
DAVID R. CRAIG
HARFORD COUNTY EXECUTIVE



DEPARTMENT OF PROCUREMENT
DEBORAH L. HENDERSON
DIRECTOR

MARY F. CHANCE
DIRECTOR OF ADMINISTRATION

JOSEPH S. PATTI, CPPO
DEPUTY DIRECTOR

HARFORD COUNTY GOVERNMENT

May 17, 2011

JCI Jones Chemicals, Inc.
Attn: Cortney Johnson, Sales Coordinator
16248 Industrial Drive
Milford, Virginia 22514

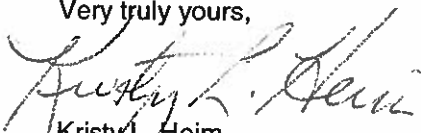
RE: Bid No. 10-191 Bulk Chemicals for Water and Wastewater Treatment

Dear Ms. Johnson:

Thank you for signing and returning the contract extension sent to you on May 2, 2011. Please note the dates of your extension were typed incorrectly. According to the contract Section VII, the original term began on July 1, 2010 and continued for a year. Therefore, the contract extension should have reflected the **contract extension period is from July 1, 2011 to June 30, 2012**. Please make the correction on your copy of the extension.

Should you have any questions, I can be contacted at the telephone number shown below.

Very truly yours,



Kristy L. Heim
Administrative Assistant

Enc. – A/S

cc: Daniel J. Guthrie, Procurement
Greg Bates, DPW/W&S/Sod Run
Talad Said, DPW/W&S/Abingdon

~ Preserving Harford's past; promoting Harford's future ~

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May 2, 2011

JCI Jones Chemicals, Inc.
Attn: Cortney Johnson, Sales Coordinator
16248 Industrial Drive
Milford, Virginia 22514

RE: Bid No. 10-191 Bulk Chemicals for Water and Wastewater Treatment

Dear Ms. Johnson:

The contract with your firm under the above-referenced bid expires on June 9, 2011. It contains a provision to extend the term for three (3) additional one (1) year periods at the same terms and conditions. Harford County wishes to exercise year one (1) of this option, extending the term from June 10, 2011 to June 9, 2012.

Please acknowledge by signing at the bottom of this page and return it to this office, along with one copy of the required Certificate of Insurance within ten (10) business days. Please have your insurer indicate the above referenced Harford County bid number on the certificate and name Harford County, Maryland, 220 S. Main Street, Bel Air, Maryland 21014 as an additional insured.

Signature must be that of the Corporation President, Vice President or CEO. If another individual signs, a Power of Attorney or other authorization must accompany the Contract delegating authority to that individual.

Should you have any questions, I can be contacted at the telephone number shown below.

Very truly yours,

Daniel J. Guthrie
Purchasing Agent

DJG:KLH/klh

Enc. - A/S

cc: Roy Miller, DPW/W&S/Sod Run

Signature

Cortney Johnson / Sales Coordinator
Name and Title (Print or Type)

May 10th 2011
Date

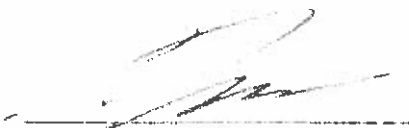
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JCI JONES CHEMICALS, INC.
CONSENT TO
SHAREHOLDER ACTION

January 12, 2011

I, the undersigned shareholder, being the holder of all shares of stock of the above company now outstanding, hereby resolve as follows:

RESOLVED, that all Corporate Officers generally, **Cortney Johnson**, Sales Coordinator, and **Michael Washington**, Branch Manager of JCI's Milford, Virginia facility are hereby authorized to submit and sign bids, contracts and other documents pertaining thereto of this Corporation, to municipalities and others for the sale of company products.



Jeffrey W. Jones
Chief Executive Officer & President

ATTEST

Zoraine Constantino



CERTIFICATE OF LIABILITY INSURANCE

Page 1 of 1
DATE (MM/DD/YYYY)
05/09/2011

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

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

PRODUCER Willis of Florida, Inc. 26 Century Blvd. P. O. Box 305191 Nashville, TN 37230-5191	CONTACT NAME:		
	PHONE (A/C NO. EXT): 877-945-7378	FAX (A/C NO.): 888-467-2378	
	E-MAIL ADDRESS: certificates@willis.com		
INSURED JCI Jones Chemicals Inc. 1819 Main Street Suite 1100 Sarasota, FL 34236	INSURER(S) AFFORDING COVERAGE		NAIC#
	INSURER A: Steadfast Insurance Company		26387-001
	INSURER B: Zurich American Insurance Company		27855-002
	INSURER C:		
	INSURER D:		
INSURER E:			
INSURER F:			

COVERAGES CERTIFICATE NUMBER: 15955875 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	ADD'L INSRD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	Y		BZL982905200	11/1/2010	1/1/2012	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 25,000
	<input checked="" type="checkbox"/> Pollution Included at \$50,000 Deductible						PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$ 2,000,000
<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY			BAP982905800	11/1/2010	1/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$
<input checked="" type="checkbox"/> \$10,000 Deductible							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A	WC982905600	11/1/2010	11/1/2011	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach Acord 101, Additional Remarks Schedule, if more space is required)
Re: Bid No. 10-191 Bulk Chemicals for Water and Wastewater Treatment.

It is agreed that Harford County, Maryland, 220 S. Main Street, Bel Air, Maryland 21014 is included as an Additional Insured as respects to General Liability.

CERTIFICATE HOLDER	CANCELLATION
Harford County Government Attn: Daniel Guthrie 220 S. Main Street Bel Air, MD 21014	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