

BIDDER ACKNOWLEDGEMENT

Submit Bids To: PROCUREMENT SERVICES
3301 Quantum Blvd.
Suite 101
Boynton Beach, Florida 33426
Telephone: (561) 742-6310

Bid Title: **ANNUAL SUPPLY OF PIPE FITTINGS AND ACCESSORIES**

Bid Number: **037-1412-18/MFD**

Bids Due: **SEPTEMBER 12, 2018, NO LATER THAN 10:00 A.M. (LOCAL TIME)**

Bids will be opened in Procurement Services unless specified otherwise. Bid receiving date and time is scheduled for **SEPTEMBER 12, 2018, no later than 10:00 A.M. (local time)** and may not be withdrawn within ninety (90) days after such date and time.

All awards made as a result of this bid shall conform to applicable sections of the charter and codes of the City.

Name of Vendor: Fortiline, Inc.

Federal I.D. Number: 57-0819190

A Corporation of the State of: SC

Area Code: 704 Telephone Number: 788-9859

Area Code: 704 FAX Number: 788-9896

Mailing Address: 7025 Northwinds Drive, NW

City/State/Zip: Concord, NC 28027

Vendor Mailing Date: 09/10/18

E-Mail Address: sheri.smith@fortiline.com


Authorized Signature

Sheri Smith
Name Typed

SPECIFICATIONS
FOR THE
"ANNUAL SUPPLY OF PIPE FITTINGS AND ACCESSORIES"
BID # 037-1412-18/MFD

Please place an (x) on the blank line next to each item if a specification is met. If exception is taken (alternatives), bidder must explain using a separate sheet of paper. **Bidder must submit specifications "check-off" sheets with the proposal sheet in order for a bid to be considered.**

- X A) All Bid prices are F.O.B. Boynton Beach, Warehouse, 222 N.E. 9TH Avenue, Boynton Beach, Florida – AND/OR – Warehouse 2, located at 124 E. Woolbright Road, Boynton Beach, Florida.
- X B) Bidder guarantees all prices for **one (1) year** from date of award.
- X C) Bidder should state the model numbers of all items and accessories specified in this proposal.
- X D) **Bidder agrees to guarantee all deliveries, throughout the duration of the Contract. All orders to be delivered within fifteen (15) days from date of the purchase order. Back orders exceeding the fifteen (15) day period are subject to cancellation.**
- X E) Bidder agrees that all quantities indicated in the proposal represent approximate needs for the one (1) year period and that there is no guarantee made or implied that the City will fulfill such purchases.
- X F) Bidder is aware that award is anticipated on an item by item basis; however, award in lots to multiple vendors may be considered.
- X G) Bidder agrees that the percent discount submitted applies to the Commodity Bid – *Pipe Fittings and Accessories*. In this instance, Pipe Fittings and Accessories encompass any and all similar and like items as individually listed.
- X H) Bidder is aware that the City reserves the right to purchase on the open market should lower market prices prevail at which time the successful bidder shall have the option of meeting the lower price or relieving the City of an obligation previously understood.
- X I) **Bidder agrees that all items proposed are DOMESTIC manufactured.**
- X J) Bidder agrees that all pipe fittings and accessories listed on the proposal form must be of domestic manufacturer and meet all criteria set forth by the A.W.W.A., A.S.T.M. and the trade industry.

- X K) Bidder agrees to designate personnel for after hour emergencies. The personnel must be available 24 hours per day / 7 days per week throughout the duration of this contract.
- X L) Bidder has a warehouse located in Miami-Dade, Broward, Palm Beach, Martin or St. Lucie Counties. The City will only accept bids with vendors that have a warehouse located in these areas.
- X M) Annual estimated expenditure for the estimated quantities of the supply of Pipe Fittings and Accessories is \$210,000.
- X N) BIDDER UNDERSTANDS IF THE PROPOSAL SHEETS ARE NOT LEGIBLE, THE PROPOSAL WILL BE REJECTED. LEGIBILITY WILL BE DETERMINED AT THE SOLE DISCRETION OF THE CITY STAFF.

BIDDER MUST PROVIDE INFORMATION AS FOLLOWS:

1. Bidder shall make provisions for after hour emergencies as stated in letter K in the specifications. Vendor must provide contact name and phone number for the personnel designated for this responsibility.

Contact Name: DAVID GUTHART / JEFF BROUILLETTE

Contact Phone: 772-408-1960 / CELL 561-284-4474

2. Please provide an email address to submit the City's orders. The City may also order via fax and telephone. Email is the City's preferred method.

Email: David.Guthart@fortiline.com

3. For similar items not listed/covered, a percentage discount off of list price to be extended City-wide to all using Departments as stated in Letter G of the specifications:

10 %
DISCOUNT OFF OF LIST PRICE

4. Bids will ONLY be accepted from bidder(s) who have warehouse facilities located in Miami-Dade, Broward, Palm Beach, Martin or St. Lucie Counties as stated in letter L in the specifications.

Please state the location of your warehouse:

County: 6759 White Dr. Riviera Beach, FL in Palm Beach County

NON COLLUSION AFFIDAVIT OF PRIME BIDDER

State of _____)

County of _____)

Sheri Smith, being first duly sworn, deposes and says that:

- 1) He is Regional Bid Coordinator of Fortiline, Inc.,
(Title) (Name of Corporation or Firm)
the bidder that has submitted the attached bid;
- 2) He is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such bid;
- 3) Said bid is genuine and is not a collusive or sham bid;
- 4) Further, the said bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other bidder, firm or person to submit a collusive or sham bid in connection with the Contract for which the attached bid has been submitted or to refrain from bidding in connection with such Contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communications or conference with any other bidder, firm or person to fix the price or prices in the attached bid or of any other bidder, or to fix any overhead, profit or cost element of the bid price or the bid price of any other bidder, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the City of Boynton Beach or any person interested in the proposed Contract; and
- 5) The price or prices quoted in the attached bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the bidder or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

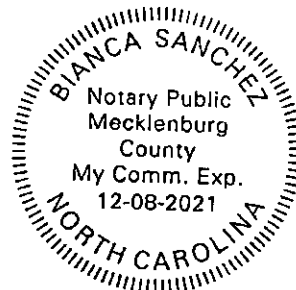
(Signed) Sheri Smith

Subscribed and sworn to before me

(Title) Regional Bid Coordinator

This 10 day of 09, 20 18

My commission expires _____



ANTI-KICKBACK AFFIDAVIT

STATE OF FLORIDA)
 : SS
COUNTY OF PALM BEACH)

I, the undersigned hereby duly sworn, depose and say that no portion of the sum herein bid will be paid to any employees of the City of Boynton Beach as a commission, kickback, reward of gift, directly or indirectly by me or any member of my firm or by an officer of the corporation.

By: Sheri Smith
NAME - SIGNATURE

Sworn and subscribed before me
this 10 day of September, 2018

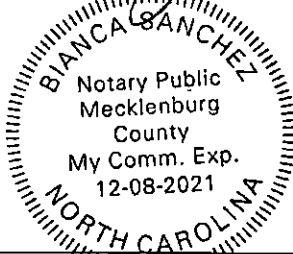
Printed Information:

Sheri Smith
NAME

Regional Bid Coordinator
TITLE

Fortiline, Inc.
COMPANY

Bianca Sanchez
NOTARY PUBLIC, State of Florida
at Large



"OFFICIAL NOTARY SEAL" STAMP

CONFIRMATION OF MINORITY OWNED BUSINESS

This requested form to be made a part of our files for future use and information. Please fill out and indicate in the appropriate spaces provided which category best describes your company. Return this form with your bid proposal sheet making it an official part of your bid response.

Is your company a Minority Owned Business ?

<u> Yes </u>	<u> X </u>
Yes	No

If Yes, please indicate by an "X" in the appropriate box:

- () AMERICAN INDIAN
- () ASIAN
- () BLACK
- () HISPANIC
- () WOMEN
- () OTHER _____
(specify)
- () NOT APPLICABLE

Do you possess a Certification qualifying your business as a Minority Owned Business?

YES NO X

If YES, Name the Organization from which this certification was obtained and date:

Issuing Organization for Certification

Date of Certification

Shui Smith

CONFIRMATION OF DRUG-FREE WORKPLACE

Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the City of Boynton Beach or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or *nolo contendere* to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by, any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.



Vendor's Signature

PALM BEACH COUNTY INSPECTOR GENERAL

ACKNOWLEDGMENT

The Contractor is aware that the Inspector General of Palm Beach County has the authority to investigate and audit matters relating to the negotiation and performance of this contract, and in furtherance thereof may demand and obtain records and testimony from the Contractor and its subcontractors and lower tier subcontractors.

The contractor understands and agrees that in addition to all other remedies and consequences provided by law, the failure of the Contractor or its subcontractors or lower tier subcontractors to fully cooperate with the Inspector General when requested may be deemed by the municipality to be a material breach of this contract justifying its termination.

Fortiline, Inc.

CONTRACTOR NAME

By Shui Smith

Title: Regional Bid Coordinator

Date: 09/10/18



A D D E N D A

**CITY OF BOYNTON BEACH
FLORIDA**

BID TITLE: ANNUAL SUPPLY OF PIPE FITTINGS AND ACCESSORIES

BID NO: 037-1412-18/MFD

BIDDER: Fortiline, Inc. *Shel Smith*

DATE SUBMITTED: 09/10/18

We propose and agree, if this submittal is accepted, to contract with the City of Boynton Beach, in the Contract Form, to furnish all material, equipment, machinery, tools, apparatus, means of transportation, labor and services necessary to provide the commodities specified by the Contract documents.

Having examined the bid documents, we propose to provide the commodities in this bid according to the Contract documents and the following addenda which we have received:

ADDENDUM	DATE	ADDENDUM	DATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

☒ **NO ADDENDUM WAS RECEIVED IN CONNECTION WITH THIS BID**



CITY OF BOYNTON BEACH LOCAL BUSINESS STATUS CERTIFICATION

I, Jason Painter, the Vice President of Finance of
(Name of officer of company) (Title of officer of company)

Fortiline, Inc., located at 6759 White Dr, Riviera Beach, FL 33407
(Name of Corporation/Company) (Business Address)

certify that I am an authorized representative of the business and, on behalf of the Business, request that it be deemed to be a local business for purposes of the City of Boynton Beach Local Preference Program. Answering yes to Question 1 and Question 2 below will qualify the business as a local business. In support of this request, I certify the following to be true and correct:

NAME OF BUSINESS: <u>Fortiline, Inc.</u>			
1. Is the business located within the City limits of Boynton Beach, Florida?	<u>YES</u>	<u>NO</u> X	Number of Years: _____
2. Does the business have a business tax receipt issued in the current year?	<u>YES</u> X	<u>NO</u>	Business License Number: <u>201580311</u>
3. Is the business registered with the Florida Division of Corporations?	<u>YES</u> X	<u>NO</u>	

I understand that misrepresentation of any facts in connection with this request may be cause for removal from the certified local business list. I also agree that the business is required to notify the City in writing should it cease to qualify as a local business.

Print Name: Sheri Smith Signature: *Sheri Smith*

FOR PURCHASING USE ONLY

Business License Active: ☐ Year Established: ☐

Verified by: _____ Date: _____

ANNUAL BID FOR PIPE FITTINGS AND ACCESSORIES

ATTACHMENT "A" - PROPOSAL SHEETS

BID NO.: 037-1412-18/MFD

****SUBMITTED INFORMATION MUST BE LEGIBLE**** ALL MUST BE DOMESTIC AND LEAD FREE**** EPOXY COATED IS FUSION BONDED IN AND OUT****

VENDOR NAME: Fortiline, Inc.

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
1	658-082-00001	3/4" Poly Tubing (No Tracer Wire) 100 FOOT ROLLS / MUST BE ENDOPURE PE-4710 / ATSM D2737 / SDR9 / CTS	ROLL	PEP07541010009	10	\$ 23.00	100
2	658-082-00002	1" POLY TUBING (No Tracer Wire) 100 FOOT ROLLS / MUST BE ENDOPURE PE-4710 / ATSM D2737 / SDR9 / CTS	ROLL	PEP10041010009	20	\$ 36.00	100
3	658-082-00003	1 1/2" POLY TUBING (No Tracer Wire) 100 FOOT ROLLS / MUST BE ENDOPURE PE-4710 / ATSM D2737 / SDR9 / CTS	ROLL	PEP15041010009	10	\$ 77.00	100
4	670-066-00001	2" COMBINATION AIR VALVE ARI # D-020 / Flanged / Non Stainless Steel is ok MUST BE EQUIVALENT TO THE BRAND VAL-MATIC / OK TO BE NON-DOMESTIC	EACH	CRISPINUL21	6	\$ 632.50	1
5	670-068-00001	4" CLAY X 4" CLAY FERNCO ADAPTORS # MMR0144 / MUST BE MISSION OR EQUAL	EACH	1001-44	10	\$ 4.10	1
6	670-068-00002	4" CLAY X 4" DIP/C-900 FERNCO ADAPTORS # MMR0344 / MUST BE MISSION OR EQUAL	EACH	1003-44	20	\$ 4.10	1
7	670-068-00003	4" CLAY X 4" PVC FERNCO ADAPTORS # MMR0244 / MUST BE MISSION OR EQUAL	EACH	1002-44	10	\$ 3.80	1
8	670-068-00004	4" PVC X 4" PVC FERNCO ADAPTORS # MMR5644 / MUST BE MISSION OR EQUAL	EACH	1056-44	10	\$ 3.80	1
9	670-068-00005	6" CLAY X 6" CLAY FERNCO ADAPTORS # MMR0166 / MUST BE MISSION OR EQUAL	EACH	1001-66	20	\$ 8.45	1
10	670-068-00006	6" CLAY X 4" DIP/C-900 FERNCO ADAPTORS WEST COAST STYLE / # 100364WC / WITH INSERT	EACH	1003-64	60	\$ 26.50	1
11	670-068-00007	6" CLAY X 4" PVC FERNCO ADAPTORS # MMR0264 / MUST BE MISSION OR EQUAL	EACH	1002-64	10	\$ 9.18	1
12	670-068-00008	6" CLAY X 6" PVC FERNCO ADAPTORS # MMR0266 / MUST BE MISSION OR EQUAL	EACH	1002-66	10	\$ 7.83	1
13	670-068-00009	6" CLAY X 6" DIP/C-900 FERNCO ADAPTORS # MMR0366 WITH INSERT / MUST BE MISSION OR EQUAL	EACH	1003-66	30	\$ 8.03	1
14	670-068-00010	6" PVC X 6" PVC FERNCO ADAPTORS # MMR5666 / MUST BE MISSION OR EQUAL	EACH	1056-66	10	\$ 7.83	1
15	670-068-00011	8" CLAY X 8" CLAY FERNCO ADAPTORS # MMR0188 / MUST BE MISSION OR EQUAL	EACH	1001-88	10	\$ 12.98	1

Fortiline, Inc. Signature Sheri Smith Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
16	670-068-00012	8" PVC X 8" PVC FERNCO ADAPTORS # MMR5688 / MUST BE MISSION OR EQUAL	EACH	1056-88	10	\$ 12.03	1
17	670-068-00013	8" CLAY X 8" DIP/C-900 FERNCO ADAPTOR # MMR0388 WITH INSERT / MUST BE MISSION OR EQUAL	EACH	1003-88	10	\$ 12.98	1
18	670-068-00014	6" DIP/C-900 X 6" DIP/C-900 FERNCO ADAPTORS # MMR5566 / MUST BE MISSION OR EQUAL	EACH	1055-66	30	\$ 8.87	1
19	670-068-00015	4" DIP/C-900 X 4" PVC FERNCO ADAPTORS # MMR5144 / MUST BE MISSION OR EQUAL	EACH	1051-44	10	\$ 4.10	1
20	670-068-00017	4" DIP/C-900 X 4" DIP/C-900 FERNCO ADAPTORS # MMR5544 / MUST BE MISSION OR EQUAL	EACH	1055-44	20	\$ 4.10	1
21	670-068-00019	8" DIP/C-900 X 8" PVC FERNCO ADAPTORS # MMR5188 / MUST BE MISSION OR EQUAL	EACH	1051-88	10	\$ 12.98	1
22	670-068-00021	10" CLAY X 10" CLAY FERNCO ADAPTORS # MMR011010 / MUST BE MISSION OR EQUAL	EACH	1001-1010	5	\$ 18.05	1
23	670-068-00022	6" DIP/C-900 X 6" PVC FERNCO ADAPTORS # MMR5166 / MUST BE MISSION OR EQUAL	EACH	1051-66	10	\$ 8.45	1
24	670-068-00028	8" DIP/C-900 X 8" DIP/C-900 FERNCO ADAPTORS # MMR5588 / MUST BE MISSION OR EQUAL	EACH	1055-88	10	\$ 13.63	1
25	670-068-00029	6" DIP/C-900 X 4" DIP/C-900 FERNCO ADAPTERS MUST BE MISSION OR EQUIVALENT	EACH	1055-64	30	\$ 9.63	1
26	670-064-00024	4" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	4FK316SSN	60	\$ 22.70	1
27	670-064-00025	6" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	6FK316SSN	60	\$ 31.60	1
28	670-064-00026	8" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	8FK316SSN	36	\$ 32.65	1
29	670-064-00027	10" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	10FK316SSN	36	\$ 79.00	1
30	670-064-00028	12" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	12FK316SSN	36	\$ 80.00	1
31	670-064-00029	14" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	14FK316SSN	12	\$ 99.00	1
32	670-064-00030	16" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	16FK316SSN	12	\$ 145.30	1

Fortiline, Inc. Signature Sheri Smith Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
33	670-064-00031	18" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	18FK316SSN	12	\$ 211.00	1
34	670-064-00032	20" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	20FK316SSN	6	\$ 273.75	1
35	670-064-00033	24" BOLT AND GASKET SET Flanged / 316 SS Bolts / Neoprene Gaskets	PACK	24FK316SSN	6	\$ 321.15	1
36	700-057-00051	4" KENNEDY CHECK VALVES WITH LEVER MUST BE KENNEDY ONLY	EACH	1106LW	12	\$ 917.29	1
37	700-057-00065	6" KENNEDY CHECK VALVES WITH LEVER MUST BE KENNEDY ONLY	EACH	1106LW	12	\$1,233.92	1
38	700-057-00052	8" KENNEDY CHECK VALVES WITH LEVER MUST BE KENNEDY ONLY	EACH	1106LW	12	\$1,870.00	1
39	700-057-00084	SIGELOCK SPARTAN BARREL HYDRANT 5 1/4" - 36" BARREL MUST BE RED	EACH	BAS30L11R02MJ6	12	\$2,300.00	1
40	700-057-00119	SIGELOCK SPARTAN BARREL HYDRANT 5 1/4" - 42" BARREL MUST BE RED	EACH	BAS3541R02MJ6	24	\$2,350.00	1
41	700-057-00123	SIGELOCK SPARTAN BARREL HYDRANT 5 1/4" - 54" BARREL MUST BE RED	EACH	BAS45L11R02MJ6	12	\$2,461.00	1
42	700-057-00067	4" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1104	48	\$ 17.80	1
43	700-057-00069	6" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1106	60	\$ 20.75	1
44	700-057-00099	8" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1108	12	\$ 31.80	1
45	700-057-00069	10" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1110	12	\$ 47.00	1
46	700-057-00104	12" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1112	12	\$ 68.15	1
Fortiline, Inc. Signature <u>Sheri Smith</u> Print Sheri Smith Date 09/10/2018							

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
47	700-057-00105	16" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1116	3	\$ 125.00	1
48	700-057-00106	20" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1120	3	\$ 217.50	1
49	700-057-00107	24" MEGA LUGS FOR DUCTILE IRON PIPE	EACH	1124	1	\$ 302.00	1
50	700-057-00110	4" MJ GASKETS	EACH	4RG	24	\$ 3.20	1
51	700-057-00111	6" MJ GASKETS	EACH	6RG	36	\$ 4.60	1
52	700-057-00112	8" MJ GASKETS	EACH	8RG	12	\$ 5.50	1
53	700-057-00113	10" MJ GASKETS	EACH	10RG	12	\$ 6.50	1
54	700-057-00114	12" MJ GASKETS	EACH	12RG	12	\$ 7.25	1
55	700-057-00115	14" MJ GASKETS	EACH	14RG	6	\$ 11.75	1
56	700-057-00109	16" MJ GASKETS	EACH	16RG	6	\$ 13.25	1
57	700-057-00116	18" MJ GASKETS	EACH	18RG	6	\$ 14.95	1
58	700-057-00117	20" MJ GASKETS	EACH	20RG	6	\$ 15.95	1
59	700-057-00118	24" MJ GASKETS	EACH	24RG	6	\$ 19.20	1
Fortiline, Inc. Signature <u>Sheri Smith</u> Print Sheri Smith Date <u>09/10/2018</u>							

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
60	700-057-00012	4" MJ 90 DUCTILE IRON ELBOW COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	397243	12	\$ 73.63	1
61	700-057-00010	6" MJ 90 DUCTILE IRON ELBOW COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	395331	12	\$ 122.06	1
62	700-057-00014	8" MJ 90 DUCTILE IRON ELBOW COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	397267	6	\$ 175.00	1
63	700-057-00013	10" MJ 90 DUCTILE IRON ELBOW COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	397281	6	\$ 291.92	1
64	700-057-00036	16" MJ 90 DUCTILE IRON ELBOW COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	35640	3	\$ 949.38	1
65	700-057-00002	4 X 4 X 4 MJ DUCTILE IRON TEE COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	395577	12	\$ 100.10	1
66	700-057-00006	6 X 6 X 6 MJ DUCTILE IRON TEE COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	396987	12	\$ 173.73	1
67	700-057-00003	6 X 6 X 4 MJ DUCTILE IRON TEE COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	395591	6	\$ 151.77	1
68	700-057-00077	4 X 4 X 6 MJ DUCTILE IRON TEE COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	284314	6	\$ 438.11	1
69	700-057-00008	4 X 4 X 4 FLANGED DUCTILE IRON WYE COMPACT - AWWA #C153/A21.10 / EPOXY COATED / EPOXY LINED	EACH	348788	12	\$ 331.96	1
70	670-080-00005	WATER HIGH RANGE APC MARKERS 3M	EACH	-	48	NB	NB
71	670-080-00006	SEWER HIGH RANGE APC MARKERS 3M	EACH	-	48	NB	NB
72	670-064-00011	3" MJ GLAND KIT WITH ACCESSORIES	PACK	08517	12	\$ 13.20	1
73	670-064-00012	4" MJ GLAND KIT WITH ACCESSORIES	PACK	085164	48	\$ 15.83	1
74	670-064-00013	6" MJ GLAND KIT WITH ACCESSORIES	PACK	085171	60	\$ 18.91	1
75	670-064-00014	8" MJ GLAND KIT WITH ACCESSORIES	PACK	085188	12	\$ 22.19	1
76	670-064-00015	10" MJ GLAND KIT WITH ACCESSORIES	PACK	085195	12	\$ 30.67	1
77	670-064-00016	12" MJ GLAND KIT WITH ACCESSORIES	PACK	085201	12	\$ 32.63	1
78	670-064-00023	16" MJ GLAND KIT WITH ACCESSORIES	PACK	085225	6	\$ 56.78	1
79	670-064-00018	4" MJ ACCESSORIES KIT LESS GLAND	PACK	4RALGD	48	\$ 7.08	1
80	670-064-00019	6" MJ ACCESSORIES KIT LESS GLAND	PACK	6RALGD	60	\$ 9.28	1
81	670-064-00020	8" MJ ACCESSORIES KIT LESS GLAND	PACK	8RALGD	12	\$ 10.38	1

Fortiline, Inc. Signature Sheri Smith Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
82	670-064-00021	10" MJ ACCESSORIES KIT LESS GLAND	PACK	10RALGD	12	\$ 14.25	1
83	670-064-00022	12" MJ ACCESSORIES KIT LESS GLAND	PACK	12RALGD	12	\$ 14.88	1
84	670-087-00001	4" ECON PLASTIC WING NUT TEST PLUGS	EACH	271543	20	\$ 6.25	4
85	670-087-00002	6" ECON PLASTIC WING NUT TEST PLUGS	EACH	271578	20	\$ 10.00	4
86	670-089-00001	2" X 7 1/2" FULL CIRCLE CLAMP / RANGE 2.35 - 2.63 MUST BE FORD ONLY	EACH	-	1	NB	NB
87	670-089-00002	2" X 10" FULL CIRCLE CLAMP / RANGE 2.35 - 2.63 MUST BE FORD ONLY	EACH	-	1	NB	NB
88	670-089-00003	2" X 15" FULL CIRCLE CLAMP / RANGE 2.35 - 2.63 MUST BE FORD ONLY	EACH	-	1	NB	NB
89	670-089-00004	2 1/2" X 7" FULL CIRCLE CLAMP / RANGE 2.30 - 3.13 MUST BE FORD ONLY	EACH	-	1	NB	NB
90	670-089-00005	2 1/2" X 15" FULL CIRCLE CLAMP / RANGE 2.70 - 3.13 MUST BE FORD ONLY	EACH	-	1	NB	NB
91	670-089-00006	3" X 7 1/2" FULL CIRCLE CLAMP / RANGE 2.97 - 3.25 MUST BE FORD ONLY	EACH	-	1	NB	NB
92	670-089-00007	3" X 7 1/2" FULL CIRCLE CLAMP / RANGE 2.46 - 3.70 MUST BE FORD ONLY	EACH	-	1	NB	NB
93	670-089-00008	3" X 15" FULL CIRCLE CLAMP / RANGE 2.73 - 4.00 MUST BE FORD ONLY	EACH	-	1	NB	NB
94	670-089-00009	3" X 15" FULL CIRCLE CLAMP / RANGE 2.97 - 3.25 MUST BE FORD ONLY	EACH	-	1	NB	NB
95	670-089-00010	3" X 15" FULL CIRCLE CLAMP / RANGE 3.46 - 3.70 MUST BE FORD ONLY	EACH	-	1	NB	NB
96	670-089-00011	3" X 15" FULL CIRCLE CLAMP / RANGE 3.96 - 4.25 MUST BE FORD ONLY	EACH	-	1	NB	NB
97	670-089-00012	3" X 15" FULL CIRCLE CLAMP / RANGE 3.73 - 4.00 MUST BE FORD ONLY	EACH	-	1	NB	NB

Fortiline, Inc. Signature

Sheri Smith

Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
98	670-089-00015	4" X 7 1/2" FULL CIRCLE CLAMP / RANGE 4.74 - 5.14 MUST BE FORD ONLY	EACH		1	NB	NB
99	670-089-00016	4" X 7 1/2" FULL CIRCLE CLAMP / RANGE 4.95 - 5.35 MUST BE FORD ONLY	EACH		1	NB	NB
100	670-089-00017	4" X 15" FULL CIRCLE CLAMP / RANGE 4.45 - 4.73 MUST BE FORD ONLY	EACH		1	NB	NB
101	700-057-00071	4.25" X 15" FULL CIRCLE CLAMP / RANGE 3.90 - 4.25 MUST BE FORD ONLY	EACH		1	NB	NB
102	670-089-00018	4" X 15" FULL CIRCLE CLAMP / RANGE 4.75 - 5.14 MUST BE FORD ONLY	EACH		2	NB	NB
103	670-089-00019	4" X 15" FULL CIRCLE CLAMP / RANGE 4.95 - 5.35 MUST BE FORD ONLY	EACH		2	NB	NB
104	670-089-00020	6" X 7 1/2" FULL CIRCLE CLAMP / RANGE 6.84 - 7.64 MUST BE FORD ONLY	EACH		2	NB	NB
105	670-089-00021	6" X 10" FULL CIRCLE CLAMP / RANGE 6.84 - 7.24 MUST BE FORD ONLY	EACH		2	NB	NB
106	670-089-00022	6" X 10" FULL CIRCLE CLAMP / RANGE 7.45 - 7.85 MUST BE FORD ONLY	EACH		2	NB	NB
107	670-089-00023	6" X 12 1/2" FULL CIRCLE CLAMP / RANGE 7.64 MUST BE FORD ONLY	EACH		2	NB	NB
108	670-089-00024	6" X 15" FULL CIRCLE CLAMP / RANGE 6.56 - 6.96 MUST BE FORD ONLY	EACH		2	NB	NB
109	670-089-00025	6" X 15" FULL CIRCLE CLAMP / RANGE 6.60 - 7.00 MUST BE FORD ONLY	EACH		2	NB	NB
110	670-089-00026	6" X 15" FULL CIRCLE CLAMP / RANGE 6.84 - 7.24 MUST BE FORD ONLY	EACH		2	NB	NB
111	670-089-00027	6" X 15" FULL CIRCLE CLAMP / RANGE 6.84 - 7.64 MUST BE FORD ONLY	EACH		2	NB	NB
112	670-089-00028	6" X 15" FULL CIRCLE CLAMP / RANGE 7.05 - 7.45 MUST BE FORD ONLY	EACH		2	NB	NB
113	700-057-00070	4" X 15" FULL CIRCLE CLAMP / RANGE 4.74 - 5.14 MUST BE FORD ONLY	EACH		2	NB	NB
114	670-089-00029	6" X 15" FULL CIRCLE CLAMP / RANGE 7.45 - 7.85 MUST BE FORD ONLY	EACH		2	NB	NB
115	670-089-00030	6" X 30" FULL CIRCLE CLAMP / RANGE 7.45 - 7.85 MUST BE FORD ONLY	EACH		2	NB	NB
116	670-089-00031	8" X 7 12" FULL CIRCLE CLAMP / RANGE 8.99 - 9.39 MUST BE FORD ONLY	EACH		1	NB	NB
117	670-089-00032	30" X 15" FULL CIRCLE CLAMP MUST BE FORD ONLY	EACH		1	NB	NB
118	670-089-00033	8" X 10" FULL CIRCLE CLAMP / RANGE 8.99 - 9.39 MUST BE FORD ONLY	EACH		1	NB	NB

Fortiline, Inc. Signature

Sheri Smith

Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
119	670-089-00034	8" X 10" FULL CIRCLE CLAMP / RANGE 8.99 - 9.79 MUST BE FORD ONLY	EACH		1	NB	NB
120	670-089-00035	8" X 10" FULL CIRCLE CLAMP / RANGE 9.27 - 9.67 MUST BE FORD ONLY	EACH		1	NB	NB
121	670-089-00036	8" X 12 1/2" FULL CIRCLE CLAMP / RANGE 9.70 - 10.10 MUST BE FORD ONLY	EACH		1	NB	NB
122	670-089-00037	8" X 15" FULL CIRCLE CLAMP / RANGE 8.99 - 9.79 MUST BE FORD ONLY	EACH		1	NB	NB
123	670-089-00054	8" X 15" FULL CIRCLE CLAMP / RANGE 9.27 - 9.26 MUST BE FORD ONLY	EACH		1	NB	NB
124	670-089-00055	10" X 7 1/2" FULL CIRCLE CLAMP / RANGE 11.04 - 11.44 MUST BE FORD ONLY	EACH		1	NB	NB
125	670-089-00056	10" X 10" FULL CIRCLE CLAMP / RANGE 11.10 - 11.90 MUST BE FORD ONLY	EACH		1	NB	NB
126	670-089-00057	10" X 12 1/2" FULL CIRCLE CLAMP / RANGE 11.04 - 11.44 MUST BE FORD ONLY	EACH		1	NB	NB
127	670-089-00058	10" X 12 1/2" FULL CIRCLE CLAMP / RANGE 11.75 - 12.15 MUST BE FORD ONLY	EACH		1	NB	NB
128	670-089-00038	10" X 15" FULL CIRCLE CLAMP / RANGE 11.04 - 11.44 MUST BE FORD ONLY	EACH		1	NB	NB
129	670-089-00039	10" X 15" FULL CIRCLE CLAMP / RANGE 11.10 - 11.90 MUST BE FORD ONLY	EACH		1	NB	NB
130	670-089-00040	10" X 15" FULL CIRCLE CLAMP / RANGE 11.34 - 11.74 MUST BE FORD ONLY	EACH		1	NB	NB
131	670-089-00041	10" X 15" FULL CIRCLE CLAMP / RANGE 11.75 - 12.15 MUST BE FORD ONLY	EACH		1	NB	NB
132	670-089-00042	18" X 15" FULL CIRCLE CLAMP / RANGE 19.23 - 19.98 MUST BE FORD ONLY	EACH		1	NB	NB
133	670-089-00043	10" X 10" FULL CIRCLE CLAMP / RANGE 11.34 - 11.74 MUST BE FORD ONLY	EACH		1	NB	NB
134	670-089-00044	12" X 15" FULL CIRCLE CLAMP / RANGE 13.10 - 13.50 MUST BE FORD ONLY	EACH		2	NB	NB
135	670-089-00045	12" X 15" FULL CIRCLE CLAMP / RANGE 12.62 - 13.02 MUST BE FORD ONLY	EACH		2	NB	NB
136	670-089-00046	12" X 20" FULL CIRCLE CLAMP / 13.10 - 13.50 MUST BE FORD ONLY	EACH		2	NB	NB
137	670-089-00069	16" X 30" FULL CIRCLE CLAMP / RANGE 17.15 - 17.90 MUST BE FORD ONLY	EACH		1	NB	NB
138	670-089-00070	20" X 30" FULL CIRCLE CLAMP / RANGE 21.52 - 22.27 MUST BE FORD ONLY	EACH		1	NB	NB
139	670-089-00047	16" X 15" FULL CIRCLE CLAMP / RANGE 17.65 MUST BE FORD ONLY	EACH		1	NB	NB

Fortiline, Inc. Signature Sheri Smith Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
140	670-089-00048	10" X 10" FULL CIRCLE CLAMP / RANGE 11.04 - 11.44 MUST BE FORD ONLY	EACH		2	NB	NB
141	670-089-00049	20" X 15" FULL CIRCLE CLAMP / RANGE 21.52 - 22.27 MUST BE FORD ONLY	EACH		1	NB	NB
142	670-089-00050	22" X 15" FULL CIRCLE CLAMP / RANGE 22.72 - 22.87 MUST BE FORD ONLY	EACH		1	NB	NB
143	670-089-00051	24" X 24" FULL CIRCLE CLAMP / RANGE 25.70 - 26.90 MUST BE FORD ONLY	EACH		1	NB	NB
144	670-089-00052	30" X 30" FULL CIRCLE CLAMP / RANGE 31.14 - 32.34 MUST BE FORD ONLY	EACH		1	NB	NB
145	670-089-00053	42" X 30" FULL CIRCLE CLAMP / RANGE 43.90 - 45.10 MUST BE FORD ONLY	EACH		1	NB	NB
146	670-089-00067	8" X 24" FULL CIRCLE CLAMP / RANGE 8.99 - 9.39 MUST BE FORD ONLY	EACH		1	NB	NB
147	670-089-00068	10" X 24" FULL CIRCLE CLAMP / RANGE 11.04 - 11.94 MUST BE FORD ONLY	EACH		1	NB	NB
148	670-089-00078	36" X 15" FULL CIRCLE CLAMP WITH 1 1/2" IP TAP MUST BE FORD ONLY	EACH		1	NB	NB
149	670-089-00079	3" X 10" FULL CIRCLE CLAMP / RANGE 3.46 - 3.70 MUST BE FORD ONLY	EACH		3	NB	NB
150	670-089-00080	4" X 10" FULL CIRCLE CLAMP / RANGE 4.74 - 5.14 MUST BE FORD ONLY	EACH		6	NB	NB
151	670-089-00081	4" X 10" FULL CIRCLE CLAMP / RANGE 4.95 - 5.35 MUST BE FORD ONLY	EACH		6	NB	NB
152	700-057-00033	6" X 4" MJ DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	395720	12	\$ 69.83	1
153	700-057-00032	8" X 4" MJ DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	47773	6	\$ 105.73	1
154	700-057-00030	8" X 4" FLANGED DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	132271	6	\$ 261.05	1
155	700-057-00031	6" X 4" FLANGED DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	132974	12	\$ 189.92	1
156	700-057-00034	10" X 6" FLANGED DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	132875	6	\$ 446.28	1
157	700-057-00100	8" X 6" FLANGED DUCTILE IRON MJ REDUCERS EPOXY COATED / EPOXY LINED	EACH	13231	6	\$ 297.08	1
158	700-057-00004	4" X 4" X 4" FLANGED DUCTILE IRON TEE EPOXY COATED / EPOXY LINED	EACH	398974	12	\$ 211.84	1
159	700-057-00101	6" X 6" X 6" FLANGED DUCTILE IRON TEE EPOXY COATED / EPOXY LINED	EACH	398950	12	\$ 322.92	1
160	700-057-00005	8" X 8" X 8" MJ DUCTILE IRON TEE EPOXY COATED / EPOXY LINED	EACH	397359	3	\$ 235.70	1

Fortiline, Inc. Signature Sheri Smith Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
161	700-057-00054	16" X 16" X 16" MJ DUCTILE IRON TEE EPOXY COATED / EPOXY LINED	EACH	397953	1	\$ 139.19	1
162	700-057-00007	10" X 10" X 8" FLANGED DUCTILE IRON WYE EPOXY COATED / EPOXY LINED	EACH	348757	1	\$1,452.48	1
163	700-057-00009	6" X 6" X 6" MJ DUCTILE IRON WYE EPOXY COATED / EPOXY LINED	EACH	397465	12	\$ 229.27	1
164	700-057-00011	4" FLANGED DUCTILE IRON 90 ELBOWS EPOXY COATED / EPOXY LINED	EACH	398967	12	\$ 146.00	1
165	700-057-00017	8" FLANGED DUCTILE IRON 90 ELBOWS EPOXY COATED / EPOXY LINED	EACH	399001	6	\$ 398.00	1
166	700-057-00075	6" FLANGED DUCTILE IRON 90 ELBOWS EPOXY COATED / EPOXY LINED	EACH	398998	12	\$ 220.00	1
167	700-057-00015	6" MJ X FLANGED DUCTILE IRON 90 ELBOW EPOXY COATED / EPOXY LINED	EACH	396918	12	\$ 136.75	1
168	700-057-00016	4" MJ X FLANGED DUCTILE IRON 90 ELBOW EPOXY COATED / EPOXY LINED	EACH	395492	12	\$ 81.60	1
169	700-057-00018	10" MJ X FLANGED DUCTILE IRON 90 ELBOW EPOXY COATED / EPOXY LINED	EACH	396325	6	\$ 370.00	1
170	700-057-00019	4" FLANGED DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	348405	12	\$ 131.00	1
171	700-057-00020	8" FLANGED DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	346276	6	\$ 320.00	1
172	700-057-00021	6" FLANGED DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	131236	12	\$ 192.15	1
173	700-057-00022	6" MJ DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	397564	12	\$ 99.00	1
174	700-057-00023	4" MJ DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	397472	12	\$ 63.75	1
175	700-057-00024	10" MJ DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	397618	6	\$ 204.00	1
176	700-057-00025	8" MJ DUCTILE IRON 45 ELBOWS EPOXY COATED / EPOXY LINED	EACH	397274	6	\$ 140.00	1
177	700-057-00026	6" FLANGED DUCTILE IRON 22.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	348443	6	\$ 254.00	1
178	700-057-00027	6" MJ DUCTILE IRON 22.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	395362	6	\$ 89.75	1
179	700-057-00061	4" FLANGED DUCTILE IRON 22.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	348436	6	\$ 174.75	1
180	700-057-00098	8" FLANGED DUCTILE IRON 22.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	348306	6	\$ 385.00	1
181	700-057-00028	10" MJ DUCTILE IRON 11.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	397328	3	\$ 194.50	1

Fortiline, Inc. Signature

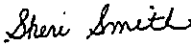
Sheri Smith

Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
182	700-057-00045	4" MJ GATE VALVE WITH OPERATING NUT (NO WHEEL)	EACH	040A236123LN	12	\$ 313.00	1
183	700-057-00046	6" MJ GATE VALVE WITH OPERATING NUT (NO WHEEL)	EACH	060A236123LN	12	\$ 398.00	1
184	700-057-00049	8" MJ GATE VALVE WITH OPERATING NUT (NO WHEEL)	EACH	080A236123LN	6	\$ 635.00	1
185	700-057-00050	10" MJ GATE VALVE WITH OPERATING NUT (NO WHEEL)	EACH	100A236123LN	6	\$ 991.00	1
186	700-057-00029	6" MJ DUCTILE IRON 11.5 ELBOWS EPOXY COATED / EPOXY LINED	EACH	395386	3	\$ 89.50	1
187	700-057-00035	6" MJ DUCTILE IRON COUPLINGS EPOXY COATED / EPOXY LINED	EACH	395690	12	\$ 105.60	1
188	700-057-00038	4" MJ X FLANGED DUCTILE IRON ADAPTER EPOXY COATED / EPOXY LINED	EACH	395515	12	\$ 71.00	1
189	700-057-00039	10" MJ DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	397656	6	\$ 200.60	1
190	700-057-00040	8" MJ DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	397014	6	\$ 140.00	1
191	700-057-00041	6" MJ DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	395690	12	\$ 105.60	1
192	700-057-00042	4" FLANGED DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	4FF010P401	12	\$ 135.00	1
193	700-057-00043	4" MJ DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	395683	12	\$ 70.00	1
194	700-057-00108	16" MJ DUCTILE IRON SLEEVES EPOXY COATED / EPOXY LINED	EACH	398929	1	\$ 647.00	1
195	700-057-00044	4" DUCTILE IRON SPOOL PIECE 12" IN HEIGHT EPOXY COATED / EPOXY LINED	EACH	4FF0100F401	12	\$ 135.00	1
196	700-057-00047	4" FLANGED GATE VALVES WITH WHEEL	EACH	040A236106LN	12	\$ 309.50	1
197	700-057-00048	6" FLANGED GATE VALVES WITH WHEEL	EACH	060A236106LLN	18	\$ 414.00	1
198	700-057-00055	FLOATS WITH 60 FOOT CORDS ROTOFLOAT / # S80NONC	EACH	560NONC	60	\$ 66.76	1
199	700-057-00087	FLOATS WITH 80 FOOT CORDS ROTOFLOAT / # S80NONC	EACH	S80NONC	40	\$ 78.76	1
200	700-057-00059	16" DUCTILE IRON FLANGED FILLER EPOXY COATED / 1 1/2" THICK	EACH	-	1	NB	NB
201	700-057-00080	6" DUCTILE IRON MJ CROSS TEE EPOXY COATED / EPOXY LINED	EACH	398455	2	\$ 257.00	1
202	700-057-00140	8" X 6" DUCTILE IRON MJ REDUCER EPOXY COATED / EPOXY LINED	EACH	397601	6	\$ 113.25	1

Fortiline, Inc. Signature *Sheri Smith*

Print Sheri Smith Date 09/10/2018

Item	(Warehouse Use Only)	Item Description	Sold by	Vendor Part #	Annual Usage	Price	Min. QTY Per Order
203	700-057-00124	6" DUCTILE IRON MJ SOLID CAP EPOXY COATED / EPOXY LINED	EACH	398707	6	\$ 48.85	1
204	700-057-00126	6" X 2" DUCTILE IRON MJ TAP CAP EPOXY COATED / EPOXY LINED	EACH	398745	6	\$ 71.35	1
205	658-088-00002	6" 22 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-2406	12	\$ 71.45	1
206	658-088-00003	8" 22 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-2408	6	\$ 136.08	1
207	658-088-00004	4" 45 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-2204	24	\$ 41.18	1
208	658-088-00005	6" 45 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-2206	12	\$ 71.50	1
209	658-088-00007	4" X 4" X 4" WYES / BELL TO BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-010404	48	\$ 56.74	1
210	658-088-00008	6" X 6" X 6" WYES / BELL TO BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-010606	12	\$ 126.82	1
211	658-088-00009	8" X 8" X 6" WYES / BELL TO BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-010806	6	\$ 188.52	1
212	658-088-00010	4" 90 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-1804	24	\$ 41.20	1
213	658-088-00011	4" 22.5 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-2404	12	\$ 42.82	1
214	658-088-00013	6" 90 DEGREE ELBOWS / BELL TO BELL C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-1806	12	\$ 73.36	1
215	658-088-00015	4" CLEANOUT ADAPTER C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-5904	60	\$ 6.25	1
216	658-088-00016	4" CLEANOUT CAP C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	35-6204	60	\$ 4.50	1
217	658-088-00017	6" CLEANOUT ADAPTER C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	18-5906	60	\$ 20.10	1
218	658-088-00018	6" CLEANOUT CAP C-900 / CLASS 150 FITTINGS / HARCO ONLY	EACH	35-6206	60	\$ 11.50	1
219	658-034-00001	PIPE LUBE 1 GALLON BUCKET	EACH	GUBEG	3	\$ 15.00	1
220	700-057-00150	4" X 2" DUCTILE IRON MJ TAP CAP EPOXY COATED / EPOXY LINED	EACH	398738	6	\$ 56.50	1
<div> <div>Fortiline, Inc. Signature</div> <div>  </div> </div> <div> <div>Print Sheri Smith</div> <div>Date 09/10/2018</div> </div>							



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

6759 WHITE DR
RIVIERA BEACH, FL 33407

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
45-9053 MISC MERCHANDISE SALES	FORTILINE INC		B17,484573 - 07/25/17	\$33.00	B40170327

This document is valid only when receipted by the Tax Collector's Office.

FORTILINE INC
FORTILINE INC
7025 NORTHWINDS DR NW
CONCORD, NC 28027



**STATE OF FLORIDA
PALM BEACH COUNTY
2017/2018 LOCAL BUSINESS TAX RECEIPT**

**LBTR Number: 201580311
EXPIRES: SEPTEMBER 30, 2018**

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/30/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Arthur J. Gallagher Risk Management Services, Inc. Two Lincoln Centre 5420 LBJ Freeway, Suite 400 Dallas TX 75240	CONTACT NAME: Cheryl Smith	
	PHONE (A/C, No. Ext): (972) 813-2165 FAX (A/C, No.): (972) 663-6266	
	E-MAIL ADDRESS: Cheryl_Smith@ajg.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Phoenix Insurance Company	25623
INSURED MORSINC-01 MORSCO, Inc. Named Insured Continued See Attached 100 East 15th Street, Suite 200 Fort Worth TX 76102	INSURER B: Travelers Property Casualty Co of America	25674
	INSURER C: XL Specialty Insurance Company	37885
	INSURER D: Travelers Indemnity Company	25658
	INSURER E: Continental Insurance Company	35289
	INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** 399311014**REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	660-1C408966-PHX-17	12/31/2017	12/31/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	TC2J-CAP-5H600032-17	9/30/2017	12/31/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			US00066020L17A	9/30/2017	12/31/2018	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	TC2K-UB-5H600161-17	12/31/2017	12/31/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Excess Liability Transit/Ballee's Details Shown In Description of Operations			6049918125	9/30/2017	12/31/2019	Each Occurrence 25,000,000 General Aggregate 25,000,000 Excess Of 25,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

General Liability coverage includes blanket additional insured status and blanket waiver of subrogation per policy form Xtend Endorsement for Commercial Industries CG D4 58 07/13 and Blanket Additional Insured (Contractors) CG D2 46 08 05. General Liability policy contains Primary and Noncontributory for additional insured per form CG D0 37 04 05, where required by written contract.

Automobile Liability coverage includes blanket Additional Insured and Waiver of Subrogation as required by written contract or written agreement under policy endorsements CA T4 37 02 16 and CA T3 40 02 15 and Blanket Additional Insured - Primary & Non-Contributory under form CA T4 74 02 16.

Workers Compensation includes a Blanket Waiver of Subrogation Endorsement WC 00 03 13(00) - 001. Workers Compensation coverage provided for all See Attached...

CERTIFICATE HOLDER**CANCELLATION**

The City of Boynton Beach
100 E. Boynton Beach
Boulevard, P.O. Box 310
Boynton Beach FL 33425-0310

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2015 ACORD CORPORATION. All rights reserved.



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Arthur J. Gallagher Risk Management Services, Inc.		NAMED INSURED MORSCO, Inc. Named Insured Continued See Attached 100 East 15th Street, Suite 200 Fort Worth TX 76102	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

states except OH, ND, WA, WY.

Umbrella Policy is Follow Form to the underlying coverage shown on this certificate of insurance including any and all endorsements and extensions of coverage included in this certificate.

Transit/Bailee's: Property Policy #061818959 American Home Assurance Company / AIG Property & Casualty Group Effective dates: 9/30/17 - 12/31/19 Special Form Coverage Property in Transit / Bailee's limit: \$1,000,000

Transit/Bailee's includes Waiver of Subrogation in the Commercial Property Policy Form 113813 (1/17).

Transit/Bailee's includes wording to include Mortgagee, Lender or Similar Interest as their interest may appear as shown on Certificates of Insurance or any endorsement attached to and forming a part of the policy.

RE: ANNUAL SUPPLY OF PIPE FITTINGS AND ACCESSORIES

BID No: 037-1412-18/MFD

Additional Insured & Waiver of Subrogation in favor of The city of Boynton Beach as required by written contract.



Arthur J. Gallagher & Co.

MORSCO, Inc.

NAMED INSURED SCHEDULE

Name
MORSCO, Inc.
Patriot Supply Holdings, Inc.
Patriot Supply Intermediate, Inc.
Morrison Supply Company, LLC
Express Pipe & Supply Co. LLC
FWC Supply, LLC
WS Supply, LLC
Supply Source Dynamics, Inc
Fortiline, LLC
Fortiline, Inc.
MORSCO Supply, LLC
DBA's
Morrison Supply Company, LLC DBA Builders Discount Appliance Mart
Morrison Supply Company, LLC DBA American Supply
Morrison Supply Company, LLC DBA American Supply Company
Morrison Supply Company, LLC, Express Pipe & Supply Co., LLC and FWC Supply, LLC DBA Expressions Home Gallery
Morrison Supply Company, LLC and Express Pipe & Supply Co., LLC DBA Kiva Kitchen and Bath
Morrison Supply Company, LLC DBA Empire Plumbing Supply
Morrison Supply Company, LLC DBA EP Supply
Morrison Supply Company, LLC DBA Dixie Utility Supply
Morrison Supply Company, LLC DBA Western Wholesale Supply Co.
Morrison Supply Company, LLC DBA Murray Supply Company
Morrison Supply Company, LLC DBA DeVore & Johnson
WS Supply, LLC DBA Wholesale Specialities
FWC Supply, LLC DBA Farnsworth Wholesale Supply
Mainline Holding Company, LLC
Mainline Supply of Asheville, LLC
Mainline Supply of Atlanta, LLC
Mainline Supply of Charlotte, LLC
Mainline Supply of Greensboro, LLC
Mainline Supply of Greenville, LLC
Mainline Supply of Jonesboro, LLC
Mainline Supply of Florida, LLC
Mainline Supply of South Carolina, LLC
Mainline Holding Company, Profit Sharing
Mainly Supply Company, Inc. (old pipeline)
Eagle Underground Utility Supply, Inc.
Pipeline Sales, LLC
PSCI Acquisition Corporation
Pipeline Supply Company, LLC
MSC Waterworks LLC
MSC Waterworks Company Inc.
MSC Waterworks of Atlanta, LLC
DeVore & Johnson
Express Pipe & Supply
Expressions Home Gallery
Farnsworth Wholesale Supply
FWC Supply
Kiva Kitchen & Bath
Morrison Supply Company
Murray Supply Company
Wholesale Specialities
WS Supply

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

XTEND ENDORSEMENT FOR COMMERCIAL INDUSTRIES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

GENERAL DESCRIPTION OF COVERAGE – This endorsement broadens coverage. However, coverage for any injury, damage or medical expenses described in any of the provisions of this endorsement may be excluded or limited by another endorsement to this Coverage Part, and these coverage broadening provisions do not apply to the extent that coverage is excluded or limited by such an endorsement. The following listing is a general coverage description only. Limitations and exclusions may apply to these coverages. Read all the provisions of this endorsement and the rest of your policy carefully to determine rights, duties, and what is and is not covered.

- | | |
|--|--|
| <p>A. Broadened Named Insured</p> <p>B. Blanket Additional Insured – Broad Form Vendors</p> <p>C. Damage To Premises Rented To You</p> <ul style="list-style-type: none"> • Perils of fire, explosion, lightning, smoke, water • Limit increased to \$300,000 <p>D. Blanket Waiver Of Subrogation</p> <p>E. Blanket Additional Insured – Owners, Managers Or Lessors Of Premises</p> <p>F. Blanket Additional Insured – Lessors Of Leased Equipment</p> <p>G. Incidental Medical Malpractice</p> <p>H. Personal Injury – Assumed By Contract</p> <p>I. Amended Bodily Injury Definition</p> | <p>J. Bodily Injury To Co-Employees And Co-Volunteer Workers</p> <p>K. Aircraft Chartered With Crew</p> <p>L. Non-Owned Watercraft – Increased From 25 Feet To 50 Feet</p> <p>M. Increased Supplementary Payments</p> <ul style="list-style-type: none"> • Cost of bail bonds increased to \$2,500 • Loss of earnings increased to \$500 per day <p>N. Medical Payments - Increased Limit</p> <p>O. Knowledge And Notice Of Occurrence Or Offense</p> <p>P. Unintentional Omission</p> <p>Q. Reasonable Force – Bodily Injury Or Property Damage</p> |
|--|--|

PROVISIONS

A. BROADENED NAMED INSURED

1. The following is added to **SECTION II – WHO IS AN INSURED**:

Any organization, other than a partnership or joint venture, over which you maintain ownership or majority interest on the effective date of the policy qualifies as a Named Insured. However, coverage for any such organization will cease as of the date during the policy period that you no longer maintain ownership of, or majority interest in, such organization.

2. The following replaces Paragraph 4.a. of **SECTION II – WHO IS AN INSURED**:

- a. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier, unless reported in writing to us within 180 days.

B. BLANKET ADDITIONAL INSURED – BROAD FORM VENDORS

The following is added to **SECTION II – WHO IS AN INSURED**:

Any person or organization that is a vendor and that you have agreed in a written contract or agreement to include as an additional insured on this Coverage Part is an insured, but only with respect to liability for "bodily injury" or "property damage" that:

- a. Is caused by an "occurrence" that takes place after you have signed and executed that contract or agreement; and
- b. Arises out of "your products" which are distributed or sold in the regular course of such vendor's business.

The insurance provided to such vendor is subject to the following provisions:

COMMERCIAL GENERAL LIABILITY

- a. The limits of insurance provided to such vendor will be the limits which you agreed to provide in the written contract or agreement, or the limits shown in the Declarations of this Coverage Part, whichever are less.
- b. The insurance provided to such vendor does not apply to:
 - (1) "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement;
 - (2) Any express warranty unauthorized by you;
 - (3) Any physical or chemical change in "your products" made intentionally by such vendor;
 - (4) Repackaging, unless unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;
 - (5) Any failure to make such inspections, adjustments, tests or servicing as vendors agree to perform or normally undertake to perform in the regular course of business, in connection with the distribution or sale of "your products";
 - (6) Demonstration, installation, servicing or repair operations, except such operations performed at such vendor's premises in connection with the sale of "your products"; or
 - (7) "Your products" which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for such vendor.

Coverage under this provision does not apply to:

- a. Any person or organization from whom you have acquired "your products", or any ingredient, part or container entering into, accompanying or containing such products; or
- b. Any vendor for which coverage as an additional insured specifically is scheduled by endorsement.

C. DAMAGE TO PREMISES RENTED TO YOU

1. The following replaces the last paragraph of Paragraph 2., Exclusions, of SECTION I – COVERAGES – COVERAGE A BODILY IN-

JURY AND PROPERTY DAMAGE LIABILITY:

Exclusions c. through n. do not apply to damage to premises while rented to you, or temporarily occupied by you with permission of the owner, caused by:

- a. Fire;
- b. Explosion;
- c. Lightning;
- d. Smoke resulting from such fire, explosion, or lightning; or
- e. Water.

A separate limit of insurance applies to such damage to premises as described in Paragraph 6. of Section III – Limits Of Insurance.

This insurance does not apply to damage to premises while rented to you, or temporarily occupied by you with permission of the owner, caused by:

- a. Rupture, bursting, or operation of pressure relief devices;
- b. Rupture or bursting due to expansion or swelling of the contents of any building or structure, caused by or resulting from water;
- c. Explosion of steam boilers, steam pipes, steam engines, or steam turbines.

2. The following replaces Paragraph 6. of SECTION III – LIMITS OF INSURANCE:

Subject to 5. above, the Damage To Premises Rented To You Limit is the most we will pay under Coverage A for damages because of "property damage" to any one premises while rented to you, or temporarily occupied by you with permission of the owner, caused by fire; explosion; lightning smoke resulting from such fire, explosion, or lightning; or water. The Damage To Premises Rented To You Limit will apply to all damage proximately caused by the same "occurrence", whether such damage results from fire; explosion; lightning; smoke resulting from such fire, explosion, or lightning; water; or any combination of any of these.

The Damage To Premises Rented To You Limit will be the higher of:

- a. \$300,000; or
- b. The amount shown on the Declarations of this Coverage Part for Damage To Premises Rented To You Limit.

3. The following replaces Paragraph a. of the definition of "insured contract" in the **DEFINITIONS** Section:

a. A contract for a lease of premises. However, that portion of the contract for a lease of premises that indemnifies any person or organization for damage to premises while rented to you, or temporarily occupied by you with permission of the owner, caused by:

- (1) Fire;
- (2) Explosion;
- (3) Lightning;
- (4) Smoke resulting from such fire, explosion, or lightning; or
- (5) Water.

is not an "insured contract";

4. The following replaces Paragraph 4.b.(1)(b) of **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**:

(b) That is insurance for premises rented to you, or temporarily occupied by you with the permission of the owner;

D. BLANKET WAIVER OF SUBROGATION

The following is added to Paragraph 8., **Transfer Of Rights Of Recovery Against Others To Us**, of **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**:

We waive any right of recovery we may have against any person or organization because of payments we make for injury or damage arising out of premises owned or occupied by or rented, or loaned to you; ongoing operations performed by you or on your behalf, done under a contract with that person or organization; "your work"; or "your products". We waive this right where you have agreed to do so as part of a written contract, executed by you prior to loss.

E. BLANKET ADDITIONAL INSURED – OWNERS, MANAGERS OR LESSORS OF PREMISES

The following is added to **SECTION II – WHO IS AN INSURED**:

Any person or organization that is a premises owner, manager or lessor and that you have agreed in a written contract or agreement to name as an additional insured on this Coverage Part is an insured, but only with respect to liability for "bodily injury", "property damage", "personal injury" or "advertising injury" that:

- a. Is "bodily injury" or "property damage" caused by an "occurrence" that takes place, or "personal injury" or "advertising injury" caused by an offense that is committed, after you have signed and executed that contract or agreement; and
- b. Arises out of the ownership, maintenance or use of that part of any premises leased to you.

The insurance provided to such premises owner, manager or lessor is subject to the following provisions:

- a. The limits of insurance provided to such premises owner, manager or lessor will be the limits which you agreed to provide in the written contract or agreement, or the limits shown on the Declarations of this Coverage Part, whichever are less.
- b. The insurance provided to such premises owner, manager or lessor does not apply to:
 - (1) "Bodily injury" or "property damage" caused by an "occurrence" that takes place, or "personal injury" or "advertising injury" caused by an offense that is committed, after you cease to be a tenant in that premises; or
 - (2) Structural alterations, new construction or demolition operations performed by or on behalf of such premises owner, manager or lessor.
- c. The insurance provided to such premises owner, manager or lessor is excess over any valid and collectible other insurance available to such premises owner, manager or lessor, unless you have agreed in a written contract for this insurance to apply on a primary or contributory basis.

F. BLANKET ADDITIONAL INSURED – LESSORS OF LEASED EQUIPMENT

The following is added to **SECTION II – WHO IS AN INSURED**:

Any person or organization that is an equipment lessor and that you have agreed in a written contract or agreement to include as an additional insured on this Coverage Part is an insured, but only with respect to liability for "bodily injury", "property damage", "personal injury" or "advertising injury" that:

- a. Is "bodily injury" or "property damage" caused by an "occurrence" that takes place, or "personal injury" or "advertising injury" caused by an offense that is committed, after you have

COMMERCIAL GENERAL LIABILITY

signed and executed that contract or agreement; and

- b. Is caused, in whole or in part, by your acts or omissions in the maintenance, operation or use by you of equipment leased to you by such equipment lessor.

The insurance provided to such equipment lessor is subject to the following provisions:

- a. The limits of insurance provided to such equipment lessor will be the limits which you agreed to provide in the written contract or agreement, or the limits shown on the Declarations of this Coverage Part, whichever are less.
- b. The insurance provided to such equipment lessor does not apply to any "bodily injury" or "property damage" caused by an "occurrence" that takes place, or "personal injury" or "advertising injury" caused by an offense that is committed, after the equipment lease expires.
- c. The insurance provided to such equipment lessor is excess over any valid and collectible other insurance available to such equipment lessor, unless you have agreed in a written contract for this insurance to apply on a primary or contributory basis.

G. INCIDENTAL MEDICAL MALPRACTICE

1. The following is added to the definition of "occurrence" in the **DEFINITIONS** Section:

Unless you are in the business or occupation of providing professional health care services, "occurrence" also means an act or omission committed in providing or failing to provide "incidental medical services" to a person.

2. The following is added to the **DEFINITIONS** Section:

"Incidental medical services" means:

- a. Medical, surgical, dental, laboratory, x-ray or nursing service or treatment, advice or instruction, or the related furnishing of food or beverages;
- b. The furnishing or dispensing of drugs or medical, dental, or surgical supplies or appliances;
- c. First aid; or
- d. "Good Samaritan services".

"Good Samaritan services" means any emergency medical services for which no compensation is demanded or received.

3. The following is added to Paragraph 2.a.(1) of **SECTION II – WHO IS AN INSURED**:

Unless you are in the business or occupation of providing professional health care services, Paragraphs (1)(a), (b), (c) and (d) above do not apply to any "bodily injury" arising out of any providing or failing to provide "incidental medical services" by any of your "employees", other than an employed doctor. Any such "employees" providing or failing to provide "incidental medical services" during their work hours for you will be deemed to be acting within the scope of their employment by you or performing duties related to the conduct of your business.

4. The following exclusion is added to Paragraph 2., **Exclusions**, of **SECTION I – COVERAGES – COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY**:

Sale Of Pharmaceuticals

"Bodily injury" or "property damage" arising out of the willful violation of a penal statute or ordinance relating to the sale of pharmaceuticals committed by, or with the knowledge or consent of, the insured.

5. The following is added to Paragraph 5. of **SECTION III – LIMITS OF INSURANCE**:

For the purposes of determining the applicable Each Occurrence Limit, all related acts or omissions committed in the providing or failing to provide "incidental medical services" to any one person will be considered one "occurrence".

6. The following is added to Paragraph 4.b., **Excess Insurance**, of **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**:

This insurance is excess over any valid and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to any of your "employees" for "bodily injury" that arises out of providing or failing to provide "incidental medical services" to any person to the extent not subject to Paragraph 2.a.(1) of **SECTION II – WHO IS AN INSURED**.

H. PERSONAL INJURY – ASSUMED BY CONTRACT

1. The following replaces Exclusion e., **Contractual Liability**, in Paragraph 2. of **SECTION I – COVERAGES – COVERAGE B PERSONAL AND ADVERTISING INJURY LIABILITY**:

e. Contractual Liability

"Personal injury" or "advertising injury" for which the insured is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to:

- (1) Liability for damages that the insured would have in the absence of the contract or agreement; or
- (2) Liability for damages because of "personal injury" assumed in a contract or agreement that is an "insured contract", provided that the "personal injury" is caused by an offense committed subsequent to the execution of the contract or agreement. Solely for the purposes of liability assumed in an "insured contract", reasonable attorneys fees and necessary litigation expenses incurred by or for a party other than an insured will be deemed to be damages because of "personal injury", provided that:
 - (a) Liability to such party for, or for the cost of, that party's defense has also been assumed in the same "insured contract"; and
 - (b) Such attorney fees and litigation expenses are for defense of that party against a civil or alternative dispute resolution proceeding in which damages to which this insurance applies are alleged.

2. The following replaces the third sentence of Paragraph 2. of **SUPPLEMENTARY PAYMENTS – COVERAGES A AND B**:

Notwithstanding the provisions of Paragraph 2.b.(2) of Section I – Coverage A – Bodily Injury And Property Damage Liability or Paragraph 2.e. of Section I – Coverage B – Personal and Advertising Injury Liability, such payments will not be deemed to be damages because of "bodily injury", "property damage" or "personal injury", and will not reduce the limits of insurance.

3. The following replaces Paragraph 2.d. of **SUPPLEMENTARY PAYMENTS – COVERAGES A AND B**:

d. The allegations in the "suit" and the information we know about the "occurrence" or offense are such that no conflict appears to exist between the interests of

the insured and the interests of the indemnitee;

4. The following replaces the first subparagraph of Paragraph f. of the definition of "insured contract" in the **DEFINITIONS** Section:

f. That part of any other contract or agreement pertaining to your business (including an indemnification of a municipality in connection with work performed for a municipality) under which you assume the tort liability of another party to pay for "bodily injury," "property damage" or "personal injury" to a third person or organization. Tort liability means a liability that would be imposed by law in the absence of any contract or agreement.

I. AMENDED BODILY INJURY DEFINITION

The following replaces the definition of "bodily injury" in the **DEFINITIONS** Section:

"Bodily injury" means bodily injury, mental anguish, mental injury, shock, fright, disability, humiliation, sickness or disease sustained by a person, including death resulting from any of these at any time.

J. BODILY INJURY TO CO-EMPLOYEES AND CO-VOLUNTEER WORKERS

The following is added to Paragraph 2.a.(1) of **SECTION II – WHO IS AN INSURED**:

Paragraph (1)(a) above does not apply to "bodily injury" to a co-"employee" in the course of the co-"employee's" employment by you or performing duties related to the conduct of your business, or to "bodily injury" to your other "volunteer workers" while performing duties related to the conduct of your business.

K. AIRCRAFT CHARTERED WITH CREW

The following is added to Exclusion g., **Aircraft, Auto Or Watercraft**, in Paragraph 2. of **SECTION I – COVERAGES – COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY**:

This exclusion does not apply to an aircraft that is:

- (a) Chartered with crew to any insured;
- (b) Not owned by any insured; and
- (c) Not being used to carry any person or property for a charge.

L. NON-OWNED WATERCRAFT

1. The following replaces Paragraph (2) of Exclusion g., **Aircraft, Auto Or Watercraft**, in Paragraph 2. of **SECTION I – COVERAGES – COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY**:

COMMERCIAL GENERAL LIABILITY

- (2) A watercraft you do not own that is:
 - (a) Fifty feet long or less; and
 - (b) Not being used to carry any person or property for a charge.

2. The following is added to Paragraph 2. of **SECTION II – WHO IS AN INSURED:**

Any person or organization that, with your express or implied consent, either uses or is responsible for the use of a watercraft that you do not own that is:

- (1) Fifty feet long or less; and
- (2) Not being used to carry any person or property for a charge.

M. INCREASED SUPPLEMENTARY PAYMENTS

1. The following replaces Paragraph 1.b. of **SUPPLEMENTARY PAYMENTS – COVERAGES A AND B of SECTION I – COVERAGES:**

- b. Up to \$2,500 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

2. The following replaces Paragraph 1.d. of **SUPPLEMENTARY PAYMENTS – COVERAGES A AND B of SECTION I – COVERAGES:**

- d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including actual loss of earnings up to \$500 a day because of time off from work.

N. MEDICAL PAYMENTS – INCREASED LIMIT

The following replaces Paragraph 7. of **SECTION III – LIMITS OF INSURANCE:**

7. Subject to 5. above, the Medical Expense Limit is the most we will pay under Coverage C. for all medical expenses because of "bodily injury" sustained by any one person, and will be the higher of:

- (a) \$10,000; or
- (b) The amount shown on the Declarations of this Coverage Part for Medical Expense Limit.

O. KNOWLEDGE AND NOTICE OF OCCURRENCE OR OFFENSE

The following is added to Paragraph 2., **Duties In The Event of Occurrence, Offense, Claim or Suit**, of **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS:**

e. The following provisions apply to Paragraph a. above, but only for the purposes of the insurance provided under this Coverage Part to you or any insured listed in Paragraph 1. or 2. of Section II – Who Is An Insured:

- (1) Notice to us of such "occurrence" or offense must be given as soon as practicable only after the "occurrence" or offense is known to you (if you are an individual), any of your partners or members who is an individual (if you are a partnership or joint venture), any of your managers who is an individual (if you are a limited liability company), any of your trustees who is an individual (if you are a trust), any of your "executive officers" or directors (if you are an organization other than a partnership, joint venture, limited liability company or trust) or any "employee" authorized by you to give notice of an "occurrence" or offense.

- (2) If you are a partnership, joint venture, limited liability company or trust, and none of your partners, joint venture members, managers or trustees are individuals, notice to us of such "occurrence" or offense must be given as soon as practicable only after the "occurrence" or offense is known by:

- (a) Any individual who is:

- (i) A partner or member of any partnership or joint venture;
- (ii) A manager of any limited liability company;
- (iii) A trustee of any trust; or
- (iv) An executive officer or director of any other organization;

that is your partner, joint venture member, manager or trustee; or

- (b) Any "employee" authorized by such partnership, joint venture, limited liability company, trust or other organization to give notice of an "occurrence" or offense.

- (3) Notice to us of such "occurrence" or offense will be deemed to be given as soon as practicable if it is given in good faith as soon as practicable to your workers' compensation insurer. This applies only if you subsequently give notice to us of the "occurrence" or offense as soon as practicable after any of the persons described in Paragraphs e.(1) or (2) above discov-

ers that the "occurrence" or offense may result in sums to which the insurance provided under this Coverage Part may apply.

However, if this policy includes an endorsement that provides limited coverage for "bodily injury" or "property damage" or pollution costs arising out of a discharge, release or escape of "pollutants" which contains a requirement that the discharge, release or escape of "pollutants" must be reported to us within a specific number of days after its abrupt commencement, this Paragraph e. does not affect that requirement.

P. UNINTENTIONAL OMISSION

The following is added to Paragraph 6., **Representations**, of **SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS**:

The unintentional omission of, or unintentional error in, any information provided by you which we relied upon in issuing this policy will not prejudice

your rights under this insurance. However, this provision does not affect our right to collect additional premium or to exercise our rights of cancellation or nonrenewal in accordance with applicable insurance laws or regulations.

Q. REASONABLE FORCE – BODILY INJURY OR PROPERTY DAMAGE

The following replaces Exclusion a., **Expected Or Intended Injury**; in Paragraph 2. of **SECTION I – COVERAGES – COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY**:

a. Expected or Intended Injury or Damage

"Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect any person or property.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

BLANKET ADDITIONAL INSURED (CONTRACTORS)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

1. WHO IS AN INSURED – (Section II) is amended to include any person or organization that you agree in a "written contract requiring insurance" to include as an additional insured on this Coverage Part, but:
 - a) Only with respect to liability for "bodily injury", "property damage" or "personal injury"; and
 - b) If, and only to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" to which the "written contract requiring insurance" applies. The person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.
2. The insurance provided to the additional insured by this endorsement is limited as follows:
 - a) In the event that the Limits of Insurance of this Coverage Part shown in the Declarations exceed the limits of liability required by the "written contract requiring insurance", the insurance provided to the additional insured shall be limited to the limits of liability required by that "written contract requiring insurance". This endorsement shall not increase the limits of insurance described in Section III – Limits Of Insurance.
 - b) The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services, including:
 - i. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
 - ii. Supervisory, inspection, architectural or engineering activities.
- c) The insurance provided to the additional insured does not apply to "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless the "written contract requiring insurance" specifically requires you to provide such coverage for that additional insured, and then the insurance provided to the additional insured applies only to such "bodily injury" or "property damage" that occurs before the end of the period of time for which the "written contract requiring insurance" requires you to provide such coverage or the end of the policy period, whichever is earlier.
3. The insurance provided to the additional insured by this endorsement is excess over any valid and collectible "other insurance", whether primary, excess, contingent or on any other basis, that is available to the additional insured for a loss we cover under this endorsement. However, if the "written contract requiring insurance" specifically requires that this insurance apply on a primary basis or a primary and non-contributory basis, this insurance is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured for such loss, and we will not share with that "other insurance". But the insurance provided to the additional insured by this endorsement still is excess over any valid and collectible "other insurance", whether primary, excess, contingent or on any other basis, that is available to the additional insured when that person or organization is an additional insured under such "other insurance".
4. As a condition of coverage provided to the additional insured by this endorsement:
 - a) The additional insured must give us written notice as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, such notice should include:

COMMERCIAL GENERAL LIABILITY

- i. How, when and where the "occurrence" or offense took place;
 - ii. The names and addresses of any injured persons and witnesses; and
 - iii. The nature and location of any injury or damage arising out of the "occurrence" or offense.
- b) If a claim is made or "suit" is brought against the additional insured, the additional insured must:
- i. Immediately record the specifics of the claim or "suit" and the date received; and
 - ii. Notify us as soon as practicable.
- The additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.
- c) The additional insured must immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- d) The additional Insured must tender the defense and indemnity of any claim or "suit" to

any provider of "other insurance" which would cover the additional insured for a loss we cover under this endorsement. However, this condition does not affect whether the insurance provided to the additional insured by this endorsement is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured as described in paragraph 3. above.

5. The following definition is added to SECTION V. – DEFINITIONS:

"Written contract requiring insurance" means that part of any written contract or agreement under which you are required to include a person or organization as an additional insured on this Coverage Part, provided that the "bodily injury" and "property damage" occurs and the "personal injury" is caused by an offense committed:

- a. After the signing and execution of the contract or agreement by you;
- b. While that part of the contract or agreement is in effect; and
- c. Before the end of the policy period.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

OTHER INSURANCE – ADDITIONAL INSURED

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

PROVISIONS

COMMERCIAL GENERAL LIABILITY CONDITIONS
(Section IV), Paragraph 4. (Other Insurance), is
amended as follows:

- 1. The following is added to Paragraph a. Primary Insurance:**

However, if you specifically agree in a written contract or written agreement that the insurance provided to an additional insured under this Coverage Part must apply on a primary basis, or a primary and non-contributory basis, this insurance is primary to other insurance that is available to such additional insured which covers such additional insured as a named insured, and we will not share with that other insurance, provided that:

- a. The "bodily injury" or "property damage" for which coverage is sought occurs; and

- b. The "personal injury" or "advertising injury" for which coverage is sought arises out of an offense committed**

subsequent to the signing and execution of that contract or agreement by you.

2. The first Subparagraph (2) of Paragraph b. **Excess Insurance** regarding any other primary insurance available to you is deleted.
3. The following is added to Paragraph b. **Excess Insurance**, as an additional subparagraph under Subparagraph (1):

That is available to the insured when the insured is added as an additional insured under any other policy, including any umbrella or excess policy.



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET ADDITIONAL INSURED – PRIMARY AND NON-CONTRIBUTORY WITH OTHER INSURANCE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

PROVISIONS

1. The following is added to Paragraph **A.1.c., Who Is An Insured**, of **SECTION II – COVERED AUTOS LIABILITY COVERAGE**:

This includes any person or organization who you are required under a written contract or agreement between you and that person or organization, that is signed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, to name as an additional insured for Covered Autos Liability Coverage, but only for damages to which this insurance applies and only to the extent of that person's or organization's liability for the conduct of another "insured".

2. The following is added to Paragraph **B.5., Other Insurance** of **SECTION IV – BUSINESS AUTO CONDITIONS**:

Regardless of the provisions of paragraph a. and paragraph d. of this part 5. **Other Insurance**, this insurance is primary to and non-contributory with applicable other insurance under which an additional insured person or organization is the first named insured when the written contract or agreement between you and that person or organization, that is signed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, requires this insurance to be primary and non-contributory.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET ADDITIONAL INSURED

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

The following is added to Paragraph c. in A.1., **Who Is An Insured**, of **SECTION II – COVERED AUTOS LIABILITY COVERAGE** in the **BUSINESS AUTO COVERAGE FORM** and Paragraph e. in A.1., **Who Is An Insured**, of **SECTION II – COVERED AUTOS LIABILITY COVERAGE** in the **MOTOR CARRIER COVERAGE FORM**, whichever Coverage Form is part of your policy:

This includes any person or organization who you are required under a written contract or agreement

between you and that person or organization, that is signed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, to name as an additional insured for Covered Autos Liability Coverage, but only for damages to which this insurance applies and only to the extent of that person's or organization's liability for the conduct of another "insured".

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET WAIVER OF SUBROGATION

This endorsement modifies insurance provided under the following:

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

The following replaces Paragraph **A.5., Transfer of Rights Of Recovery Against Others To Us**, of the **CONDITIONS** Section:

5. Transfer Of Rights Of Recovery Against Others To Us

We waive any right of recovery we may have against any person or organization to the extent

required of you by a written contract executed prior to any "accident" or "loss", provided that the "accident" or "loss" arises out of the operations contemplated by such contract. The waiver applies only to the person or organization designated in such contract.



**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY**

ENDORSEMENT WC 00 03 13 (00) - 001

POLICY NUMBER: (TC2KUB-5H60016-1-17)

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

SCHEDULE

DESIGNATED PERSON:

DESIGNATED ORGANIZATION:

**ANY PERSON OR ORGANIZATION FOR WHICH THE INSURED HAS
AGREED BY WRITTEN CONTRACT EXECUTED PRIOR TO LOSS TO
FURNISH THIS WAIVER.**

DATE OF ISSUE: 10-20-17

ST ASSIGN:

Sunbiz.org



Detail by Officer/Registered Agent Name

Foreign Profit Corporation
FORTILINE, INC.

Filing Information

Document Number F10000004477
FEI/EIN Number 57-0819190
Date Filed 10/04/2010
State SC
Status ACTIVE
Last Event NAME CHANGE AMENDMENT
Event Date Filed 06/07/2012
Event Effective Date NONE

Principal Address

7025 NORTHWINDS DR NW
CONCORD, NC 20827

Changed: 04/30/2012

Mailing Address

7025 NORTHWINDS DR NW
CONCORD, NC 20827

Changed: 04/30/2012

Registered Agent Name & Address

COGENCY GLOBAL INC.
115 North Calhoun St.
Suite 4
Tallahassee, FL 32301

Name Changed: 08/26/2011

Address Changed: 07/07/2015

Officer/Director Detail

Name & Address

Title VP

PAINTER, JASON
7025 NORTHWINDS DR NW
CONCORD, NC 20827

Title CEO

Swedick, Mike
7025 Northwinds Drive NW
Concord, NC 28027-3334

Title VP

Cagle, Ben
7025 NORTHWINDS DR NW
CONCORD, NC 20827

KNOWLEDGE • EXPERIENCE • SERVICE

FOR ADDITIONAL LOCATIONS AND INFORMATION, VISIT US ON THE WEB AT WWW.FORTILINE.COM