



LEXINGTON

Bid 39-2022

BCI Burke Company LLC

Supplier Response

Event Information

Number: Bid 39-2022

Title: Outdoor Playground Equipment

Type: Competitive Bid

Issue Date: 4/12/2022

Deadline: 4/26/2022 02:00 PM (ET)

Notes: ONLY ONLINE BIDS WILL BE ACCEPTED FOR THIS SOLICITATION. PRICING SHOULD BE SUBMITTED ON THE LINE ITEMS TAB ONLY. PRICING WITHIN SUBMITTALS WILL NOT BE ACCEPTED AND MAY MAKE YOUR BID NON-RESPONSIVE. For questions regarding these specifications or the bidding process, please post to the published bid on IonWave – <https://lexingtonky.ionwave.net>. Phone calls or emails are not accepted.

Contact Information

Contact: Conni Hayes

Address: Central Purchasing
Government Center Building
Room 338
200 East Main Street
Lexington, KY 40507

Phone: (859) 2583320

Fax: (859) 2583322

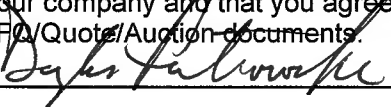
Email: chayes@lexingtonky.gov

BCI Burke Company LLC Information

Contact: Darrell Pryor
Address: 660 Van Dyne Road
Fond Du Lac, WI 54936
Phone: (800) 356-2070
Email: dpryor@burkeplay.com

ONLY ONLINE BIDS WILL BE ACCEPTED! By submitting your response, you certify that you are authorized to represent and bind your company and that you agree to all bid terms and conditions as stated in the attached bid/RFP/RFO/Quote/Auction documents.

Signature



Email

d.pietrowski@BCIBURKE.COM

Bid Lines

1	<p>Demolition with heavy equipment of existing playground per man hour</p> <p>Quantity: <u> 1 </u> Unit Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>
2	<p>Demolition with heavy equipment of existing playground per man hour</p> <p>Quantity: <u> 1 </u> Unit Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>

3

Installation of your play equipment as per manufacturer's specs - see note below.

Quantity: 1

Total:

Item Notes: Installation of your play equipment as per manufacturer's specs: 40 % of cost of equipment (not including edging or safety surface). The Contractor shall include accepting the freight on the project site or location of choosing, secure storage of the equipment for the duration of the project and disposal of all overburden and refuse off-site. For those shipments requested to be sent to Owner's storage facility at Masterson Station Park, 3051 Leestown Rd., Lexington, KY 40511, Vendor shall include cost of picking up at this location and providing safe and proper storage during installation. Contractor shall use temporary plastic fencing; employ security, or other means to protect work until final inspection and acceptance by Owner. If proper precautions are not taken, Contractor will be responsible for re-installing equipment properly at their cost. Contractor is also responsible for insuring that play does not occur on equipment until final acceptance by Owner. Owner guarantees inspection within 2 business days of notice of completion. Contractor is responsible for any lost, stolen or damaged equipment during installation.

4

Edging: 6" x 6" pressure treated timbers, stacked 2 high (12") with 24" #5 rebar into ground @ 4' o.c.

Quantity: 1

Price:

Total:

5

Edging: 6" x 12" concrete header curb (set at elevation so that top of curb is flush with outside grade once backfilled and inside play area flush with top of wood chip safety surface) with 12 inch deep, integral-pour piers every 5 ft. o.c. – BROOM finish.

Quantity: 1

Price:

Total:

6

Edging: 6" x 12" concrete header curb (set at elevation so that top of curb is flush with outside grade once backfilled and inside play area flush with top of wood chip safety surface) with 12 inch deep, integral-pour piers every 5 ft. o.c. – STAMPED finish.

Quantity: 1

Price:

Total:

7

Spreading mulch safety surface evenly under equipment and throughout play area (engineered wood chip mulch provided on-site by LFUCG)

Quantity: 1

Price:

Total:

8

Grading/site leveling(balanced cut/fill)

Quantity: 1

Price:

Total:

9

Geotextile Fabric (provide and install)

Quantity: 1

Price:

Total:

1
0

3/4" Schedule 80 PVC conduit (provide and install under concrete)

Quantity: 1

Price:

Total:

1
1

6" black corrugated drainage pipe in sock in a 12" x 12" trench backfilled with #57 stone (provide materials and install)

Quantity: 1

Price:

Total:

1
2

Loading and hauling logs, soil, gravel or rock (30 minute max. haul)

Quantity: 1

Price:

Total:

1
3

Sidewalk 4 1/2" broom finish (4000 psi) concrete over 3" compacted #57 stone

Quantity: 1

Price:

Total:

1 4	<p>Sidewalk 4 1/2" broom finish (4000 psi) concrete over 3" compacted #57 stone with manufacturer's standard color admixture</p> <p>Quantity: <u> 1 </u> Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>
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1 5	<p>Sidewalk 4 1/2" broom finish (4000 psi) concrete over 3" compacted #57 stone with stamped texture applied</p> <p>Quantity: <u> 1 </u> Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>
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1 6	<p>Poured in place rubber surface over 4" machine compacted dense grade aggregate (DGA) by vendor/installer (see attached specification) INCLUDING securing site until product is fully cured</p> <p>Quantity: <u> 1 </u> Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>
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1 7	<p>Poured in place rubber surface over 3" asphalt and 4" machine compacted DGA by vendor/installer (see attached specification) INCLUDING securing site until product is fully cured</p> <p>Quantity: <u> 1 </u> Price: <input type="text" value="No response"/> Total: <input type="text" value="No response"/></p>
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1
8

Poured in place rubber surface over 4" concrete and 3" machine compacted #57 stone by vendor/installer (see attached specification INCLUDING securing site until product is fully cured)

Quantity: 1

Price:

Total:

1
9

Pre-cast, modular block retaining wall or equal (price to include manufacturers recommended base/footers for up to max. height of 48" and matching top row capstone glued in place (see specification)

Quantity: 1

Price:

Total:

2
0

Construction entrance 20 ft. wide X 50 ft. long, excavated to depth of 6", line with non-woven geotextile fabric and backfill with 6" #2 stone. Include removal at conclusion of work, backfill with topsoil and seeding entire disturbed area (per Seeding specification)

Quantity: 1

Price:

Total:

2
1

Silt Fence provided, installed (as per figure 11-21, LFUCG Stormwater Manual, attached at end of specifications) and maintained for duration of project and removed after new turf is at 90% coverage

Quantity: 1

Price:

Total:

2
2

Seeding/Straw (see specification)

Quantity: 1

Price:

Total:

2
3

Sod, turf type fescue (provide and install)

Quantity: 1

Price:

Total:

2
4

Temporary, self-supporting, 8 ft. chain link fence sections, 6 ft. tall per 8 ft. section

Quantity: 1

Unit Price:

Total:

2
5

\$0 - \$5,000

BCI Burke Company, LLC

(Line excluded from response total)

Quantity: 1

Price:

Total:

2
6

\$5,001 - \$10,000

BCI Burke Company, LLC

Quantity: 1

Total:

2
7

\$10,001 and above

BCI Burke Company, LLC

(Line excluded from response total)

Quantity: 1

Total:

2
8

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

2
9

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

30	<p>\$10,001 and above</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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31	<p>\$0 - \$5,000</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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32	<p>\$5001 - \$10,000</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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33	<p>\$10,001 and above</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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3
4

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

3
5

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

3
6

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total:

3
7

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

3
8

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

3
9

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total:

4
0

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

4
1

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

4
2

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total:

4
3

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

4
4

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

4
5

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total:

4 6	<p>\$0 - \$5,000</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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4 7	<p>\$5001 - \$10,000</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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4 8	<p>\$10,001 and above</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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4 9	<p>\$0 - \$5,000</p> <p><i>(Line excluded from response total)</i></p> <p>Quantity: <u> 1 </u></p>	Total: <input type="text" value="No response"/>
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5
0

\$5001 - \$10,000

Quantity: 1

Total:

5
1

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total:

5
2

\$0 - \$5,000

(Line excluded from response total)

Quantity: 1

Total:

5
3

\$5001 - \$10,000

(Line excluded from response total)

Quantity: 1

Total:

5
4

\$10,001 and above

(Line excluded from response total)

Quantity: 1

Total: No response

Response Total: 0

This Affidavit must be completed before your firm can be considered for award of this contract.

AFFIDAVIT

Comes the Affiant, Douglas Pietrowski, and after being first duly sworn under penalty of perjury as follows:

1. His/her name is DOUGLAS Pietrowski and he/she is the individual submitting the bid or is the authorized representative of BCI BURKE COMPANY, LLC the entity submitting the bid (hereinafter referred to as "Bidder")
2. Bidder will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the bid is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3. Bidder will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.
4. Bidder has authorized the Division of Central Purchasing to verify the above-mentioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.
5. Bidder has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Bidder will not violate any provision of the campaign finance laws of the Commonwealth.
6. Bidder has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as "Ethics Act."
7. Bidder acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.

Further, Affiant sayeth naught. Douglas Pietrowski

STATE OF Wisconsin

COUNTY OF Fond du Lac

The foregoing instrument was subscribed, sworn to and acknowledged before me by Douglas Pietrowski on this the 25th day of April, 2022

My Commission expires: 10-17-2025

Uppome S. Godecha
NOTARY PUBLIC, STATE AT LARGE
State of Wisconsin



Please refer to Section II, Bid Conditions, Item "U" prior to completing this form.



LEXINGTON

LFUCG MWDBE PARTICIPATION FORM

Bid/RFP/Quote Reference # 39-2022

The MWDBE and/or veteran subcontractors listed have agreed to participate on this Bid/RFP/Quote. If any substitution is made or the total value of the work is changed prior to or after the job is in progress, it is understood that those substitutions must be submitted to Central Purchasing for approval immediately. **Failure to submit a completed form may cause rejection of the bid.**

MWDBE Company, Name, Address, Phone, Email	MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Total Contract
1. N/A				
2.				
3.				
4.				

The undersigned company representative submits the above list of MWDBE firms to be used in accomplishing the work contained in this Bid/RFP/Quote. Any misrepresentation may result in the termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

BCI Burke Company

Company

4/21/2022

Date

Douglas Pietrowski

Company Representative

CFO

Title



LEXINGTON

LFUCG MWDBE PARTICIPATION FORM

Bid/RFP/Quote Reference # 39-32022

The MWDBE and/or veteran subcontractors listed have agreed to participate on this Bid/RFP/Quote. If any substitution is made or the total value of the work is changed prior to or after the job is in progress, it is understood that those substitutions must be submitted to Central Purchasing for approval immediately. **Failure to submit a completed form may cause rejection of the bid.**

MWDBE Company, Name, Address, Phone, Email	MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Total Contract
1. N/A				
2.				
3.				
4.				

The undersigned company representative submits the above list of MWDBE firms to be used in accomplishing the work contained in this Bid/RFP/Quote. Any misrepresentation may result in the termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

BCI Burke Company

Company

4/21/2022

Date

Douglas Pietrowski

Company Representative

CFO

Title



LEXINGTON

LFUCG MWDBE SUBSTITUTION FORM

Bid/RFP/Quote Reference # 39-2022

The substituted MWDBE and/or veteran subcontractors listed below have agreed to participate on this Bid/RFP/Quote. These substitutions were made prior to or after the job was in progress. These substitutions were made for reasons stated below and are now being submitted to Central Purchasing for approval. By the authorized signature of a representative of our company, we understand that this information will be entered into our file for this project. **Failure to submit this form may cause rejection of the bid.**

SUBSTITUTED MWDBE Company Name, Address, Phone, Email	MWDBE Formally Contracted/ Name, Address, Phone, Email	Work to Be Performed	Reason for the Substitution	Total Dollar Value of the Work	% Value of Total Contract
1. N/A					
2.					
3.					
4.					

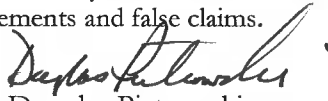
The undersigned acknowledges that any misrepresentation may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

BCI Burke Company

Company

4/21/2022

Date


Douglas Pietrowski

Company Representative

CFO

Title



LEXINGTON

MWDBE QUOTE SUMMARY FORM

Bid/RFP/Quote Reference # 39-2022

The undersigned acknowledges that the minority and/or veteran subcontractors listed on this form did submit a quote to participate on this project. Failure to submit this form may cause rejection of the bid.

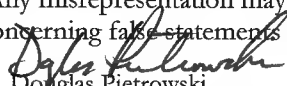
Company Name BCI Burke Company, LLC	Contact Person Darrell Pryor
Address/Phone/Email 727 Northwest Way Fond du Lac, WI 54937	Bid Package / Bid Date 39-2022 / 4/26/2022

MWDBE Company Address	Contact Person	Contact Information (work phone Email, cell)	Date Contacted	Services to be performed	Method of Communication (email, phone meeting, ad, event etc)	Total dollars \$\$ Do Not Leave Blank (Attach Documentation)	MBE * AA HA AS NA Female	Veteran

(MBE designation / AA=African American / HA= Hispanic American/AS = Asian American/Pacific Islander/ NA= Native American)

The undersigned acknowledges that all information is accurate. Any misrepresentation may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and claims.

BCI Burke Company, LLC
Company
4/21/22
Date


Douglas Pietrowski
Company Representative
CFO
Title



LEXINGTON

LFUCG SUBCONTRACTOR MONTHLY PAYMENT REPORT

The LFUCG has a 10% goal plan adopted by city council to increase the participation of minority and women owned businesses in the procurement process. The LFUCG also has a 3% goal plan adopted by cited council to increase the participation of veteran owned businesses in the procurement process. In order to measure that goal LFUCG will track spending with MWDBE and Veteran contractors on a monthly basis. By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentation may result in termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims. Please submit this form monthly to the Division of Central Purchasing/ 200 East Main Street / Room 338 / Lexington, KY 40507.

Bid/RFP/Quote # 39-2022

Total Contract Amount Awarded to Prime Contractor for this Project _____

Project Name/ Contract #	Work Period/ From: _____ To: _____
Company Name:	Address: _____
Federal Tax ID:	Contact Person: _____

Subcontractor Vendor ID (name, address, phone, email)	Description of Work	Total Subcontract Amount	% of Total Contract Awarded to Prime for this Project	Total Amount Paid for this Period	Purchase Order number for subcontractor work (please attach PO)	Scheduled Project Start Date	Scheduled Project End Date
N/A ~							

By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentations may result in the termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims.

Company

Company Representative

Date

Title

LFUCG STATEMENT OF GOOD FAITH EFFORTS

Bid/RFP/Quote # 39-2022

By the signature below of an authorized company representative, we certify that we have utilized the following Good Faith Efforts to obtain the maximum participation by MWDBE and Veteran-Owned business enterprises on the project and can supply the appropriate documentation.

_____ Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate.

_____ Included documentation of advertising in the above publications with the bidders good faith efforts package

_____ Attended LFUCG Central Purchasing Economic Inclusion Outreach event

_____ Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned Businesses of subcontracting opportunities

_____ Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses

_____ Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s).

_____ Contacted organizations that work with MWDBE companies for assistance in finding certified MWDBE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation.

_____ Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively.

_____ Followed up initial solicitations by contacting MWDBEs and Veteran-Owned businesses to determine their level of interest.

_____ Provided the interested MWDBE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract.

_____ Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work items with its own workforce

_____ Negotiated in good faith with interested MWDBE firms and Veteran-Owned businesses not rejecting them as unqualified without sound reasons based on a thorough investigation of their capabilities. Any rejection should be so noted in writing with a description as to why an agreement could not be reached.

_____ Included documentation of quotations received from interested MWDBE firms and Veteran-Owned businesses which were not used due to uncompetitive pricing or were rejected as unacceptable and/or copies of responses from firms indicating that they would not be submitting a bid.

_____ Bidder has to submit sound reasons why the quotations were considered unacceptable. The fact that the bidder has the ability and/or desire to perform the contract work with its own forces will not be considered a sound reason for rejecting a MWDBE and/or Veteran-Owned business's quote. Nothing in this provision shall be construed to require the bidder to accept unreasonable quotes in order to satisfy MWDBE and Veteran goals.

_____ Made an effort to offer assistance to or refer interested MWDBE firms and Veteran-Owned businesses to obtain the necessary equipment, supplies, materials, insurance and/or bonding to satisfy the work requirements of the bid proposal

_____ Made efforts to expand the search for MWBE firms and Veteran-Owned businesses beyond the usual geographic boundaries.

_____ Other--any other evidence that the bidder submits which may show that the bidder has made reasonable good faith efforts to include MWDBE and Veteran participation.

NOTE: Failure to submit any of the documentation requested in this section may be cause for rejection of bid. Bidders may include any other documentation deemed relevant to this requirement which is subject to approval by the MBE Liaison. Documentation of Good Faith Efforts must be submitted with the Bid, if the participation Goal is not met.

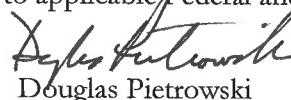
The undersigned acknowledges that all information is accurate. Any misrepresentations may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and claims.

BCI Burke Company, LLC

Company

4/21/2022

Date



Douglas Pietrowski

Company Representative

CFO

Title

STATEMENT OF CERTIFICATION

BCI Burke Company confirms that no products will be sold to Lexington-Fayette Urban County Government to be used in its Division of Parks and Recreation unless the products meet or exceed the following minimal, acceptance specifications:

- 2.3.1 Play equipment submitted for consideration shall be certified by the International Play Equipment Manufacturers Association or provide evidence from an independent testing laboratory that all products are compliant with ASTM F1487.
- 2.3.2 The playground products supplied must meet or exceed the standards set forth in the U.S. Consumer Product Safety Commission Handbook for Public Playground Safety, Volumes I and II.
- 2.3.3 The products supplied must meet or exceed any other applicable local, state or federal regulations, laws, or ordinances including applicable standards established by OSHA, EPA or any other regulatory body.
- 2.3.4 The products supplied are subjected to a strict quality control program to assure that the quality of the design and materials used are in compliance with acceptable standards established by the industry.

Sincerely,



Michael E. Phelan
President/CEO
BCI Burke Company, LLC
920-921-9220 (Office)
mphelan@bciburke.com
www.bciburke.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/29/2022

4/21/2022

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 Lockton Companies 1801 K Street NW, Suite 200 Washington DC 20006 (202) 414-2400	CONTACT NAME: PHONE (A/C. No. Ext): _____ FAX (A/C. No): _____ E-MAIL ADDRESS: _____														
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Twin City Fire Insurance Company</td> <td>29459</td> </tr> <tr> <td>INSURER B: The Travelers Indemnity Company</td> <td>25658</td> </tr> <tr> <td>INSURER C: Allied World National Assurance Company</td> <td>10690</td> </tr> <tr> <td>INSURER D: Travelers Property Casualty Co of America</td> <td>25674</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Twin City Fire Insurance Company	29459	INSURER B: The Travelers Indemnity Company	25658	INSURER C: Allied World National Assurance Company	10690	INSURER D: Travelers Property Casualty Co of America	25674	INSURER E:		INSURER F:
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INSURER E:															
INSURER F:															
INSURED BCI Burke Company, LLC 1440373 660 Van Dyne Road Fond du Lac, WI															

COVERAGES

CERTIFICATE NUMBER: 18446318

REVISION NUMBER: XXXXXXXX

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 <input checked="" type="checkbox"/> \$50,000 SIR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	N	42 ECS OF7920	12/29/2021	12/29/2022	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ XXXXXXXX PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	N	N	BA-1L612142-21-14-G	12/29/2021	12/29/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	N	N	0311-1102	12/29/2021	12/29/2022	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ XXXXXXXX
D	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	N/A	UB-6K417329-21-14-G	12/29/2021	12/29/2022	<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)

Lexington-Fayette Urban County Government is included as Additional Insured on the General Liability as required by written contract.

CERTIFICATE HOLDER

18446318
 Lexington-Fayette Urban County Government
 200 E Main Street
 BID# 39-2022
 Lexington KY 40507

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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WORKFORCE ANALYSIS FORM

Name of Organization: BCI Burke Company, LLC

Categories	Total	White (Not Hispanic or Latino)		Hispanic or Latino		Black or African-American (Not Hispanic or Latino)		Native Hawaiian and Other Pacific Islander (Not Hispanic or Latino)		Asian (Not Hispanic or Latino)		American Indian or Alaskan Native (not Hispanic or Latino)		Two or more races (Not Hispanic or Latino)		Total	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Administrators		10	6													10	6
Professionals		15	6							1						16	6
Superintendents																	
Supervisors																	
Foremen																	
Technicians		7	9								1					7	10
Protective Service																	
Para-Professionals																	
Office/Clerical		6	15													6	15
Skilled Craft		77	16	6		3			1					2		88	17
Service/Maintenan																	
Total:		115	52	6		3			1	1	1			2		127	54

Prepared by: Michelle Kissinger - Human Resource Manager Date: 04 / 22 / 22
(Name and Title)