



**AGENDA  
CITY COMMISSION  
AUGUST 20, 2024  
ED “BOSH” FROEHLICH MEETING ROOM  
MANDAN CITY HALL  
5:30 PM  
[WWW.CITYOFMANDAN.COM](http://WWW.CITYOFMANDAN.COM)**

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**A. ROLL CALL**

1. Roll call of all City Commissioners

**B. THE PLEDGE OF ALLEGIANCE**

**C. ANNOUNCEMENTS**

**D. APPROVAL OF AGENDA**

**E. MINUTES**

1. Consider approval of the minutes of the August 6, 2024 Board of City Commissioners regular meeting

**F. PUBLIC HEARING**

**G. BIDS**

1. Consider Collins Avenue Reservoir Replacement Project bids and Engineering Service Agreement

**H. CONSENT AGENDA**

1. Consider approval of monthly bills
2. Consider approval of an addition to the gaming site authorization for Mandan Moose Lodge #425 at Mandan Moose Lodge #425 from Sept 1, 2024 to June

30, 2025

3. Consider approval of the Grant application to fund Dakota Child Advocacy Center to partially fund one Forensic Interviewer Staff Position and Vidanyx program; City of Mandan will be a pass through for funding
4. Consider approval of the following special event permits:
  - a. Silver Dollar Birthday Bash Street Dance
  - b. Liberty Heights/MGAS Classic Car Show
5. Consider approval of the Lottery Grant Application for Metro Area Narcotics Task Force

**I. OLD BUSINESS**

**J. NEW BUSINESS**

1. Consider appointing Brittney Anderson to the Mandan Architectural Review Commission
2. Consider appointments to the Dakota Media Access Board of Directors
  - a. Renee Murrish as a City of Mandan Representative
  - b. Communications Specialist, Kari Schmidt - as an ex officio, non-voting member
3. Consider the creation of an Information Technology position
4. Consider granting permission for Missouri West Water Systems to serve 1316 8th Ave SW
5. Consider approval of the update to the Long-Term Financial Planning Policy

**K. RESOLUTIONS AND ORDINANCES**

1. Second consideration of Ordinance 1453, an ordinance to amend and re-enact Article 2 of the Mandan Code of Ordinances, relating to city sales, use and gross receipts tax under the Home Rule Charter of the City of Mandan

**L. OTHER BUSINESS**

**M. FUTURE MEETING DATES FOR BOARD OF CITY COMMISSIONERS**

- September 3, 2024 at 5:00 p.m.

- September 17, 2024 at 5:30 p.m.
- October 1, 2024 at 5:30 p.m.

**N. ADJOURN**

The Mandan City Commission met in regular session at 5:30 PM on August 6, 2024 in the Ed “Bosh” Froehlich Meeting Room at City Hall, Mandan, North Dakota. Mayor Froelich called the meeting to order.

A. ROLL CALL

1. *Roll call of all City Commissioners.* Those present were Dennis Rohr, Mike Braun, James Froelich, Craig Sjoberg, Ryan Heinsohn. Department heads present were City Administrator Neubauer, Finance Director Welch, Assessor Markley, Human Resource Director Berger, Engineering Director Wigness, Police Chief Ziegler, Building Official Singer, Fire Chief/Public Works Director Bitz, Business Development & Communications Director Cermak, Planner Stromme, Airport Manager Gerhardt, Library Director Sandstrom, and Attorney Sand.

B. THE PLEDGE OF ALLEGIANCE

C. ANNOUNCEMENTS

D. APPROVAL OF AGENDA Commissioner Sjoberg moved and Commissioner Rohr seconded to approve as presented. Roll Call vote: Aye 5, Nay 0, Absent 0. The motion passed.

E. MINUTES

1. *Consider approval of the minutes from the July 16, 2024 Board of City Commission regular meeting.* Commissioner Sjoberg moved and Commissioner Rohr seconded to approve the minutes as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.

F. PUBLIC HEARING

1. *Consider Right of Way Vacation related to minor plat for Helblings 6th Addition.* Planner Stromme presented the right-of-way vacation related to a minor plat for Helbling's 6th Addition. Mayor Froelich opened the public hearing and invited the public to come forward to comment. A second and third invitation for comment was given. Hearing none, the public hearing closed. Commissioner Sjoberg moved and Commissioner Heinsohn seconded to approve the minor plat. Roll Call vote: Aye 5, Nay 0. The motion passed.

G. BIDS

1. *Consider allowing fire department staff to advertise for bids for source capture exhaust systems.* Chief Bitz presented the request for the Fire Department to advertise for bids for source capture exhaust systems. Commissioner Braun moved and Commissioner Sjoberg seconded to allow fire department staff to advertise bids for source capture exhaust systems for fire stations Roll Call vote: Aye 5, Nay 0. The motion passed.

H. CONSENT AGENDA

1. *Consider approval of a gaming site authorization for Fort Abraham Lincoln Foundation at Big Stick Cigar Lounge from Aug. 7, 2024 to June 30, 2025.*
2. *Consider approval of an update to the Media Guidelines regarding ballot measures.*
3. *Consider Use of the City of Mandan Utility Fund for up-sizing costs related to Street Improvement District 227 .*
4. *Consider amending Street Improvement District 229 to include additional parcels .*



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5. *Consider Cost Participation and Maintenance agreement for Old Red Trail Path mill and overlay.*
  6. *Consider submitting a sole source request to the North Dakota Department of Transportation for Memorial Highway utility items.*
  7. *Consider approval to close 27th Street to accommodate a storm sewer connection.*
  8. *Consider approval of the raffle permit for Mandan Braves Volleyball Booster Club.*
  9. *Consider Minor Plat for Helblings 5th Addition.*
  10. *Consider allowing the fire department to apply for a 50/50 North Dakota Game and Fish grant.*
  11. *Consider a request from the fire department to accept the FY (2023) Assistance to Firefighters Grant and amend the 2024 fire department budget by \$20,000.* Engineer Wigness answered funding questions on consent agenda items 3, 5 and 7. Commissioner Rohr moved and Commissioner Braun seconded to approve consent agenda items 1-11 as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.

I. OLD BUSINESS

J. NEW BUSINESS

1. *Consider commissioner portfolio and committee assignments.* Administrator Neubauer presented the item. Commissioner Heinsohn moved and Commissioner Sjoberg seconded to approve the portfolio and committee assignments as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.
2. *Consider the Morton Mandan Public Library 2025 Budget.* Library Director Sandstrom presented an update on the Morton Mandan Public Library (MMPL) and its 2025 budget. Commissioner Sjoberg moved and Commissioner Heinsohn seconded to approve the MMPL 2025 budget as recommended by the Library Board of Trustees. Roll Call vote: Aye 5, Nay 0. The motion passed.
3. *Consider the Mandan Airport Authority 2025 Budget.* Airport Manager Lindsay Gerhardt gave an update on the Mandan Regional Airport and its 2025 budget. Commissioner Braun moved and Commissioner Sjoberg seconded to approve the 2025 Mandan Airport Authority Budget as recommended by the Airport Authority board. Roll Call vote: Aye 5, Nay 0. The motion passed.
4. *Consider appeal from TRX Developers regarding use of City of Mandan Right-of-Way for irrigation crossings.* Planner Stromme presented the appeal, giving the history and staff's concerns about the item. Art Goldhammer, president of TRX Developers, gave a statement in support of his appeal. Commissioner Sjoberg moved and Commissioner Heinsohn seconded to deny the request. Roll Call vote: Aye 5, Nay 0. The motion passed.
5. *Consider Change Order 3 for Street Improvement District 224.* Engineer Wigness presented the item. Commissioner Rohr moved and Commissioner Braun seconded to approve the change order as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.
6. *Consider Raw Water Intake project change orders.* Engineer Wigness presented the item. The Raw Water intake project is nearing completion. Commissioner Rohr moved and Commissioner Braun seconded to approve the change orders as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.
7. *Consider the 2025 Street Reconstruction project Pavement Condition Report and district creation resolutions.* Engineer Wigness presented recommendations for a street reconstruction project in 2025. There were a few areas of town evaluated, as far as pavement conditions. The Engineering

Department recommends moving forward with area 2b, an area around Roosevelt Elementary school, for 2025. There are cast iron water lines in this area that are 50-60 years old and need replacing. The City could seek State Water Commission funds for assistance with the cost of the water main replacement in the project, and then would seek a 20% buy down for the street reconstruction from Municipal Infrastructure Funds. Commissioner Sjoberg moved and Commissioner Braun seconded to approve the resolution creating the district, approve the engineer's report, approve the feasibility report and approve the resolution of necessity for Street Improvement District No. 238. Project No. 2025-01, as well as dedicating Prairie Dog funds to the project at a rate of 20% of reconstruction work. Roll Call vote: Aye 5, Nay 0. The motion passed.

8. *Consider engineering services amendment for Street Improvement District No. 224.* Engineer Wigness presented the item. Commissioner Heinsohn moved and Commissioner Braun seconded to approve the engineering service amendment as presented. Roll Call vote: Aye 5, Nay 0. The motion passed.

9. *Consider sale of 1.5 acre portion of Lot A of NW 1/4 SE 1/4 & Lot A Of Gov LOT 7 (Less 12.32A Of Lot 7) 44.28 Acres (9001C), a City-owned property.* Planner Stromme presented a purchase agreement for the sale of 1.5 acres of a City-owned lot. Commissioner Rohr moved and Commissioner Sjoberg seconded to approve the purchase agreement, contingent upon the completion of future platting to describe the lot prior to closing. Roll Call vote: Aye 5, Nay 0. The motion passed.

10. *Consider a request from the Mandan Progress Organization for funding for Holiday Display and Streetlight Pole displays..* Administrator Neubauer presented the request for use of funds from the Visitors Fund. Mandan Progress Organization (MPO) Executive Director Matt Schanandore provided details of the request to get new street pole lights for the Holiday Light display. The existing street pole lights are old and hard to maintain. Due to the upcoming Memorial Highway reconstruction project, the focus of this request is only on the street pole lights along Main Street, about 60 poles. The new lights would be tinsel free and easy to maintain. The request also includes a decorated entrance for the west side of the Morton Mandan Public Library, along with additional trim lighting for the south side of the library and depot building, and the addition of some signature pieces into the Holiday Lights display in the park. Commissioner Braun moved and Commissioner Sjoberg seconded to approve funding up to \$300,000 as requested by the MPO for Streetlight Pole Displays and a Holiday Lights signature piece from the Visitors Fund. Roll Call vote: Aye 5, Nay 0 None, Absent . The motion passed.

#### K. RESOLUTIONS AND ORDINANCES

1. *Second and Final Consideration of Ordinance 1451 to amend the Mandan Code of Ordinances Section 2-3-3 Groups created by ordinance, related to word changes to the Mandan Architectural Review Commission.* Building Official Singer shared that there have been no changes or comments on the ordinance since the first consideration. Commissioner Braun moved and Commissioner Rohr seconded to approve Ordinance 1451. Roll Call vote: Aye 5, Nay 0. The motion passed.

2. *First consideration of Ordinance 1453, an ordinance to amend and re-enact Article 2 of the Mandan Code of Ordinances, relating to city sales, use and gross receipts tax under the Home Rule Charter of the City of Mandan..* Administrator Neubauer presented the codification of the results of the vote of the June 11 election for the half-cent sales tax. Commissioner Braun moved and Commissioner Sjoberg seconded to approve the first consideration of Ordinance 1453. Roll Call vote: Aye 5, Nay 0. The motion passed.

3. *Consider the introduction and first consideration, and call for a public budget hearing of*

*Ordinance No. 1452 making the annual appropriations for expenditures or expenses of the City of Mandan, North Dakota, for the fiscal year commencing January 1, 2025, and ending December 31, 2025, and making the annual tax levy for the year 2024..* Finance Director Welch presented the item.

Commissioner Sjoberg moved and Commissioner Braun seconded to approve the introduction and first consideration and call for a public hearing of Ordinance 1452 making the annual appropriations for expenditures or expenses of the City of Mandan for the fiscal year commencing Jan. 1, 2025, and ending Dec. 31, 2025 and making the annual tax levy for the year 2024. Roll Call vote: Aye 5, Nay 0. The motion passed.

4. *Consider Right of Way Vacation related to minor plat for Helblings 6th Addition.*

Commissioner Sjoberg moved and Commissioner Rohr seconded to approve the resolution vacating the right-of-way associated with Helblings 6th Addition. Roll Call vote: Aye 5, Nay 0. The motion passed.

L. OTHER BUSINESS

M. FUTURE MEETING DATES FOR BOARD OF CITY COMMISSIONERS

*August 20, 2024 at 5:30 p.m..*

*September 3, 2024 at 5:00 p.m..*

*September 17, 2024 at 5:30 p.m..*

N. ADJOURN There being no other business to come before the Board, Commissioner Braun moved and Commissioner Rohr seconded to adjourn at 07:42 p.m. Roll Call vote: Aye 5, Nay 0. The motion received unanimous approval of all the members present.

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James Neubauer  
City Administrator

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James Froelich  
President, Board of City Commissioners



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 20, 2024  
**SUBMITTING DEPARTMENT:** Engineering  
**DEPARTMENT DIRECTOR:** Jarek Wigness  
**PRESENTER:** Jarek Wigness, City Engineer  
**SUBJECT:** *Consider Collins Avenue Reservoir Replacement Project bids and Engineering Service Agreement*

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#### **STATEMENT/PURPOSE:**

To consider the Collins Avenue Reservoir Replacement bids and a proposed amendment to the AE2S engineering services agreement.

#### **BACKGROUND/ALTERNATIVES:**

Bids for the above referenced project were opened on Thursday, August 1, 2024. The Contractors submitted the required Bid Bonds, Contractor License, requested qualification materials, MBE/WBE Solicitation information, SRF Debarment Certification, acknowledged the two Addendums and signed their bids except where noted below. The Bids were examined for errors and irregularities, and none were found. A bid tabulation is attached to this letter for your review.

Four (4) contractors submitted bids for the work. The low bid for the project was for individual Contracts No. 1 & 2 with a combined total of \$6,150,300.00 and the apparent low bid for these are as follows:

- Contract No. 1 – General Construction
  - DN Tanks
  - Bid Amount: \$5,935,800.00
  - Opinion of Cost: \$5,200,000.00
- Contract No. 2 – Electrical Construction:
  - Edling Electric, Inc.
  - Bid Amount: \$214,500.00
  - Opinion of Cost: \$200,000.00

DN Tanks and Edling Electric are known, reputable contractors who have completed

projects with AE2S and the City of Mandan. The total construction cost for the project, including work to relocate tornado warning siren equipment, would be \$6,164,029. This is an approximate increase of 14% to the Engineer's estimate. The difference is for work associated with the site piping, process piping, and earthwork. This is due to local contractors pursuing this work less aggressively and an additional markup for this work being subcontracted which was not accounted for.

North Dakota State Water Commission (SWC) approved a construction cost-share request on August 8, 2024 up to \$2.02M.

Award of contracts is contingent upon approval from the North Dakota Department of Environmental Quality (NDDEQ) due to the requirements of the State Revolving Fund (SRF) Program.

In addition to the bids, we have received a proposed amendment to our Engineering Service Agreement (ESA) with AE2S to include construction oversight and services.

If awarded, portions of this project would be complete this fall, with majority of the construction taking place in 2025.

**ATTACHMENTS:**

1. Bid Award Recommendation
2. AE2S Task Order Amendment

**FISCAL IMPACT:**

The total construction cost for the project is \$6,164,029 and the City will receive SWC Cost-Share at 27%. Construction will occur from 2024 to 2026 with the bulk of it taking place in 2025. The total ESA amount is \$685,000. These costs have been shared directly with the finance department and are being used to structure the proposed utility rate increase that was included in the 2025 preliminary budget. As a result of the 14% increase in the total construction cost, the proposed 2025 utility base rate adjustment for this project will increase from \$2.93/month to \$3.34/month for a residential account.

**STAFF IMPACT:**

Minimal.

**LEGAL REVIEW:**

All items have been made available to the City Attorney for review.

**RECOMMENDATION:**

To award the construction contracts to DN Tanks and Edling Electric and amend the

engineering service agreement with AE2S.

**SUGGESTED MOTION:**

1. I move to award the General Contract to DN Tanks and the Electrical Contract to Edling Electric, as presented, contingent on NDDEQ authorization.
2. I move to approve the Engineering Service Agreement with AE2S, as presented.



August 8, 2024

To the President and Commissioners  
of the Mandan Board of City Commissioners  
Jarek Wigness, PE  
City Engineer  
205 2nd Ave. NW  
Mandan, ND 58554

**Re: City of Mandan Collins Avenue Reservoir Replacement – City Project No. 2024-04  
Award Recommendation Letter**

Honorable Commissioners:

Bids for the above referenced project were opened on Thursday, August 1, 2024. The Contractors submitted the required Bid Bonds, Contractor License, requested qualification materials, MBE/WBE Solicitation information, SRF Debarment Certification, acknowledged the two Addendums and signed their bids except where noted below. The Bids were examined for errors and irregularities, and none were found. A bid tabulation is attached to this letter for your review.

Four (4) Contractors submitted bids for the Work. The low bid for the project was for the individual Contracts No. 1 & 2 with a combined total of \$6,150,300.00 and the apparent low bid for these are as follows:

- Contract No. 1 – General Construction
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- Contract No. 2 – Electrical Construction:
  - Edling Electric, Inc.
  - Bid Amount: \$214,500.00
  - Opinion of Cost: \$200,000.00

DN Tanks and Edling Electric are known, reputable Contractors who have completed projects with AE2S and the City of Mandan. The total construction cost for the project, including work to relocate tornado warning siren equipment would be \$6,164,029.00. This is an approximate increase of 14% to the Engineer's Estimate. The difference is for work associated with the site piping, process piping, and earthwork. This is due to local contractors pursuing this work less aggressively and an additional markup for this work being subcontracted which was not accounted for. The ND State Water Commission (SWC) has approved cost-share funding for this project up to \$2.02M.



**AE2S recommends awarding Contracts No. 1 & 2 to DN Tanks and Edling Electric, Inc, respectively.** Attached to this letter are copies of the apparent low bidder's proposals, copies of the corresponding Bid Bonds, and the Notice of Award for DN Tanks and Edling Electric, Inc. for review and, if acceptable, approval. Please note that the award is contingent upon approval from the North Dakota Department of Environmental Quality (NDDEQ) due to the requirements of the State Revolving Fund (SRF) Program.

After approval of the Notice of Award, please return the original to AE2S. We will forward the Notice of Award and Agreements to the apparent low bidders and return the bid bonds to all appropriate parties. The apparent low bidder is required to acknowledge their Awards, execute the Agreements (on their part), and return both with the required supporting documentation (Performance Bonds, insurance certificates, etc.) within 15 days. Upon receipt of the returned documentation, it will be reviewed and forwarded to you for review and final execution, if acceptable. Once the Agreements are fully executed, we will issue the Notices to Proceed.

Thank you for the continued opportunity to provide professional engineering services to the City of Mandan. Should you have any questions, comments, or concerns, please do not hesitate to contact us.

Sincerely,

**AE2S**

Tyler Fode PE  
Senior Project Engineer

#### Attachments

1. DN Tanks and Edling Electric Bid Forms
2. DN Tanks and Edling Electric Bid Attachments
3. Certified Bid Tabulation
4. C-510 Notice of Award

CC: Hristo Papalichev, NDDEQ (via email)  
Duane Friesz, City of Mandan (via email)  
Laith Hintz, AE2S (via email)  
Matt Bradley, AE2S (via email)





BUILT  
FOR THE FUTURE  
410 East Trinity Boulevard  
Grand Prairie, TX 75050

Address Services Requested

**BID ENCLOSED**

**BID FOR: Collins Avenue Reservoir Replacement – Contract 1**

Proposal Submitted To: ATTN: City Administrator  
City of Mandan  
205 2<sup>nd</sup> Avenue NW  
Mandan, ND 58554

Proposal Submitted By: DN Tanks, LLC  
410 East Trinity Blvd  
Grand Prairie, TX 75050



BUILT  
FOR THE FUTURE

Acknowledgement of Addendum No. 1 through 2



BUILT  
FOR THE FUTURE  
410 East Trinity Boulevard  
Grand Prairie, TX 75050

Address Services Requested

BID BOND ONLY

**BID FOR: Collins Avenue Reservoir Replacement – Contract 1**

Proposal Submitted To: ATTN: City Administrator  
City of Mandan  
205 2<sup>nd</sup> Avenue NW  
Mandan, ND 58554

Proposal Submitted By: DN Tanks, LLC  
410 East Trinity Blvd  
Grand Prairie, TX 75050



BUILT  
FOR THE FUTURE

Acknowledgement of Addendum No. 1 through 2

# *State of North Dakota*

## SECRETARY OF STATE



### CONTRACTOR LICENSE

NO: 000050033

CLASS: A

The undersigned, as Secretary of State of the state of North Dakota and Registrar of Contractors, certifies that **DN Tanks, LLC** whose address is in WAKEFIELD, MA, has filed in this office proper documents for a Contractor License valid until March 1, 2025, and has complied with all requirements of North Dakota Century Code, chapter 43-07.

**DN Tanks, LLC** is entitled to bid on and accept contracts as authorized by law under this license without limit as to the value of any single contract project.

Dated: February 8, 2024

A handwritten signature in black ink that reads "Michael Howe".

Michael Howe  
Secretary of State

# *State of North Dakota*

## SECRETARY OF STATE



### Certificate of Good Standing of DN Tanks, LLC

SOS Control ID#: 0005180399

Certificate #: 025601014-1

The undersigned, as Secretary of State of the state of North Dakota, hereby certifies that, according to the records of this office,

DN Tanks, LLC

a Limited Liability Company - Business - Foreign was formed under the laws of DELAWARE and filed with this office effective June 15, 2020. This entity has, as of the date set forth below, complied with all applicable North Dakota laws.

**ACCORDINGLY**, the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing.

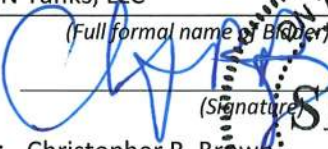
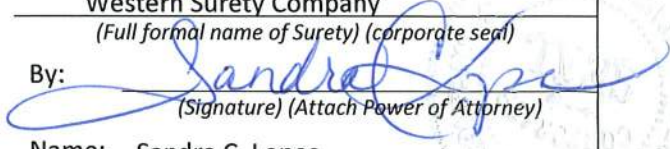
**DATE:** July 10, 2024

A handwritten signature in cursive script that reads "Michael Howe".

Michael Howe  
Secretary of State



## BID BOND (DAMAGES FORM)

|                                                                                                                                                                                                               |                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Bidder</b><br>Name: DN Tanks, LLC<br><br>Address (principal place of business):<br>410 East Trinity Boulevard<br>Grand Prairie, TX 75050                                                                   | <b>Surety</b><br>Name: Western Surety Company<br><br>Address (principal place of business):<br>151 N. Franklin Street<br>Chicago, IL 60606                                          |
| <b>Owner</b><br>Name: <b>City of Mandan</b><br><br>Address (principal place of business):<br><b>205 2<sup>nd</sup> Avenue NW</b><br><b>Mandan, ND 58554</b>                                                   | <b>Bid</b> <i>August 1, 2024</i><br><br>Project (name and location):<br><b>Collins Avenue Reservoir Replacement</b><br><b>Mandan, ND</b><br><br>Bid Due Date: <i>August 1, 2024</i> |
| <b>Bond</b><br>Bond Amount: Five Percent (5%) of Amount Bid<br>Date of Bond: <i>August 1, 2024</i>                                                                                                            |                                                                                                                                                                                     |
| Surety and Bidder, intending to be legally bound hereby, subject to the terms set forth in this Bid Bond, do each cause this Bid Bond to be duly executed by an authorized officer, agent, or representative. |                                                                                                                                                                                     |
| <b>Bidder</b><br>DN Tanks, LLC<br>(Full formal name of Bidder)                                                                                                                                                | <b>Surety</b><br>Western Surety Company<br>(Full formal name of Surety) (corporate seal)                                                                                            |
| By: <br>(Signature)                                                                                                        | By: <br>(Signature) (Attach Power of Attorney)                                                  |
| Name: <u>Christopher R. Brown</u> 2020<br>(Printed or typed)                                                                                                                                                  | Name: <u>Sandra C. Lopes</u><br>(Printed or typed)                                                                                                                                  |
| Title: <u>Vice President of Construction Western Region</u>                                                                                                                                                   | Title: <u>Attorney-in-Fact</u>                                                                                                                                                      |
| Attest: <br>(Signature)                                                                                                    | Attest: <br>(Signature)                                                                         |
| Name: <u>JoAnn C. Caster</u><br>(Printed or typed)                                                                                                                                                            | Name: <u>Nicole Roy</u><br>(Printed or typed)                                                                                                                                       |
| Title: <u>Assistant Secretary</u>                                                                                                                                                                             | Title: <u>Witness</u>                                                                                                                                                               |
| Notes: (1) Note: Addresses are to be used for giving any required notice. (2) Provide execution by any additional parties, such as joint venturers, if necessary.                                             |                                                                                                                                                                                     |

1. Bidder and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors, and assigns to pay to Owner upon default of Bidder any difference between the total amount of Bidder's Bid and the total amount of the Bid of the next lowest, responsible Bidder that submitted a responsive Bid, as determined by Owner, for the work required by the Contract Documents, provided that:
  - 1.1. If there is no such next Bidder, and Owner does not abandon the Project, then Bidder and Surety shall pay to Owner the bond amount set forth on the face of this Bond, and
  - 1.2. In no event will Bidder's and Surety's obligation hereunder exceed the bond amount set forth on the face of this Bond.
  - 1.3. Recovery under the terms of this Bond will be Owner's sole and exclusive remedy upon default of Bidder.
2. Default of Bidder occurs upon the failure of Bidder to deliver within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents.
3. This obligation will be null and void if:
  - 3.1. Owner accepts Bidder's Bid and Bidder delivers within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents, or
  - 3.2. All Bids are rejected by Owner, or
  - 3.3. Owner fails to issue a Notice of Award to Bidder within the time specified in the Bidding Documents (or any extension thereof agreed to in writing by Bidder and, if applicable, consented to by Surety when required by Paragraph 5 hereof).
4. Payment under this Bond will be due and payable upon default of Bidder and within 30 calendar days after receipt by Bidder and Surety of written notice of default from Owner, which notice will be given with reasonable promptness, identifying this Bond and the Project and including a statement of the amount due.
5. Surety waives notice of any and all defenses based on or arising out of any time extension to issue Notice of Award agreed to in writing by Owner and Bidder, provided that the total time for issuing Notice of Award including extensions will not in the aggregate exceed 120 days from Bid due date without Surety's written consent.
6. No suit or action will be commenced under this Bond prior to 30 calendar days after the notice of default required in Paragraph 4 above is received by Bidder and Surety, and in no case later than one year after the Bid due date.
7. Any suit or action under this Bond must be commenced only in a court of competent jurisdiction located in the state in which the Project is located.
8. Notices required hereunder must be in writing and sent to Bidder and Surety at their respective addresses shown on the face of this Bond. Such notices may be sent by personal delivery, commercial courier, or by United States Postal Service registered or certified mail, return receipt requested, postage pre-paid, and will be deemed to be effective upon receipt by the party concerned.
9. Surety shall cause to be attached to this Bond a current and effective Power of Attorney evidencing the authority of the officer, agent, or representative who executed this Bond on behalf of Surety to execute, seal, and deliver such Bond and bind the Surety thereby.
10. This Bond is intended to conform to all applicable statutory requirements. Any applicable requirement of any applicable statute that has been omitted from this Bond will be deemed to be included herein as if set forth at length. If any provision of this Bond conflicts with any applicable statute, then the provision of said statute governs and the remainder of this Bond that is not in conflict therewith continues in full force and effect.
11. The term "Bid" as used herein includes a Bid, offer, or proposal as applicable.

# Western Surety Company

## POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That WESTERN SURETY COMPANY, a South Dakota corporation, is a duly organized and existing corporation having its principal office in the City of Sioux Falls, and State of South Dakota, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

**Jean M Feeney, Michael J Cusack, John J Gambino, Nicole Roy, Eric J Canterbury, Natalie Coneys, Sandra C Lopes, Nicholas Labbe, Laurie Rothwell, Gabriela C Wittich, Charity Hitchcock, Individually**

of Boston, MA, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

### - In Unlimited Amounts -

and to bind it thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the corporation and all the acts of said Attorney, pursuant to the authority hereby given, are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the Authorizing By-Laws and Resolutions printed at the bottom of this page, duly adopted, as indicated, by the shareholders of the corporation.

In Witness Whereof, WESTERN SURETY COMPANY has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 11th day of July, 2024.



WESTERN SURETY COMPANY

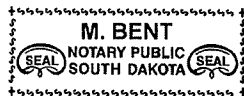
Larry Kasten, Vice President

State of South Dakota }  
County of Minnehaha } ss

On this 11th day of July, 2024, before me personally came Larry Kasten, to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of WESTERN SURETY COMPANY described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporation and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporation.

My commission expires

March 2, 2026



M. Bent, Notary Public

### CERTIFICATE

I, Paula Kolsrud, Assistant Secretary of WESTERN SURETY COMPANY do hereby certify that the Power of Attorney hereinabove set forth is still in force, and further certify that the By-Law and Resolutions of the corporation printed below this certificate are still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said corporation this 1st day of August, 2024.



WESTERN SURETY COMPANY

Paula Kolsrud, Assistant Secretary

### Authorizing By-Laws and Resolutions

#### ADOPTED BY THE SHAREHOLDERS OF WESTERN SURETY COMPANY

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the shareholders of the Company.

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, and Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

This Power of Attorney is signed by Larry Kasten, Vice President, who has been authorized pursuant to the above Bylaw to execute power of attorneys on behalf of Western Surety Company.

This Power of Attorney may be signed by digital signature and sealed by a digital or otherwise electronic-formatted corporate seal under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 27th day of April, 2022:

"RESOLVED: That it is in the best interest of the Company to periodically ratify and confirm any corporate documents signed by digital signatures and to ratify and confirm the use of a digital or otherwise electronic-formatted corporate seal, each to be considered the act and deed of the Company."

Go to [www.cnasurety.com](http://www.cnasurety.com) > Owner / Obligor Services > Validate Bond Coverage, if you want to verify bond authenticity.



**BUILT**  
FOR THE FUTURE

**DN TANKS LLC**

**Secretary's Certificate**

The undersigned, being a duly elected Secretary of DN Tanks LLC, a Delaware limited liability company (the "**Company**"), does hereby certify that:

The following is a complete, true and correct list of the officers of the Company as of the date set forth below, as elected by the Board of Directors of the Company.

|                      |                                                    |
|----------------------|----------------------------------------------------|
| William F. Crowley   | President & Chief Executive Officer                |
| Michael Azarela      | Executive Vice President, Treasurer                |
| Jeffrey C. Tellier   | Director of Finance, Secretary                     |
| Andrew Minogue       | Vice President of Engineering, Assistant Secretary |
| Stephen M. Kane      | Assistant Secretary                                |
| Erin Colliton        | Assistant Secretary                                |
| JoAnn C. Caster      | Assistant Secretary                                |
| Matthew Ford         | Assistant Secretary                                |
| Thomas P. Christie   | Executive Vice President of Work Acquisition       |
| David Gourley        | Executive Vice President of Special Operations     |
| Stephen Boyle        | Senior Vice President of Estimating                |
| James P. Diggins     | Vice President of Construction, East Region        |
| Christopher R. Brown | Vice President of Construction, Central Region     |
| Michael J. Dufresne  | Vice President of Construction, West Region        |
| Atticus Mulholland   | Construction Manager                               |
| Denise Vuilleumier   | Director of Human Resources                        |

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate as of the 3<sup>rd</sup> day of April, 2024.

**DN TANKS LLC**

By:   
Jeffrey C. Tellier  
Secretary





**BUILT**  
FOR THE FUTURE

April 3, 2024

Reference: Bidding and Proposal Submission Documents – Authority to Sign

This letter authorizes, during the bidding process and prior to award of a project, the following individuals at DN Tanks, LLC to execute bid and proposal submission documents in the name of and on behalf of DN Tanks, LLC.

|                        |                    |                         |
|------------------------|--------------------|-------------------------|
| Ryan Aldrich           | Francis P. Houston | Jeffery J. Pfarr        |
| Tyler Bernhard         | Jamie C. Howard    | Brandon Price           |
| Adam P. Blaser         | Jeremy W. Jacobs   | Stephen Puopolo         |
| Felipe Da Silva        | Kyle M. Koebbe     | Jacob Roundy            |
| Duncan Dean            | Kyle K. Leininger  | Christopher A.J. Saxton |
| Kevin Desjardins       | Terry Marshall     | Brendan Shea            |
| Dan Gancher            | Corey M. Meyers    | Sean Sudol              |
| Ashley Gonzalez        | Matt Nedella       | Ryan Wessels            |
| Antonio Hernandez, Jr. | Joseph G. Pappo    | Joe Zaccheo             |
| Michael Hinshaw        | Kevin G. Peacock   |                         |

Sincerely,

William F. Crowley  
President-CEO

## ARTICLE 1—GENERAL INFORMATION

### 1.01 Provide contact information for the Business:

|                                       |                                                |                |                         |
|---------------------------------------|------------------------------------------------|----------------|-------------------------|
| Legal Name of Business:               | DN Tanks, LLC                                  |                |                         |
| Corporate Office                      |                                                |                |                         |
| Name:                                 | Stephen P. Boyle                               | Phone number:  | (781) 246-1133          |
| Title:                                | Senior Vice President of Estimating            | Email address: | Steve.Boyle@dntanks.com |
| Business address of corporate office: | 11 Teal Road                                   |                |                         |
|                                       | Wakefield, MA 01880                            |                |                         |
| Local Office                          |                                                |                |                         |
| Name:                                 | Christopher R. Brown                           | Phone number:  | (972) 823-3300          |
| Title:                                | Vice President of Construction, Central Region | Email address: | Chris.Brown@dntanks.com |
| Business address of local office:     | 410 East Trinity Blvd                          |                |                         |
|                                       | Grand Prairie, TX 75050                        |                |                         |

### 1.02 Provide information on the Business's organizational structure:

|                                                                                                                                            |                                                                                                                        |                                                                                                      |          |
|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------|
| Form of Business:                                                                                                                          | <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation |                                                                                                      |          |
| <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Joint Venture comprised of the following companies: |                                                                                                                        |                                                                                                      |          |
| 1.                                                                                                                                         |                                                                                                                        |                                                                                                      |          |
| 2.                                                                                                                                         |                                                                                                                        |                                                                                                      |          |
| 3.                                                                                                                                         |                                                                                                                        |                                                                                                      |          |
| Provide a separate Qualification Statement for each Joint Venturer.                                                                        |                                                                                                                        |                                                                                                      |          |
| Date Business was formed:                                                                                                                  | 1/1/2020                                                                                                               | State in which Business was formed:                                                                  | Delaware |
| Is this Business authorized to operate in the Project location?                                                                            |                                                                                                                        | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending |          |

### 1.03 Identify all businesses that own Business in whole or in part (25% or greater), or that are wholly or partly (25% or greater) owned by Business:

|                   |                                      |              |                         |
|-------------------|--------------------------------------|--------------|-------------------------|
| Name of business: | Natgun Corporation                   | Affiliation: | Wholly Owned Subsidiary |
| Address:          | 11 Teal Road, Wakefield, MA 01880    |              |                         |
| Name of business: | DYK, Inc.                            | Affiliation: | Wholly Owned Subsidiary |
| Address:          | 351 Cypress Lane, El Cajon, CA 92020 |              |                         |
| Name of business: | DN Tanks, Inc.                       | Affiliation: | Wholly Owned Subsidiary |
| Address:          | 11 Teal Road, Wakefield, MA 01880    |              |                         |

1.04 Provide information regarding the Business's officers, partners, and limits of authority.

|                                                                                                   |                    |                     |                                               |
|---------------------------------------------------------------------------------------------------|--------------------|---------------------|-----------------------------------------------|
| Name:                                                                                             | William F. Crowley | Title:              | President and CEO, Director                   |
| Authorized to sign contracts: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                    | Limit of Authority: | \$ N/A                                        |
| Name:                                                                                             | Michael Azarela    | Title:              | Executive Vice President, Treasurer, Director |
| Authorized to sign contracts: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                    | Limit of Authority: | \$ N/A                                        |
| Name:                                                                                             | Jeffrey Tellier    | Title:              | Secretary                                     |
| Authorized to sign contracts: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                    | Limit of Authority: | \$ N/A                                        |
| Name:                                                                                             |                    | Title:              |                                               |

## ARTICLE 2—LICENSING

2.01 Provide information regarding licensure for Business:

|                   |                                                                                     |                  |               |
|-------------------|-------------------------------------------------------------------------------------|------------------|---------------|
| Name of License:  | Contractor License, Class A                                                         |                  |               |
| Licensing Agency: | North Dakota Secretary of State                                                     |                  |               |
| License No:       | 000050033                                                                           | Expiration Date: | March 1, 2025 |
| Name of License:  | DN Tanks, LLC is licensed in multiple state. A full list is available upon request. |                  |               |
| Licensing Agency: |                                                                                     |                  |               |
| License No:       |                                                                                     | Expiration Date: |               |

## ARTICLE 3—DIVERSE BUSINESS CERTIFICATIONS

3.01 Provide information regarding Business's Diverse Business Certification, if any. Provide evidence of current certification.

| Certification                                                                   | Certifying Agency | Certification Date |
|---------------------------------------------------------------------------------|-------------------|--------------------|
| <input type="checkbox"/> Disadvantaged Business Enterprise                      |                   |                    |
| <input type="checkbox"/> Minority Business Enterprise                           |                   |                    |
| <input type="checkbox"/> Woman-Owned Business Enterprise                        |                   |                    |
| <input type="checkbox"/> Small Business Enterprise                              |                   |                    |
| <input type="checkbox"/> Disabled Business Enterprise                           |                   |                    |
| <input type="checkbox"/> Veteran-Owned Business Enterprise                      |                   |                    |
| <input type="checkbox"/> Service-Disabled Veteran-Owned Business                |                   |                    |
| <input type="checkbox"/> HUBZone Business (Historically Underutilized) Business |                   |                    |
| <input type="checkbox"/> Other                                                  |                   |                    |
| <input checked="" type="checkbox"/> None                                        |                   |                    |

## ARTICLE 4—SAFETY

4.01 Provide information regarding Business's safety organization and safety performance.

|                                     |                                                 |            |
|-------------------------------------|-------------------------------------------------|------------|
| Name of Business's Safety Officer:  | Jack Brazil, Vice President, Director of Safety |            |
| Safety Certifications               |                                                 |            |
| Certification Name                  | Issuing Agency                                  | Expiration |
| Certified Safety Professional (CSP) | BCSP                                            | 6/30/2026  |
|                                     |                                                 |            |

4.02 Provide Worker's Compensation Insurance Experience Modification Rate (EMR), Total Recordable Frequency Rate (TRFR) for incidents, and Total Number of Recorded Manhours (MH) for the last 3 years and the EMR, TRFR, and MH history for the last 3 years of any proposed Subcontractor(s) that will provide Work valued at 10% or more of the Contract Price. Provide documentation of the EMR history for Business and Subcontractor(s).

| Year                      | 2023        |             |                | 2022        |             |                | 2021        |             |                |
|---------------------------|-------------|-------------|----------------|-------------|-------------|----------------|-------------|-------------|----------------|
| Company                   | EMR         | TRFR        | MH             | EMR         | TRFR        | MH             | EMR         | TRFR        | MH             |
| DN Tanks, LLC             | 0.74        | 1.04        | 1,535,400      | 0.74        | 1.80        | 1,442,700      | 0.80        | 1.06        | 1,321,954      |
| <i>U.S. SiteWork, Inc</i> | <i>0.76</i> | <i>0.00</i> | <i>119,313</i> | <i>0.74</i> | <i>0.00</i> | <i>137,443</i> | <i>0.74</i> | <i>0.00</i> | <i>101,145</i> |

## ARTICLE 5—FINANCIAL

5.01 Provide information regarding the Business's financial stability. Provide the most recent audited financial statement, and if such audited financial statement is not current, also provide the most current financial statement.

|                                                                                                                             |                                         |                                   |
|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------|
| Financial Institution:                                                                                                      | Citizens Bank                           |                                   |
| Business address:                                                                                                           | 1 Citizens Drive<br>Riverside, RI 02915 |                                   |
|                                                                                                                             |                                         | See Attached Financial Letter     |
| Date of Business's most recent financial statement:                                                                         |                                         | <input type="checkbox"/> Attached |
| Date of Business's most recent audited financial statement:                                                                 |                                         | <input type="checkbox"/> Attached |
| Financial indicators from the most recent financial statement                                                               |                                         |                                   |
| Contractor's Current Ratio (Current Assets ÷ Current Liabilities)                                                           |                                         |                                   |
| Contractor's Quick Ratio ((Cash and Cash Equivalents + Accounts Receivable + Short Term Investments) ÷ Current Liabilities) |                                         |                                   |

## ARTICLE 1—GENERAL INFORMATION

### 1.01 Provide contact information for the Business:

|                                                     |                        |                |                           |
|-----------------------------------------------------|------------------------|----------------|---------------------------|
| Legal Name of Business:                             | U.S. SiteWork, Inc.    |                |                           |
| Corporate Office                                    |                        |                |                           |
| Name:                                               | Blake Smith            | Phone number:  | (763) 280-8508            |
| Title:                                              | VP of Special Projects | Email address: | estimating@ussitework.com |
| Business address of corporate office:               | 11040 183rd Circle NW  |                |                           |
|                                                     | Suite B                |                |                           |
|                                                     | Elk River, MN 55330    |                |                           |
| Local Office (if work done out of different office) |                        |                |                           |
| Name:                                               | N/A                    | Phone number:  | N/A                       |
| Title:                                              | N/A                    | Email address: | N/A                       |
| Business address of local office:                   | N/A                    |                |                           |
|                                                     | N/A                    |                |                           |
|                                                     | N/A                    |                |                           |

## ARTICLE 4—SAFETY

### 4.01 Provide information regarding Business's safety organization and safety performance.

|                                    |                |  |            |
|------------------------------------|----------------|--|------------|
| Name of Business's Safety Officer: | Bart Anderson  |  |            |
| Safety Certifications              |                |  |            |
| Certification Name                 | Issuing Agency |  | Expiration |
| N/A                                |                |  |            |
| N/A                                |                |  |            |

### 4.02 Provide Worker's Compensation Insurance Experience Modification Rate (EMR), Total Recordable Frequency Rate (TRFR) for incidents, and Total Number of Recorded Manhours (MH) for the last 3 years and the EMR, TRFR, and MH history for the last 3 years of any proposed Subcontractor(s) that will provide Work valued at 10% or more of the Contract Price. Provide documentation of the EMR history for Business and Subcontractor(s).

| Year                | 2023 |      |         | 2022 |      |         | 2021 |      |         |
|---------------------|------|------|---------|------|------|---------|------|------|---------|
| Company             | EMR  | TRFR | MH      | EMR  | TRFR | MH      | EMR  | TRFR | MH      |
| U.S. SiteWork, Inc. | 0.76 | 0.00 | 119,313 | 0.74 | 0.00 | 137,443 | 0.74 | 0.00 | 101,145 |
| N/A                 |      |      |         |      |      |         |      |      |         |

## ARTICLE 6—SURETY INFORMATION

- 6.01 Provide information regarding the surety company that will issue required bonds on behalf of the Business, including but not limited to performance and payment bonds.

|                                                                                                                                                                                                                                                                          |                             |                 |                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------|---------------------------------------------------------------------|
| Surety Name:                                                                                                                                                                                                                                                             | Western Surety / CNA Surety |                 |                                                                     |
| Surety is a corporation organized and existing under the laws of the state of:                                                                                                                                                                                           |                             |                 | South Dakota (Western)                                              |
| Is surety authorized to provide surety bonds in the Project location?                                                                                                                                                                                                    |                             |                 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Is surety listed in "Companies Holding Certificates of Authority as Acceptable Sureties on Federal Bonds and as Acceptable Reinsuring Companies" published in Department Circular 570 (as amended) by the Bureau of the Fiscal Service, U.S. Department of the Treasury? |                             |                 |                                                                     |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                      |                             |                 |                                                                     |
| Mailing Address<br>(principal place of business):                                                                                                                                                                                                                        | 53 State Street, Suite 510  |                 |                                                                     |
|                                                                                                                                                                                                                                                                          | Boston, MA 02109            |                 |                                                                     |
|                                                                                                                                                                                                                                                                          |                             |                 |                                                                     |
| Physical Address<br>(principal place of business):                                                                                                                                                                                                                       | 53 State Street, Suite 510  |                 |                                                                     |
|                                                                                                                                                                                                                                                                          | Boston, MA 02109            |                 |                                                                     |
|                                                                                                                                                                                                                                                                          |                             |                 |                                                                     |
| Phone (main):                                                                                                                                                                                                                                                            | (800) 331-6053              | Phone (claims): | (877) 672-6115                                                      |

Verification: Daniel.Rapp@cnasurety.com

## ARTICLE 7—INSURANCE

- 7.01 Provide information regarding Business's insurance company(s), including but not limited to its Commercial General Liability carrier. Provide information for each provider.

|                                                                                 |                                                                            |                                                                                           |
|---------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| Name of insurance provider, and type of policy (CLE, auto, etc.):               |                                                                            |                                                                                           |
| Insurance Provider                                                              | Type of Policy (Coverage Provided)                                         |                                                                                           |
| Liberty Mutual Fire Insurance Company /                                         | General Liability, Auto Liability                                          |                                                                                           |
| Liberty Mutual Insurance Corporation                                            | Worker's Comp/Employer's Liability                                         |                                                                                           |
| Starr Indemnity & Liability Company                                             | Excess Liability (Umbrella)                                                |                                                                                           |
| Zurich American Insurance Company                                               | Builder's Risk                                                             |                                                                                           |
| Are providers licensed or authorized to issue policies in the Project location? |                                                                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                       |
| Does provider have an A.M. Best Rating of A-VII or better?                      |                                                                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                       |
| Mailing Address<br>(principal place of business):                               | Liberty: 175 Berkeley St, Boston, MA 02116                                 |                                                                                           |
|                                                                                 | Starr: 399 Park Ave, 8th Floor, New York, NY 10022                         |                                                                                           |
|                                                                                 | Zurich: 1299 Zurich Way, Schaumburg, IL 60196-1056                         |                                                                                           |
| Physical Address<br>(principal place of business):                              | Same as above                                                              |                                                                                           |
|                                                                                 |                                                                            |                                                                                           |
|                                                                                 |                                                                            |                                                                                           |
| Phone (main):                                                                   | Liberty: (800) 344-0197<br>Starr: (866) 519-2522<br>Zurich: (800) 382-2150 | Phone (claims): Liberty: (800) 329-3297<br>Starr: (877) 869-0226<br>Zurich (800) 382-2150 |

EJCDC C-451, Qualifications Statement.

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## ARTICLE 8—CONSTRUCTION EXPERIENCE

8.01 Provide information that will identify the overall size and capacity of the Business.

|                                                |               |
|------------------------------------------------|---------------|
| Average number of current full-time employees: | 520           |
| Estimate of revenue for the current year:      | \$320,000,000 |
| Estimate of revenue for the previous year:     | \$318,000,000 |

8.02 Provide information regarding the Business's previous contracting experience.

|                                                                                                                                                                                  |     |                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------|
| Years of experience with projects like the proposed project:                                                                                                                     |     |                      |
| As a general contractor:                                                                                                                                                         | 40+ | As a joint venturer: |
| Has Business, or a predecessor in interest, or an affiliate identified in Paragraph 1.03:                                                                                        |     |                      |
| Been disqualified as a bidder by any local, state, or federal agency within the last 5 years?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No             |     |                      |
| Been barred from contracting by any local, state, or federal agency within the last 5 years?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No              |     |                      |
| Been released from a bid in the past 5 years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                |     |                      |
| Defaulted on a project or failed to complete any contract awarded to it? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                     |     |                      |
| Refused to construct or refused to provide materials defined in the contract documents or in a change order? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |                      |
| Been a party to any currently pending litigation or arbitration? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                             |     |                      |
| Provide full details in a separate attachment if the response to any of these questions is Yes.                                                                                  |     |                      |

8.03 List all projects currently under contract in Schedule A and provide indicated information.

8.04 List a minimum of three and a maximum of six projects completed in the last 5 years in Schedule B and provide indicated information to demonstrate the Business's experience with projects similar in type and cost of construction.

8.05 In Schedule C, provide information on key individuals whom Business intends to assign to the Project. Provide resumes for those individuals included in Schedule C. Key individuals include the Project Manager, Project Superintendent, Quality Manager, and Safety Manager. Resumes may be provided for Business's key leaders as well.

## ARTICLE 9—REQUIRED ATTACHMENTS

9.01 Provide the following information with the Statement of Qualifications:

- If Business is a Joint Venture, separate Qualifications Statements for each Joint Venturer, as required in Paragraph 1.02.
- Diverse Business Certifications if required by Paragraph 3.01.
- Certification of Business's safety performance if required by Paragraph 4.02.
- Financial statements as required by Paragraph 5.01.

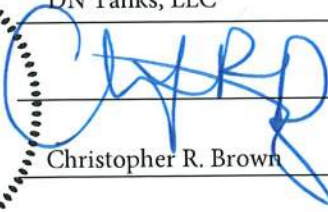
- E. Attachments providing additional information as required by Paragraph 8.02.
- F. Schedule A (Current Projects) as required by Paragraph 8.03.
- G. Schedule B (Previous Experience with Similar Projects) as required by Paragraph 8.04.
- H. Schedule C (Key Individuals) and resumes for the key individuals listed, as required by Paragraph 8.05.
- I. Additional items as pertinent.



This Statement of Qualifications is offered by:



Business: DN Tanks, LLC  
(typed or printed name of organization) A Delaware limited liability company

By:   
(individual's signature)

Name: Christopher R. Brown  
(typed or printed)

Title: Vice President of Construction, Central Region  
(typed or printed)

Date: August 1, 2024  
(date signed)

(If Business is a corporation, a partnership, or a joint venture, attach evidence of authority to sign.)

Attest:   
(individual's signature)

Name: JoAnn C. Caster  
(typed or printed)

Title: Assistant Secretary  
(typed or printed)

Address for giving notices:

410 East Trinity Blvd  
Grand Prairie, TX 75050

Designated Representative:

Name: Chris Saxton  
(typed or printed)

Title: Rocky Mountain Regional Manager  
(typed or printed)

Address: 5935 South Zang, Suite 295  
Littleton, CO 80127

Phone: (701) 425-1384

Email: Chris.Saxton@dntanks.com



**BUILT**  
FOR THE FUTURE

January 9, 2024

To Whom it may concern:

DN Tanks is a privately held company with an established track record of over 60 years of successfully designing and building AWWA D110 circular prestressed concrete tanks. DN Tanks has constructed large, complex projects both domestically and internationally while demonstrating success with consistent cost and schedule performance.

DN Tanks is a financially sound company with cash and investment balances exceeding (8) eight figures. DN Tanks has established a \$25M revolving line of credit with a reputable bank and has the full line available for use. In addition to its strong financial profile, DN Tanks can provide bonding for single projects up to \$200M with an aggregate bonding capacity of \$750M.

DN Tanks considers financial information, including its financial statements, to be highly confidential and does not widely distribute this information. However, we understand that many prequalification practices involve gaining an understanding of the creditworthiness of a contractor.

In lieu of providing financial statements, attached are reference letters from our Corporate Banking and Surety Partners demonstrating their support of DN Tanks and its management team while acknowledging the financial strength and track record of the Company.

If you have any further questions, I can be reached at (781) 246-1133 or via email at [jeff.tellier@dntanks.com](mailto:jeff.tellier@dntanks.com).

Regards,

Jeff Tellier  
Director of Finance, Secretary  
DN Tanks  
11 Teal Road  
Wakefield, MA 01880



MS1410  
28 State Street  
Boston, MA 02109

January 8, 2024

Mr. Jeff Tellier  
Director of Finance  
DN Tanks, LLC  
11 Teal Road  
Wakefield, MA 01880

Re: Bank Reference

Dear Jeff,

As the Senior Vice President of commercial markets for Citizens Bank in Massachusetts, I want to communicate our bank's institutional support for DN Tanks, LLC. At Citizens, we partner with and support strong businesses and talented management teams that can execute upon their business models and have a differentiated ability to deliver value to their customers. In addition, Citizens has a critical mission to invest in our region and in our local industries in support of the Massachusetts and New England economies.

We consider DN Tanks a valued client and to support their business initiatives we provide the company with an eight figure line of credit as well as treasury and deposit services. It is a priority of Citizens to support the company because of our confidence in the management team and their business model.

If you have any questions or need additional information, please don't hesitate to contact me directly at 508-259-8012.

Sincerely,

*Denise McGeough*

Denise D. McGeough  
Senior Vice President





36 Washington Street  
Norwell, MA 02061

January 11, 2024

Mr. Jeff Tellier  
Director of Finance  
DN Tanks, Inc.  
11 Teal Road  
Wakefield, MA 01880

Re: Bank Reference

Dear Jeff,

As the Senior Vice President of commercial markets for Citizens Bank in Massachusetts, I want to communicate our bank's institutional support for DN Tanks, Inc. At Citizens, we partner with and support strong businesses and talented management teams that can execute upon their business models and have a differentiated ability to deliver value to their customers. In addition, Citizens has a critical mission to invest in our region and in our local industries in support of the Massachusetts and New England economies.

We consider DN Tanks a valued client and to support their business initiatives we provide the company with an eight-figure line of credit as well as treasury and deposit services. It is a priority of Citizens to support the company because of our confidence in the management team and their business model.

If you have any questions or need additional information, please don't hesitate to contact me directly at 508-259-8012.

Sincerely,

*Denise McGeough*

Denise D. McGeough  
Senior Vice President



**BUILT**  
FOR THE FUTURE

#### **QUALIFICATIONS ARTICLE 8.02**

**Been a party to any currently pending litigation or arbitration?**

**Yes – The company is involved in various legal proceedings arising in the ordinary course of business, some of which are covered in whole or in part by insurance. While the outcome of these proceedings cannot be predicted with certainty, the Company does not believe that any of these proceedings will have a material adverse effect on the financial condition of the Company.**

# **Schedule A—Current Projects**

|                                                                                                                     |  |                                                                                           |  |                             |  |                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------|--|-----------------------------|--|---------------------------------------------------------------------|--|
| Name of Organization                                                                                                |  | DN Tanks, LLC                                                                             |  | Project Name                |  | High Pressure Water System Upgrades - Phase III Projects (Rebid)    |  |
| Project Owner                                                                                                       |  | City of Lander (Wyoming)                                                                  |  | Project Name                |  | High Pressure Water System Upgrades - Phase III Projects (Rebid)    |  |
| General Description of Project                                                                                      |  | Subcontractor for construction of a 4.0 MG AWWA D110 Type III Ground Storage Tank         |  | Project Name                |  | High Pressure Water System Upgrades - Phase III Projects (Rebid)    |  |
| Project Cost                                                                                                        |  | \$3,175,000                                                                               |  | Date Project                |  | 5/6/24 start with anticipated completion 10/11/24                   |  |
| Key Project Personnel                                                                                               |  | Project Manager                                                                           |  | Project Superintendent      |  | Safety Manager                                                      |  |
| Name                                                                                                                |  | Jason Phillippi                                                                           |  | Francisco Villa             |  | Ricky Martinez                                                      |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  | Title/Position                                                                            |  | Organization                |  | Telephone                                                           |  |
| Owner                                                                                                               |  | Lance Hopkin, P.E.                                                                        |  | City Engineer, PW Director  |  | (307) 332-2870                                                      |  |
| Designer                                                                                                            |  | Uriel Shelby, P.E.                                                                        |  | Civil Engineer              |  | (307) 228-6075                                                      |  |
| Construction Manager                                                                                                |  | Chad Connell                                                                              |  | Vice President              |  | (307) 332-4933                                                      |  |
| Project Owner                                                                                                       |  | Oglala Sioux Rural Water Supply System (Vivian, SD)                                       |  | Project Name                |  | South Coreline Reservoir 2 Upgrades (2MG)                           |  |
| General Description of Project                                                                                      |  | Subcontractor for construction of a 2.0 MG AWWA D110 Type III Ground Storage Tank         |  | Date Project                |  | 7/8/24 start with anticipated completion 11/11/24                   |  |
| Project Cost                                                                                                        |  | \$2,515,000                                                                               |  | Date Project                |  | 7/8/24 start with anticipated completion 11/11/24                   |  |
| Key Project Personnel                                                                                               |  | Project Manager                                                                           |  | Project Superintendent      |  | Safety Manager                                                      |  |
| Name                                                                                                                |  | Joseph Brown                                                                              |  | Jesus Meza                  |  | Ricky Martinez                                                      |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  | Title/Position                                                                            |  | Organization                |  | Telephone                                                           |  |
| Owner                                                                                                               |  | Ron Blacksmith                                                                            |  | Manager - WTP               |  | (605) 223-9292                                                      |  |
| Designer                                                                                                            |  | Brett Morlok, P.E.                                                                        |  | Engineer                    |  | (701) 221-0530                                                      |  |
| Construction Manager                                                                                                |  | Gerrick McComsey                                                                          |  | President                   |  | (605) 945-1260                                                      |  |
| Project Owner                                                                                                       |  | North Dakota State Water Commission                                                       |  | Project Name                |  | Bottineau Reservoir and Booster Pump Station (Contract 4-Reservoir) |  |
| General Description of Project                                                                                      |  | General Contractor for construction of 3.0 MG AWWA D110 Type III Ground Storage Reservoir |  | Date Project                |  | 6/3/24 start with anticipated tank completion 10/10/24              |  |
| Project Cost                                                                                                        |  | \$3,885,000                                                                               |  | Date Project                |  | 6/3/24 start with anticipated tank completion 10/10/24              |  |
| Key Project Personnel                                                                                               |  | Project Manager                                                                           |  | Project Superintendent      |  | Safety Manager                                                      |  |
| Name                                                                                                                |  | Adrian Domek                                                                              |  | Mike Borst                  |  | Ricky Martinez                                                      |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  | Title/Position                                                                            |  | Organization                |  | Telephone                                                           |  |
| Owner                                                                                                               |  | John Paczkowski, P.E.                                                                     |  | NAWS-State Engineer         |  | (701) 328-2752                                                      |  |
| Designer                                                                                                            |  | Ryan J. David, P.E.                                                                       |  | Civil Engineer              |  | (701) 751-6285                                                      |  |
| Construction Manager                                                                                                |  | Chris Brown                                                                               |  | VP of Construction, Central |  | (972) 823-3300                                                      |  |

### Schedule B—Previous Experience with Similar Projects

|                                                                                                                     |  |                                                                                                                     |  |                          |  |                                                                       |  |
|---------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------|--|--------------------------|--|-----------------------------------------------------------------------|--|
| Name of Organization                                                                                                |  | DN Tanks, LLC                                                                                                       |  | Project Name             |  | Rocky Boy's Water Treatment Plant Phase 1, Contract #2 Ground Storage |  |
| Project Owner                                                                                                       |  | Chippewa Cree Construction Corporation (MT)                                                                         |  | Project Name             |  | Rocky Boy's Water Treatment Plant Phase 1, Contract #2 Ground Storage |  |
| General Description of Project                                                                                      |  | New Construction of AWWA D110 Type III 3.0 MG Ground Storage Reservoir (143' ID x 25' SWD) with associated sitework |  | Date Project             |  | Completed 9/15/2023                                                   |  |
| Project Cost                                                                                                        |  | \$5,195,254.00                                                                                                      |  | Date Project             |  | Completed 9/15/2023                                                   |  |
| Key Project Personnel                                                                                               |  | Project Manager                                                                                                     |  | Project Superintendent   |  | Safety Manager                                                        |  |
| Name                                                                                                                |  | Joseph Zaccheo                                                                                                      |  | Jeremy Heilig            |  | Jeremy Heilig                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | Shalee Russette                                                                                                     |  | Project Manager          |  | Chippewa Cree Const Corp                                              |  |
| Designer                                                                                                            |  | David Carlson, P.E.                                                                                                 |  | Operations Manager       |  | AE2S, Inc.                                                            |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
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|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
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| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner                                                                                                               |  | James Suta                                                                                                          |  | Superintendent           |  | City of Cut Bank                                                      |  |
| Designer                                                                                                            |  | Joel Pilcher, P.E.                                                                                                  |  | Project Manager          |  | Great West Engineering                                                |  |
| Construction Manager                                                                                                |  | Jim Diggins                                                                                                         |  | VP of Construction, East |  | DN Tanks, LLC                                                         |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                                                                                                                     |  |                          |  |                                                                       |  |
|                                                                                                                     |  | Name                                                                                                                |  | Title/Position           |  | Organization                                                          |  |
| Owner</                                                                                                             |  |                                                                                                                     |  |                          |  |                                                                       |  |

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## Schedule B—Previous Experience with Similar Projects

|                                                                                                                     |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|--|
| Name of Organization                                                                                                |                       | DN Tanks, LLC                                                                                                                        |                           | Project Name           |                                   | Water Reservoir Replacement 2021, Contract 1: Water Storage Tank, Project # 20848                                 |  |
| Project Owner                                                                                                       |                       | City of Hazen, ND                                                                                                                    |                           | Project Name           |                                   | New Construction of AWWA D110 Type III 0.75 MG Ground Storage Tank (48.25' ID x 55' SWD) with associated sitework |  |
| General Description of Project                                                                                      |                       | New Construction of AWWA D110 Type III 0.75 MG Ground Storage Tank (48.25' ID x 55' SWD) with associated sitework                    |                           | Date Project           |                                   | Completed 9/16/2022                                                                                               |  |
| Project Cost                                                                                                        |                       | \$1,351,301.00                                                                                                                       |                           | Project Superintendent |                                   | Safety Manager                                                                                                    |  |
| Key Project Personnel                                                                                               |                       | Project Manager                                                                                                                      |                           | Jesus Meza             |                                   | Quality Control Manager                                                                                           |  |
| Name                                                                                                                |                       | Luis Fuzeti                                                                                                                          |                           | Jesus Meza             |                                   | Jesus Meza                                                                                                        |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
|                                                                                                                     | Name                  | Title/Position                                                                                                                       | Organization              | Telephone              | Email                             |                                                                                                                   |  |
| Owner                                                                                                               | Dave Brousseau        | Public Works Superintendent                                                                                                          | City of Hazen             | (701) 924-4236         | hazennd_pw@westriv.com            |                                                                                                                   |  |
| Designer                                                                                                            | Jerod Klabunde, P.E.  | Senior Project Manager                                                                                                               | Moore Engineering, Inc.   | (701) 751-8380         | jklabunde@mooreengineeringinc.com |                                                                                                                   |  |
| Construction Manager                                                                                                | Atticus Mulholland    | Construction Manager                                                                                                                 | DN Tanks, LLC             | (972) 823-3300         | Atticus.Mulholland@dn tanks.com   |                                                                                                                   |  |
|                                                                                                                     |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
| Project Owner                                                                                                       |                       | North Dakota State Water Commission                                                                                                  |                           | Project Name           |                                   | NAW5 Lansford Reservoir and Booster Pump Station, Contract 5 (Option 3)                                           |  |
| General Description of Project                                                                                      |                       | New Construction of AWWA D110 Type III 4.5 MG Ground Storage Reservoir (148' ID x 35' SWD) with pump station and associated sitework |                           | Date Project           |                                   | Completed 7/15/2022                                                                                               |  |
| Project Cost                                                                                                        |                       | \$3,146,351.00                                                                                                                       |                           | Project Superintendent |                                   | Safety Manager                                                                                                    |  |
| Key Project Personnel                                                                                               |                       | Project Manager                                                                                                                      |                           | Martin Woodward        |                                   | Quality Control Manager                                                                                           |  |
| Name                                                                                                                |                       | Jake Sreca                                                                                                                           |                           | Martin Woodward        |                                   | Martin Woodward                                                                                                   |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
|                                                                                                                     | Name                  | Title/Position                                                                                                                       | Organization              | Telephone              | Email                             |                                                                                                                   |  |
| Owner                                                                                                               | John Paczkowski, P.E. | State Engineer                                                                                                                       | ND State Water Commission | (701) 328-2752         | jpaczowski@nd.gov                 |                                                                                                                   |  |
| Designer                                                                                                            | Rusten Roteliuk, P.E. | Project Manager                                                                                                                      | Houston Engineering, Inc. | (701) 852-7931         | rroteliuk@houstoneng.com          |                                                                                                                   |  |
| Construction Manager                                                                                                | Atticus Mulholland    | Construction Manager                                                                                                                 | DN Tanks, LLC             | (972) 823-3300         | Atticus.Mulholland@dn tanks.com   |                                                                                                                   |  |
|                                                                                                                     |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
| Project Owner                                                                                                       |                       | East Cherry Creek Valley Water & Sanitation District                                                                                 |                           | Project Name           |                                   | Northern Water Supply Project, North & South Booster Pump Station Phase 2 Expansion                               |  |
| General Description of Project                                                                                      |                       | Subcontractor for AWWA D110 Type III 2.0 MG (125' ID x 23' SWD) and 2.5 MG (138' ID x 23' SWD) Ground Storage Tanks                  |                           | Date Project           |                                   | Completed 11/18/2019                                                                                              |  |
| Project Cost                                                                                                        |                       | \$2,802,694.00                                                                                                                       |                           | Project Superintendent |                                   | Safety Manager                                                                                                    |  |
| Key Project Personnel                                                                                               |                       | Project Manager                                                                                                                      |                           | Jesus Meza             |                                   | Quality Control Manager                                                                                           |  |
| Name                                                                                                                |                       | Jason Phillippi                                                                                                                      |                           | Jesus Meza             |                                   | Jesus Meza                                                                                                        |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                       |                                                                                                                                      |                           |                        |                                   |                                                                                                                   |  |
|                                                                                                                     | Name                  | Title/Position                                                                                                                       | Organization              | Telephone              | Email                             |                                                                                                                   |  |
| Owner                                                                                                               | Shari Matousek        | Projects Coordinator                                                                                                                 | ECCV Water & Sanitation   | (303) 699-6058         | smatousek@eccv.org                |                                                                                                                   |  |
| Designer                                                                                                            | Brian O'Connor, P.E.  | Structural Engineer, CFM                                                                                                             | CDM Smith                 | (720) 264-1105         | OconnorBC@cdmsmith.com            |                                                                                                                   |  |
| Construction Manager                                                                                                | Randy Wambsganss      | President                                                                                                                            | Glacier Construction      | (303) 221-5383         | rwambsganss@gcci.com              |                                                                                                                   |  |

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## Schedule C—Key Individuals

|                                                                                                              |                                                      |                                       |                                                                   |
|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------|
| <b>Project Manager</b>                                                                                       |                                                      |                                       |                                                                   |
| Name of individual                                                                                           |                                                      | Jason Philippi                        |                                                                   |
| Years of experience as project manager                                                                       |                                                      | 21                                    |                                                                   |
| Years of experience with this organization                                                                   |                                                      | 16                                    |                                                                   |
| Number of similar projects as project manager                                                                |                                                      | 53                                    |                                                                   |
| Number of similar projects in other positions                                                                |                                                      | 60+                                   |                                                                   |
| Current Project Assignments                                                                                  |                                                      |                                       |                                                                   |
| Name of assignment                                                                                           |                                                      | Percent of time used for this project | Estimated project completion date                                 |
| Lander, WY                                                                                                   |                                                      | 25%                                   | 10/11/2024                                                        |
|                                                                                                              |                                                      |                                       |                                                                   |
|                                                                                                              |                                                      |                                       |                                                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |                                                      |                                       |                                                                   |
| Name                                                                                                         | Brian, O'Connor, P.E.                                | Name                                  | Dionicio Garza                                                    |
| Title/Position                                                                                               | Structural Engineer, CFM                             | Title/Position                        | Utilities Director                                                |
| Organization                                                                                                 | CDM Smith                                            | Organization                          | City of Lamesa, TX                                                |
| Telephone                                                                                                    | (720) 264-1105                                       | Telephone                             | (806) 872-4327                                                    |
| Email                                                                                                        | OconnorBC@cdmsmith.com                               | Email                                 | dgarzajr@ci.lamesa.tx.us                                          |
| Project                                                                                                      | Aurora, CO - ECCV Northern Water                     | Project                               | Water System Improvements USDA                                    |
| Candidate's role on project                                                                                  | Supply 2.0 MG and 2.5 MG GSTs<br>Project Manager     | Candidate's role on project           | Loan #5, Contract 2: 14.0 MG GST<br>Project Manager               |
| <b>Project Superintendent</b>                                                                                |                                                      |                                       |                                                                   |
| Name of individual                                                                                           |                                                      | Jesus Mesa                            |                                                                   |
| Years of experience as project superintendent                                                                |                                                      | 11                                    |                                                                   |
| Years of experience with this organization                                                                   |                                                      | 11                                    |                                                                   |
| Number of similar projects as project superintendent                                                         |                                                      | 39                                    |                                                                   |
| Number of similar projects in other positions                                                                |                                                      | 42                                    |                                                                   |
| Current Project Assignments                                                                                  |                                                      |                                       |                                                                   |
| Name of assignment                                                                                           |                                                      | Percent of time used for this project | Estimated project completion date                                 |
| Fort Pierre, SD -Oglala2 (Vivian, SD)                                                                        |                                                      | 100%                                  | 11/11/2024                                                        |
|                                                                                                              |                                                      |                                       |                                                                   |
|                                                                                                              |                                                      |                                       |                                                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |                                                      |                                       |                                                                   |
| Name                                                                                                         | Brian, O'Connor, P.E.                                | Name                                  | Jarod Klabonde, P.E.                                              |
| Title/Position                                                                                               | Structural Engineer, CFM                             | Title/Position                        | Senior Project Manager                                            |
| Organization                                                                                                 | CDM Smith                                            | Organization                          | Moore Engineering, Inc.                                           |
| Telephone                                                                                                    | (720) 264-1105                                       | Telephone                             | (701) 751-8380                                                    |
| Email                                                                                                        | OconnorBC@cdmsmith.com                               | Email                                 | JKlabunde@mooreengineeringinc.com                                 |
| Project                                                                                                      | Aurora, CO - ECCV Northern Water                     | Project                               | Hazen Water Reservoir Replacement 2021,                           |
| Candidate's role on project                                                                                  | Supply 2.0 MG and 2.5 MG GSTs<br>Tank Superintendent | Candidate's role on project           | Contract 1: Water Storage, Project # 20848<br>Tank Superintendent |

|                                                                                                              |                         |                                                       |                                      |
|--------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------------------------------------|--------------------------------------|
| <b>Safety Manager</b>                                                                                        |                         |                                                       |                                      |
| Name of individual                                                                                           |                         | Ricky Martinez                                        |                                      |
| Years of experience as safety manager                                                                        |                         | 16                                                    |                                      |
| Years of experience with this organization                                                                   |                         | 2                                                     |                                      |
| Number of similar projects as safety manager                                                                 |                         | 30                                                    |                                      |
| Number of similar projects in other positions                                                                |                         | 10                                                    |                                      |
| Current Project Assignments                                                                                  |                         |                                                       |                                      |
| Name of assignment                                                                                           |                         | Percent of time used for this project                 | Estimated project completion date    |
| Bottineau, ND                                                                                                |                         | 10%                                                   | 10/10/2024                           |
| Lander, WY                                                                                                   |                         | 10%                                                   | 10/11/2024                           |
| Vivian, SD                                                                                                   |                         | 10%                                                   | 11/11/2024                           |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |                         |                                                       |                                      |
| Name                                                                                                         | Christian Pieschel      | Name                                                  | Ruben Rizo                           |
| Title/Position                                                                                               | Safety Director         | Title/Position                                        | Safety Director                      |
| Organization                                                                                                 | AUI Contractors         | Organization                                          | Driver Pipeline                      |
| Telephone                                                                                                    | (214) 930-2844          | Telephone                                             | (254) 535-9288                       |
| Email                                                                                                        | cpieschel@coregroup.com | Email                                                 | rrizo@driverpipeline.com             |
| Project                                                                                                      | Dallas (TX) WWTP        | Project                                               | Pascagoula (MS) Centerpoint Pipeline |
| Candidate's role on project                                                                                  | Onsite Safety Manager   | Candidate's role on project                           | Safety Coordinator                   |
| <b>Quality Control Manager</b>                                                                               |                         |                                                       |                                      |
| Name of individual                                                                                           |                         | Jesus Mesa (See Superintendent information on Page 1) |                                      |
| Years of experience as project superintendent                                                                |                         |                                                       |                                      |
| Years of experience with this organization                                                                   |                         |                                                       |                                      |
| Number of similar projects as project superintendent                                                         |                         |                                                       |                                      |
| Number of similar projects in other positions                                                                |                         |                                                       |                                      |
| Current Project Assignments                                                                                  |                         |                                                       |                                      |
| Name of assignment                                                                                           |                         | Percent of time used for this project                 | Estimated project completion date    |
|                                                                                                              |                         |                                                       |                                      |
|                                                                                                              |                         |                                                       |                                      |
|                                                                                                              |                         |                                                       |                                      |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |                         |                                                       |                                      |
| Name                                                                                                         |                         | Name                                                  |                                      |
| Title/Position                                                                                               |                         | Title/Position                                        |                                      |
| Organization                                                                                                 |                         | Organization                                          |                                      |
| Telephone                                                                                                    |                         | Telephone                                             |                                      |
| Email                                                                                                        |                         | Email                                                 |                                      |
| Project                                                                                                      |                         | Project                                               |                                      |
| Candidate's role on project                                                                                  |                         | Candidate's role on project                           |                                      |

# MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                                                                                            | Date that Quote was Requested  | Description of Work Offered | Date of Follow-up & Person Contacted    | Amount of Quote or Reason Not Quoting              | Quote Accepted? if not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|-----------------------------------------|----------------------------------------------------|---------------------------------------------------|------------------------------------|
| D&B Portables, LLC<br>3293 106th Ave SE, Sanborn ND 58480<br>(701) 952-7007<br>Bonnie Larson                                                                        | Emails<br>7/11/24 &<br>7/24/24 | Material Supply/Rentals     | 7/23/24<br>Bonnie<br>Larson             | Toilet Rentals -<br>typically selected<br>post-bid |                                                   | WBE                                |
| Goldade Landscaping<br>1854 Valley Drive, Bismarck, ND 58503<br>(701) 220-2740<br>Jodi Goldade                                                                      | Emails<br>7/11/24 &<br>7/24/24 | Material Supplier           | 7/23/24<br>Michael<br>Goldade           |                                                    |                                                   | WBE                                |
| 5 Sisters Ventures, LLC, dba Keystone<br>Construction AND Northern Construction<br>Supplies, LLC, 8215 44th St, Bismarck, ND<br>58503 (701) 240-9327 - Lance Allard | Emails<br>7/11/24 &<br>7/24/24 | Material Supplier           | 7/23/24 &<br>7/24/24<br>Lance<br>Allard |                                                    |                                                   | MBE                                |
| Forest River Supply, LLC<br>3260 44th Ave S, Grand Forks, ND 58201<br>(701) 520-1629<br>Jessica Schanilec-Gowan                                                     | Emails<br>7/11/24 &<br>7/24/24 | Material Supplier           | 7/23/24<br>Jessica<br>Schanilec         |                                                    |                                                   | WBE                                |
| J&L Neuberger, LLC dba Chesak Seed House<br>2320 E. Thayer Ave, Bismarck, ND 58501<br>(701) 223-0391<br>Randi Philleo                                               | Emails<br>7/11/24 &<br>7/24/24 | Material Supplier           | 7/23/24<br>Randi<br>Philleo             | \$469.36                                           | Not Competitive                                   | WBE                                |
| Naastad Brothers, Inc.<br>415 7th Street, Hatton, ND 58240<br>(701) 543-3821<br>Kallie Naastad                                                                      | Emails<br>7/11/24 &<br>7/24/24 | Sitework, Erosion Control   | 7/24/24<br>Kallie<br>Naastad            | No Bid                                             |                                                   | WBE                                |

The undersigned hereby certifies that the above information is true and correct.  
DN Tanks, LLC

Contractor

  
Signature Chris Saxton

By:

The contractor shall supply copies of  
subcontracts, purchase orders, and receipts  
which verify contract amounts and utilization  
of MBE/WBE subcontractors following  
contract award.

Rocky Mountain Regional Manager  
Title

8/5/2024

Date

# MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                         | Date that Quote was Requested  | Description of Work Offered | Date of Follow-up & Person Contacted | Amount of Quote or Reason Not Quoting | Quote Accepted? If not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|--------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------|------------------------------------|
| T-N-T Concrete, Inc.<br>14954 30th St SE, Wheatland, ND 58079<br>(701) 799-0791<br>Anthony Houle | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>Anthony Houle             |                                       |                                                   | MBE                                |
| Villarreal Trucking<br>307 Griggs Ave, Grafton, ND 58237<br>(701) 520-8028<br>Jaime Villarreal   | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>Jaime Villarreal          | No applicable work                    |                                                   | M/WBE                              |
| AJ Construction, Inc.<br>590 1st St East, Horace, ND 58047<br>(701) 277-1687<br>Allen J. Enno    | Email<br>7/11/24               | Sitework                    | 7/23/24<br>Allan Enno                | Don't quote in area                   |                                                   | MBE                                |
| B&S Martinez Trucking<br>547 Birch Ct, Grafton, ND 58237<br>(701) 740-6514<br>Benancio Martinez  | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/23/24<br>Benancio Martinez         | No applicable work                    |                                                   | MBE                                |
| Bountiful Tricking, LLC<br>9420 Plainview Dr, Bismarck, ND 58503<br>(701) 400-6295<br>Biya Buta  | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/23/24<br>Biya Buta                 | No applicable work                    |                                                   | MBE                                |
| Crowell Trucking, LLC<br>1106 Cannon Ln, Washburn, ND 58577<br>(701) 460-1377<br>Rashel Crowell  | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/23/24<br>Rashel Crowell            | No applicable work                    |                                                   | WBE                                |

\* Use additional sheets if necessary.

The undersigned hereby certifies that the above information is true and correct.  
DN Tanks, LLC

The contractor shall supply copies of subcontracts, purchase orders, and receipts to which verify contract amounts and utilization of MBE/WBE subcontractors following contract award.

By:

Contractor  
  
Signature Chris Saxton

Rocky Mountain Regional Manager  
Title

8/5/2024

Date

MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                              | Date that Quote was Requested | Description of Work Offered | Date of Follow-up & Person Contacted | Amount of Quote or Reason Not Quoting | Quote Accepted? If not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------|------------------------------------|
| Dallmann Services Company<br>903 15th Ave SE, Jamestown, ND 58401<br>(701) 253-5200<br>Jamie Dallmann | Emails<br>7/11/24             | Heavy Construction          | 7/23/24<br>Jamie Dallman             | No applicable work                    |                                                   | WBE                                |
| K&S Brady Construction, LLC<br>5701 26th Ave NW, Mnot, ND 58703<br>(701) 500-0959<br>Shauna Brady     | Emails<br>7/11/24 & 7/24/24   | Heavy Construction          | 7/24/24<br>Shauna Brady              | No applicable work                    |                                                   | WBE                                |
| Missouri Valley Wattles<br>310 Shady Ln, Mandan, ND 58554<br>(701) 226-3031<br>Karen Thomas           | Emails<br>7/11/24 & 7/24/24   | Material Supply             | 7/24/24<br>Karen Thomas              | No applicable work                    |                                                   | WBE                                |
| MWEWE Logistics, LLC<br>3317 Rutland Dr, Bismarck, ND 58504<br>(701) 264-0000<br>David Barmasai       | Email<br>7/11/24              | Material Supply             |                                      | Email: No applicable work             |                                                   | MBE                                |
| S&F Trucking, LLC<br>149 93rd Ave NW, Halliday, ND 58636<br>(701) 661-0247<br>Shauna Gentry           | Emails<br>7/11/24 & 7/24/24   | Material Supply             | 7/24/24<br>Shauna Gentry             | No applicable work                    |                                                   | WBE                                |
| S&S Transport<br>2975 N. Washington St, Grand Forks, ND 58208 - (800) 726-8022<br>June Seng           | Email<br>7/11/24              | Material Supply             |                                      | Email: No Bid                         |                                                   | WBE                                |

The undersigned hereby certifies that the above information is true and correct.  
DN Tanks, LLC

Contractor  
  
Signature Chris Saxton  
Rocky Mountain Regional Manager  
Title  
8/5/24  
Date

The contractor shall supply copies of subcontracts, purchase orders, and receipts to which verify contract amounts and utilization of MBE/WBE subcontractors following contract award.

MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                                            | Date that Quote was Requested  | Description of Work Offered | Date of Follow-up & Person Contacted | Amount of Quote or Reason Not Quoting | Quote Accepted? If not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------|------------------------------------|
| Silverstar, Inc. dba Mann Trucking<br>11311 33rd St SW, Dickinson, ND 58601<br>(701) 264-1168<br>Janice Wandler     | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>Janice Wandler            | No applicable work                    |                                                   | WBE                                |
| Terry Belgrade dba Belgrade Trucking<br>8134 Hwy 20, #4, St. Michael, ND 58370<br>(701) 230-1874<br>Terry Belgrade  | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>Terry Belgrade            | Not quoting remainder of 2024         |                                                   | MBE                                |
| Boote Enterprises, LLC dba Boote Septic Solutions - 10281 CR 5, Binford, ND 58416<br>(701) 676-2788<br>Nicole Boote | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/23/24<br>Left Message              | No Response                           |                                                   | WBE                                |
| DKC Transport, LLC<br>2990 40th St, Mandan, ND 58554<br>(701) 240-5744<br>Angela Iverson                            | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/23/24<br>Left Message              | No Response                           |                                                   | WBE                                |
| Eyah Enterprise, LLC<br>2702 23rd St W., Williston, ND 58801<br>(214) 808-3597<br>Jacob Teghen                      | Emails<br>7/11/24 &<br>7/24/24 | Sitework, Erosion Control   | 7/23/24<br>Left Message              | No Response                           |                                                   | MBE                                |
| Green Acres Nursery, Inc.<br>6825 N Star Acres Rd, Bismarck, ND 58503<br>(701) 222-2291<br>Cheryl Enervold          | Emails<br>7/11/24 &<br>7/24/24 | Sitework, Erosion Control   | 7/23/24<br>Left Message              | No Response                           |                                                   | WBE                                |

The undersigned hereby certifies that the above information is true and correct.

Contractor  
DN Tanks, LLC  
  
Signature Chris Saxton  
By: \_\_\_\_\_  
Rocky Mountain Regional Manager  
Title  
8/5/2024  
Date

The contractor shall supply copies of subcontracts, purchase orders, and receipts which verify contract amounts and utilization of MBE/WBE subcontractors following contract award.

# MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                                                                                  | Date that Quote was Requested  | Description of Work Offered | Date of Follow-up & Person Contacted | Amount of Quote or Reason Not Quoting | Quote Accepted? If not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------|------------------------------------|
| Guthmiller Earthmoving, Inc.<br>3903 58th Ave SE, Medina, ND 58467<br>(701) 486-3302<br>Brenda Guthmiller                                                 | Emails<br>7/11/24 &<br>7/24/24 | Sitework                    | 7/23/24<br>left<br>message           | No Response                           |                                                   | WBE                                |
| Harris Construction<br>4471 US-281, Belcourt, ND 58316<br>(701) 477-6000<br>Austin Harris                                                                 | Emails<br>7/11/24 &<br>7/24/24 | Sitework                    | 7/23/24<br>left<br>message           | No Response                           |                                                   | MBE                                |
| J. Gomez Construction, LLC<br>1010 2nd Ave N, Grand Forks, ND 58203<br>(218) 230-9135<br>Jason Gomez                                                      | Emails<br>7/11/24 &<br>7/24/24 | Concrete Work               | 7/23/24<br>left<br>message           | No Response                           |                                                   | MBE                                |
| Juniper, LLC<br>315 E. Broadway, Bismarck, ND 58501<br>(701) 223-6306<br>Beth Nodland                                                                     | Emails<br>7/11/24 &<br>7/24/24 | Land Survey                 | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |
| Kajaer GeoConsulting, LLC<br>7227 Runnel Rd, Bismarck, ND 58503<br>(701) 595-1957<br>Solli Frank                                                          | Emails<br>7/11/24 &<br>7/24/24 | Land Survey                 | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |
| Kilichowski Trucking, Inc. dba Kilichowski<br>Trucking & Construction - 778 148th Ave<br>NE, Forest River, ND 58233 - (701) 520-5533<br>Karla Kilichowski | Emails<br>7/11/24 &<br>7/24/24 | Sitework                    | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |

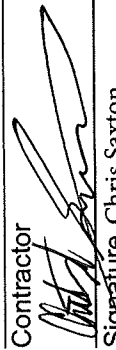
\* Use additional sheets if necessary.

The undersigned hereby certifies that the above information is true and correct.  
DN Tanks, LLC

The contractor shall supply copies of subcontracts, purchase orders, and receipts to which verify contract amounts and utilization of MBE/WBE subcontractors following contract award.

Contractor

By:

  
Signature Chris Saxton

Rocky Mountain Regional Manager

Title

8/5/2024

Date



# MBE/WBE SUBCONTRACTOR SOLICITATION INFORMATION

| Name, Address, & Phone Number of Subcontractor Contacted                                                  | Date that Quote was Requested  | Description of Work Offered | Date of Follow-up & Person Contacted | Amount of Quote or Reason Not Quoting | Quote Accepted? If not, List Reason for Rejection | Indicate if MBE/WBE or non MBE/WBE |
|-----------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------|------------------------------------|
| Northstar Erosion Control, Inc<br>828 W Central Ave, Bismarck, ND 58501<br>(701) 425-9775<br>Brenda Lewis | Emails<br>7/11/24 &<br>7/24/24 | Erosion Control             | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |
| Praise & Favor Trucking, LLC<br>6040 Kodiak Ln, Horace, ND 58047<br>(609) 920-8030<br>Dolly Samuels       | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>left<br>message           | No Response                           |                                                   | M/WBE                              |
| Silverado Trucking, LLC<br>520 Hwy 32 S, Edinburg, ND 58227<br>(602) 743-3005<br>Tammy Nelson             | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |
| Superior Contracting, Inc.<br>3802 CR 17 N, West Fargo, ND 58078<br>(701) 261-5429<br>Robert Delorme      | Emails<br>7/11/24 &<br>7/24/24 | Misc. Contracting           | 7/24/24<br>left<br>message           | No Response                           |                                                   | MBE                                |
| The Sands, LLC<br>1501 45th St W, #204, Williston, ND 58801<br>(561) 889-3901<br>Lawrence Dube            | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>left<br>message           | No Response                           |                                                   | MBE                                |
| Voss Transport, LLC<br>316 herom St, Minto, ND 58261<br>(701) 330-5760<br>Joni Hovde                      | Emails<br>7/11/24 &<br>7/24/24 | Material Supply             | 7/24/24<br>left<br>message           | No Response                           |                                                   | WBE                                |

The undersigned hereby certifies that the above information is true and correct.  
DN Tanks, LLC

Contractor

  
Signature Chris Saxton

Rocky Mountain Regional Manager  
Title

8/5/2024

Date

\* Use additional sheets if necessary.

The contractor shall supply copies of subcontracts, purchase orders, and receipts which verify contract amounts and utilization of MBE/WBE subcontractors following contract award.

By:

United States Environmental Protection Agency  
Washington, DC 20460

**Certification Regarding Debarment, Suspension, and Other Responsibility Matters**

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three year period preceding this proposal been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

Christopher R. Brown, Vice President of Construction, Central Region

Typed Name & Title of Authorized Representative

SEAL

Signature of Authorized Representative

8/1/2024

Date

I am unable to certify to the above statements. My explanation is attached.

# BID FORM FOR CONSTRUCTION CONTRACT

The terms used in this Bid with initial capital letters have the meanings stated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions.

## ARTICLE 1—OWNER AND BIDDER

1.01 This Bid is submitted to:

*City of Mandan*  
*Attn: Jim Neubauer, City Administrator*  
*205 2<sup>nd</sup> Avenue NW*  
*Mandan, ND 58554.*

1.02 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with Owner in the form included in the Bidding Documents to perform all Work as specified or indicated in the Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the other terms and conditions of the Bidding Documents.

## ARTICLE 2—ATTACHMENTS TO THIS BID

2.01 The following documents are submitted with and made a condition of this Bid:

- A. In one opaque and sealed envelope labeled as described in Article 14 of C-200:
  - 1. Completed Bid Form
  - 2. Completed Qualification Statement
  - 3. MBE/WBE Subcontractor Solicitation Information
  - 4. SRF Certification Regarding Debarment, Suspension, and Other Responsibility Matters.
- B. In second opaque and sealed envelope labeled as described in Article 14 of C-200:
  - 1. Required Bid security;
  - 2. North Dakota Contractor's license or Certificate of Renewal.

## ARTICLE 3—BASIS OF BID—LUMP SUM BID AND UNIT PRICES

3.01 *Lump Sum Bids*

- A. Bidder will complete the Work in accordance with the Contract Documents for the following lump sum (stipulated) price(s):

**CONTRACT NO. 1 – GENERAL CONSTRUCTION**

The General Contractor shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The General Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

Cash Allowances: A contractor cash allowance of \$65,400 has been provided in the Base Bid per Section 01 21 13 for Relocating Overhead Power/Fiber – Montana Dakota Utilities (MDU).

**TOTAL LUMP SUM BID FOR CONTRACT NO. 1 BASE BID - GENERAL CONSTRUCTION**

*Five Million Nineteen thousand three hundred eighty five dollars and 800 cents*  
*5,935,800.00*

(use words) (use figures)

**CONTRACT NO. 2 – ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

The Electrical, Instrumentation, and Controls Contractor (Electrical Contractor) shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The Electrical Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

**TOTAL LUMP SUM BID FOR CONTRACT NO. 2 BASE BID – ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

*No Bid* *(\$ No Bid)*

(use words) (use figures)

**CONTRACT NO. 3 – COMBINED GENERAL AND ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

The General Contractor shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The General Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

Cash Allowances: A contractor cash allowance of \$65,400 has been provided in the Base Bid per Section 01 21 13 for Relocating Overhead Power/Fiber – Montana Dakota Utilities (MDU).

**TOTAL LUMP SUM BID FOR CONTRACT NO. 3 BASE BID - COMBINED GENERAL AND ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

|                              |                                      |
|------------------------------|--------------------------------------|
| <u>NO Bid</u><br>(use words) | (\$ <u>No Bid</u> )<br>(use figures) |
|------------------------------|--------------------------------------|

**ARTICLE 4—TIME OF COMPLETION**

- 4.01 Bidder agrees that the Work will be substantially complete and will be completed and ready for final payment in accordance with Paragraph 15.06 of the General Conditions on or before the dates or within the number of calendar days indicated in the Agreement.
- 4.02 Bidder accepts the provisions of the Agreement as to liquidated damages.

**ARTICLE 5—BIDDER’S ACKNOWLEDGEMENTS: ACCEPTANCE PERIOD, INSTRUCTIONS, AND RECEIPT OF ADDENDA**

**5.01 Bid Acceptance Period**

- A. This Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of Owner.

**5.02 Instructions to Bidders**

- A. Bidder accepts all of the terms and conditions of the Instructions to Bidders, including without limitation those dealing with the disposition of Bid security.

**5.03 Receipt of Addenda**

- A. Bidder hereby acknowledges receipt of the following Addenda:

| Addendum Number | Addendum Date |
|-----------------|---------------|
| 1               | 7/23/2024     |
| 2               | 7/25/2024     |
|                 |               |
|                 |               |
|                 |               |
|                 |               |

## ARTICLE 6—BIDDER'S REPRESENTATIONS AND CERTIFICATIONS

### 6.01 *Bidder's Representations*

A. In submitting this Bid, Bidder represents the following:

1. Bidder has examined and carefully studied the Bidding Documents, including Addenda.
2. Bidder has visited the Site, conducted a thorough visual examination of the Site and adjacent areas, and become familiar with the general, local, and Site conditions that may affect cost, progress, and performance of the Work.
3. Bidder is familiar with all Laws and Regulations that may affect cost, progress, and performance of the Work.
4. Bidder has carefully studied the reports of explorations and tests of subsurface conditions at or adjacent to the Site and the drawings of physical conditions relating to existing surface or subsurface structures at the Site that have been identified in the Supplementary Conditions, with respect to the Technical Data in such reports and drawings.
5. Bidder has carefully studied the reports and drawings relating to Hazardous Environmental Conditions, if any, at or adjacent to the Site that have been identified in the Supplementary Conditions, with respect to Technical Data in such reports and drawings.
6. Bidder has considered the information known to Bidder itself; information commonly known to contractors doing business in the locality of the Site; information and observations obtained from visits to the Site; the Bidding Documents; and the Technical Data identified in the Supplementary Conditions or by definition, with respect to the effect of such information, observations, and Technical Data on (a) the cost, progress, and performance of the Work; (b) the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, if selected as Contractor; and (c) Bidder's (Contractor's) safety precautions and programs.
7. Based on the information and observations referred to in the preceding paragraph, Bidder agrees that no further examinations, investigations, explorations, tests, studies, or data are necessary for the performance of the Work at the Contract Price, within the Contract Times, and in accordance with the other terms and conditions of the Contract.
8. Bidder is aware of the general nature of work to be performed by Owner and others at the Site that relates to the Work as indicated in the Bidding Documents.
9. Bidder has given Engineer written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and of discrepancies between Site conditions and the Contract Documents, and the written resolution thereof by Engineer is acceptable to Contractor.
10. The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for performance and furnishing of the Work.
11. The submission of this Bid constitutes an incontrovertible representation by Bidder that without exception the Bid and all prices in the Bid are premised upon performing and furnishing the Work required by the Bidding Documents.

## 6.02 *Bidder's Certifications*

### A. The Bidder certifies the following:

1. This Bid is genuine and not made in the interest of or on behalf of any undisclosed individual or entity and is not submitted in conformity with any collusive agreement or rules of any group, association, organization, or corporation.
2. Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid.
3. Bidder has not solicited or induced any individual or entity to refrain from bidding.
4. Bidder has not engaged in corrupt, fraudulent, collusive, or coercive practices in competing for the Contract. For the purposes of this Paragraph 8.02.A:
  - a. Corrupt practice means the offering, giving, receiving, or soliciting of anything of value likely to influence the action of a public official in the bidding process.
  - b. Fraudulent practice means an intentional misrepresentation of facts made (a) to influence the bidding process to the detriment of Owner, (b) to establish bid prices at artificial non-competitive levels, or (c) to deprive Owner of the benefits of free and open competition.
  - c. Collusive practice means a scheme or arrangement between two or more Bidders, with or without the knowledge of Owner, a purpose of which is to establish bid prices at artificial, non-competitive levels.
  - d. Coercive practice means harming or threatening to harm, directly or indirectly, persons or their property to influence their participation in the bidding process or affect the execution of the Contract.

BIDDER hereby submits this Bid as set forth above:



Bidder:

DN Tanks, LLC

(typed or printed name of organization)

By:

Christopher R. Brown

(individual's signature)

Name:

(typed or printed)

Vice President of Construction, Central Region

(typed or printed)

Date: August 1, 2024

(typed or printed)

If Bidder is a corporation, a partnership, or a joint venture, attach evidence of authority to sign.

Attest:

JoAnn C. Caster

(individual's signature)

Name:

(typed or printed)

Title: Assistant Secretary

(typed or printed)

Date: August 1, 2024

(typed or printed)

Address for giving notices:

410 East Trinity Blvd

Grand Prairie, TX 75050

Bidder's Contact:

Name: Chris Saxton

(typed or printed)

Title: Rocky Mountain Regional Manager

(typed or printed)

Phone: (701) 425-1384

Email: Chris.Saxton@dntanks.com

Address:

5935 South Lang Street, Suite 295

Littleton, CO 80127

Bidder's Contractor License No.: (if applicable) 000050033



BID ENCLOSED

## BID PROPOSAL ENVELOPE

Bid Submitted by:

Name of Company Edling Electric Inc.

Address PO Box 1456

City/State Bismarck ND 58502

ND Contractor's License No. 28638 Class: A  
Dated: 2-14-24

Attn: City Administrator  
City of Mandan  
205 2nd Ave NW  
Mandan ND 58554

Acknowledgment of Receipt of

Addenda 1 through 2 SEALED BID FOR Contract No. 2 - Electrical, Instrumentation, & Controls Construction  
Collins Avenue Reservoir Replacement

To be opened — Time 10:00 Date 8-1-24

BID SECURITY

BID BOND AND CONTRACTOR'S LICENSE ENVELOPE

ENCLOSE BID SECURITY AND A COPY OF THE  
CONTRACTOR'S LICENSE OR CERTIFICATE  
OR RENEWAL.

KS  
8/1/24  
9:44 am

# *State of North Dakota*

## SECRETARY OF STATE



### CONTRACTOR LICENSE

NO: 28638

CLASS: A

The undersigned, as Secretary of State of the state of North Dakota and Registrar of Contractors, certifies that **EDLING ELECTRIC, INC.** whose address is in BISMARCK, ND, has filed in this office proper documents for a Contractor License valid until March 1, 2025, and has complied with all requirements of North Dakota Century Code, chapter 43-07.

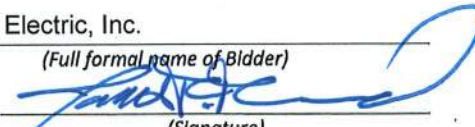
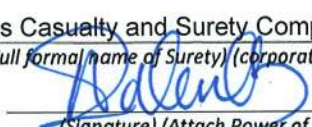
**EDLING ELECTRIC, INC.** is entitled to bid on and accept contracts as authorized by law under this license without limit as to the value of any single contract project.

Dated: February 14, 2024

A handwritten signature in cursive script, reading "Michael Howe".

Michael Howe  
Secretary of State

## BID BOND (DAMAGES FORM)

|                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Bidder</b><br>Name: Edling Electric, Inc.<br>Address (principal place of business):<br>P.O. Box 1456<br>Bismarck, ND 58502-1456                                                                                                                                                                                        | <b>Surety</b><br>Name: Travelers Casualty and Surety Company of America<br>Address (principal place of business):<br>One Tower Square<br>Hartford, CT 06183-6014 |
| <b>Owner</b><br>Name: <b>City of Mandan</b><br>Address (principal place of business):<br><b>205 2<sup>nd</sup> Avenue NW</b><br><b>Mandan, ND 58554</b>                                                                                                                                                                   | <b>Bid</b><br>Project (name and location):<br><b>Collins Avenue Reservoir Replacement</b><br><b>Mandan, ND</b><br><br>Bid Due Date: 1st August, 2024             |
| <b>Bond</b><br>Bond Amount: Five Percent (5%) of the Amount of the Bid<br>Date of Bond: 1st August, 2024<br>Surety and Bidder, intending to be legally bound hereby, subject to the terms set forth in this Bid Bond, do each cause this Bid Bond to be duly executed by an authorized officer, agent, or representative. |                                                                                                                                                                  |
| <b>Bidder</b><br>Edling Electric, Inc.<br>(Full formal name of Bidder)                                                                                                                                                                                                                                                    | <b>Surety</b><br>Travelers Casualty and Surety Company<br>(Full formal name of Surety) (Corporate seal)                                                          |
| By: <br>(Signature)                                                                                                                                                                                                                    | By: <br>(Signature) (Attach Power of Attorney)                               |
| Name: <u>James R. Rund</u><br>(Printed or typed)                                                                                                                                                                                                                                                                          | Name: <u>Name Alemdar</u><br>(Printed or typed)                                                                                                                  |
| Title: <u>President</u>                                                                                                                                                                                                                                                                                                   | Title: <u>Attorney-in-fact</u>                                                                                                                                   |
| Attest: <br>(Signature)                                                                                                                                                                                                                | Attest: <u>Eray Alemdar</u><br>(Signature)                                                                                                                       |
| Name: <u>Karla Schumacher</u><br>(Printed or typed)                                                                                                                                                                                                                                                                       | Name: <u>Eray Alemdar</u><br>(Printed or typed)                                                                                                                  |
| Title: <u>Secretary</u>                                                                                                                                                                                                                                                                                                   | Title: <u>n/a</u>                                                                                                                                                |
| Notes: (1) Note: Addresses are to be used for giving any required notice. (2) Provide execution by any additional parties, such as joint venturers, if necessary.                                                                                                                                                         |                                                                                                                                                                  |

1. Bidder and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors, and assigns to pay to Owner upon default of Bidder any difference between the total amount of Bidder's Bid and the total amount of the Bid of the next lowest, responsible Bidder that submitted a responsive Bid, as determined by Owner, for the work required by the Contract Documents, provided that:
  - 1.1. If there is no such next Bidder, and Owner does not abandon the Project, then Bidder and Surety shall pay to Owner the bond amount set forth on the face of this Bond, and
  - 1.2. In no event will Bidder's and Surety's obligation hereunder exceed the bond amount set forth on the face of this Bond.
  - 1.3. Recovery under the terms of this Bond will be Owner's sole and exclusive remedy upon default of Bidder.
2. Default of Bidder occurs upon the failure of Bidder to deliver within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents.
3. This obligation will be null and void if:
  - 3.1. Owner accepts Bidder's Bid and Bidder delivers within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents, or
  - 3.2. All Bids are rejected by Owner, or
  - 3.3. Owner fails to issue a Notice of Award to Bidder within the time specified in the Bidding Documents (or any extension thereof agreed to in writing by Bidder and, if applicable, consented to by Surety when required by Paragraph 5 hereof).
4. Payment under this Bond will be due and payable upon default of Bidder and within 30 calendar days after receipt by Bidder and Surety of written notice of default from Owner, which notice will be given with reasonable promptness, identifying this Bond and the Project and including a statement of the amount due.
5. Surety waives notice of any and all defenses based on or arising out of any time extension to issue Notice of Award agreed to in writing by Owner and Bidder, provided that the total time for issuing Notice of Award including extensions will not in the aggregate exceed 120 days from Bid due date without Surety's written consent.
6. No suit or action will be commenced under this Bond prior to 30 calendar days after the notice of default required in Paragraph 4 above is received by Bidder and Surety, and in no case later than one year after the Bid due date.
7. Any suit or action under this Bond must be commenced only in a court of competent jurisdiction located in the state in which the Project is located.
8. Notices required hereunder must be in writing and sent to Bidder and Surety at their respective addresses shown on the face of this Bond. Such notices may be sent by personal delivery, commercial courier, or by United States Postal Service registered or certified mail, return receipt requested, postage pre-paid, and will be deemed to be effective upon receipt by the party concerned.
9. Surety shall cause to be attached to this Bond a current and effective Power of Attorney evidencing the authority of the officer, agent, or representative who executed this Bond on behalf of Surety to execute, seal, and deliver such Bond and bind the Surety thereby.
10. This Bond is intended to conform to all applicable statutory requirements. Any applicable requirement of any applicable statute that has been omitted from this Bond will be deemed to be included herein as if set forth at length. If any provision of this Bond conflicts with any applicable statute, then the provision of said statute governs and the remainder of this Bond that is not in conflict therewith continues in full force and effect.
11. The term "Bid" as used herein includes a Bid, offer, or proposal as applicable.

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EJCDC® C-435, Bid Bond (Damages Form).

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and American Society of Civil Engineers. All rights reserved.

Page 2 of 2

INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT

STATE OF \_\_\_\_\_

SS

COUNTY OF \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally appeared

\_\_\_\_\_ to me

known to be the person(s) described in and who executed the foregoing instrument, as Principal(s), and acknowledged to me that \_\_\_he\_\_\_ executed the same as his/her/their free act and deed.

(Notary Seal)

CORPORATE ACKNOWLEDGMENT

STATE OF ND

SS

COUNTY OF Burleigh

On the 1 day of August, 2024, before me personally appeared James R. Lund to me known, who being by me duly sworn, did say that he/she is the President of Edling Electric, Inc., the corporation described in and which executed the foregoing instrument; that he/she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation; and that he/she signed his/her name thereto by like order

(Notary Seal)

**KARLA SCHUMACHER**  
Notary Public  
State of North Dakota  
My Commission Expires Mar 23, 2026

ACKNOWLEDGMENT OF CORPORATE SURETY

STATE OF MINNESOTA

SS

COUNTY OF Hennepin

On the 1 day of August, 2024, before me personally appeared **Name Alemdar** to me known, who being duly sworn, did say that he/she is the aforesaid officer or attorney-in-fact of the Travelers Casualty and Surety Company of America, a corporation; that the seal affixed to the foregoing instrument is the corporate seal of said corporation, and that said instrument was signed and sealed in behalf of said corporation by the aforesaid officer, by authority of its board of directors; and the aforesaid officer acknowledged said instrument to be the free act and deed of said corporation.

(Notary Seal)

**ALAN STAROSS**  
NOTARY PUBLIC  
MINNESOTA  
My Commission Expires Jan. 31, 2026





**Travelers Casualty and Surety Company of America  
Travelers Casualty and Surety Company  
St. Paul Fire and Marine Insurance Company**

**POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS:** That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint **NAME ALEMDAR** of **EDEN PRAIRIE Minnesota**, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

**IN WITNESS WHEREOF**, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this **17th** day of **January**, **2019**.



State of Connecticut

City of Hartford ss.

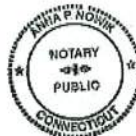
By: \_\_\_\_\_

*Robert L. Raney*  
Robert L. Raney, Senior Vice President

On this the **17th** day of **January**, **2019**, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

**IN WITNESS WHEREOF**, I hereunto set my hand and official seal.

My Commission expires the **30th** day of **June**, **2021**



*Anna P. Nowik*  
Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

**RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

**FURTHER RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

**FURTHER RESOLVED**, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

**FURTHER RESOLVED**, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, **Kevin E. Hughes**, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this **1st** day of **AUGUST**, **2024**



*Kevin E. Hughes*  
Kevin E. Hughes, Assistant Secretary

**To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.  
Please refer to the above-named Attorney-in-Fact and the details of the bond to which this Power of Attorney is attached.**

## BID FORM FOR CONSTRUCTION CONTRACT

The terms used in this Bid with initial capital letters have the meanings stated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions.

### ARTICLE 1—OWNER AND BIDDER

1.01 This Bid is submitted to:

*City of Mandan*  
*Attn: Jim Neubauer, City Administrator*  
*205 2<sup>nd</sup> Avenue NW*  
*Mandan, ND 58554.*

1.02 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with Owner in the form included in the Bidding Documents to perform all Work as specified or indicated in the Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the other terms and conditions of the Bidding Documents.

### ARTICLE 2—ATTACHMENTS TO THIS BID

2.01 The following documents are submitted with and made a condition of this Bid:

- A. In one opaque and sealed envelope labeled as described in Article 14 of C-200:
  - 1. Completed Bid Form
  - 2. Completed Qualification Statement
  - 3. MBE/WBE Subcontractor Solicitation Information
  - 4. SRF Certification Regarding Debarment, Suspension, and Other Responsibility Matters.
- B. In second opaque and sealed envelope labeled as described in Article 14 of C-200:
  - 1. Required Bid security;
  - 2. North Dakota Contractor's license or Certificate of Renewal.

### ARTICLE 3—BASIS OF BID—LUMP SUM BID AND UNIT PRICES

3.01 *Lump Sum Bids*

- A. Bidder will complete the Work in accordance with the Contract Documents for the following lump sum (stipulated) price(s):

**CONTRACT NO. 1 – GENERAL CONSTRUCTION**

The General Contractor shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The General Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

Cash Allowances: A contractor cash allowance of \$65,400 has been provided in the Base Bid per Section 01 21 13 for Relocating Overhead Power/Fiber – Montana Dakota Utilities (MDU).

**TOTAL LUMP SUM BID FOR CONTRACT NO. 1 BASE BID - GENERAL CONSTRUCTION**

N/A (\$ N/A )  
(use words) (use figures)

**CONTRACT NO. 2 – ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

The Electrical, Instrumentation, and Controls Contractor (Electrical Contractor) shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The Electrical Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

**TOTAL LUMP SUM BID FOR CONTRACT NO. 2 BASE BID – ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

Two hundred fourteen thousand five hundred + 00/100 (\$ 214,500.00 )  
(use words) (use figures)



**CONTRACT NO. 3 – COMBINED GENERAL AND ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

The General Contractor shall complete this Form with the appropriate Sub-Contractor Work and prices for the descriptions indicated.

The General Contractor shall include in the Total Lump Sum Base Bid, all costs for Work described by the Drawings and Specification Sections, limited in Section 01 11 13, including labor, taxes, mobilization, bonding, overhead, and profit.

Cash Allowances: A contractor cash allowance of \$65,400 has been provided in the Base Bid per Section 01 21 13 for Relocating Overhead Power/Fiber – Montana Dakota Utilities (MDU).

**TOTAL LUMP SUM BID FOR CONTRACT NO. 3 BASE BID - COMBINED GENERAL AND ELECTRICAL, INSTRUMENTATION, AND CONTROLS CONSTRUCTION**

\_\_\_\_\_ N/A (\$ N/A )  
(use words) (use figures)

**ARTICLE 4—TIME OF COMPLETION**

- 4.01 Bidder agrees that the Work will be substantially complete and will be completed and ready for final payment in accordance with Paragraph 15.06 of the General Conditions on or before the dates or within the number of calendar days indicated in the Agreement.
- 4.02 Bidder accepts the provisions of the Agreement as to liquidated damages.

**ARTICLE 5—BIDDER'S ACKNOWLEDGEMENTS: ACCEPTANCE PERIOD, INSTRUCTIONS, AND RECEIPT OF ADDENDA**

**5.01 Bid Acceptance Period**

- A. This Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of Owner.

**5.02 Instructions to Bidders**

- A. Bidder accepts all of the terms and conditions of the Instructions to Bidders, including without limitation those dealing with the disposition of Bid security.

**5.03 Receipt of Addenda**

- A. Bidder hereby acknowledges receipt of the following Addenda:

| Addendum Number | Addendum Date  |
|-----------------|----------------|
| <u>1</u>        | <u>7-23-24</u> |
| <u>2</u>        | <u>7-25-24</u> |
|                 |                |
|                 |                |
|                 |                |
|                 |                |

## ARTICLE 6—BIDDER’S REPRESENTATIONS AND CERTIFICATIONS

### 6.01 *Bidder’s Representations*

#### A. In submitting this Bid, Bidder represents the following:

1. Bidder has examined and carefully studied the Bidding Documents, including Addenda.
2. Bidder has visited the Site, conducted a thorough visual examination of the Site and adjacent areas, and become familiar with the general, local, and Site conditions that may affect cost, progress, and performance of the Work.
3. Bidder is familiar with all Laws and Regulations that may affect cost, progress, and performance of the Work.
4. Bidder has carefully studied the reports of explorations and tests of subsurface conditions at or adjacent to the Site and the drawings of physical conditions relating to existing surface or subsurface structures at the Site that have been identified in the Supplementary Conditions, with respect to the Technical Data in such reports and drawings.
5. Bidder has carefully studied the reports and drawings relating to Hazardous Environmental Conditions, if any, at or adjacent to the Site that have been identified in the Supplementary Conditions, with respect to Technical Data in such reports and drawings.
6. Bidder has considered the information known to Bidder itself; information commonly known to contractors doing business in the locality of the Site; information and observations obtained from visits to the Site; the Bidding Documents; and the Technical Data identified in the Supplementary Conditions or by definition, with respect to the effect of such information, observations, and Technical Data on (a) the cost, progress, and performance of the Work; (b) the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, if selected as Contractor; and (c) Bidder’s (Contractor’s) safety precautions and programs.
7. Based on the information and observations referred to in the preceding paragraph, Bidder agrees that no further examinations, investigations, explorations, tests, studies, or data are necessary for the performance of the Work at the Contract Price, within the Contract Times, and in accordance with the other terms and conditions of the Contract.
8. Bidder is aware of the general nature of work to be performed by Owner and others at the Site that relates to the Work as indicated in the Bidding Documents.
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11. The submission of this Bid constitutes an incontrovertible representation by Bidder that without exception the Bid and all prices in the Bid are premised upon performing and furnishing the Work required by the Bidding Documents.

6.02 *Bidder's Certifications*

A. The Bidder certifies the following:

1. This Bid is genuine and not made in the interest of or on behalf of any undisclosed individual or entity and is not submitted in conformity with any collusive agreement or rules of any group, association, organization, or corporation.
2. Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid.
3. Bidder has not solicited or induced any individual or entity to refrain from bidding.
4. Bidder has not engaged in corrupt, fraudulent, collusive, or coercive practices in competing for the Contract. For the purposes of this Paragraph 8.02.A:
  - a. Corrupt practice means the offering, giving, receiving, or soliciting of anything of value likely to influence the action of a public official in the bidding process.
  - b. Fraudulent practice means an intentional misrepresentation of facts made (a) to influence the bidding process to the detriment of Owner, (b) to establish bid prices at artificial non-competitive levels, or (c) to deprive Owner of the benefits of free and open competition.
  - c. Collusive practice means a scheme or arrangement between two or more Bidders, with or without the knowledge of Owner, a purpose of which is to establish bid prices at artificial, non-competitive levels.
  - d. Coercive practice means harming or threatening to harm, directly or indirectly, persons or their property to influence their participation in the bidding process or affect the execution of the Contract.

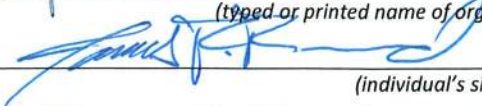
BIDDER hereby submits this Bid as set forth above:

Bidder:

Edling Electric Inc

(typed or printed name of organization)

By:



(individual's signature)

Name:

James B Rudd

(typed or printed)

Title:

President

(typed or printed)

Date:

8-1-24

(typed or printed)

If Bidder is a corporation, a partnership, or a joint venture, attach evidence of authority to sign.

Attest:



(individual's signature)

Name:

Karla Schumacher

(typed or printed)

Title:

Secretary

(typed or printed)

Date:

8-1-24

(typed or printed)

Address for giving notices:

PO Box 1456, Bismarck, ND 58502  
State of Incorporation: North Dakota

Bidder's Contact:

Name:

Jason Rodd

(typed or printed)

Title:

Project Manager

(typed or printed)

Phone:

701-595-7574

Email:

jasonrodd@edlingelectric.com

Address:

PO Box 1456  
Bismarck, ND 58502

Bidder's Contractor License No.: (if applicable) 28638

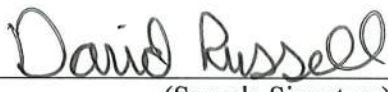
**CERTIFIED COPY OF RESOLUTION  
OF  
EDLING ELECTRIC, INC.**

I hereby certify that I am the duly elected and qualified secretary of Edling Electric, Inc, a North Dakota Corporation, and the keeper of the records and corporate seal of said corporation; that the following is a true and correct copy of resolution duly adopted at a regular meeting of the Board of Directors of said corporation held in accordance with its by-laws on the 29th day of April, 2019, and that the same is now in full force.

BE IT RESOLVED that all officers of Edling Electric, Inc. are authorized to sign and execute on behalf of Edling Electric, Inc., bid forms, contracts forms, bond forms and all other necessary documents to be executed in connection with private and governmental contracts.

I hereby further certify that the following named persons have been duly elected to the offices set forth opposite their respective names, that they continue to hold these offices at the present time, and that the signatures appearing hereon are the genuine, original signatures of each respectively:

James R. Ruud----- President \_\_\_\_\_  
(Sample Signature)

David L. Russell-----Vice President \_\_\_\_\_  
(Sample Signature)

Karla Schumacher----- Secretary \_\_\_\_\_  
(Sample Signature)

Jason Wiltz-----Treasurer \_\_\_\_\_  
(Sample Signature)

IN WITNESS WHEREOF, I have hereunto affixed my name of secretary and have caused the corporate seal of said corporation to be hereto affixed this 29<sup>th</sup> day of April, 2019.

(SEAL)

  
Karla Schumacher  
Corporate Secretary

I hereby certify that I am director of said corporation and that the fore-going is a correct copy of resolutions passed as therein set forth, and that the same are now in full force and effect.

  
James R. Ruud, President



## ARTICLE 1—GENERAL INFORMATION

### 1.01 Provide contact information for the Business:

|                                       |              |                     |                          |
|---------------------------------------|--------------|---------------------|--------------------------|
| Legal Name of Business:               |              | Edling Electric Inc |                          |
| Corporate Office                      |              |                     |                          |
| Name:                                 | James R Ruud | Phone number:       | 701-255-2831             |
| Title:                                | President    | Email address:      | james@edlingelectric.com |
| Business address of corporate office: |              | PO Box 1456         |                          |
|                                       |              | Bismarck ND 58502   |                          |
| Local Office Same as above            |              |                     |                          |
| Name:                                 |              | Phone number:       |                          |
| Title:                                |              | Email address:      |                          |
| Business address of local office:     |              |                     |                          |
|                                       |              |                     |                          |
|                                       |              |                     |                          |

### 1.02 Provide information on the Business's organizational structure:

|                                                                                                                                 |                                                                                                                                   |                                                                                                      |    |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----|
| Form of Business:                                                                                                               | <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation |                                                                                                      |    |
| <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Joint Venture comprised of the following companies: |                                                                                                                                   |                                                                                                      |    |
| 1.                                                                                                                              |                                                                                                                                   |                                                                                                      |    |
| 2.                                                                                                                              |                                                                                                                                   |                                                                                                      |    |
| 3.                                                                                                                              |                                                                                                                                   |                                                                                                      |    |
| Provide a separate Qualification Statement for each Joint Venturer.                                                             |                                                                                                                                   |                                                                                                      |    |
| Date Business was formed:                                                                                                       | 4-1-49                                                                                                                            | State in which Business was formed:                                                                  | ND |
| Is this Business authorized to operate in the Project location?                                                                 |                                                                                                                                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending |    |

### 1.03 Identify all businesses that own Business in whole or in part (25% or greater), or that are wholly or partly (25% or greater) owned by Business:

|                   |     |              |  |
|-------------------|-----|--------------|--|
| Name of business: | NIA | Affiliation: |  |
| Address:          |     |              |  |
| Name of business: |     | Affiliation: |  |
| Address:          |     |              |  |
| Name of business: |     | Affiliation: |  |
| Address:          |     |              |  |

- 1.04 Provide information regarding the Business's officers, partners, and limits of authority.

|                               |                                                                     |                     |           |
|-------------------------------|---------------------------------------------------------------------|---------------------|-----------|
| Name:                         | James R. Ruud                                                       | Title:              | President |
| Authorized to sign contracts: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Limit of Authority: | \$ N/A    |
| Name:                         | David L. Russell                                                    | Title:              | V. P.     |
| Authorized to sign contracts: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Limit of Authority: | \$ N/A    |
| Name:                         | Jason Wiltz                                                         | Title:              | Treasurer |
| Authorized to sign contracts: | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Limit of Authority: | \$        |
| Name:                         | Karla Schumacher                                                    | Title:              | Secretary |

## ARTICLE 2—LICENSING

- 2.01 Provide information regarding licensure for Business:

|                   |                                  |                  |        |
|-------------------|----------------------------------|------------------|--------|
| Name of License:  | ND Contractor's License Class: A |                  |        |
| Licensing Agency: | Secretary of State               |                  |        |
| License No:       | 28638                            | Expiration Date: | 3-1-25 |
| Name of License:  |                                  |                  |        |
| Licensing Agency: |                                  |                  |        |
| License No:       |                                  | Expiration Date: |        |

## ARTICLE 3—DIVERSE BUSINESS CERTIFICATIONS

- 3.01 Provide information regarding Business's Diverse Business Certification, if any. Provide evidence of current certification.

| Certification                                                                   | Certifying Agency | Certification Date |
|---------------------------------------------------------------------------------|-------------------|--------------------|
| <input type="checkbox"/> Disadvantaged Business Enterprise                      |                   |                    |
| <input type="checkbox"/> Minority Business Enterprise                           |                   |                    |
| <input type="checkbox"/> Woman-Owned Business Enterprise                        |                   |                    |
| <input type="checkbox"/> Small Business Enterprise                              |                   |                    |
| <input type="checkbox"/> Disabled Business Enterprise                           |                   |                    |
| <input type="checkbox"/> Veteran-Owned Business Enterprise                      |                   |                    |
| <input type="checkbox"/> Service-Disabled Veteran-Owned Business                |                   |                    |
| <input type="checkbox"/> HUBZone Business (Historically Underutilized) Business |                   |                    |
| <input type="checkbox"/> Other                                                  |                   |                    |
| <input checked="" type="checkbox"/> None                                        |                   |                    |



#### ARTICLE 4—SAFETY

- 4.01 Provide information regarding Business's safety organization and safety performance.

|                                    |                |            |
|------------------------------------|----------------|------------|
| Name of Business's Safety Officer: | Brady Hanson   |            |
| Safety Certifications              |                |            |
| Certification Name                 | Issuing Agency | Expiration |
|                                    |                |            |
|                                    |                |            |

- 4.02 Provide Worker's Compensation Insurance Experience Modification Rate (EMR), Total Recordable Frequency Rate (TRFR) for incidents, and Total Number of Recorded Manhours (MH) for the last 3 years and the EMR, TRFR, and MH history for the last 3 years of any proposed Subcontractor(s) that will provide Work valued at 10% or more of the Contract Price. Provide documentation of the EMR history for Business and Subcontractor(s).

| Year                | 2023 |      |        | 2022 |      |        | 2021 |      |        |
|---------------------|------|------|--------|------|------|--------|------|------|--------|
| Company             | EMR  | TRFR | MH     | EMR  | TRFR | MH     | EMR  | TRFR | MH     |
| Edling Electric Inc | .86  | 3.32 | 60,212 | 1.52 | 3.5  | 57,161 | 1.89 | 2.8  | 71,773 |
|                     |      |      |        |      |      |        |      |      |        |

#### ARTICLE 5—FINANCIAL

- 5.01 Provide information regarding the Business's financial stability. Provide the most recent audited financial statement, and if such audited financial statement is not current, also provide the most current financial statement.

|                                                                                                                             |                                                       |                                   |  |
|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------|--|
| Financial Institution:                                                                                                      | Choice Financial Group                                |                                   |  |
| Business address:                                                                                                           | 1050 E Interstate Ave., Ste 120<br>Bismarck, ND 58503 |                                   |  |
| Date of Business's most recent financial statement:                                                                         |                                                       | <input type="checkbox"/> Attached |  |
| Date of Business's most recent audited financial statement:                                                                 | 12/31/23                                              | <input type="checkbox"/> Attached |  |
| Financial indicators from the most recent financial statement                                                               |                                                       |                                   |  |
| Contractor's Current Ratio (Current Assets ÷ Current Liabilities)                                                           |                                                       |                                   |  |
| Contractor's Quick Ratio ((Cash and Cash Equivalents + Accounts Receivable + Short Term Investments) ÷ Current Liabilities) |                                                       |                                   |  |

## ARTICLE 6—SURETY INFORMATION

- 6.01 Provide information regarding the surety company that will issue required bonds on behalf of the Business, including but not limited to performance and payment bonds.

|                                                                                                                                                                                                                                                                          |                                                                     |                 |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------|--|
| Surety Name:                                                                                                                                                                                                                                                             | Traveler's Casualty & Surety Co of America                          |                 |  |
| Surety is a corporation organized and existing under the laws of the state of:                                                                                                                                                                                           |                                                                     |                 |  |
| Is surety authorized to provide surety bonds in the Project location?                                                                                                                                                                                                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                 |  |
| Is surety listed in "Companies Holding Certificates of Authority as Acceptable Sureties on Federal Bonds and as Acceptable Reinsuring Companies" published in Department Circular 570 (as amended) by the Bureau of the Fiscal Service, U.S. Department of the Treasury? |                                                                     |                 |  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                 |                                                                     |                 |  |
| Mailing Address<br>(principal place of business):                                                                                                                                                                                                                        | One Tower Square<br>Hartford, CT 06183                              |                 |  |
| Physical Address<br>(principal place of business):                                                                                                                                                                                                                       | One Tower Square<br>Hartford, CT 06183                              |                 |  |
| Phone (main):                                                                                                                                                                                                                                                            | 651-310-7819                                                        | Phone (claims): |  |

## ARTICLE 7—INSURANCE

- 7.01 Provide information regarding Business's insurance company(s), including but not limited to its Commercial General Liability carrier. Provide information for each provider.

|                                                                                 |                                                                         |                                                                     |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------|
| Name of insurance provider, and type of policy (CLE, auto, etc.):               |                                                                         |                                                                     |
| Insurance Provider                                                              | Type of Policy (Coverage Provided)                                      |                                                                     |
| Travelers Property Casualty Co of Am                                            | CGL, Auto, Umbrella, Blanket & Driftell                                 |                                                                     |
|                                                                                 |                                                                         |                                                                     |
|                                                                                 |                                                                         |                                                                     |
| Are providers licensed or authorized to issue policies in the Project location? |                                                                         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Does provider have an A.M. Best Rating of A-VII or better?                      |                                                                         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Mailing Address<br>(principal place of business):                               | Christiansen Group<br>9855 W 78th St, Ste 100<br>Eden Prairie, MN 55344 |                                                                     |
| Physical Address<br>(principal place of business):                              | Same as above                                                           |                                                                     |
| Phone (main):                                                                   | 952-653-1185                                                            | Phone (claims):                                                     |



## ARTICLE 8—CONSTRUCTION EXPERIENCE

8.01 Provide information that will identify the overall size and capacity of the Business.

|                                                |  |
|------------------------------------------------|--|
| Average number of current full-time employees: |  |
| Estimate of revenue for the current year:      |  |
| Estimate of revenue for the previous year:     |  |

8.02 Provide information regarding the Business's previous contracting experience.

|                                                                                                                                                                                  |     |                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------|
| Years of experience with projects like the proposed project:                                                                                                                     |     |                      |
| As a general contractor:                                                                                                                                                         | 50+ | As a joint venturer: |
| Has Business, or a predecessor in interest, or an affiliate identified in Paragraph 1.03:                                                                                        |     |                      |
| Been disqualified as a bidder by any local, state, or federal agency within the last 5 years?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No             |     |                      |
| Been barred from contracting by any local, state, or federal agency within the last 5 years?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No              |     |                      |
| Been released from a bid in the past 5 years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                |     |                      |
| Defaulted on a project or failed to complete any contract awarded to it? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                     |     |                      |
| Refused to construct or refused to provide materials defined in the contract documents or in a change order? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |                      |
| Been a party to any currently pending litigation or arbitration? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                             |     |                      |
| Provide full details in a separate attachment if the response to any of these questions is Yes.                                                                                  |     |                      |

8.03 List all projects currently under contract in Schedule A and provide indicated information.

8.04 List a minimum of three and a maximum of six projects completed in the last 5 years in Schedule B and provide indicated information to demonstrate the Business's experience with projects similar in type and cost of construction.

8.05 In Schedule C, provide information on key individuals whom Business intends to assign to the Project. Provide resumes for those individuals included in Schedule C. Key individuals include the Project Manager, Project Superintendent, Quality Manager, and Safety Manager. Resumes may be provided for Business's key leaders as well.

## ARTICLE 9—REQUIRED ATTACHMENTS

9.01 Provide the following information with the Statement of Qualifications:

- A. If Business is a Joint Venture, separate Qualifications Statements for each Joint Venturer, as required in Paragraph 1.02. *N/A*
- B. Diverse Business Certifications if required by Paragraph 3.01. *N/A*
- C. Certification of Business's safety performance if required by Paragraph 4.02.
- D. Financial statements as required by Paragraph 5.01.  
*will provide upon successful low bid if required*

EJCDC C-451, Qualifications Statement.

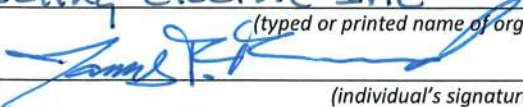
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Page 5 of 7

- E. Attachments providing additional information as required by Paragraph 8.02. *NP*
- F. Schedule A (Current Projects) as required by Paragraph 8.03.
- G. Schedule B (Previous Experience with Similar Projects) as required by Paragraph 8.04.
- H. Schedule C (Key Individuals) and resumes for the key individuals listed, as required by Paragraph 8.05.
- I. Additional items as pertinent.

This Statement of Qualifications is offered by:

Business: Edling Electric Inc  
(typed or printed name of organization)

By:   
(individual's signature)

Name: James R Rudd  
(typed or printed)

Title: President  
(typed or printed)

Date: 8-1-24  
(date signed)

(If Business is a corporation, a partnership, or a joint venture, attach evidence of authority to sign.)

Attest:   
(individual's signature)

Name: Karla Schumacher  
(typed or printed)

Title: Secretary  
(typed or printed)

Address for giving notices:  
PO Box 1456  
Bismarck ND 58502

Designated Representative:  
Name: Jason Rodd  
(typed or printed)

Title: Project manager  
(typed or printed)

Address:  
PO Box 1456  
Bismarck ND 58502

Phone: 701-255-2831

Email: jasonrodd@edlingelectric.com

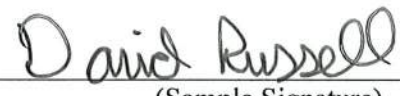
**CERTIFIED COPY OF RESOLUTION  
OF  
EDLING ELECTRIC, INC.**

I hereby certify that I am the duly elected and qualified secretary of Edling Electric, Inc, a North Dakota Corporation, and the keeper of the records and corporate seal of said corporation; that the following is a true and correct copy of resolution duly adopted at a regular meeting of the Board of Directors of said corporation held in accordance with its by-laws on the 29th day of April, 2019, and that the same is now in full force.

BE IT RESOLVED that all officers of Edling Electric, Inc. are authorized to sign and execute on behalf of Edling Electric, Inc., bid forms, contracts forms, bond forms and all other necessary documents to be executed in connection with private and governmental contracts.

I hereby further certify that the following named persons have been duly elected to the offices set forth opposite their respective names, that they continue to hold these offices at the present time, and that the signatures appearing hereon are the genuine, original signatures of each respectively:

James R. Ruud----- President   
(Sample Signature)

David L. Russell-----Vice President   
(Sample Signature)

Karla Schumacher----- Secretary   
(Sample Signature)

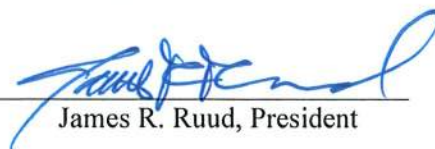
Jason Wiltz-----Treasurer   
(Sample Signature)

IN WITNESS WHEREOF, I have hereunto affixed my name of secretary and have caused the corporate seal of said corporation to be hereto affixed this 29<sup>th</sup> day of April, 2019.

(SEAL)

  
Karla Schumacher  
Corporate Secretary

I hereby certify that I am director of said corporation and that the fore-going is a correct copy of resolutions passed as therein set forth, and that the same are now in full force and effect.

  
James R. Ruud, President



# Log of Work-Related Injuries and Illnesses

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

employee name and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 2019  
U.S. Department of Labor  
Occupational Safety and Health Administration  
Form approved OSHA no. 1218-0176

Establishment name  
City Bismarck  
State ND

| (A)<br>Case no. | (B)<br>Employee's name | (C)<br>Job title<br>(e.g., Welder) | (D)<br>Date of injury or onset | (E)<br>Where the event occurred<br>(e.g., Loading dock north end) | (F)<br>Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch) | Classifying the case     |                                                                                 |                                                                      |                                                                                 | Enter the number of days the injured worker was: |                                | Check the "injury" column or choose one type of illness: |                          |                           |                          |                          |                          |
|-----------------|------------------------|------------------------------------|--------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------|----------------------------------------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
|                 |                        |                                    |                                |                                                                   |                                                                                                                                                                                            | Death                    | Days away from work or restriction, job transfer, or permanent disability cases | Job transfer, other person restricted, or permanent disability cases | Days away from work or restriction, job transfer, or permanent disability cases | Away from work restriction                       | On job transfer or restriction | (1) Injury                                               | (2) Skin disorder        | (3) Respiratory condition | (4) Poisoning            | (5) Hearing loss         | (6) All other            |
| 1901            | [REDACTED]             | [REDACTED]                         | 5/19                           | HWY. 83                                                           | Roll over ATV - scratches on face                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input checked="" type="checkbox"/>                                             | 0 days                                           | 0 day                          | <input checked="" type="checkbox"/>                      | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>                                                        | <input type="checkbox"/>                                             | <input type="checkbox"/>                                                        | 0 days                                           | 0 day                          | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                 |                        |                                    | month/day                      |                                                                   |                                                                                                                                                                                            |                          |                                                                                 |                                                                      |                                                                                 |                                                  |                                |                                                          |                          |                           |                          |                          |                          |

## Log of Work-Related Injuries and Illnesses

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

 Year 2020  
**U.S. Department of Labor**  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

Edling Electric Inc

Page 74 of 215

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Form approved OMB no. 1218-0176

State NDState ND

Check the "injury" column or choose one type of illness:

Page totals

Injury  
Disorder  
Respiratory  
Condition  
Reasoning  
g Loss  
esses

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)

## Log of Work-Related Injuries and Illnesses

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

 Year 2022

Form approved OMB no. 1218-0176

Edling Electric Inc

Describe the case

Classify the case

City BismarckState ND

| (A)<br>Case No. | (B)<br>Employee's Name | (C)<br>Job Title (e.g., Welder) | (D)<br>Date of injury or onset of illness (mo./day) | (E)<br>Where the event occurred (e.g. Loading dock north end) | (F)<br>Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burns on right forearm from acetylene torch) | CHECK ONLY ONE box for each case based on the most serious outcome for that case: |                     |                             |                        |                       | Enter the number of days the injured or ill worker was: |        | Check the "injury" column or choose one type of illness: |                       |           |              |                     |  |  |  |
|-----------------|------------------------|---------------------------------|-----------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------|-----------------------------|------------------------|-----------------------|---------------------------------------------------------|--------|----------------------------------------------------------|-----------------------|-----------|--------------|---------------------|--|--|--|
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           | Oath                                                                              | Days away from work | Remained at work            |                        | Away From Work (days) | On job transfer or restriction (days)                   | (M)    |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     | Job transfer or restriction | Other recordable cases |                       |                                                         | Injury | Skin Disorder                                            | Respiratory Condition | Poisoning | Hearing Loss | All other illnesses |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           | (G)                                                                               | (H)                 | (I)                         | (J)                    | (K)                   | (L)                                                     | (1)    | (2)                                                      | (3)                   | (4)       | (5)          | (6)                 |  |  |  |
| 22-01           | [REDACTED]             | Apprentice Electrician          | 5/4/2022                                            | Cloverdale                                                    | Bumped elbow, bruised elbow                                                                                                                                                               | 0                                                                                 | 0                   | 0                           | 0                      | 0                     | 0                                                       | 0      | 0                                                        | 0                     | 0         | 0            | 0                   |  |  |  |
| 22-02           | [REDACTED]             | Foreman Electrician             | 5/9/2022                                            | Fort Yates Airport                                            | slepped in hole, sprain/strain knee                                                                                                                                                       | 0                                                                                 | 0                   | 0                           | x                      | 0                     | 0                                                       | x      | 0                                                        | 0                     | 0         | 0            | 0                   |  |  |  |
| 22-03           | [REDACTED]             | Foreman Electrician             | 5/11/2022                                           | St. Marys Cemetery                                            | uneven walking surfaces, twisted knee                                                                                                                                                     | 0                                                                                 | 0                   | 0                           | 0                      | 0                     | 0                                                       | 0      | 0                                                        | 0                     | 0         | 0            | 0                   |  |  |  |
| 22-04           | [REDACTED]             | Apprentice Electrician          | 5/16/2022                                           | Univ&Airt Traffic Signal                                      | Equipment failure, small bruise on left forearm                                                                                                                                           | 0                                                                                 | 0                   | 0                           | 0                      | 0                     | 0                                                       | 0      | 0                                                        | 0                     | 0         | 0            | 0                   |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
|                 |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           |                                                                                   |                     |                             |                        |                       |                                                         |        |                                                          |                       |           |              |                     |  |  |  |
| Page totals     |                        |                                 |                                                     |                                                               |                                                                                                                                                                                           | 0                                                                                 | 0                   | 0                           | 1                      | 0                     | 0                                                       | 1      | 0                                                        | 0                     | 0         | 0            | 0                   |  |  |  |

Be sure to transfer these totals to the Summary page (Form 900A).

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time for reviewing the instruction, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

## Log of Work-Related Injuries and Illnesses

State ND

Edling Electric Inc

Check the "injury" column or choose one type of illness:

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

(1) (2) (3) (4) (5) (6)

# Schedule A—Current Projects

*See Attached*

|                                                                                                                     |  |                 |  |                         |  |
|---------------------------------------------------------------------------------------------------------------------|--|-----------------|--|-------------------------|--|
| Name of Organization                                                                                                |  | Project Name    |  |                         |  |
| Project Owner                                                                                                       |  |                 |  |                         |  |
| General Description of Project                                                                                      |  |                 |  |                         |  |
| Project Cost                                                                                                        |  | Date Project    |  |                         |  |
| Key Project Personnel                                                                                               |  | Project Manager |  | Project Superintendent  |  |
| Name                                                                                                                |  |                 |  | Safety Manager          |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                 |  | Quality Control Manager |  |
| Name                                                                                                                |  | Title/Position  |  | Organization            |  |
| Owner                                                                                                               |  |                 |  | Telephone               |  |
| Designer                                                                                                            |  |                 |  |                         |  |
| Construction Manager                                                                                                |  |                 |  |                         |  |
| Project Owner                                                                                                       |  | Project Name    |  |                         |  |
| General Description of Project                                                                                      |  |                 |  |                         |  |
| Project Cost                                                                                                        |  | Date Project    |  |                         |  |
| Key Project Personnel                                                                                               |  | Project Manager |  | Project Superintendent  |  |
| Name                                                                                                                |  |                 |  | Safety Manager          |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                 |  | Quality Control Manager |  |
| Name                                                                                                                |  | Title/Position  |  | Organization            |  |
| Owner                                                                                                               |  |                 |  | Telephone               |  |
| Designer                                                                                                            |  |                 |  |                         |  |
| Construction Manager                                                                                                |  |                 |  |                         |  |
| Project Owner                                                                                                       |  | Project Name    |  |                         |  |
| General Description of Project                                                                                      |  |                 |  |                         |  |
| Project Cost                                                                                                        |  | Date Project    |  |                         |  |
| Key Project Personnel                                                                                               |  | Project Manager |  | Project Superintendent  |  |
| Name                                                                                                                |  |                 |  | Safety Manager          |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                 |  | Quality Control Manager |  |
| Name                                                                                                                |  | Title/Position  |  | Organization            |  |
| Owner                                                                                                               |  |                 |  | Telephone               |  |
| Designer                                                                                                            |  |                 |  |                         |  |
| Construction Manager                                                                                                |  |                 |  |                         |  |
| Project Owner                                                                                                       |  | Project Name    |  |                         |  |
| General Description of Project                                                                                      |  |                 |  |                         |  |
| Project Cost                                                                                                        |  | Date Project    |  |                         |  |
| Key Project Personnel                                                                                               |  | Project Manager |  | Project Superintendent  |  |
| Name                                                                                                                |  |                 |  | Safety Manager          |  |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |  |                 |  | Quality Control Manager |  |
| Name                                                                                                                |  | Title/Position  |  | Organization            |  |
| Owner                                                                                                               |  |                 |  | Telephone               |  |
| Designer                                                                                                            |  |                 |  |                         |  |
| Construction Manager                                                                                                |  |                 |  |                         |  |



# Edling Electric, Inc

## Schedule A Current Experience

| Job # | Project Name                                                                                                | Owner                                                                                            | Design Engineer                                      | Contract Date | Type of Work              | Status          | Contract Price |
|-------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------|---------------------------|-----------------|----------------|
| 2030  | UTTC South Campus Storm Water Improve. Bismarck, ND                                                         | United Tribes Technical College<br>3315 University Dr, Bismarck, ND 58504<br>701-255-3285        | Swenson, Hagen & Co<br>Cale Wagner<br>701-223-2600   | 3/22/2023     | Electrical - Lift Station | 65%<br>#REF!    | \$ 121,500.00  |
| 6204  | Center Lift Station<br>Lift Station, Force Main, and Wastewater Treatment Lagoon Improvements<br>Center, ND | City of Center<br>312 N Lincoln Ave, Center, ND 58530<br>701-794-3650                            | Prairie Engineering<br>Jeremy Butman<br>701-258-3493 | 2/23/2023     | Electrical - Lift Station | 35%<br>Complete | \$ 217,600.00  |
| 6206  | State Penitentiary Lift Station<br>Lift Station<br>Bismarck, ND                                             | ND Dept of Corrections & Rehabilitation<br>3100 Railroad Ave, Bismarck, ND 58506<br>701-328-6390 | Apex Engineering<br>Blake Sander<br>701-323-3950     | 1/29/2024     | Electrical Lift Station   | 4%<br>Complete  | \$ 947,600.00  |

## Schedule B—Previous Experience with Similar Projects

*See Attached*

|                                                                                                                     |                 |                        |              |                |                         |
|---------------------------------------------------------------------------------------------------------------------|-----------------|------------------------|--------------|----------------|-------------------------|
| Name of Organization                                                                                                |                 | Project Name           |              |                |                         |
| Project Owner                                                                                                       |                 |                        |              |                |                         |
| General Description of Project                                                                                      |                 |                        |              |                |                         |
| Project Cost                                                                                                        |                 | Date Project           |              |                |                         |
| Key Project Personnel                                                                                               | Project Manager | Project Superintendent |              | Safety Manager | Quality Control Manager |
| Name                                                                                                                |                 |                        |              |                |                         |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                 |                        |              |                |                         |
| Owner                                                                                                               | Name            | Title/Position         | Organization | Telephone      | Email                   |
| Designer                                                                                                            |                 |                        |              |                |                         |
| Construction Manager                                                                                                |                 |                        |              |                |                         |
|                                                                                                                     |                 |                        |              |                |                         |
| Project Owner                                                                                                       |                 | Project Name           |              |                |                         |
| General Description of Project                                                                                      |                 |                        |              |                |                         |
| Project Cost                                                                                                        |                 | Date Project           |              |                |                         |
| Key Project Personnel                                                                                               | Project Manager | Project Superintendent |              | Safety Manager | Quality Control Manager |
| Name                                                                                                                |                 |                        |              |                |                         |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                 |                        |              |                |                         |
| Owner                                                                                                               | Name            | Title/Position         | Organization | Telephone      | Email                   |
| Designer                                                                                                            |                 |                        |              |                |                         |
| Construction Manager                                                                                                |                 |                        |              |                |                         |
|                                                                                                                     |                 |                        |              |                |                         |
| Project Owner                                                                                                       |                 | Project Name           |              |                |                         |
| General Description of Project                                                                                      |                 |                        |              |                |                         |
| Project Cost                                                                                                        |                 | Date Project           |              |                |                         |
| Key Project Personnel                                                                                               | Project Manager | Project Superintendent |              | Safety Manager | Quality Control Manager |
| Name                                                                                                                |                 |                        |              |                |                         |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                 |                        |              |                |                         |
| Owner                                                                                                               | Name            | Title/Position         | Organization | Telephone      | Email                   |
| Designer                                                                                                            |                 |                        |              |                |                         |
| Construction Manager                                                                                                |                 |                        |              |                |                         |
|                                                                                                                     |                 |                        |              |                |                         |
| Project Owner                                                                                                       |                 | Project Name           |              |                |                         |
| General Description of Project                                                                                      |                 |                        |              |                |                         |
| Project Cost                                                                                                        |                 | Date Project           |              |                |                         |
| Key Project Personnel                                                                                               | Project Manager | Project Superintendent |              | Safety Manager | Quality Control Manager |
| Name                                                                                                                |                 |                        |              |                |                         |
| Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference) |                 |                        |              |                |                         |
| Owner                                                                                                               | Name            | Title/Position         | Organization | Telephone      | Email                   |
| Designer                                                                                                            |                 |                        |              |                |                         |
| Construction Manager                                                                                                |                 |                        |              |                |                         |

EJCDC® C-451, Qualifications Statement—Schedule B—Previous Experience with Similar Projects.

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**Schedule B**  
Previous Experience

| <b>Job #</b> | <b>Project Name</b>                                                        | <b>Owner</b>                                                                               | <b>Design Engineer</b>                          | <b>Contract Date</b> | <b>Type of Work</b>          | <b>Contract Price</b> | <b>Completion Date</b> |
|--------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------------------------|----------------------|------------------------------|-----------------------|------------------------|
| 6202         | Tom O'Leary Intake Structure Improvements<br>Bismarck, ND                  | Bismarck Parks & Rec (701)222-6455<br>400 E Front Ave, Bismarck, ND 58504                  | Apex Engineering 701-323-3950<br>John Klein     | 9/26/2022            | Electrical -<br>Intake Imp.  | \$ 98,120.00          | Oct-23                 |
| 2023         | WTP Filters 1-6 Piping Replace/Effluent Pipe<br>Bismarck, ND               | City of Bismarck (701)355-1700<br>221 N 5th St, Bismarck, ND 58501                         | HDR 605-977-7760<br>Kevin Newnan                | 9/13/2022            | Electrical -<br>WTP Imp.     | \$ 687,500.00         | Apr-24                 |
| 6198         | High Lift Pump No. 5 Improvements<br>Bismarck, ND                          | City of Bismarck (701)355-1700<br>221 N 5th St, Bismarck, ND 58501                         | HDR 605-977-7760<br>Kevin Newnan                | 10/27/2021           | Electrical -<br>WTP Imp.     | \$ 323,600.00         | Apr-24                 |
| 2018         | Sanitary Sewer Lift Lift Station-District 63<br>Mandan, ND                 | City of Mandan (701)667-3215<br>205 2nd Ave NW, Mandan, ND 58554                           | Moore Eng. 701-282-4692<br>Josh Feil            | 9/9/2021             | Electrical -<br>Lift Station | \$ 139,700.00         | Jul-23                 |
| 6196         | Ralph Walker WTP Expansion<br>Wakpala, SD                                  | Standing Rock Sioux Tribe<br>PO Box 429, Ft Yates, ND 58538                                | Bartlett & West - 701-221-8345<br>Tyson Decker  | 5/26/2021            | Electrical -<br>WTP          | \$ 382,900.00         | Apr-24                 |
| 6193         | N Burleigh WTP Pre-Treatment<br>Bismarck, ND                               | South Central Reg Water Dist (701)258-8710<br>10700 Hwy 1804 N, Bismarck, ND 58503         | Bartlett & West - 701-221-8345<br>Tyson Decker  | 12/17/2019           | Electrical -<br>WTP          | \$ 208,500.00         | Nov-20                 |
| 6186         | Dodge & Richardson Pump Station Upgrades<br>Dodge & Richardson, ND         | ND St Water Commission-Todd (701)328-2750<br>900 E Blvd Ave, Bismarck, ND 58505            | Bartlett & West - 701-221-8345<br>Tyson Decker  | 10/26/2018           | Electrical -<br>WTP          | \$ 488,700.00         | May-20                 |
| 6178         | Dickinson WTP Residuals Handling Facility<br>Dickinson, ND                 | ND St Water Commission-Todd (701)328-2750<br>900 E Blvd Ave, Bismarck, ND 58505            | Bartlett & West - 701-221-8345<br>Tyson Decker  | 9/11/2017            | Electrical -<br>WTP          | \$ 862,600.00         | Mar-19                 |
| 1764         | Bismarck WWTF Trickling Filter Imp Ph 2<br>Bismarck, ND                    | City of Bismarck-Michelle Klose (701)355-1700<br>221 N 5th St, Bismarck, ND 58503          | AE2S - 701-221-0530<br>Nick Thompson            | 4/3/2017             | Electrical -<br>WWTF         | \$ 72,950.00          | Nov-18                 |
| 6164         | Dickinson Water Treatment Plant<br>Dickinson, ND                           | ND St Water Commission-Todd (701)328-2750<br>900 E Blvd Ave, Bismarck, ND 58505            | Bartlett & West - 701-221-8345<br>Tyson Decker  | 3/21/2016            | Electrical -<br>WTP          | \$ 2,899,500.00       | Feb-18                 |
| 3952         | SWPP Pump St Standby Generator Upgrade<br>Richardson, Dodge, Dickinson, ND | ND St Water Comm - Todd 701-328-2750<br>900 E Blvd Ave, Bismarck, ND 58505                 | Bartlett & West - 701-<br>221-8345 Cole Prevost | 3/9/2016             | Generator                    | \$ 1,847,000.00       | Apr-17                 |
| 1747         | Bismarck WWTF Trickling Filter Improvements<br>Bismarck, ND                | City of Bismarck-Michelle Klose (701)355-1700<br>221 N 5th St, Bismarck, ND 58503          | AE2S - 701-221-0530<br>Nick Thompson            | 8/25/2015            | Electrical -<br>WWTF         | \$ 1,330,000.00       | Jul-17                 |
| 6153         | Mandan WWTF Interim Optimization<br>Mandan, ND                             | City of Mandan-Steve Himmelsbach (701)667-3278<br>205 2nd Ave NW, Mandan, ND 58554         | AE2S - 701-221-0530<br>Laihi Hintz              | 1/26/2015            | Electrical -<br>WWTF         | \$ 421,400.00         | Feb-16                 |
| 3897         | NDYCC Standby Generator<br>Mandan, ND                                      | ND Dept of Corrections & Rehab-Chris (701)667-140<br>3100 Railroad Ave, Bismarck, ND 58506 | Curt Johnson<br>AE2S - 701-221-0530             | 7/25/2014            | Generator                    | \$ 123,500.00         | Jan-15                 |
| 6148         | Bismarck Water Treatment Softener Expansion<br>Bismarck, ND                | City of Bismarck - Keith Demke (701)222-6431<br>221 N 5th St, Bismarck, ND 58503           | AE2S - 701-221-0530<br>Laihi Hintz              | 6/2/2014             | Electrical -<br>WTP          | \$ 968,400.00         | Jul-16                 |
| 6145         | OMND WTP Ph 2 Expansion & Eq. Install.<br>Zap, ND                          | ND St Water Commission-Todd (701)328-2750<br>900 E Blvd Ave, Bismarck, ND 58505            | Bartlett & West - 701-221-8345<br>Tyson Decker  | 12/13/2013           | Electrical -<br>WTP          | \$ 396,400.00         | Sep-14                 |
| 6142         | Bismarck WTP Backwash Reclaim Imp 6142<br>Bismarck, ND                     | City of Bismarck - Keith Demke (701)222-6431<br>221 N 5th St, Bismarck, ND 58503           | AE2S - 701-221-0530<br>Laihi Hintz              | 10/8/2013            | Electrical -<br>WTP          | \$ 179,290.00         | Dec-14                 |
| 6140         | West End Reservoir Expansion<br>Bismarck, ND                               | City of Bismarck - Keith Demke (701)222-6431<br>221 N 5th St, Bismarck, ND 58503           | AE2S - 701-221-0530<br>Laihi Hintz              | 5/14/2013            | Electrical -<br>WTP          | \$ 774,296.60         | Dec-15                 |

# **Schedule C—Key Individuals**

|                                                                                                              |  |                                       |                                   |
|--------------------------------------------------------------------------------------------------------------|--|---------------------------------------|-----------------------------------|
| <b>Project Manager</b>                                                                                       |  |                                       |                                   |
| Name of individual                                                                                           |  | Jason Rodd                            |                                   |
| Years of experience as project manager                                                                       |  | 5                                     |                                   |
| Years of experience with this organization                                                                   |  | 20                                    |                                   |
| Number of similar projects as project manager                                                                |  | 10+                                   |                                   |
| Number of similar projects in other positions                                                                |  | 20+                                   |                                   |
| Current Project Assignments                                                                                  |  |                                       |                                   |
| Name of assignment                                                                                           |  | Percent of time used for this project | Estimated project completion date |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |  |                                       |                                   |
| Name                                                                                                         |  | Name                                  |                                   |
| Title/Position                                                                                               |  | Title/Position                        |                                   |
| Organization                                                                                                 |  | Organization                          |                                   |
| Telephone                                                                                                    |  | Telephone                             |                                   |
| Email                                                                                                        |  | Email                                 |                                   |
| Project                                                                                                      |  | Project                               |                                   |
| Candidate's role on project                                                                                  |  | Candidate's role on project           |                                   |
| <b>Project Superintendent</b> Unknown at this time                                                           |  |                                       |                                   |
| Name of individual                                                                                           |  |                                       |                                   |
| Years of experience as project superintendent                                                                |  |                                       |                                   |
| Years of experience with this organization                                                                   |  |                                       |                                   |
| Number of similar projects as project superintendent                                                         |  |                                       |                                   |
| Number of similar projects in other positions                                                                |  |                                       |                                   |
| Current Project Assignments                                                                                  |  |                                       |                                   |
| Name of assignment                                                                                           |  | Percent of time used for this project | Estimated project completion date |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |  |                                       |                                   |
| Name                                                                                                         |  | Name                                  |                                   |
| Title/Position                                                                                               |  | Title/Position                        |                                   |
| Organization                                                                                                 |  | Organization                          |                                   |
| Telephone                                                                                                    |  | Telephone                             |                                   |
| Email                                                                                                        |  | Email                                 |                                   |
| Project                                                                                                      |  | Project                               |                                   |
| Candidate's role on project                                                                                  |  | Candidate's role on project           |                                   |



|                                                                                                              |  |                                       |                                   |
|--------------------------------------------------------------------------------------------------------------|--|---------------------------------------|-----------------------------------|
| <b>Safety Manager</b>                                                                                        |  |                                       |                                   |
| Name of individual                                                                                           |  | Brady Hanson                          |                                   |
| Years of experience as project manager                                                                       |  | 4                                     |                                   |
| Years of experience with this organization                                                                   |  | 8                                     |                                   |
| Number of similar projects as project manager                                                                |  | 10+                                   |                                   |
| Number of similar projects in other positions                                                                |  | 20+                                   |                                   |
| Current Project Assignments                                                                                  |  |                                       |                                   |
| Name of assignment                                                                                           |  | Percent of time used for this project | Estimated project completion date |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |  |                                       |                                   |
| Name                                                                                                         |  | Name                                  |                                   |
| Title/Position                                                                                               |  | Title/Position                        |                                   |
| Organization                                                                                                 |  | Organization                          |                                   |
| Telephone                                                                                                    |  | Telephone                             |                                   |
| Email                                                                                                        |  | Email                                 |                                   |
| Project                                                                                                      |  | Project                               |                                   |
| Candidate's role on project                                                                                  |  | Candidate's role on project           |                                   |
| <b>Quality Control Manager</b>                                                                               |  |                                       |                                   |
| Name of individual                                                                                           |  |                                       |                                   |
| Years of experience as project superintendent                                                                |  |                                       |                                   |
| Years of experience with this organization                                                                   |  |                                       |                                   |
| Number of similar projects as project superintendent                                                         |  |                                       |                                   |
| Number of similar projects in other positions                                                                |  |                                       |                                   |
| Current Project Assignments                                                                                  |  |                                       |                                   |
| Name of assignment                                                                                           |  | Percent of time used for this project | Estimated project completion date |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
|                                                                                                              |  |                                       |                                   |
| Reference Contact Information (listing names indicates approval to contact named individuals as a reference) |  |                                       |                                   |
| Name                                                                                                         |  | Name                                  |                                   |
| Title/Position                                                                                               |  | Title/Position                        |                                   |
| Organization                                                                                                 |  | Organization                          |                                   |
| Telephone                                                                                                    |  | Telephone                             |                                   |
| Email                                                                                                        |  | Email                                 |                                   |
| Project                                                                                                      |  | Project                               |                                   |
| Candidate's role on project                                                                                  |  | Candidate's role on project           |                                   |



## **KEY PERSON RESUME**

### **JAMES R. RUUD – PRESIDENT/ESTIMATOR/PROJECT MANAGER**

James Ruud joined Edling Electric in 2005. Ruud received his Bachelor of Science Degree in Construction Management from North Dakota State University. He has five years field experience on a variety of civil, commercial and residential construction projects. He is a registered Associate Constructor through the American Institute of Constructors. Ruud oversees outside construction projects including roadway lighting, traffic signals, and airport lighting.

### **DAVID L. RUSSELL – VICE PRESIDENT/ESTIMATOR/PROJECT MANAGER**

Dave Russell joined Edling Electric as an estimator/project manager in 2004. Russell is a graduate of ND State School of Science and the IBEW's four-year Apprenticeship Training Program. He has five years of field experience on a variety of industrial, commercial, and residential construction projects. Russell works with new construction, remodels, maintenance and roadway lighting projects.

### **RICK OLIVER - PROJECT MANAGER**

Rick Oliver has been with Edling Electric since the beginning of 2015. Oliver has over twenty-four years of field and project management experience and has served as foreman and superintendent for numerous Commercial, Residential, Industrial, and NDDOT projects. He is currently working as an Estimator/Project Manager. Mr. Oliver is licensed as a Master Electrician in ND. He helps coordinate manpower, prepares estimates and manages industrial, commercial, and NDDOT projects.

### **JASON RODD – PROJECT MANAGER**

Jason Rodd joined Edling Electric in 2005. Rodd has over twenty years of field experience as a field superintendent for numerous commercial, institutional, water and industrial projects. He is currently working as an Estimator/Project Manager. Rodd is a licensed Electrician in the state of North Dakota. He helps coordinate manpower, prepares estimates and manages commercial and water projects.

### **BRADY HANSON - SAFETY OFFICER / PROJECT MANAGER**

Brady Hanson has been with Edling Electric since 2016. Hanson is a four-year graduate of University of Mary and the IBEW's five-year Apprenticeship Training Program. He is a licensed Electrician in the state of North Dakota. He has experience working on a variety of projects including commercial, industrial, airport, and water. Hanson is OSHA 10 Certified and acts as the companies Safety Officer.

**KEY PERSON RESUME**  
**PAGE 2**

**JASON WILTZ - ACCOUNTANT**

Jason Wiltz joined Edling Electric as company Accountant in 2018. Wiltz received his Bachelor of Science Degree in Accounting from North Dakota State University. He brings six years of experience to the company. Wiltz is responsible for all aspects of accounting procedures including payroll, job cost management, and all of the company's financial reporting.

**KARLA SCHUMACHER-BOOKKEEPER/SECRETARY**

Karla Schumacher joined Edling Electric in 2000. Schumacher graduated from Moorhead State University with an Associate of Science Degree in Accounting. She brings over fifteen years of accounting and secretarial experience to the company. Schumacher assists with the operations of the Accounting Department, and acts as a key support person for all departments.

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of 215

**The undersigned hereby certifies that the above information is true and correct.**

The undersigned hereby certifies that the above  
Contractor Edling Electric Inc

Signature James R. Reed

Date 8-1-24

United States Environmental Protection Agency  
Washington, DC 20460

**Certification Regarding Debarment, Suspension, and Other Responsibility Matters**

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three year period preceding this proposal been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

Edling Electric Inc  
James R. Rynd, President

Typed Name & Title of Authorized Representative

Signature of Authorized Representative

8-1-24  
Date

\_\_\_\_ I am unable to certify to the above statements. My explanation is attached.



**Collins Ave Reservoir Replacement**  
**City of Mandan**  
**Mandan, North Dakota**  
**AE2S Project No. P00510-2016-002**  
**Bid Opening Time: 10:00 AM CDT Date: Thursday August 1, 2024**

|   | Contractor          | Acknowledge Addenda 1-2 | Bid Sec Envelope |                         | Bid Envelope              |                    |                                               |                    | Contract No. 1<br>General Construction | Contract No. 2<br>Electrical Construction | Contract No. 3<br>Combined General and<br>Electrical Construction |
|---|---------------------|-------------------------|------------------|-------------------------|---------------------------|--------------------|-----------------------------------------------|--------------------|----------------------------------------|-------------------------------------------|-------------------------------------------------------------------|
|   |                     |                         | Bid Bond         | ND Contractor's License | MBE/WBE Solicitation Info | SRF Debarment Cert | Completed Bidders<br>Qualifications Statement | Completed Bid Form |                                        |                                           |                                                                   |
| 1 | Edling Electric     | X                       | X                | X                       | X                         | X                  | X                                             | X                  |                                        | \$214,500.00                              |                                                                   |
| 2 | Skeels Electric     | X                       | X                | X                       |                           |                    | X                                             | X                  |                                        | \$907,215.00                              |                                                                   |
| 3 | DN Tanks            | X                       | X                | X                       | X                         | X                  | X                                             | X                  | \$5,935,800.00                         |                                           |                                                                   |
| 4 | Preload             | X                       | X                | X                       | X                         | X                  | X                                             | X                  | \$7,417,000.00                         |                                           | \$7,724,000.00                                                    |
| 5 |                     |                         |                  |                         |                           |                    |                                               |                    |                                        |                                           |                                                                   |
|   |                     |                         |                  |                         |                           |                    |                                               |                    |                                        |                                           |                                                                   |
|   | Engineer's Estimate |                         |                  |                         |                           |                    |                                               |                    | \$5,200,000.00                         | \$200,000.00                              | \$5,400,000.00                                                    |



Advanced Engineering and Environmental Services, LLC  
 1815 Schafer Street, Suite 301  
 Bismarck, ND 58501  
 Tel: 701-221-0530

  
 Tyler Fode, PE

## NOTICE OF AWARD

Date of Issuance: August 20, 2024  
Owner: **City of Mandan** Owner's Project No.: **2024-04**  
Engineer: **AE2S** Engineer's Project No.: **P00510-2016-002**  
Project: **Collins Avenue Reservoir Replacement**  
Contract Name: General Construction  
Bidder: DN Tanks, LLC  
Bidder's Address: 410 East Trinity Blvd, Grand Prairie, TX 75050

You are notified that Owner has accepted your Bid dated **August 1, 2024** for the above Contract, and that you are the Successful Bidder and are awarded a Contract for: **Contract No. 1 – General Construction**

The Contract Price of the awarded Contract is **\$5,935,800.00**. Contract Price is subject to adjustment based on the provisions of the Contract, including but not limited to those governing changes, Unit Price Work, and Work performed on a cost-plus-fee basis, as applicable.

**Three (3)** unexecuted counterparts of the Agreement accompany this Notice of Award, and one copy of the Contract Documents accompanies this Notice of Award, or has been transmitted or made available to Bidder electronically.

☒ Drawings will be delivered separately from the other Contract Documents.

You must comply with the following conditions precedent within 15 days of the date of receipt of this Notice of Award:

1. Deliver to Owner **three (3)** counterparts of the Agreement, signed by Bidder (as Contractor).
2. Deliver with the signed Agreement(s) the Contract security (such as required performance and payment bonds) and insurance documentation, as specified in the Instructions to Bidders and in the General Conditions, Articles 2 and 6.
3. Other conditions precedent (if any):
  - a. **Deliver current Workman's Compensation Certificate of Premium Paid.**
  - b. **Deliver Contractor's Certificate of North Dakota income and Sales Tax Clearance.**

Failure to comply with these conditions within the time specified will entitle Owner to consider you in default, annul this Notice of Award, and declare your Bid security forfeited.

Within 10 days after you comply with the above conditions, Owner will return to you one fully signed counterpart of the Agreement, together with any additional copies of the Contract Documents as indicated in Paragraph 2.02 of the General Conditions.

Owner: City of Mandan

By (signature): \_\_\_\_\_

Name (printed): \_\_\_\_\_

Title: \_\_\_\_\_

Copy: Engineer

---

EJCDC® C-510, Notice of Award.

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Page 1 of 1



## NOTICE OF AWARD

Date of Issuance: August 20, 2024  
Owner: **City of Mandan** Owner's Project No.: **2024-04**  
Engineer: **AE2S** Engineer's Project No.: **P00510-2016-002**  
Project: **Collins Avenue Reservoir Replacement**  
Contract Name: Electrical Construction  
Bidder: Edling Electric, Inc.  
Bidder's Address: PO Box 1456, Bismarck, ND 58502

You are notified that Owner has accepted your Bid dated **August 1, 2024** for the above Contract, and that you are the Successful Bidder and are awarded a Contract for: **Contract No. 2 – Electrical Construction**

The Contract Price of the awarded Contract is **\$214,500.00**. Contract Price is subject to adjustment based on the provisions of the Contract, including but not limited to those governing changes, Unit Price Work, and Work performed on a cost-plus-fee basis, as applicable.

**Three (3)** unexecuted counterparts of the Agreement accompany this Notice of Award, and one copy of the Contract Documents accompanies this Notice of Award, or has been transmitted or made available to Bidder electronically.

☒ Drawings will be delivered separately from the other Contract Documents.

You must comply with the following conditions precedent within 15 days of the date of receipt of this Notice of Award:

1. Deliver to Owner **three (3)** counterparts of the Agreement, signed by Bidder (as Contractor).
2. Deliver with the signed Agreement(s) the Contract security (such as required performance and payment bonds) and insurance documentation, as specified in the Instructions to Bidders and in the General Conditions, Articles 2 and 6.
3. Other conditions precedent (if any):
  - a. **Deliver current Workman's Compensation Certificate of Premium Paid.**
  - b. **Deliver Contractor's Certificate of North Dakota income and Sales Tax Clearance.**

Failure to comply with these conditions within the time specified will entitle Owner to consider you in default, annul this Notice of Award, and declare your Bid security forfeited.

Within 10 days after you comply with the above conditions, Owner will return to you one fully signed counterpart of the Agreement, together with any additional copies of the Contract Documents as indicated in Paragraph 2.02 of the General Conditions.

Owner: City of Mandan

By (signature): \_\_\_\_\_

Name (printed): \_\_\_\_\_

Title: \_\_\_\_\_

Copy: Engineer

---

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Page 1 of 1

**Amendment No. 1 To Task Order No. 7**

---

**1. Background Data:**

- a. Effective Date of Task Order: December 19, 2023
- b. Owner: City of Mandan
- c. Engineer: Advanced Engineering and Environmental Services, LLC
- d. Specific Project: New 2,000,000-gallon prestressed concrete ground storage reservoir located at the Collins Avenue site including site work, electrical improvements, and demolition of the existing 2,000,000-gallon reservoir.

**2. Description of Modifications**

- a. Engineer shall perform the following Additional Services set forth in the following sections of Exhibit A, as attached to the Agreement with such sections being hereby incorporated by reference:
  - Construction Phase Services as presented in Exhibit A, Paragraph A1.05 with the following additions or modifications.
    - Including Resident Project Representative Services A1.05.A.2 and Exhibit D, incorporated by reference, with paragraph D1.01.A modified as follows:
      - Engineer shall furnish a Resident Project Representative (“RPR”) to assist Engineer in observing progress and quality of Work. The RPR will provide representation for 25 hours per week for an anticipated 40 weeks of active construction. RPR is Engineer’s representative at the Site, will act as directed by and under the supervision of Engineer, and will confer with Engineer regarding RPR’s actions.
    - Provide Baselines & Benchmarks consistent with Exhibit A Paragraph A1.05.A.8. This scope of work assumes a maximum of one construction survey day for the completion of the project.
    - Provide weekly status reports to Owner.
    - Coordinate biweekly construction progress reports. Meetings will be held in-person in Mandan, North Dakota and attended by Engineer’s Project Manager. This scope of work assumes a maximum of 20 meetings.
    - Funding Assistance Services as identified below. This scope of work assumes a maximum of 10 funding reimbursement requests.
      - Aid the City with application for Drinking Water State Revolving Fund (DWSRF) Loan and State Water Commission (SWC) Grant reimbursements and interim funding, as requested.
      - SRF Construction Compliance Requirements.
      - Conduct Davis-Bacon wage interviews during Construction Phase at appropriate intervals.
      - Review weekly contractor certified payrolls and compare with wage interviews.

- Post-Construction Phase Services as presented in Exhibit A, Paragraph A1.06 with the following additions and modifications.
  - Prepare and furnish to Owner, in format agreed to, Record Drawings showing appropriate record information based on Project annotated record documents received from Contractor. Supplement Record Drawings with information obtained from field observations.
  - Post-Construction Phase deliverables shall consist of the following materials:
    - Record Drawings in hardcopy (x1) and electronic format.
    - GIS shapefiles in Owner's standard format.
    - Operation and Maintenance Manuals in hardcopy (x1) and electronic format.
    - Shop drawings in electronic format.
- Commission Phase Services as presented in Exhibit A, Paragraph A1.07 with the following additions or modifications.
  - Programming: Engineer shall perform all control system programming necessary to fully integrate new systems into the existing Supervisory Control and Data Acquisition (SCADA) system, provide programming of programmable logic controllers (PLCs) to accommodate operation modes, including automatic control and various automatic or semi-automated operational sequences.
  - Commissioning: Engineer shall provide field startup coordination for contractor installations.

b. For the Additional Services or the modifications to services set forth above, Owner shall pay Engineer the following additional or modified compensation:

| Description of Service                       | Amount    | Basis of Compensation  |
|----------------------------------------------|-----------|------------------------|
| 1. Basic Services (Part 1 of Exhibit A)      |           |                        |
| a. Construction Phase (A1.05)*               | \$310,000 | Hourly not to exceed   |
| b. Post-Construction Phase (A1.06)           | \$27,000  | Hourly not to exceed   |
| c. Commissioning Phase (A1.07)               | \$22,000  | Hourly not to exceed   |
|                                              |           |                        |
| <b>TOTAL ADDITIONAL COMPENSATION</b>         | \$359,000 |                        |
| 2. Additional Services (Part 2 of Exhibit A) | (N/A)     | Hourly when Authorized |

\*Based on a 40 -week continuous construction period.

- c. The schedule for rendering services under this Task Order is modified as follows:
- Construction Phase in 2025
  - Commission Phase in 2026
  - Post Construction Phase in 2026

**3. Task Order Summary (Reference only)**

|    |                                  |           |
|----|----------------------------------|-----------|
| a. | Original Task Order amount:      | \$326,000 |
| b. | Net change for prior amendments: | \$ 0      |
| c. | This amendment amount:           | \$359,000 |
| d. | Adjusted Task Order amount:      | \$685,000 |

---

The foregoing Task Order Summary is for reference only and does not alter the terms of the Task Order, including those set forth in Exhibit C.

Owner and Engineer hereby agree to modify the above-referenced Task Order as set forth in this Amendment. All provisions of the Agreement and Task Order not modified by this or previous Amendments remain in effect. The Effective Date of this Amendment is August 20, 2024.

OWNER:  
  
By: \_\_\_\_\_  
  
Print Name: Mayor James A. Froelich  
  
Title: President of the Board of City Commissioners  
  
Date Signed: \_\_\_\_\_

ENGINEER:  
  
By:  \_\_\_\_\_  
  
Print Name: Brian R. Bergantine, PE  
  
Title: Project Quality Director  
  
Date Signed: 7/16/2024

## **2024 HOURLY FEE AND EXPENSE SCHEDULE**

### Labor Rates\*

|                             |          |                         |            |
|-----------------------------|----------|-------------------------|------------|
| Administrative 1            | \$67.00  | IT 1                    | \$135.00   |
| Administrative 2            | \$82.00  | IT 2                    | \$182.00   |
| Administrative 3            | \$99.00  | IT 3                    | \$223.00   |
| Communications Specialist 1 | \$109.00 | Land Surveyor Assistant | \$99.00    |
| Communications Specialist 2 | \$127.00 | Land Surveyor 1         | \$119.00   |
| Communications Specialist 3 | \$146.00 | Land Surveyor 2         | \$144.00   |
| Communications Specialist 4 | \$176.00 | Land Surveyor 3         | \$163.00   |
| Communications Specialist 5 | \$194.00 | Land Surveyor 4         | \$179.00   |
|                             |          | Land Surveyor 5         | \$197.00   |
| Construction Services 1     | \$130.00 | Operations Specialist 1 | \$104.00   |
| Construction Services 2     | \$159.00 | Operations Specialist 2 | \$130.00   |
| Construction Services 3     | \$176.00 | Operations Specialist 3 | \$161.00   |
| Construction Services 4     | \$195.00 | Operations Specialist 4 | \$184.00   |
| Construction Services 5     | \$216.00 | Operations Specialist 5 | \$206.00   |
| Engineering Assistant 1     | \$88.00  | Project Coordinator 1   | \$120.00   |
| Engineering Assistant 2     | \$103.00 | Project Coordinator 2   | \$135.00   |
| Engineering Assistant 3     | \$130.00 | Project Coordinator 3   | \$150.00   |
| Engineer 1                  | \$140.00 | Project Coordinator 4   | \$166.00   |
| Engineer 2                  | \$168.00 | Project Coordinator 5   | \$187.00   |
| Engineer 3                  | \$197.00 |                         |            |
| Engineer 4                  | \$228.00 | Project Manager 1       | \$213.00   |
| Engineer 5                  | \$244.00 | Project Manager 2       | \$233.00   |
|                             |          | Project Manager 3       | \$249.00   |
| Engineering Technician 1    | \$87.00  | Project Manager 4       | \$264.00   |
| Engineering Technician 2    | \$109.00 | Project Manager 5       | \$282.00   |
| Engineering Technician 3    | \$131.00 | Project Manager 6       | \$295.00   |
| Engineering Technician 4    | \$146.00 |                         |            |
| Engineering Technician 5    | \$167.00 | Sr. Designer 1          | \$185.00   |
|                             |          | Sr. Designer 2          | \$205.00   |
| Financial Analyst 1         | \$116.00 | Sr. Designer 3          | \$220.00   |
| Financial Analyst 2         | \$132.00 |                         |            |
| Financial Analyst 3         | \$159.00 | Sr. Financial Analyst 1 | \$218.00   |
| Financial Analyst 4         | \$173.00 | Sr. Financial Analyst 2 | \$239.00   |
| Financial Analyst 5         | \$193.00 | Sr. Financial Analyst 3 | \$259.00   |
|                             |          |                         |            |
| GIS Specialist 1            | \$109.00 | Technical Expert 1      | \$335.00   |
| GIS Specialist 2            | \$132.00 | Technical Expert 2      | Negotiable |
| GIS Specialist 3            | \$156.00 |                         |            |
| GIS Specialist 4            | \$174.00 |                         |            |
| GIS Specialist 5            | \$194.00 |                         |            |
|                             |          |                         |            |
| I&C Assistant 1             | \$104.00 |                         |            |
| I&C Assistant 2             | \$129.00 |                         |            |
| I&C 1                       | \$154.00 |                         |            |
| I&C 2                       | \$182.00 |                         |            |
| I&C 3                       | \$205.00 |                         |            |
| I&C 4                       | \$218.00 |                         |            |
| I&C 5                       | \$228.00 |                         |            |



### Reimbursable Expense Rates

|                              |               |
|------------------------------|---------------|
| Transportation               | \$0.75/mile   |
| Survey Vehicle               | \$0.95/mile   |
| Laser Printouts/Photocopies  | \$0.30/copy   |
| Plotter Printouts            | \$1.00/s.f.   |
| UAS - Photo/Video Grade      | \$100.00/day  |
| UAS – Survey                 | \$50.00/day   |
| Total Station – Robotic      | \$35.00/hour  |
| Mapping GPS                  | \$25.00/hour  |
| Fast Static/RTK GPS          | \$50.00/hour  |
| All-Terrain Vehicle/Boat     | \$100.00/day  |
| Cellular Modem               | \$75.00/month |
| Web Hosting                  | \$26.00/month |
| Legal Services Reimbursement | \$280.00/hour |
| Outside Services             | cost * 1.15   |
| Geotechnical Services        | cost * 1.30   |
| Out of Pocket Expenses       | cost * 1.15   |
| Rental Car                   | cost * 1.20   |
| Project Specific Equipment   | Negotiable    |

\* Position titles are for labor rate grade purposes only.

These rates are subject to adjustment each year on January 1.



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 2, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** Addition of Activity to gaming site authorization for Mandan Moose Lodge

---

**STATEMENT/PURPOSE:**

To consider the addition to the gaming site authorization for Mandan Moose Lodge

**BACKGROUND/ALTERNATIVES:**

Mandan Moose Lodge submitted a new gaming site authorization on Aug. 2, 2024 to add "Twenty One" as an applicable game under the "Activity to be Conducted" section of the application. The gaming site authorization for July 2024-June 2025 timeframe was previously approved.

**ATTACHMENTS:**

1. Mandan Moose Lodge - Gaming Site Auth Addition of 21

**FISCAL IMPACT:**

n/a

**STAFF IMPACT:**

n/a

**LEGAL REVIEW:**

n/a

**RECOMMENDATION:**

Approve as presented

**SUGGESTED MOTION:**

I move to approve the addition to the gaming site authorization for Mandan Moose

City Commission

Agenda Documentation

August 20, 2024

Subject: Consider approval of an addition to the gaming site authorization for Mandan Moose Lodge #425 at Mandan Moose Lodge #425 from Sept 1, 2024 to June 30, 2025

Page 2 of 2

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Lodge #425 at Mandan Moose Lodge #425 from Sept 1, 2024 to June 30, 2025.



**GAMING SITE AUTHORIZATION**  
OFFICE OF ATTORNEY GENERAL  
SFN 17996 (02/2018)

G - \_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_  
Site License Number  
(Attorney General Use Only)

Full, Legal Name of Gaming Organization

*Mandan Moose Lodge #425*

The above organization is hereby authorized to conduct games of chance under the license granted by the Attorney General of the State of North Dakota at the following location

Name of Location

*Mandan Moose Lodge #425*

Street

*111 11<sup>th</sup> Ave NE*

City

*Mandan*

ZIP Code

*58557*

County

*Morton*

Beginning Date(s) Authorized

*9/1/24*

Ending Date(s) Authorized

*4/30/25*

Number of twenty-one  
tables if zero, enter "0":

Specific location where games of chance will be  
conducted and played at the site (required)

*Social quarters*

If conducting Raffle or Poker activity provide date(s) or month(s) of event(s) if known

*October*

**RESTRICTIONS (City/County Use Only)**

Days of week of gaming operations (if restricted)

Hours of gaming (if restricted)

**ACTIVITY TO BE CONDUCTED** Please check all applicable games to be conducted at site (required)



Bingo



**ELECTRONIC** Quick Shot Bingo



Raffles



**ELECTRONIC** 50/50 Raffle



Pull Tab Jar



Pull Tab Dispensing Device



**ELECTRONIC** Pull Tab Device



Club Special



Tip Board



Seal Board



Punchboard



Prize Board



Prize Board Dispensing Device



Sports Pools



Twenty-One



Poker



Calcuttas



Paddlewheels with Tickets



Paddlewheel Table

**APPROVALS**

Attorney General

Date

Signature of City/County Official

Date

**PRINT** Name and official position of person signing on behalf of city/county above

**INSTRUCTIONS:**

1. City/County-Retain a **copy** of the Site Authorization for your files.
2. City/County-Return the **original** Site Authorization form to the Organization.
3. Organizations - Send the **original, signed**, Site Authorization to the Office of Attorney General with any other applicable licensing forms for final approval.

**RETURN ALL DOCUMENTS TO:**

Office of Attorney General  
Licensing Section  
600 E Boulevard Ave, Dept. 125  
Bismarck, ND 58505-0040  
Telephone: 701-328-2329 **OR** 800-326-9240



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 6, 2024  
**SUBMITTING DEPARTMENT:** Police Department  
**DEPARTMENT DIRECTOR:** Jason Ziegler  
**PRESENTER:** Jason Ziegler, Police Chief  
**SUBJECT:** Consider approval of the Grant application to fund Dakota Child Advocacy Center to partially fund one Forensic Interviewer Staff Position and Vidanyx program. City of Mandan will be a pass through for funding.

---

#### **STATEMENT/PURPOSE:**

To allow the Dakota Children's Advocacy Center (DCAC) and City of Mandan to apply for a grant through the ND Attorney General's Office, and receive funds for the Dakota Child Advocacy Center (NDAC), which will be used to partially fund one forensic interviewer staff position and Vidanyx, a cloud based storage system for forensic interviews and medical reports storage. If grant is awarded, allow the City of Mandan and DCAC to collaborate in managing the grant. The grant recipient must be a political subdivision, which is the reason for this request. The City of Mandan will be a pass through for the funding, as required by the Justice Assistance Grant (JAG) Grant.

#### **BACKGROUND/ALTERNATIVES:**

The Dakota Child Advocacy Center benefits the Bismarck-Mandan area, not just one jurisdiction. It is a vital program for children who are victims of sexual assault and abuse. It is a program frequently used by Mandan Police Department when investigating sexual assault and abuse crimes. The project narrative in the attachments to this document gives a more in depth explanation of the program.

#### **ATTACHMENTS:**

1. CY2025 Application
2. City MOU- JAG

#### **FISCAL IMPACT:**

The amount of funds requested on the grant application is \$31,748.00. Grant funds

Subject: Consider approval of the Grant application to fund Dakota Child Advocacy Center to partially fund one Forensic Interviewer Staff Position and Vidanyx program; City of Mandan will be a pass through for funding

requested is \$20,636.20 and DCAC matching funds of \$11,111.80.

**STAFF IMPACT:**

The Police Department will collect the needed paperwork from the Dakota Child Advocacy Center and will submit paperwork quarterly as required by the grant. The finance department would issue payments to the Dakota Child Advocacy Center.

**LEGAL REVIEW:**

No review was requested due to this being a continuing grant application and the MOU is the same as in past years. The MOU has been reviewed by the City Attorney and approved in the past.

**RECOMMENDATION:**

I recommend approval of the attached grant application and acceptance of funds for the Dakota Child Advocacy Center program along with the agreement between the City of Mandan and the Dakota Child Advocacy Center.

**SUGGESTED MOTION:**

I move to approve the attached grant application and the acceptance of funds for the Dakota Child Advocacy Center.



# Edward Byrne Justice Assistance Grant (JAG) Application

## LOTTERY GRANT APPLICATION

OFFICE OF THE ATTORNEY GENERAL

Project Period 1/1/2025-12/31/2025

Application Deadline: Friday, August 26, 2024 11:59 PM

### I – APPLICATION OVERVIEW

#### Subrecipient contact information:

Name and Unique Entity Identifier (UEI) as registered with Sam.gov. This is the entity receiving the funding.

Entity Applying (Check One)



State or units of  
local government



Indian Tribe



Non-government  
victim witness  
assistance programs



Non-government domestic  
violence programs

Name of Subrecipient (City, County, State Agency)

City of Mandan

Unique Entity Identifier - **required**

FFL1LVHH6GA6^

Subrecipient Phone

701-667-3250

Suprecipient Street Address

205 1st Ave NW

City

Mandan

State

ND

Zip Code

58554

Suprecipient Contact Name

Pat Haug

Title

Captain

Email Address

phaug@mandanpd.com

**The authorized official must have the legal authority to commit the subrecipient to a contract or other agreement.**

Overall responsibility for the administration of the project rests with this individual.

Examples: mayor, city or county auditor, director of the agency, or Tribal Chairperson.

Name of Authorized Official

James Froelich

Title

Mayor

Phone

701-667-2020

Street Address

c/o City Hall 205 2nd Ave NW

City

Mandan

State

ND

Zip Code

58554

Email Address

**The Project Director has the direct responsibility for implementation of the project activities.**

This person will prepare and submit all progress reports as required by the Office of Attorney General.

Examples: task force coordinator or executive director.

Name of Project Director

Paula Condol

Title

Executive Director

Phone

701-323-5626

Street Address

1800 E Broadway Ave

City

Bismarck

State

ND

Zip Code

58501

Email Address

pcondol@dakotacac.org

**The Implementing Agency has direct responsibility for carrying out the activities of the grant.**

**Name of Implementing Agency**

**Dakota Children's Advocacy Center**

**The Fiscal Officer has the responsibility of the financial administration of the project.**

This person prepares and submits all financial reports as required by the Office of Attorney General.

Examples: city or county auditor, fiscal designee, or it can also be the project director.

**Name of Fiscal Officer**

**Cheryl Evensvold**

**Title**

**Accountant**

**Phone**

**701-323-5626**

**Street Address**

**1800 E Broadway Ave**

**City**

**Bismarck**

**State**

**ND**

**Zip Code**

**58501**

**Email Address**

**cevensvold@dakotacac.org**

**Authorized Program Area: (select all that apply)**

☐

Law Enforcement

☐

Corrections/Community Corrections

☒

Crime Victim and Witness Programs (other than compensation)

☐

Prosecution/Courts

☐

Drug Treatment/Enforcement

☐

Prevention/Education

☐

Planning/Evaluation/Technology Improvement

☐

Mental Health Programs and Related Law Enforcement and Corrections programs, including behavioral programs and crisis intervention teams

**Multi-agency Project (two or more)?**

☒

Yes

☐

No

**Multijurisdictional Project (two or more)?**

☒

Yes

☐

No

**II - BUDGET NARRATIVE & CALCULATIONS** – All budget categories calculate the total cost in the column on the right. **DO NOT USE SPECIAL CHARACTERS** (example: \$, commas, letters, etc.) **ONLY USE NUMBERS**. Please round to the nearest dollar. Applicants should indicate the total cost for each category of the proposed project.

**A. Personnel** - List each position by type. Compensation for employees engaged in grant activities must be consistent with that paid for similar work within the surrounding areas. Fringe benefits should be based on actual known costs or an established formula. Fringe benefits may include common items such as payroll taxes, health and life insurance, and retirement contributions. NOTE: Salary Cap (Wages and Fringe) \$52,000 for prosecutors and \$42,000 all other personnel. Attach a sheet using this format if you have additional items.

| Name/Position - Salary               | Salary per Hour, Month or Year | # of Hours, Months or Year | Total Personnel Cost |
|--------------------------------------|--------------------------------|----------------------------|----------------------|
| Miranda Shcerr, Forensic Interviewer | 29.71                          | 700                        | \$ 20,797.00         |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
| Name/Position - Fringe               | Fringe per Hour, Month or Year | # of Hours, Months or Year | Total Personnel Cost |
| Miranda Shcerr, Forensic Interviewer | 8.68                           | 700                        | \$ 6,076.00          |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
|                                      |                                |                            | \$ 0.00              |
| <b>Total Personnel:</b>              |                                |                            | <b>\$ 26,873.00</b>  |

**Narrative** – Please provide a detailed description for all personnel expenses.

\$26873.00 would cover approximately 34% of our forensic interviewer position. The forensic interviewer conducts interviews of child victims for law enforcement and social services when there is allegations of child abuse. This allows children to be interviewed by someone trained in interviewing of children, which includes training on child development, linguistics and forensically sound questions in an unbiased child friendly environment. The forensic interviewer also leads our multidisciplinary team which includes team orientation, training, case review and case consultation. This position also does court prep, testimony on child abuse cases and sits on child abuse task forces.

**B. Supplies** - List items by type (office supplies, investigative supplies postage, copy paper). Generally, supplies include any materials that are expendable or consumed during the course of the project (**includes equipment under \$5000**). Attach a sheet using this format if you have additional items.

| Supply Item     | Unit Cost | # of Items | Total Supplies Cost |
|-----------------|-----------|------------|---------------------|
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
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|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
|                 |           |            | \$ 0.00             |
| Total Supplies: |           |            | \$ 0.00             |

**Narrative** – Please provide a detailed description for all supply expenses.

NA

**C. Rent** - List buildings or locations that require a rent payment.

| Rent Item   | Cost per Month/Year | # of Months/year | Total Rent Cost |
|-------------|---------------------|------------------|-----------------|
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
| Total Rent: |                     |                  | \$ 0.00         |

**Narrative** – Please provide a detailed description for all rent expenses.

NA

**D. Communications** - List items used for communications (telephone, cell phone charges, etc.) Attach a sheet using [this](#) format if you have additional items.

| Communication Items   | Estimated Cost Per Month | # of Months | Total Communication Cost |
|-----------------------|--------------------------|-------------|--------------------------|
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
|                       |                          |             | \$ 0.00                  |
| Total Communications: |                          |             | \$ 0.00                  |

**Narrative** – Please provide a detailed description for all communication expenses.

NA

**E. Fuel/Oil/Vehicle Maintenance** - List fuel usage, oil changes, vehicle maintenance for all vehicles, leased or owned. Attach a sheet using this format if you have additional items.

| Fuel/Oil/Vehicle Maintenance Items  | Estimated Cost Per Month | # of Months | Total Fuel Cost |
|-------------------------------------|--------------------------|-------------|-----------------|
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
|                                     |                          |             | \$ 0.00         |
| Total Fuel/Oil/Vehicle Maintenance: |                          |             | \$ 0.00         |

**Narrative** – Please provide a detailed description for all fuel/oil/vehicle maintenance expenses.

NA



**F. Contractual Services** - List service to be provided, anticipated hourly, daily, or monthly rates. Also include expenses to be paid to the consultants in addition to their fees (i.e., travel, meals, lodging, etc.) The maximum rate for consultants is \$650 for an 8-hour day.

| Name of Contractor/Consultant<br>(if known) | Purpose of the contract | Total Contractual<br>Cost |
|---------------------------------------------|-------------------------|---------------------------|
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
| Total Contractual Services:                 |                         | \$ 0.00                   |

**G. Equipment Rent/Lease** - List equipment items to be rented or leased.

| Item                        | Cost Per Item | # of Items | Total Equipment<br>Rent/Lease Cost |
|-----------------------------|---------------|------------|------------------------------------|
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
| Total Equipment Rent/Lease: |               |            | \$ 0.00                            |

**Narrative** – Please provide a detailed description for all equipment rent/lease expenses.

NA

**H. Travel & Training** - List travel expenses for attending trainings, meetings, conference, and other work related travel. State rates will be used for in-state travel, GSA rates for out-of state travel.

| Purpose of Travel      | Type of Expense<br>(Lodging, Meals,<br>Flight, Registration,<br>Etc.) | Estimated<br>Cost | Number<br>of Days | Number of<br>Staff | Total Travel<br>Cost |
|------------------------|-----------------------------------------------------------------------|-------------------|-------------------|--------------------|----------------------|
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
|                        |                                                                       |                   |                   |                    | \$ 0.00              |
| Total Travel/Training: |                                                                       |                   |                   |                    | \$ 0.00              |

**Narrative** – Please provide a detailed description for all travel expenses.

NA

**I. Equipment** - List non-expendable items that are to be purchased that are **\$5000** or more for each item. Items that do not meet these criteria should be considered Supplies. Rented or leased equipment should be listed in the Equipment Rent/Lease category. Attach a sheet using this format if you have additional items.

| Equipment Item   | Cost per Item | # of Items | Total Equipment Cost |
|------------------|---------------|------------|----------------------|
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
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|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
|                  |               |            | \$ 0.00              |
| Total Equipment: |               |            | \$ 0.00              |

**Narrative** – Please provide a detailed description for all equipment expenses. Please list which agency will maintain ownership of the equipment at the end of the grant.

NA

**J. Other Costs** - List other items that do not fall into the other budget categories. Please list vehicle insurance costs here.

| Other Items  | Cost Per Item | # of Items | Total Cost  |
|--------------|---------------|------------|-------------|
| Vidanyx      | 4875          | 1          | \$ 4,875.00 |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
|              |               |            | \$ 0.00     |
| Total Other: |               |            | \$ 4,875.00 |

**Narrative** – Please provide a detailed description for all other expenses.

The DCAC uses Vidanyx which is a cloud based storage system for forensic interviews and medical reports. Team members can access the client file all in one spot so that interviews and physical reports aren't floating around, which increases confidentiality and effectiveness of the team. This quote for 3/4 the cost of Vidanyx based on the number of interviews we do each year.

**III – BUDGET SUMMARY**

| Category                        | Total Budget        |
|---------------------------------|---------------------|
| A. Personnel                    | \$ 26,873.00        |
| B. Supplies                     | \$ 0.00             |
| C. Rent                         | \$ 0.00             |
| D. Communications               | \$ 0.00             |
| E. Fuel/Oil/Vehicle Maintenance | \$ 0.00             |
| F. Contractual Services         | \$ 0.00             |
| G. Equipment Rent/Lease         | \$ 0.00             |
| H. Travel/Training              | \$ 0.00             |
| I. Equipment                    | \$ 0.00             |
| J. Other Costs                  | \$ 4,875.00         |
| <b>Total Budget Request</b>     | <b>\$ 31,748.00</b> |

Only JAG program applications require match. Lottery grant applicants, please disregard.

|                    |                   |                     |
|--------------------|-------------------|---------------------|
| <b>Grant Funds</b> | <b>\$ 20636.2</b> | 65% of Total Budget |
| <b>Match</b>       | <b>\$ 11111.8</b> | 35% of Total Budget |

**Source of Matching Funds (JAG only):**

Billing for services/third party payers

**IV. AGENCY FUNDING SOURCES**

Please list any direct **JAG grant awards** your agency received from the Bureau of Justice Assistance program and list the projects supported by these grant funds. This does not include JAG funds from the ND OAG.

| Direct Justice Assistance Grant (JAG) Program                      | Amount          |
|--------------------------------------------------------------------|-----------------|
| <b>Projects Supported:</b>                                         |                 |
| 2023 JAG award to pay for partial coverage of forensic interviewer | \$ 25676.00     |
|                                                                    | \$              |
|                                                                    | \$              |
| <b>TOTAL FY <u>24</u> AWARD AMOUNT</b>                             | <b>\$ 25676</b> |

Please list all other sources of grant funding that support this project's activities.

| Funding Sources      | Amount       |
|----------------------|--------------|
| Other (specify):     |              |
| VOCA                 | \$ 25,000    |
|                      | \$           |
|                      | \$           |
|                      | \$           |
|                      | \$           |
|                      | \$           |
|                      | \$           |
|                      | \$           |
|                      | \$           |
| <b>TOTAL FUNDING</b> | <b>\$ 25</b> |

If the operations of this project are expected to generate income, please discuss possible sources and how it will be used (i.e. asset forfeiture, training fees collected as a result of grant-funded training):

We do bill for forensic interviews when possible, however, Medicaid is the only insurer that currently pays for interviews. Some kids also qualify for crime victims compensation. But the fees for services, when available only covers that time doing the interview. Reimbursement for interviews only accounts for 36% of position. There is no coverage for all of the other duties of forensic interviewers including report writing, court prep, court testimony, case review, law enforcement and social services follow up, and providing training to other team members.

## V. PROJECT NARRATIVE

**I. Project Description:** Briefly describe the project that is proposed. How will this project address specific problems? Include specifics about the services to be provided, how the services will be provided (how often and by whom), and the project accomplishments.

The Dakota Children's Advocacy Center (DCAC) is a community partnership that is committed to improving the response to child abuse. Professionals from social services, law enforcement, prosecution, victim advocacy and the medical and mental health communities come together under one roof so that a child only has to tell of his or her abuse one time. The DCAC is unique in our services and structure as we are utilized by rural communities from 64% of the counties in the state. We are located in Bismarck, however, we also have locations in Dickinson, Jamestown, Watford City and on the Standing Rock Reservation. Providing these additional on-site services to underserved regions across the state decreases the amount of time families and agencies need to spend on the road and away from their jobs. The DCAC offers services to children (0-18) and their families when they are suspected victims of child sexual and physical abuse. We also see cases of neglect, children who have witnessed abuse, and adults with developmental disabilities. The DCAC always offers all services free of charge to families and the agencies we assist.

The DCAC is requesting \$31748.00 to provide partial funding for a forensic interviewer position and Vidanyx, the system that law enforcement and prosecution uses to access client files in one spot. A forensic interviewer is a highly trained position to assist law enforcement and social services in the investigation of child abuse. The forensic interviewer takes the statement of the child so the child can be interviewed in a safe, child friendly setting by a non-biased person trained in child development and forensics. Previous to CAC's children were interviewed at police stations in interrogations rooms by someone wearing a badge and a gun. This was often times very traumatizing to the child and as a result children were unable to give enough of a statement to keep them safe. Many times resulting in them being sent back to the same abusive situation they counted on us to help them with. Forensic interviews happen at all four locations with the collaboration of the multidisciplinary team (law enforcement, social services, prosecution, medical, mental health and advocates). The child is interviewed in a separate interviewing room with the team watching via a closed circuit TV. The interviewer visits with team members on breaks, which allows for everyone to have input into the interview, yet at the same time the child only has to talk to 1 person, 1 time. This helps collect the best possible evidence while be child friendly. This past year alone we saw an 18% increase in services provided to victims and their families.

The Director of the Advocacy Center, Paula Condol, takes on project administration and overall responsibility of the project. She oversees the day-to-day operations of the DCAC, provides direct services, as well as all grants. The DCAC accountant will submit financial reports. The grant will be administered and passed through the City of Mandan.



**II. Current Efforts:** *Clearly define what efforts are currently underway in responding to the problem described in the Project Description.*

Increasing access to our services have been a main goal. We can't help assist victims or our multidisciplinary team members if they can't access us. During the past three years we have opened up 4 satellite locations (Dickinson, Jamestown, Standing Rock and Watford City) so that families and team members don't have to commit an entire day on the road to receive forensic interviews, advocacy and medical services. We have also increased our reach for mental health services by providing telemental health across the state. We recognize that not only are these rural areas under served, they have less resources. A priority goal of the DCAC is to increase access to our services so that if a family/agency needs our services we are available to them. This has greatly increased the number of kids seen. Currently wait list times for a forensic interview are at 7.8 days.

The DCAC also offers other services to assist the family through the process such as advocacy for the non-offending caregiver, evidenced based mental health services for both the child and non-offending caregivers, medical exams to collect evidence and to provide medical services, if needed for the victim and community education and outreach. These services allow us to holistically serve the victim and their family from disclosure through the case closure and healing process. Which not only helps the child heal, it increases successful prosecutions.

In addition to the expanded services, the DCAC surveys families and team members on an on-going basis to ensure we are meeting our goals and serving victims in the best possible way. Families are survey after the initial visit as well as 2 month follow up. Team members are surveyed annually. The DCAC analyzes the results as well as publishes the results in our monthly newsletter as well as reviews them with our DCAC Multidisciplinary Team Advisory Council. We have also increased our efforts for prevention and education. This has included quarterly lunch and learns for MDT members, a virtual training series on Human Trafficking, a statewide conference (this Oct) and prevention education for school age kids.

**III. Collaboration with Other Agencies:** *Describe coordination and cooperation between agencies during the past year.*

The DCAC has a signed inter-agency agreement with counties across ND (see attached agreement). Our protocol continues to require that all referrals to the DCAC for investigative purposes come from law enforcement, social services and/or prosecution. If the initial contact is made to the DCAC before these other sources, we assist in facilitating in those referrals. Our MDT Advisory Councils (one per site) consists of representatives from approximately 26 agencies associated with law enforcement, medical, prosecution, social services, mental health, and advocacy services. This includes the FBI Victim Witness Coordinator and Victim Witness Advocates.

The MDT Advisory Council meets quarterly to discuss and evaluate the services provided by the DCAC through case review and policy and procedure management. In addition to receiving referrals from other agencies, it is required that law enforcement and social services be present for forensic interviews to contribute their input and insure that the proper information is obtained from and with the child. We meet regularly for case review and peer review on cases. Team members talk regularly about cases and we refer to each other to meet the family's needs. We also participate in collaborative trainings.

**IV. Describe in detail what plans or steps are being taken to assure continuation of your agency's project after grant funding ends.**

The DCAC has been serving the State of ND for 27 years and has built many relationships that are strongly committed to our mission. This project has commitment from our board of directors, MDT Advisory Council, community, and state to continue. In the past several years, the DCAC has worked diligently to diversify its funding sources. In 2017 we separated from our umbrella organization so we could access additional funding sources that were not available to us as a part of a larger organization. Since that time our budget went from \$500,000 to nearly \$2,300,000. Services have tripled over that time and we have added 4 physical sites to locations services. We have strong funding raising efforts and have worked hard to obtain other funding sources. We are in a unique situation as we rely on community, local, state, and federal grants to fund the center. Therefore, we are always in the process of looking at new funding sources, as others fade away. We continue to work with the state and insurance providers to make sure that all necessary services are reimbursable.

## VI. PROJECT GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

Stated goals, objectives, and performance measures will be used by the Office of Attorney General to monitor and assess the project's progress in achieving the intended results. Project goals, objectives, and performance measures should be listed in the format below and not referred to in a narrative format.

**Overall Project Goals:** State the project's goals, in general or broad terms. Goals should address the specific problem/need identified in the application. Goals should be stated in terms of the outcomes that the project wants to achieve. (Example: Reduce the amount of crime committed by persons under the influence of illicit drugs.)

|    |                                                                           |
|----|---------------------------------------------------------------------------|
| 1. | The DCAC will support families through the criminal justice process.      |
| 2. | The DCAC will assist team members in building stronger cases.             |
| 3. | The DCAC will collaborate with multidisciplinary team members.            |
| 4. | The DCAC will provide services to facilitate the health of abuse victims. |

**Objectives** (Activities directed at achieving goals): State the project's objectives, in terms of specific steps or benchmarks that will eventually lead to accomplishing the goals. Objectives must be clearly expressed and in **measurable** terms. (Example: Increase the number of drug-related arrests by 10 percent.)

|    |                                                                                          |
|----|------------------------------------------------------------------------------------------|
| 1. | 90% of children will be seen for a forensic interview within two weeks from referral.    |
| 2. | 90% of team members will agree that using the CAC helps them build better cases.         |
| 3. | The DCAC will facilitate/attend at least 25 case reviews during the grant year.          |
| 4. | 90% of caregivers will agree we provide them w/ resources to better support their child. |

**Performance Measures** (How you measure your project's success): (Example: Number of drug-related arrests)

|    |                                            |
|----|--------------------------------------------|
| 1. | Measured by referral to appointment times. |
| 2. | Measured by outcome surveys.               |
| 3. | Measured by attendance records.            |
| 4. | Measured by outcome surveys.               |

VII. ADDITIONAL REQUIRED INFORMATION (Please Attach)

The Drug and Violent Crime Policy Board has adopted a policy stating that applicants failing to submit the following documents with the application will not be considered for funding.

Non-government Agency Applicants (Domestic Violence and Victim Services):

☒ A third party contract between the agency and the authorized official of the unit local government stating that the unit of local government will be the legal recipient of the federal funds granted to this agency.

Multi-jurisdictional Drug Task Forces:

☐ Memorandum of Understanding (MOU) between the participating agencies. A copy of the previous year's MOU may be submitted if the participating agencies have remained the same. If any agencies have been removed or added to the task force, a new MOU must be submitted.

Continuation projects (Excludes non-governmental agencies and multijurisdictional drug task forces):

☒ Letters of continued commitment and collaboration efforts (no more than three) outlining joint collaboration efforts between agencies, OR provide copies of formal agreements between agencies and jurisdictions.

UCR Reporting Requirements:

If the implementing agency is a local law enforcement agency, it:

- 1. must report crime statistics to the State's Uniform Crime Reporting system
- 2. must be current in its reporting
- 3. or must have a plan to become current by January 1, 2025.

In order to keep a JAG award, the implementing agency must maintain current UCR stats through the award period (January 1, 2025, through December 31, 2025). Failure to maintain current UCR statistics will result in award sanctions and/or deobligation.

Please indicate most recent crime statistics submitted: \_\_\_\_\_  
month year

AUTHORIZED SIGNATURES

I certify that the project proposed in this application meets applicable requirements of the Justice Assistance Grant (JAG) Program and Lottery Program, if applicable, that all information presented is correct, and that the applicant will comply with the provisions of the subgrant program and all other applicable federal laws. By appropriate language incorporated in each grant, sub-grant, or other document under which funds are to be disbursed, the undersigned shall assure that the applicable conditions shown above apply to all recipients of these grant funds.

Signature of Authorized Official  
Alicia Rixen  
Digitally signed by Alicia Rixen  
Date: 2024.08.05 15:00:35 -05'00'

Signature of Project Director  
Cheryl Evensvold  
Digitally signed by Cheryl Evensvold  
Date: 2024.08.05 15:07:08 -05'00'

Signature of Fiscal Officer

Date  
8/5/2024

Date  
8-5-24

Date

**AGREEMENT BETWEEN THE  
CITY OF MANDAN AND DAKOTA  
CHILDREN'S ADVOCACY CENTER**

1. The City of Mandan (**City**) shall apply for a Justice Assistance Grant (the **Grant**) for the year 2025 and provide any proceeds received under the Grant to the Dakota Children's Advocacy Center (**DCAC**), located at 1800 East Broadway, Bismarck, ND, conditioned upon **DCAC's** compliance with all the terms and conditions of the **Grant** and in accordance with any subsequent provisions, requirements and assurance promulgated by the State of North Dakota that apply to the **Grant**. Any subsequent requirements shall be specifically incorporated herein.
2. The **City** shall provide the **Grant** funds to **DCAC** only on the condition that said funds shall be available from the State of North Dakota. Failure of the **City** to receive grant funds from the State of North Dakota shall cause this agreement to be terminated. If the **City** receives funds less than the full amount anticipated in the contract, **DCAC** will receive the lesser amount.
3. **DCAC** agrees to, and shall follow and adhere to, all the provisions, requirements, and assurances of the Financial Assistance Award as set forth in Federal Register Vol. 78, No. 248, December 26, 2013, OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Further, **DCAC** agrees to and shall follow any subsequent provisions, requirements and assurances promulgated by the State of North Dakota and applicable to the **Grant**. Failure to adhere to the above mentioned requirements, provisions, and assurances shall cause this Agreement to be terminated at the discretion of the **City** or State.
4. The Parties agree to hold each other harmless from any and all liability, claims, damages and litigations arising from, or under the terms of this Agreement. **DCAC**, its officers, agents and employees and assigns agree to hold the State of North Dakota harmless from any and all liability, claims, damages and litigations arising from, or under the terms of this Agreement.
5. **DCAC** and the **City** understand that the ownership of any equipment purchased under the terms and conditions of this agreement and costing \$5000 or more remains with the City and ownership of any equipment costing less than \$5000 shall remain with **DCAC** upon completion of the project.
6. This Agreement shall be binding upon **DCAC** and its successors and assigns, except that **DCAC** may not assign or transfer its rights without prior written consent of the **City** and the State. This Agreement shall inure to the benefit of the **City** and its successors and assigns.
7. All federal and state laws insofar as are applicable shall be specifically made a part of this Agreement.

8. This agreement shall be governed by the laws of the State of North Dakota. In the event any provision of this Agreement shall be held invalid or unenforceable by any court of competent jurisdiction, such holding shall not invalidate or render unenforceable the remaining provisions
9. The terms and conditions of this Agreement may only be amended or supplemented by written agreement of both parties and with the concurrence of the State of North Dakota to make amendment or supplement. The **City** and **DCAC** agree that no oral change or modification of this Agreement shall be allowed and no claim based upon any purported oral change or modification shall be made.
10. It is agreed between the parties that this Agreement is the full and complete agreement between the parties and that there are no oral agreements or understandings between the parties other than what has been reduced to writing herein.
11. All information contained in the application as stated by **DCAC** is correct and accurate, any material misstatement verified by the State of North Dakota may be considered a breach of the grant award document, and may result in the termination of the grant award at the discretion of the state.
12. The Grant Award and Acceptance and the Certified Conditions Justice Assistance Grant (JAG) Program are incorporated and made a part of this Agreement. All of the requirements of the grant regarding activities to be performed, time schedules, project policies, flow-through requirements, dollar limitations of the agreement, cost principals used in determining allowable costs and all other grant conditions, policies and procedures must be followed by **DCAC**.
13. This Agreement shall be effective upon the later date below.

By: Paula Conoble  
Dakota Children's Advocacy Center

8/2/24

Date

\_\_\_\_\_  
James Froelich Mayor,  
City of Mandan

\_\_\_\_\_  
Date

Attest: \_\_\_\_\_

Mandan City Administrator



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 12, 2024  
**SUBMITTING DEPARTMENT:** Police Department  
**DEPARTMENT DIRECTOR:** Jason Ziegler  
**PRESENTER:** Jason Ziegler, Police Chief  
**SUBJECT:** Consider approval of the special event permit for the Silver Dollar Birthday Bash Street Dance.

---

**STATEMENT/PURPOSE:**

Consider approval of the special event permit for the Silver Dollar Birthday Bash Street Dance.

**BACKGROUND/ALTERNATIVES:**

Silver Dollar Birthday Bash Street Dance from 7:00PM to 12:30AM. See attached special event permit. All City of Mandan departments have reviewed and signed off on this event.

**ATTACHMENTS:**

1. Silver Dollar Street Dance Special Event Permit - signed

**FISCAL IMPACT:**

N/A

**STAFF IMPACT:**

N/A

**LEGAL REVIEW:**

N/A

**RECOMMENDATION:**

I recommend approving the special event permit for the Silver Dollar Birthday Bash Street Dance.

**SUGGESTED MOTION:**



I move to approve the special event permit for Silver Dollar Birthday Bash Street Dance.

pd.  
ck# 1183  
8-7-24

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

## Special Events Permit Application City of Mandan, ND

Mandan Police Department (Special Events) • 205 1<sup>st</sup> Ave. NW • Mandan, ND 58554  
• Phone 701-667-3250 • FAX 701-667-3463

Date of Application: 08/05/2024

**30 days prior** to the event with a **non-refundable administration application fee of \$25 attached**. Late applications are permitted and subject to an **additional \$50 processing fee** for those submitted within 20 days of an event. **Any application not submitted prior to 20 days before the event will not be accepted for consideration.**

**The payment of fees does not guarantee event approval if submitted late. Permits are \$30 per day/Sunday Permit will be \$45, to a maximum of \$150.00 per event not to exceed 14 days (Includes Sundays).**

All applicants will be charged fees as appropriate and are expected to fully reimburse the city for all services related to event production which may include, but are not limited to, Police Services, Fire/EMS, Park and Facility Maintenance, Field Services, Sanitation, Street Engineering and Site Supervisors. (See Below Fee and Charges)

A storage fee of **\$500** will be assessed for all equipment not removed from any public venue or premises within 24 hours of the end of the event. Any vendor may request an extension for equipment removal and may be granted by the City Administrator. Full payment is due upon receipt of final invoice. Any property that is abandoned over 15 days will become property of the City of Mandan and may be sold to recoup any expenses accrued by the city.

**Comprehensive site plans must accompany this application.**

Street Dance: ☒ Beer Garden ☐ Both ☐ Parade or Other Public Event: ☐

### **Section 1 – Applicant Information**

Name of Event Manager: Crystal Orf

Driver's License Number: ORF-85-7011

State ND

Date of Birth: 12/18/1985 Phone Number: 701-516-7967

Email: SilverDollarMandan@gmail.com

Address: 201 1ST Ave NW #303

City: Mandan

State: ND Zip: 58554

Have you ever been convicted of a crime? ☐ YES ☐ NO

If yes please list charge(s) and year of conviction(s):  
\_\_\_\_\_  
\_\_\_\_\_

(List all Jurisdictions where you have been charged with a crime, also list any other names you have used when charged)

Name of Event Manager: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

State \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Have you ever been convicted of a crime? ☐ YES ☐ NO

If yes please list charge and year of conviction:  
\_\_\_\_\_  
\_\_\_\_\_

(List all Jurisdictions where you have been charged with a crime, also list any other names you have used when charged)

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

Business Address: 200 E Main ST City: Mandan State: ND Zip: 58554  
Corporation/Organization: East Main Investments DBA Silver Dollar Bar State of Incorporation: \_\_\_\_\_  
Tax ID #: 95-3635583 501(c)3 #: \_\_\_\_\_ City Sales Tax ID #: \_\_\_\_\_  
Have you ever coordinated/promoted another event/s? ☒ YES ☐ NO  
**If yes, please provide the following:**  
Last event/s Location: 3rd of July Street Dance Date: 7/3/2024  
Contact Name: Crystal Orf Phone: 701-516-7967  
E-mail Contact: SilverDollarMandan@gmail.com

## **Section 2 – Event Information**

Event Name: Silver Dollar Bithday Bash Street Dance Anticipated Daily Attendance: 300  
Event Date(s): September 21st 2024 Set-up Date: September 21st 2024 Hours: 10-Midnight  
Hours of event each day: 7PM-12:30AM  
(begin and end times)  
Take Down Date(s): September 5th 2024 Hours: Noon-4  
E-Mail address for public information: Silverdollarmandan@gmail.com  
WEB address for public information: \_\_\_\_\_  
Location of Event/physical address: 200 E Main St/1st Ave NW  
Sponsors of the Event: \_\_\_\_\_  
Brief Description of Event:  
Silver Dollar Bithday Bash Street Dance

Has this event been held in another location? ☐ YES ☒ NO

**If yes, please provide the following:**

Last event/s Location: \_\_\_\_\_  
Date: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

## **Section 3 – Event Features**

Will there be an admission charge? ☐ Yes ☐ No

If yes, Printed ticket count: \_\_\_\_\_ Tickets for presale count: \_\_\_\_\_

Will there be entertainment? ☒ Yes ☐ No

If yes, please attach an itemized complete list of all entertainment.

*(A complete list of entertainment will be required before final approval. Once approved, no changes may be made unless authorized by the City Administrator.)*

Will merchandise and/or food items be sold? ☐ Yes ☒ No

If yes, please attach a complete list of vendors.

*(Each vender must have all valid permits and license to sell their product)*

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**What type of advertising/promotion will be done prior to the event?**

(Attach all promotional material.)

Radio: ☐ Yes ☒ No What Stations? \_\_\_\_\_

TV: ☐ Yes ☒ No What Stations? \_\_\_\_\_

Fliers/Posters: ☒ Yes ☐ No How many? \_\_\_\_\_

Press Releases: ☐ Yes ☒ No How many? \_\_\_\_\_

Newspaper Ads: ☐ Yes ☒ No What publication? \_\_\_\_\_

Is any other promoter/producer assisting you with your event? ☐ Yes ☒ No

Name of Promoter and Promotion Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Will the event include any of the following? (Indicate on site plan and/or vendor list)

Tents or Canopies: ☒ Yes ☐ No

Number of Tents: 2 for shade over outdoor bar

(Tents require permits from the Fire Department and inspection fees will be applied.)

Fireworks or Pyrotechnics: ☐ Yes ☒ No

(Fireworks or Pyrotechnics require permits from the Fire Department and inspection fees will be applied.)

Fireworks or Pyrotechnics Production Company's name: \_\_\_\_\_

(A copy of the Production Company's License and Insurance is required with this application, only if fireworks or pyrotechnics are being requested for this event.) \*A separate bond may be required for this event.

**Require permits from the City of Mandan**

Any person for on- or off-sale alcoholic beverage licensee desiring to conduct a public beer garden shall make application for a special permit to do so to the board, 30 days in advance of the proposed event.

Temporary Fencing: ☒ Yes ☐ No

Provide accurate dimensions of fenced area on site plan along with the site plan.

Company Contact Name: Mandan Progress Organization

Contact phone: 701-751-2983

Restroom Accommodations: Yes, Spiffy Biff

Number of required portable toilets: 3

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

**Placement of sanitary toilet facilities must be on site plan.**

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

Attach a copy of the letter from the Western Plains Public Health that indicates the site plan has been reviewed and the required number of proper sanitation facilities is attendance.

Company Contact name: Lana Schmidt  
Contact phone: 701-667-3370

Electrical Services/Generators ☐ Yes ☐ No

*Generators must be separated from tents by a minimum of 20' and shall be isolated from contact by fencing or other approved means.*

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_  
Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Carnival/Amusement Rides ☐ Yes ☒ No

A separate permit from the Fire Department may be required.

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_  
Bonded and Insured Amount: \_\_\_\_\_  
Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Signs / Banners ☒ Yes ☒ No

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_  
Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Inflatables ☐ Yes ☒ No

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_  
Bonded and Insured Amount: \_\_\_\_\_  
Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

### Raffles

Will this event have a raffle? ☐ Yes ☒ No

If yes you must apply for a City Permit \$25 Raffle Permit (Attach copy of State Gaming License if issued)

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

#### **Section 4 – Transportation**

Does the event propose **using, closing or blocking** any of the following:

*If yes, specify location and duration on site map, if on a DOT Highway or Roadway DOT authorization will be required.*

City Streets ☒ Yes ☐ No (Number of locations: 1 \_\_\_\_\_ attach list of locations.)

City Sidewalks ☒ Yes ☐ No (Number of locations 1 \_\_\_\_\_ attached list of locations)

City Bus Stops ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

Public Parking Lots ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

Public Bicycle Parking ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

Multiuse Paths ☐ Yes ☐ No (Number of locations \_\_\_\_\_ attached list of locations)

City Alleys ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

City Right-of-Ways ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_  
(Section 4 must be approved by Mandan City Engineer, and be approved by the City Commission before the event)

#### **Section 5 – Use of City Utilities**

Will any City electric hookups be used? ☐ Yes ☒ No

Electric Location including amperage \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Will any City water hookups be used? ☐ Yes ☒ No

Water Location(s) \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Will waste water/gray water be generated? ☐ Yes ☒ No

If so, how will it be disposed? \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**Section 6 – Alcohol**

Will there be alcohol at the event? ☒ Yes ☐ No

Will alcohol be given away? ☐ Yes ☒ No

Will the alcohol be sold? ☒ Yes ☐ No

Will the alcohol be donated? ☐ Yes ☒ No

Who is the alcohol being donated by or purchased through: \_\_\_\_\_

Is alcohol included in the admission price of the event? ☐ Yes ☐ No

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

**If you answered Yes to any of the above, a City and State Liquor License will be required. Attach copy(s) of all liquor licenses with this application. (If a City Liquor License is needed please contact the City of Mandan's Finance Department to apply at Phone: (701) 667-3213)**

Has the applicant/organization ever had a liquor license or event permit denied, revoked or suspended? ☐ Yes ☒ No

***If yes, please explain:***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will attendees be identified as minors or age 21 and over?

Security and staff at entrance of bar and temporary fencing to ID individuals coming into the street dance.

\_\_\_\_\_  
\_\_\_\_\_

Have the alcohol servers received training in sale/service of alcoholic beverages? ☒ Yes ☐ No

If yes, who provided the training: Crystal Orf

Date and time of most recent training: 7/24/2024

Request Mandan Police Server Training: ☐ Yes ☒ No

If yes provide a contact person and contact information::

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**Section 7 – Event Security**

Are you requesting off-duty Mandan Police officers? ☐ Yes ☒ No

Number of personnel requested: \_\_\_\_\_

*After reviewing the event application, the Chief of Police may require the use of the City of Mandan Off-Duty Police Officers for the event.*

*To schedule Off-Duty Police Officers, please call 701-667-3250.*

**Officers must be requested 2 weeks prior to any event and there will be a minimum of 4 work hours per officers per event at \$45 per-hour per officer.**

Are you requesting private security? ☒ Yes ☐ No

Number of security personnel onsite: <sup>4</sup> \_\_\_\_\_

**Include security points and duties on event plans**

*The City of Mandan requires only security companies that are licensed and bonded in the State of North Dakota.*

Security Company and Contact Info: Bis-Man Security In 701-223-2328

**Attach a copy of Company's License**

**Section 8 – Event Maintenance and Cleanup Plan Required**

What is your trash removal and cleanup plan?

All trash and cleanup will be handled by the Silver Dollar staff and trash removed by Armstrong Sanitation

\_\_\_\_\_  
(Attach a detailed Cleanup Plan)

Outside refuse company Company's Name: Armstrong Sanitation

Contact Name: Peggy Becker Phone: 701-663-8219

*All costs for containers, dumping and the removing all trash are the responsibility of the applicant/promoter. The City of Mandan's property and or the event site must be returned to its original condition and all equipment removed or daily fees will be accessed.*

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

### **Section 9 – ADA Accessibility Requirements**

#### **Parking plan requirements**

Attach a copy of your parking plan and include in the plan the necessary handicap parking areas and any code required handicap accessibility requirements. Also include medical access points and safe medical response routes for the event.

### **Section 10– Insurance and Bond Requirements**

The City of Mandan has established insurance requirements for those facility users, vendors and contractors entering into agreements with the City for the purpose of special events and activities. Before commencing use or services under an agreement with the City of Mandan, a certificate of insurance or a copy of the required bond that complies with the requirements referenced below must be attached.

**All special event applicants shall name the City of Mandan as an “Additional Insured”, per item one below, on all policy(ies), except workers compensation and shall reflect this on a Certificate of Insurance. Applicant agrees that any insurance available to the applicant shall be primary and non-contributory to the city’s self-insured retention.**

Applicant shall obtain certificates of insurance from all vendors participating in this event unless covered under applicant’s insurance policy. Vendors must comply with all requirements listed in this section. Complete and accurate certificates must be received by the Special Events Office a minimum of five (5) working days prior to the event. Separate certificates of insurance shall be provided by all carnival and amusement companies and firework production companies with the limits shown in this section and shall name the City of Mandan as “Additional Insured” as per item one below. Additional coverage may be required depending upon the nature and scope of the event. For more information or questions regarding insurance requirements, please contact our City Administrator’s Office at 701-667-3214. The City Administrator reserves the right to evaluate the liability of each event and assess the required insurance limits. Event permits will not be issued until all insurance requirements are satisfactorily met.

#### **The certificate must show:**

1. The City of Mandan, its agents, officers, employees and volunteers are named as “Additional Insured.” All Certificate of Insurance policies must reflect this with the exception of workers compensation.
2. The City of Mandan shall be notified at least 30 days prior to cancellation or alteration of any insurance coverage. A 10-day notice of cancellation for non-payment of premium is required..
3. Workers Compensation Policies shall contain a Waiver of Subrogation clause in favor of the City of Mandan.
4. General Liability Including: Bodily Injury Contractual Independent Contractors  
Comprehensive Form Product/Completed Operations Hazard  
Premises Operation Personal injury Broad Form Property Damage

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

In addition, specific date(s) and locations(s) of the event, to include set up and take down, must be stated clearly on the certificate. Certificates shall be received no less than thirty (30) working days prior to the event.

**City Services**

Police .....\$45 per hour, per officer, 4 hour minimum

Fire/EMS ..... \$35 per hour, per staff 4 hour minimum

Barricades.....Amount charged by contracted barricade provider

Trash Container drop-off/pick-up... \$\_\_\_\_\_ prices vary

Custodial .....\$\_\_\_\_\_ per hour, per staff person

**Miscellaneous fees**

Tent/Canopy Permit ..... \$\_\_\_\_\_ per tent or canopy (Check with the Fire Department to ascertain if a permit is necessary)

Fireworks Permit..... \$\_\_\_\_\_ per location

The Park District may require separate fees or permit if on Park District property. It is required that the event host checks with the Park District when planning an event on Park District property to avoid delays with the permitting process.

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**Fee Cost Worksheet**

**Police Services:**

No. of Officers \_\_\_\_\_ x No. of Hours \_\_\_\_\_ = \_\_\_\_\_ x \$45 = \$ \_\_\_\_\_

**Fire/EMT Services**

No. of EMT's \_\_\_\_\_ x No. of Hours \_\_\_\_\_ = \_\_\_\_\_ x \$35 = \$ \_\_\_\_\_

**Finance application processing Fee** ..... \$ \_\_\_\_\_

**Trash Container Fee** ..... \$ \_\_\_\_\_

**Custodial Fee** ..... \$ \_\_\_\_\_

**Tent/Canopy Inspection and Permit** ..... \$ \_\_\_\_\_

**Fireworks/Pyrotechnics Permit and Inspection Fee** ..... \$ \_\_\_\_\_

**\$25 Application Fee** ..... \$ \_\_\_\_\_

**\$50 Late application Processing Fee (if Applicable)** ..... \$ \_\_\_\_\_

**Event Application Fee (See Attached Fee Schedule)** ..... \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

*Fees assessed by the Park District are not included.*

**Date Fees Paid:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_

(For office use only)

### Signature Page from City Officials and Department Heads

|                                                                              |                   |                                     |          |                          |        |                          |                           |
|------------------------------------------------------------------------------|-------------------|-------------------------------------|----------|--------------------------|--------|--------------------------|---------------------------|
| <u>Mitch L. Bitz</u><br><small>Mitch L. Bitz (Aug 8, 2024 16:06 CDT)</small> | <u>08/08/2024</u> | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Fire Department                                                              | Date              |                                     |          |                          |        |                          |                           |
| <u>Patrick Haug</u><br><small>Patrick Haug (Aug 8, 2024 11:43 CDT)</small>   | <u>08/06/2024</u> | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Police Department                                                            | Date              |                                     |          |                          |        |                          |                           |
| <u>Jack Wingard</u>                                                          | <u>08/09/2024</u> | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Engineering Department                                                       | Date              |                                     |          |                          |        |                          |                           |
| <u>Brian Dirk</u><br><small>Brian Dirk (Aug 12, 2024 10:21 CDT)</small>      | <u>08/12/2024</u> | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Public Works                                                                 | Date              |                                     |          |                          |        |                          |                           |

Fire Department Narrative:

Police Department Narrative:

Engineering Narrative:

Public Works Narrative:

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

## Special Event Guide

### Sec. 12-9-1. - Definitions.

The following words, terms and phrases, when used in this article, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning:

**Public concert:** means a musical performance by one or more groups held either indoors or outdoors where the audience is seated by reserve or general admission, free of charge or otherwise, with the audience being present primarily for the purpose of listening to music and the location of such musical performance having a seating capacity of at least 1,000 people, or, if the concert is outdoors, the site has a capacity of at least 300 persons.

**Public dance:** means any dance held either indoors or outdoors where the public may participate, whether an admission fee is charged or not, and is present primarily for the sole purpose of dancing, and where the location of the dance has a capacity of at least 100 persons.

**Public event:** means a music festival, public dance or public concert.

(Code 1979, § 10-04-07; Code 1994, § 12-03-09; Ord. No. 744, § 2, 1989)

### ARTICLE 4. – AMUSEMENTS

#### Sec. 12-4-1. - Required to operate public amusements.

- a) It is unlawful to conduct or operate any amusement which is open to the public and for which an admittance fee is charged without having first secured a license from the city. The license fee for amusements shall be determined by resolution of the board.
- b) No license fee is required if a show, exhibition, entertainment, gallery, stand or other device is operated or given under the auspices of and for the benefit of a church or school, or charitable, fraternal or political organization. (Code 1979, § 10-04-01; Code 1994, § 13-04-01)

#### Sec. 12-4-2. - Public amusements for which license is required.

A person may not conduct, operate or maintain the following activities without first obtaining a license from the city:

- (1) Public dance, as that term is defined by N.D.C.C. § 53-02-01.
  - (2) Any circus, carnival or similar event.
  - (3) Any theatrical exhibition, motion picture show, vaudeville performance, opera or variety theater.
  - (4) Any show, entertainment, gallery, stand or device of any description on the streets, alleys or public grounds within the city.
  - (5) Any merry-go-round, rides or similar devices.
- (Code 1979, §§ 10-04-02—10-04-05; Code 1994, § 13-04-02)

#### Sec. 12-4-3. - Liability insurance or bond required.

A person may not conduct, operate, manage or sponsor any Ferris wheel, merry-go-round or other amusement ride operated for hire, or for the purpose of promoting or advertising any trade or business, without first filing with the city license officer a bond indemnifying the public against damages sustained by reason of operation of the ride, or certificate of liability insurance, in the amount of at least \$500,000.00. Such bond or certificate of insurance is subject to the approval of the city attorney. This section applies to all persons, whether or not such persons are exempted from any other provision of this article. (Code 1994, § 13-04-03)

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
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**Sec. 12-4-4. - Licensee to maintain order.**

Any licensee engaged in giving or conducting any public amusement for pay shall preserve good order in and about the place of exhibition or public amusement, and if necessary for that purpose, shall employ, at the licensee's own expense, a sufficient security force. (Code 1979, § 10-04-06; Code 1994, § 13-04-04)

**Sec. 12-4-5. - Policing of dances, music festivals or public concerts.**

A public dance or public dancing place or hall may not be conducted, maintained or operated, unless the same is policed as provided by N.D.C.C. § 53-02-08. A music festival or public concert, as defined in N.D.C.C. § 53-02-01, shall be policed as provided in N.D.C.C. § 53-02-08. The cost of the policing, as determined by the chief of police, must be paid by the applicant at the time of the license application or, at the discretion of the chief of police, a cash bond in a reasonable amount may be posted, which shall be refunded upon payment of costs of policing following the event. (Code 1994, § 13-04-05)

**Sec. 12-4-6. - Use of streets.**

It is unlawful for any person to play any game, sport or amusement upon any public right-of-way of the city, except as permitted by the board. (Code 1994, § 13-04-06)

**Sec. 12-9-2. - Penalty.**

Any person who gives, holds or conducts a public event in violation of this article or in violation of the conditions of the public event permit, who furnishes information required by this article which is false or misleading, or who violates any provision of this chapter shall be guilty of a Class B misdemeanor. (Code 1979, § 10-04-07; Code 1994, § 12-03-17; Ord. No. 744, § 2, 1989)

**Sec. 12-9-3. - Required; nontransferable; fees.**

No person shall give, hold or conduct a public event unless the owner of the place where the public event is given, or the person giving the same or in charge thereof, first shall have procured a permit to give, hold and conduct such public event. A permit may be issued for one or more public dances or public concerts. If a permit is issued to any person to conduct a public event, the event may be conducted in such place only by the person to whom the permit is issued. Such permit shall not be transferable. A permit fee shall be assessed for each event held within a 24-hour period or an annual permit fee may be assessed if the site location is intended to be a permanent site, and the amount of the fees shall be set from time to time by resolution of the board. A permit, other than an annual permit, shall not be valid for a period of greater than three consecutive days.

(Code 1979, § 10-04-07; Code 1994, § 12-03-10; Ord. No. 744, § 2, 1989)

**Sec. 12-9-4. - Application; special permits.**

Any person desiring to conduct a public event at a public building or site or any outdoor location shall make application for a permit to do so to the board, 30 days in advance of the proposed event. In the event the applicant proposes to sell or dispense or permit the consumption of alcoholic beverages at such public event, an application for a special permit under the provisions of sections 4-2-16 and 4-2-20 shall accompany the application for the public event. Four copies of the application shall be filed with the city license officer and shall set forth the following information:

**Sec. 4-2-20. - Sunday alcoholic beverage permit.**

Permit required. No person may dispense, sell or permit the consumption of alcoholic beverages within a licensed premises or publicly owned or operated facility on any Sunday unless said person has been granted a permit under the provisions of this section. The authority to issue a Sunday alcoholic beverage permit rests solely with the board.



Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
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- 1) Identification of applicant. The application shall include the name, address and driver's license number of the applicant and the name, address and driver's license number of the person who will manage or conduct the public event. The application shall also state whether the applicant or the person who will manage or conduct the event has been convicted of any crime relating to the sale of alcoholic beverages or controlled substances or within the past five years has been convicted of any crime against persons, including assault, disorderly conduct, sexual assault, rape or murder, and whether the applicant or the person who will manage or conduct the event has ever had a license of any kind revoked or cancelled by any municipal, state or federal authority.
- 2) Date, time and place. The place, date and hours of the proposed event shall be clearly identified.
- 3) Site plan. The person conducting the event shall include in the application a site plan which details the exact placement of the stage, lighting and other electrical equipment, public seating, toilet facilities, fencing or other barricades, parking, marked fire lanes, and the proximity of public roadways. The site plan submitted by the applicant shall be reviewed by the city engineer, who shall submit Estimate of attendance, his recommendations to the board.
- 4) The applicant shall provide an estimate of the number of persons that the person conducting the event has determined can be safely accommodated within the chosen site and an estimate of the number of persons expected to attend.
- 5) Ticket sales. The application shall contain information relating to ticket sales, which addresses the control of attendance to meet the site plan limitations, if any. If the person conducting the event intends to open the event to the general public without prior ticket sales, the application shall address the manner in which the person intends to limit the size of the crowd to meet the site plan limitations.
- 6) Traffic control. The application shall specify the proximity of public roadways to the site of the event and to the proposed parking area and shall contain a description of the manner in which traffic control will be handled to ensure the safe ingress and egress of pedestrians and vehicles. Appropriate arrangements shall be made by the person conducting the event to ensure that no interference will occur with the public use of any adjacent public roadways. The traffic control proposal shall be subject to the approval of the city engineer.
- 7) Parking. The application and site plan shall specify the planned accommodations for public parking. The person conducting the event shall provide adequate parking for persons in attendance commensurate with the estimated number of persons that the selected site can accommodate. Under no circumstances will parking be permitted upon public roadways if said parking would be in violation of posted parking restrictions.
- 8) Sanitation. The application shall include the number and placement of sanitary toilet facilities which will be provided by the person conducting the event. The application shall be accompanied by a letter from the city health officer that indicates that he has reviewed the site plan and estimate of the number of persons in attendance and has determined that the number and kind of proposed toilet facilities is adequate to meet the needs of persons in attendance at the event.
- 9) Garbage. The application shall include a description of the size and number of available garbage disposal units on the site of the event in addition to the arrangements made to clean up the site after the event has ended.
- 10) Fencing and barricades. The application shall contain a description of the fencing and barricade system which is intended to control access to the event site, if such event is to be outdoors, and the location of the fencing and barricade system shall be noted on the site plan. If alcoholic beverages are to be dispensed or consumed at the public event, which event is outdoor, the perimeter of the site must be surrounded by a six-foot cyclone-style fence or enclosed within a tent which has four sides. For all events, whether outdoors or indoors, adequate provisions for entrances and exits and access by fire, police and other emergency personnel or vehicles shall also be noted in the application and on the site plan.
- 11) Signing. The application shall contain a description of the signing which is proposed to control pedestrian and vehicular traffic, parking, and provide appropriate notices to the persons in

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
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attendance at the event. The size, wording and placement of the signs shall be included in the description and shall be subject to the approval of the city engineer.

- 12) Sale or consumption of alcoholic beverages. If the applicant intends to sell or allow the consumption of alcoholic beverages at the public event the identity of the alcoholic beverage licensee who will be dispensing said beverages shall be provided. The board may, by resolution or by condition attached to the permit, restrict the sale, dispensing and consumption of alcoholic beverages to beer or beer and wine only at the event or series of events. Therefore, the person holding the event shall include within the application a description of the efforts that will be taken to prevent the consumption of other alcoholic beverages at the event, including those alcoholic beverages attempted to be brought in by members of the public. At all such events the dispensing of alcoholic beverages in glass bottles, glass drinking cups or any other glass containers shall be prohibited.
- 13) Security. N.D.C.C. § 53-02-08 requires the city police department to police the event at the expense of the person conducting the event, which payment must be received by the city license officer 72 hours in advance of the event. The application shall contain, in addition to the estimated number of persons in attendance, an estimate of the number of police officers which will be needed to adequately police the event. The chief of police will be responsible for making the final determination of the number of officers that will be required.
- 14) Bond required. The person conducting the event shall file with the city license officer a cash bond in an amount to be set by resolution of the board. The bond shall be returned to the person after the event if the site has been adequately cleaned and if no additional costs or property damage has resulted from or as a result of the event.
- 15) Cost to the city. If the proposed event necessitates any expenditures on the part of the city, excluding the cost of providing police security, such costs shall be paid to the city by the person conducting the event. The posted cash bond shall be used by the city to cover the costs associated with the event and the balance, if any, will be returned to the person conducting the event. If the cash bond does not cover the costs resulting from the public event, the person conducting the event shall be assessed the additional costs. Costs within this section include, but are not limited to, the following:
  - a. Costs of cleanup or garbage removal;
  - b. Costs of traffic signing, fencing or barricades;
  - c. Any property damage to public property which occurred during or as a result of the event; and
  - d. Any additional costs associated with crowd control, including injury to city employees or other persons, which occurred during or as a result of the event.
- 16) Temporary vacation of streets. If the site plan proposed by the applicant requires the use of any public street, alley or right-of-way, the application and the site plan shall clearly designate the portion of the public street, alley or right-of-way to be temporarily vacated. In no event shall more of a public street adjoining one-half of a public block be vacated and, in each instance, adequate access for emergency vehicles shall be provided. The temporary vacation of any public street or right-of-way shall be subject to the approval of the city engineer. The board shall determine whether any public street, alley or right-of-way may be temporarily vacated for a public event on a case-by-case basis.  
(Code 1979, § 10-04-07; Code 1994, § 12-03-11; Ord. No. 744, § 2, 1989)

**Sec. 12-9-5. - Inquiry and investigation.**

The board shall make such inquiry and investigation as to the propriety of granting or refusing such permit as shall be deemed necessary.

(Code 1979, § 10-04-07; Code 1994, § 12-03-12; Ord. No. 744, § 2, 1989)

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
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**Sec. 12-9-6. - Refusal and revocation of public event permit for cause.**

- (a) The board may revoke the public event permit at any time for violation of any of the provisions of this chapter. The board shall refuse to issue such permit, and shall revoke a permit already issued, where it appears that:
- 1) The permitted site is or is likely to become a public nuisance or detrimental to public health, safety or order;
  - 2) The provisions of this chapter are being violated;
  - 3) An alcoholic beverage or controlled substance is being sold, or given away, except as authorized by terms of the permit;
  - 4) Any of the city ordinances or state laws are being violated;
  - 5) The chief of police determines that adequate security cannot be provided to the public event either by city police officers, special police or a combination thereof; or
  - 6) The board has determined that the number of like events needs to be limited in order to ensure the health, safety and security of the public.
  - 7) The chief of police shall report any violations of the permit or violations of city ordinances or state laws immediately to the board. Notwithstanding any of the provisions of this chapter, if the chief of police determines that the conduct of any public event has become a public nuisance or injurious to the public peace, health or safety, the chief of police shall immediately cause said event to be closed to the public and thereafter notify the board of the action and reasons therefor.
- (Code 1979, § 10-04-07; Code 1994, § 12-03-14; Ord. No. 744, § 2, 1989)

**Sec. 12-9-7. - Restrictions and conditions attached to public event permit.**

If the board determines that the public event will not unduly interfere with the peace, health or safety of the public or the neighborhood in which the event will occur and that the applicant is in compliance with the requirements for sanitation and garbage disposal; parking, fencing, traffic and crowd control; security; and regulation of alcoholic beverage consumption, the board may approve the issuance of the permit to be effective for the dates designated and subject to any necessary restrictions and conditions, including the following restrictions and conditions:

- 1) Alcoholic beverages may be distributed and consumed, and dancing may be permitted only in those areas specifically designated in the site plan and approved by the board;
  - 2) Dancing and the distribution of alcoholic beverages shall be permitted only during the hours designated by the board, which in no event shall be before the hour of 12:00 noon on the date specified in the permit and after 1:00 a.m. of the following day;
  - 3) No person having a permit to hold a public event at which alcoholic beverages are to be sold, distributed or consumed shall permit in any such event any person who is obviously intoxicated or who is under 21 years of age, except persons under 21 years of age may be permitted at a public event if the sale and consumption of alcoholic beverages is segregated and constricted to an area barricaded from the public event by a six-foot cyclone-style fence or structure to which access by such persons is prohibited;
  - 4) The licensee as a condition to the issuance of such permit consents and agrees that any city police officer or special police officer may enter upon and inspect the licensed premises or site or any part at any time for the purpose of determining compliance with the conditions of the permit and city ordinances; and
  - 5) The licensee shall comply with all other applicable ordinances and laws relating to health and sanitation and the use and sale of alcoholic beverages in the city.
- (Code 1979, § 10-04-07; Code 1994, § 12-03-14; Ord. No. 744, § 2, 1989)

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
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**Sec. 12-9-8. - Limits on number of public event permits.**

The board may, by resolution, set a maximum limit on the number of public event permits which will be granted during any period of time. Notwithstanding any restrictions on the number of events, the board may deny any application for a permit if it determines that adequate provision for traffic control, health, safety or security cannot be provided for the event.

(Code 1979, § 10-04-07; Code 1994, § 12-03-15; Ord. No. 744, § 2, 1989)

**Sec. 12-9-9. - Indemnification of city.**

A person may not give, hold or conduct a public event, nor may the board approve a permit for such public event, without the person having first filed with the city license officer a bond or certificate of insurance in the amount as specified by resolution of the board, indemnifying the city and the public against personal injury or property damages occurring at or as a result of the public event. The person giving, holding or conducting the public event agrees to save and hold harmless the city for any personal injury or property damage resulting from actions of any city employees, police officers or special officers in the course of their employment, which actions are directly related to the conduct of the public event.

(Code 1979, § 10-04-07; Code 1994, § 12-03-16; Ord. No. 744, § 2, 1989)

**Sec. 24-9-3. - Parade permit required.**

No person shall engage in, participate in, aid, form or start any parade without a parade permit issued by the city.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-4. - Application for parade permit.**

- a. A person desiring a parade permit shall file an application with the city on forms provided by the city. Such application shall be filed not less than seven days nor more than 60 days before the date on which it is proposed to conduct the parade.
- b. The application for a parade permit shall contain all information deemed necessary by the city in order to fully evaluate the request
- c. The city, where good cause is shown therefor, may consider any application which is filed less than seven days before the date such parade is proposed to be conducted.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-5. - Standards for issuance of parade permit.**

The city shall issue a parade permit when, from a consideration of the application and from such other information as may otherwise be obtained, it finds that:

- 1) The conduct of the parade will not substantially interrupt the safe and orderly movement of other traffic contiguous to its route.
- 2) The conduct of the parade will not require the diversion of so great a number of police officers to properly police the line of movement and the areas contiguous thereto as to prevent normal police protection to the city.

**Permit Application #:** \_\_\_\_\_ **Date Complete:** \_\_\_\_\_  
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- 3) The conduct of such parade will not require the diversion of so great a number of ambulances as to prevent normal ambulance service to portions of the city other than that to be occupied by the proposed line of march and areas contiguous thereto.
- 4) The concentration of persons, animals and vehicles at assembly points of the parade will not unduly interfere with proper fire and police protection of, or ambulance service to, areas contiguous to such assembly areas.
- 5) The conduct of such parade will not interfere with the movement of firefighting equipment en route to a fire.
- 6) The conduct of the parade is not reasonably likely to cause injury to persons or property, to provoke disorderly conduct or create a disturbance.
- 7) The parade is scheduled to move from its point of origin to its point of termination expeditiously and without unreasonable delays en route.
- 8) The parade is not to be held for the sole purpose of advertising any product, cause, goods or events and is not designed to be held purely for private profit.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-6. - Notice of denial of parade permit.**

If the city disapproves the application for a parade permit, the city shall mail to the applicant, within three days after the date upon which the application was filed, a notice of such action.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-7. - Alternative parade permit.**

The city, in denying an application for a parade permit, may authorize the conduct of the parade on a date, at a time or over a route different from that named by the applicant. An applicant desiring to accept an alternate permit shall, within five days after notice of such action, file a written notice of acceptance with the city. An alternate parade permit shall conform to the requirements of, and shall have the effect of, a parade permit under this article.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-8. - Contents of parade permit.**

Each parade permit shall state the following information:

- 1) Starting time.
- 2) Minimum speed.
- 3) Maximum speed.
- 4) Maximum interval of space to be maintained between the units of the parade.
- 5) The portions of the streets to be traversed that may be occupied by the parade.
- 6) The maximum length of the parade in miles or fractions thereof.
- 7) Such other information as the governing body shall find necessary to the enforcement of this article.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

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**Sec. 24-9-9. - Carrying parade permit.**

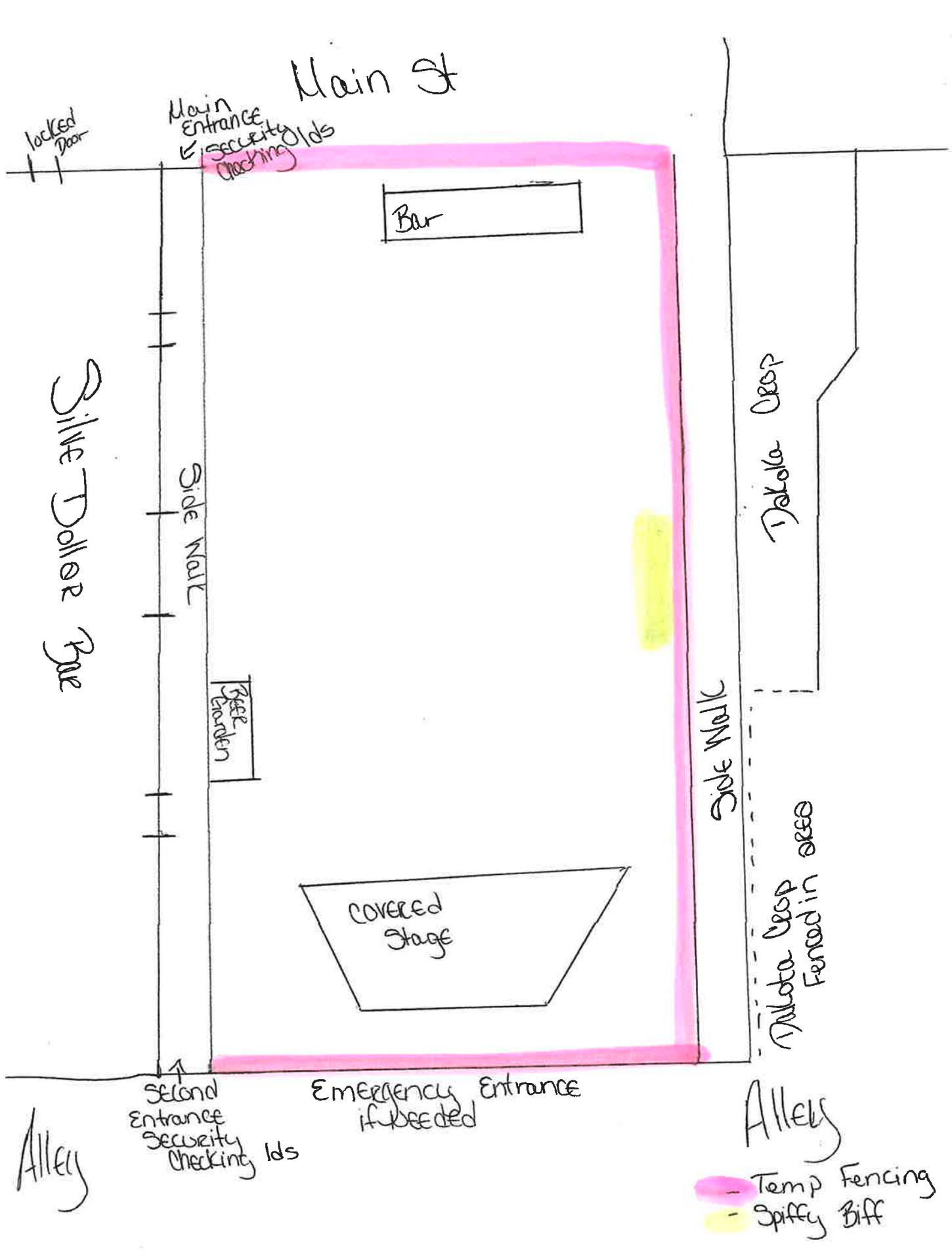
The parade chairperson or other person heading or leading such activity shall carry the parade permit upon their person during the conduct of the parade.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)

**Sec. 24-9-10. - Revocation of parade permit.**

The city may, after a hearing affording due process, revoke a parade permit issued under this article upon application of the standards for issuance as set forth in this article.

(Code 1979, § 9-01-01; Code 1994, § 20-09-02; Ord. No. 658, § 1, 1982; Ord. No. 789, § 1-3, 1991)



# Silver Dollar Street Dance Special Event Permit

Final Audit Report

2024-08-12

|                 |                                               |
|-----------------|-----------------------------------------------|
| Created:        | 2024-08-08                                    |
| By:             | Tasha Scott (tasha.scott@mandanpd.com)        |
| Status:         | Signed                                        |
| Transaction ID: | CBJCHBCAABAAAtbdnFeZu971u9oW4J_jhEtLLW0oXkKyw |

## "Silver Dollar Street Dance Special Event Permit" History

-  Document created by Tasha Scott (tasha.scott@mandanpd.com)  
2024-08-08 - 4:12:56 PM GMT
-  Document emailed to Pat Haug (phaug@mandanpd.com) for signature  
2024-08-08 - 4:13:05 PM GMT
-  Document emailed to Brian Dirk (brian.dirk@cityofmandan.com) for signature  
2024-08-08 - 4:13:05 PM GMT
-  Document emailed to Mitch Bitz (mbitz@cityofmandan.com) for signature  
2024-08-08 - 4:13:05 PM GMT
-  Document emailed to Jarek Wigness (jarek.wigness@cityofmandan.com) for signature  
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-  Email viewed by Pat Haug (phaug@mandanpd.com)  
2024-08-08 - 4:41:04 PM GMT
-  Signer Pat Haug (phaug@mandanpd.com) entered name at signing as Patrick Haug  
2024-08-08 - 4:43:06 PM GMT
-  Document e-signed by Patrick Haug (phaug@mandanpd.com)  
Signature Date: 2024-08-08 - 4:43:08 PM GMT - Time Source: server
-  Email viewed by Mitch Bitz (mbitz@cityofmandan.com)  
2024-08-08 - 9:05:53 PM GMT
-  Signer Mitch Bitz (mbitz@cityofmandan.com) entered name at signing as Mitch L. Bitz  
2024-08-08 - 9:06:18 PM GMT
-  Document e-signed by Mitch L. Bitz (mbitz@cityofmandan.com)  
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2024-08-09 - 1:45:59 PM GMT

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2024-08-12 - 3:19:20 PM GMT

 Document e-signed by Brian Dirk (brian.dirk@cityofmandan.com)  
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 Agreement completed.  
2024-08-12 - 3:21:11 PM GMT



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 14, 2024  
**SUBMITTING DEPARTMENT:** Police Department  
**DEPARTMENT DIRECTOR:** Jason Ziegler  
**PRESENTER:** Jason Ziegler, Police Chief  
**SUBJECT:** Consider approval of the special event permit for Liberty Heights/MGAS Classic Car Show.

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**STATEMENT/PURPOSE:**

Consider approval of the special event permit for Liberty Heights/MGAS Classic Car Show.

**BACKGROUND/ALTERNATIVES:**

Classic car show with food and entertainment-inclement weather date is 9/11/24. See attached special event permit. All City of Mandan departments have reviewed and signed off on this event.

**ATTACHMENTS:**

1. Liberty Heights-Special Event Permit - signed

**FISCAL IMPACT:**

N/A

**STAFF IMPACT:**

N/A

**LEGAL REVIEW:**

N/A

**RECOMMENDATION:**

I recommend approving the special event permit for Liberty Heights/MGAS Classic Car Show.

**SUGGESTED MOTION:**

I move to approve the special event permit for Liberty Heights/MGAS Classic Car Show.

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

Paid  
CK# 39191  
TS

# Special Events Permit Application

## City of Mandan, ND

Mandan Police Department (Special Events) • 205 1<sup>st</sup> Ave. NW • Mandan, ND 58554  
• Phone 701-667-3250 • FAX 701-667-3463

Date of Application: 07/29/2024

**30 days prior** to the event with a **non-refundable administration application fee of \$25 attached**. Late applications are permitted and subject to an **additional \$50 processing fee** for those submitted within 20 days of an event. Any application not submitted prior to 20 days before the event will not be accepted for consideration.

**The payment of fees does not guarantee event approval if submitted late. Permits are \$30 per day/Sunday Permit will be \$45, to a maximum of \$150.00 per event not to exceed 14 days (Includes Sundays).**

All applicants will be charged fees as appropriate and are expected to fully reimburse the city for all services related to event production which may include, but are not limited to, Police Services, Fire/EMS, Park and Facility Maintenance, Field Services, Sanitation, Street Engineering and Site Supervisors. (See Below Fee and Charges)

A storage fee of **\$500** will be assessed for all equipment not removed from any public venue or premises within 24 hours of the end of the event. Any vendor may request an extension for equipment removal and may be granted by the City Administrator. Full payment is due upon receipt of final invoice. Any property that is abandoned over 15 days will become property of the City of Mandan and may be sold to recoup any expenses accrued by the city.

**Comprehensive site plans must accompany this application.**

Street Dance: ☐ Beer Garden: ☐ Both: ☐ Parade or Other Public Event: ☒

### **Section 1 – Applicant Information**

Name of Event Manager: Grace Rude  
Driver's License Number: RUD-57-2203 State ND  
Date of Birth: 06/25/1957 Phone Number: 701-663-6528 Email: grace.mgas@midconetnetwork.com  
Address: 301 15th Street NW City: Mandan State: ND Zip: 58554  
Have you ever been convicted of a crime? ☐ YES ☒ NO  
If yes please list charge(s) and year of conviction(s):  
\_\_\_\_\_  
\_\_\_\_\_

*(List all Jurisdictions where you have been charged with a crime, also list any other names you have used when charged)*

Name of Event Manager: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Have you ever been convicted of a crime? ☐ YES ☐ NO  
If yes please list charge and year of conviction:  
\_\_\_\_\_  
\_\_\_\_\_

*(List all Jurisdictions where you have been charged with a crime, also list any other names you have used when charged)*

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

Business Address: 301 15th Street NW City: Mandan State: ND Zip: 58554  
Corporation/Organization: Mandan Golden Age Club State of Incorporation: \_\_\_\_\_  
Tax ID #: 45-0317557 501(c)3 #: \_\_\_\_\_ City Sales Tax ID #: \_\_\_\_\_  
Have you ever coordinated/promoted another event/s? ☒ YES ☐ NO  
If yes, please provide the following:  
Last event/s Location: 301 15th Street NW Date: 09/12/2023  
Contact Name: Grace Rude Phone: 701-663-6528  
E-mail Contact: grace.mgas@midconetwork.com

## **Section 2 – Event Information**

Event Name: Liberty Heights/MGAS Classic Car Show Anticipated Daily Attendance: 250  
Event Date(s): 09/10/2024 or 09/11/2024 Set-up Date: 09/10/2024 Hours: 4:00-5:00P  
Hours of event each day: 5:00P to 7:30P  
(begin and end times)  
Take Down Date(s): 09/10/2024 or 09/11/2024 Hours: 7:30 to 8:30P  
E-Mail address for public information: grace.mgas@midconetwork.com  
WEB address for public information: https://www.mortoncountycouncilonaging.com/  
Location of Event/physical address: 301 15th Street NW, Mandan ND  
Sponsors of the Event: Morton County Housing and Mandan Golden Age Club  
Brief Description of Event:  
Classic Car Show with food and entertainment - Inclement wather date is 09/11/2024

Has this event been held in another location? ☐ YES ☒ NO

If yes, please provide the following:

Last event/s Location: \_\_\_\_\_  
Date: \_\_\_\_\_ Contact Name and Phone: \_\_\_\_\_

## **Section 3 – Event Features**

Will there be an admission charge? ☐ Yes ☒ No

If yes, Printed ticket count: \_\_\_\_\_ Tickets for presale count: \_\_\_\_\_

Will there be entertainment? ☒ Yes ☐ No

If yes, please attach an itemized complete list of all entertainment.

*(A complete list of entertainment will be required before final approval. Once approved, no changes may be made unless authorized by the City Administrator.)*

Will merchandise and/or food items be sold? ☒ Yes ☐ No

If yes, please attach a complete list of vendors.

*(Each vender must have all valid permits and license to sell their product)*

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**What type of advertising/promotion will be done prior to the event?**

*(Attach all promotional material.)*

Radio: ☐ Yes ☒ No What Stations? \_\_\_\_\_

TV: ☐ Yes ☒ No What Stations? \_\_\_\_\_

Fliers/Posters: ☒ Yes ☐ No How many? <sup>10-15</sup> \_\_\_\_\_

Press Releases: ☐ Yes ☒ No How many? \_\_\_\_\_

Newspaper Ads: ☐ Yes ☒ No What publication? \_\_\_\_\_

Is any other promoter/producer assisting you with your event? ☐ Yes ☒ No

Name of Promoter and Promotion Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Will the event include any of the following? (Indicate on site plan and/or vendor list)

Tents or Canopies: ☐ Yes ☒ No

Number of Tents: \_\_\_\_\_

*(Tents require permits from the Fire Department and inspection fees will be applied.)*

Fireworks or Pyrotechnics: ☐ Yes ☒ No

*(Fireworks or Pyrotechnics require permits from the Fire Department and inspection fees will be applied.)*

Fireworks or Pyrotechnics Production Company's name: \_\_\_\_\_

*(A copy of the Production Company's License and Insurance is required with this application, only if fireworks or pyrotechnics are being requested for this event.) \*A separate bond may be required for this event.*

**Require permits from the City of Mandan**

Any person for on- or off-sale alcoholic beverage licensee desiring to conduct a public beer garden shall make application for a special permit to do so to the board, 30 days in advance of the proposed event.

**Temporary Fencing:** ☐ Yes ☒ No

Provide accurate dimensions of fenced area on site plan along with the site plan.

Company Contact Name: \_\_\_\_\_

Contact phone: \_\_\_\_\_

Restroom Accommodations: \_\_\_\_\_

Number of required portable toilets: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

**Placement of sanitary toilet facilities must be on site plan.**

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

Attach a copy of the letter from the Custer Health that indicates the site plan has been reviewed and the required number of proper sanitation facilities is attendance.

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_

**Electrical Services/Generators** ☐ Yes ☒ No

*Generators must be separated from tents by a minimum of 20' and shall be isolated from contact by fencing or other approved means.*

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Carnival/Amusement Rides:** ☐ Yes ☒ No

A separate permit from the Fire Department may be required.

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_

Bonded and Insured Amount: \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Signs / Banners** ☐ Yes ☒ No

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Inflatables** ☐ Yes ☒ No

Company Contact name: \_\_\_\_\_  
Contact phone: \_\_\_\_\_

Bonded and Insured Amount: \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

---

### Raffles

Will this event have a raffle? ☐ Yes ☒ No

If yes you must apply for a City Permit \$25 Raffle Permit (Attach copy of State Gaming License if issued)

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

---

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

#### **Section 4 – Transportation**

Does the event propose **using, closing or blocking** any of the following:

*If yes, specify location and duration on site map, if on a DOT Highway or Roadway DOT authorization will be required.*

- City Streets ☒ Yes ☐ No (Number of locations: <sup>2</sup> \_\_\_\_\_ attach list of locations.)
- City Sidewalks ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- City Bus Stops ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- Public Parking Lots ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- Public Bicycle Parking ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- Multiuse Paths ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- City Alleys ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)
- City Right-of-Ways ☐ Yes ☒ No (Number of locations \_\_\_\_\_ attached list of locations)

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_  
(Section 4 must be approved by Mandan City Engineer, and be approved by the City Commission before the event)

#### **Section 5 – Use of City Utilities**

Will any City electric hookups be used? ☐ Yes ☒ No

Electric Location including amperage \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Will any City water hookups be used? ☐ Yes ☒ No

Water Location(s) \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Will waste water/gray water be generated? ☐ Yes ☒ No

If so, how will it be disposed? \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_ **Initials:** \_\_\_\_\_



Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**Section 6 – Alcohol**

Will there be alcohol at the event? ☐ Yes ☒ No

Will alcohol be given away? ☐ Yes ☒ No

Will the alcohol be sold? ☐ Yes ☒ No

Will the alcohol be donated? ☐ Yes ☒ No

Who is the alcohol being donated by or purchased through: \_\_\_\_\_

Is alcohol included in the admission price of the event? ☐ Yes ☒ No

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Initials: \_\_\_\_\_

**If you answered Yes to any of the above, a City and State Liquor License will be required. Attach copy(s) of all liquor licenses with this application. (If a City Liquor License is needed please contact the City of Mandan's Finance Department to apply at Phone: (701) 667-3213)**

Has the applicant/organization ever had a liquor license or event permit denied, revoked or suspended? ☐ Yes ☐ No

***If yes, please explain:***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will attendees be identified as minors or age 21 and over?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have the alcohol servers received training in sale/service of alcoholic beverages? ☐ Yes ☐ No

If yes, who provided the training: \_\_\_\_\_

Date and time of most recent training: \_\_\_\_\_

Request Mandan Police Server Training: ☐ Yes ☐ No

If yes provide a contact person and contact information::

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

### **Section 7 – Event Security**

Are you requesting off-duty Mandan Police officers? ☐ Yes ☒ No

Number of personnel requested: \_\_\_\_\_

*After reviewing the event application, the Chief of Police may require the use of the City of Mandan Off-Duty Police Officers for the event.*

*To schedule Off –Duty Police Officers, please call 701-667-3250.*

**Officers must be requested 2 weeks prior to any event and there will be a minimum of 4 work hours per officers per event at \$45 per-hour per officer.**

Are you requesting private security? ☐ Yes ☒ No

Number of security personnel onsite: \_\_\_\_\_

**Include security points and duties on event plans**

***The City of Mandan requires only security companies that are licensed and bonded in the State of North Dakota.***

Security Company and Contact Info: \_\_\_\_\_

**Attach a copy of Company's License**

### **Section 8 – Emergency Medical Services**

Are you requesting off-duty Mandan EMT's? ☐ Yes ☒ No

Number of personnel requested: \_\_\_\_\_

*After reviewing the event application the Fire Chief may require the use of the City of Mandan Off-Duty EMT's or paramedics for the event.*

**EMTs or paramedics must be requested 2 weeks prior to any even and there will be the minimum of 4 work hours per employee per event \$35**

### **Section 9 – Event Maintenance and Cleanup Plan Required**

What is your trash removal and cleanup plan?

Cleanup will be handled by Mandan Senior Center employees

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Attach a detailed Cleanup Plan)

Outside refuse company Company's Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

***All costs for containers, dumping and the removing all trash are the responsibility of the applicant/promoter. The City of Mandan's property and or the event site must be returned to its original condition and all equipment removed or daily fees will be accessed.***

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

### **Section 10 – ADA Accessibility Requirements**

#### **Parking plan requirements**

Attach a copy of your parking plan and include in the plan the necessary handicap parking areas and any code required handicap accessibility requirements. Also include medical access points and safe medical response routes for the event.

### **Section 11– Insurance and Bond Requirements**

The City of Mandan has established insurance requirements for those facility users, vendors and contractors entering into agreements with the City for the purpose of special events and activities. Before commencing use or services under an agreement with the City of Mandan, a certificate of insurance or a copy of the required bond that complies with the requirements referenced below must be attached.

**All special event applicants shall name the City of Mandan as an “Additional Insured”, per item one below, on all policy(ies), except workers compensation and shall reflect this on a Certificate of Insurance. Applicant agrees that any insurance available to the applicant shall be primary and non-contributory to the city’s self-insured retention.**

Applicant shall obtain certificates of insurance from all vendors participating in this event unless covered under applicant’s insurance policy. Vendors must comply with all requirements listed in this section. Complete and accurate certificates must be received by the Special Events Office a minimum of five (5) working days prior to the event. Separate certificates of insurance shall be provided by all carnival and amusement companies and firework production companies with the limits shown in this section and shall name the City of Mandan as “Additional Insured” as per item one below. Additional coverage may be required depending upon the nature and scope of the event. For more information or questions regarding insurance requirements, please contact our City Administrator’s Office at 701-667-3214. The City Administrator reserves the right to evaluate the liability of each event and assess the required insurance limits. Event permits will not be issued until all insurance requirements are satisfactorily met.

#### **The certificate must show:**

1. The City of Mandan, its agents, officers, employees and volunteers are named as “Additional Insured.” All Certificate of Insurance policies must reflect this with the exception of workers compensation.
2. The City of Mandan shall be notified at least 30 days prior to cancellation or alteration of any insurance coverage. A 10-day notice of cancellation for non-payment of premium is required..
3. Workers Compensation Policies shall contain a Waiver of Subrogation clause in favor of the City of Mandan.
4. General Liability Including: Bodily Injury Contractual Independent Contractors  
Comprehensive Form Product/Completed Operations Hazard  
Premises Operation Personal injury Broad Form Property Damage

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**In addition, specific date(s) and locations(s) of the event, to include set up and take down, must be stated clearly on the certificate. Certificates shall be received no less than thirty (30) working days prior to the event.**

***City Services***

Police..... \$45 per hour, per officer, 4 hour minimum

Fire/EMS..... \$35 per hour, per staff 4 hour minimum

Barricades.....Amount charged by contracted barricade provider

Trash Container drop-off/pick-up..... \$ \_\_\_\_ prices vary

Custodial..... \$ \_\_\_\_ per hour, per staff person

**Miscellaneous fees**

Tent/Canopy Permit.....\$ \_\_\_\_ per tent or canopy (Check with the Fire Department to ascertain if a permit is necessary)

Fireworks Permit..... \$ \_\_\_\_ per location

The Park District may require separate fees or permit if on Park District property. It is required that the event host checks with the Park District when planning an event on Park District property to avoid delays with the permitting process.

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_  
(For office use only)

**Fee Cost Worksheet**

**Police Services:**

No. of Officers \_\_\_\_\_ x No. of Hours \_\_\_\_\_ = \_\_\_\_\_ x \$45 = \$ \_\_\_\_\_

**Fire/EMT Services**

No. of EMT's \_\_\_\_\_ x No. of Hours \_\_\_\_\_ = \_\_\_\_\_ x \$35 = \$ \_\_\_\_\_

**Finance application processing Fee** ..... \$ \_\_\_\_\_

**Trash Container Fee**..... \$ \_\_\_\_\_

**Custodial Fee**..... \$ \_\_\_\_\_

**Tent/Canopy Inspection and Permit**..... \$ \_\_\_\_\_

**Fireworks/Pyrotechnics Permit and Inspection Fee**..... \$ \_\_\_\_\_

**\$25 Application Fee**..... \$ \_\_\_\_\_

**\$50 Late application Processing Fee (if Applicable)**..... \$ \_\_\_\_\_

**Event Application Fee (See Attached Fee Schedule)**..... \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

*Fees assessed by the Park District are not included.*

**Date Fees Paid:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Permit Application #: \_\_\_\_\_ Date Complete: \_\_\_\_\_

(For office use only)

## Signature Page from City Officials and Department Heads

|                                                                               |             |                                     |          |                          |        |                          |                           |
|-------------------------------------------------------------------------------|-------------|-------------------------------------|----------|--------------------------|--------|--------------------------|---------------------------|
| <u>Mitch L. Bitz</u><br><small>Mitch L. Bitz (Jul 30, 2024 15:17 CDT)</small> | /07/30/24   | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Fire Department                                                               | Date        |                                     |          |                          |        |                          |                           |
| <u>Patrick Haug</u><br><small>Patrick Haug (Jul 30, 2024 10:21 CDT)</small>   | /07/30/2024 | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Police Department                                                             | Date        |                                     |          |                          |        |                          |                           |
| <u>[Signature]</u><br><small>[Signature]</small>                              | /08/14/24   | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Engineering Department                                                        | Date        |                                     |          |                          |        |                          |                           |
| <u>Brian Dirk</u><br><small>Brian Dirk (Jul 30, 2024 11:29 CDT)</small>       | /07/30/24   | <input checked="" type="checkbox"/> | Approved | <input type="checkbox"/> | Denied | <input type="checkbox"/> | Conditional—See Narrative |
| Public Works                                                                  | Date        |                                     |          |                          |        |                          |                           |

Fire Department Narrative:

Police Department Narrative:

Engineering Narrative:

Public Works Narrative:

**Free to the Public**  
**9th Annual**  
**Classic Car Show**



**Tuesday, September 10th**

**5:00P to 7:30P**

**The Liberty Heights & Mandan Golden Age  
Classic Car Show**

**Location: 301 15th Street NW , Mandan**

**5:00P to 7:30P**

**Admire Classic Cars, listen to music and eat**



***Food available from***

***Norm's Eatery***

***Entertainment***

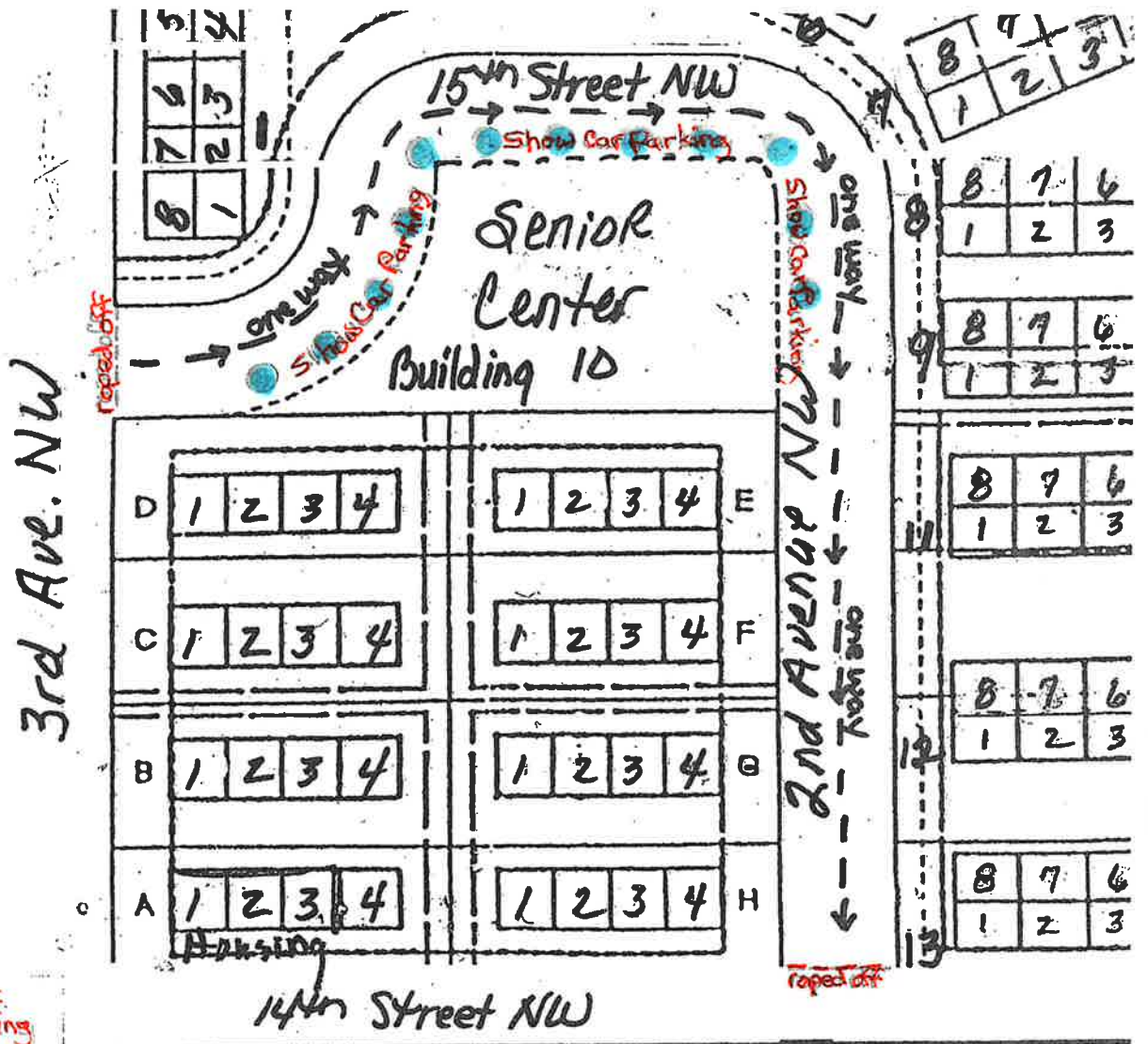
***by***

***Brave Heart Band***

***In Case of inclement weather, alternate date  
Wednesday, Sept. 11th***

**Contact Grace at 701-663-6528**





roped off street  
Show Car Parking



# MANDAN GOLDEN AGE CLUB

301 15TH STREET NW • MANDAN, ND 58554 • (701) 663-6528

July 24, 2024

Michael M. Breid, Support Services Sergeant  
Mandan Police Department  
205 1<sup>st</sup> Avenue NW  
Mandan ND 58554

Dear Sergeant Breid:

Morton County Housing (Liberty Heights) and the Mandan Golden Age Club/Senior Center are hosting their 9th Annual Car Show on Tuesday, September 10, 2024, (alternate date in case of inclement weather 09/11/2024) from 5:00-7:30 P.M. We are requesting permission to rope off the Liberty Heights one-way street, which is 15<sup>th</sup> Street NW, both the entrance on 3<sup>rd</sup> Avenue NW and the exit on 14<sup>th</sup> Street NW. The street would be roped off from 4:30 to 8:00 P.M.

Entertainment will be provided by Brave Heart Band and food will be available from Norm's Eatery.

Included with this letter is the permit application, a map depicting the requested street closure, the flyer that will be used to promote the event, and the \$25 application fee. The Mandan Golden Age Club/Senior Center and Liberty Heights Housing have liability insurance coverage on the properties where the car show will be held.

I appreciate you taking the time to review our request and if more information is needed, or you have questions, I can be reached at 701-663-6528 (office).

Sincerely,

  
Debbie Lafferty  
Director, Morton County Council on Aging

Concurred by:

  
Rick Horn  
Director, Morton County Housing

Enclosures:  
Street Map  
Advertising Flyer

# Liberty Heights-Special Event Permit

Final Audit Report

2024-08-14

|                 |                                              |
|-----------------|----------------------------------------------|
| Created:        | 2024-07-30                                   |
| By:             | Tasha Scott (tasha.scott@mandanpd.com)       |
| Status:         | Signed                                       |
| Transaction ID: | CBJCHBCAABAAvUrD8SJpv3Hq2jIXYccOLaMKqDfO56la |

## "Liberty Heights-Special Event Permit" History

-  Document created by Tasha Scott (tasha.scott@mandanpd.com)  
2024-07-30 - 3:08:42 PM GMT
-  Document emailed to Patrick Haug (phaug@mandanpd.com) for signature  
2024-07-30 - 3:20:49 PM GMT
-  Email viewed by Patrick Haug (phaug@mandanpd.com)  
2024-07-30 - 3:21:05 PM GMT
-  Document e-signed by Patrick Haug (phaug@mandanpd.com)  
Signature Date: 2024-07-30 - 3:21:15 PM GMT - Time Source: server
-  Document emailed to brian.dirk@cityofmandan.com for signature  
2024-07-30 - 3:21:17 PM GMT
-  Email viewed by brian.dirk@cityofmandan.com  
2024-07-30 - 4:27:39 PM GMT
-  Signer brian.dirk@cityofmandan.com entered name at signing as Brian Dirk  
2024-07-30 - 4:29:37 PM GMT
-  Document e-signed by Brian Dirk (brian.dirk@cityofmandan.com)  
Signature Date: 2024-07-30 - 4:29:39 PM GMT - Time Source: server
-  Document emailed to mbitz@cityofmandan.com for signature  
2024-07-30 - 4:29:41 PM GMT
-  Email viewed by mbitz@cityofmandan.com  
2024-07-30 - 8:17:03 PM GMT
-  Signer mbitz@cityofmandan.com entered name at signing as Mitch L. Bitz  
2024-07-30 - 8:17:43 PM GMT



Document e-signed by Mitch L. Bitz (mbitz@cityofmandan.com)

Signature Date: 2024-07-30 - 8:17:45 PM GMT - Time Source: server



Document emailed to Jarek Wigness (jarek.wigness@cityofmandan.com) for signature

2024-07-30 - 8:17:47 PM GMT



New document URL requested by Tasha Scott (tasha.scott@mandanpd.com)

2024-08-07 - 2:35:49 PM GMT



Email viewed by Jarek Wigness (jarek.wigness@cityofmandan.com)

2024-08-14 - 3:14:22 PM GMT



Document e-signed by Jarek Wigness (jarek.wigness@cityofmandan.com)

Signature Date: 2024-08-14 - 3:15:15 PM GMT - Time Source: server



Agreement completed.

2024-08-14 - 3:15:15 PM GMT





## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 12, 2024  
**SUBMITTING DEPARTMENT:** Police Department  
**DEPARTMENT DIRECTOR:** Jason Ziegler  
**PRESENTER:** Jason Ziegler, Police Chief  
**SUBJECT:** Consider approval of the Lottery Grant Application for Metro Area Narcotics Task Force.

---

#### **STATEMENT/PURPOSE:**

Consider approval of the City of Mandan Lottery Grant application to provide funding for the Metro Area Narcotics Task Force.

#### **BACKGROUND/ALTERNATIVES:**

The City of Mandan has participated in previous years in the Lottery Grants to provide funding for the Metro Area Narcotics Task Force. This grant application is for the time period of 01-01-2025 through 12-31-2025. The grant request is for \$121,650.00. See attached application.

#### **ATTACHMENTS:**

1. 2025 MANTF Lottery Grant Application

#### **FISCAL IMPACT:**

The lottery grant does not require any match.

#### **STAFF IMPACT:**

Mandan Police Department assigns an officer to the Task Force. Deputy Chief Bier is the Fiscal Officer for this grant.

#### **LEGAL REVIEW:**

N/A

#### **RECOMMENDATION:**

I recommend the approval of the City of Mandan Lottery Grant application to provide funding to the Metro Area Narcotics Task Force.

City Commission

Agenda Documentation

August 20, 2024

Subject: Consider approval of the Lottery Grant Application for Metro Area Narcotics Task Force

Page 2 of 2

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**SUGGESTED MOTION:**

I move to approve the City of Mandan Lottery Grant application to provide funding to the Metro Area Narcotics Task Force.

# Edward Byrne Justice Assistance Grant (JAG) Application

## LOTTERY GRANT APPLICATION

OFFICE OF THE ATTORNEY GENERAL

Project Period 1/1/2025-12/31/2025

Application Deadline: Friday, August 26, 2024 11:59 PM

### I – APPLICATION OVERVIEW

#### Subrecipient contact information:

Name and Unique Entity Identifier (UEI) as registered with Sam.gov. This is the entity receiving the funding.

Entity Applying (Check One)



State or units of  
local government



Indian Tribe



Non-government  
victim witness  
assistance programs



Non-government domestic  
violence programs

Name of Subrecipient (City, County, State Agency)

City of Mandan

Unique Entity Identifier - required

022277190000

Subrecipient Phone

701-667-3213

Suprecipient Street Address

205 2nd Ave NW

City

Mandan

State

ND

Zip Code

58554

Suprecipient Contact Name

Greg Welch

Title

Finance Director

Email Address

gwelch@cityofmandan.com

The authorized official must have the legal authority to commit the subrecipient to a contract or other agreement.

Overall responsibility for the administration of the project rests with this individual.

Examples: mayor, city or county auditor, director of the agency, or Tribal Chairperson.

Name of Authorized Official

Jim Froelich

Title

Mayor-City of Mandan

Phone

701-667-7460

Street Address

205 2nd Ave NW

City

Mandan

State

ND

Zip Code

58554

Email Address

james.froelich@cityofmandan.com

The Project Director has the direct responsibility for implementation of the project activities.

This person will prepare and submit all progress reports as required by the Office of Attorney General.

Examples: task force coordinator or executive director.

Name of Project Director

Luke Kapella

Title

Special Agent

Phone

701-220-7026

Street Address

1720 Burlington Dr Ste B

City

Bismarck

State

ND

Zip Code

58504

Email Address

LK426@nd.gov

The Implementing Agency has direct responsibility for carrying out the activities of the grant.

Name of Implementing Agency

**Metro Area Narcotics Task Force**

The Fiscal Officer has the responsibility of the financial administration of the project.

This person prepares and submits all financial reports as required by the Office of Attorney General.

Examples: city or county auditor, fiscal designee, or it can also be the project director.

|                        |              |       |          |
|------------------------|--------------|-------|----------|
| Name of Fiscal Officer | Title        |       | Phone    |
| Jason Bier             | Deputy Chief |       | 701-     |
| Street Address         | City         | State | Zip Code |
| 205 1st Street NW      | Mandan       | ND    | 58554    |
| Email Address          |              |       |          |
| jbier@mandanpd.com     |              |       |          |

Authorized Program Area: (select all that apply)

- |                                                          |                                                                     |                                                                                                                                                                   |
|----------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Law Enforcement      | <input type="checkbox"/> Corrections/Community Corrections          | <input type="checkbox"/> Crime Victim and Witness Programs (other than compensation)                                                                              |
| <input checked="" type="checkbox"/> Prosecution/Courts   | <input checked="" type="checkbox"/> Drug Treatment/Enforcement      |                                                                                                                                                                   |
| <input checked="" type="checkbox"/> Prevention/Education | <input type="checkbox"/> Planning/Evaluation/Technology Improvement | <input type="checkbox"/> Mental Health Programs and Related Law Enforcement and Corrections programs, including behavioral programs and crisis intervention teams |

Multi-agency Project (two or more)?

☒ Yes ☐ No

Multijurisdictional Project (two or more)?

☒ Yes ☐ No

**II - BUDGET NARRATIVE & CALCULATIONS** – All budget categories calculate the total cost in the column on the right. **DO NOT USE SPECIAL CHARACTERS** (example: \$, commas, letters, etc.) **ONLY USE NUMBERS.** Please round to the nearest dollar. Applicants should indicate the total cost for each category of the proposed project.

**A. Personnel** - List each position by type. Compensation for employees engaged in grant activities must be consistent with that paid for similar work within the surrounding areas. Fringe benefits should be based on actual known costs or an established formula. Fringe benefits may include common items such as payroll taxes, health and life insurance, and retirement contributions. NOTE: Salary Cap (Wages and Fringe) \$52,000 for prosecutors and \$42,000 all other personnel. Attach a sheet using [this](#) format if you have additional items.

| Name/Position - Salary | Salary per Hour,<br>Month or Year | # of Hours,<br>Months or Year | Total<br>Personnel<br>Cost |
|------------------------|-----------------------------------|-------------------------------|----------------------------|
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
| Name/Position - Fringe | Fringe per Hour,<br>Month or Year | # of Hours,<br>Months or Year | Total<br>Personnel<br>Cost |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
|                        |                                   |                               | \$ 0.00                    |
| Total Personnel:       |                                   |                               | \$ 0.00                    |

**Narrative** – Please provide a detailed description for all personnel expenses.



**B. Supplies** - List items by type (office supplies, investigative supplies postage, copy paper). Generally, supplies include any materials that are expendable or consumed during the course of the project (includes **equipment under \$5000**). Attach a sheet using this format if you have additional items.

| Supply Item                            | Unit Cost | # of Items | Total Supplies Cost |
|----------------------------------------|-----------|------------|---------------------|
| Office Supplies                        | 1         | 7500       | \$ 7,500.00         |
| Investigative and Maintenance Supplies | 1         | 7500       | \$ 7,500.00         |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
|                                        |           |            | \$ 0.00             |
| Total Supplies:                        |           |            | \$ 15,000.00        |

**Narrative** – Please provide a detailed description for all supply expenses.

MANTF is requesting \$7,500 for Office Supplies and \$7,500 for Investigative/Maintenance Supplies. This is an increase of \$2,500 in each category from 2024. The reason for the larger request is explained in the following:

1. MANTF has seen substantial growth in the past two years which therefore has put a larger strain and burden on the MANTF operational, investigative, and maintenance supplies. In 2023, MANTF utilized its entire supply budget in the first quarter. Looking towards 2025, MANTF has added more personnel already with the possibility of adding even more in the near future. Only a few years ago MANTF was a large Task Force supporting 13 members from local, state, and federal agencies. As we move into 2025, MANTF now supports 23 members with an additional 4 more being added depending on if those agencies are able to fill those spots. These new members include 2 NDBCI Special Agents who operate on the Standing Rock and Fort Berthold Tribal Lands. MANTF is now the largest Task Force in the State of North Dakota.

2. Due to the substantial growth, MANTF has had to use its Asset Forfeiture Funds to cover supplies when those funds have run out. This practice is unsustainable and unreliable when planning for the future.

3. Cost of all supplies has increased across the board due to inflation.

**C. Rent** - List buildings or locations that require a rent payment.

| Rent Item   | Cost per Month/Year | # of Months/year | Total Rent Cost |
|-------------|---------------------|------------------|-----------------|
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
|             |                     |                  | \$ 0.00         |
| Total Rent: |                     |                  | \$ 0.00         |

**Narrative** – Please provide a detailed description for all rent expenses.

**D. Communications** - List items used for communications (telephone, cell phone charges, etc.) Attach a sheet using [this](#) format if you have additional items.

| Communication Items                 | Estimated Cost Per Month | # of Months | Total Communication Cost |
|-------------------------------------|--------------------------|-------------|--------------------------|
| ITD Services, Cell Phones, Scanners | 1250                     | 12          | \$ 15,000.00             |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
|                                     |                          |             | \$ 0.00                  |
| Total Communications:               |                          |             | \$ 15,000.00             |

|                                                                                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Narrative</b> – Please provide a detailed description for all communication expenses.                                                                                                                                                                                                                                                                                                                |
| <p>The MANTF Project Manager, S/A Luke Kapella, audited all MANTFs communication budget in 2023. MANTF in 2023, changed its methodologies after the audit and was able to remove certain expenses from the MANTF communications budget that were ineffective or unnecessary. Therefore MANTF reduced this budget line by \$5,000 for 2024. MANTF is requesting the same amount for the 2025 budget.</p> |

| <b>E. Fuel/Oil/Vehicle Maintenance</b> - List fuel usage, oil changes, vehicle maintenance for all vehicles, leased or owned. Attach a sheet using <a href="#">this</a> format if you have additional items. |                          |             |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|-----------------|
| Fuel/Oil/Vehicle Maintenance Items                                                                                                                                                                           | Estimated Cost Per Month | # of Months | Total Fuel Cost |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
|                                                                                                                                                                                                              |                          |             | \$ 0.00         |
| Total Fuel/Oil/Vehicle Maintenance:                                                                                                                                                                          |                          |             | \$ 0.00         |
| <b>Narrative</b> – Please provide a detailed description for all fuel/oil/vehicle maintenance expenses.                                                                                                      |                          |             |                 |
|                                                                                                                                                                                                              |                          |             |                 |

**F. Contractual Services** - List service to be provided, anticipated hourly, daily, or monthly rates. Also include expenses to be paid to the consultants in addition to their fees (i.e., travel, meals, lodging, etc.) The maximum rate for consultants is \$650 for an 8-hour day.

| Name of Contractor/Consultant<br>(if known) | Purpose of the contract | Total Contractual<br>Cost |
|---------------------------------------------|-------------------------|---------------------------|
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
|                                             |                         | \$ 0.00                   |
| Total Contractual Services:                 |                         | \$ 0.00                   |

**G. Equipment Rent/Lease** - List equipment items to be rented or leased.

| Item                        | Cost Per Item | # of Items | Total Equipment<br>Rent/Lease Cost |
|-----------------------------|---------------|------------|------------------------------------|
| Twelve Month Vehicle Lease  | 8350          | 6          | \$ 50,100.00                       |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
|                             |               |            | \$ 0.00                            |
| Total Equipment Rent/Lease: |               |            | \$ 50,100.00                       |

**Narrative** – Please provide a detailed description for all equipment rent/lease expenses.

MANTF provides its TFOs with vehicles in order to further the MANTF mission. MANTF has found that leasing is the most cost effective and efficient method of providing transportation for TFOs. Below is a breakdown of vehicle leasing needs by MANTF.

BCI - 0 vehicles (paid for by a different grant)

Morton County Sheriffs Office - 1 vehicle

Mandan Police Department - 1 vehicle

Bismarck Police Department - 2 vehicles

Burleigh County Sheriffs Department - 2 vehicles

**H. Travel & Training** - List travel expenses for attending trainings, meetings, conference, and other work related travel. State rates will be used for in-state travel, GSA rates for out-of state travel.

| Purpose of Travel        | Type of Expense<br>(Lodging, Meals,<br>Flight, Registration,<br>Etc.) | Estimated<br>Cost | Number<br>of Days | Number of<br>Staff | Total Travel<br>Cost |
|--------------------------|-----------------------------------------------------------------------|-------------------|-------------------|--------------------|----------------------|
| See attached Addendum #1 |                                                                       | 20000             | 1                 | 1                  | \$ 20,000.00         |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
|                          |                                                                       |                   |                   |                    | \$ 0.00              |
| Total Travel/Training:   |                                                                       |                   |                   |                    | \$ 20,000.00         |

**Narrative** – Please provide a detailed description for all travel expenses.

See attached Addendum #1

**I. Equipment** - List non-expendable items that are to be purchased that are **\$5000** or more for each item. Items that do not meet these criteria should be considered **Supplies**. Rented or leased equipment should be listed in the Equipment Rent/Lease category. Attach a sheet using this format if you have additional items.

| Equipment Item                                 | Cost per Item | # of Items | Total Equipment Cost |
|------------------------------------------------|---------------|------------|----------------------|
| Digital Storage Device for Cellular Phone Data | 1             | 5200       | \$ 5,200.00          |
| Less Lethal Equipment                          | 1             | 6000       | \$ 6,000.00          |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
|                                                |               |            | \$ 0.00              |
| Total Equipment:                               |               |            | \$ 11,200.00         |

**Narrative** – Please provide a detailed description for all equipment expenses. Please list which agency will maintain ownership of the equipment at the end of the grant.

MANTF is requesting funding for two new areas of equipment that MANTF will be purchasing in 2025.

1. MANTF is purchasing a 160 terabyte digital storage device for \$5,200. All criminal investigations, but especially drug investigations, rely on intelligence gained from analyzing cellular phone data from suspects. Cellular phones are typically 500 megabytes to 1 terabyte of data these days, which is a lot of data to analyze. Furthermore the US Attorneys Office and local States Attorneys Offices request that MANTF save and store that data for the extent of the prosecution and appeals of that case, which could take years. MANTF currently has no option to store that amount of data. Buy purchasing 160 terabytes of storage, MANTF will be able to store that data at least for short while.

2. MANTF executes its own search warrants, vehicle assaults, arrests, and other tactical operations throughout the year. An example of that would be a comparison with the local SWAT team. The West Dakota SWAT Team on average does 5 -10 tactical operations in a given year. MANTF on average is involved with between 80-100 tactical operations per year. Therefore MANTF must keep extending its options on combating suspects who may be violent or non cooperative. One such tool that MANTF utilizes is non-lethal compliance tools. MANTF is in the process of purchasing these tools from our vendor which will cost MANTF \$6,000.

**J. Other Costs** - List other items that do not fall into the other budget categories. Please list vehicle insurance costs here.

| Other Items                      | Cost Per Item | # of Items | Total Cost   |
|----------------------------------|---------------|------------|--------------|
| CovertTrack Tracking Device      | 400           | 1          | \$ 400.00    |
| CovertTrack 1yr Tracking Plan    | 600           | 1          | \$ 600.00    |
| TFO Digital Storage Devices      | 150           | 15         | \$ 2,250.00  |
| MANTF Surveillance Van Insurance | 2600          | 1          | \$ 2,600.00  |
| MANTF Office Cleaning Program    | 1             | 4500       | \$ 4,500.00  |
|                                  |               |            | \$ 0.00      |
|                                  |               |            | \$ 0.00      |
|                                  |               |            | \$ 0.00      |
|                                  |               |            | \$ 0.00      |
|                                  |               |            | \$ 0.00      |
| Total Other:                     |               |            | \$ 10,350.00 |

**Narrative** – Please provide a detailed description for all other expenses.

See Addendum #2

**III – BUDGET SUMMARY**

| Category                        | Total Budget         |
|---------------------------------|----------------------|
| A. Personnel                    | \$ 0.00              |
| B. Supplies                     | \$ 15,000.00         |
| C. Rent                         | \$ 0.00              |
| D. Communications               | \$ 15,000.00         |
| E. Fuel/Oil/Vehicle Maintenance | \$ 0.00              |
| F. Contractual Services         | \$ 0.00              |
| G. Equipment Rent/Lease         | \$ 50,100.00         |
| H. Travel/Training              | \$ 20,000.00         |
| I. Equipment                    | \$ 11,200.00         |
| J. Other Costs                  | \$ 10,350.00         |
| <b>Total Budget Request</b>     | <b>\$ 121,650.00</b> |

Only JAG program applications require match. Lottery grant applicants, please disregard.

|                    |                   |                            |
|--------------------|-------------------|----------------------------|
| <b>Grant Funds</b> | <b>\$ 79072.5</b> | <b>65% of Total Budget</b> |
| <b>Match</b>       | <b>\$ 42577.5</b> | <b>35% of Total Budget</b> |

**Source of Matching Funds (JAG only):**



**IV. AGENCY FUNDING SOURCES**

Please list any direct **JAG grant awards** your agency received from the Bureau of Justice Assistance program and list the projects supported by these grant funds. This does not include JAG funds from the ND OAG.

| Direct Justice Assistance Grant (JAG) Program | Amount      |
|-----------------------------------------------|-------------|
| <b>Projects Supported:</b>                    |             |
|                                               | \$          |
|                                               | \$          |
|                                               | \$          |
| <b>TOTAL FY ____ AWARD AMOUNT</b>             | <b>\$ 0</b> |

Please list all other sources of grant funding that support this project's activities.

| Funding Sources                                                                            | Amount      |
|--------------------------------------------------------------------------------------------|-------------|
| Other (specify):                                                                           |             |
| HIDTA funding is administered by the NDBCI. That amount is found of the NDBCI application. | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
|                                                                                            | \$          |
| <b>TOTAL FUNDING</b>                                                                       | <b>\$ 0</b> |

If the operations of this project are expected to generate income, please discuss possible sources and how it will be used (i.e. asset forfeiture, training fees collected as a result of grant-funded training):

Asset forfeitures/seizures and restitution are the only sources of income for the Metro Area Narcotics Task Force. These sources would only be used to supplement MANTF expenditures deemed appropriate and/or necessary by the MANTF Executive Board.

V. PROJECT NARRATIVE

**I. Project Description:** Briefly describe the project that is proposed. How will this project address specific problems? Include specifics about the services to be provided, how the services will be provided (how often and by whom), and the project accomplishments.

See Addendum #3

**II. Current Efforts:** *Clearly define what efforts are currently underway in responding to the problem described in the Project Description.*

See Addendum #3

|                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------|
| <b>III. Collaboration with Other Agencies:</b> <i>Describe coordination and cooperation between agencies during the past year.</i> |
| See Addendum #3                                                                                                                    |

|                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| <b>IV. Describe in detail what plans or steps are being taken to assure continuation of your agency's project after grant funding ends.</b> |
|                                                                                                                                             |

**VI. PROJECT GOALS, OBJECTIVES, AND PERFORMANCE MEASURES**

Stated goals, objectives, and performance measures will be used by the Office of Attorney General to monitor and assess the project's progress in achieving the intended results. Project goals, objectives, and performance measures should be listed in the format below and not referred to in a narrative format.

**Overall Project Goals:** State the project's goals, in general or broad terms. Goals should address the specific problem/need identified in the application. Goals should be stated in terms of the outcomes that the project wants to achieve. (Example: Reduce the amount of crime committed by persons under the influence of illicit drugs.)

|    |                 |
|----|-----------------|
| 1. | See Addendum #3 |
| 2. |                 |
| 3. |                 |
| 4. |                 |

**Objectives** (Activities directed at achieving goals): State the project's objectives, in terms of specific steps or benchmarks that will eventually lead to accomplishing the goals. Objectives must be clearly expressed and in measurable terms. (Example: Increase the number of drug-related arrests by 10 percent.)

|    |  |
|----|--|
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |

**Performance Measures** (How you measure your project's success): (Example: Number of drug-related arrests)

|    |  |
|----|--|
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |

**VII. ADDITIONAL REQUIRED INFORMATION (Please Attach)**

The Drug and Violent Crime Policy Board has adopted a policy stating that applicants failing to submit the following documents with the application will not be considered for funding.

**Non-government Agency Applicants (Domestic Violence and Victim Services):**

- ☐ A third party contract between the agency and the authorized official of the unit local government stating that the unit of local government will be the legal recipient of the federal funds granted to this agency.

**Multi-jurisdictional Drug Task Forces:**

- ☒ Memorandum of Understanding (MOU) between the participating agencies. A copy of the previous year's MOU may be submitted if the participating agencies have remained the same. If any agencies have been removed or added to the task force, a new MOU must be submitted.

**Continuation projects (Excludes non-governmental agencies and multijurisdictional drug task forces):**

- ☐ Letters of continued commitment and collaboration efforts (no more than three) outlining joint collaboration efforts between agencies, OR provide copies of formal agreements between agencies and jurisdictions.

**UCR Reporting Requirements:**

If the implementing agency is a local law enforcement agency, it:

1. must report crime statistics to the State's Uniform Crime Reporting system
2. must be current in its reporting
3. or must have a plan to become current by January 1, 2025.

In order to keep a JAG award, the implementing agency must maintain current UCR stats through the award period (January 1, 2025, through December 31, 2025). Failure to maintain current UCR statistics will result in award sanctions and/or deobligation.

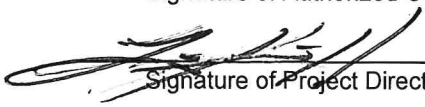
Please indicate **most recent crime statistics** submitted: July 2024  
month year

**AUTHORIZED SIGNATURES**

I certify that the project proposed in this application meets applicable requirements of the Justice Assistance Grant (JAG) Program and Lottery Program, if applicable, that all information presented is correct, and that the applicant will comply with the provisions of the subgrant program and all other applicable federal laws. By appropriate language incorporated in each grant, sub-grant, or other document under which funds are to be disbursed, the undersigned shall assure that the applicable conditions shown above apply to all recipients of these grant funds.

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Project Director

08/08/2024  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Fiscal Officer

\_\_\_\_\_  
Date

## **Training / Travel**

The Metro Area Narcotics Task Force (MANTF) is requesting a total of five thousand (20,000) dollars for travel and training in 2025.

MANTF is requesting an amount that is an increase of (5,000) dollars from that of last year. MANTF utilized its entire training and travel budget issued from the 2024 Lottery Grant. It is anticipated that MANTF will spend even more funds in the Training/Travel category in the year 2025. The reasons for this are multifaceted. First is the drastic increase due to inflation and other factors that have made travel and lodging fees exponentially higher than previous years. Meaning the cost of any travel or training is much more expensive than previous. Secondly MANTF has had to send Task Force Officers (TFOs) multiple times to source states like California and Arizona on the border for several cases. Due to the changing landscape of drug trafficking, MANTF has had to take a more active role in traveling to source states to dismantle the drug trade into the state of North Dakota. Travel to these source states for extended operations has proved to be very expensive. And lastly, MANTF has seen substantial growth in the past two years which therefore has put a larger strain and burden on the MANTF travel and training budget. Looking towards 2025, MANTF has added more personnel already with the possibility of adding even more in the near future. Only a few years ago MANTF was a large Task Force supporting 13 members from local, state, and federal agencies. As we move into 2025, MANTF now supports 23 members with an additional 4 more being added depending on if those agencies are able to fill those spots. These new members include 2 NDBCI Special Agents who operate on the Standing Rock and Fort Berthold Tribal Lands. MANTF is now the largest Task Force in the State of North Dakota.

It is difficult to provide details regarding specific schools, meetings, events, conferences, operations, trainings, etc. that MANTF will require funding for travel and training. The following is an anticipated list of functions MANTF may participate in:

- NDPOA Working Committee on Drugs and Gangs – meetings are held at various locations and times throughout North Dakota
- DEA Drug Basic School – two week school held at various locations and times throughout the year (two weeks per diem/travel/lodging)
- Clandestine Laboratory School – week long school held in Quantico, Virginia, or a regional location
- NDBCI Drug School – one week school held at various locations in the state (per diem/travel/lodging)
- Domestic Highway Enforcement Nationwide Conference – two day conference held in various locations throughout the nation
- National Heroin and Prescription Drug Abuse Conference – three day conference held in various locations throughout the nation

- 
- National Methamphetamine Conference – three day conference held in various locations throughout the nation
  - Minnesota / South Dakota State Drug Conferences – held in Nisswa, Minnesota and Deadwood, South Dakota
  - MOCIC Conference – held in various locations throughout the Midwest.



- **CovertTrack**

MANTF investigation techniques into drug trafficking organizations include the real time tracking of vehicles. This investigative technique primarily includes placing a small nondescript tracker on suspect vehicles. The tracking equipment allows MANTF personnel to monitor members of drug trafficking organizations in real time allowing for more efficient investigations.

- **CovertTrack 1yr Tracking Plan**

CovertTrack besides purchasing the trackers themselves requires a yearly air time tracking plan to monitor and record the trackers.

- **TFO Digital Storage Devices**

A typical MANTF case is composed of a wide variety of materials to include reports, warrants, photographs, videos, cell phone data, affidavits, and other case information. These cases can be quite large and extensive. Furthermore, the US Attorneys Office, local States Attorneys Offices, assisting law enforcement partners, and other agencies are moving towards total paperless data sharing. Therefore, MANTF members are constantly utilizing digital storage devices to transfer and give case information to the necessary person or agency.

- **MANTF Surveillance Van Insurance**

MANTF utilizes a covert surveillance van to conduct surveillance and MANTF targets. Furthermore, MANTF allows other agencies to utilize the van if it needed to further their cases as well. Currently MANTF uses Asset Forfeiture Funds to cover the insurance of the vehicle due to the fact that it is a shared vehicle not operated by one sole agency TFO.

- **MANTF Yearly Office Cleaning**

MANTF during the course of operations usually houses on average about fifteen to twenty law enforcement personnel at its office. These individuals spend most of their time in the field or in their offices working on drug cases or other casework. Furthermore, they share community spaces to eat lunch, process evidence, or attend meetings. Often, due to the time constraints placed on these personnel, keeping, and maintaining the MANTF office can fall behind. MANTF invests in a cleaning company to assist in keeping the MANTF office building clean and upkept once a week.

## **Project Narrative**

### **Project Description**

The Metro Area Narcotics Task Force (MANTF) is a multi-agency and multi-jurisdictional task force that began operations in 1986 in the Burleigh and Morton County area. The member agencies at that time were the North Dakota Bureau of Criminal Investigation (NDBCI), the Bismarck Police Department (BPD), the Mandan Police Department (MPD), the Burleigh County Sheriff's Department (BCSD), and the Morton County Sheriff's Office (MCSO). MANTF's purpose was and is to identify, investigate, dismantle, and assist in the prosecution of individuals involved in the usage, possession, manufacture, trafficking/distribution, and sales of illegal or controlled substances. The full-time licensed sworn officers assigned to MANTF investigate a broad spectrum of crimes involving illegal/controlled substance. These officers from each of the participating agencies initiate and follow-up on cases that include prescription drug diversion and undercover purchases of illegal drugs from traffickers.

MANTF recognizes that illegal drug trafficking has no boundaries and because of this in 2011, the Bureau of Indian Affairs requested and was granted permission to assign multiple agents to MANTF in order to work collectively in investigating both Indian Country and non-Indian Country cases.

The Department of Homeland Security (HSI), the Drug Enforcement Administration (DEA), the Bureau of Indian Affairs (BIA) and the Bureau of Alcohol, Tobacco, Firearms, and Explosives (ATF) joined and have assigned multiple agents to MANTF.

MANTF in partnership with North Dakota National Guard Counter Drug Program, utilizes an intel analyst stationed at MANTF to assist MANTF personnel.

MANTF also retains a Special Assistant to the United States Attorney's Office (SAUSA) to prosecute drug crimes both federally and locally.

### **Current Efforts**

MANTF officers initiate and follow-up on cases by recruiting informants/cooperating individuals and receiving information from law enforcement and public sources. The use of cooperating individuals who are able to obtain illegal/controlled substance has provided MANTF the opportunity to expand investigations into numerous drug trafficking organizations who operate locally, statewide, nationwide, and even on an international level.

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## **Collaboration with Other Agencies**

MANTF is under the direction of an Executive Board which is made up of the Chief Executive Officers from each of the participating agencies. A MANTF Coordinator is appointed by the Executive Board to oversee the activities of the task force such as assigning cases, maintaining statistical data, wiring grants, supervising personnel, and overseeing the day to day functionality of MANTF. The MANTF Coordinator reports to the Executive Board.

MANTF is guided by a Memorandum of Understanding and a Policy/Standard Operating Procedures Manual.

MANTF officers attend and participate in a weekly information sharing meeting with other criminal justice agencies and personnel.

MANTF provides training and education statewide to a verity of different resources, to include the Law Enforcement Training Academy.

MANTF assists local agencies with drug investigations and also travels statewide to assist other drug task forces with operations/investigations.

## **Continued Funding**

The success of the task force model working illegal drug investigations and dismantling drug trafficking organizations has been proven to be an effective strategy. Participating agencies recognize the benefits of pooling resources and having specially trained and specifically dedicated personnel to investigate illegal drug activity. The governing boards of the participating agencies realize the need and have been very supportive of the efforts of MANTF and it is anticipated their continued support will be in the way of funding when grant funding is no longer available.

## **Project Goal, Objectives, and Performance Measures**

### **Project Goals**

1. Control and/or reduce the possession, distribution and manufacturing of illegal drugs in the jurisdictions served by MANTF.
2. Identify and investigate subjects suspected of violating controlled substance statutes.
3. Assist and cooperate with other agencies in investigations.
4. Respond to public concerns involving illegal drug activity.
5. Identify, disrupt, and dismantle drug trafficking organizations.

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**Objectives**

1. Increase apprehension of individuals violating controlled substance laws by 5%.
2. Increase obtaining, documenting, and following up on intelligence reports by 5%.
3. Coordinate investigative resources by communicating and planning joint investigations with other agencies to avoid duplications of efforts.
4. Identify areas regarded by public sources as being involved in illegal drug activity.

**Performance Measures**

1. Number of arrests.
2. Number of investigations initiated.
3. Quantity of illegal drugs purchased/seized.
4. Number of public awareness/education presentations.



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 14, 2024  
**SUBMITTING DEPARTMENT:** Building Inspections  
**DEPARTMENT DIRECTOR:** Jordan Singer  
**PRESENTER:** Jordan Singer, Building Official  
**SUBJECT:** To consider appointing Brittney Anderson to the Mandan Architectural Review Commission

---

#### **STATEMENT/PURPOSE:**

To consider appointing Brittney Anderson to the Mandan Architectural Review Commission

#### **BACKGROUND/ALTERNATIVES:**

The Mandan Architectural Review Commission is responsible for reviewing site and building plans involving new construction, remodeling, and alteration of commercial properties to assure such projects provide a desirable environment for their occupants. They check compatibility with the character of adjacent and surrounding developments, and are aesthetically of good composition, materials, textures, and colors.

There is a current open position that was previously held by Jason Angel till Dec 31, 2026. Brittney will fill this vacancy till the end of that term.

#### **ATTACHMENTS:**

1. Anderson Letter of Interest

#### **FISCAL IMPACT:**

none

#### **STAFF IMPACT:**

none

#### **LEGAL REVIEW:**

sent

**RECOMMENDATION:**

The Mandan Architectural Review Commission recommends appointing Brittney Anderson to fill the vacant seat till December 31, 2026

**SUGGESTED MOTION:**

I move to appoint Brittney Anderson to fill the vacant seat on the Mandan Architectural Review Commission until Dec. 31, 2026

### Anderson Letter of Interest

Please indicate which board/committee(s) you are interested in:

Architectural Review Commission

Name (First & Last):: BRITTNEY ANDERSON

Are you currently a resident of the City of Mandan?

No, but I own or work at a business in Mandan Business or Organization Name (if applicable):  
STARION BANK

Functional Title or Role: BUSINESS CASH MANAGEMENT OFFICER

Please explain your reasons for wanting to serve on this board, commission, or committee:

I would like to serve on this board because I would love to see the projects and things that this board does to help improve the community.

Please give a brief explanation of the skills or qualification you could bring to this board, commission or committee::

I have experience in the finance area, business cash management, banking, working with the public, critical thinker.



August 14, 2024

Honorable Mayor James Froelich  
Mandan City Commissioners  
Mandan City Hall  
205 2<sup>nd</sup> Avenue NW  
Mandan, ND 58554

Dear Mayor Froelich and Mandan City Commissioners:

Dakota Media Access (DMA) requests Mandan resident, Renee Murrish, be considered for appointment to serve on the DMA Board of Directors for a four-year term expiring July 1, 2028.

Current DMA Board Members include:

**Mandan Appointees (terms expire):**

**Jason Arenz**, BNC Bank (2025)

**Craig Sjoberg**, Mandan City Commission Liaison

**Bismarck Appointees (terms expire):**

**Jack McDonald**, Wheeler Wolf Attorneys (2026)

**Rebecca Thiem**, (2026)

**Robin Thorstenson**, ND Dept. of Human Services (2028)

**Rick Collin**, (2028)

**Dave Diebel**, D&N Cinematics (2027)

**Greg Wheeler**, Basin Electric (2027)

**Steve Koontz**, Bismarck Public Schools (2027)

**Mark Connelly**, Bismarck City Commission Liaison

Thank you for your consideration.

Sincerely,

Jack McDonald, President  
Mary Van Sickle, Executive Director

1101 E Front Avenue, Bismarck, ND 58504  
701-258-8767      [info@freetv.org](mailto:info@freetv.org)      [FreeTV.org](http://FreeTV.org)





## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 14, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** Appointment to Dakota Media Access (DMA) Board of Directors

---

#### **STATEMENT/PURPOSE:**

To consider the appointment of a Mandan resident to the DMA Board of Directors

#### **BACKGROUND/ALTERNATIVES:**

The cities of Mandan and Bismarck are represented on the DMA Board of Directors. Renee Murrish has expressed interest in serving on the DMA Board as a resident of Mandan. The DMA Board is recommending her appointment to the Board.

#### **ATTACHMENTS:**

1. DMA Board Member Mandan Appointee

#### **FISCAL IMPACT:**

n/a

#### **STAFF IMPACT:**

n/a

#### **LEGAL REVIEW:**

n/a

#### **RECOMMENDATION:**

The DMA Board of Directors is recommending the appointment of Renee Murrish to the DMA Board of Directors.

#### **SUGGESTED MOTION:**

I move to appoint Renee Murrish to the DMA Board of Directors.





August 14, 2024

Honorable Mayor James Froelich  
Mandan City Commissioners  
Mandan City Hall  
205 2<sup>nd</sup> Avenue NW  
Mandan, ND 58554

Dear Mayor Froelich and Mandan City Commissioners:

Dakota Media Access (DMA) requests Mandan resident, Renee Murrish, be considered for appointment to serve on the DMA Board of Directors for a four-year term expiring July 1, 2028.

Current DMA Board Members include:

**Mandan Appointees (terms expire):**

**Jason Arenz**, BNC Bank (2025)

**Craig Sjoberg**, Mandan City Commission Liaison

**Bismarck Appointees (terms expire):**

**Jack McDonald**, Wheeler Wolf Attorneys (2026)

**Rebecca Thiem**, (2026)

**Robin Thorstenson**, ND Dept. of Human Services (2028)

**Rick Collin**, (2028)

**Dave Diebel**, D&N Cinematics (2027)

**Greg Wheeler**, Basin Electric (2027)

**Steve Koontz**, Bismarck Public Schools (2027)

**Mark Connelly**, Bismarck City Commission Liaison

Thank you for your consideration.

Sincerely,

Jack McDonald, President  
Mary Van Sickle, Executive Director

1101 E Front Avenue, Bismarck, ND 58504  
701-258-8767      [info@freetv.org](mailto:info@freetv.org)      [FreeTV.org](http://FreeTV.org)



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 14, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** Appointment of Communication Specialist to Dakota Media Access (DMA) Board of Directors

---

#### **STATEMENT/PURPOSE:**

To consider the appointment of Communication Specialist as an ex officio, non-voting advisor to the DMA Board of Directors.

#### **BACKGROUND/ALTERNATIVES:**

At the August 13<sup>th</sup> DMA Board of Directors meeting, a motion was made, seconded, and approved to recommend the Public Information Officers of Bismarck & Mandan be invited and included in meetings as ex officio, non-voting advisors to the DMA Board of Directors.

The Public Information Officer of the City of Bismarck and the Communications Specialist would provide valuable input and also receive information on DMA activities which would benefit both communities.

#### **ATTACHMENTS:**

1. Bismarck and Mandan PIO representation as advisors to the Dakota Media Access Board of Directors

#### **FISCAL IMPACT:**

n/a

#### **STAFF IMPACT:**

Minimal staff time.

#### **LEGAL REVIEW:**

n/a

**RECOMMENDATION:**

I recommend the appointment of Communications Specialist, Kari Schmidt as an ex officio, non-voting advisor to the DMA Board of Directors.

**SUGGESTED MOTION:**

I move to appoint Communications Specialist, Kari Schmidt as an ex officio, non-voting advisor to the DMA Board of Directors.

**From:** [Mary Van Sickle](#)  
**To:** [Jim Neubauer](#); [Jason Tomanek](#)  
**Subject:** Bismarck and Mandan PIO representation as advisors to the Dakota Media Access Board of Directors  
**Date:** Wednesday, August 14, 2024 3:43:14 PM  
**Attachments:** [Outlook-4ue0mxso.png](#)

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Jim, Jason,

At the August 13<sup>th</sup> DMA Board of Directors meeting, a motion was made, seconded, and approved to recommend the Public Information Officers of Bismarck & Mandan be invited and included in meetings as ex officio, non-voting advisors to the DMA Board of Directors.

Please let me know if you need any additional information. If not, I can make contact with Kalen and Kari and provide schedules, financials, etc.

Mary Van Sickle  
Executive Director  
701.258.8767





## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 14, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** Creation of an Information Technology position

---

#### **STATEMENT/PURPOSE:**

To consider the creation of an information technology position.

#### **BACKGROUND/ALTERNATIVES:**

Presently, the City of Mandan does not have a dedicated position dealing with information technology. Police Captain Chris Miller has served as our information technology person for many years. With the reorganization of the Mandan Police Department command staff, Lieutenant Miller was promoted to Captain with additional duties which left minimal time to deal with technology issues.

Captain Miller and I have explored the possibility of contracting out these services, and have come to the conclusion that it would be more efficient to add a position to our staff that would deal with the cities' information technology needs. With well over 100 full-time employees and the ever-increasing needs and reliance on technological devices, now is the time to address this need.

This position would not only be responsible for desktop installation, but the equipment that is utilized in police, fire and public works vehicles.

Captain Miller, Human Resources Director Cullen and now Berger have been involved in the preparation of a job description along with having Condrey & Associates review and properly grade the position.

Initially, this position would have shared supervision by Captain Miller and Administrator Neubauer.

This position was included in the preliminary 2025 budget. We are asking, and adequate funds currently exist, to fund this position from September 1 through Dec. 31,

2024.

If the commission were to approve this request, we would immediately begin advertising for the position.

**ATTACHMENTS:**

1. CIS-1\_ComputerInformationSystemsManager\_2024-04-11

**FISCAL IMPACT:**

2024 Rates at a Grade 21, salary and benefits for 4 months (Sept - Dec) = \$38,000  
General Fund Budget Amendment

**STAFF IMPACT:**

Additional full-time position.

**LEGAL REVIEW:**

n/a

**RECOMMENDATION:**

I recommend creating the Computer & Information Systems Manager position and providing funding from the General fund of \$38,000, for the remainder of 2024.

**SUGGESTED MOTION:**

I move to create the Computer & Information Systems Manager position and provide funding from the General fund of \$38,000, for the remainder of 2024.



City of Mandan  
Computer and Information Systems Manager CIS/1

---

|                               |                        |
|-------------------------------|------------------------|
| Revised:                      | Condrey 2024           |
| Department:                   | Information Technology |
| Reports to:                   | City Administrator     |
| Grade                         | 21                     |
| Dept. Manager Signature:      |                        |
| Human Resources Signature:    |                        |
| Finance Director Signature:   |                        |
| City Administrator Signature: |                        |
| Employee Signature:           |                        |

#### JOB SUMMARY

The Computer and Information Systems (CIS) Manager will plan, coordinate, and implement computer-related activities by determining the technology needs of the City of Mandan and make hardware- and software-related decisions to meet those needs.

#### MAJOR DUTIES

- Collaborates with users, vendors, technicians, and managers to understand and assess computing and system needs and requirements.
- Communicates the goals, policies, and procedures of the City of Mandan, develops plans to implement these needs.
- Evaluates current and future technology use and needs of the City of Mandan and recommends software and hardware improvements.
- Responsible for backup, security, and user help systems.
- Remains current on advances in technology.
- Provides technical support to users.
- Prepares and delivers operational or project progress reports.
- Implements and oversees operational budget and expenditures.
- Develops budget information for city information technology needs.
- Purchases, installs, maintains, troubleshoots, repairs, and updates IT hardware including desktops, servers, switches, printers, and scanners.
- Manages user accounts for network access, data storage, and email.
- Manages city and department internet domain addresses.

City of Mandan  
Computer and Information Systems Manager CIS/1

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- Maintains inventory of computers, monitors, cabling, software, and other hardware.
- Manages the city phone network.
- Manages the city's off-site backup software.
- Performs other related duties as assigned.

#### KNOWLEDGE REQUIRED BY THE POSITION

- Knowledge of the principles and practices of IT programs, policies, activities, and procedures.
- Knowledge of budget preparation and management principles.
- Knowledge of computers and job-related software programs.
- Skill in planning, organizing, and implementing IT programs and activities.
- Skill in understanding and interpreting policies and procedures.
- Skill in the maintenance of network, software, and server needs.
- Skill in oral and written communication.
- Ability to explain technical problems and implement solutions to those without technological training.

#### SUPERVISORY CONTROLS

The City Administrator assigns work in terms of general instruction. The supervisor spot-checks completed work for compliance with procedures and the nature and propriety of the final results.

#### GUIDELINES

Guidelines include the information technology policies and procedures, state and federal laws, and other city policies and procedures. These guidelines require judgment, selection, and interpretation in application.

#### COMPLEXITY/SCOPE OF WORK

- The work consists of varied administrative and technical duties. The variety of functions to be managed and sensitive timelines contributes to the complexity of the position.

City of Mandan  
Computer and Information Systems Manager CIS/1

---

- The purpose of this position is to perform a variety of information technology management duties. Successful performance contributes to the efficiency and effectiveness of department operations.

#### CONTACTS

- Contacts are typically with department directors, co-workers, other city employees, vendors and third-party administrators, representatives of other organizations, and members of the public.
- Contacts are typically to provide services, to give or exchange information, to motivate people, or to resolve problems.

#### PHYSICAL DEMANDS/ WORK ENVIRONMENT

- The work is typically performed while sitting at a desk or table or while intermittently sitting, standing, or stooping. The employee occasionally lifts light objects.
- The work is typically performed in an office.

#### SUPERVISORY AND MANAGEMENT RESPONSIBILITY

None.

#### MINIMUM QUALIFICATIONS

- Knowledge and level of competency commonly associated with the completion of a baccalaureate degree in a course of study of computer science, or related field is preferred.
- Experience sufficient in computer science, software updates, and server infrastructure planning, usually interpreted to require three to five years of related experience is preferred.



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 15, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** MWWS Service at 1316 8th Ave SW

---

#### **STATEMENT/PURPOSE:**

To consider granting Missouri West Water Systems (MWWS) permission to serve 1316 8th Ave SW.

#### **BACKGROUND/ALTERNATIVES:**

The City of Mandan and MWWS entered into a contract in May 1997 which defined properties and boundaries where MWWS would serve and the City of Mandan would serve. A portion of that agreement defines the areas of service. A portion of the agreement reads "... if MWWS receives a request to provide service to any new user or are located in the one-mile jurisdictional area around Mandan, MWWS will promptly notify Mandan and MWWS's lienholder of such a request. Within sixty calendar days of receipt of such notice, Mandan may elect to prohibit MWWS from providing water service to such user or area. If Mandan does not so elect, MWWS may provide such a service.

The property owner would like to construct a house on the lot and requests water service be provided.

The property requesting service is within the one mile area and is adjacent to the City of Mandan corporate limits.

As the property lies adjacent to corporate limites, we have suggested the owner annex the property and, in turn, we would grant permission to MWWS to serve the aforementioned lot and, in turn, we will work out the billing situation between MWWS and City of Mandan.

#### **ATTACHMENTS:**

1. 1316 8th Ave SW - Request to Serve

**FISCAL IMPACT:**

Unknown at this time

**STAFF IMPACT:**

minimal

**LEGAL REVIEW:**

Submitted to City Attorney Oster for review

**RECOMMENDATION:**

I recommend granting permission to Missouri West Water Systems to serve the property known as 1316 8th Ave SW, provided the property is annexed to the City of Mandan. In turn, the City and MWWS will work out the billing details for water.

**SUGGESTED MOTION:**

I move to grant permission to Missouri West Water Systems to serve the property known as 1316 8th Ave SW, provided the property is annexed to the City of Mandan. In turn, the City and MWWS will work out the billing details for water.

**From:** [Karin Garvie](#)  
**To:** [Jim Neubauer](#)  
**Subject:** 1316 8th Ave SW - Request to Serve  
**Date:** Monday, July 15, 2024 11:55:32 AM  
**Importance:** High

---

Hi Jim,

Ken Zander is requesting rural water service at 1316 8<sup>th</sup> Ave S, Mandan. Parcel # 410319060. The legal description is Lot 4B, Block 1, Keidel Estates First Addition of the NW ¼ SW ¼ of Section 34, Twp 139N, Rng 81W.

Missouri West Water is currently serving 5 households in this area and is looking for approval to serve this location.

Thank You!

Karin Garvie, Manager  
Missouri West Water System  
701-663-8549 Phone

**Confidentiality Notice:** This electronic message, together with its attachments, if any, is intended to be viewed only by the individual to whom it is addressed. It may contain information that is privileged, confidential, and/or exempt from disclosure under applicable law. Any dissemination, distribution or copying of this communication is strictly prohibited without our prior permission. If you are not the intended recipient or if you have received this communication in error, please notify us immediately by return e-mail and delete the original message and any copies of it from your computer system.



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 13, 2024  
**SUBMITTING DEPARTMENT:** Finance  
**DEPARTMENT DIRECTOR:** Greg Welch  
**PRESENTER:** Greg Welch, Finance Director  
**SUBJECT:** Long-Term Financial Planning Policy

---

#### **STATEMENT/PURPOSE:**

To consider the approval of the update to the Long-Term Financial Planning Policy.

#### **BACKGROUND/ALTERNATIVES:**

According to the City's Budget Policies, department managers are to prepare a long-term plan for personnel and machinery & equipment or capital requests for the next three fiscal years. In addition, the engineering and public works departments are to prepare a long-term capital improvement plan for infrastructure projects and to recommend projects to the Board of City Commissioners. Also, department managers are to present their long-term plans at the City Commission's annual Budget Working Session or at the Budget & Finance Committee's annual internal budget hearings.

On January 5, 2021, the Board of City Commissioners approved the Long-Term Financial Planning Policy.

In order for the City to provide a more comprehensive strategy or road map for prioritizing and funding for future budget requests, the finance department is recommending the following updates to the City's Long-Term Financial Planning Policy:

- > Increase the length of the financial plan from three years into the future to five years into the future.
- > Department managers are to prepare and update a long-term plan for personnel and machinery & equipment or capital requests for the next five fiscal years.
- > The engineering and public works departments are to prepare and update a long-term capital improvement plan for infrastructure projects for the next five fiscal years.
- > Department managers are to present the long-term plans to the City Commission for review.
- > The City Commission is to determine the spending priorities for long-term financial planning purposes.

**ATTACHMENTS:**

1. Long-Term Financial Planning Policy

**FISCAL IMPACT:**

No fiscal impact to update the Long-Term Financial Planning Policy.

**STAFF IMPACT:**

Significant staff impact may be required for certain departments to annually prepare and update the long-term plans and for presenting the long-term plans to the City Commission. The finance department staff is also impacted by computing the ongoing cash flow projections for major funds and by providing various funding options to address the budget requests from department managers and the spending priorities set forth by the City Commission.

**LEGAL REVIEW:**

Submitted to the City Attorney for review.

**RECOMMENDATION:**

To approve the update to the Long-Term Financial Planning Policy.

**SUGGESTED MOTION:**

I move to approve the update to the Long-Term Financial Planning Policy.



# LONG-TERM FINANCIAL PLANNING POLICY

## Why a Policy on Long-Term Financial Planning is important

The City of Mandan adopts an annual budget. A balanced budget is critical, but it only looks one year into the future. A thriving community requires a long-term perspective because financial challenges are often created over many years and can take more than a year to solve. A long-term financial plan and budget allows the City to remain mindful of its long-term financial health.

## Length of the Financial Plan

The City will forecast operating revenues, expenses, and financial position at least **three five** years into the future. The length of the financial plan will be longer if **three five** years is not enough to address issues that are a threat to the financial health of the City.

## Frequency of Financial Planning

The long-term financial plan will be updated annually before the budget process to inform decision-makers of the City's financial position going into budget discussions.

## Scope of the Financial Plan

The long-term financial plan will include all major funds of the City. The financial plan will coordinate the estimated fund balance projections with the City's other long-term plans for personnel, equipment replacement, and infrastructure projects. Department managers are to prepare and update a long-term plan for personnel and machinery & equipment or capital requests for the next five fiscal years. The engineering and public works departments are to prepare and update a long-term capital improvement plan for infrastructure projects for the next five fiscal years. Department managers are to present the long-term plans to the City Commission for review and for the City Commission to determine the spending priorities for long-term financial planning purposes.

## Assumptions and Analysis

The City's finance department will prepare a forecast that is based on assumptions that best reflect the status quo condition of the City. The forecast will not assume any major changes in policy where such change is speculative. Other assumptions behind the forecast will be made clear. This includes assumed growth rates in operating revenues and expenses. It also includes assumptions about forces that impact operating revenues and expenses. Examples might include changes in population, property values, taxable sales and purchases, federal & state grants and shared revenues, salaries and benefits, O&M costs, etc.

## Long-Term Financial Plan

The goal of the City is for the financial plan to be balanced over the time period of the forecast. Therefore, the City will maintain a long-term financial plan that describes how the City will achieve and/or maintain balance over a multiyear period.



## City Commission

### Agenda Documentation

**MEETING DATE:** August 20, 2024  
**PREPARATION DATE:** August 12, 2024  
**SUBMITTING DEPARTMENT:** Administration  
**DEPARTMENT DIRECTOR:** Jim Neubauer  
**PRESENTER:** Jim Neubauer, City Administrator  
**SUBJECT:** Initiated Measure adding 1/2 cent sales tax

---

#### **STATEMENT/PURPOSE:**

To consider the appropriate language to be added to the Municipal Code of Ordinances as a result of the passing on June 11, 2024 of the initiated measure adding 1/2 cent sales tax for public transportation, police and fire buildings and vehicles.

#### **BACKGROUND/ALTERNATIVES:**

A group of citizens submitted petitions asking residents to vote on an additional 1/2 cent sales tax. The measure was placed on the June 11, 2024, ballot and was passed.

The proceeds of this one-half cent city sales, use, and gross receipts tax would be dedicated to public safety and public transportation needs. Three tenths of a cent would be dedicated to public safety specifically, costs associated with the building of police and fire stations, the acquisition of police and fire emergency vehicles, and city hall accessibility needs. Two tenths of a cent would be dedicated to public transportation needs, specifically costs associated with providing reliable service for disabled, elderly, and socio-economically challenged residents.

#### **ATTACHMENTS:**

1. Ordinance 1453 - Sales Tax half cent

#### **FISCAL IMPACT:**

The collection of the additional sales tax would begin Jan. 1, 2025 and is estimated to add \$1.8 additional revenue per year.

3/5ths equates to \$1,080,000 for Police and Fire buildings and vehicles.

2/5ths equates to \$720,000 for public transportation.

#### **STAFF IMPACT:**

n/a

**LEGAL REVIEW:**

City Attorney Oster, in conjunction with the North Dakota Office of State Tax Commissioner, has drafted the attached ordinance.

**RECOMMENDATION:**

I recommend approval of Ordinance 1453.

**SUGGESTED MOTION:**

i move to approve Ordinance 1453.

## ORDINANCE NO. 1453

### AN ORDINANCE TO AMEND AND RE-ENACT ARTICLE 2 OF THE MANDAN CODE OF ORDINANCES, RELATING TO CITY SALES, USE, AND GROSS RECEIPTS TAX UNDER THE HOME RULE CHARTER OF THE CITY OF MANDAN.

BE IT ORDAINED BY THE CITY COMMISSION OF THE CITY OF MANDAN, MORTON COUNTY, NORTH DAKOTA:

#### ARTICLE 2. - SALES, USE, AND GROSS RECEIPTS TAX

##### Sec. 22-2-1. – Definitions.

All terms defined in chapters 40-05.1, 57-39.2, 57-39.4, 57-39.5, 57-39.6, and 57-40.2 of the North Dakota Century Code (N.D.C.C.), are adopted by reference. All references to the N.D.C.C. include amendments adopted by the North Dakota Legislative Assembly.

##### Sec. 22-2-2. - Sales Tax Imposed.

- (a) There is imposed a tax of one percent upon the gross receipts of retailers from all sales at retail, including the leasing and renting of tangible personal property, within the corporate limits of the city, of those items subject to taxation under N.D.C.C. ch. 57-39.2.
- (b) There is imposed an additional tax of three-fourths percent upon the gross receipts of retailers from all sales at retail, including the leasing and renting of tangible personal property, within the corporate limits of the city, of those items subject to taxation under N.D.C.C. ch. 57-39.2, until such time as bonds for the construction of certain Park District improvements, subject of a June 9, 2015 special election are paid in full, at which time the additional tax of three-fourths percent shall terminate.
- (c) There is imposed an additional retail sales, use, and gross receipts tax of no more than one-half percent from and after January 1, 2025 of those gross receipts taxed pursuant to Chapters 57-39.2, 57-39.4, 57-40.2, 57-39.5, and 57-39.6, N.D.C.C.
  - 1. The proceeds of this one-half cent city sales, use, and gross receipts tax shall be dedicated only to public safety and public transportation needs in the following proportions:
    - a. Three-tenths of a cent dedicated to public safety: specifically, costs associated with the building of police and fire stations, the acquisition of police and fire emergency vehicles, and city hall accessibility needs.
    - b. Two-tenths of a cent dedicated to public transportation needs: specifically, costs associated with providing reliable service for disabled, elderly, and socio-economically challenged residents.

**Sec. 22-2-3. – Sales and gross receipts tax on alcoholic beverages and tobacco products.**

Notwithstanding any other provision of law, the sales taxes imposed by this article apply to the gross receipts of retailers from all sales at retail of alcoholic beverages as defined in N.D.C.C. § 5-01-01, whether mixed or unmixed at the time of sale or thereafter, and whether sold for consumption on the premises or through off-sale outlets for consumption off the premises, and cigarettes, cigars and other tobacco products including electronic cigarettes, provided that gross receipts from the sale thereof shall mean and include any other taxes imposed on such merchandise or its use or on the retail or other sale thereof. Notwithstanding any other provision of law, there is imposed a tax of one percent on the gross receipts of retailers from all sales at retail of alcoholic beverages subject to tax under N.D.C.C. ch. 57-39.2, which is in lieu of and not in addition to any other tax imposed by this chapter.

**Sec. 22-2-4. - Sales tax on sales through vending machines.**

Gross receipts from the sale of tangible personal property costing sixteen cents or more sold through a coin-operated vending machine shall be subject to the sales tax imposed by this article, and gross receipts from the sale of tangible personal property costing fifteen cents or less sold through a coin-operated vending machine shall be specifically exempted from the provisions of this chapter.

**Sec. 22-2-5. - Use tax on alcoholic beverages and tobacco products.**

Notwithstanding any other provision of law, the use taxes imposed by this article apply to the storage, use or consumption in this city of alcoholic beverages as defined in N.D.C.C. § 5-01-01, whether mixed or unmixed at the time of sale or thereafter, and whether sold for consumption on the premises or through off-sale outlets for consumption off the premises, and cigarettes, cigars and other tobacco products including electronic cigarettes, provided that gross receipts from the sale thereof shall mean and include any other taxes imposed on such merchandise or its use or on the retail or other sale thereof. Notwithstanding any other provision of law, there is imposed a tax of one percent on the storage, use or consumption in this city of alcoholic beverages, which is in lieu of and not in addition to any other tax imposed by this chapter.

**Section 22-2-6. - Use Tax Imposed.**

Subject to the provisions of N.D.C.C. § 40-05.1-06, and except as otherwise provided in this article, or the sales and use tax laws of the State of North Dakota, an excise tax is imposed upon the storage, use, or consumption within the corporate limits of this city of tangible personal property purchased at retail for storage, use, or consumption in this city, at the rate of one percent of the fair market value of such property at the time it was brought into this city.

With respect to the purchase price of tangible personal property used by a contractor or subcontractor to fulfill a contract as defined in N.D.C.C. § 57-40.2-03.3, the tax imposed by this section applies only to bids submitted on or after the effective date of this article.

**Sec. 22-2-7. - Dedication of tax proceeds.**

- (a) Except as otherwise provided, all revenues raised and collected under this article, less administrative expenses, shall be dedicated only to reducing property taxes and municipal debt, street, water and sewer system improvements, and for job and economic development. All revenues shall be maintained in a fund, to be known as the sales tax fund, separate and apart from all other funds, except as provided by this article.
- (b) The board of city commissioners shall determine the amount by which property tax levies will be reduced each year prior to adoption of the city's budget. An amount equivalent to the estimated property tax revenue lost due to the property tax reduction may thereafter be transferred from the sales tax fund to the general fund.
- (c) Additional funds may be transferred to appropriate debt reduction, street, water and sewer system improvements, job and economic development funds, and as directed by the Board.
- (d) Remaining revenues and any income therefrom shall accumulate in the sales tax fund until expended by the board as permitted by this article.

**Sec. 22-2-8. – Maximum tax imposed.**

No tax in excess of Fifty-Six Dollars and Twenty-Five Cents (\$56.25) shall be imposed upon any single transaction involving one or more item.

**Sec. 22-2-9. - Collection and administration.**

Where not in conflict with the provisions of this article, the provisions of N.D.C.C. chapters 40-05.1, 57-39.2, 57-39.4, 57-39.5, 57-39.6, and 57-40.2, and all administrative rules adopted by the Tax Commissioner, pertaining to the collection and administration of the retail sales, use, and gross receipts tax, including provisions for liability, refund, penalty, interest or credit, govern the administration by the North Dakota Office of State Tax Commissioner (hereinafter "Tax Commissioner") of the taxes imposed by this article.

**Sec. 22-2-10. - Contract with Tax Commissioner.**

The Mandan City Auditor is hereby authorized to contract with the Tax Commissioner for administration and collection of taxes imposed by this article. The City Auditor has all powers granted to the Tax Commissioner and in the absence of a valid contract with the Tax Commissioner or failure of the Tax Commissioner to perform the delegated duties, shall perform these duties in place of the Tax Commissioner.

**Sec. 22-2-11. - Exemptions.**

This article does not provide for any additional exemptions from imposition and computation of the city sales and use tax other than those provided by state law.

By: \_\_\_\_\_  
James Froelich, President, Board of  
City Commissioners

Attest:

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James Neubauer, City Administrator

First Consideration: August 6, 2024  
Second Consideration: August 20, 2024

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Effective Date: January 1, 2025