STATUTORY BOND Bond No.: 105907981

Known all men by these presents that Rudy Cor Travelers Casualty and Surety Company of America, a corporati Connecticut, and authorized to transact held and firmly bound unto the Stat Seven hundred sixty thousand eight hundred seventy eight & 55/10 payment of which sum PRINCIPAL and SURETY bind successors and assigns jointly and severally.	on organized under the laws of the State of pusiness in the State of Oklahoma, as Surety, are of Oklahoma in the sum of 00 DOLLARS (\$ 760,878.55) or the
WHEREAS, the conditions of this obligation are subest Bidder on the following PROJECT:	ich, that the PRINCIPAL, being the lowest and
BID 1213-75 ROAD RECONSTRUC	TION 2010 BOND PROJECTS
has entered into a written CONTRACT () with of, 20_13, for the erection and construincorporated herein by reference as if fully set forth.	THE CITY OF NORMAN, dated this day action of this PROJECT, that CONTRACT being
NOW, THEREFORE, if the PRINCIPAL, shall per PROJECT in accordance with the CONTRACT, and shall abor and materials and repairs to and parts for equipment whether incurred by the PRINCIPAL, his subcontractor be void. Otherwise this obligation shall remain in full for (30) days after the same becomes due and payable, the sue and recover on this Bond, subject to the provisions of	Il well and truly pay all indebtedness incurred for ment furnished in the making of the PROJECT, is, or any material men, then this obligation shall bree and effect. If debts are not paid within thirty person, firm, or corporation entitled thereto may
It is further expressly agreed and understood by the said CONTRACT and no deviations from the plan or mo of releasing the SURETIES, or any of them, from the ob-	de of procedure herein fixed shall have the effect
It is further expressly agreed that the Principal's ob- less than the prevailing hourly rate of wages as establish Oklahoma and by the Secretary of the U.S. Department of	ed by the Commissioner of Labor of the State of
IN WITNESS WHEREOF, the PRINCIPAL has cau its corporate seal (where applicable) to be hereunto affixed day of, 20 13 _, and the SURETY name and its corporate seal to be hereunto affixed by its of, 20 13	ed by its duly authorized representative(s), on the has caused these presents to be executed in its
(Corporate Seal) (where applicable)	Rudy Construction Co.
ATTEST Corporate Secretary (where applicable)	Principal Signed: Authorized Representative Title: Doug Walker, President
Witness	

Statutory Bond No. B-1213-79 Page 1 of 3

	Address: P.O. Box 14575
	Oklahoma City, OK 73113
	Telephone: 405-478-9900
(Corporate Seal) (where applicable) ATTEST: Carrie True, Witness W	Signed: Authorized Representative Printed: Dillon Rosenhamer Authorized Representative Title: Attorney-in-Fact Address: INSURICA
	5100 N. Classen Blvd., Suite 300 Oklahoma City, OK 73118
	Telephone: 405-523-2100
CORPOR	ATE ACKNOWLEDGEMENT
The foregoing instrument was acknown (10 /
My Commission Expires:	Notary Public
	JAL ACKNOWLEDGEMENT
STATE OF)	88
COUNTY OF)	Statutory Bond No. B-1213-79

Statutory Bond No. B-1213-79 Page 2 of 3

The foregoing instrument was acknowledge before	e me this day of,
20, by	(Name and Tide) of
a(n) corporation.	
WITNESS my hand and seal this day	of, 20
My Commission Expires:	Notary Public
PARTNERSHIP ACKN	NOWLEDGEMENT
STATE OF) ss: COUNTY OF)	
The foregoing instrument was acknowledge b 20, by(partner/agent) on	efore me this day of, (Name and Title) behalf of,
a partnership.	
WITNESS my hand and seal this day of	, 20
My Commission Expires:	Notary Public
CITY OF NORMAN	•
Approved as to form and legality this 17 day	V
Approved by the Council of the City of Norman 20	City Attorney day of,
ATTEST:	
City Clerk	Mayor



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company Travelers Casualty and Surety Company Travelers Casualty and Surety Company of America United States Fidelity and Guaranty Company

Marie C. Tetreault, Notary Public

Attorney-In Fact No.

224830

Certificate No. 004858852

KNOW ALL MEN BY THESE PRESENTS: That St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company and St. Paul Mercury Insurance Company are corporations duly organized under the laws of the State of Minnesota, that Farmington Casualty Company, Travelers Casualty and Surety Company, and Travelers Casualty and Surety Company of America are corporations duly organized under the laws of the State of Connecticut, that United States Fidelity and Guaranty Company is a corporation duly organized under the laws of the State of Maryland, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint

Gary M. Jarmon, Jeffrey J. Burton, V. David Dutton, Michael F. Ross, Jana D. Dean, Bill Orcutt, Dillon Rosenhamer, and Carrie True

of the City ofOklahoma City	State of Okla	homa	their true and lawful	Attomacy(a) in Fact
each in their separate capacity if more than one is named above other writings obligatory in the nature thereof on behalf of the contracts and executing or guaranteeing bonds and undertaking	e, to sign, execute, seal and ac e Companies in their busines	cknowledge any and all bonds, ress of guaranteeing the fidelity of	cognizances, condition persons, guaranteeing	al undertakings and
IN WITNESS WHEREOF, the Companies have caused this is day of $\underline{\hspace{1cm}}$ May $\underline{\hspace{1cm}}$, $\underline{\hspace{1cm}}$ 2012 $\underline{\hspace{1cm}}$.	nstrument to be signed and the	heir corporate seals to be hereto a	offixed, this	14th
Farmington Casualty Con Fidelity and Guaranty Ins Fidelity and Guaranty Ins St. Paul Fire and Marine St. Paul Guardian Insuran	surance Company surance Underwriters, Inc. Insurance Company	Travelers Casualty	nsurance Company and Surety Company and Surety Company ity and Guaranty Cou	y of America
1982 September 1977 S	SEAL S	SEAL STATE OF STATE O	S (MATTOR)	EUTYANO E INCOGRAMENTO E INCOGRAMENT
State of Connecticut City of Hartford ss.		By: George W Thon	Therefore in the President of the Presid	ent
On this theday ofMay himself to be the Senior Vice President of Farmington Casualty Inc., St. Paul Fire and Marine Insurance Company, St. Paul Company, Travelers Casualty and Surety Company of Americ executed the foregoing instrument for the purposes therein cont	y Company, Fidelity and Gu Guardian Insurance Compar a, and United States Fidelity	ny, St. Paul Mercury Insurance (and Guaranty Company, and the	ity and Guaranty Insur Company, Travelers C at he, as such, being a	rance Underwriters, Casualty and Surety authorized so to do,
In Witness Whereof I bereinto set my hand and official seal	SE C. TETRO	Ma	nie c. Ji	trenult

58440-6-11Printed in U.S.A.

My Commission expires the 30th day of June, 2016.

RUDYCON-02

CHODGENS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/2/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME:				
INSURICA - Oklahoma City P O Box 25928		PHONE (A/C, No, Ext): (405) 523-2100	FAX (A/C, No): (405	5) 556-2332		
Oklahoma City, OK 73125	i	E-MAIL ADDRESS:				
		INSURER(S) AFFORDING COVERAG	E	NAIC#		
		INSURER A: Valley Forge Insurance Co.		20508		
Rudy Construction Co.		INSURER B: Transportation Insurance Co		20494		
		INSURER C:				
P.O. Box 14575 Oklahoma City, OK 73113	575	INSURER D:				
	ity, OK 73113	INSURER E :				
060000000000000000000000000000000000000		INSURER F:				
COVERAGES	CERTIFICATE NUMBER:	REVISION N	UMBER:			

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			POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	
	GENERAL LIABILITY	INSK	WVD				EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
Α	X COMMERCIAL GENERAL LIABILITY			5086418762	8/1/2012	8/1/2013	PREMISES (Ea occurrence)	\$	100,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	1,000,000
							GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	2,000,000
	POLICY X PRO- JECT LOC							\$	
	AUTOMOBILE LIABILITY			10,700			COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
Α	X ANY AUTO			BUA5086418776	8/1/2012	8/1/2013	BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$	
						Report of		\$	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X WC STATU- TORY LIMITS OTH- ER		
В	ANY PROPRIETOR/PARTNER/EXECUTIVE N / A (Mandatory in NH)	5086418759	8/1/2012	8/1/2013	E.L. EACH ACCIDENT	\$	1,000,000		
		1177	`				E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000

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

RE: Bid 1213-75 Road Reconstruction 2010 Bond Projects (bond #105907981)

Certificate holder is named as additional insured with respect to General Liability if required by written contract and in accordance with policy terms and conditions.

CERTIFICATE HOLDER	CANCELLATION				
City of Norman 201 W. Gray St. Norman, OK 73069	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				