

# JAVIER HINOJOSA ENGINEERING/Consulting Engineers

## MEMORANDUM

To: Hidalgo County Purchasing Department  
Attn: Rocio Villarreal, Contracts Manager

From: Javier Hinojosa, P.E. *JH*

Subject: **Hidalgo County Precinct No. 3  
Anzalduas Boat Ramp**

Date: June 18, 2007

Attached please find the Exhibits A – G for your use in preparing the contract for Javier Hinojosa Engineering for the subject project. This contract will only involve the preparation of the site improvement survey and topographic survey of the Boat Ramp and pier area at Anzalduas Park. Our fee for this project will be a fixed fee of \$5,500.00. Please prepare the contracts at your earliest convenience and let me know if any additional information is required. Your assistance in this matter is greatly appreciated.

416 E. Dove Avenue

McAllen, Texas 78504

Tel: (956) 668-1588

Fax: (956) 994-8102

[javhin@rgv.rr.com](mailto:javhin@rgv.rr.com)

## EXHIBIT "A"

### Services to be Provided by the Owner

The following provides an outline of the services to be provided by the **Owner** in the development of the **Project**.

The **Owner** will provide to the **Engineer** the following:

- 1) Authorization to the Engineer to begin work.
- 2) Payment for work performed by the engineer.
- 3) Assistance to the Engineer, as necessary, to obtain required data and information from other local, regional, and state agencies that the Engineer cannot easily obtain.
- 4) Provide any available relevant data that may on file concerning the Project.
- 5) Provide timely review and decisions in response to the Engineers request for information and/or submittals and deliverables.
- 6) Attend and participate in progress meetings as required and as coordinated and conducted by the Engineer.
- 7) Provide assistance to Engineer where necessary and possible with Owner information/resources to ensure project is completed within timely/efficient basis.

**EXHIBIT "B"**  
**Services to be provided by the Engineer**

The following provides an outline of the services to be provided by the **Engineer** in the development of the **Project**.

The ENGINEER will evaluate and survey the current existing site improvements for the Hidalgo County Precinct No. 3 Anzalduas Boat Ramp and Pier as follows:

- Review existing conditions to develop the survey criteria;
- Conduct field surveys to obtain information on existing conditions and topography on the existing boat ramp and pier;
- Prepare a site survey based on the existing conditions including topography and site improvements;

## **EXHIBIT "C"**

### **Work Schedule**

For this Agreement, the **Engineer** shall prepare a work schedule for the work identified in EXHIBIT "B" in accordance with each Work Authorization in compliance with the following:

- ◆ Review existing conditions
- ◆ Conduct field surveys to obtain information for preparation of final site survey

The **Engineer** will diligently pursue the completion of each authorization as defined by the milestones and deliverable due dates outlined in the approved work schedule.

The **Engineer** will inform the **Owner** (in reasonable advance of the delay) should the **Engineer** encounter delays that would prevent the performance of all work in accordance with the established work schedule.

**EXHIBIT "D"**  
**ENGINEER'S CONTRACT RATES**

**HOURLY RATES:**

Principal	\$120.00/Hr.
Project Manager	\$ 78.00/Hr.
Project Engineer	\$ 70.00/Hr.
R.P.L.S.	\$ 70.00/Hr.
G.P.S. Survey Crew	\$ 95.00/Hr.
3 Man Survey Crew	\$ 80.00/Hr.
2 Man Survey Crew	\$ 70.00/Hr.
Party Chief	\$ 40.00/Hr.
CADD/Designer	\$ 48.00/Hr.
Clerical	\$ 15.00/Hr.



**PART 6. RESPONSIBILITIES AND OBLIGATIONS**

This Authorization does not waive the parties' responsibilities and obligations provided under the **Agreement**.

**PART 7. ACKNOWLEDGEMENT AND CONFIRMATION**

Acknowledgement and confirmation by Hidalgo County Precinct No. \_\_\_\_  
Commissioner \_\_\_\_\_ as to content and detail of this Work Authorization No. #  
\_\_\_\_\_.

HIDALGO COUNTY  
COMMISSIONER PRECINCT NO. \_\_:

BY: \_\_\_\_\_

**PART 8. ACCEPTANCE AND APPROVAL**

This Work Authorization is hereby accepted, approved by Hidalgo County  
Commissioners' Court on \_\_\_\_ (DATE) \_\_\_\_ as indicated below and effective as of \_\_\_\_  
day of \_\_\_\_\_, 2007.

THE ENGINEER:  
JAVIER HINOJOSA ENGINEERING

THE OWNER:  
HIDALGO COUNTY

\_\_\_\_\_  
By: Javier Hinojosa, P.E, Owner

\_\_\_\_\_  
By: Juan D Salinas III, County Judge  
or Presiding Officer

ATTEST:

\_\_\_\_\_  
by: Arturo Guajardo Jr., County Clerk

**LIST OF ATTACHMENTS**

- ATTACHMENT "A" - Service to be Provided by the Owner
- ATTACHMENT "B" - Services to be Provided by the Engineer
- ATTACHMENT "C" - Work Schedule
- ATTACHMENT "D" - Cost Proposal

**EXHIBIT "F"**

Supplemental Agreement Form

THE STATE OF TEXAS §  
  §  
COUNTY OF HIDALGO §

**SUPPLEMENTAL AGREEMENT NO. \_\_\_\_\_**  
**TO AGREEMENT FOR PROFESSIONAL SERVICES**

**THIS SUPPLEMENTAL AGREEMENT** is made pursuant to the terms and conditions of Article 8 of the **Agreement** made by and between **HIDALGO COUNTY**, acting herein by and through the Commissioner's Court, hereinafter called the "**Owner**", and \_\_\_\_\_, professional engineers of \_\_\_\_\_, Texas, hereinafter called the "**Engineer**".

WITNESSETH

**WHEREAS**, the **Owner** and the **Engineer** executed the Agreement on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ concerning engineering for \_\_\_\_\_ (hereinafter referred to as the "**Project**"); and

**WHEREAS**, Article \_\_\_\_ of the Agreement, (article title), establishes \_\_\_\_\_; and,

**WHEREAS**, it has become necessary to amend the contract to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AGREEMENT**

**NOW THEREFORE**, premises considered, the **Owner** and the **Engineer** agree that said Agreement is amended as follows:

- I. Article \_\_\_\_ of the Agreement, (article title) is revised to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All other provisions are unchanged and remain in full force and effect.

**IN WITNESS WHEREOF**, the Engineer and the Owner have caused this Supplemental Agreement to the Agreement for Professional Services to be executed as of the \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

**THE ENGINEER:**

**THE OWNER:  
HIDALGO COUNTY**

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

By: \_\_\_\_\_  
Juan D Salinas III, County Judge

**EXHIBIT "G"**  
**Certificate of Insurance Form – Hidalgo County**

**Hidalgo County**  
**CERTIFICATE OF INSURANCE**



**NOTE:** Copies of the endorsements listed below are not required as attachments to this certificate.

The named Engineer, Consultant or Contractor shall not commence work until he/she has obtained the minimum insurance specified in Section II, below, and obtained the following endorsements: **Hidalgo County** as an **Additional Insured** for coverages 3 and 4, and a **Waiver of Subrogation** in favor of the **Hidalgo County** under coverages 2, 3 and 4. Only certificates of insurance published by **Hidalgo County** are acceptable as proof of insurance; commercial carriers' certificates are unacceptable.

**SECTION I IDENTIFICATION DATA**

1.1 Insured Name (of Engineer, Consultant or Contractor) **JAVIER HINOJOSA ENGINEERING**

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1.2 Street/Mailing Address **416 E. DOVE AVENUE**

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1.3 City <b>McALLEN</b>	1.4 State <b>TEXAS</b>	1.5 Zip <b>78504</b>
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1.6 Phone Number  
 Area Code ( **956** ) **668-1588**

**SECTION II TYPE OF INSURANCE**

Type	Policy Number:	Effective Date:	Expiration Date:	Limits of Liability Not Less Than:
<b>2. WORKERS' COMPENSATION</b>				
	2.1 <b>N0707-71-94</b>	2.2 <b>12/01/06</b>	2.3 <b>12/01/07</b>	Statutory Texas
Endorsed with a Waiver of Subrogation in favor of Hidalgo County.				
<b>3. COMMERCIAL GENERAL LIABILITY</b>				
Bodily Injury/Property Damage	3.1 _____	3.2 _____	3.3 _____	\$1,000,000 combined single limit each occurrence and in the aggregate
Endorsed with Hidalgo County as an Additional Insured and endorsed with a Waiver of Subrogation in favor of Hidalgo County.				
<b>4. TEXAS BUSINESS AUTOMOBILE POLICY</b>				
A. Bodily Injury	4.1 <b>06939-88-05</b>	4.2 <b>03/29/07</b>	4.3 <b>03/29/08</b>	\$250,000 ea. Person \$500,000 ea. Occurrence
B. Property Damage	4.4 <b>06939-88-05</b>	4.5 <b>03/29/07</b>	4.6 <b>03/29/08</b>	\$100,000 ea. Occurrence
Endorsed with Hidalgo County as an Additional Insured and endorsed with a Waiver of Subrogation in favor of Hidalgo County.				
<b>5. PROFESSIONAL LIABILITY</b>				
	5.1 _____	5.2 _____	5.3 _____	\$1,000,000 combined single limit each occurrence and in the aggregate

**SECTION III CERTIFICATION**

This Certificate of Insurance neither affirmatively or negatively amends, extends, or alters the coverage afforded by the above insurance policies issued by the insurance company named below.  
 Cancellation of the insurance policies shall not be made until THIRTY DAYS AFTER the undersigned agent or his/her company has sent written notices by certified mail to the Engineer, Consultant or Contractor and **Hidalgo County**.  
**THIS IS TO CERTIFY to HIDALGO COUNTY** that the insurance policies above meet all the requirements stipulated above and such policies are in full force and effect.

6.1 Name of Insurance Company <b>Farmers Insurance Exchange</b>			7.1 Name of Authorized Agent <b>Wm. Carl Davis</b>		
6.2 Company Address <b>4680 Wilshire Blvd.</b>			7.2 Agent's Address <b>2030 E. Griffin Parkway</b>		
6.3 City <b>Los Angeles</b>	6.4 State <b>CA</b>	6.5 Zip <b>90010</b>	7.3 City <b>Mission</b>	7.4 State <b>TX</b>	7.5 Zip <b>78572</b>
7.6 Authorized Agent's Phone No. Area Code ( <b>956</b> ) <b>581-9838</b>			Original Signature of Authorized Agent 		
			Date <b>6/18/07</b>		

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1.1 Insured Name (of Engineer, Consultant or Contractor) **JAVIER HINOJOSA ENGINEERING**

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1.2 Street/Mailing Address **416 E. DOVE AVENUE**

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1.3 City <b>McALLEN</b>	1.4 State <b>TEXAS</b>	1.5 Zip <b>78504</b>
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1.6 Phone Number  
 Area Code ( **956** ) **668-1588**

**SECTION II TYPE OF INSURANCE**

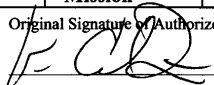
Type	Policy Number:	Effective Date:	Expiration Date:	Limits of Liability Not Less Than:
<b>2. WORKERS' COMPENSATION</b>	2.1 _____	2.2 _____	2.3 _____	Statutory Texas
Endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>3. COMMERCIAL GENERAL LIABILITY</b>	3.1 <b>CP9002401-03</b>	3.2 <b>6/28/07</b>	3.3 <b>6/28/08</b>	\$1,000,000 combined single limit each occurrence and in the aggregate
Endorsed with <b>Hidalgo County</b> as an <b>Additional Insured</b> and endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>4. TEXAS BUSINESS AUTOMOBILE POLICY</b>				
A. Bodily Injury	4.1 _____	4.2 _____	4.3 _____	\$250,000 ea. Person \$500,000 ea. Occurrence
B. Property Damage	4.4 _____	4.5 _____	4.6 _____	\$100,000 ea. Occurrence
Endorsed with <b>Hidalgo County</b> as an <b>Additional Insured</b> and endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>5. PROFESSIONAL LIABILITY</b>	5.1 _____	5.2 _____	5.3 _____	\$1,000,000 combined single limit each occurrence and in the aggregate

**SECTION III CERTIFICATION**

This Certificate of Insurance neither affirmatively or negatively amends, extends, or alters the coverage afforded by the above insurance policies issued by the insurance company named below.

Cancellation of the insurance policies shall not be made until THIRTY DAYS AFTER the undersigned agent or his/her company has sent written notices by certified mail to the Engineer, Consultant or Contractor and **Hidalgo County**.

**THIS IS TO CERTIFY to HIDALGO COUNTY** that the insurance policies above meet all the requirements stipulated above and such policies are in full force and effect.

6.1 Name of Insurance Company <b>National Lloyds Insurance Company</b>			7.1 Name of Authorized Agent <b>Wm. Carl Davis</b>		
6.2 Company Address <b>P.O. Box 2650</b>			7.2 Agent's Address <b>2030 E. Griffin Parkway</b>		
6.3 City <b>Waco</b>	6.4 State <b>TX</b>	6.5 Zip <b>76702</b>	7.3 City <b>Mission</b>	7.4 State <b>TX</b>	7.5 Zip <b>78572</b>
7.6 Authorized Agent's Phone No. Area Code ( <b>956</b> ) <b>581-9838</b>			Original Signature of Authorized Agent 		
			Date <b>6-18-07</b>		

# EXHIBIT "G"

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Type	Policy Number:	Effective Date:	Expiration Date:	Limits of Liability Not Less Than:
<b>2. WORKERS' COMPENSATION</b>				
	2.1 _____	2.2 _____	2.3 _____	Statutory Texas
Endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>3. COMMERCIAL GENERAL LIABILITY</b>				
Bodily Injury/Property Damage	3.1 _____	3.2 _____	3.3 _____	\$1,000,000 combined single limit each occurrence and in the aggregate
Endorsed with <b>Hidalgo County</b> as an <b>Additional Insured</b> and endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>4. TEXAS BUSINESS AUTOMOBILE POLICY</b>				
A. Bodily Injury	4.1 _____	4.2 _____	4.3 _____	\$250,000 ea. Person \$500,000 ea. Occurrence
B. Property Damage	4.4 _____	4.5 _____	4.6 _____	\$100,000 ea. Occurrence
Endorsed with <b>Hidalgo County</b> as an <b>Additional Insured</b> and endorsed with a <b>Waiver of Subrogation</b> in favor of <b>Hidalgo County</b> .				
<b>5. PROFESSIONAL LIABILITY</b>				
	5.1 <u><b>AE812342</b></u>	5.2 <u><b>12/01/06</b></u>	5.3 <u><b>12/01/07</b></u>	\$1,000,000 combined single limit each occurrence and in the aggregate

### SECTION III CERTIFICATION

This Certificate of Insurance neither affirmatively or negatively amends, extends, or alters the coverage afforded by the above insurance policies issued by the insurance company named below.  
 Cancellation of the insurance policies shall not be made until THIRTY DAYS AFTER the undersigned agent or his/her company has sent written notices by certified mail to the Engineer, Consultant or Contractor and **Hidalgo County**.  
**THIS IS TO CERTIFY to HIDALGO COUNTY** that the insurance policies above meet all the requirements stipulated above and such policies are in full force and effect.

6.1 Name of Insurance Company <b>Evanston Insurance Company</b>			7.1 Name of Authorized Agent <b>Wm. Carl Davis</b>		
6.2 Company Address <b>Ten Parkway North</b>			7.2 Agent's Address <b>2030 E. Griffin Parkway</b>		
6.3 City <b>Deerfield</b>	6.4 State <b>IL</b>	6.5 Zip <b>60015</b>	7.3 City <b>Mission</b>	7.4 State <b>TX</b>	7.5 Zip <b>78572</b>
7.6 Authorized Agent's Phone No. Area Code ( <b>956</b> ) <b>581-9838</b>			Original Signature of Authorized Agent  Date <b>6-18-07</b>		

Hidalgo County  
Certificate of Insurance Requirements

Only the Hidalgo County Certificate of Insurance (COI) forms are acceptable as proof of insurance.

The named insured on the COI and the name of the Engineer, Consultant, or Contractor, as it appears on the Agreement for Professional Services, must be the same.

The signature of the agent must be original in ink; stamped/typed/printed signatures are unacceptable.

**WORKER'S COMPESATION**

The following requirements apply to *WORKER'S COMPENSATION* coverage:

- If the Engineer, Consultant, or Contractor has *any* employees, in addition to himself/herself, then the Engineer, Consultant, or Contractor is required to have workers' compensation insurance.
- The word STATUTORY, under limits of liability, means that the benefits allowed under the Texas Workers' Compensation Law will be paid by the insurer.
- Relatives of the Engineer, Consultant or Contractor (spouse, sons, daughters) must be covered by workers' compensation insurance.

GROUP HEALTH insurance may not be substituted for *WORKERS' COMPENSATION* insurance.

**COMMERCIAL GENERAL LIABILITY**

*COMMERCIAL GENERAL & PROFESSIONAL LIABILITY* insurance is usually sold in only Combined Single Limit coverage. In the event the coverages are specified separately, they must be *at least* these amounts:

Bodily Injury	-	\$750,000 each occurrence
Property Damage	-	\$250,000 each occurrence
		\$1,000,000 aggregate

**Note:** This coverage was previously known as Comprehensive General Liability insurance. Some older policies may still carry this identification. This is acceptable.

MANUFACTURERS' AND CONTRACTORS' LIABILITY insurance is not an acceptable substitute for COMMERCIAL GENERAL LIABILITY insurance.

**TEXAS BUSINESS AUTOMOBILE POLICY**

The coverage amount for a *TEXAS BUSINESS AUTOMOBILE POLICY* may be shown as a minimum of \$1,000,000 Combined Single Limit for bodily injury and property damage by a typed or printed entry and deletion of the specific amounts listed for Bodily Injury and Property Damage.

BASIC AUTOMOBILE LIABILITY insurance is *not* an acceptable substitute for a TEXAS BUSINESS AUTOMOBILE POLICY or COMPREHENSIVE AUTOMOBILE LIABILITY insurance.

Hidalgo County / Javier Hinojosa Engineering>  
"Precinct No. 3 - Aerial Photography Project "

**EXHIBIT "G"**  
Page 5 of 5