

Date: May 20, 2021

ENGINEERING SERVICES CONTRACT

This is an Engineering Services Contract (Contract) between Tri-County Airport Commission (Client) and Jewell Associates Engineers, Inc. (Consultant). The Consultant will provide Engineering Services to the Client.

SCOPE OF SERVICES:

This contract is for the design, preparation of plans and specifications for drainage of surface water from the Tri-County Airport to Bear Creek.

The following scope of services is anticipated:

ENGINEERING

- **Administration and Coordination**

Administration of the Contract and Coordination of all work with the Client, Wisconsin Department of Transportation, Bureau of Aeronautics, Wisconsin Department of Transportation, Bureau of Transportation, FAA, FEMA, Westwood Infrastructure Inc., Wisconsin Department of Natural Resources, Sauk County, Richland County, Town of Spring Green, Town of Buena Vista, Landowners and Utilities.

- **Surveying**

Surveying will include all topographic survey to develop plans for the project. Establish horizontal and vertical control for the project. Property and Land Survey work to develop a Right of Way Plat for the Project. Monumentation for marking the Right of Way.

- **Engineering**

Engineering will include Hydrology and Hydraulics for development of the project, earthwork, ditch design, erosion control, storm water treatment, roadway crossing structures, utility conflict resolution, Bear Creek flood plain analysis and map adjustments if needed, irrigation equipment adjustments for Hartung Farms, estimate of quantities, prepare engineers estimate, plans and specifications compatible with WDOT Bureau of Aeronautics standards. Answer questions during bidding and construction.

- **Design Reports**

Assist with Design Reports being prepare by others. Consultant will provide exhibits and engineering information as needed.

- **Environmental Documentation**

Assist with Environmental Documentation being prepare by others. Consultant will provide exhibits and engineering information as needed.

- **Agency Coordination**

Coordination with all Town, County, State and Federal Agencies that have input and approval of the project.

- **Utility Coordination**

Coordination with all above ground and underground utilities and provide a plan of action for resolution of all conflicts prior to construction.

- **Right of Way**

Develop of Right of Way Plat showing the boundaries of all required lands for the construction and maintenance of the ditch. Descriptions documenting each easement from the individual landowners will be created along with recordable documents. Appraisals, if needed, will be prepared and the Consultant will acquire said easements for the project.

REAL ESTATE ACQUISITION

- **Real Estate Acquisition**

Provide Real Estate Acquisition services to acquire easements for the construction and maintenance of the project in conformity with the "Federal Uniform Relocation Assistance & Real Property Acquisition Policies Act of 1970". Parcel appraisals will be provided where required.

Specific items include:

Acquisition of up to seven (7) parcels:

- i. Assisting Sauk and Richland Counties with the approval of the sales study
- ii. Offering Letter
- iii. Partial Release of Mortgage (if necessary)
- iv. Statement to Construction Engineer
- v. Signed Negotiation Diary
- vi. Signed Warranty Deed Document and conveyance of rights by owner, recorded and notarized.
- vii. Nominal Payment Parcel-Waiver of Appraisal or Donation-Waiver of Appraisal.
- viii. Signed W-9 Form

- ix. Preparing all documents on correct forms
- x. Notify Client for acquisition reimbursements and distribution.
- xi. Preparing Real Estate Transfer Forms as needed
- xii. Copying and submitting forms to Lafayette County

- **Public Involvement**

Prepare exhibits and attend up to two public informational meetings to share the details of the project with the public.

- **Meetings**

Attend monthly Tri-County Airport Commission Meetings, property owners' meetings as needed, and meetings to coordinate the project design with Westwood Infrastructure, Inc. and WisDOT Bureau of Aeronautics as needed.

Services not set forth above are specifically excluded from the scope of the Consultant's services and the Consultant assumes no responsibility to provide such services unless an agreement for Additional Services is made and appended to this Contract.

SCHEDULE:

This Agreement is based upon the following anticipated schedule.

Start of Work May 21, 2021

Completion Date June 1, 2022

Note that this schedule assumes Authorization to Proceed by May 20, 2021 and that permit approvals, delivery of documents by others etc. will occur without any substantial delays. Any difficulties in the process may affect the outlined schedule.

ASSUMPTIONS:

This agreement is subject to the following assumptions/conditions:

ENGINEERING

1. All permit fees will be paid by the Client.
2. Cultural, historic, archeological, or wetland assessment investigations or site remediation activities are not included.

REALESTATE ACQUISITION

1. All recording fees will be paid as extras by the Client.
2. Payments for easements in accordance with the terms of the accepted offering letter, for each parcel, will be provided by the Client.
3. This assumes the property owners are willing sellers. Jewell staff will meet with landowners, as needed, to negotiate the easement.

4. condemnation or legal action is required, time for Jewell staff will be extra on a time and material Any landowner who is not willing to agree to the terms of the easement, and basis.
5. This contract includes all postage for certified mail as well as copies of all signed and approved documents to be delivered to the property owners.
6. Client will provide the approval of the sales study, offering letters, relocation order and right of way plat.

ADDRESS CONFIRMATION:

Client's Billing Address is: Mark Higgs, Manager
Tri-County Airport
E2525 County HWY. JJ
Spring Green, WI. 53588

The telephone number where the Client can be reached is 608-583-2600, and the Client's e-mail address is mhiggs@co.sauk.wi.us .

(If any of the above contact information is incorrect, please cross out the incorrect information and write in the correct information.) The client agrees to notify the Consultant if any contact information changes.

COMPENSATION:

1. Compensation for services under this Contract shall be a LUMP SUM amount of \$ 92,500.00 for Engineering and a Cost Not to Exceed of \$28,450.00 for Real Estate Acquisition plus costs specifically listed as extra in the Assumptions area of this contract.

Engineering (Lump Sum)	\$ 92,500.00
Real Estate Acquisition (Time and Material Not to Exceed)	\$ 28,450.00
Total Contract	\$120,950.00

2. Jewell Associates Engineers, Inc. shall submit invoices monthly for Services and payment is due within 45 days. If payment in full is not received within 45 days from due date, the invoice will be deemed past due and will bear interest at 1.5% of the past due amount per month.
3. If the Client fails to make payments, any collection costs the Consultant incurs shall become immediately due and payable to the Consultant. The costs include, but are not limited to, legal fees, collection agency fees, and court costs.

TERMINATION:

This contract may be terminated at any time upon seven (7) calendar days' written notice by either party should the other party fail to perform its obligations hereunder. In the event of termination for any reason whatsoever, the Client shall pay the Consultant for all services rendered to the date of termination, and all reimbursable expenses incurred prior to termination.

Failure of Client to make payments when due shall be cause for suspension of services, or ultimately termination, unless and until Consultant has been paid in full all amounts due.

STANDARD OF CARE:

The standard of care for all professional services performed or furnished by the Consultant under this Contract will be the skill and care used by members of the Consultant's profession practicing under similar circumstances at the same time and in the same locality.

INFORMATION PROVIDED BY OTHERS:

The Client shall furnish, at the Client's expense, all information, requirements, reports, data, surveys, and instructions required by this Contract. The Consultant may use such information in performing its services and is entitled to rely upon the accuracy and completeness thereof.

TIMELINESS OF PERFORMANCE/DELAYS:

The Consultant will perform services under this Contract with reasonable diligence and expediency consistent with sound professional practices. The Client agrees that the Consultant is not responsible for damages arising directly or indirectly from any delays for causes beyond the Consultant's control. For purposes of this Contract, such causes include, but are not limited to, strikes or other labor disputes; severe weather disruptions or other natural disasters; failure of any government agency to act in a timely manner; failure of performance by the Client or the Client's contractors or consultants; pandemics and/or endemics; or discovery of any hazardous substances or differing site conditions. If the delays resulting from any such causes increase the cost or time required by the Consultant to perform its services in an orderly and efficient manner, the Consultant shall be entitled to an equitable adjustment in schedule and/or compensation.

ATTORNEY'S FEES:

In the event of any litigation arising or related to this Contract or the services provided hereunder, the prevailing party shall be entitled to recover from the non-prevailing party all reasonable costs incurred, including staff time, court costs, attorney's fees, and all other related expenses in such litigation.

OWNERSHIP OF INSTRUMENTS OF SERVICE:

All reports, drawings, specifications, computer files, field data, notes and other documents and instruments prepared by the Consultant as instruments of service shall remain the property of the Consultant. The Consultant shall retain all common law, statutory and other reserved rights, including the copyright thereto. The Consultant grants the Client a license to use instruments of the Consultant's service for the purpose of constructing, occupying, and maintaining the Project. Reuse or modification of any such documents by the Client or by others acting through the Client, without the Consultant's written permission, shall be at Client's sole risk, and Client agrees to indemnify and hold Consultant harmless from all claims, damages, and expenses, including attorney's fees, arising out of such unauthorized reuse or modification.

DELIVERY OF ELECTRONIC FILES:

In accepting and utilizing any drawings, reports and data on any form of electronic media generated and furnished by the Consultant, the Client agrees that all such electronic files are instruments of service of the Consultant, who shall be deemed the author, and shall retain all common law, statutory law, and other rights, including copyrights.

Electronic files are furnished by the Consultant to the Client solely for the convenience of the Client. In the event of a conflict between the signed construction documents prepared by the Consultant and electronic files, the signed or sealed hard-copy construction documents shall govern.

The Client agrees not to reuse these electronic files, in whole or in part, for any purpose other than for the Project.

Under no circumstances shall delivery of electronic files for use by the Client be deemed a sale by the Consultant. In no event shall the Consultant be liable for indirect or consequential damages as a result of the Client's use or reuse of the electronic files.

DISPUTE RESOLUTION:

Any claims or disputes between the Client and the Consultant arising out of the services to be provided by the Consultant or out of this Contract shall be submitted to nonbinding mediation unless the parties mutually agree otherwise. The parties agree that if any dispute is not resolved through mediation either party may seek redress in an appropriate court pursuant to the terms of this agreement.

CONSTRUCTION PHASE SERVICES:

If this Contract provides for any construction phase services by the Consultant, it is understood that the Contractor, not the Consultant, is responsible for the construction of the project, and that the Consultant is not responsible for the acts or omissions of any contractor, subcontractor, or material supplier; for safety precautions, programs, or enforcement; or for construction means, methods, techniques, sequences, and procedures employed by the Contractor.

OPINIONS OF COST:

Any opinions or estimates of probable construction cost prepared by the Consultant are based on the Consultant's professional judgment and experience. However, since the Consultant has no control over the cost of labor, materials, equipment, or service furnished by others, over the contractor's methods of determining prices, or over competitive bidding or market conditions, the Consultant cannot and does not guarantee that proposals, bids, or actual construction cost will not vary from the Consultant's opinions or estimates of probable construction cost.

EXHIBIT A

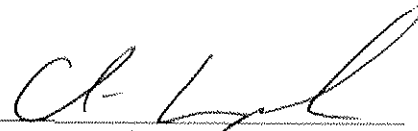
The parties agree to be bound by the terms in the attached Exhibit A.

CLIENT



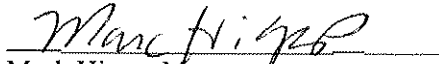
Brent Miller, Administrator
Sauk County

Date: 5/20/2021



Clint Langreck, Administrator
Richland County

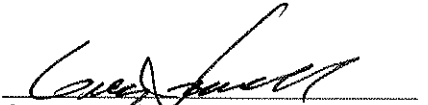
Date: 20 May 2021



Mark Higgs, Manager
Tri-County Airport

Date: 5/20/2021

CONSULTANT



Greg Jewell, P.E., R.L.S., Chairman
Jewell Associates Engineers, Inc.

Date: MAY 20, 2021

Exhibit A

STANDARD CLAUSES

1. **Insurance.** During the term of this Agreement, Consultant shall, at Consultant's sole cost, maintain the following minimum insurance:

Comprehensive General Liability Limits:
\$1,000,000 bodily injury/ property damage.

Excess Umbrella Liability Limits:
\$1,000,000.

Worker's Compensation:

- a. Coverage A: Limits – Statutory
- b. Coverage B: Employer's Liability Limits
- c. Bodily Injury by Accident - \$100,000 each accident minimum
- d. Bodily Injury by Disease - \$100,000 each employee minimum
- e. Bodily Injury by Disease - \$500,000 policy limit minimum

Professional Liability:
\$2,000,000

Certificates of insurance are required for all policies. The Certificate of General Liability Insurance & Excess Umbrella Liability shall name the Client as an additional insured on the policy and must require that a thirty (30) day cancellation notice be given to the Client. An updated copy of the Certificate must be provided anytime a change is made to any policy.

2. **Effective Date.** The effective date of this Agreement shall be the date of the last signature.

4. **Survival.** The warranties, representations and covenants of this Agreement shall survive completion of the Services under this agreement or any termination of this Agreement.

6. **Notices.** Any legal notice required by this Agreement shall be made in writing to the address specified below:

County: Sauk County Clerk
 505 Broadway
 Baraboo, WI 53913

With a copy to: Brent Miller
 Community Development Coordinator
 505 Broadway
 Baraboo, WI 53913

Jewell: Greg Jewell
 Jewell Associates Engineering, Inc.
 560 Sunrise Dr.
 Spring Green, WI 53588

Nothing contained in this Article shall be construed to restrict the transmission of routine communications between representatives of the parties.

9. **Waiver.** A waiver by either of the parties of any breach of this Agreement shall be in writing. Such a waiver shall not affect the waiving party's rights with respect to any other or further breach.

10. **Successors and Assigns.** The parties each bind themselves and their successors, executors, administrators, permitted assigns, legal representatives and, in the case of a partnership, the partners, in the case of an LLC its members, to the other party to this Agreement and to the successors, executors, administrators, permitted assigns, legal representatives and partners of such other party in respect to all provisions of this Agreement.

11. **No Construction Against Either Party.** This agreement is the product of negotiations between the parties and was either reached with the advice of legal counsel or the opportunity to obtain legal counsel, and shall not be construed against either party.

12. **Multiple Originals.** This contract may be executed in multiple originals, each of which together shall constitute a single agreement.

13. **Captions.** The parties agree that in this contract, captions are used for convenience only and shall not be used in interpreting or construing this contract.

14. **Statutory Protections.** It is agreed by the parties that nothing in this contract, including but not limited to indemnification and hold harmless clauses, shall in any way constitute a waiver on the part of the Client of any immunity, liability limitation or other protection available to the Client under any applicable statute or other law. To the extent that any provision of this contract is found by any court of competent jurisdiction to conflict with any such legal protection, then whichever protections, either statutory or contractual, provide a greater benefit to the Client shall apply unless the Client elects otherwise.

15. **Open Records Law Compliance.** Consultant understands and agrees that, because Client is a party to this contract, provisions of the Wisconsin Open Records Law and other laws relating to public records may apply to records kept by Consultant and/or the Client. Consultant agrees to fully comply with such laws, and to cooperate with Client in its compliance with such laws. Cooperation shall include, but not be limited to, the provision of records, or copies of records to Client or others upon the request of Client. Compliance and cooperation of Consultation shall be at its sole cost and expense.

16. **Integration.** This contract represents the entire and integrated contract between the parties. It supersedes all prior and contemporaneous communications, representations and agreements, whether oral or written, relating to the subject matter of this contract.

17. **Relationship of Parties.** Nothing in, or done pursuant to, this contract shall be construed to create the relationship of employer and employee, principal and agent, partners, or a joint venture between Client and Consultant. This contract does not create an employee/employer relationship between the parties. It is the parties' intention that the Consultant will be an independent contractor and not the Client's employee for all purposes, including, but not limited to, the application of the Fair Labor Standards Act minimum wage and overtime payments, Federal Insurance Contribution Act, the Social Security Act, the Federal Unemployment Tax Act, the

provisions of the Internal Revenue Code, the state revenue and taxation law, the state workers' compensation law and the state unemployment insurance law. This contract shall not be construed as creating any joint employment relationship between the Consultant and the Client, and the Client will not be liable for any obligation incurred by Consultant including but not limited to unpaid minimum wages, overtime premiums, unemployment insurance benefits, worker's compensation benefits, health insurance, health benefits, disability benefits, or retirement benefits. Consultant is not entitled to receive any benefits from Client or to participate in any Client benefit plan.

18. Governing Law, Jurisdiction and Venue. This contract shall be construed and interpreted in accordance with the laws of the State of Wisconsin, without giving effect to any choice or conflict of laws provision or rule, whether of the State of Wisconsin or any other jurisdiction that would cause the application of laws of any jurisdiction other than those of the State of Wisconsin. The parties hereby irrevocably submit to the jurisdiction of the state courts of the State of Wisconsin for the purpose of any suit, action or other proceeding arising out of or based upon this contract. The parties further agree that the venue for any legal proceedings related to this contract shall be Sauk County, Wisconsin. The foregoing shall not be construed to limit the rights of a party to enforce a judgment or order of the above court in any other jurisdictions.

19. Competence, Solvency. Consultant warrants and represents that it is sufficiently experienced and competent to provide, perform and complete all services in full compliance with and as required by or pursuant to this contract. Consultant represents and warrants that it is financially solvent, and has the financial resources necessary to provide, perform and complete the duties and functions in full compliance with and as required by this contract. Consultant shall provide, perform and complete all services contemplated by this contract in an expeditious and proper.

20. Amendment. No amendment of this Contract shall be binding unless in writing and signed by all of the parties.

21. Compliance with Laws. The parties agree to comply with all applicable Federal, State and local codes, regulations, standards, ordinances, and other laws.

22. Electronic Signing. It is agreed by the parties that either party or both may, by email, provide the other party with a copy of this contract, in PDF form or otherwise, showing the signatures of, or on behalf of the sending party, with such signatures being as binding as original signatures, regardless of whether the other party signs in the same fashion, or by using original ink signatures. For the purposes of this section, "signatures" may be original written signatures, photocopies of signatures, or signatures added to a contract or through the addition by a signing party of a typed or electronically added signature.



JEWEL-4

QP ID: RH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/27/2021

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 Schwarz Insurance - S.G. 157 W. Jefferson Street P.O. Box 879 Spring Green, WI 53588-0879 Nadene M. Litscher	608-644-8563	CONTACT NAME: Rana Hughey PHONE (A/C, No, Ext): 608-644-8563 FAX (A/C, No): 608-643-3249 E-MAIL ADDRESS: rhug@schwarzins.com
INSURED Jewell Associates Engineers, Inc. 560 Sunrise Drive Spring Green, WI 53588		INSURER(S) AFFORDING COVERAGE INSURER A: Secura Companies INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
		NAIC # 22543

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR 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"/> Per Proj Aggregat GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			BP3219060	03/01/2021	03/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			A3219061	03/01/2021	03/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			CU3219063	03/01/2021	03/01/2022	EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000
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 N	N/A	WC3219062	03/01/2021	03/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER

CANCELLATION

TRICO10

Tri-County Airport Commission
E2525 County Road JJ
Spring Green, WI 53588

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
Nadene M. Litscher



JEWEASS-01

EPIEHLER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/27/2021

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.

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PRODUCER Johnson Insurance Madison 525 Junction Road Madison, WI 53717	CONTACT NAME: Emily Piehler PHONE (A/C, No, Ext): (262) 321-2307 FAX (A/C, No): (877) 254-8586 E-MAIL ADDRESS: epiehler@johnsonfinancialgroup.com																					
INSURED Jewell Associates Engineers Inc. Greg Jewell, President 560 Sunrise Dr Spring Green, WI 53588	<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>Continental Casualty Company</td><td>20443</td></tr><tr><td>INSURER B:</td><td></td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></tbody></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Continental Casualty Company	20443	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER A:	Continental Casualty Company	20443																				
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	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ 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 DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
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A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Each Claim 2,000,000
A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Aggregate 2,000,000

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

CERTIFICATE HOLDER

CANCELLATION

Tri-County Airport Commission
E2525 County Road JJ
Spring Green, WI 53588

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



JEWEL-4

OP ID: RH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/27/2021

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PRODUCER Schwarz Insurance - S.G. 157 W. Jefferson Street P.O. Box 879 Spring Green, WI 53588-0879 Nadene M. Litscher	608-644-8563	CONTACT NAME: Rana Hughey PHONE (A/C, No, Ext): 608-644-8563 FAX (A/C, No): 608-643-3249 E-MAIL: rhug@schwarzins.com ADDRESS:
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Secura Companies		22543
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Jewell Associates Engineers, Inc.
560 Sunrise Drive
Spring Green, WI 53588

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVP	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"/> Per Proj Aggregat GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			BP3219060	03/01/2021	03/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			A3219061	03/01/2021	03/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			CU3219063	03/01/2021	03/01/2022	EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000
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	N/A	WC3219062	03/01/2021	03/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER

CANCELLATION

RICCO-5

Richland County Administrator
221 W Seminary Street
Richland Center, WI 53581

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
Nadene M. Litscher



JEWASS-01

EPIEHLER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/27/2021

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.

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PRODUCER Johnson Insurance Madison 525 Junction Road Madison, WI 53717	CONTACT NAME: Emily Piehler PHONE (A/C, No, Ext): (262) 321-2307 FAX (A/C, No): (877) 254-8586 E-MAIL: epiehler@johnsonfinancialgroup.com ADDRESS:
INSURED Jewell Associates Engineers Inc. Greg Jewell, President 560 Sunrise Dr Spring Green, WI 53588	INSURER(S) AFFORDING COVERAGE INSURER A: Continental Casualty Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F: NAIC #: 20443

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ 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 DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Each Claim 2,000,000
A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Aggregate 2,000,000

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

CERTIFICATE HOLDER

CANCELLATION

Richland County Administrator
221 W. Seminary Street
Richland Center, WI 53581

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



JEWEL-4

OP ID: RH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/27/2021

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PRODUCER
Schwarz Insurance - S.G.
157 W. Jefferson Street
P.O. Box 879
Spring Green, WI 53588-0879
Nadene M. Litscher

608-644-8563

CONTACT NAME: Rana Hughey

PHONE (A/C, No, Ext): 608-644-8563

FAX (A/C, No): 608-643-3249

E-MAIL ADDRESS: rhug@schwarzins.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Secura Companies

22543

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED
Jewell Associates Engineers, Inc.
560 Sunrise Drive
Spring Green, WI 53588

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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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"/> Per Proj Aggregat GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			BP3219060	03/01/2021	03/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

SAUCO-2

Sauk County Administrator
Sauk County West Square Bldg
505 Broadway, Room #134
Baraboo, WI 53913

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AUTHORIZED REPRESENTATIVE
Nadene M. Litscher



JEWASS-01

EPIEHLER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/27/2021

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PRODUCER Johnson Insurance Madison 525 Junction Road Madison, WI 53717		CONTACT NAME: Emily Piehler PHONE (A/C, No, Ext): (262) 321-2307 FAX (A/C, No): (877) 254-8586 E-MAIL ADDRESS: epiehler@johnsonfinancialgroup.com		
INSURED Jewell Associates Engineers Inc. Greg Jewell, President 560 Sunrise Dr Spring Green, WI 53588		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: Continental Casualty Company		20443
		INSURER B:		
		INSURER C:		
		INSURER D:		
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COVERAGES

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	AUTOMOBILE LIABILITY <input 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						COMBINED SINGLE LIMIT (Ea accident) \$ 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 DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Each Claim 2,000,000
A	Professional Liabili			AEH288369764	4/27/2021	4/27/2022	Aggregate 2,000,000

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CERTIFICATE HOLDER

CANCELLATION

Sauk County Administrator
Sauk County West Square Building, Room #134
505 Broadway
Baraboo, WI 53913

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AUTHORIZED REPRESENTATIVE