
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

Mr. Mike Bulatovic
Bid Administration
PVS Minibulk, Inc.
10900 Harper Avenue
Detroit, Michigan 48213

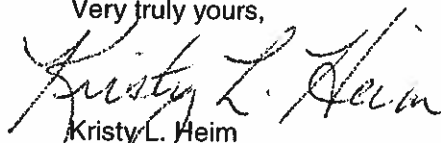
RE: Bid No. 10-191 Bulk Chemicals for Water and Wastewater Treatment

Mr. Bulatovic:

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 ~

ATTN: DAVE PHILLIPS

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 2, 2011

BID ADMINISTRATION

Ms. Carrie Myers
PVS Minibulk, Inc.
~~3215 Dovecote Drive~~ 10900 HARPER AVE
Quakertown, Pennsylvania 18951 ~~18951~~ Detroit, MI 48213

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

Dear Ms. Myers:

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
Daniel J. Guthrie
Purchasing Agent

DJG:KLH/klh

Enc. - A/S

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

Mike Bulatovic

Signature

MIKE BULATOVIC

Name and Title (Print or Type)

5/11/11

Date

Preserving Harford's past; promoting Harford's future

MY DIRECT PHONE NUMBER 410-638-3550 (410) 638-3550
220 SOUTH MAIN STREET, BEL AIR, MARYLAND 21014 • 410-638-3000 • 410-879-2000 • TTY: 410-638-3086 • www.harfordcountymd.gov
This document is available in alternative format upon request.

**CERTIFIED COPY OF RESOLUTIONS
OF BOARD OF DIRECTORS
OF PVS MINIBULK, INC.**

The undersigned, being the Secretary of PVS Minibulk, Inc., a Michigan corporation (the "Company"), certifies that the following is an accurate and complete copy of resolutions duly adopted by the Board of Directors of the Company, and that said resolutions remain in full force and effect as of the date of this certificate:

"RESOLVED, That the Company is authorized to submit bids to private and governmental entities for the sale of products and for the performance of services (collectively, 'Bids').

RESOLVED, That the Company is authorized to enter into contracts with private and governmental entities for the sale and purchase of products and for the performance of services (collectively, 'Contracts').

FURTHER RESOLVED, That the Company is authorized to submit applications for permits, licenses and other grants of authority from governmental entities which the Company requires to conduct its business (collectively, 'Applications').


FURTHER RESOLVED, That Milisav M. Bulatovic, Assistant Treasurer of the Company, shall be and is authorized to execute Bids, Contracts and Applications on behalf of the Company and such other documents relating to Bids, Contracts and Applications as he deems necessary or expedient for the purposes of carrying out the terms of the Bids, Contracts and Applications or otherwise conducting the business of the Company."

IN WITNESS OF THESE CERTIFIED RESOLUTIONS, the undersigned has signed below and affixed the corporate seal of the Company on June 17, 2010.



Jonathan S. Taub, Secretary

Subscribed and sworn to before me
on June 17, 2010.



Notary Public, Wayne County, Michigan

My Commission Expires: 9/4/2011

DEBRA J. THEODORE
Notary Public, Macomb County, Michigan
Acting in Wayne County
My Commission Expires September 4, 2011



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/18/2011

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 Ralph C. Wilson Agency, Inc 26026 Telegraph Suite 100 Box 5069 Southfield MI 48034		CONTACT NAME: Lisa Case PHONE (A/C No. Ext): (248) 355-1414 E-MAIL ADDRESS: lisac@rcwa.net PRODUCER CUSTOMER ID #: 00016161		FAX (A/C No.): (248) 304-0877
INSURED PVS Minibulk Inc. Pressure Vessel Services Inc. 10900 Harper Avenue Detroit MI 48213		INSURER(S) AFFORDING COVERAGE INSURER A: Amerisure Mutual Insurance NAIC # 23396 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** CL1131808292 **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			GL0125812	4/1/2011	4/1/2012	EACH OCCURRENCE \$ 1,500,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PERSONAL & ADV INJURY \$ 1,500,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 4,000,000	
A	AUTOMOBILE LIABILITY			CA1049675	4/1/2011	4/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$	
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$	
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$	
	<input type="checkbox"/> HIRED AUTOS						\$	
<input type="checkbox"/> NON-OWNED AUTOS			\$					
	UMBRELLA LIAB						EACH OCCURRENCE \$	
	EXCESS LIAB						AGGREGATE \$	
	DEDUCTIBLE						\$	
	RETENTION \$						\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC0764044	4/1/2011	4/1/2012	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		<input type="checkbox"/> Y <input type="checkbox"/> N	WC2075502 - WI	4/1/2011	4/1/2012	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 #10-91
 Certificate holder is added as Additional Insured (General Liability) with respect to work/services performed by Named Insured.

CERTIFICATE HOLDER**CANCELLATION**

Hartford County Maryland
 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

Steve Vannelli/LISACA