the City of Tustin, California, hereinafter called City, and Computer Service Company hereinafter called Contractor.

ARTICLE I. Witnesseth, that for and in consideration of the payments and agreements hereinafter mentioned, to be made and performed by the City, and under the conditions expressed in the two bonds, bearing date with these presents and hereunto annexed, the Contractor agreed with City, at his own proper cost and expense, to do all the work and furnish all the materials necessary to complete in good workmanlike and substantial manner and to the satisfaction of the City, in accordance with the specifications entitled:

ANNUAL MAINTENANCE SERVICES
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)
FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

which said specifications are hereby specifically referred to and by such references made a part hereof. Said specifications are on file in the office of the Engineer of the City of Tustin, California.

ARTICLE II. Contractor agrees to receive and accept the following prices as full compensation for furnishing all materials and for doing all the work contemplated and embraced in the Agreement; and also for all loss or damage arising out of the nature of the work aforesaid, or from the action of the elements, or from any unforeseen difficulties or obstructions which may arise or be encountered in the prosecution of the work until its acceptance by the City, and for all risks of every description connected with the work; also for all expenses incurred by or in consequence of the suspension or discontinuance of work and for well and faithfully completing the work, and the whole thereof, in the manner and according to the specifications, and the requirements of the Engineer under them.

CONTRACT

FOR

ANNUAL MAINTENANCE SERVICES
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)

FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

CITY OF TUSTIN

ITEM NO.	CONTRACT ITEM DESCRIPTION	ESTIMATED QUANTITY	UNIT TYPE	UNIT PRICE*	TOTAL PRICE
Section A - Routine Preventative Maintenance Items					
1.	Routine Preventative Maintenance of Traffic Signal and Safety Lighting System per Intersection Per Month	117	Ea.	\$55.00	\$6,435.00
2.	Routine Preventative Maintenance of Battery Back-up System Per Month	46	Ea.	\$10.00	\$460.00
3.	Routine Preventative Maintenance of Pole Mounted Flashing Beacon per Intersection per Month	2	Ea.	\$20.00	\$40.00
4.	Routine Preventative Maintenance of Mast Arm Mounted Flashing Beacon Per Intersection per Month	1	Ea.	\$20.00	\$20.00
5.	Routine Preventative Maintenance of Lighted Crosswalk System per Intersection Per Month	3	Ea.	\$25.00	\$75.00
A1	Routine Preventative Maintenance Per Month Total Item Nos. 1 through 5				\$7,030.00
A	Annual Routine Preventative Maintenance: (Multiply A1 by 12 to convert to annual cost)				\$84,360.00

* Unit prices shall include all labor, materials, equipment, overhead and profit and no additional compensation will be allowed.

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ANNUAL MAINTENANCE SERVICES
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CITY OF TUSTIN

Section B - Extraordinary Maintenance Items

The following **EXTRAORDINARY MAINTENANCE** quantities are **estimates only** and are provided solely for bidding purposes and for establishing the rates to be applied to actual annual **EXTRAORDINARY MAINTENANCE** performed. These estimates should not be construed as a minimum or maximum of actual **EXTRAORDINARY MAINTENANCE** performed per year.

ITEM NO.	CONTRACT ITEM DESCRIPTION	ESTIMATED QUANTITY	UNIT TYPE	UNIT PRICE*	TOTAL PRICE
6.	Replacement of inoperable safety light	20	Ea.	\$75.00	\$1,500.00
7.	Replacement of inoperable internally illuminated street name sign lamp	20	Ea.	\$75.00	\$1,500.00
8.	Replacement of internally illuminated street name sign panel	20	Ea.	\$250.00	\$5,000.00
9	Replacement of rectangular loop detector with Type "E" 6' diameter round loop, including saw-cut lead-in and cable splicing with hot-melt sealant	50	Ea.	\$390.00	\$19,500.00
10	Replacement of LED Type I module Red Ball vehicle lamp assembly	40	Ea.	\$85.00	\$3,400.00
11.	Replacement of incandescent with LED module Yellow Ball vehicle lamp assembly	100	Ea.	\$85.00	\$8,500.00
12.	Replacement of LED Type I module Green ball vehicle lamp assembly	40	Ea.	\$136.30	\$5,452.00
13.	Replacement of LED Type I module Red Arrow vehicle lamp assembly	30	Ea.	\$80.00	\$2,400.00
14.	Replacement of incandescent with LED Module Yellow Arrow vehicle lamp assembly	100	Ea.	\$80.00	\$8,000.00
15.	Replacement of LED Type I module Green Arrow vehicle lamp assembly	30	Ea.	\$117.00	\$3,510.00

*** Unit prices shall include all labor, materials, equipment, overhead and profit and no additional compensation will be allowed.**

CONTRACT

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CITY OF TUSTIN

ITEM NO.	CONTRACT ITEM DESCRIPTION	ESTIMATED QUANTITY	UNIT TYPE	UNIT PRICE*	TOTAL PRICE
16.	Replacement of Walk/Don't Walk, or Walkman/Hand pedestrian non LED signal to include LED module with clamshell mounting	20	Ea.	\$530.00	\$10,600.00
17.	Replacement of Pedestrian LED module	10	Ea.	\$215.00	\$2,150.00
18.	Replacement of pedestrian push button with "Bulldog" pedestrian push button	40	Ea.	\$90.00	\$3,600.00
19.	Painting of all pedestrian heads and Frameworks per intersection	10	Ea.	\$50.00	\$500.00
20.	Painting of all signal heads, backplates and frameworks per intersection	10	Ea.	\$90.00	\$900.00
21.	Painting of all pedestrian push button assemblies per intersection	10	Ea.	\$35.00	\$350.00
22.	Painting of traffic signal controller cabinet & electric service cabinet per intersection	10	Ea.	\$550.00	\$5,500.00
23.	Replacement of City owned underpass soffit light	5	Ea.	\$80.00	\$400.00

*** Unit prices shall include all labor, materials, equipment, overhead and profit and no additional compensation will be allowed.**

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CITY OF TUSTIN

ITEM NO.	CONTRACT ITEM DESCRIPTION	ESTIMATED QUANTITY	UNIT TYPE	UNIT PRICE*	TOTAL PRICE
24.	Replacement of City owned street light or bridge light	10	Ea.	\$80.00	\$800.00
25.	Annual conflict monitoring testing per intersection	117	Ea.	\$70.00	\$8,190.00
26.	Installation of standard 3-indication traffic signal head	10	Ea.	\$960.00	\$9,600.00
27.	Replacement of all batteries for battery back-up system per intersection	10	Ea.	\$230.00	\$2,300.00
28.	Replacement of battery back-up unit	3	Ea.	\$3,000.00	\$9,000.00
B	Annual Extraordinary Maintenance: Total Item Nos. 6 through 28				\$112,652.00
A	Annual Routine Preventative Maintenance (See Page C-2)				\$84,360.00
GRAND TOTAL: "A" PLUS "B"					\$197,012.00

* Unit prices shall include all labor, materials, equipment, overhead and profit and no additional compensation will be allowed.

ARTICLE III. City hereby promises and agrees with Contractor to employ and does hereby employ Contractor to provide the materials and to do the work according to the terms and conditions herein contained and referred to, for the prices aforesaid, and hereby contracts to pay the same at the time, in the manner and upon the conditions above set forth; and the said parties for themselves, their heirs, executors, administrators, successors and assigns do hereby agree to the full performance of the covenants herein contained.

ARTICLE IV. It is further expressly agreed by and between the parties hereto that should there be any conflict between the terms of this instrument and the proposal of Contractor, then this instrument shall control and nothing herein shall be considered as an acceptance of the said terms of said proposal conflicting herewith.

ARTICLE V.

1. The City of Tustin has obtained from the Director of Industrial Relations the general prevailing rate of per diem wages and the general prevailing rate for legal holiday and overtime work in the locality in which the work is to be performed for each craft or type of work needed to execute this contract and maintains copies thereof in the office of the Engineer. The Contractor agrees that not less than said prevailing rates shall be paid to workers employed on this public works contract as required by Labor Code Sections 1771 and 1774 of the State of California.

2. The Contractor shall, as a penalty to the City of Tustin, forfeit Fifty Dollars (\$50.00) for each calendar day or portion thereof for each worker paid (either by Contractor or any subcontractor of Contractor) less than the prevailing rate as prescribed in the preceding paragraph for the work provided for in this contract, all in accordance with Sections 1774 and 1775 of the Labor Code of the State of California.

3. Section 1773.5 of the Labor Code of the State of California, regarding the payment of travel and subsistence payments, is applicable to this contract.

4. Section 1777.5 of the Labor Code of the State of California, regarding the employment of apprentices, is applicable to this contract if the prime contract involves Thirty Thousand Dollars (\$30,000.00) or more, or twenty (20) working days or more and under such circumstances, Contractor shall be fully responsible to ensure compliance with all the provisions of Labor Code §1777.5 for all apprenticeable occupations on the project. A Contractor or subcontractor who violates Section 1777.5 shall forfeit to the City of Tustin, as a civil penalty, the sum of Fifty Dollars (\$50.00) for each calendar day of noncompliance. Notwithstanding Section 1727 of the Labor Code, upon receipt of a determination that a civil penalty has been imposed, the City of Tustin shall withhold the amount of the civil penalty from contract progress payments then due or to become due. Any funds withheld by the City of Tustin pursuant to this section shall be deposited in the General Fund of the City of Tustin.

5. The Contractor shall not employ, or allow work to be performed by a subcontractor who is ineligible to perform work on the project pursuant to Section 1777.1 or 1777.7 of the Labor Code pertaining to debarment by the Labor Commissioner for violations of the Prevailing Wage Laws.

6. In performance of this contract, not more than eight (8) hours shall constitute a day's work. The Contractor shall fully conform to Article 3, Chapter 1, Part 7, Division 2

(Sections 1810 et seq.) of the Labor Code of the State of California. Pursuant to the provisions of Section 1813 of the Labor Code of the State of California, the Contractor shall, as a penalty to the City of Tustin, forfeit twenty-five Dollars (\$25.00) for each worker employed in the execution of the contract by the Contractor or by any subcontractor for each calendar day during which such worker is required or permitted to work more than eight (8) hours in any one calendar day and forty (40) hours in any one calendar week in violation of the provisions of Article 3 of Chapter 1 of Part 7 of Division 2 of the Labor Code of the State of California. Contractor shall keep an accurate record showing the name and actual hours worked each calendar day and each calendar week by each worker employed by Contractor in connection with the public work.

7. Contractor agrees to keep accurate payroll records showing the name, address, social security number, work classification, straight time and overtime hours worked each day and week and the actual per diem wages paid to each journeyman, apprentice or worker employed by him in connection with the public work, and agrees to insist that each of his subcontractors do the same. Contractor further agrees that his payroll records and those of his subcontractors shall be available to the employee or his representative, the Division of Labor Standards Enforcement, and the Division of Apprenticeship Standards, and shall comply with all of the provisions of Labor Code Section 1776, et seq., in general.

8. Contractor is also aware of the provisions of Section 3700 of the Labor Code which requires every employer to be insured against liability for Worker's Compensation or undertake self-insurance in accordance with the provisions of that code and will comply with such provisions before commencing the performance of the work of this contract.

ARTICLE VI. In connection with the performance of this contract, the City shall have the authority to enter the worksite at any time for the purpose of identifying the existence of conditions, either actual or threatened, that may present a danger or hazard to any and all employees. The Contractor agrees that the City, in its sole authority and discretion, may order the immediate abatement of any and all conditions that may present an actual or threatened danger or hazard to any and all employees at the worksite.

The Contractor acknowledges the provisions of Section 6400 of the Labor Code, which requires that employers shall furnish employment and a place of employment that is safe and healthful for all employees working therein. In the event the City identifies the existence of any condition that presents an actual or threatened danger or hazard to any and all employees at the worksite the City is hereby authorized to order the immediate abatement of that actual or threatened condition pursuant to this section. The City may also, at its sole authority and discretion, issue an immediate stop work order to the Contractor to ensure that no employee working at the worksite is exposed to a dangerous or hazardous condition. Any stop work order issued by the City to the Contractor in accordance with the provisions of this section shall not give rise to any claim or cause of action for delay damages by the Contractor or the Contractor's agents or subcontractors against the City.

ARTICLE VII. The Contractor shall indemnify and save harmless the City of Tustin and all officers and employees thereof from all claims, suits, or actions of every

name, kind and description, brought for, or on account of, injuries to or death of any person including, but not limited to, workers and the public, or damage to property resulting from the construction of the work or by or in consequence of any negligence regarding the work, use of improper materials or equipment in construction of the work, neglect or refusal of Contractor to faithfully perform the work and all of Contractor's obligations under the contract, or by or on account of any act or omission by the Contractor or his agents or a subcontractor or his agents or a third party during the progress of the work or at any time before its completion and final acceptance, or which might arise in connection with the agreed upon work or is caused by or happening in connection with the progress of said work, or on account of any passive or active negligent act or omission by the City of Tustin, its officers, employees and agents, save and except claims arising through the sole and exclusive negligence or sole and exclusive willful misconduct of the City of Tustin.

The defense and indemnification by Contractor shall include all costs and expenditures including attorney's fees incurred by the City of Tustin or its employees, officers or agents with respect to such claim or suit and Contractor will, if requested by City of Tustin, defend any litigation arising out of such claims at the sole cost and expense of Contractor.

In addition to any remedy authorized by law, so much of the money due the Contractor under and by virtue of the contract as shall be considered necessary in the sole discretion of the City of Tustin may be retained by the City until disposition has been made of such claims for damages as aforesaid.

ARTICLE VIII. The Contractor shall take out and maintain during the life of the contract, commercial general liability, automobile liability and worker's compensation insurance. The amount of the commercial general liability and automobile insurance shall not be less than the following:

Single limit coverage applying to bodily and personal injury liability and property damage: \$2,000,000.00.

The following endorsements must be indicated on all certificates of insurance:

1. The City of Tustin, its elective and appointive boards, officers, agents and employees named as additional insureds in the policy as to the work being performed under the contract;
2. The coverage is primary and no other insurance carried by the City of Tustin will be called upon to contribute to a loss under this coverage;
3. The policy covers blanket contractual liability;
4. The policy limits or liability are provided on an occurrence basis;
5. The policy covers broad form property damage liability;
6. The policy covers personal injury as well as bodily injury liability;

7. The policy covers explosion, collapse and underground hazards;
8. The policy covers products and completed operations;
9. The policy covers use of non-owned automobiles; and
10. The coverage shall not be cancelled or terminated altered unless thirty (30) days' written notice is first given to the City of Tustin.
11. Insurers shall be authorized to do business in the State by the Department of Insurance and shall meet the following qualifications:

A.M. Best's Key Rating of Grade A and Class VII (seven) (if an Admitted Insurer), and Grade A- or better and Class X (ten) or better (if offered by a Surplus Line Broker), is acceptable. Workers' compensation insurance rated Grade B- or better and Class VII (seven) or better, or offered by the State Compensation Fund, is acceptable.
12. The worker's compensation and employer's liability insurance policies shall contain a waiver of subrogation in favor of the City.

Contractor shall provide to the City within ten (10) working days after the date of notice of award of the contract evidence of the aforementioned insurance with insurer endorsements, which must meet the requirements of this Article. An Acord Certificate will be accepted solely as evidence of the name of the insurers and the amounts of insurance. Failure to comply with these requirements will result in annulment of the award, forfeiture of the proposal guarantee, and the City will pursue award to the next qualified responsive proposer. Contractor is advised that insurance requirements are non-negotiable and City will not consider waiving insurance requirements. There are no exceptions.

ARTICLE IX Upon receipt of a claim or summons and complaint by the City Clerk relating to this Contract, the City Clerk shall provide written notice within five (5) working days to the Contractor of the claim or summons or complaint. For purposes of this section, notice to the Contractor may be via facsimile, messenger or by first class mail and addressed to:

Computer Service Company
12907 E. Garvey Avenue
Baldwin Park, CA 91706
951.738.1444

Nothing herein obligates the City to provide notice of a claim or summons and complaint that does not clearly identify the Contractor.

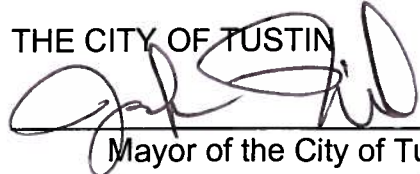
ARTICLE X Prior to one hundred fifty (150) calendar days before June 30, 2012, Contractor shall notify City in writing of its intent to renew the contract for an additional term of one (1) year to commence on July 1, 2012 and on the same terms and conditions as prescribed for the mutual term, or upon different terms which Contractor shall specify in writing. City shall, within thirty (30) days of receipt of such notice, advise

Contractor in writing of its acceptance or rejection of such extension. The same provisions shall be applicable to each succeeding one (1) year term through June 30, 2016 as prescribed in Section D (Length of Contract).

In Witness Whereof, the parties have hereunto set their hands and seals the year and date first above written.

THE CITY OF TUSTIN


BY:



Mayor of the City of Tustin

(SEAL)

ATTEST:



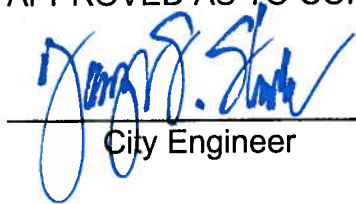
City Clerk of the City of Tustin

CONTRACT AND BOND APPROVED: *AS TO FORM:*



City Attorney Date 6/14/11

APPROVED AS TO CONTENT:



City Engineer Date 6/19/2011

CONTRACTOR

Firm Name: Computer Service Company
12907 E. Garvey Avenue
Baldwin Park, CA 91706
951.738.1444

(SEAL)

By: 

Vincent Mauch
TITLE: Chief Financial Officer

Note: Attach proper acknowledgment for both Surety & Principal. (Use copies of blank form provided in Section B).

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

State of California }
County of Los Angeles } ss.

On May 25, 2011 before me, Gayle C. Kappelman, Notary Public
Date Name and Title of Officer (e.g. "Jane Doe, Notary Public")

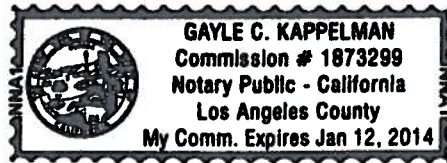
personally appeared Vincent P. Mauch,
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Gayle C. Kappelman
Signature



(Seal)

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document:

Title or Type of Document: Annual Contract Agreement for Annual Maintenance Service - City of Tustin

Document Date: _____ Number of Pages: _____

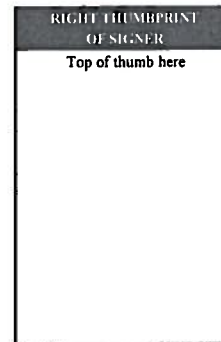
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: Vincent P. Mauch

- Individual
- Corporate Officer - Title(s): Chief Financial Officer
- Partner(s) - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other:

Signer is Representing: Computer Service Company



Bond No. 6704880
Amount \$ 50,000.00
Premium \$350.00

CITY OF TUSTIN
PUBLIC CONTRACT
FAITHFUL PERFORMANCE BOND

KNOW ALL MEN BY THESE PRESENTS: That Computer Service Company, as and hereinafter referred to collectively as "Principal", and Safeco Insurance Company of America a corporation organized and existing under the laws of the State of WA, and duly authorized to transact surety business in the State of California, as, and hereinafter referred to as, "Surety", are held and firmly bound unto the City of Tustin hereinafter referred to as the "City", in the sum of \$ 50,000.00 for payment of which Principal and Surety bind themselves, their heirs, administrators, successors and assigns, jointly and severally as follows:

THE CONDITION OF THE ABOVE OBLIGATION IS THAT:

WHEREAS, Principal has entered into a contract dated April 25, 2011, with City to do and perform the following, generally described work, which is more particularly described in said contract for the construction/maintenance of:

ANNUAL MAINTENANCE SERVICES
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)
FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

WHEREAS, all of such improvements are to be constructed/maintained and installed in accordance with the specifications described, referred to and incorporated in said contract; and

WHEREAS, Principal shall commence and complete the construction/maintenance and installation of such improvements as provided in said contract;

NOW, THEREFORE, if Principal shall faithfully perform all agreements contained in the aforesaid contract, then this obligation shall be null and void.

PROVIDED, HOWEVER, if Principal shall not faithfully perform all agreements contained in the hereinabove described contract and all obligations, then this obligation shall remain in full force and effect.

PROVIDED FURTHER HOWEVER, that Surety hereby stipulates and agrees that no change, extension of time, alteration or modification of the contract documents or of the work to be performed thereunder shall in any way affect its obligation on this bond and it does hereby waive notice of any such change, extension of time, alteration or modification of the contract documents or of the work to be performed thereunder; and

PROVIDED FURTHER, that in case suit is brought upon this bond by the City or any other person who may bring an action on this bond, a reasonable attorney's fee, to be fixed by the Court, shall be paid by Principal and Surety.

IN WITNESS WHEREOF, Principal and Surety have caused these presents to be duly signed and sealed this 19th day of May, 2011.

SURETY: Safeco Insurance Company of America

(NAME)

BY: Jeri Apodaca
Jeri Apodaca, Attorney in Fact

(SEAL)

Attorney-in-Fact

BY: _____

Address of Surety:

330 No. Brand Blvd., Suite 500

Glendale, CA 91203

APPROVED AS TO FORM:

[Signature]
City Attorney

PRINCIPAL: Computer Service Company

BY: [Signature]

(SEAL)

TITLE: Vincent P. Mauch, CFO

Address of Principal:

12907 E. Garvey Avenue

Baldwin Park, CA 91706

APPROVED AS TO CONTENT:

[Signature] Date 6/15/2011
City Engineer

Note: Attach proper acknowledgment for both Surety & Principal. (Use copies of blank form provided in Section B).

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

} ss.

On May 20, 2011 before me, Kathy M. Edwards - Notary Public
Date Name and Title of Officer (e.g. "Jane Doe, Notary Public")

personally appeared Vincent P. Mauch
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Vincent P. Mauch
Signature



(Seal)

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document: FAITHFUL PERFORMANCE BOND # 6704880

Title or Type of Document: CITY OF TUSTIN

Document Date: 5/19/2011 Number of Pages: 1

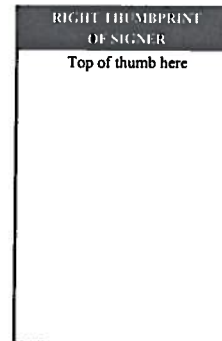
Signer(s) Other Than Named Above: Jeri Apodaca - Safeco Insurance Co. of America

Capacity(ies) Claimed by Signer

Signer's Name: Vincent P. Mauch

- Individual
- Corporate Officer - Title(s): CFO
- Partner(s) - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other:

Signer is Representing: Computer Service Company



CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Orange

On MAY 19 2011 before me, Rhonda C. Abel, Notary Public
(Here insert name and title of the officer)

personally appeared Jeri Apodaca

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Rhonda C. Abel
 Signature of Notary Public



(Notary Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

 (Title or description of attached document)

 (Title or description of attached document continued)

Number of Pages _____ Document Date _____

 (Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
- Corporate Officer
- _____
 (Title)
- Partner(s)
- Attorney-in-Fact
- Trustee(s)
- Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

Bond No. 6704880
Amount \$ 50,000.00
Premium Included in Performance Bond

CITY OF TUSTIN
PUBLIC CONTRACT
LABOR AND MATERIALS PAYMENT BOND

KNOW ALL MEN BY THESE PRESENTS: That Computer Service Company, as and hereinafter referred to collectively as "Principal", and Safeco Insurance Company of America, a corporation organized and existing under the laws of the State of WA, and duly authorized to transact surety business in the State of California, as and hereinafter referred to as, "Surety", are held and firmly bound unto the City of Tustin hereinafter referred to as the "City", in the sum of \$50,000.00 for payment of which Principal and Surety bind themselves, their heirs, administrators, successors and assigns, jointly and severally as follows:

THE CONDITION OF THE ABOVE OBLIGATION IS THAT:

WHEREAS, Principal has entered into a contract dated April 25, 2011, with the City to do and perform the following, generally described work, which is more particularly described in said contract for the construction/maintenance of:

ANNUAL MAINTENANCE SERVICES
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)

FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

WHEREAS, Principal shall commence and complete the construction/maintenance and installation of such improvements provided in said contract;

NOW THEREFORE, if Principal shall pay the Contractor, his subcontractor, and all persons renting equipment or furnishing labor or materials to them for such improvements, for the full cost of such improvements and submit amounts due under the State Unemployment Insurance Act with respect to such labor, then this obligation shall be null and void.

PROVIDED, HOWEVER, if Principal shall not pay the subcontractor and all persons renting equipment or furnishing labor or materials to them for such improvements for the full cost of such improvements, or if Principal fails to submit amounts due under the State Unemployment Insurance Act with respect to such labor, then Surety will pay for the same in an amount not exceeding the sum set forth above, which amount shall inure to the benefit of all persons named in Civil Code section 3181.

PROVIDED FURTHER, HOWEVER, that Surety stipulates and agrees that no change, extension of time, alteration or modification of the contract documents or of the work to be performed thereunder shall in any way affect its obligation on this bond and it does hereby waive notice of any such change, extension of time, alteration or modification of the contract documents or of the work to be performed thereunder; and

PROVIDED FURTHER, that in case suit is brought upon this bond by the City or any other person named in Civil Code section 3181 who may bring an action on this bond, a reasonable attorney's fee, to be fixed by the Court, shall be paid by Principal and Surety.

IN WITNESS WHEREOF, Principal and Surety have caused these presents to be duly signed and sealed this 19th day of May, 2011.

SURETY: Safeco Insurance Company of America
(NAME)

(SEAL)

BY: Jeri Apodaca
Jeri Apodaca, Attorney in Fact

Attorney-in-Fact

BY: _____

Address of Surety:

330 No. Brand Blvd., Suite 500

Glendale, CA 91203

APPROVED AS TO FORM:

[Signature]
City Attorney

PRINCIPAL: Computer Service Company

(SEAL)

BY: [Signature]

TITLE: Vincent P. Mauch, CFO

Address of Principal:

12907 E. Garvey Avenue

APPROVED AS TO CONTENT:

[Signature] Date 6/19/2011
City Engineer

Baldwin Park, CA 91706

Note: Attach proper acknowledgments for both Surety & Principal. (Use copies of blank form provided in Section B).

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

} ss.

On May 20, 2011 before me, Kathy M. Edwards - Notary Public
Date Name and Title of Officer (e.g. "Jane Doe, Notary Public")

personally appeared Vincent P. Mauch,
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity(ies), and that by his/~~her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.


Signature



(Seal)

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document: LABOR AND MATERIALS BOND # 6704880

Title or Type of Document: CITY OF TUSTIN

Document Date: 5/19/2011 Number of Pages: 1

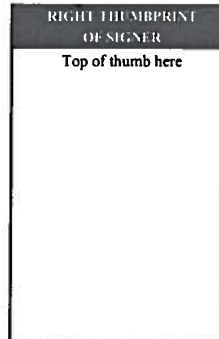
Signer(s) Other Than Named Above: Jeri Apodaca - Safeco Insurance Co. of America

Capacity(ies) Claimed by Signer

Signer's Name: Vincent P. Mauch

- Individual
- Corporate Officer - Title(s): CFO
- Partner(s) - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other:

Signer is Representing: Computer Service Company



CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Orange

On MAY 19 2011 before me, Rhonda C. Abel, Notary Public
(Here insert name and title of the officer)

personally appeared Jeri Apodaca

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Rhonda C. Abel
Signature of Notary Public



(Notary Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

- Partner(s)
 Attorney-in-Fact
 Trustee(s)
 Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document



POWER OF ATTORNEY

Safeco Insurance Company of America
General Insurance Company of America
1001 4th Avenue
Suite 1700
Seattle, WA 98154

No. 9675

KNOW ALL BY THESE PRESENTS:

That SAFECO INSURANCE COMPANY OF AMERICA and GENERAL INSURANCE COMPANY OF AMERICA, each a Washington corporation, does each hereby appoint

RHONDA C. ABEL; JERI APODACA; LISA K. CRAIL; LINDA ENRIGHT; JANE KEPNER; NANETTE MARIELLA-MYERS; MIKE PARIZINO; RACHELLE RHEAULT; JAMES A. SCHALLER; Irvine, California***

its true and lawful attorney(s)-in-fact, with full authority to execute on its behalf fidelity and surety bonds or undertakings and other documents of a similar character issued in the course of its business, and to bind the respective company thereby.

IN WITNESS WHEREOF, SAFECO INSURANCE COMPANY OF AMERICA and GENERAL INSURANCE COMPANY OF AMERICA have each executed and attested these presents

this 21st day of March, 2009

Dexter R. Legg

TAMIKOLAJEWSKI

Dexter R. Legg, Secretary

Timothy A. Mikolajewski, Vice President

CERTIFICATE

Extract from the By-Laws of SAFECO INSURANCE COMPANY OF AMERICA and of GENERAL INSURANCE COMPANY OF AMERICA:

"Article V, Section 13 - FIDELITY AND SURETY BONDS ... the President, any Vice President, the Secretary, and any Assistant Vice President appointed for that purpose by the officer in charge of surety operations, shall each have authority to appoint individuals as attorneys-in-fact or under other appropriate titles with authority to execute on behalf of the company fidelity and surety bonds and other documents of similar character issued by the company in the course of its business... On any instrument making or evidencing such appointment, the signatures may be affixed by facsimile. On any instrument conferring such authority or on any bond or undertaking of the company, the seal, or a facsimile thereof, may be impressed or affixed or in any other manner reproduced; provided, however, that the seal shall not be necessary to the validity of any such instrument or undertaking."

Extract from a Resolution of the Board of Directors of SAFECO INSURANCE COMPANY OF AMERICA and of GENERAL INSURANCE COMPANY OF AMERICA adopted July 28, 1970.

"On any certificate executed by the Secretary or an assistant secretary of the Company setting out,

- (i) The provisions of Article V, Section 13 of the By-Laws, and
(ii) A copy of the power-of-attorney appointment, executed pursuant thereto, and
(iii) Certifying that said power-of-attorney appointment is in full force and effect,

the signature of the certifying officer may be by facsimile, and the seal of the Company may be a facsimile thereof."

I, Dexter R. Legg, Secretary of SAFECO INSURANCE COMPANY OF AMERICA and of GENERAL INSURANCE COMPANY OF AMERICA, do hereby certify that the foregoing extracts of the By-Laws and of a Resolution of the Board of Directors of these corporations, and of a Power of Attorney issued pursuant thereto, are true and correct, and that both the By-Laws, the Resolution and the Power of Attorney are still in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the facsimile seal of said corporation

this MAY 19 2011 day of



Dexter R. Legg

Dexter R. Legg, Secretary

COMPENSATION INSURANCE CERTIFICATE

Pursuant to Section 1861 of the State Labor Code, each Contractor to whom a public works contract has been awarded shall sign the following certificate and shall submit same to the City prior to performing any work on the contract:

I am aware of the provisions of Section 3700 of the Labor Code which reads as follows:

"Every employer except the State shall secure the payment of compensation in one or more of the following ways:

(a) By being insured against liability to pay compensation in one or more insurers duly authorized to write compensation insurance in this State.

(b) By securing from the Director of Industrial Relations a certificate of consent to self-insure, which may be given upon furnishing proof satisfactory to the Director of Industrial Relations of ability to self-insure and to pay any compensation that may become due to his employee."

CONTRACTOR: Computer Service Company

BY:  _____

Vincent Mauch

TITLE: Chief Financial Officer

COMPENSATION INSURANCE CERTIFICATE

TO BE SUBMITTED WITH CONTRACT

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

State of California
County of Los Angeles } ss.

On May 25, 2011 before me, Gayle C. Kappelman, Notary Public
Date Name and Title of Officer (e.g. "Jane Doe, Notary Public")

personally appeared Vincent P. Mauch,
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Gayle C. Kappelman
Signature

(Seal)

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document:

Title or Type of Document: City of Tustin Compensation Insurance Certificate

Document Date: _____ Number of Pages: _____

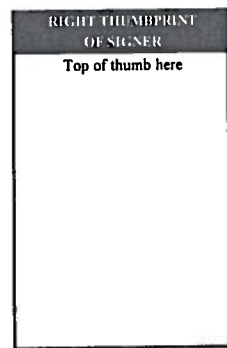
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: Vincent P. Mauch

- Individual
- Corporate Officer - Title(s): Chief Financial Officer
- Partner(s) - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other:

Signer is Representing: Computer Service Company



CONTRACTOR'S LICENSING STATEMENT TO BE PROVIDED BY SUCCESSFUL CONTRACTOR PRIOR TO AWARD OF CONTRACT

The undersigned Contractor or Corporate Officer, declares under penalty of perjury that the attached copy of the Contractor's pocket license or certificate of licensure is Contractor's, is current and valid, and is in a classification as required by the project specifications and appropriate to the work to be undertaken for this project.

PROJECT: **ANNUAL MAINTENANCE SERVICES**
FOR CITYWIDE TRAFFIC SIGNALS
(ACCOUNT NUMBER 100-40-12-6215)
FISCAL YEAR 2011-2012 THROUGH FISCAL YEAR 2015-2016

NAME OF CONTRACTOR: Computer Service Company Date:

SIGNED: 

Vincent Mauch

TITLE: Chief Financial Officer

Note: Attach proper Notary Acknowledgment for signature of authorized person.
(Use copy of blank form provided in Section B.)

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

} ss.

On May 25, 2011 before me, Gayle C. Kappelman, Notary Public

Date

Name and Title of Officer (e.g. "Jane Doe, Notary Public")

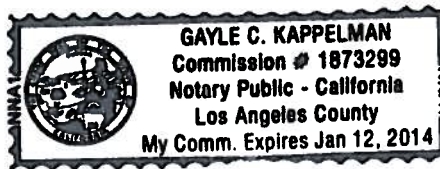
personally appeared Vincent P. Mauch

Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Gayle C. Kappelman
Signature

(Seal)

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document:

Title or Type of Document: City of Tustin Contractors Licensing Statement

Document Date: _____ Number of Pages: _____

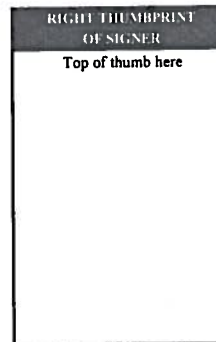
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: Vincent P. Mauch

- Individual
- Corporate Officer - Title(s): Chief Financial Officer
- Partner(s) - Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other:

Signer is Representing: Computer Service Company





State Of California
CONTRACTORS STATE LICENSE BOARD
ACTIVE LICENSE



License Number: **171920** Entity: **CORP**
Business Name: **COMPUTER SERVICE COMPANY**

Classification: **C10**

Expiration Date: **12/31/2011**



Certification by Secretary
of Corporate Resolution

At the meeting of the Directors of Computer Service Company, a corporation organized and existing under the laws of the State of California, duly called and held in accordance with the articles of incorporation and bylaws of the corporation at its office on May 03, 20 at which a quorum of the directors were present the following resolution was adopted to wit:

Resolved, that:

President	J.O. Steiny
Treasurer	Susan Steiny
Vice President	Levon A. Armen
Chief Financial Officer	Vincent P. Mauch
Secretary	Gayle C. Kappelman

Are hereby authorized to sign contracts/agreements in the name of and on behalf of Computer Service Company.

I Gayle C. Kappelman, Secretary of Computer Service Company, do hereby certify that I am the Secretary of Said corporation and that the above is a full, true, and correct copy of a resolution of the Board of Directors of said corporation, duly adopted at the meeting held on May 03, 2010 and that said resolution has not been revoked or rescinded.

In witness whereof, I have hereunto subscribed my name and affixed the seal of said corporation.



Gayle C. Kappelman, Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
06/06/2011

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 Aon Risk Insurance Services West, Inc. fka Aon Risk Services, Inc. of S CA 1901 Main Street Suite 300 Irvine CA 92614 USA	CONTACT NAME: PHONE (A/C. No. Ext): (949) 608-6300 FAX (A/C. No.): (949) 608-6459		
	E-MAIL ADDRESS:		
INSURED COMPUTER SERVICE COMPANY PO Box 8100 12907 E. Garvey Avenue Baldwin Park CA 91706-0093 USA	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Old Republic General Ins Corp		24139
	INSURER B: National Union Fire Ins Co of Pittsburgh		19445
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES **CERTIFICATE NUMBER: 570042756114** **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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			A1CG95211001	07/01/2010	07/01/2011	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			A1CA95211001	07/01/2010	07/01/2011	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION			BE86308433 SIR applies per policy terms & conditions	07/01/2010	07/01/2011	EACH OCCURRENCE \$20,000,000 AGGREGATE \$20,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	A1CW95211001	07/01/2010	07/01/2011	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER 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 (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 City of Tustin is an additional insured on a primary & non-contributory basis and waiver of subrogation applies in its favor. Re: Computer Service Company - Annual Maintenance Services For City Wide Traffic Signals (Account No. 100-40-12-6215) Fiscal Year 2011-2012 - Through Fiscal Year 2015-2016. GL, Auto & Cancellation endorsement and WC waiver attached.

CERTIFICATE HOLDER**CANCELLATION**

City of Tustin
 Public Works Department
 Engineering Division -Tustin City Hall
 300 Centennial way
 Tustin CA 92780 USA

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
Aon Risk Insurance Services West Inc

Holder Identifier : #100-40-12-6215

Certificate No : 570042756114

OLD REPUBLIC GENERAL INSURANCE CORPORATION

CANCELLATION OR NON-RENEWAL TO SPECIFIED PERSONS OR ORGANIZATIONS ENDORSEMENT

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

BUSINESS AUTO COVERAGE FORM
COMMERCIAL GENERAL LIABILITY COVERAGE FORM PART
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART

If we cancel or non-renew this policy for any reason other than non-payment, we will deliver notice of the cancellation or non-renewal to all Specified Persons or Organizations on file with us (30) thirty days prior to the effective date of cancellation or non-renewal.

If we cancel this policy for non-payment, we will deliver notice of the cancellation to all Specified Persons or Organizations on file with us (10) ten days prior to the effective date of cancellation.

If notice is mailed, proof of mailing will be sufficient proof of notice.

Named Insured	Steiny and Company, Inc./Computer Service Company		
Policy Number	GL : A1CG95211001 Auto : A1CA95211001	Endorsement No.	N/A
Policy Period		Endorsement Effective Date: 7/1/2011	
Producer's Name:	N/A		
Producer Number:	N/A		

Arthina James, CRIS Senior Underwriter –
Western Region

AUTHORIZED REPRESENTATIVE

See COI

DATE

OLD REPUBLIC GENERAL INSURANCE CORPORATION
CANCELLATION PROVISION

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY INSURANCE

Part Six - Conditions, Item D. Cancellation, Number 2, is changed to read:

2. We may cancel this policy. We must mail or deliver to you not less than SIXTY (60) days advance written notice stating when the cancellation is to take effect, unless cancellation is for nonpayment of premium, in which event our obligation is mailing not less than TEN (10) days prior to the effective date of cancellation. Mailing notice to you at your mailing address shown in Item 1 on the Information Page will be sufficient to prove notice.

Named Insured	Steiny & Company, Inc./Computer Service Company		
Policy Number	A1Cw95211001	Endorsement No.	
Policy Period	71/01/10 to 07/01/11	Endorsement Effective Date:	7/1/2011
Producer's Name:	Aon Risk Insurance Services West, Inc.		
Producer Number:			

Aon Risk Insurance Services West, Inc.
AUTHORIZED REPRESENTATIVE

See Certificate
DATE

WC 99 03 14 (09/06)

U7291a

Company: Old Republic General Insurance Company

Policy Period 7/1/10 TO 7/1/11

ATTACHED TO AND FORMING PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE (Standard Time)			INSURED
	A1CA95211001	Month/Day/Year 7/1/10	12:01 A.M. (x)	NOON

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

BUSINESS AUTO COVERAGE FORM

SCHEDULE

Name of Person or Organization: Where required by written contract.

The following is added to Section II – Liability Coverage, A. – Coverage, 1. Who is An Insured:

- d. Any person or organization to whom you become obligated to include as an additional insured under this policy, as a result of any contract or agreement you enter into which requires you to furnish insurance to that person or organization of the type provided by this policy, but only with respect to liability arising out of your operations or premises owned by or rented to you. However, the insurance provided will not exceed the lesser of:
 - 1. The coverage or limits of this policy, or
 - 2. The coverage or limits required by said contract or agreement.

Old Republic Insurance Services West, Inc.
Authorized Representative

See certificate
Date

OLD REPUBLIC GENERAL INSURANCE CORPORATION

ADDITIONAL INSURED AS PRIMARY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

BUSINESS AUTO COVERAGE FORM

SCHEDULE

Name of Person or Organization: As Required By Written Contract

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The insurance provided by this endorsement is primary insurance and we will not seek contribution from any other insurance of a like kind available to the person or organization shown in the schedule above unless the other insurance is provided by a contractor other than the person or organization shown in the schedule above for the same operation and job location. If so, we will share with that other insurance by the method described in paragraph 5., of Section IV — Business Auto Conditions.

All other terms and conditions remain unchanged.

Named Insured	Steiny and Company, Inc.		
Policy Number	A1CA95211001	Endorsement No.	
Policy Period	7/1/10 – 7/1/11	Endorsement Effective Date:	7/1/10

Old Republic Insurance Services West, Inc.

AUTHORIZED REPRESENTATIVE

As per certificate

DATE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

Re: Where required by written contract, but only when coverage for completed operations is specifically required by that contract.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work"

at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

OLD REPUBLIC GENERAL INSURANCE CORPORATION

CHANGES ADDITIONAL INSURED PRIMARY WORDING SCHEDULE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

**Name of Additional Insured Person(s)
Or Organization(s):**

Location(s) of Covered Operations

As required by written contract.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The insurance provided by this endorsement is primary insurance and we will not seek contribution from any other insurance of a like kind available to the person or organization shown in the schedule above unless the other insurance is provided by a contractor other than the person or organization shown in the schedule above for the same operation and job location. If so, we will share with that other insurance by the method described in paragraph 4.c. of Section IV - Commercial General Liability Conditions.

All other terms and conditions remain unchanged.

Named Insured	Steiny and Company, Inc.		
Policy Number	A1CG95211001	Endorsement No.	
Policy Period	7/1/10 – 7/1/11	Endorsement Effective Date:	7/1/10

Old Republic Insurance Services West, Inc.

AUTHORIZED REPRESENTATIVE

As per certificate

DATE

Company: Old Republic General Insurance Company

Policy Period 7/1/10 TO 7/1/11

ATTACHED TO AND FORMING PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE (Standard Time)			INSURED Steiny and Company, Inc.
A1CW95211001	Month/Day/Year 7/1/10	12:01 A.M. (x)	NOON	PRODUCER AND CODE CPG/SPEC. RISK RESOURCES INS AGCY, INC.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE FOLLOWING:

WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY INSURANCE

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

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

Name of Person or Organization:

ALL PERSONS AND/OR ORGANIZATIONS THAT ARE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT WITH THE INSURED, EXECUTED PRIOR TO THE ACCIDENT OR LOSS, THAT WAIVER OF SUBROGATION BE PROVIDED UNDER THIS POLICY FOR WORK PERFORMED BY YOU FOR THAT PERSON AND/OR ORGANIZATION.

Old Republic Insurance Services West, Inc.

Authorized Representative

See certificate

Date