

Village of Orland Park, IL Independence Celebration Fireworks





OUR CORE VALUES



We produce each show with tireless dedication. We treat each employee, supplier, and regulator with respect. Individual and team initiative drives our company. Imaginative people are the core of our success. Insuring safety is our top priority. Great performances are our passion.

WHAT THIS MEANS FOR YOUR EVENT

You have a vision for your event and Pyrotecnico will work tirelessly to design a spectacular display to match that vision. Our staff has an unrivaled passion for what we do and that results in superior customer service, advanced display designs, and safe certified/licensed pyrotechnicians for your event.





PROPOSAL



Client: Village of Orland Park, IL

Event Dates: July 4, 2024 through July 4, 2026

Renewal Option Years: July 4, 2027 and July 4, 2028

23 - 25 Minute Highly Choreographed Pyro Musicals







Operating History:

In 1889, Constantino Vitale started his fireworks company in Pietramelara, Italy. In 1920, he immigrated to the United States through Ellis Island, making a home for his family and business in New Castle, PA - which would later become known as "The Fireworks Capital of America".

Constantino's son, Rocco Vitale Sr., began leading the expansion of the New Castle facilities - which were also briefly used to manufacture explosives for the U.S. Navy during World War II. Many of these buildings still stand today across the street from the 20,000 square-foot corporate headquarters.

Four generations of the Vitale family have grown Constantino's vision by training new staff in the old family ways, selecting the safest and most innovative products from global supplies, and creating millions upon millions of Oohs and Aahs on an annual basis.

Stephen Vitale, the great-grandson of Constantino, took the helm in the early 1990's by becoming President & CEO. It was at that time the company took the name "Pyrotecnico" to reflect its expanding technical proficients and variety of products that it uses to complement fireworks displays.







Operating History, Con't:

Since 1993, the company has gained global presence, performing more than 3,500 displays each year, employing almost 400 personnel. The variety of Pyrotecnico's creative offerings has also increased under Stephen's tenure. Pyrotecnico launched its live entertainment and touring division, Pyrotecnico FX, which offers clients a variety of displays and effects including flames, lasers, close proximate atmospheric effects such as confetti/streamers.

Pyrotecnico has created displays for events ranging from municipal/governmental celebrations, private events, athletic games/events, award shows, music festivals/concerts/tours, as well as film and television productions.

Stephen has assembled an incredibly passionate team of approximately 200 full-time and part-time employees and thousands of freelance technicians and drivers that rally behind Pyrotecnico's purpose - CREATING SAFE OOHS AND AAHS!

PYROTECNICO'S BACKGROUND

"While we've become one of the premier fireworks and special effects companies in the world, we cannot lose sight of what has gotten us here: a commitment to innovation that impacts audience visually and emotionally, attention to detail, listening to clients, and a serious regard for safety. We take pride in these skills and use them to provide the best possible display for each of our client's events."

- Stephen Vitale, Pyrotecnico President & CEO







Pyrotecnico's Key Personnel to Village of Orland Park, IL:

- Chris Liberatore, Executive VP of Fireworks + Midwest Regional Manager
 - cliberatore@pyrotecnico.com
 - Oversees all strategic, operational, and sales aspects of Pyrotecnico Fireworks, Inc.
- Riley Pakosz Account Manager
 - rpakosz@pyrotecnico.com | 219.393.9082
 - Spearheads our relationship with our clients, thus overseeing all display details
- Brandi Holland Associate Account Manager
 - bholland@pyrotecnico.com
 - Oversees all legal, financial, and insurance administrative aspects of displays
- Rich Brown Lead Fireworks Technician
 - Onsite point of contact, leading the load in, firing, and striking of displays while adhering to Pyrotecnico's and governmental strict safety requirements
 - Has been Pyrotecnico's Lead Fireworks Technician for the Village of Orland Park for the past 20 years (via the Village's relationship with Melrose Pyrotechnics, which was acquired by Pyrotecnico Fireworks, Inc. in the summer of 2021)
- Nina Elliot Assistant Lead Fireworks Technician
 - Works alongside Rich to load in, firing, and striking of displays while adhering to Pyrotecnico's and governmental strict safety requirements
 - Upon Rich's future retirement, Nina will take over as the Lead Fireworks Technician for the Village of Orland Park





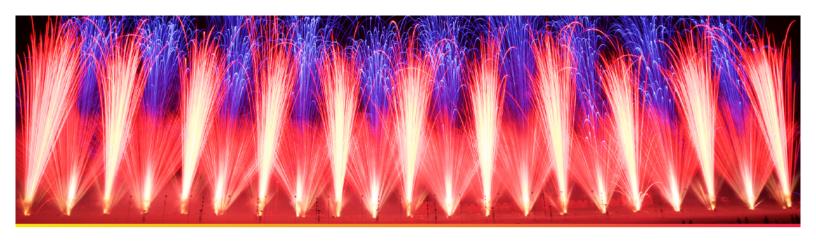


Display Content:

Pyrotecnico's proposed display complies with the specifications requested by the Village of Orland Park, IL in order to accomplish a top-tier fireworks production. The following proposal follows the guidelines set forth by the Village, including an all aerial display with no lower level items that may be visually obscured by tree lines. Additionally, the removal of 10" shells not only allows for a higher quantity of shells overall, but also provides more space for the event's overflow parking area to the north of the firing site.

Just as the Village of Orland Park deservingly prides itself on being one of the best places to live, Pyrotecnico's design team (with an in-house soundtrack producer) prides itself on unique awe-inspiring designs that leave our clients shinning in their audiences' eyes. The design team will work in tandem with the Village to ensure the display the soundtrack and design is approved prior to execution.





Opening Presentation

The Opening Presentation will start your display off "with a bang." A "mini-finale" will excite the crowd and get them energized for a great show.

| 17 | 2.5-inch Assorted Color Changing Star Shells |
|-----------|--|
| 45 | 3-inch Assorted Color Changing Star Shells |
| 32 | 4-inch Assorted Color Changing Star Shells |
| 26 | 5-inch Assorted Color Changing Star Shells |
| 14 | 6-inch Assorted Color Changing Star Shells |
| 02 | 8-inch Assorted Color Changing Star Shells |

Body

The majority of your display will be fired during the Body presentation. It will have a balanced pace with constant action. Radiant color combinations like Violet & Lemon, Aqua & Pink, and the always treasured Red, White, & Blue. Amazing effects such as Crossette, Twitter Glittering, Rings, and Color Changing Chrysanthemums will be mixed in to illuminate your skies!

67 2.5-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three, Five or Ten Shells per Flight

180 3-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three, Five or Ten Shells per Flight

128 4-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three or Six Shells per Flight

105 5-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three or Six Shells per Flight

56 6-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three or Six Shells per Flight

02 8-inch Assorted Aerial Display Shells

Note: Above shells will be individually fired or tied in combination flights of Two, Three or Six Shells per Flight



Your Grand Finale Presentation

The Grand Finale Presentations is the ultimate crowd pleaser and most exhilarating part of your display. When the sky erupts with Multi-Color Peonies and Thunderous Salutes, there is no better visual experience. They will end your event in style and leave the audience wanting more!

| 112 | 2.5-inch Assorted Color Changing Star Shells |
|-----------|--|
| <i>75</i> | 3-inch Assorted Color Changing Star Shells |
| 53 | 4-inch Assorted Color Changing Star Shells |
| 44 | 5-inch Assorted Color Changing Star Shells |
| 24 | 6-inch Assorted Color Changing Star Shells |
| 02 | 8-inch Assorted Color Changing Star Shells |



PROPOSAL SUMMARY SHEET

RFP #24-008

Pyro-Musical Fireworks

| Business Name: | Pyrotecnico Fire | eworks, Inc. | | |
|------------------------|------------------|---------------|--------------|--|
| Street Address: | 299 Wilson Roa | d | | |
| City, State, Zip: | New Castle, PA | 16101 | | |
| Contact Name: | Riley Pakosz | | | |
| Title: Account | Manager | | | |
| Phone: 219.393. | 9082 | Fax: | 724.652.1288 | |
| E-Mail address: | rpakosz@pyro | tecnico.cor | n | |
| | | Price Propose | <u> </u> | |

Please enter the total Price per year for computer choreographed, electronically fired, entirely aerial pyro musical firework production for July 4.

| Year | 2024 | 2025 | 2026* | 2027** | 2028** |
|-------------|-------------|-------------|-------------|-------------|-------------|
| Total Price | \$30,000.00 | \$30,000.00 | \$30,000.00 | \$32,000.00 | \$32,000.00 |

^{*}Per the proposal, a five (5%) percent per year product bonus will be added to the third year display

AUTHORIZATION & SIGNATURE

| Name c | of Authorized Signee: | Lynn am Hamed | | |
|---------|--------------------------|----------------|---------|------------------|
| Signatu | re of Authorized Signee: | Lynn Ann Hamed | <u></u> | |
| Title: | Corporate Secret | ary Da | te: | January 30, 2024 |

^{**} These years are option years to be exercised at the Village's discretion.

| The | undersigned Lynn Ann Hamed , as Corporate Secretary |
|-----|--|
| | (Enter Name of Person Making Certification) (Enter Title of Person Making Certification) |
| an | d on behalf of Pyrotecnico Fireworks, Inc. (Enter Name of Business Organization), certifies that: |
| 1) | BUSINESS ORGANIZATION: |
| | The Proposer is authorized to do business in Illinois: Yes [X] No [] |
| | Federal Employer I.D.#: 25-1700772 |
| | (or Social Security # if a sole proprietor or individual) |
| | The form of business organization of the Proposer is (check one): |
| | Sole Proprietor Independent Contractor (Individual) Partnership LLC Corporation Pennsylvania (State of Incorporation) February 18, 1993 (Date of Incorporation) |
| 2) | STATUS OF OWNERSHIP |
| | Illinois Public Act 102-0265, approved August 2021, requires the Village of Orland Park to collect "Status of Ownership" information. This information is collected for reporting purposes only. Please check the following that applies to the ownership of your business and include any certifications for the categories checked with the proposal. Business ownership categories are as defined in the Business Enterprise for Minorities, Women, and Persons with Disabilities Act, 30 ILCS 575/0.01 et seq. |
| | Minority-Owned [] Small Business [] (SBA standards) Women-Owned [] Prefer not to disclose [] Veteran-Owned [] Not Applicable [] Disabled-Owned [] |
| | How are you certifying? Certificates Attached [] Self-Certifying [] |
| | STATUS OF OWNERSHIP FOR SUBCONTRACTORS |
| | This information is collected for reporting purposes only. Please check the following that applies to the ownership of subcontractors. |
| | Minority-Owned [] Small Business [] (SBA standards) Women-Owned [] Prefer not to disclose [] Veteran-Owned [] Not Applicable ▼] Disabled-Owned [] |

The Proposer is eligible to enter into public contracts, and is not barred from contracting with any

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3) ELIGIBILITY TO ENTER INTO PUBLIC CONTRACTS: Yes [X] No []

unit of state or local government as a result of a violation of either Section 33E-3, or 33E-4 of the Illinois Criminal Code, or of any similar offense of "Bid-rigging" or "Bid-rotating" of any state or of the United States.

4) <u>SEXUAL HARASSMENT POLICY</u>: Yes [X] No []

Please be advised that Public Act 87-1257, effective July 1, 1993, 775 ILCS 5/2-105 (A) has been amended to provide that every party to a public contract must have a written sexual harassment policy in place in full compliance with 775 ILCS 5/2-105 (A) (4) and includes, at a minimum, the following information: (I) the illegality of sexual harassment; (II) the definition of sexual harassment under State law; (III) a description of sexual harassment, utilizing examples; (IV) the vendor's internal complaint process including penalties; (V) the legal recourse, investigative and complaint process available through the Department of Human Rights (the "Department") and the Human Rights Commission (the "Commission"); (VI) directions on how to contact the Department and Commission; and (VII) protection against retaliation as provided by Section 6-101 of the Act. (Illinois Human Rights Act). (emphasis added). Pursuant to 775 ILCS 5/1-103 (M) (2002), a "public contract" includes "...every contract to which the State, any of its political subdivisions or any municipal corporation is a party."

5) EQUAL EMPLOYMENT OPPORTUNITY COMPLIANCE: Yes [X No []

During the performance of this Project, Proposer agrees to comply with the "Illinois Human Rights Act", 775 ILCS Title 5 and the Rules and Regulations of the Illinois Department of Human Rights published at 44 Illinois Administrative Code Section 750, et seq. The

Proposer shall: (I) not discriminate against any employee or applicant for employment because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (II) examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any such underutilization; (III) ensure all solicitations or advertisements for employees placed by it or on its behalf, it will state that all applicants will be afforded equal opportunity without discrimination because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (IV) send to each labor organization or representative of workers with which it has or is bound by a collective bargaining or other agreement or understanding, a notice advising such labor organization or representative of the Vendor's obligations under the Illinois Human Rights Act and Department's Rules and Regulations for Public Contract; (V) submit reports as required by the Department's Rules and Regulations for Public Contracts, furnish all relevant information as may from time to time be requested by the Department or the contracting agency, and in all respects comply with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; (VI) permit access to all relevant books, records, accounts and work sites by personnel of the contracting agency and Department for purposes of investigation to ascertain compliance with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; and (VII) include verbatim or by reference the provisions of this Equal Employment Opportunity Clause in every subcontract it awards under which any portion of this Agreement obligations are undertaken or assumed, so that such provisions will be binding upon such subcontractor. In the same manner as the other provisions of this Agreement, the Proposer will be liable for compliance with applicable provisions of this clause by such subcontractors; and further it will promptly notify the contracting agency and the Department in the event any subcontractor fails or refuses to comply therewith. In addition, the Proposer will not utilize any subcontractor declared by the Illinois Human Rights Department to be ineligible for contracts or subcontracts with the State of Illinois or any of its political

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subdivisions or municipal corporations. Subcontract" means any agreement, arrangement or understanding, written or otherwise, between the Proposer and any person under which any portion of the Proposer's obligations under one or more public contracts is performed, undertaken or assumed; the term "subcontract", however, shall not include any agreement, arrangement or understanding in which the parties stand in the relationship of an employer and an employee, or between a Proposer or other organization and its customers. In the event of the Proposer's noncompliance with any provision of this Equal Employment Opportunity Clause, the Illinois Human Right Act, or the Rules and Regulations for Public Contracts of the Department of Human Rights the Proposer may be declared non-responsible and therefore ineligible for future contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations, and this agreement may be canceled or avoided in whole or in part, and such other sanctions or penalties may be imposed or remedies involved as provided by statute or regulation.

6) TAX CERTIFICATION: Yes [X] No []

Contractor is current in the payment of any tax administered by the Illinois Department of Revenue, or if it is: (a) it is contesting its liability for the tax or the amount of tax in accordance with procedures established by the appropriate Revenue Act; or (b) it has entered into an agreement with the Department of Revenue for payment of all taxes due and is currently in compliance with that agreement.

7) <u>AUTHORIZATION & SIGNATURE</u>:

I certify that I am authorized to execute this Certificate of Compliance on behalf of the Contractor set forth on the Proposal, that I have personal knowledge of all the information set forth herein and that all statements, representations, that the Proposal is genuine and not collusive, and information provided in or with this Certificate are true and accurate. The undersigned, having become familiar with the Project specified, proposes to provide and furnish all of the labor, materials, necessary tools, expendable equipment and all utility and transportation services necessary to perform and complete in a workmanlike manner all of the work required for the Project.

| ACKNOWLEDGED AND AGREED TO: | Lym am Hamed |
|-----------------------------|---------------------------------|
| | Signature of Authorized Officer |
| | Lynn Ann Hamed |
| | Name of Authorized Officer |
| | Corporate Secretary |
| | Title |
| | January 30, 2024 |
| | Date |

Form W-9

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

| | Pyrotecnico Fireworks, Inc 2 Business name/disregarded entity name, if different from above | o not leave this line blank. | | | | | | | _ | | | | |
|---|---|--|--|------------|-----------------|---------------|--|---------------|-------------|---------------|---------------|---------------------|--------------------|
| age 3. | Check appropriate box for federal tax classification of the person whose namfollowing seven boxes. | e is entered on line 1. Ch | eck only on | e 0 | f the | cert | ain e | ntitie | es, r | not i | ndivi | | only to ls; see |
| e. sq no sr | ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate | | | | | | instructions on page 3): Exempt payee code (if any) | | | | | | |
| Print or type. Specific Instructions on page | Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do no LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member is disregarded from the owner should check the appropriate box for the tax classification of its owner. | | | | | code (if any) | | | | | | | |
| Spe | Other (see instructions) ► 5 Address (number, street, and apt. or suite no.) See instructions. | | Requester | 's r | ame a | | | | | | | | |
| See : | 299 Wilson Road | | 20 | | | | | | | | | | |
| S | 6 City, state, and ZIP code | | | | | | | | | | | | |
| | New Castle, PA 16101 | | | | | | | | | | | | |
| | 7 List account number(s) here (optional) | | | | | | | | | | | | |
| Pai | Taxpayer Identification Number (TIN) | | | - | | | | | | | | | |
| the second second second | your TIN in the appropriate box. The TIN provided must match the name | ne given on line 1 to av | oid § | Soc | ial sec | curity | nur | nber | | | | | |
| back | up withholding. For individuals, this is generally your social security nunerat alien, sole proprietor, or disregarded entity, see the instructions for | nber (SSN). However, 1 Part I, later. For other | for a | | | | -[| | | - | | | |
| | es, it is your employer identification number (EIN). If you do not have a r | number, see How to ge | | _ | | | _ | | | L | | | |
| TIN, I | | | | - | oloyer | idor | tific | ation | nu | mhe | or | - | |
| | If the account is in more than one name, see the instructions for line 1 per To Give the Requester for guidelines on whose number to enter. | . Also see vvnat Name | and L | -111 | Jioyer | Tue | T | T | 1 | T | | | |
| IVUITI | tel 10 dive the nequester for guidelines of whose fulfiber to effect. | | | 2 | 5 | - - | 1 7 | 7 0 | | 0 | 7 | 7 | 2 |
| Par | t II Certification | | | | | | | | | | | | |
| | r penalties of perjury, I certify that: | | | | | | | | - | | | | |
| 2. I a Se | e number shown on this form is my correct taxpayer identification numl m not subject to backup withholding because: (a) I am exempt from bar rvice (IRS) that I am subject to backup withholding as a result of a failur longer subject to backup withholding; and | ckup withholding, or (b |) I have no | ot b | een n | otifi | ed b | v th | e In | nterr | nal F | Reve | enue at I am |
| 3. I a | m a U.S. citizen or other U.S. person (defined below); and | | | | | | | | | | | | |
| 4. Th | e FATCA code(s) entered on this form (if any) indicating that I am exem | pt from FATCA reporti | ng is corre | ct. | | | | | | | | | |
| you h acqui other | fication instructions. You must cross out item 2 above if you have been nave failed to report all interest and dividends on your tax return. For real essition or abandonment of secured property cancellation of debt, contribution interest and dividends. You are not required to sign the certification, to | tate transactions, item ons to an individual reti | 2 does not irement arr | ap and | ply. Fo emen | r me | ortga A), a | age i nd g | nter | rest erall | paid y, pa | d, aym | ents |
| Sig: | | | Date ► | J | an | ua | ry | 8, | 2 | 02 | 24 | | |
| Ge | neral Instructions | Form 1099-DIV (d funds) | lividends, i | nc | uding | tho | se fr | om | sto | cks | or i | muti | ual |
| Section | on references are to the Internal Revenue Code unless otherwise | Form 1099-MISC proceeds) | (various ty | /pe | s of ir | ncon | ne, p | orize | s, a | awa | rds, | org | gross |
| relate | re developments. For the latest information about developments and to Form W-9 and its instructions, sour as legislation enacted | | Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) | | | | | | | | | | |
| | they were published, go to www.irs.gov/FormW9. | • Form 1099-S (pro | | | | | | | | | ane | acti | onel |
| | pose of Form | • Form 1099-K (me | | | | | | | | | | | |
| An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer | | Form 1098 (home mortgage interest), 1098-E (student loan interest 1098-T (tuition) | | | | | erest), | | | | | | |
| | ification number (TIN) which may be your social security number), individual taxpayer identification number (ITIN), adoption | • Form 1099-C (car | | | andar | ma | nt 06 | 000 | uro | d n | ropo | rtid | |
| taxp (EIN) | ayer identification number (ATIN), or employer identification number, to report on an information return the amount paid to you, or other | Form 1099-A (acc Use Form W-9 o clies) to provide was | nly if you a | re | a U.S | | | | | | | | |
| retur | unt reportable on an information return. Examples of information ns include, but are not limited to, the following. rm 1099-INT (interest earned or paid) | alien), to provide you If you do not retu- be subject to backle later. | ırn Form V | V-9 | to the | e rec | ques nat is | ter v s ba | vith cku | a 7 ip w | ΠΝ, rithh | <i>you</i> ioldi | might ing, |

REFERENCES

Provide three (3) references for which your organization has performed similar work.

| Bidder's Name: Pyrotecnico Fireworks, Inc. | | | | | |
|--|--|--|--|--|--|
| | (Enter Name of Business Organization) | | | | |
| 1. ORGANIZATION | Village of North Aurora, IL | | | | |
| ADDRESS | 25 E State Sttreet, North Aurora, IL 60542 | | | | |
| PHONE NUMBER | 630-897-8226 | | | | |
| CONTACT PERSON | Natalie Stevens | | | | |
| YEAR OF PROJECT | 2023 | | | | |
| 2. ORGANIZATION | Village of Romeoville, IL | | | | |
| ADDRESS | 1050 W Romeo Road, #1050, Romeoville, IL 60446 | | | | |
| PHONE NUMBER | 815-886-6222 | | | | |
| CONTACT PERSON | Kelly Rajzer | | | | |
| YEAR OF PROJECT | 2023 | | | | |
| 3. ORGANIZATION | City of Eureka, IL | | | | |
| ADDRESS | 111 W Court Street, Eureka, IL 61530 | | | | |
| PHONE NUMBER | 309-467-2113 | | | | |
| CONTACT PERSON | Melissa Brown | | | | |

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YEAR OF PROJECT

2023



INSURANCE REQUIREMENTS

Please provide a policy Specimen Certificate of Insurance showing current coverage's along with this form

*Please find attached **Pyrotecnico** Fireworks, Inc. **Proof of Insurance -**Indicating all available coverage and limits

WORKERS' COMPENSATION & EMPLOYER LIABILITY

Full Statutory Limits - Employers Liability \$500,000 - Each Accident \$500,000 - Each Employee \$500,000 - Policy Limit

Waiver of Subrogation in favor of the Village of Orland Park

AUTOMOBILE LIABILITY (ISO Form CA 0001)

\$1,000,000 - Combined Single Limit Per Occurrence **Bodily Injury & Property Damage**

GENERAL LIABILITY (Occurrence basis) (ISO Form CG 0001)

\$1,000,000 - Combined Single Limit Per Occurrence **Bodily Injury & Property Damage** \$2,000,000 - General Aggregate Limit \$1,000,000 - Personal & Advertising Injury \$2,000,000 - Products/Completed Operations Aggregate Additional Insured Endorsements: (not applicable for Goods Only) ISO CG 20 10 or CG 20 26

and

CG 20 01 Primary & Non-Contributory

| Blanket Waiver of Subrogation in favor of the Village of Orland Park |
|---|
| — Bidikei Waivei of Sobiogalion in lavor of the village of Origina Fark |
| CG 20 37 Additional Insured – Completed Operations (provide if box is checked) |
| In addition to the above, please provide the following coverage, if box is checked. |
| LIABILITY UMBRELLA (Follow Form Policy) \$1,000,000 – Each Occurrence \$1,000,000 – Aggregate |
| \$2,000,000 – Each Occurrence \$2,000,000 – Aggregate |
| Other: \$4,000,000 - Each Occurence - Aggregate |
| EXCESS MUST COVER: General Liability, Automobile Liability, Employers' Liability |
| PROFESSIONAL LIABILITY \$1,000,000 Limit – Claims Made Form, Indicate Retroactive Date |
| \$2,000,000 Limit – Claims Made Form, Indicate Retroactive Date |
| Other: |
| Deductible not-to-exceed \$50,000 without prior written approval |
| BUILDERS RISK |
| Completed Property Full Replacement Cost Limits – Structures under construction |
| ENVIRONMENTAL IMPAIRMENT/POLLUTION LIABILITY |
| \$1,000,000 Limit for bodily injury, property damage and remediation costs |
| resulting from a pollution incident at, on or mitigating beyond the job site |
| CYBER LIABILITY |
| \$1,000,000 Limit per Data Breach for liability, notification, response, |
| credit monitoring service costs, and software/property damage |

Any insurance policies providing the coverages required of the Consultant, excluding Professional Liability, shall be specifically endorsed to identify "The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents as Additional Insureds on a primary/non-contributory basis with respect to all claims arising out of operations by or on behalf of the named insured." The required

Additional Insured coverage shall be provided on the Insurance Service Office (ISO) CG 20 10 or CG 20 26 endorsements or an endorsement at least as broad as the above noted endorsements as determined by the Village of Orland Park. Any Village of Orland Park insurance coverage shall be deemed to be on an excess or contingent basis as confirmed by the required (ISO) CG 20 01 Additional Insured Primary & Non-Contributory Endorsement. The policies shall also contain a Waiver of Subrogation in favor of the Additional Insureds in regard to General Liability and Workers' Compensation coverage. The certificate of insurance shall also state this information on its face. Any insurance company providing coverage must hold an A-, VII rating according to Best's Key Rating Guide. Each insurance policy required shall have the Village of Orland Park expressly endorsed onto the policy as a Cancellation Notice Recipient. Should any of the policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Permitting the contractor, or any subcontractor, to proceed with any work prior to our receipt of the foregoing certificate and endorsements shall not be a waiver of the contractor's obligation to provide all the above insurance.

Consultant agrees that prior to any commencement of work to furnish evidence of Insurance coverage providing for at minimum the coverages, endorsements and limits described above directly to the Village of Orland Park, 14700 S. Ravinia Avenue, Orland Park, IL 60462. Failure to provide this evidence in the time frame specified and prior to beginning of work may result in the termination of the Village's relationship with the contractor.

| ACCEPTED & AGREED THIS 30 DAY OF Januar | ry , 20 <mark>24</mark> |
|--|---------------------------------------|
| Signature | Authorized to execute agreements for: |
| Lynn Ann Hamed, Corporate Secretary | Pyrotecnico Fireworks, Inc. |
| Printed Name & Title | Name of Company |

*Upon Pyrotecnico Fireworks, Inc.'s award of bid, and once there is a fully executed Agreement in place, Pyrotecnico shall provide the specific COI and AIE documents accordingly



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/16/2023

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: | | | | | |
| Acrisure, LLC dba Britton Gallag One Cleveland Center, Floor 30 | | PHONE (A/C, No, Ext): 216-658-7100 | FAX (A/C, No): 216-658-7101 | | | | |
| 1375 East 9th Street | | E-MAIL ADDRESS: info@brittongallagher.com | | | | | |
| Cleveland OH 44114 | | INSURER(S) AFFORDING COVERAGE | NAIC # | | | | |
| | | INSURER A: Everest Indemnity Insurance Co. | 10851 | | | | |
| NSURED | 2299 | ınsurer в : Everest Denali Insurance Company | 16044 | | | | |
| Pyrotecnico Fireworks Inc. P.O. Box 149 | | INSURER c : Arch Speciality Ins Co | 21199 | | | | |
| 299 Wilson Road | | ואsurer ס : Continental Indemnity Company | 28258 | | | | |
| New Castle PA 16103 | | INSURER E : | | | | | |
| | | INSURER F: | | | | | |
| COVERAGES | CERTIFICATE NUMBER: 1199221210 | REVISION NUM | IBER: | | | | |

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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 | SR TYPE OF INSURANCE | | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|-------------|---|-----|-------------|-----------------|----------------------------|----------------------------|--|-----------------------------|
| Α | | | Υ | SI8ML00891-232 | 10/14/2023 | 10/14/2024 | | \$ 1,000,000 |
| | X COMMERCIAL GENERAL LIABILITY | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 500,000 |
| | CLAIMS-MADE X OCCUR | | | | | | MED EXP (Any one person) | \$ |
| | | | | | | | 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 | | | | | | | \$ |
| В | AUTOMOBILE LIABILITY | Υ | Y | SI8CA00141-232 | 10/14/2023 | 10/14/2024 | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| | X ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| | ALL OWNED SCHEDULED AUTOS | | | | | | , , | \$ |
| | X HIRED AUTOS X NON-OWNED AUTOS | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | | \$ |
| С | UMBRELLA LIAB X OCCUR | Υ | Υ | UXP1035252-04 | 10/14/2023 | 10/14/2024 | EACH OCCURRENCE | \$ 4,000,000 |
| | X EXCESS LIAB CLAIMS-MADE | | | | | | AGGREGATE | \$ 4,000,000 |
| | DED RETENTION \$ | | | | | | | \$ |
| D | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | Υ | 82-872096-04-37 | 10/14/2023 | 10/14/2024 | X WC STATU- TORY LIMITS OTH- ER | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | N/A | | | | | E.L. EACH ACCIDENT | \$ 1,000,000 |
| | (Mandatory in NH) | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 |
| Α | Excess Liability #2 | Y | Υ | SI8EX01314-232 | 10/14/2023 | 10/14/2024 | Each Occ/ Aggregate Total Limits | \$5,000,000 \$10,000,000 |
| | | | | | | | | ÷ . = , 300,000 |
| | | | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.

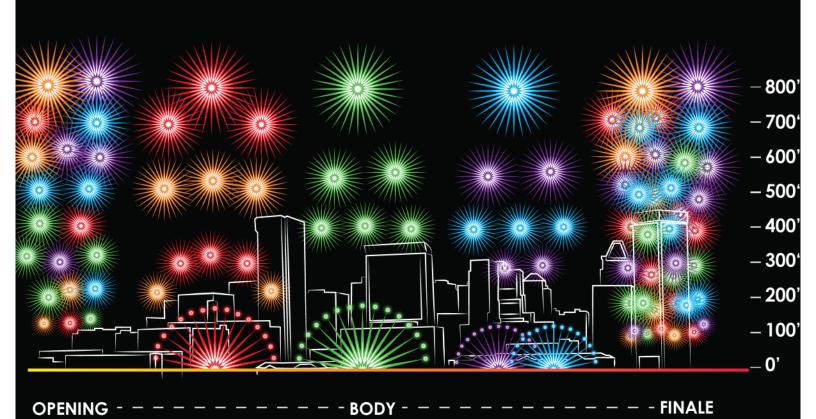
| CERTIFICATE HOLDER | CANCELLATION |
|--------------------|--|
| | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| Proof of Insurance | AUTHORIZED REPRESENTATIVE |
| | 90937 |



YOUR SHOW



We take pride in our ability to "layer" the sky with vivid surprises at varying heights and widths, painting the entire sky into beautiful scenes of color. Your show will be unique and precise, with a timeline that will include an opening mini-finale of bursts to kick off the display, followed by a body filled with unique scenes and special effect barrages, and concluding with a grand finale that will light up the sky like nothing your audience has ever seen!



*Maximum shell heights will vary for each individual display.

•On average, shells will reach 100' of elevation for every inch in shell diameter.

(Example: 2" shells will reach approximately 200' in elevation.)



AMPLIFYING EXCITEMENT SINCE 1889

UNMATCHED INNOVATION

Imaginative people are the core of our success, and our creative team is constantly raising the bar and scouring the globe for new technologies. You can rest assured that your display will be innovative and unforgettable in every aspect.

AWARD-WINNING DISPLAY DESIGN

Our creative team has won many international awards for our unique choreography and impeccable synchronicity, including the coveted Gold Jupiter award among others.

T E A M

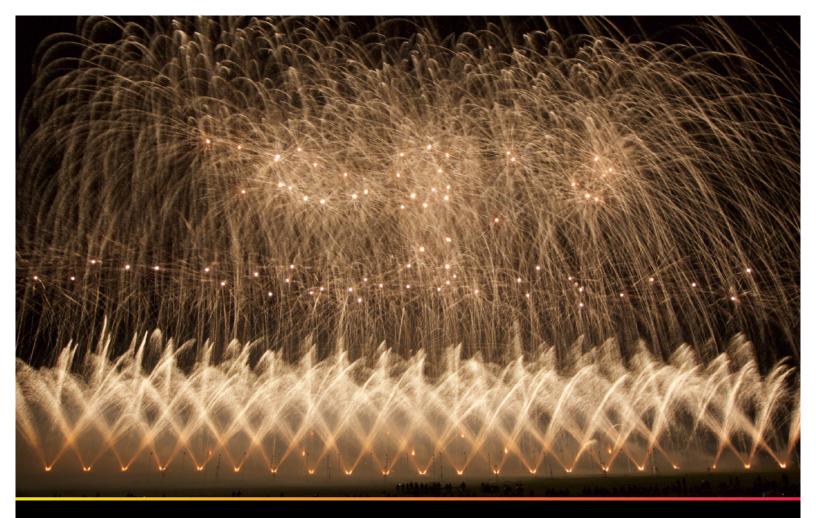
Our exceptional team will ensure that every aspect of your show is completely taken care of from permitting and safety regulations to show execution and clean up, so you can sit back and enjoy the time leading up to your exciting event. We will have the details under control every step of the way.

125 YEARS EXPERIENCE

We are bringing 125 years of experience to the table, giving us the knowledge and ability to use the absolute best technology, techniques, and the most innovative products with the utmost safety. We have lived and breathed fireworks and special effects for 125 years, and we will see your show through from concept to clean up.







THANK YOU

Thank you for the time and consideration that you have given us.

We recognize that your standards of excellence must be matched by the vendors that you select for any event. We are honored to have this opportunity to accomplish something spectacular for your organization, and will always strive to exceed expectations.

Pyrotecnico will work tirelessly throughout this process to ensure that every element of the program runs smoothly. From permitting and license paperwork, to design and choreography, to the safe operation of your display, we will endeavor to provide peace-of-mind throughout our partnership.

Thank you again and we look forward to hearing from you very soon.

Riley Pakosz | Account Manager rpakosz@pyrotecnico.com (Email) 219.393.9082 (Mobile)



