

SECOND AMENDMENT OF PARKING ENFORCEMENT/SERVICES CONTRACT

THIS SECOND AMENDMENT of Parking Enforcement / Services Contract (this "Second Amendment) is made and entered in to between the **CITY OF GREAT FALLS, MONTANA**, a municipal corporation organized and existing under the laws of the State of Montana, P.O. Box 5021, Great Falls, Montana 59403-5021, hereinafter referred to as "City," and **SP PLUS CORPORATION**, a Delaware Corporation *f/k/a* Standard Parking Corporation, hereinafter referred to as "Contractor."

RECITALS

WHEREAS, the City and Contractor are parties to a certain Parking Enforcement / Services Contract dated January 4, 2011, as amended by a First Amendment of Parking Enforcement / Services Contract dated January 1, 2014 (the "First Amendment") (as so amended, the "Agreement") pursuant to which Contractor has managed the City's Parking Program, all as more fully set forth in the Agreement; and

WHEREAS, the City and Contractor desire to renew the term of the Agreement and to modify certain provisions therein, all upon the terms and conditions set forth in this Second Amendment.

NOW THEREFORE, in consideration of the mutual covenants and agreements herein contained, the receipt and sufficiency whereof being hereby acknowledged, the parties hereto agree as follows:

1. **Purpose:** City agrees to extend the Agreement by this reference, which is made a part hereof.

2. **Term of Agreement:** This Second Amendment is effective upon the date of its execution and the Agreement shall be extended through December 31, 2019 (the "Second Extended Term"). The Agreement may be canceled by the City at any time that it is determined that the required services are not being provided by giving the Contractor thirty (30) days prior written notice of cancellation of the Agreement. In addition, either party may cancel the Agreement, without cause, by giving written notice of cancellation at least sixty (60) days prior to June 30 of any given year.

3. **Scope of Work:** Contractor will perform the work and provide the services in accordance with the requirements of the Agreement and according to Exhibit A attached hereto and incorporated herein.

4. **Payment:** City agrees to pay Contractor the total of the following:

a) A fee (the "Management Fee") of \$57,881 during calendar year 2017, which shall be paid in equal monthly installments of \$4,823.41. On January 1, 2018 and each anniversary year thereafter, for so long as the Agreement shall remain in effect (including any

renewal beyond the Second Extended Term), the Management Fee shall increase by five percent (5%) over the Management Fee in effect during the preceding calendar year;

b) Reimbursements and charges for certain payroll and other expenses, including the actual commercially reasonable documented expenses for the routine tasks listed in Exhibit A, incurred by Contractor in the provision of the services. The categories of expenses subject to reimbursement by the City are set forth in the pro forma of estimated expenses which is attached hereto and made a part thereof as Exhibit B;

c) Fees or expense reimbursements which the parties may mutually agree upon as contemplated in Section 3 of this Second Amendment.

All expenses under the foregoing Subsections (b) and (c) shall be deemed "Operating Expenses".

To the extent that there is any conflict between this Section 4 and any terms in the First Amendment, the terms of this Section 4 shall prevail.

5. Independent Contractor Status: The parties agree that Contractor is an independent contractor for purposes of the Agreement and is not to be considered an employee of the City for any purpose. Contractor is not subject to the terms and provisions of the City's personnel policies handbook and may not be considered a City employee for workers' compensation or any other purpose. Contractor is not authorized to represent the City or otherwise bind the City in any dealings between Contractor and any third parties.

Contractor shall comply with the applicable requirements of the Workers' Compensation Act, Title 39, Chapter 71, MCA, and the Occupational Disease Act of Montana, Title 39, Chapter 71, MCA. Contractor shall maintain workers' compensation coverage for all members and employees of Contractor's business, except for those members who are exempted by law.

Contractor shall furnish the City with copies showing one of the following: (1) a binder for workers' compensation coverage by an insurer licensed and authorized to provide workers' compensation insurance in the State of Montana; or (2) proof of exemption from workers' compensation granted by law for independent contractors.

6. Indemnification: To the fullest extent permitted by law, Contractor shall fully indemnify, defend, and save City, its agents, representatives, employees, and officers harmless from and against any and all claims, actions, costs, fees, losses, liabilities or damages of whatever kind or nature arising from or related to Contractor's performance of the Agreement and Contractor's work on the Project or work of any subcontractor or supplier to Contractor.

7. Insurance: Contractor shall purchase and maintain insurance coverage as set forth below. The insurance policy must name the City, (including its elected or appointed officers, officials, employees, or volunteers), as an additional insured and be written on a "primary—noncontributory basis, and on an occurrence, not a claims made basis." Contractor will provide the City with applicable additional insured endorsement documentation substantially similar or identical to the example set forth below. Each coverage shall be obtained from an

insurance company that is duly licensed and authorized to transact insurance business and write insurance within the state of Montana, with a minimum of "A.M. Best Rating" of A-, VI, as will protect the Contractor, the various acts of subcontractors, the City and its officers, employees, agents, and representatives from claims for bodily injury and/or property damage which may arise from operations and completed operations under the Agreement. All insurance coverage shall remain in effect throughout the term of the Agreement. All insurance policies must contain a provision or endorsement that the coverage afforded will not be canceled, materially changed, or renewal refused until at least thirty (30) days prior written notice has been given to Contractor, City, and all other additional insureds to whom a certificate of insurance has been issued. All insurance documentation shall be in a form acceptable to the City.

Insurance Coverage at least in the following amounts is required:

1.	Commercial General Liability (bodily injury and property damage)	\$1,000,000 per occurrence \$2,000,000 aggregate
2.	Products and Completed Operations	\$2,000,000
3.	Automobile Liability	\$1,000,000 combined single limit
4.	Workers' Compensation	Not less than statutory limits
5.	Employers' Liability	\$1,000,000
6.	Professional Liability (E&O) (only if applicable)	\$1,000,000 per occurrence \$2,000,000 aggregate

Contractor may provide applicable excess or umbrella coverage to supplement Contractor's existing insurance coverage, if Contractor's existing policy limits do not satisfy the coverage requirements as set forth above. Additional Insured Endorsement Example from Contractor is attached hereto as Exhibit C.

8. Professional Service: Contractor agrees that all services and work performed hereunder will be accomplished in a professional manner.

9. Compliance with Laws: Contractor agrees to comply with all federal, state and local laws, ordinances, rules and regulations, including the safety rules, codes, and provisions of the Montana Safety Act in Title 50, Chapter 71, MCA. As applicable, Contractor agrees to purchase a City safety inspection certificate or special business license.

10. Nondiscrimination: Contractor agrees that all hiring by Contractor of persons performing this Agreement will be on the basis of merit and qualification and will not discriminate on the basis of race, color, religion, creed, political ideas, sex, age, marital status, physical or mental disability, national origin, or other class protected by state and/or federal law.

11. Default and Termination: If either party fails to comply with any condition of this Agreement at the time or in the manner provided for, the other party, at its option, may terminate this Agreement and be released from all obligations if the default is not cured within ten (10) days after written notice is provided to the defaulting party. Said notice shall set forth

the items to be cured. Additionally, the non-defaulting party may bring suit for damages, specific performance, and any other remedy provided by law. These remedies are cumulative and not exclusive. Use of one remedy does not preclude use of the others. Notices shall be provided in writing and hand-delivered or mailed to the parties at the addresses set forth in the first paragraph of this Agreement.

12. **Modification and Assignability:** This document contains the entire agreement between the parties and no statements, promises or inducements made by either party or agents of either party, which are not contained in this written Agreement, may be considered valid or binding. This Agreement may not be enlarged, modified or altered except by written agreement signed by both parties hereto. The Contractor may not subcontract or assign Contractor's rights, including the right to compensation or duties arising hereunder, without the prior written consent of City. Any subcontractor or assignee will be bound by all of the terms and conditions of this Second Amendment.

13. **Ownership and Publication of Materials:** All reports, information, data, and other materials prepared by the Contractor pursuant to the Agreement are the property of the City. The City has the exclusive and unrestricted authority to release, publish or otherwise use, in whole or part, information relating thereto. Any re-use without written verification or adaptation by the Contractor for the specific purpose intended will be at the City's sole risk and without liability or legal exposure to the Contractor. No material produced in whole or in part under this Agreement may be copyrighted or patented in the United States or in any other country without the prior written approval of the City.

14. **Liaison:** City's designated liaison with Contractor is Craig Raymond and Contractor's designated liaison with City is Greg Hoffman.

15. **Applicability:** This Second Amendment shall be governed and construed in accordance with the laws of the State of Montana.

16. **Binding:** This Second Amendment and all of the covenants hereof shall inure to the benefit and be binding upon the City of Great Falls and the Contractor respectively and their partners, successors, assigns and legal representatives. Neither the City nor the Contractor shall have the right to assign, transfer or sublet their interest or obligations hereunder without written consent of the other party.

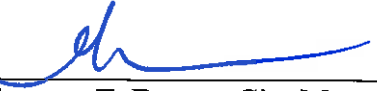
17. **Amendments:** Any amendment or modification of this Second Amendment or any provisions herein shall be made in writing and executed in the same manner as this original document and shall after execution become a part of the Agreement.


SIGNATURE PAGE TO FOLLOW

IN WITNESS WHEREOF, Contractor and City have caused this Second Amendment to be executed and intend to be legally bound thereby as of the date set forth below.

CITY OF GREAT FALLS, MONTANA

CONTRACTOR

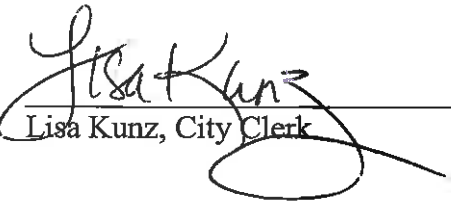
By 
Gregory T. Doyon, City Manager

By 
Christopher B. Conley
Senior Vice President

Date 11/2/17

Date December 13, 2016

ATTEST:


Lisa Kunz, City Clerk



* APPROVED AS TO FORM:

By 
Sara R. Sexe, City Attorney

* By law, the City Attorney may only advise or approve contract or legal document language on behalf of the City of Great Falls, and not on behalf of other parties. Review and approval of this document was conducted solely from the legal perspective, and for the benefit, of the City of Great Falls. Other parties should not rely on this approval and should seek review and approval by their own respective counsel.

Exhibit A

Contractor will continue routine tasks it currently performs.

Routine tasks Contractor would do that the City does now:

- Snow removal services and contracting.
- Contracting for and maintenance of Parking Management Software

Routine tasks that City would continue to do:

- Intake of parking ticket payments and processing collections procedures as needed.
- Issuance of certain parking passes and permits.
- Signs are not on the above list at this time because we have an efficient, affordable way of obtaining the signs that we need from time to time through Public Works. We can always add signs to Contractor's responsibilities if necessary.

Flexibility

The City may ask Contractor to undertake other tasks in the management and maintenance of the parking system, each additional task to be separately negotiated.

Exhibit B

(Attach Pro Forma of Estimated Expenses)

Exhibit B

Great Falls Garage and Meter Services

OPERATING EXPENSES	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	YEAR 6
				Option	Option	Option
Management Fee	\$ 50,000	\$ 52,500	\$ 55,125	\$ 57,881	\$ 60,775	\$ 63,814
Wages	\$ 184,123	\$ 189,647	\$ 195,336	\$ 201,196	\$ 207,232	\$ 213,449
Salaries	\$ 46,319	\$ 47,709	\$ 49,140	\$ 50,614	\$ 52,132	\$ 53,696
Total Payroll	\$ 230,442	\$ 237,355	\$ 244,476	\$ 251,810	\$ 259,365	\$ 267,145
P/R Tax - FICA	\$ 17,321	\$ 17,841	\$ 18,376	\$ 18,927	\$ 19,495	\$ 20,080
P/R Tax - SUTA	\$ 2,851	\$ 2,937	\$ 3,025	\$ 3,115	\$ 3,209	\$ 3,305
Life/Hospital Insurance	\$ 202	\$ 208	\$ 214	\$ 221	\$ 227	\$ 234
P/R Cost Workers Comp	\$ 23,044	\$ 23,735	\$ 24,447	\$ 25,181	\$ 25,936	\$ 26,714
P/R Tax FUTA	\$ 294	\$ 303	\$ 312	\$ 321	\$ 331	\$ 341
401k Expense	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Payroll Taxes, Burden and Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Benefits	\$ 43,712	\$ 45,023	\$ 46,374	\$ 47,765	\$ 49,198	\$ 50,674
Total Comp & Benefits	\$ 274,154	\$ 282,379	\$ 290,850	\$ 299,575	\$ 308,563	\$ 317,820
Uniform Expense	\$ 600	\$ 618	\$ 637	\$ 656	\$ 675	\$ 696
Garage Supplies	\$ 600	\$ 618	\$ 637	\$ 656	\$ 675	\$ 696
Drinking Water	\$ 600	\$ 618	\$ 637	\$ 656	\$ 675	\$ 696
Ticket Expense	\$ 1,500	\$ 1,545	\$ 1,591	\$ 1,639	\$ 1,688	\$ 1,739
Stationary & Office Supplies	\$ 600	\$ 618	\$ 637	\$ 656	\$ 675	\$ 696
R&M Equipment	\$ 1,000	\$ 1,030	\$ 1,061	\$ 1,093	\$ 1,126	\$ 1,159
R&M Revenue Control	\$ 1,000	\$ 1,030	\$ 1,061	\$ 1,093	\$ 1,126	\$ 1,159
Gas & Oil Company Vehicle	\$ 1,125	\$ 1,159	\$ 1,194	\$ 1,229	\$ 1,266	\$ 1,304
Parking & Auto	\$ 720	\$ 742	\$ 764	\$ 787	\$ 810	\$ 835
Rental Machinery & Equip.	\$ 360	\$ 371	\$ 382	\$ 393	\$ 405	\$ 417
Utilities Expense	\$ 2,000	\$ 2,060	\$ 2,122	\$ 2,185	\$ 2,251	\$ 2,319
Shopper Program	\$ 200	\$ 206	\$ 212	\$ 219	\$ 225	\$ 232
Postage & Freight	\$ 600	\$ 618	\$ 637	\$ 656	\$ 675	\$ 696
Telephone - Local	\$ 1,200	\$ 1,236	\$ 1,273	\$ 1,311	\$ 1,351	\$ 1,391
Telephone - Long Distance	\$ 144	\$ 148	\$ 153	\$ 157	\$ 162	\$ 167
Mobile Phone	\$ 360	\$ 371	\$ 382	\$ 393	\$ 405	\$ 417
Snow Removal				\$ 7,500	\$ 7,725	\$ 7,957
T2 Fees				\$ 16,932	\$ 17,440	\$ 17,963
Recruiting Expense	\$ 240	\$ 247	\$ 255	\$ 262	\$ 270	\$ 278
Miscellaneous Expense	\$ 300	\$ 309	\$ 318	\$ 328	\$ 338	\$ 348
Total Other Operating Expenses	\$ 13,149	\$ 13,543	\$ 13,950	\$ 38,800	\$ 39,964	\$ 41,163
Total Expense	\$ 337,303	\$ 348,422	\$ 359,925	\$ 396,257	\$ 409,302	\$ 422,797

Exhibit C

(Attach Contractor's Additional Insured Endorsement)



AIG Insurance
877-To-Serve (867-3783)
Email: toserve@AIG.com

12/28/2016

HOPE EBERHARDT
AON RISK SERVICES CENTRAL INC
200 E RANDOLPH ST
CHICAGO, IL 60601

Re: INSURED NAME: SP PLUS CORPORATION
Policy No.: GL 203-90-69
Effective Date: 01/01/2016

Dear HOPE EBERHARDT:

Enclosed please find the following document:

New Policy

Thank you for your binder. Enclosed please find the original and broker copies of the policy issued to the above named insured.

Renewal

Thank you for your renewal binder. Enclosed, please find the original and broker copies of the policy issued to the above named insured.

Endorsement(s) No. and Type of Change

Enclosed please find the original and one copy of the change endorsement(s) as requested.

CHG008 - ADD ADDITIONAL INSURED TO FORM CG2026

The enclosed documents provide a complete and accurate representation of the coverages agreed to under the terms and conditions set out in the binder or change request document. Upon your review, please contact your underwriter promptly with any questions or concerns.

We appreciate your business and strive to make your satisfaction our #1 priority.

DRAFT COPY

ADDENDUM TO THE DECLARATIONS PAGE
KENTUCKY LOCAL GOVERNMENT PREMIUM TAX DISCLOSURE FORM

Policy number: GL 203-90-69

The Premium shown on the Declarations Page does not include the amount you owe to the Insurer for the Kentucky Local Government Premium Tax, which is \$1,114.00. The Kentucky Local Government Premium Tax breaks down as follows:

KY TAX JURISDICTION:

KY CITY CODE: KY PREMIUM TAX PAID:

<u>KY TAX JURISDICTION:</u>	<u>KY CITY CODE:</u>	<u>KY PREMIUM TAX PAID:</u>
ERLANGER	0014	\$1,114.00

FORMS SCHEDULE

EFFECTIVE DATE: 01/01/2018

NAMED INSURED: SP PLUS CORPORATION

POLICY NO: GL 203-90-89

CHG008 CHANGE ENDORSEMENT
CG2028 (0413) DESGNTD PERS/ORG
100888 (1108) ADDENDUM TO THE DEC PAGE - KY LOCAL GOVT

DRAFT COPY

ENDORSEMENT # CHG008

This endorsement, effective 12:01 A.M. 12/28/2016 forms a part of

policy No. GL 203-90-69 issued to SP PLUS CORPORATION

BY NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA

IT IS HEREBY AGREED THAT THE FOLLOWING ADDITIONAL INSURED NAME HAS BEEN ADDED TO FORM CG2026(0413) OF THE POLICY:

THE CITY OF GREAT FALLS

ALL OTHER TERMS, CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.

12/28/2016
1803

DRAFT COPY



Authorized Representative

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<p>Name Of Additional Insured Person(s) Or Organization(s):</p> <p>THE CITY OF GREAT FALLS</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured

is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III - Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

DRAFT COPY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – STATE OR GOVERNMENTAL
AGENCY OR SUBDIVISION OR POLITICAL
SUBDIVISION – PERMITS OR AUTHORIZATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:

The City of Great Falls, Montana

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

- 1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

2. This insurance does not apply to:

- a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

122010-18

AS



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
12/29/2016

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
Aon Risk Services Central, Inc.
Chicago IL Office
200 East Randolph
Chicago IL 60601 USA

CONTACT NAME:
PHONE (A/C, No. Ext): (866) 783-7122 **FAX (A/C, No.):** 800-363-0105
E-MAIL ADDRESS:

INSURED
SP Plus Corporation
Standard Parking Corporation
200 E Randolph Street, Suite 7700
Chicago IL 60601 USA

RECEIVED
JAN - 9 2017
BY: _____

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: XL Insurance America Inc	24554
INSURER B: XL Specialty Insurance Co	37885
INSURER C: Greenwich Insurance Company	22322
INSURER D: Great American Insurance Co.	16691
INSURER E: Commerce & Industry Ins Co	19410
INSURER F: Federal Insurance Company	20281

COVERAGES **CERTIFICATE NUMBER: 570065051484** **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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liability Included GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:		RGE3001209 SIR applies per policy terms & conditions	01/01/2017	01/01/2018	EACH OCCURRENCE \$3,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$2,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$3,000,000 GENERAL AGGREGATE \$15,000,000 PRODUCTS - COMP/OP AGG \$3,000,000
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> GRLL \$5,000 SIR <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY		RAD9437820 AOS	01/01/2017	01/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Garagekeepers Limit \$3,000,000
E	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$25,000		19452258	01/01/2017	01/01/2018	EACH OCCURRENCE \$25,000,000 AGGREGATE \$25,000,000
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N N/A	RWD3001210 AOS RWR3001211 RETRO	01/01/2017	01/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
D	Misc Liab Cvg		SAA50414480100 Crime SAA50414490100 Crime XS	01/01/2017	01/01/2018	Occurrence \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: Location - 95527 Great Falls Surface (S), 95528 Great Falls Garage /Meters, 97968 City Garage. Insurance charges will include all applicable premiums and costs, as well as retained exposure charges established by the Named Insured. The City of Great Falls is included as Additional Insured on the General and Garage Liability in accordance with the terms of Additional Insured Endorsement on the policy."Coverage is Primary and Non-contributory as required under written contract"

CERTIFICATE HOLDER

CANCELLATION

City of Great Falls Montana
Attn: Community Development Department
PO Box 5021
Great Falls MT 59403 USA

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
Aon Risk Services Central, Inc

Holder Identifier : 95527

Certificate No : 570065051484



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Central, Inc.		NAMED INSURED SP Plus Corporation	
POLICY NUMBER See Certificate Number: 570065051484			
CARRIER See Certificate Number: 570065051484	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance**

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER G :ACE Property & Casualty Insurance Co.	20699
INSURER H :Everest National Insurance Co	10120
INSURER I :Liberty Insurance Underwriters, Inc.	19917
INSURER	

ADDITIONAL POLICIES If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
	EXCESS LIABILITY							
G				XCQG27921103002 \$25M xs \$25M	01/01/2017	01/01/2018	Aggregate	\$25,000,000
F				93642007 \$25M xs \$50M	01/01/2017	01/01/2018	Aggregate	\$25,000,000
I				100002719912 \$25M p/o \$50M x \$75M	01/01/2017	01/01/2018	Aggregate	\$50,000,000
H				XC8EX00011171 \$25M p/o \$50M x \$75M	01/01/2017	01/01/2018	Aggregate	\$50,000,000
							Each Occurrence	\$50,000,000