

**RESOLUTION 20-144**

**A RESOLUTION TO AWARD THE BID FOR THE SEALING AND  
RESTRIPING OF THE FISCHER PARK AT PORT ROYAL  
PARKING LOT**

**WHEREAS**, the City of Spring Hill recently renamed Port Royal Park to Fischer Park at Port Royal; and

**WHEREAS**, the City of Spring Hill desires to seal and restripe the parking lot of Fischer Park at Port Royal; and

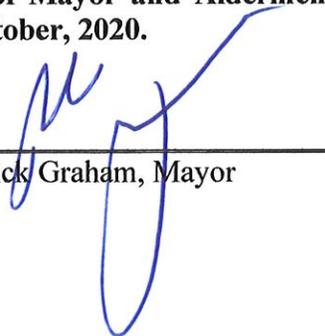
**WHEREAS**, the City publicly advertised for bids with a bid opening on September 22, 2020; and

**WHEREAS**, the Board of Mayor and Aldermen approved \$15,000 for this project in the FY '20/'21 budget; and

**WHEREAS**, American Stripers, LLC was the low bidder at \$11,500.00.

**NOW, THEREFORE BE IT RESOLVED**, that the City of Spring Hill, Board of Mayor and Aldermen awards the bid to American Stripers, LLC for the sealing and restriping of the parking lot at Fischer Park at Port Royal for \$11,500.00.

**Passed and adopted by the Board of Mayor and Aldermen of the City of Spring Hill, Tennessee on the 19<sup>th</sup> day of October, 2020.**

  
\_\_\_\_\_  
Rick Graham, Mayor

ATTEST:

  
\_\_\_\_\_  
April Goad, City Recorder

LEGAL FORM APPROVED:

  
\_\_\_\_\_  
Patrick Carter, City Attorney



**REQUEST:** *Approval of Resolution 20-144*

**SUBMITTED BY:** Kayce Williams, Director of Parks & Recreation

**DATE:** September 28, 2020

**RE:** The sealing and restriping of the parking lot at Fischer Park at Port Royal RFP

**ATTACHMENTS:** Resolution 20-144, RFP, Submitted Bids

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**PURPOSE:**

To award the bid for the sealing and restriping of the parking lot at Fischer Park at Port Royal to American Stripers, LLC for \$11,500.00

**BACKGROUND:**

Port Royal Park, now Fischer Park at Port Royal, was built in 2013. The striping in the parking lot has faded and the BOMA intended to have this project completed in the '19/'20 FY along with the restriping of Harvey Park. The project was not completed in FY '19/'20. BOMA approved to carry that project over to FY '20/'21 budget. BOMA increased the previously budgeted amount to \$15,000 to seal and restripe the parking lot at Fischer Park and put off the restriping of Harvey Park as it will be used as a staging area for heavy machinery during the construction of the Harvey Park Greenway. Staff put out the RFP and received bids from 5 companies. The low bidder was American Stripers, LLC at \$11,500.00 which is \$3,500 under budget.

**FINANCIAL IMPACT:**

Savings of \$3,500 for this project.

**STAFF RECOMMENDATION:**

Staff favorably recommends approval of Resolution 20-144 to accept the award.

**CITY OF SPRING HILL  
 PORT ROYAL PARK SEALING AND STRIPING  
 REQUEST FOR PROPOSALS  
 TUESDAY, SEPTEMBER 22, 2020  
 2:00 P.M.**

Please PRINT below indicating that you were present for the above referenced bid opening.

NAME	COMPANY	EMAIL ADDRESS
April Goad	City of Spring Hill	<a href="mailto:agoad@springhilltn.org">agoad@springhilltn.org</a>
Kayce Williams	City of Spring Hill	<a href="mailto:kwilliams@springhilltn.org">kwilliams@springhilltn.org</a>
Alan Herrington	American Stripers LLC	<a href="mailto:americanstripers@bellsouth.net">americanstripers@bellsouth.net</a>
<b>Bidders:</b>	<b>Bid Amount</b>	
American Stripers LLC	\$ 11,500.00	
Hargrove Sealing	\$ 24,300.00	
Line Pro Striping LLC	\$ 24,620.00	
Lone Star Paving	\$ 40,765.00	
Magic Marker Sealing & Striping	\$ 27,999.00	



## LEGAL NOTICE

### INVITATION TO SUBMIT PROPOSALS

The City of Spring Hill will accept quotations for the sealing and restriping of the parking lot and entrance roadway at Port Royal Park. Bidders shall submit sealed quotations in the format specified in the Invitation to Submit Quotations no later than 2:00 p.m. (CST), September 22, 2020 at which time bids will be publicly opened and read aloud. No bid may be withdrawn after the scheduled closing time for a period of 90 days. Bidding documents may be obtained at Spring Hill City Hall during regular business hours or [www.springhilltn.org](http://www.springhilltn.org). Quotations should be mailed or hand delivered to:

April Goad, City Recorder  
City of Spring Hill  
Sealing & Restriping of Port Royal Park / September 22, 2020 @ 2:00 p.m.  
199 Town Center Parkway (for hand delivery or courier services)  
P.O. Box 789 (for regular mailing services)  
Spring Hill, TN 37174

The City of Spring Hill will not discriminate in the purchase of all goods and services on the basis of race, color, religion, sex, national origin, age, disability or any other lawfully protected classification.

Verbal quotations or quotations received after the closing date will not be accepted. The City of Spring Hill reserves the right to reject any and all bids, to waive technicalities or informalities and to accept any bid deemed to be in the best interest of the City.

## **SECTION I - GENERAL INFORMATION**

- A. The City of Spring Hill desires to contract for the sealing and restriping of the parking lot at Port Royal Park located at 4285 Port Royal Road, Spring Hill, TN.
- B. Questions should be directed to Kayce Williams at [kwilliams@springhilltn.org](mailto:kwilliams@springhilltn.org)
- C. The City of Spring Hill reserves the right to reject any and all bids, to waive technicalities or informalities and to accept any bid deemed to be in the best interest of the City. Bids may not be withdrawn after scheduled closing time for a 90-day period.
- D. The bidder shall abide by and comply with the true intent of the specifications and not take advantage of any unintentional error or omission, but shall fully address the full intent and meaning of each aspect of the specifications.
- E. All forms shall be completed and included as an integral part of each bidder's proposal.
- F. Freight shall be paid by vendor and should be included in unit price bid.
- G. The City is a tax-exempt organization.
- H. Mail is delivered after 4:00 p.m. Monday through Friday.
- I. Site visits prior to bid opening are recommended.
- J. Award of contract will be based on price, warranty, and references.
- K. The City will provide a link to the original construction documents for Port Royal Park.

## **SECTION II - REQUIREMENTS**

Scope: The work covered by this item shall consist of the sealing and restriping of the existing parking lot and entrance roadway at Port Royal Park. Surface cleaning and preparation shall be included. The City will authorize preparation work in advance with the issuance of a Notice to Proceed issued by the Parks & Recreation Department. The chosen provider will complete the project within sixty (60) days of the notice to proceed.

- 1. The price quoted for cleaning, crack sealing, surface sealing, and restriping shall include all materials, equipment, labor, and all other items incidental to the project.
- 2. No bidder may withdraw a bid for a period of ninety (90) days after bids have been opened.
- 3. The right is reserved to reject any and all bids and to waive all technicalities in doing so.

compensation insurance policies.

9. PROOF OF INSURANCE - The contractor shall furnish the City with satisfactory proof for the insurance required.
10. SPRING HILL BUSINESS LICENSE - Subject to the exceptions enumerated hereinafter, persons subject to the Spring Hill Business Tax operating from an established place of business in one county who extend their operations into other counties and/or municipalities without establishing an office, headquarters or other place of business therein shall not be subject to the Spring Hill Business Tax in such other counties and/or municipalities. Tax on total receipts from all taxable sales shall be due to the county and municipality, if any, in which the established place of business is located. A new business license is \$15.00. If applicable, at license expiration, renewal is a percentage of the business total gross.

Excepted from the rule as stated in above paragraph are:

- (a) Persons with no established place of business in this state.
- (b) Contractors with taxable receipts of \$50,000 and out of state contractors.

### **SECTION III - SITE PREP, CRACK SEALER AND SEALANT REQUIREMENTS**

**Description.** This work shall consist of cleaning and filling existing longitudinal and transverse cracks, and sealing the entire paved parking area of Port Royal Park including the entrance roadway. Work shall be in accordance with current TDOT Standard Specifications, ADA specifications, and the Unified Development Code for the City of Spring Hill. Links to corresponding information are provided below. It is the responsibility of the bidder to view the site for measurements and existing conditions.

1. Site visits prior to bid submission are recommended.
2. Traffic control for cleaning, sealing and striping will be provided by contractor by using signage and personnel.
3. All cracks shall be thoroughly cleaned with high pressure, dry compressed air removing all vegetation, debris, moisture and foreign materials.
4. Large asphalt damage and/or potholes to be repaired by bidder prior to sealing.
5. Treat all oil spots with an oil spot primer.
6. Cracks shall be filled with an approved TDOT crack filler product and applied as recommended by the manufacturer of the material.
7. The sealant shall be an approved TDOT qualified product and applied as recommended by the manufacturer of the sealant and according to TDOT's Procedures for Pavement Sealers and Treatments. <https://www.tn.gov/tdot/materials-and-tests/research---product-evaluation-and-qualified-products-list.html>
8. Work to be completed in such a way that it will not shut down the entire parking area unless schedule would allow. Coordination and scheduling of work will be a priority due to the use of the park.

List 3 References from comparable projects within the past year.

Company Metropolitan development and housing agency  
Address 701 S. 6th St., Nashville, TN 37206  
Contact Name Rita James Phone (615) 252-8400  
Contract Value \$100,000.00

Company Lone Star Paving  
Address 104 Beasley Dr., Franklin, TN 37064  
Contact Name Stephan Garret Phone (615) 260-8030  
Contract Value \$1,000.00 - \$140,000.00

Company Wright Paving  
Address 372 Shelbyville Hwy, Fayetteville, TN 37334  
Contact Name David Carter Phone (931) 433-7938  
Contract Value \$500.00 - \$40,000.00

50-9-113. State and local government construction contracts.

- (a) Each employer with no less than five (5) employees receiving pay who contracts with the state or any local government to provide construction services or who is awarded a contract to provide construction services or who provides construction services to the state or local government shall submit an affidavit stating that such employer has a drug-free workplace program that complies with this chapter, in effect at the time of such submission of a bid at least to the extent required of governmental entities. Any private employer that certifies compliance with the drug-free workplace program, only to the extent required by this section, shall not receive any reduction in workers' compensation premiums and shall not be entitled to any other benefit provided by compliance with the drug-free workplace program set forth in this chapter. Nothing in this section shall be construed to reduce or diminish the rights or privileges of any private employer who has a drug-free workplace program that fully complies with this chapter. For purposes of compliance with this section, any private employer shall obtain a certificate of compliance with the applicable portions of the Drug-free Workplace Act from the department of labor and workforce development. No local government or state governmental entity shall enter into any contract or award a contract for construction services with an employer who does not comply with the provisions of this section.
- b) For the purposes of this section, "employer" does not include any utility or unit of local government. "Employer" includes any private company and/or corporation.
- (c) If it is determined that an employer subject to the provisions of this section has entered into a contract with a local government or state agency and such employer does not have a drug-free workplace pursuant to this section, such employer shall be prohibited from entering into another contract with any local government or state agency until such employer can prove compliance with the drug-free workplace program pursuant to this section. If the same employer again contracts with any local government or state agency and does not have a drug-free workplace program pursuant to this section, then such employer shall be prohibited from entering into another contract with any local government or state agency for not less than three (3) months from the date such violation was discovered and verified and shall be prohibited from entering into another contract until such employer complies with the drug-free workplace program pursuant to this section. If the same employer for a third time contracts with any local government or state agency and does not have a drug-free workplace program pursuant to this section, then such employer shall be prohibited from entering into another contract with any local government or state agency for not less than one (1) year from the date such violation was discovered and verified and shall be prohibited from entering into another contract until such employer complies with the drug-free workplace program pursuant to this section.
- (d) A written affidavit by the principal officer of a covered employer provided to a local government at the time such bid or contract is submitted stating that the employer is in compliance with this section shall absolve the local government of all further responsibility under this section and any liability arising from the employer's compliance or failure of compliance with the provisions of this section.

[Acts 2000, ch.918, §§ 1,2.]



CITY OF SPRING HILL

TITLE VI COMPLIANCE SURVEY

The City of Spring Hill intends to fully comply with the Tennessee Department of Transportation's policy regarding TITLE VI of the CIVIL RIGHTS ACT of 1964; 49 CFT, PART 21; related statutes and regulations to the end that no person shall be excluded from participation in or be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance from the U.S. Department of Transportation on the grounds of race, color, gender, age, disability or national origin.

Please complete the following information:

NAME OF COMPANY American Stripers, LLC

NAME OF OWNER/CONTRACTOR: Michael Sloan

ADDRESS OF OWNER/CONTRACTOR: 2405 Park Plus Dr.

COUNTY: Maury

TYPE OF SERVICES PROVIDED: Crack-fill, Sealcoat, and Pavement Markings

CONTRACT: \_\_\_\_\_

OWNER/CONTRACTOR  
(Race/Gender)

EMPLOYEES  
(Number in each category)

White Male	<u>  X  </u>
White Female	<u>          </u>
African-American Male	<u>          </u>
African-American Female	<u>          </u>
Hispanic Male	<u>          </u>
Hispanic Female	<u>          </u>
Native American Male	<u>          </u>
Native American Female	<u>          </u>
Asian-American Male	<u>          </u>
Asian-American Female	<u>          </u>
Other Male	<u>          </u>
Other Females	<u>          </u>

White Males	<u>  9  </u>
White Females	<u>          </u>
African-American Males	<u>          </u>
African-American Females	<u>          </u>
Hispanic Males	<u>          </u>
Hispanic Females	<u>          </u>
Native American Males	<u>          </u>
Native American Females	<u>  1  </u>
Asian-American Males	<u>          </u>
Asian-American Females	<u>          </u>
Other Males	<u>          </u>
Other Females	<u>          </u>



CITY OF SPRING HILL CONSTRUCTION CONTRACT  
CERTIFICATE OF NON-ILLEGAL IMMIGRANT USE

As Bidder, Contractor, or Subcontractor on City of Spring Hill Construction Project,

American Stripers, LLC

1. the undersigned states that he does not knowingly utilize the services of illegal immigrants in the performance of a contract for goods or services entered into with the City of Spring Hill;
2. and will not knowingly utilize the services of any subcontractor who will utilize the services of illegal immigrants in the performance of the contract;
3. If any person who contracts to supply goods or services to the City of Spring Hill or who submits a bid to contract to supply goods or services to the state or other state entities, is discovered to have knowingly utilized the services of illegal immigrants in the performance of the contract to supply goods or services to the City of Spring Hill, the City of Spring Hill shall declare that person to be prohibited from contracting for or submitting a bid for any contract to supply goods or services to the City of Spring Hill for a period of one (1) year from the date of discovery of the usage of illegal immigrant services in the performance of a contract to supply goods or services to the City of Spring Hill

Contractor's Name American Stripers, LLC

Date 09/22/2020

Signature  Michael Sloan  
Printed or typed name and title

Title Owner

**SECTION VI - SPECIFICATION COMPLIANCE**

Unless otherwise noted, all quotations for the sealing and restriping of Port Royal Park shall be in complete accordance with the specifications detailed herein.

Bidders shall note in the space provided below any exceptions or deviations in any way from the specifications of any section of this RFP. Bidders should provide complete detail of exceptions or deviations.

<u>Proposal Exceptions Section</u>	<u>Brief Description</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Attach extra sheet if needed.

By signature below, vendor acknowledges any quotation to be in full compliance with all aspects of each section of the RFP not noted above.

American Stripers, LLC  
COMPANY

(931) 381-6293  
FAX NUMBER

Michael Sloan  
REPRESENTATIVE NAME & TITLE

(931) 381-6292  
TELEPHONE NUMBER

  
SIGNATURE

Americanstripers@bellsouth.net  
E-MAIL ADDRESS

**SPRING HILL VENDOR SERVICES AGREEMENT (SAMPLE)**

THIS SERVICES AGREEMENT ("Agreement") is made by and between THE CITY OF SPRING HILL, TENNESSEE (the "City") and American Stripers, LLC ("Vendor") (collectively as "Parties"), and is entered into on Oct. 22, 2020, and is effective as of the Effective Date set forth herein.

RECITALS:

WHEREAS, the City requires services sealing and restriping that it cannot provide itself and desires to contract with a third-party independent contractor to provide said services for the City's benefit; and

WHEREAS, pursuant to state law, the City issued published a Request for Proposal (RFP) and Vendor submitted a bid; and

WHEREAS, the City has selected Vendor to provide the services it desires.

NOW, THEREFORE, in consideration of the foregoing facts and circumstances, the mutual covenants and promises contained herein and other good and valuable consideration, the receipt and sufficiency of which is acknowledged by each of the Parties, the Parties do hereby agree to the following:

1. EFFECTIVE DATE. The Effective Date of this Agreement shall be 10/22/2020.
2. TERM. The project shall be completed within two (2) months from the date of issuance of a Notice to Proceed by the City of Spring Hill. The parties may extend this Agreement in writing, with or without modification, as agreed upon by the Parties.
3. INSURANCE. Vendor shall maintain in full force and effect, during the entire term of this Agreement, liability insurance, along with commercial general liability, workers' compensation and automobile insurance, in the minimum limits set forth below, naming City as an additional insured, and shall provide to the City certificates of insurance upon reasonable request.
  - a. Commercial general liability, including premises-operations, products/completed operations, broad form property damage, blanket contractual liability, independent contractors, personal injury or bodily injury with a policy limit of not less than One Million Dollars (\$1,000,000), combined single limit, per occurrence;
  - b. Business automobile liability for owned vehicles, hired, and non-owned vehicles, with a policy limit of not less than One Million Dollars (\$1,000,000), combined single limit, per occurrence for bodily injury and property damage;
  - c. Workers' compensation insurance as required by the State of Tennessee. The Provider agrees to waive, and to obtain endorsements from its workers' compensation insurer waiving subrogation rights under its workers' compensation insurance policy against the City, its officers, agents, employees, and volunteers arising from work performed by Provider for the City and to require each of its subcontractors, if any, to do likewise under their workers' compensation insurance policies.
4. VENDOR RESPONSIBILITIES.
  - a. Provide all materials and labor for sealing and restriping of the parking lot at Port Royal Park as needed by the City

16. **APPLICABLE LAW.** This Agreement shall be governed by and construed in accordance with the laws of the State of Tennessee.
17. **FORCE MAJEURE.** The Parties shall not be liable to each other or be deemed to be in breach of this Agreement for any failure or delay in rendering performance arising out of causes beyond their respective reasonable control and without its fault or negligence. Such causes may include, but are not limited to, acts of God or the public enemy, terrorism, significant fires, floods, earthquakes, epidemics, quarantine restrictions, strikes, freight embargoes, or Governmental Authorities approval delays which are not caused by any act or omission by the parties, and unusually severe weather. The Parties agree to notify each other of the existence and nature of any delay.
18. **BINDING EFFECT.** This Agreement shall inure to the benefit of and shall be binding upon City and Vendor and their respective heirs, administrators, successors and assigns.
19. **SEVERABILITY.** In the event any provision of this Agreement or any instrument delivered in connection herewith shall be held invalid or unenforceable by any court of competent jurisdiction, such holding shall not invalidate or render unenforceable any other provisions hereof or thereof.
20. **NOTICES.** All notices or other communications hereunder shall be deemed sufficiently given and shall be deemed given when delivered by hand-delivery or mailed by first class, postage prepaid, registered or certified mail and addressed as follows:

If to Vendor: Allan Herrington  
PO Box 452  
Columbia, TN 38402

If to City: Mayor Rick Graham  
199 Town Center Parkway  
P.O. Box 789  
Spring Hill, TN 37174

Copy to: Patrick M. Carter, Esq.  
Middle Tennessee Law Group, PLLC  
d/b/a Wolaver, Carter & Heffington  
809 South Main Street, Suite 100  
Columbia, TN 38401

City and Vendor may, by notice given hereunder, designate from time to time any further or different addresses to which subsequent notices, certificates or other communications shall be sent.

21. **CAPTIONS.** The paragraph headings in this Agreement are for convenience only, and they form no part of this Agreement and shall not affect its interpretation.
22. **ENTIRE AGREEMENT.** This Agreement represents the entire agreement between Vendor and the City and supersedes all prior negotiations, representations and agreements either written or oral, unless otherwise expressly stated herein.
23. **PAYMENT OF EXPENSES; BREACH.** Each of the Parties to this Agreement shall pay his/her/its own expenses, costs and attorney's fees associated with the negotiation, preparation, execution and delivery of this Agreement and the documents related thereto and the consummation of the transactions contemplated herein. In the event of a breach in the performance of any of the provisions of this Agreement or any of the documents related



AMERSTR-01

LALTFILLISCH

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/1/2020

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 Nashville / AssuredPartners NL 840 Crescent Centre Drive, Suite 300 Franklin, TN 37067	CONTACT NAME: <b>Laura Altfillisch</b>
	PHONE (A/C, No, Ext): <b>(615) 301-2518 2518</b> FAX (A/C, No):
	E-MAIL ADDRESS: <b>laura.altfillisch@assuredpartners.com</b>
	INSURER(S) AFFORDING COVERAGE
	INSURER A : <b>Selective Insurance of South Carolina</b> NAIC # <b>19259</b>
	INSURER B : <b>BrickStreet Mutual Insurance Co</b> NAIC # <b>12372</b>
	INSURER C :
	INSURER D :
	INSURER E :
	INSURER F :

INSURED  
**American Stripers, LLC**  
2405 Park Plus Drive  
Columbia, TN 38401-4510

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			S2235571	9/9/2020	9/9/2021	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
							MED EXP (Any one person)	\$ 15,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC							\$
	OTHER:							\$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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			S2235571	9/9/2020	9/9/2021	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			S2235571	9/9/2020	9/9/2021	EACH OCCURRENCE	\$ 10,000,000
							AGGREGATE	\$ 10,000,000
								\$
	DED <input checked="" type="checkbox"/> RETENTION \$ 0							\$
B	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/A	WCB1029646	9/9/2020	9/9/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	\$ 1,000,000
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A	Install / Bldg Risk-			S2235571	9/9/2020	9/9/2021	Any One Location	10,000

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

CERTIFICATE HOLDER  PROOF OF COVERAGE	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 

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Michael Sloan</b></p> <p><b>2</b> Business name/disregarded entity name, if different from above <b>American Strippers, LLC.</b></p> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC    <input type="checkbox"/> C Corporation    <input type="checkbox"/> S Corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p> <p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: x-small;">(Applies to accounts maintained outside the U.S.)</p> <p><b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>2407 Park Plus Dr.</b></p> <p><b>6</b> City, state, and ZIP code <b>Columbia, TN 38401</b></p> <p><b>7</b> List account number(s) here (optional)</p> <p style="font-size: x-small;">Requester's name and address (optional)</p>
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**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>	<b>Employer identification number</b>
[ ] - [ ] - [ ]	20 - 1362515

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification Instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <b>Michael Sloan</b>	Date ▶ <b>1/9/2019</b>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.*