



September 18, 2024

Addendum 1

Bid No. 24-064

Pest Control Annual Contract

Addendum 1 contains questions and answers submitted via email.

This bid will be opened at the City of Fairhope's City Services and Public Utilities Building, 555 South Section Street, Fairhope, AL 36532 at 10:00 AM on Thursday, October 3, 2024. Vendors shall acknowledge this Addendum 1 on their submitted Bid Response Form.

Questions Submitted Via Email:

1. Can you please provide a copy of the most recently awarded bid?
Are we able to obtain the current pricing for pest control services for the City of Fairhope locations indicated in bid number 24-064?
 - A. See attached bid submittal from Redd Pest Solutions of the S.E., Inc. for Bid No. 039-21 Pest Control 2021.

2. Are we able to obtain the current pricing for pest control services for the City of Fairhope locations indicated in bid number 24-064?
 - A. See answer for Question #1.

3. Were there any service issues with the incumbent?
 - A. No.

4. The following sections mention termite treatment. Do you currently have a bond in place with your existing vendor for termite protection? If so, do you know if it is a repair/replace policy or retreat only?

G. Trees:
Service Provider shall treat trees for Formosan Termites (when called) using bait systems and spray treatments.

1.1 PESTS INCLUDED
The Service Provider shall adequately suppress all pest species that have the potential to affect public Health, impede operations or damage property, including but not limited to:

 - *Indoor populations and invading individuals of rodents, insects, arachnids, and other arthropods.*
 - *Outdoor populations of potentially indoor-infesting species that are within the property boundaries of the specified buildings.*
 - *Nests of stinging insects within the property boundaries of the specified buildings.*
 - *Termites and other wood-destroying organisms.*
 - A. The City does not have any current termite bonds.

**ITEM III
BID RESPONSE FORM**

Date: 8/30/21

Bid No: 039-21 Pest Control 2021

Bids Due: Tuesday, August 31, 2021 at 10:00 A.M.

OPTION 1:

Bid Duration: One (1) year from signing date of CONTRACT, with the option to renew bid or CONTRACT for up to two (2) additional years if terms and conditions, including pricing remain the same, and both parties are in written CONTRACT to renewing the bid or contract at the not to exceed price of \$ 11,996.04. **The bid renewal must be approved by City Council and signed by the Mayor.**

OPTION 2:

Bid Duration: For a period of three (3) years from signing date of CONTRACT, with a not to exceed price of \$ N/A per year or \$ N/A for the three-year term.

Bid will include all labor, materials, equipment, shipping and postage, overhead, profit, bonds, insurance and all other costs necessary to provide the complete services outlined within this CONTRACT and scope of work, on a per unit basis. Show quantity / price breaks.

The **CONTRACTOR** agrees to complete all the work within time frame stated in Purchase Orders issued unless other arrangements are approved by the **CITY**.

MONTHLY TREATMENT: Unless specifically designated otherwise by Public Works Director or Assistant Supervisor of Public Works

NOTE: Square footage is estimate

A= Ants--sugar, Moisture and carpenter, F = Fleas, R = Roaches, S = Silverfish, M = Mice, Rt = Rats

Treatment Sites	Address	Description	Treatment Area S/F	Treatments	OPTION 1 COST PER VISIT Frequency (1 X month if Needed)	OPTION 2 COST PER VISIT Frequency (1 X month if Needed)
MUSEUM	24 N SECTION STREET	MUSEUM	1440	A, F, R, S, Rt, M	3.60	N/A
WELCOME CTR/P	20 N. SECTION ST	WELCOME STATION AND PUBLIC RESTR	2,592	A, F, R, S, Rt, M	6.48	N/A
FIRE DEPT CLUB	7 FAIRHOPE AVE.	FIRE DEPT. CLUB HOUSE	2,132	A, F, R, S, Rt, M	5.33	
RESTROOM #1	11 N BEACH DR	FH BEACH RSTROOMS # 1	825	A, F, R, S, Rt, M	2.06	
RESTROOM # 2	11 N BEACH DR	FH BEACH RSTROOMS # 2	825	A, F, R, S, Rt, M	2.06	
BUILDING	300 N. CHURCH ST.	SEWER PLANT-MAIN OFFICE	1,925	A, F, R, S, Rt, M	4.81	
BUILDING	300 N. CHURCH ST.	GENERATOR BUILDING	637	A, F, R, S, Rt, M	1.59	
BUILDING	300 N. CHURCH ST.	PARTS BUILDING	357	A, F, R, S, Rt, M	.89	

BUILDING	555 S. SECTION ST.	PUBLIC WORKS & UTILITIES BLDG	12,250	A, F, R, S, Rt, M	30.63	N/A
BUILDING	555 S. SECTION ST.	TRUCK STORAGE BLDG-PUB	12,000	A, F, R, S, Rt, M	30.00	
BUILDING	555 S SECTION ST.	RECYCLE CENTER	4,960	A, F, R, S, Rt, M	12.40	
BUILDING	555 S. SECTION ST.	WASH RACK	1,680	A, F, R, S, Rt, M	4.20	
CITY HALL/AUD	161 N. SECTION ST.	CITY HALL & AUDITORIUM	34,840	A, F, R, S, Rt, M	87.10	
BUILDING	198 S. INGLESIDE ST	NEW FIRE STATION,	9,852	A, F, R, S, Rt, M	24.43	
TENNIS SHOP	600 MORPHY AVE	CONCESSION STAND AT STIMPSON PK	800	A, F, R, S, Rt, M	2.00	
CONCESSION STAND	701 VOLANTA AVE	CONCESSION STAND, BLDG	250	A, F, R, S, Rt, M	.63	
STADIUM	701 VOLANTA AVE	STADIUM Press Box	400	A, F, R, S, Rt, M	1.00	
YOUTH 2 STORY BLDG	701 VOLANTA AVE	BLDG	1,000	A, F, R, S, Rt, M	2.50	
YOUTH CONCESS	701 VOLANTA AVE	CONCESSION STAND	600	A, F, R, S, Rt, M	1.50	
YOUTH PRESS BOXES	701 VOLANTA AVE	PRESS BOX	1,680	A, F, R, S, Rt, M	4.20	
CONCESSION STAND	701 VOLANTA AVE	CONCESSION STAND, Bldg.	120	A, F, R, S, Rt, M	.30	
FRONT RESTROOM	701 VOLANTA AVE	RESTROOMS	3,200	A, F, R, S, Rt, M	8.00	
MAINTENANCE SHED	701 VOLANTA AVE	SHED/BUILDING	567	A, F, R, S, Rt, M	1.42	
STADIUM PRESS BOX	701 VOLANTA AVE	PRESS BOX	240	A, F, R, S, Rt, M	.40	
STADIUM RESTROOM	701 VOLANTA AVE	RESTROOMS	960	A, F, R, S, Rt, M	2.40	
BUILDING	19841 QUAIL CREEK DR	CLUB HOUSE	6,912	A, F, R, S, Rt, M	17.28	
BUILDING	450 FAIRHOPE AVE	FAIRHOPE MUSEUM	2,870	A, F, R, S, Rt, M	7.18	
BUILDING	19128 S YOUNG ST.	GIRLS AND BOYS CLUB	12,060	A, F, R, S, Rt, M	30.15	
GYM-F'HOPE REC	801 N GREENO RD	GYM, FAIRHOPE RECREATIONAL FACILITY	11,934	A, F, R, S, Rt, M	29.84	
COMMUNITY CENTER	1 BAYOU DRIVE, N	NIX CENTER	18,000	A, F, R, S, Rt, M	45.00	
BLDG/RESTROOM	8478 TWIN BEACH RD	RESTROOM BUILDING-FOUNDERS PARK	280	A, F, R, S, Rt, M	.70	
LG CONCESSION	8478 TWIN BEACH	CONCESSION-- 2 STORY W/RR FOUNDERS PK	1,250	A, F, R, S, Rt, M	3.13	
PRESS BOX #1	8478 TWIN BEECH RD	PRESS BOX FIELD 1 FOUNDERS PARK	500	A, F, R, S, Rt, M	1.25	
PRESS BOX #2	8478 TWIN BEECH RD	PRESS BOX FIELD 2 FOUNDERS PARK	500	A, F, R, S, Rt, M	1.25	
PRESS BOX #3	8478 TWIN BEECH RD	PRESS BOX FIELD #3 FOUNDERS PARK	500	A, F, R, S, Rt, M	1.25	
PRESS BOX #4	8478 TWIN BEECH RD	PRESS BOX FIELD #4 FOUNDERS PARK	500	A, F, R, S, Rt, M	1.25	

BUILDING	19875 THOMPSON HALL RD	FIRE STATION	4,320	A, F, R, S, Rt, M	10.80	N/A
TRAINING BLDG	19875 THOMPSON HALL RD	FD TRAINING BUILDING	1,820	A, F, R, S, Rt, M	4.55	
SM CONCESSION	8478 TWIN BEECH RD	SM CONCESS 2 STORY W/RR FOUNDERS PK	800	A, F, R, S, Rt, M	2.00	
CONCESSION	8478 TWIN BEECH ROAD	CONCESSION W/O FACILITIES FOUNDERS PK	600	A, F, R, S, Rt, M	1.50	
GREENHOUSE & OFFICE	590 MERSHON/NICHOLS ST	GREENHOUSE AND OFFICE	1,125	A, F, R, S, Rt, M	2.81	
FIRE STATION #3	8600 COUNTY ROAD 32	FIRE STATION #3	4,200	A, F, R, S, Rt, M	10.50	
ANIMAL SHELTER	559 SOUTH SECTION ST	ANIMAL SHELTER	3,200	A, F, R, S, Rt, M	8.00	
MAINT SHOP	8478 TWIN BEECH RD	MAINTENANCE SHOP FOUNDERS PARK	1,500	A, F, R, S, Rt, M	3.75	
RESTROOMS	105 S CHURCH ST	RESTROOMS FAIRHOPER'S PARK	432	A, F, R, S, Rt, M	1.08	
SHOP	555 SOUTH SECTION ST	ELECTRICAL SHOP	1,440	A, F, R, S, Rt, M	3.60	
TRUCK STORAGE	555 S. SECTION ST	TRUCK STORAGE AND OFFICE	12,600	A, F, R, S, Rt, M	31.50	
TRUCK STORAGE	555 SOUTH SECTION ST	TRUCK STORAGE (GAS & WATER DEPT)	10,800	A, F, R, S, Rt, M	27.00	
THEATER 98	352 MORPHY AVE	THEATER 98 GROUP (RENTED)	1,500	A, F, R, S, Rt, M	3.75	
MECHANIC SHOP	560 SOUTH SECTION ST	MECHANIC SHOP	7,200	A, F, R, S, Rt, M	18.00	
SOCCER CONCESSION	18383 CR 13	SOCCER COMPLEX Concession	2,400	A, F, R, S, Rt, M	6.00	
BUILDING	801 NORTH GREENO RD	MUNICIPAL POOL AND BUILDING	9,400	A, F, R, S, Rt, M	23.50	
WAREHOUSE	555 S SECTION ST	SUPPLY WAREHOUSE	30,000	A, F, R, S, Rt, M	75.00	
LIBRARY	51 FAIRHOPE AVE	LIBRARY	39,600	A, F, R, S, Rt, M	99.00	
RESTROOMS	108 N GREENO RD	RROOM/STORAGE AT FIELDHOUSE BY STAD	6,000	A, F, R, S, Rt, M	15.00	
UV BUILDING	330 N CHURCH ST	UV BUILDING	1,010	A, F, R, S, Rt, M	2.53	
RROOMS/CONCESS	MULLET PT	BARNWELL COMMUNITY PK, MULLET PT	1,664	A, F, R, S, Rt, M	4.16	
FIREHOUSE	7752 PARKER ROAD	FIRESTATION #4	22,477	A, F, R, S, Rt, M	56.19	
BLDG-POLICE	107 NORTH SECTION ST	POLICE STATION & JAIL	21,982	A, F, R, S, Rt, M	54.96	

PECAN AV WAREHOUSE	451 PECAN AVENUE	WAREHOUSE and offices	38,850	A, F, R, S, Rt, M	97.13	N/A
DOCKS-MARINA office	SEACLIFF DRIVE	Office (old ice house)	1200	A, F, R, S, RT, M	30.00	
Docks Marina wooden bldg.	SEACLIFF DRIVE	(old Eastern Shore Marine office)	1500	A, F, R, S, RT, M	3.75	
Docks --Marina Metal Building	SEACLIFF DRIVE	Paint shop and Restrooms	2400	A, F, R, S, RT, M	6.00	
TREE TREATMENT	AS REQUESTED BY CITY				125.00	
Old USA Building	10 N Summit	Office building	5000	A, F, R, S, RT, M	14.00	
Writer's Cottage	School Street			A, F, R, S, RT, M	6.00	

TOTALS

OPTION 1

TOTAL of all line items PER MONTH \$ 999.67 X 12 MOS = TOTAL ANNUAL BID \$ 11996.04
 After Hours RATE per hour \$ 95

OPTION 2

TOTAL of all line items PER MONTH \$ N/A x 12 MOS = TOTAL ANNUAL BID \$ N/A
 After Hours RATE per hour \$ N/A

Receipt of the following Addenda to these documents is hereby acknowledged by the undersigned (CONTRACTOR to complete below):

ADDENDUM NO.	DATE ISSUED	ADDENDUM NO.	DATE ISSUED
_____	_____	_____	_____
_____	_____	_____	_____

Each bid must give the full business address of the CONTRACTOR and must be signed by him with his usual signature. Bids by partnerships must furnish the full names of all partners and must be signed with the partnership name by one of the members of the partnership, or by an authorized representative, followed by the signature and designation of the person signing. Bids by corporations must be signed with the legal name of the corporation followed by the name of the State of Incorporation and by the signature and designation of the president, secretary, or other person authorized to bind it in the matter. The name of each person shall also be typed or printed below the signature. A bid by a person who affixes to this signature the word "president," "secretary," "agent," or other designation without disclosing his principal, may be held to be the bid of the individual signing. When requested by the City of Fairhope, Baldwin County, Alabama, satisfactory evidence of the authority of the officer signing in behalf of the corporation shall be furnished.

The undersigned agrees to furnish the goods/services as requested by you for the City of Fairhope, Baldwin County, Alabama in your invitation to bid, and certifies that they will meet or exceed the specifications called for. The undersigned has read all information pertaining to this bid and has resolved all questions. It is also understood and agreed that all prices quoted are F.O.B. described in the bid documents and specifications. The undersigned also affirms he/she has not been in any CONTRACT or collusion among BIDDERS or prospective BIDDERS in restraint of freedom of competition, by CONTRACT to bid at a fixed price or to refrain from bidding or otherwise.

Section 41-16-5, Code of Alabama 1975, requires that public contracts over \$15,000 include the following language:

By signing this Contract, REDD PEST SOLUTIONS OF THE S.E. INC represents and agrees
 COMPANY NAME
 that it is not currently engaged in, nor will it engage in, any boycott of a person or entity based in or doing business with a jurisdiction with which the State of Alabama can enjoy open trade

Witness our hands and seals this 30 day of Aug, 2021.

If Individual or Partnership

(Name of Individual or Partnership)

(Name of Partner Print)

(Name of Representative Authorized to sign Bids and CONTRACTs for the firm Print)

(Name of Partner Print)

(Address)

(Address)

Phone Number () _____ Fax Number () _____

E-mail address _____ Alabama Contractor's License No. _____

Foreign Entity ID (if outside of Alabama) _____

If Corporation or LLC

Company Redd Pest Solutions of the S.E. INC

State of Incorporation Alabama

Company Representative BRANDON REDD
(Representative Authorized to sign Bids and CONTRACTs for the firm Print)

Company Representative [Signature]
(Representative Authorized to sign Bids and CONTRACTs for the firm Signature)

Address 1273 AZALEA Rd.
Mobile AL 36683

Phone Number (251) 660-1550 Fax Number (251) 660-1560

E-mail address BRedd@Reddpest.com AL CONTRACTOR's License No. 2000837

Foreign Vendor Id N/A

BID PROPOSAL NOTARIZATION:

STATE OF AL }

COUNTY OF Mobile }

I, the undersigned authority in and for said State and County, hereby certify that BRANDON REDD as V.P. respectively, of Redd Pest Solutions of the S.E. INC whose name is signed to the foregoing document and who is known to me, acknowledged before me on this day, that, being informed of the contents of the document they executed the same voluntarily on the day the same bears date.

Given under my hand and Notary Seal on this 30 day of Aug, 2021.

NOTARY PUBLIC [Signature]
MY COMMISSION EXPIRES 3/9/24

**ITEM IV
INSURANCE**

3.0 INSURANCE REQUIREMENTS

Awarded **CONTRACTOR**, at its sole expense, shall obtain and maintain in full force the following insurance to protect the **CONTRACTOR** and the City of Fairhope at limits and coverages specified herein. The City of Fairhope will be listed as an additional insured under the **CONTRACTOR'S** general liability insurance and automobile liability insurance policies, and all other applicable policies and certificates of insurance. These limits and coverages specified are the minimum to be maintained and are not intended to represent the correct insurance needed to fully and adequately protect the awarded **CONTRACTOR**.

3.01 All insurance will be provided by insurers by admitted carriers in the State of Alabama, shall have a minimum A.M. Best rating of A-VII and must be acceptable to the City. Self-insured plans and/or group funds not having an A.M. Best rating must be submitted to the City for prior approval.

3.02 **NO WORK IS TO BE PERFORMED UNTIL PROOF OF COMPLIANCE WITH THE INSURANCE REQUIREMENTS HAS BEEN RECEIVED BY THE CITY.**

3.03 **Worker's Compensation and Employers Liability**

Part One: Statutory Benefits as required by the State of Alabama

Part Two: Employers Liability	\$100,000 Each Accident
	\$100,000 Each Employee
	\$500,000 Policy Limit

3.04 **U.S. Longshoreman & Harbor workers Act (USL&H)-**

Required if CONTRACT involves work near a navigable Waterway that may be subject to the USL&H law.

3.05 **Maritime Endorsement (Jones Act)-**

Endorsement required if CONTRACT involves the use of a Vessel. Or include coverage for "Master or Members or Crew" under "Protection and Indemnity" coverage (P&I), unless crew is covered under Workers Compensation.

Bodily injury by accident	\$1,000,000 Each Accident
Bodily injury by disease	\$1,000,000 Aggregate

3.06 **Commercial General Liability**

Coverage on an Occurrence form with a combined single limit of (Bodily Injury and Property Damage combined as follows:

Each Occurrence	\$1,000,000
Personal and Advertising Injury	\$1,000,000
Products/Completed Operation Aggregate	\$2,000,000
General Aggregate	\$2,000,000

- Coverage to include:
- Premises and operations
- Personal Injury and Advertising Injury
- o Products/Completed Operations
- o Independent BIDDERS
- o Blanket Contractual Liability
- o Explosion, Collapse and Underground hazards
- o Broad Form Property Damage
- o Railroad Protective Liability Insurance if work involves construction, demolition or maintenance operations on or within 50 feet of a railroad.

3.07 **Automobile Liability**

Covering all Owned, Non-Owned, and Hired vehicles with a limit of no less than \$1,000,000 combined single limit of Bodily Injury and property damage per occurrence.

3.08 **Certificate of Insurance**

A Certificate of Insurance evidencing the above minimum requirements must be provided to and accepted by the City PRIOR to commencement of any work on the CONTRACT. Each policy shall be endorsed to provide ten (10) days written notice of cancellation to the CITY

Such insurance as is afforded by the above policies covers the operations undertaken by the insured with respect to the construction of the project above designated. The insurance afforded by the above designated policies, specimen copies of which have been filed with the **CITY**, and to each of which is attached for following endorsement.

The insurer agrees with the insured as follows:

1. That it will furnish to said City of Fairhope a certificate of insurance in triplicate on a form approved for such purpose by said **CITY**, setting forth the pertinent information regarding the policy to which this endorsement is attached, for each project of said **CITY** to which the policy applies.
2. That it will attach to each said certificate of insurance executed copies of any endorsement other than this endorsement which are attached to said policy at the time said policy is issued, provided only that said endorsements affect the coverage of said policy in respect of operations involved in the construction of the projects of said **CITY** to which the policy applies.
3. That it will mail to the City Council of the City of Fairhope three executed copies of each endorsement subsequently issued to become a part of said policy provided only that endorsement affects the coverages of said policy in respect of operations involved in the construction of the project of said **CITY** which the policy applies, and provided further that such endorsement shall not be effective unless such notice is given to the **CITY** at the same time that notice thereof is given to the insured.
4. That it will mail to the City Council of the **CITY** of Fairhope at least ten days before the effective date thereof notice of cancellation of said policy, provided no cancellation shall be effective unless such notice is given to the **CITY**.

**ITEM V
City of Fairhope
sample
CONTRACT**

This **CONTRACT** is made this ____ day of _____, 2021 by and between the City of Fairhope (hereinafter "**CITY**") and _____, of _____, Al (hereinafter "**CONTRACTOR**"), on the **WORK**:

Bid No 039-21 Pest Control 2021

The **CITY** and the **CONTRACTOR** agree as set forth below:

The **CONTRACT** consists of all of the items contained within this **CONTRACT**, the associated bid package, addenda, amendments drawings, charts and appendices, if any.

The **CONTRACTOR** shall perform all the **WORK** described herein.

WITNESSETH: That the parties hereto do mutually agree as follows:

1.0 **DURATION:**

The Services required will be **on a monthly basis** and will be coordinated by the Public Works Assistant Superintendent. Additional services by be requested periodically by the Public Works Dept. (See 1.6 Special Requests in ITEM V Scope of Work)

Option 1:

The term of the **CONTRACT** shall be for a period of ONE (1) year from the signing date of **CONTRACT**, with the option to renew the **CONTRACT** for TWO (2) additional years thereafter in ONE (1) year increments if terms and conditions, including pricing remain the same, and both parties are in **CONTRACT** to renewing the **CONTRACT**. Therefore, the **CONTRACT** will begin on ___/___/2021 and terminate on ___/___/2022. Redd Pest has quoted a monthly price of _____ for all locations denoted in the bid, for a yearly not-to-exceed price of \$_____. After hours on-call rates are priced at _____ / hour and the cost to treat trees for Formosan termites (as needed) is _____ / tree. After hours rates and treatment of trees for Formosan termites shall not exceed _____ per year for a **total contract price not to exceed _____ per year**

Option 2:

The term of the **CONTRACT** shall be for **three (3) consecutive years** beginning on ___/___/___ and ending on ___/___/___.

2.0 **ORDERING:**

2.01 City of Fairhope will order the initiation of **WORK** by issuing a **Notice to Proceed** to the awarded **CONTRACTOR**.

2.02 The mobilization period will be from date of **CONTRACT** execution to ___/___/____. **CONTRACTOR** will begin physical services ___/___/____.

2.03 Other work outside the Scope and Specifications will be ordered by Purchase Orders specific to the events.

3.0 **PAYMENT:**

3.01 **Compensation:**

The CITY is to be invoiced on a monthly basis, in arrears, for payment of each monthly treatment total as per Bid Response AND THE RESOLUTION (attached)

3.02 **Payment of Invoice**

All invoices received by the **CITY** are payable within thirty (30) days from the date of receipt by the CITY, provided they are approved by the **CITY**.

3.03 **Payment Withheld**

The **CITY** may withhold approval for payment on any request and the **CITY** may withhold payment to such extent as may be necessary to protect the **CITY** from loss on account of:

3.03.1 Negligence on the part of the **CONTRACTOR** to execute the work properly or fail to perform any provision of this CONTRACT.

3.03.2 The **CITY**, after three (3) days written notice to the **CONTRACTOR**, may without prejudice to any other remedy, make good such deficiencies and may deduct the cost thereof from the overall CONTRACT sum.

3.03.3 Claims filed or reasonable evidence indicating probable filing of claims. Failure of the **CONTRACTOR** to make payments properly to **SUB-BIDDERS** for material or labor.

3.03.4 A reasonable doubt that the CONTRACT can be completed for the balance then unpaid.

3.03.5 Damage to the building, or another **CONTRACTOR** or another **CONTRACTOR'S** equipment.

3.03.6 When the above grounds are removed, payment shall be made for the amount withheld because of them. The **CONTRACTOR** waives all cancellation rights under the CONTRACT, if payment is withheld or one or more of the above reasons.

4.0 **General Conditions**

4.01 **Indemnity:** The **CONTRACTOR** hereby agrees to indemnify and save harmless the **CITY**, its officers, agent, and employees, from and against any and all liabilities, claims, demands, damages, fines, fees, expenses, penalties, suits, proceedings, actions and cost of actions, including reasonable attorneys' fees for trial and on appeal, of any kind and nature, arising or growing out of, or in any way connected with the performance of this CONTRACT, to the extent caused by a negligent act or omission of the **CONTRACTOR**, their agents, servants, employees, **SUB-BIDDERS**, or others associated with the **CONTRACTOR**. The **CONTRACTOR** shall be responsible for damage to any elevator equipment excluded from this CONTRACT, or damage or injury caused by any equipment excluded from this CONTRACT, to the extent that the damage or injury is caused by a negligent act or omission of the **CONTRACTOR**.

4.02 **Notification and Accident Reports:** In the event of accidents of any kind, the **CONTRACTOR** shall notify the **CITY** immediately and furnish, without delay, copies of all such accident reports to the **CITY**. If in the performance of their Work, the **CONTRACTOR** fails to immediately report an accident to the **CITY**, of which the **CONTRACTOR** has knowledge of and which results in a fine levied against the **CITY** then the **CONTRACTOR** shall be responsible for all fines levied against the **CITY**.

4.03 **Termination of CONTRACT**

4.03.1 **Termination for Default:** Performance of Work under this CONTRACT may be terminated by the **CITY**, in whole or in part, in writing, whenever the **CITY** determines that the **CONTRACTOR** has failed to meet the requirements of this CONTRACT.

4.03.2 The **CITY** has a right to terminate for default if the **CONTRACTOR** fails to make delivery of material or does not perform the work, or if the **CONTRACTOR** fails to perform the Work within the time specified in the CONTRACT, or if the **CONTRACTOR** fails to perform any other provision of the CONTRACT.

- 4.03.3 Failure on the part of the **CONTRACTOR** to deliver or perform the Work within the time specified, or within a reasonable time as determined by the **CITY**, or failure on the part of the **CONTRACTOR** to make replacements of rejected articles, or Work when so requested, immediately or as directed by the **CITY**, shall constitute authority for the **CITY** to purchase in the open market, articles or Work of comparable grade to replace the articles or Work rejected, not delivered or completed. On all such purchases, the **CONTRACTOR** shall reimburse the **CITY** within a reasonable time specified by the **CITY** for any expense incurred in excess of CONTRACT prices.
- 4.03.4 Such purchases shall be deducted from the CONTRACT sum. If public necessity demands it, the **CITY** reserves the right to utilize services or use and/or consume articles delivered, which are standard in quality, subject to an adjustment of price to be determined by the **CITY**.
- 4.03.5 **Termination for Convenience:** **CITY** has the absolute right to terminate the CONTRACT upon "Award of CONTRACT" to another **CONTRACTOR**, to perform major work referenced herein. In such event, payment due on the date of cancellation of the CONTRACT by **CITY**, shall be paid by **CITY**.

5.0 **Warranty**

- 5.01 The **CONTRACTOR** warrants that the Work including equipment and materials provided shall conform to professional standards of care and practice in effect at the time the Work is performed, be of the highest quality, and be free from all faults, defects or errors. If the **CONTRACTOR** is notified in writing of a fault, deficiency or error in the Work, the **CONTRACTOR** shall at the **CITY'S** option, either re-perform such portions of the Work to correct such fault, defect or error, at no additional cost to the **CITY**, or refund to the **CITY** the charge paid by the **CITY**, which is attributable to such portions of the faulty, defective or erroneous Work, including costs for re-performance of Work provided by other **BIDDERS**.
- 5.02 All equipment and materials provided by the **CONTRACTOR** shall be merchantable and for the purpose it is intended and meet the all industry quality standards.

6.0 **Time of Completion**

- 6.01 The **CITY** and **CONTRACTOR** understand and agree that time is of the essence in the performance of this CONTRACT. The **CONTRACTOR** or **CITY**, respectively, shall not be liable for any loss or damage, resulting from any delay or failure to perform its contractual obligations within the time specified, due to acts of God, actions or regulations by any governmental entity or representative, strikes, fire, water damage, loss of power, loss of funding or any other causes, contingencies, or circumstances not subject to the **CITY** or **CONTRACTOR'S** control, respectively, whether of a similar or dissimilar nature, which prevent or hinder the performance of the **CITY'S** or **CONTRACTOR'S** contractual obligations, respectively. Any such causes of delay, even though existing on the date of the CONTRACT, or on the day of the start of Work, shall extend the time of the **CITY'S** or **CONTRACTOR'S** performance respectively, by the length of the delays occasioned thereby, including delays reasonably incident to the resumption of normal Work schedules. **However, under such circumstances as described herein, the CITY may, at their discretion, cancel this CONTRACT for their own convenience.**

- 7.0 **Insurance Requirements** please see ITEM III

8.0 **Acceptance of Work**

- 8.01 The **CITY** will be deemed to have accepted the Work after the **CITY** agrees the Work is completed. In the event Work furnished under the CONTRACT is found to be defective or does not conform to the intent of the CONTRACT, the **CONTRACTOR** shall, within thirty (30) days from receipt of notice from the **CITY**, correct the deficiencies. Failure on the part of the **CONTRACTOR** to properly correct the deficiencies within the time period allowed will constitute the **CITY'S** right to cancel the CONTRACT immediately, upon written notice to the **CONTRACTOR**.

9.0 **Correction of Work**

9.01 The **CONTRACTOR** shall promptly correct all Work rejected by the **CITY** as faulty, defective or failing to conform to the CONTRACT, whether observed before or after completion of the Work. The **CONTRACTOR** shall bear all costs of correcting such rejected Work.

10.0 **Right to Audit**

10.01 The **CONTRACTOR** shall maintain documentation of all work performed. The **CONTRACTOR** shall make any and all documentation available to the **CITY** at all reasonable times, for inspections and audit by the **CITY**, during the entire term of the CONTRACT, and for a period of Three (3) years after the expiration of this CONTRACT.

11.0 **Intermittent Problems**

11.01 Intermittent problems are to be considered a single call-back until the problem is fixed.

12.0 **Time is of the Essence**

12.01 The **CITY** and **CONTRACTOR** agree that time is of the essence in the performance of Work called for under this CONTRACT. The **CONTRACTOR** agrees that all work will be accomplished regularly, diligently and uninterrupted at such a rate of progress as will ensure full completion thereof within reasonable time periods.

13.0 **Safety Measures**

13.01 The **CONTRACTOR** shall take all necessary precautions for the safety of the **CITY'S** and **CONTRACTOR'S** employees at the Work site, and shall erect and properly maintain at all times, all necessary safeguards for the protection of the workmen and the public. The **CONTRACTOR** shall post signs warning against hazards in and around the Work site.

14.0 **Extra Work and Associated Costs**

14.01 Changes in the Work: The **CITY**, without invalidating the CONTRACT, may order changes in the Work within the general scope of this CONTRACT, consisting of additions, deletions, or other revision, the CONTRACT price and time for execution of the Work being adjusted accordingly.

14.02 All such changes in the Work shall be authorized by a written Amendment to the CONTRACT or a separate Change Order and shall be executed under the applicable conditions of the CONTRACT.

15.0 **Familiarity with the Work**

15.01 The **CONTRACTOR**, by executing this CONTRACT, acknowledges full understanding of the extent and character of the Work required and the conditions surrounding the performance thereof. The **CITY** will not be responsible for any alleged misunderstanding of the Work to be furnished or completed, or any misunderstanding of conditions surrounding the performance thereof. It is understood that execution of the CONTRACT by the **CONTRACTOR** serves as his stated commitment to fulfill all requirements and conditions referred to in this CONTRACT.

16.0 **SCOPE OF WORK – see Section VII**

17.0 **Miscellaneous Provisions**

17.01 The **CONTRACTOR** shall not employ **SUB-BIDDERS** without the express written permission of the **CITY**.

17.02 The **CONTRACTOR** shall not assign the CONTRACT or sublet it as a whole without the express written permission of the **CITY**. The **CONTRACTOR** shall not assign any payment due them hereunder, without the express written permission of **CITY**. The **CITY** may assign the

CONTRACT, or sublet it as a whole, without the consent of the **CONTRACTOR**.

- 17.03 No waiver, alteration, consent or modification of any of the provisions of the CONTRACT shall be binding unless in writing and signed by the **CITY** and **CONTRACTOR**.
- 17.04 The **CONTRACTOR** is to procure all permits, licenses, and certificates, or any approvals of plans or specifications as may be required by Federal, State, Local Laws, ordinances, rules, and regulations, for the proper execution and completion of Work covered under this CONTRACT.
- 17.05 The **CONTRACTOR** shall at all times keep the Work area free from accumulation of waste materials or rubbish caused by his operations, and promptly remove any such materials to an area designated by the **CITY** or remove to a waste site as directed by the **CITY**. If the **CONTRACTOR** fails to clean up the Work site, the **CITY** will complete the task and charge the **CONTRACTOR** for such services.
- 17.06 This CONTRACT is considered a non-exclusive CONTRACT between the parties.
- 17.07 This CONTRACT is deemed to be under and shall be governed by and construed according to the laws of the State of Alabama.
- 17.08 Any litigation arising out of the CONTRACT shall be heard in the Courts of Baldwin County, Alabama.
- 17.09 This CONTRACT, with the attached bid packet, contains all terms and conditions agreed upon by the **CITY** and **CONTRACTOR**. No other CONTRACT, oral or otherwise, regarding the subject matter of this CONTRACT shall be deemed to exist or to bind either party hereto.
- 17.10 This CONTRACT shall not be construed against the party or parties preparing it. It shall be construed as if all the parties and each of them jointly prepared this CONTRACT, and any uncertainty or ambiguity shall not be interpreted against one or more parties.

Section 41-16-5, Code of Alabama 1975, requires that public contracts over \$15,000 include the following language:

By signing this Contract, REDD PEST SOLUTIONS OF THE S.E. INC represents and
COMPANY NAME
agrees that it is not currently engaged in, nor will it engage in, any boycott of a person or entity based in or doing business with a jurisdiction with which the State of Alabama can enjoy open trade

IN WITNESS WHEREOF, the parties hereto have executed this CONTRACT as of the day and year first above written.

THE CITY OF FAIRHOPE, ALABAMA

BY: _____
SHERRY SULLIVAN, Mayor

ATTEST: _____
LISA A. HANKS, MMC, City Clerk

NOTARY FOR THE CITY

STATE OF ALABAMA}

COUNTY OF BALDWIN}

I, the undersigned authority in and for said State and County, hereby certify that **SHERRY SULLIVAN** as Mayor of the City of Fairhope whose name is signed to the foregoing document and who is known to me, acknowledged before me on this day, that, being informed of the contents of the document they executed the same voluntarily on the date the same bears date.

Given under my hand and Notary Seal on this ____ day of _____, 2021.

Notary Public _____

My Commission Expires ____/____/____

CONTRACTOR

Individual or Partnership

(Individual or Partnership)

(Name of Partner Print)

(Representative Authorized to sign Bids and CONTRACTs for the firm Print)

(Name of Partner Print)

(Name of Representative Authorized to sign Bids and CONTRACTs for the firm Signature)

(Address)

(Address)

Phone Number () _____ Fax Number () _____

Primary e-mail address _____

Alabama Contractor's License No. (If required) _____

Contractor's Foreign Entity ID _____
(Required of out-of-state-vendors)

If Corporation or LLC

Company Redd Pest Solutions of the S.E. Inc State of Incorporation AL

Company Representative BRANDON REDD
(Name of Representative Authorized to sign Bids and CONTRACTs for the firm Print)

Company Representative [Signature]
(Name of Representative Authorized to sign Bids and CONTRACTs for the firm Signature)

Address 1273 AZALEA RD.
MOBILE, AL 36693

Phone Number (251) 460-1550 Fax Number (251) 460-1560

Primary e-mail address JWaltman@Reddpest.com Alabama Contractor's License No. (If Required) _____

Contractor's Foreign Entity ID _____
(Required of out-of-state-vendor)

NOTARY FOR THE CONTRACTOR

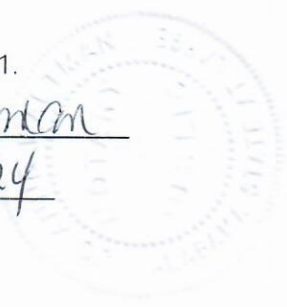
STATE OF AL }
COUNTY OF Mobile }

I, the undersigned authority in and for said State and County, hereby certify that BRANDOR Redd, as V.P of REDD PEST SOLUTIONS OF THE SE, INC, whose name is signed to the foregoing document and who are known to me, acknowledged before me on this day, that, being informed of the contents of the document they executed the same voluntarily on the day the same bears date.

Given under my hand and Notaries Seal on this 30 day of Aug, 2021.

Notary Jeanne Waltman

My Commission Expires 3/9/24



ITEM IX
CONTRACTOR INFORMATION

This Section must be printed, completed and turned in with your bid response to

Bid No. 039-21, Pest Control 2021

Business Organization

Name of CONTRACTOR (exactly as it appears on W-9):

REdd Pest Solutions of the S.E., INC.
Doing-Business-As Name of CONTRACTOR:

Principal Office Address:

1273 AZALEA RD.
MOBILE AL 36693

LOCAL Telephone Number: 251-660-1550 Toll-Free N/A

LOCAL Fax Number: 251-660-1560

Email address: BREdd@REddpest.com

Website: REddPEstSolutions.com

Form of Business Entity [check one ("X")]

Corporation

Partnership

Individual

Joint Venture

Other (describe):

Corporation Statement

If a corporation, answer the following:

Date of incorporation: 4/30/2015

Location of incorporation: ALABAMA

The corporation is held: Publicly

Privately

Partnership Statement

If a partnership, answer the following:

Date of organization: N/A

Location of organization: N/A

The partnership is: General

Limited

Joint Venture Statement

If a Joint Venture, answer the following:

Date of organization: N/A

Location of organization: N/A

JV CONTRACT recorded? Yes No

Contact: BRANDON REDD Email: BREdd@REddpest.com

Phone: 251-660-1550 Fax: 251-660-1560

END OF CONTRACTOR INFORMATION SECTION

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <p>2 Business name/disregarded entity name, if different from above <i>Redd Pest Solutions of the S.E., INC.</i></p> <p>3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____</p> <p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small></p>	
	<p>5 Address (number, street, and apt. or suite no.) <i>273 AZALEA RD.</i></p> <p>6 City, state, and ZIP code <i>MOBILE AL 36693</i></p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number																				
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OR																				
Employer identification number																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">47</td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table>	47																			
47																				

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ <i>8/21/18</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

DEPARTMENT OF AGRICULTURE AND INDUSTRIES

STATE OF



ALABAMA

CUSTOM PESTICIDE APPLICATOR'S LICENSE

CUSTOM PESTICIDE BUSINESS LICENSE

LICENSE #: 2021 - 5000011

LICENSED BUSINESS OPERATION CATEGORIES/TYPES: PH, ROW, GRD

THIS IS TO CERTIFY THAT

REDD PEST SOLUTIONS OF THE SE INC
1273 AZALEA ROAD
MOBILE AL 36693

AL ACCOUNT ID: 0001LP

IS IN FULL COMPLIANCE WITH ALL APPLICABLE ALABAMA STATUTES AND IS AUTHORIZED TO ENGAGE IN THE ACTIVITIES AND PRACTICES PROVIDED FOR THEREIN.

ISSUED AT MONTGOMERY ALABAMA ON 12/01/2020

THIS LICENSE EXPIRES DECEMBER 31, 2021 UNLESS PREVIOUSLY REVOKED

OPERATOR: JOHN KENNETH REDD, GRD, PH, ROW

TONY L COFER
DIVISION DIRECTOR

Rick Pate

Commissioner Of Agriculture And Industries

DEPARTMENT OF AGRICULTURE AND INDUSTRIES

STATE OF



ALABAMA

ALABAMA PERMIT FOR PROFESSIONAL SERVICES

STRUCTURAL BUSINESS LICENSE - MAIN

LICENSE #: 2021 - 7000107

LICENSED BUSINESS OPERATION CATEGORIES/TYPES: HPC, WDO, FC

THIS IS TO CERTIFY THAT

REDD PEST SOLUTIONS OF THE SE INC
1273 AZALEA ROAD
MOBILE AL 36693

AL ACCOUNT ID: 000LLP

IS IN FULL COMPLIANCE WITH ALL APPLICABLE ALABAMA STATUTES AND IS AUTHORIZED TO ENGAGE IN THE ACTIVITIES AND PRACTICES PROVIDED FOR THEREIN.

ISSUED AT MONTGOMERY ALABAMA ON 09/24/2020

THIS LICENSE EXPIRES SEPTEMBER 30, 2021 UNLESS PREVIOUSLY REVOKED

OPERATOR: GORDON L REDD JR, FC, HPC, WDC

OPERATOR: JOHN KENNETH REDD, HPC, WDC

A handwritten signature in black ink, appearing to read "DeBrow".

JOE DEBROW JR
PROGRAM DIRECTOR

Rick Pate
Commissioner Of Agriculture And Industries

DEPARTMENT OF AGRICULTURE AND INDUSTRIES

STATE OF



ALABAMA

ALABAMA PERMIT FOR PROFESSIONAL SERVICES

HORTICULTURAL BUSINESS LICENSE

LICENSE #: **2022 - 6000392**

LICENSED BUSINESS OPERATION CATEGORIES/TYPES: **OTPS**

THIS IS TO CERTIFY THAT

REDD PEST SOLUTIONS OF THE SE INC
1273 AZALEA ROAD
MOBILE AL 36693

AL ACCOUNT ID: 000LLP

IS IN FULL COMPLIANCE WITH ALL APPLICABLE ALABAMA STATUTES AND IS AUTHORIZED TO ENGAGE IN THE ACTIVITIES AND PRACTICES PROVIDED FOR THEREIN.

ISSUED AT MONTGOMERY ALABAMA ON 08/09/2021

THIS LICENSE EXPIRES SEPTEMBER 30, 2022 UNLESS PREVIOUSLY REVOKED

OPERATOR: JOHN KENNETH REDD, OTPS

A handwritten signature in black ink, appearing to read 'Joe DeBrow Jr.', is written over the printed name.

JOE DEBROW JR
PROGRAM DIRECTOR

Rick Pate

Commissioner Of Agriculture And Industries

POST IN A
CONSPICUOUS
PLACE

City of Fairhope, Alabama

Business License

THIS LICENSE EXPIRES 12/31/2020

License Number

7804

Business Name: REDD PEST SOLUTIONS OF THE S.E. INC
Address: PO BOX 9125
City, State Zip: MOBILE, AL 36691

20

ID: 103026

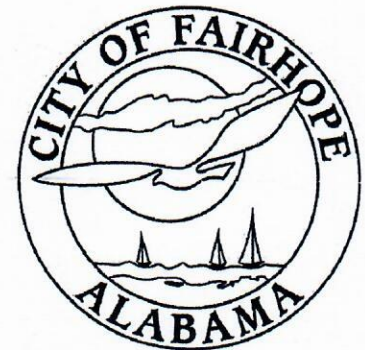
This License is issued pursuant to Chapter 8 of the Code of Ordinances, City of Fairhope. License, or a copy thereof, must be posted in a conspicuous place where business is conducted and must be presented upon demand of any authorized City of Fairhope Officer.

Phone Number: 251-660-1550

Classification: Exterminating services - exterminating company and


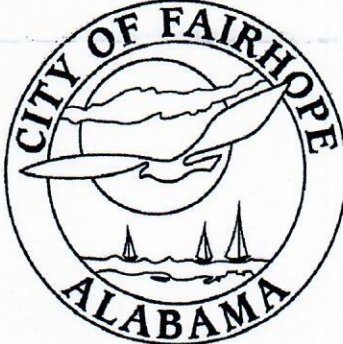
Date Issued: 02/05/2020

License Base: CITY LIMITS



By 
Issuing Officer

This License is NOT Transferable - Office Copy Only

<p>This is your Business License Receipt</p>	<p>City of Fairhope, Alabama Business License THIS LICENSE EXPIRES 12/31/2020</p>	<p>License Number 7804</p>						
<p>Business Name: REDD PEST SOLUTIONS OF THE S.E. INC ID: 103026 Address: PO BOX 9125 City, State Zip: MOBILE, AL 36691 Phone Number: 251-660-1550</p>								
<p>This License is issued pursuant to Chapter 8 of the Code of Ordinances, City of Fairhope. License, or a copy thereof, must be posted in a conspicuous place where business is conducted and must be presented upon demand of any authorized City of Fairhope Officer.</p> <p>Classification: Exterminating services - exterminating company and Date Issued: 02/05/2020 License Base: CITY LIMITS</p> <p>By <u></u> Issuing Officer</p>	 <table data-bbox="964 1858 1565 2045"><tr><td>ISSUANCE FEE</td><td>12.00</td></tr><tr><td>License Fee:</td><td>100.00</td></tr><tr><td>Total:</td><td>112.00</td></tr></table>		ISSUANCE FEE	12.00	License Fee:	100.00	Total:	112.00
ISSUANCE FEE	12.00							
License Fee:	100.00							
Total:	112.00							

CITY OF MOBILE

BUSINESS LICENSE

Mobile, Alabama

POST IN A CONSPICUOUS PLACE - LICENSE IS NOT TRANSFERABLE

Issued to:

REDD PEST CONTROL COMPANY T4
1273 AZALEA RD
MOBILE, AL 36693-4746

YEAR	LICENSE NO.
2021	395870
ISSUED	EXPIRES
4/7/2021	12/31/2021

561710 EXTERMINATOR-HAVE STATE PERMIT



Donna G. Bryars

Donna G. Bryars, Revenue Director
City of Mobile Revenue Department

www.cityofmobile.org/revenue



REDD PEST CONTROL COMPANY T4
1273 AZALEA RD
MOBILE, AL 36693-4746



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/26/2021

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 Alliant Insurance Services, Inc. 16000 N. Dallas Pkwy Suite 850 Dallas TX 75248	CONTACT NAME: PESTSURE CERTIFICATES PHONE (A/C, No, Ext): 888-984-3813 FAX (A/C, No): 214-273-3193 E-MAIL ADDRESS: PESTSURECERTS@ALLIANT.COM INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : Old Republic Insurance Company 24147 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
INSURED Redd Pest Solutions of the Southeast, Inc. PO Box 9125 Mobile, AL 36691	License#: OC36861 REDDPES-01

COVERAGES **CERTIFICATE NUMBER:** 1445067543 **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 WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A <input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	MWZY313716-21	7/1/2021	7/1/2022	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 4,000,000
							PRODUCTS - COMP/OP AGG	\$ 4,000,000
								\$
A <input checked="" type="checkbox"/>	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			MWTB313717-21	7/1/2021	7/1/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
A <input checked="" type="checkbox"/>	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 <input type="checkbox"/> Y <input type="checkbox"/> N/A		MWC313715-21	7/1/2021	7/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
All locations and operations. Add'l Insured coverage is provided by form by CG 20 10 12 19, See Attached.

The City of Fairhope is named as an Additional Insured. Waiver of Subrogation applies in favor of the Additional Insured.

CERTIFICATE HOLDER The City of Fairhope PO Drawer 429 Fairhope, AL 36533	CANCELLATION 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
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

- COMMERCIAL GENERAL LIABILITY COVERAGE PART
- ELECTRONIC DATA LIABILITY COVERAGE PART
- LIQUOR LIABILITY COVERAGE PART
- POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
- POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
- PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
- RAILROAD PROTECTIVE LIABILITY COVERAGE PART
- UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):

All persons or organizations when required by contract or agreement.

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

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

POLICY NUMBER: MWC313715-21

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

All persons or organizations when required by contract or agreement.

DATE OF ISSUE: 07/01/2021

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
All persons or organizations when required by contract or agreement.	All locations.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. 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", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable limits of insurance;
whichever is less.

This endorsement shall not increase the applicable limits of insurance.