

* Original in
#330
2007 Agreements
file

Clerk's Contract and Agreement Cover Page

Year:	2008	Legistar File ID#:	2008-0058
Multi Year:	<input type="checkbox"/>	Amount	\$8,300.00
<hr/>			
Contract Type:	Addendum		
Contractor's Name:	AmCad Digital Conversion		
Contractor's AKA:			
Execution Date:	2/5/2008		
Termination Date:			
Renewal Date:			
Department:	Development Services/Building		
Originating Person:	Chris Krygowski		
Contract Description:	Digital File Conversion 2008 of Development Services Building Permits		



Wednesday, February 27, 2008



February 5, 2008

Ms. Mary Fishburn, Project Manager
AmCad Digital Conversion
1710 Whittemore St.
Rock Island, Illinois 61201

RE: NOTICE OF AWARD FOR DIGITAL FILE CONVERSION 2008

Dear Ms. Fishburn:

This notification is to inform you that on February 4, 2008, the Village of Orland Park Board of Trustees approved awarding AmCad Digital Conversion. the revised and renewed contract in accordance with the Scope of Work you submitted dated January 16, 2008 for the Digital File Conversion of Building Permits for Development Services.. **You must comply with the following conditions precedent within ten business days of the date of this Notice of Award, which is by February 18, 2008.**

1. Enclosed is the Addendum to the Agreement for Digital File Conversion 2008. Please sign two (2) copies and return them both directly to me. I will obtain signatures to fully execute the Addendum and one original executed Addendum will be returned to you.

Please deliver this information directly to me, Denise Domalewski, Contract Administrator, at Village Hall located at 14700 S. Ravinia Ave., Orland Park, IL 60462. The signed Addendum to the Agreement is required to be in place and received at my office prior to the commencement of work on this project. You will be issued a *Notice to Proceed* letter and a purchase order when you are in full compliance with this process. Failure to comply with these conditions within the time specified will entitle the Village to consider your proposal abandoned and to annul this Notice of Award. If you have any questions, please do not hesitate to call me at 708-403-6173 or e-mail me at ddomalewski@orland-park.il.us.

Sincerely,
Denise Domalewski
Contract Administrator

cc: Chris Krygowski

MAYOR
Daniel J. McLaughlin

VILLAGE CLERK
David P. Maher

14700 S. Ravinia Ave.
Orland Park, IL 60462
(708) 403-6100

February 27, 2008

Ms. Mary Fishburn, Project Manager
AmCad Digital Conversion
1710 Whittemore St.
Rock Island, Illinois 61201

RE: ***NOTICE TO PROCEED***
Digital File Conversion

Dear Ms. Fishburn:

This notification is to inform you that the Village of Orland Park has received all necessary addendum, certifications, and insurance documents in order for work to commence on the above stated project.

Please contact Chris Krygowski at 708-403-6222 to arrange the commencement of the work.

The Village will be processing a Purchase Order for this contract/service and it will be faxed to your company. It is imperative that this number on the Purchase Order be noted on all invoices, correspondence, etc. All invoices should be sent directly to the Accounts Payable Department at 14700 S. Ravinia Ave. Orland Park, IL 60462. Also, your final invoice for this contract/service should state that it is the final invoice pertaining to that Purchase Order.

For your records, I have enclosed one (1) original executed addendum dated February 5, 2008 in an amount not to exceed Eight Thousand Three Hundred and No/100 (\$8,300.00) Dollars. If you have any questions, please call me at 708-403-6173.

Sincerely,



Denise Domalewski
Contract Administrator

cc: Chris Krygowski
Judy Konow



VILLAGE HALL

TRUSTEES
Bernard A. Murphy
Kathleen M. Fenton
Brad S. O'Halloran
James V. Dodge
Edward G. Schussler III
Patricia Gira

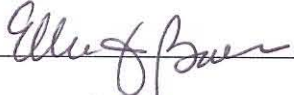
**ADDENDUM TO "DIGITAL FILE CONVERSION
AGREEMENT" DATED MAY 17, 2007 BETWEEN THE
VILLAGE OF ORLAND PARK, ILLINOIS ("VILLAGE")
AND AMCAD DIGITAL CONVERSION ("CONTRACTOR").**

1. In the event of any conflict or inconsistency between the provisions of this Addendum and the Agreement, the provisions of this Addendum shall control.
2. In **SECTION 1: THE CONTRACT DOCUMENTS:** of said Agreement, add the words "dated January 16, 2008" after "Scope of Work prepared by AmCad".
3. In **SECTION 2: SCOPE OF THE WORK AND PAYMENT:** of said Agreement, strike the words "25 boxes of".
4. In **SECTION 7: NOTICE:** of said Agreement, the words "Steven J Fiers, President" shall be stricken and replaced with "Mary Fishburn, Project Manager." The words stevef@adc-qc.com shall be stricken and replaced with mfishburn@amcad.com.
5. All of the other terms, covenants, representations and conditions of said Agreement, not deleted or amended herein shall remain in full force and effect during the effective term of said Agreement.
6. This Addendum may be executed in two or more counterparts, each of which taken together, shall constitute one and the same instrument.

This Addendum, made and entered into effective the 5th day of February, 2008, shall be attached to and form a part of the Agreement and shall take effect upon signature below by duly authorized agents of both parties.

AGREED AND ACCEPTED

FOR: THE VILLAGE


By: 

Print Name: Ellen J. Baer

Its: Interim Village Manager

Date: February 5, 2008

FOR: THE CONTRACTOR

By: 

Print Name: DALLAS M. WOLF

Its: CHIEF OPERATIONS OFFICER

CONTRACT

*Village of Orland Park,
Illinois*

Original

Prepared By:



AmCad Digital Conversion
1710 Whittemore St.
Rock Island, IL 61201
Tel.: 309-786-5800
Fax: 309-786-5900
maryf@adc-qc.com
www.AmCad.com

CONVERSION SERVICES

For

Village of Orland Park, IL

Signature/Date _____

Representative
Village of Orland Park

January 16, 2008

SCOPE OF WORK

Project – 2007 Development Files

Assumptions:

- Paper is various sizes (8.5" x 11" up to drawing size)
- Images will be scanned at 200 dpi
- Representing an estimated 25,000 images (22,125 small images and 2,875 drawing images)
- Each image will be delivered in a folder named street name, tiffs will be named sequentially from 00000001.tif and up
- No index file will be provided
- Images will be delivered as single-page tiffs

Cost:

- Prep & Post Prep: \$15 per hour
- Scanning:
 - Small paper: \$.05 per image
 - Plats & Drawings: \$1.25 per image
- DVD Master: \$70
- DVD Duplicate: \$55
- Pickup and Delivery included
- Shipping charges as incurred (for any media mailed or sent through a commercial carrier)
- \$.15 per pound destruction

Warranty Provisions

As part of our service and commitment to Village of Orland Park, AmCad Digital Conversion offers a thirty day warranty of post conversion support that begins after customer acceptance that the conversion has been completed. Post support means that we will correct any errors in the conversion for the thirty days provided the errors are a result of AmCad Digital Conversion's work. However, if the errors are a result of Village of Orland Park, AmCad Digital Conversion will submit pricing to assist in the correction of the errors.

AmCad Digital Conversion will work with the Village of Orland Park to execute a mutually agreed upon delivery of output and original materials immediately following conversion completion. In the event that material is still housed at the AmCad Digital Conversion site thirty days after delivery of the project output the original media will be

	<i>Contract for Conversion Services</i>
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disposed of in a confidential manner by shredding, stripping, pulverizing or other environmentally safe means. In addition, the electronic files stored on our network will be purged at this time.

Delivery Schedule

AmCad Digital Conversion will complete the project within sixty days of receipt of the materials. All billing for this project will done upon completion of the project.

BUSINESS ORGANIZATION:

_____ Sole Proprietor: An individual whose signature is affixed to this proposal.

_____ Partnership: Attach sheet and state full names, titles and address of all responsible principals and/or partners. Provide percent of ownership and a copy of partnership agreement.

X Corporation: State of incorporation:
Provide a disclosure of all officers and principals by name and business address, date of incorporation and indicate if the corporation is authorized to do business in Illinois.

In submitting this proposal, it is understood that the Village of Orland Park reserves the right to reject any or all proposals, to accept an alternate proposal, and to waive any informalities in any proposal.

In compliance with your Request for Proposals, and subject to all conditions thereof, the undersigned offers and agrees, if this proposal is accepted, to furnish the services as outlined.

American Cadastre, LLC (Corporate Seal)
Business Name d.b.a. AmCad Digital Conversion

 _____
Signature SHARON WOLF
Print or type name

COO _____ 12 Feb 2008
Title Date

Officers and principals:

Ron Cornelison
2125 Rampart Dr
Alexandria, VA 22308

Larry Herrman
220 Spring St
Herndon, VA 20170

Visagar Shyamsundar
220 Spring St
Herndon, VA 20170

Ryan Schoenfeld
220 Spring St
Herndon, VA 20170

James Brown
220 Spring St
Herndon, VA 20170

Tanya Ouzounova
220 Spring St
Herndon, VA 20170

Kevin Deely
220 Spring St
Herndon, VA 20170

Mike Battaglia
220 Spring St
Herndon, VA 20170

Sean Collins
220 Spring St
Herndon, VA 20170

Christine Delawder
15867 N Mountain Rd
Broadway, VA 22815

Brian Paap
220 Spring St
Herndon, VA 20170

Dallas Wolf
1710 Whittmore St
Rock Island, IL 61201

Dan Carlson
1710 Whittmore St
Rock Island, IL 61201

The company was incorporated in the State of Virginia on 1/17/01.

American Cadastre, LLC is authorized to do business in the State of Illinois.

**CERTIFICATION OF ELIGIBILITY
TO ENTER INTO PUBLIC CONTRACTS**

IMPORTANT: THIS CERTIFICATION MUST BE EXECUTED.

I, Dallas M. Wolf, being first duly sworn certify and say
that I am COO
(insert "sole owner," "partner," "president," or other proper title)

of American Cadastre, LLC d.b.a. AmCad Digital^{conversion}, the Prime Contractor
submitting this proposal, and that the Prime Contractor is not barred from contracting with any 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.

Dallas M. Wolf
Signature of Person Making Certification

Subscribed and Sworn To
Before Me This 12th Day
of February, 2008.

Nancy Gail Paulson
Notary Public



SEXUAL HARASSMENT POLICY

Please be advised that pursuant to 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 written sexual harassment policies that shall include, 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) and the Commission (Human Rights 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."

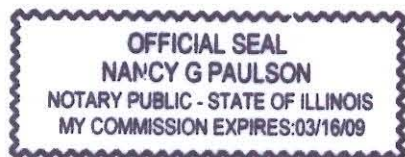
Dallas Wolf, having submitted a proposal for American Cadastre, LLC dba AmCad Digital Conversion (Name of Contractor) for Digital File Conversion (General Description of Work Proposed on) to the Village of Orland Park, hereby certifies that said contractor has a written sexual harassment policy in place in full compliance with 775 ILCS 5/2-105 (A) (4).

By: *Dallas Wolf*
Authorized Agent of Contractor

Subscribed and sworn to before
me this 12th day of February, 2008.

Nancy Gail Paulson

Notary Public



EQUAL EMPLOYMENT OPPORTUNITY

Section I. This EQUAL EMPLOYMENT OPPORTUNITY CLAUSE is required by the Illinois Human Rights Act and the Rules and Regulations of the Illinois Department of Human Rights published at 44 Illinois Administrative Code Section 750, et seq.

Section II. In the event of the Contractor'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 (hereinafter referred to as the Department) the Contractor 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.

During the performance of this Agreement, the Contractor agrees:

A. That it will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin or ancestry; and further that it will examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any such underutilization.

B. That, if it hires additional employees in order to perform this Agreement, or any portion hereof, it will determine the availability (in accordance with the Department's Rules and Regulations for Public Contracts) of minorities and women in the area(s) from which it may reasonably recruit and it will hire for each job classification for which employees are hired in such a way that minorities and women are not underutilized.

C. That, in 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.

D. That it will 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.

E. That it will 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.

F. That it will 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.

G. That it will 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 Vendor 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 Vendor 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 subdivisions or municipal corporations.

Section III. For the purposes of subsection G of Section II, "subcontract" means any agreement, arrangement or understanding, written or otherwise, between the Vendor and any person under which any portion of the Vendor'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 Vendor or other organization and its customers.

ACKNOWLEDGED AND AGREED TO:

BY: 

ATTEST: Nancy Dale Paulson

DATE: 12 Feb. 2008

TAX CERTIFICATION

I, Dallas Wolf, having been first duly sworn
depose and state as follows:

I, Dallas Wolf, am the duly
authorized

agent for American Cadastre, LLC d.b.a. AmCad,
which has Digital Conversion

submitted a proposal to the Village of Orland Park for

Digital File Conversion and I hereby certify
(Name of Project)

that American Cadastre, LLC is not

delinquent 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

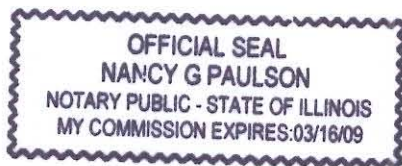
b. it has entered into an agreement with the Department of
Revenue for payment of all taxes due and is currently in
compliance with that agreement.

By: [Signature]

Title: COO

Subscribed and Sworn to
Before me this 12th
Day of February, 2008

Nancy Gail Paulson



REFERENCES

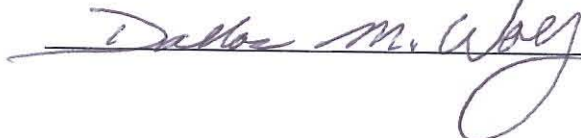
(Please type)

ORGANIZATION City of West Chicago
ADDRESS 475 Main St, PO Box 488
CITY, STATE, ZIP West Chicago, IL 60185
PHONE NUMBER 630-293-2200
CONTACT PERSON JoAnne Katchbrenner
DATE OF PROJECT July 2007

ORGANIZATION City of Bettendorf
ADDRESS 4403 Devils Glen Rd
CITY, STATE, ZIP Bettendorf, IA 52722
PHONE NUMBER 563-344-4068
CONTACT PERSON Kevin Lannan
DATE OF PROJECT May 2006

ORGANIZATION Village of Wayne
ADDRESS PO Box 532
CITY, STATE, ZIP Wayne, IL 60184
PHONE NUMBER 630-584-3090
CONTACT PERSON Laura Shephard
DATE OF PROJECT May 2006

Proposer's Name: Dallas Wolf

Signature: 

INSURANCE REQUIREMENTS

WORKERS COMPENSATION & EMPLOYER LIABILITY

\$500,000 – Each Accident

\$500,000 – Policy Limit

\$500,000 – Each Employee

Waiver of Subrogation in favor of the Village of Orland Park

AUTOMOBILE LIABILITY

\$1,000,000 – Combined Single Limit

GENERAL LIABILITY (Occurrence basis)

\$1,000,000 – Each Occurrence

\$2,000,000 – General Aggregate Limit

\$1,000,000 – Personal & Advertising Injury

\$2,000,000 – Products/Completed Operations Aggregate

Waiver of Subrogation in favor of the Village of Orland Park

EXCESS LIABILITY (Umbrella-Follow Form Policy)

\$2,000,000 – Each Occurrence

\$2,000,000 – Aggregate

EXCESS MUST COVER: General Liability, Automobile Liability, Workers Compensation

Any insurance policies providing the coverages required of the Contractor shall be **specifically endorsed** to identify **“The Village of Orland Park, and their respective officers, trustees, directors, employees 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.”** If the named insureds have other applicable insurance coverage, that coverage shall be deemed to be on an excess or contingent basis. The policies shall also contain a **“Waiver of Subrogation in favor of the Additional Insureds in regards to General Liability and Workers Compensation coverage’s.”** The certificate of insurance shall also state this information on its face. Certificates of insurance must state that the insurer shall provide the Village with thirty (30) days prior written notice of any change in, or cancellation of required insurance policies. The words **“endeavor to”** and **“, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives”** must be stricken from all Certificates of Insurance submitted to the Village. Any insurance company providing coverage must hold an A VII rating according to Best’s Key Rating Guide. Permitting the contractor, or any subcontractor, to proceed with any work prior to our receipt of the foregoing certificate and endorsement however, shall not be a waiver of the contractor’s obligation to provide all of the above insurance.

The proposer agrees that if they are the selected contractor, within ten days after the date of notice of the award of the contract and prior to the commencement of any work, you will furnish evidence of Insurance coverage providing for at minimum the coverages and limits described above directly to the Village of Orland Park, Denise Domalewski, Contract Administrator, 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 selected proposer and the contract may be awarded to another proposer.

ACCEPTED & AGREED THIS 12 DAY OF Feb, 2008

Signature

Dallas M. Wolf
Printed Name & Title

Authorized to execute agreements for:

American Cadastre LLC

Name of Company d.b.a. AmCad Digital Conversion

ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY)
02/13/2008

PRODUCER (301) 320-5800
WALLACE & WALLACE
 INSURANCE AGENCY, INC.
 4701 SANGAMORE ROAD, S125
 BETHESDA MD 20816-

INSURED
AMERICAN CADASTRE, LLC
 2125 Rampart Dr.
 Alexandria VA 22308-

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.


INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: HARTFORD Casualty Ins	
INSURER B: HARTFORD INS COMP OF MID	
INSURER C: NUTMEG INS COMPANY	
INSURER D: HARTFORD FIRE INSURANCE	
INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CONTRACTUAL GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	42 SBQ VK6820	01/01/2008	01/01/2009	EACH OCCURRENCE	\$ 1,000,000
				/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
				/ /	/ /	MED EXP (Any one person)	\$ 10,000
				/ /	/ /	PERSONAL & ADV INJURY	\$ 1,000,000
				/ /	/ /	GENERAL AGGREGATE	\$ 2,000,000
				/ /	/ /	PRODUCTS - COM/POP AGG	\$ 2,000,000
B		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	42 UEQ TA1967	06/06/2007	06/06/2008	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
				/ /	/ /	BODILY INJURY (Per person)	\$
				/ /	/ /	BODILY INJURY (Per accident)	\$
				/ /	/ /	PROPERTY DAMAGE (Per accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO		/ /	/ /	AUTO ONLY - EA ACCIDENT	\$
				/ /	/ /	OTHER THAN AUTO ONLY: EA ACC	\$
				/ /	/ /	AGG	\$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$10,000	42 SBQ VK6820	01/01/2008	01/01/2009	EACH OCCURRENCE	\$ 2,000,000
				/ /	/ /	AGGREGATE	\$ 2,000,000
				/ /	/ /		\$
				/ /	/ /		\$
				/ /	/ /		\$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	42 WEQ NL4286	06/06/2007	06/06/2008	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS	OTHER
				/ /	/ /	E.L. EACH ACCIDENT	\$ 1,000,000
				/ /	/ /	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
				/ /	/ /	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
C		OTHER PROFESSIONAL LIABILITY	00 TE 0224933 07	06/06/2007	06/06/2008	EACH OCCURRENCE	2,000,000
				/ /	/ /	ANNUAL AGGREGATE	2,000,000
				/ /	/ /	RETENTION	50,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 The Village of Orland Park, and their respective officers, trustees, directors, employees and agents are additional insureds on the general liability policy. A waiver of subrogation applies on the general liability policy. Coverage on the general liability policy is primary and non-contributory.

CERTIFICATE HOLDER	CANCELLATION
() - () - Attn: Denise Domalewski Village of Orland Park Contract Administrator 14700 S. Ravina Ave Orland Park IL 60462-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 

IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.