

**AMENDMENT NO. 1
TO AGREEMENT FOR CONTRACTOR SERVICES**

Excel Landscape, Inc.

Annual Citywide Landscape Maintenance Services

This Amendment No. 1 to Agreement for Contractor Services is made and entered into as of 7/12/2022, by and between the City of Lake Elsinore, a municipal corporation ("City"), and Excel Landscape, Inc., a Corporation ("Contractor").

RECITALS

A. The City and Contractor have entered into that certain Agreement for Contractor Services dated as of 10/27/2020, (the "Original Agreement"). Except as otherwise defined herein, all capitalized terms used herein shall have the meanings set forth for such terms in the Original Agreement.

B. The Original Agreement provided for compensation to Contractor in an amount of Two Hundred Thirteen Thousand Three Hundred dollars (\$213,300).

C. Contractor has notified the City of unforeseen cost increases in material and labor and has requested an adjustment to the extra work pricing. In addition, City requires Contractor services in additional locations.

D. The Parties now desire to amend the scope of services and increase the payment for such services as set forth in this Amendment No 1.

NOW, THEREFORE, in consideration of the mutual covenants and conditions set forth herein, City and Contractor agree as follows:

1. Section 3, Compensation, of the Original Agreement is hereby amended to read in its entirety as follows:

"Compensation to be paid to Contractor shall be in accordance with the fees set forth in Contractor's Proposal which is attached to the Original Agreement as Exhibit A and amended by this Amendment No. 1 in accordance with Exhibit A-1 attached hereto and incorporated herein by reference. In no event shall Contractor's annual compensation exceed Two Hundred Thirteen Thousand Three Hundred Dollars (\$266,300) per fiscal year commencing the Fiscal Year July 1, 2022 through June 30, 2023 without additional written authorization from the City.

Notwithstanding any provision of Contractor's Proposal to the contrary, out of pocket expenses set forth in Exhibit A to the Original Agreement and Exhibit A-1 attached hereto shall be reimbursed at cost without an inflator or administrative charge. Payment by City under this Agreement shall not be deemed a waiver of defects, even if such defects were known to the City at the time of payment."

2. Contractor's Proposal attached to the Original Agreement as Exhibit A is hereby amended as set forth in Exhibit A-1 attached hereto and incorporated by reference herein to substitute the updated Price Sheet for Landscape Maintenance Extra Work (Exhibit "B" to Contractor's Proposal) and to include the additional services set forth therein.

3. Except for the changes specifically set forth herein, all other terms and conditions of the Original Agreement shall remain in full force and effect.

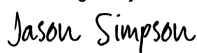
IN WITNESS WHEREOF, the parties have caused this Amendment No. 1 to be executed on the respective dates set forth below.

"CITY"

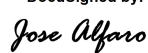
CITY OF LAKE ELSINORE, a municipal corporation

"CONTRACTOR"

Excel Landscape, Inc., a Corporation


DocuSigned by:

1F331F03E0FE412...
City Manager

Date: 8/22/2022 | 2:54 PM PDT

DocuSigned by:

8E3D80C79731470...
Jose Alfaro, Sr.

Date: 8/22/2022 | 4:53 PM CDT

ATTEST:

DocuSigned by:

30A269B531FE4A0...
City Clerk

APPROVED AS TO FORM:

DocuSigned by:

AS08D9096AF48C...
City Attorney

DocuSigned by:

678FB33A1E42495...
Assistant City Manager

Attachments: Exhibit A-1 – Contractor 's Proposal

EXHIBIT A-1

CONTRACTOR 'S PROPOSAL

[ATTACHED]



710 Rimpau Ave. Suite 108 • Corona, CA 92879-5724

(951) 735-9650 Fax (951) 735-0469 • Lic # 694553

April 1, 2022

City of Lake Elsinore
130 S Main St.
Lake Elsinore, CA 92530

Dear Rick,

This letter is to express our interest in renewing our existing Landscape Maintenance contract with the City for an additional year. We will honor our current maintenance contract amount, with the exception of the unit cost pricing for extra work. Due to unforeseen cost increases to material and labor, we are requesting an adjustment to the extra work pricing. Please see the attached worksheet for the proposed price adjustments. I look forward to hearing from you.

Sincerely,

Jason Alfaro

Jason Alfaro,
Project Manager

ADDENDA NO. 1 & 2 & 3

EXHIBIT "B"
CITY OF LAKE ELSINORE
LANDSCAPE MAINTENANCE EXTRA WORK
PRICE SHEET

I. Turf Maintenance (All Turf Areas)

1. Mowing (Including Bagging of Clippings)
2. Edging
3. String Trimming
4. Aerification (Core/3")
5. Aerification (Deep Tine/6")
6. Weed Removal (Manual)
7. Pest Control (Manual)
8. Fertilization (Placement Only)
9. Materials (Fertilizer, Soil Amends)
10. Over seeding of Sports turf (Soccer Field, Football Field)
11. Over seeding of Sports turf (Baseball Field)
12. Over seeding of General use turf areas
13. Artificial Turf areas

Unit Cost

\$ 4 5 . 0 0	sq. ft.	Per man HR.
\$ 4 5 . 0 0	linear ft.	Per man HR.
\$ 4 5 . 0 0	linear ft.	Per man HR.
\$ Quote	sq. ft.	
\$ N/A	sq. ft.	
\$ Quote	per man hr.	
\$ 7 5 . 0 0	per man hr.	(Labor only)
\$ Quote	sq. ft.	
\$ Cost + 15%		
\$ Quote	sq. ft. (min. 40,000 sq. ft.)	
\$ Quote	sq. ft. (min. 5,000 sq. ft.)	
\$ Quote	sq. ft. (min. 1,000 sq. ft.)	
\$ Quote	sq. ft. (min. 1,000 sq. ft.)	

II. General Landscape Maintenance (Planters and Slope Areas)

1. Edging (Ground Cover)
2. Trimming (Shrubs, Ground Cover)
3. Pruning/Shrubs, Vines, Roses
4. Pruning/Trees (To 18')
5. Weed Removal (Manual)
6. Pest Control (Manual)
7. Fertilization (Placement Only)
8. Vegetation Removal
9. Materials (Fertilizer, Soil Amends)

\$ 4 5 . 0 0	linear ft.	Per man HR.
\$ 4 5 . 0 0	sq. ft.	Per man HR.
\$ 4 5 . 0 0	sq. ft.	Per man HR.
\$ Quote	each	
\$ 4 5 . 0 0	per man hr.	
\$ 7 5 . 0 0	per man hr.	
\$ Quote	sq. ft.	Per man HR.
\$ Quote	sq. ft.	
\$ Cost + 15%		

III. Plant Material (Installed, All Areas)

1. Annual Color (4" Container)
2. Ground Cover
3. One (1) Gallon
4. Five (5) Gallon
5. Fifteen (15) Gallon
6. 24" Box Tree
7. Seeded Turf
8. Sodded Turf
9. Hydroseed
10. Soil Preparation (Existing Area)
11. Soil Preparation (New Area)
12. Wood Mulch

\$ 3 0 . 0 0	each
\$ 3 0 . 0 0	flat
\$ 1 2 . 0 0	each
\$ 2 8 . 0 0	each
\$ 1 5 0 . 0 0	each
\$ 2 7 5 . 0 0	each
\$ Quote	sq. ft.
\$ Quote	sq. ft.
\$ Quote	sq. ft.
\$ Quote	sq. ft.
\$ Quote	sq. ft.
\$ 5 0 . 0 0	cu. yd.

IV. Irrigation System Maintenance

- | | | |
|---|----------------------|---------|
| 1. Inspection | \$ 7 5 . 0 0 | per hr. |
| 2. Repair (Main Line, Lateral Line, Sprinklers) | \$ 7 5 . 0 0 | per hr. |
| 3. Parts | \$ <u>Cost + 15%</u> | |

V. *General Pest Control*

- | | | |
|----------------------------------|-----------------|---------|
| 1. Written Recommendation by PCA | \$ <u>Quote</u> | each |
| 2. Qualified Applicator (QAC) | \$ 1 2 5 . 0 0 | per hr. |
| 3. Trained Applicator | \$ 7 5 . 0 0 | per hr. |
| 4. Material | \$ <u>Quote</u> | |

**City of Lake Elsinore**

Grand ave.
Lake Elsinore, California 92530

Estimate #10098

From Excel Landscape South
(800) 734-9650
1185 Magnolia Ave. E400
Corona CA, 92879

Bill To Downtown Main st
130 South Main St.
Lake Elsinore, California 92530

Sent On 05/03/2022

Job Title Medians in the Grand. Planting

Job Number 7721

Location Medians in the grand ave

PRODUCT / SERVICE	DESCRIPTION	QTY.	UNIT PRICE	TOTAL
Rose 5 gallon	5 gallon rose installed (red yucca)	224	\$25.00	\$5,600.00
Plant 5 gallon	5 gallon plant installed (Little Johns)	190	\$25.00	\$4,750.00
Plant 5 gallon	5 gallon plant installed (westringia mandi)	146	\$25.00	\$3,650.00
Plant 5 gallon	5 gallon plant installed (Raphiolepis)	77	\$25.00	\$1,925.00
Plant 5 gallon	5 gallon plant installed (pyracantha)	14	\$25.00	\$350.00

Total \$16,275.00

This quote is valid for the next 30 days, after which values may be subject to change.

Signature: 

Date: 5.23.22

**City of Lake Elsinore**

Lincoln ave
Lake Elsinore, California 92530

Estimate #10099

From Excel Landscape South
(800) 734-9650
1185 Magnolia Ave. E400
Corona CA, 92879

Bill To Downtown Main st
130 South Main St.
Lake Elsinore, California 92530

Sent On 05/05/2022

Job Title Lantern hill LN (planting)

Job Number 7721

Location Lantern hill LN.

PRODUCT / SERVICE	DESCRIPTION	QTY.	UNIT PRICE	TOTAL
Irrigation Labor	Irrigation Labor	6	\$60.00	\$360.00
Mulch	1 yard Cover mulch installed	15	\$50.00	\$750.00
Material	Drip hose. 9 GPH 18" space (200 ft Roll)	200	\$0.32	\$64.00
Plant 5 gallon	5 gallon plant installed(Litter Johns)	31	\$22.00	\$682.00
Plant 5 gallon	5 gallon plant installed (Red yucca)	22	\$25.00	\$550.00

Total \$2,406.00

This quote is valid for the next 30 days, after which values may be subject to change.

Signature: 

Date: 5.23.22

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**City of Lake Elsinore**

Mission Trail median
Lake Elsinore, California 92530

Estimate #10094

From Excel Landscape South
(800) 734-9650
1185 Magnolia Ave. E400
Corona CA, 92879

Bill To Downtown Main st
130 South Main St.
Lake Elsinore, California 92530

Sent On 05/02/2022

Job Title Mission trail median planting

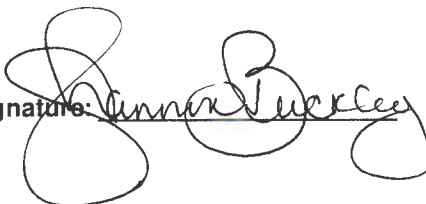
Job Number 7721

Location Mission trail median

PRODUCT / SERVICE	DESCRIPTION	QTY.	UNIT PRICE	TOTAL
Plant 5 gallon	5 gallon plant installed (raphs)	57	\$25.00	\$1,425.00

Total **\$1,425.00**

This quote is valid for the next 30 days, after which values may be subject to change.

Signature:  Date: 5.23.22

EXCELAN-01

ASHUNN



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/18/2022

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 License # 0M63276 Gallant Risk and Insurance Services, LLC 4160 Temescal Canyon Rd. Suite 214 Corona, CA 92883	CONTACT NAME: PHONE (A/C, No, Ext): (951) 368-0700		FAX (A/C, No): (951) 368-0707
	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Middlesex Insurance Company		23434
	INSURER B : Oak River Insurance Company		34630
INSURED Excel Landscape, Inc. 1185 Magnolia Ave., #E400 Corona, CA 92879	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	X	A0133421004	8/1/2022	8/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	X	X	A0133421001	8/1/2022	8/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Comp/Coll Ded \$ 1,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			A0133421005	8/1/2021	8/1/2022	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	EXWC318625	4/1/2022	4/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 * 30 days notice of cancellation to the certificate holder.

Job # 7721

Re: All landscape operations performed by or on behalf of the named insured.

The City of Lake Elsinore, The Community Redevelopment Agency of the City of Lake Elsinore (RDA), Its directors, officers & employees are named as additional insured.

CERTIFICATE HOLDER

CANCELLATION

City of Lake Elsinore Attn: Public Works Department 521 N. Langstaff Street Lake Elsinore, CA 92530	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 <i>Annie Shunn</i>
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POLICY NUMBER: A0133421004

COMMERCIAL GENERAL LIABILITY
CG 24 04 05 09

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Person Or Organization:

Any person or organization from whom you are required to
waive your right to recover under a written contract or
agreement in effect prior to any loss or damage

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

The following is added to Paragraph **8. Transfer Of
Rights Of Recovery Against Others To Us** of
Section IV - Conditions:

We waive any right of recovery we may have against
the person or organization shown in the Schedule
above because of payments we make for injury or
damage arising out of your ongoing operations or
"your work" done under a contract with that person
or organization and included in the
"products-completed operations hazard". This waiver
applies only to the person or organization shown in
the Schedule above.

POLICY NUMBER: A0133421004

COMMERCIAL GENERAL LIABILITY
CG 20 37 04 13**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****ADDITIONAL INSURED - OWNERS, LESSEES OR
CONTRACTORS - COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization you are required to add as an additional insured under a written contract or agreement in effect prior to any accident, injury, loss or damage	All locations and jobs performed that have a written contract, agreement or permit
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 the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

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.

POLICY NUMBER: A0133421004

COMMERCIAL GENERAL LIABILITY
CG 20 10 04 13**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****ADDITIONAL INSURED - OWNERS, LESSEES OR
CONTRACTORS - SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization you are required to add as an additional insured under a written contract or agreement in effect prior to any accident, injury, loss or damage	All locations per written contract, agreement or permit Description: All jobs performed that have a written contract, agreement or permit
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 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:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

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 additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. 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.

POLICY NUMBER: A0133421001

COMMERCIAL AUTO
CA 04 44 10 13**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Excel Landscape Inc**Endorsement Effective Date:** 08/01/2022**SCHEDULE****Name(s) Of Person(s) Or Organization(s):**Any person or organization from whom you are required to
waive your right to recover under a written contract or
agreement in effect prior to any loss or damage

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

The **Transfer Of Rights Of Recovery Against Others To Us** condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

POLICY NUMBER: A0133421001

COMMERCIAL AUTO
CA 76 01 06 15**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****DESIGNATED INSURED - PRIMARY AND
NONCONTRIBUTORY - COVERED AUTOS
LIABILITY COVERAGE**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM
AUTO DEALERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Autos Liability Coverage under the Who Is An Insured provision of the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated.

Named Insured: Excel Landscape Inc
Endorsement Effective Date: 08/01/2022**SCHEDULE****Name Of Person(s) Or Organization(s):**

Any person or organization you are required to add as an additional insured under a written contract or agreement in effect prior to any accident, injury, loss or damage

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

A. Each person or organization shown in the Schedule is an "insured" for **Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the **Who Is An Insured** provision contained in:**

- (1) Paragraph **A.1.** of **Section II - Covered Autos Liability Coverage** in the Business Auto and Motor Carrier Coverage Forms; or
- (2) Paragraph **D.2.** of **Section I - Covered Autos Coverages** of the Auto Dealers Coverage Form.

B. Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other auto insurance issued to the person or organization in the schedule under your policy provided that:

- (1) The person or organization is a Named Insured under such other insurance; and
- (2) Prior to the "accident" you have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the person or organization.

BUSINESS LICENSE

This business license is issued for revenue purposes only and does not grant authorization to operate a business. This business license is issued without verification that the holder is subject to or exempted from licensing by the state, county, federal government, or any other governmental agency.

Business Name: EXCEL LANDSCAPE, INC.

Business Location: 710 RIMPAU STE 108
CORONA, CA 92879

Owner Name(s): JOSE ALFARO

EXCEL LANDSCAPE, INC.
1185 MAGNOLIA AVE STE E-400
CORONA, CA 92879-3218

CITY OF LAKE ELSINORE

Administrative Services - Licensing
130 South Main Street, Lake Elsinore, CA 92530
PH (951) 674-3124

BUSINESS LICENSE NO. 004404

Business Type: LANDSCAPING CONTRACTOR

Issue Date: 5/1/2022

Expiration Date: 4/30/2023

Starting January 1, 2021, Assembly Bill 1607 requires the prevention of gender-based discrimination of business establishments. A full notice is available in English or other languages by going to: <https://www.dca.ca.gov/publications/>

TO BE POSTED IN A CONSPICUOUS PLACE

THIS IS YOUR LICENSE • NOT TRANSFERABLE