



# FULCRUM

## CONSULTING SERVICES

PLANNERS \* ENGINEERS \* ARCHITECTS

January 12, 2017

Mr. Arturo Aleman, Mayor  
City of Progreso  
300 N. FM 1015  
Progreso, Texas 78579

RE: City of Progreso - Street Improvement Project  
O.G. Construction Company, LLC. – Letter of Recommendation

Dear Mayor Aleman:

On Wednesday, January 4, 2017 bids were received and opened for the City of Progreso, Street Improvement Project Hidalgo Urban County Project No. 5016-65-0311-5000-6500-UCP-ML. A total of nine (9) bids were received as shown in the attached bid tabulation.

The bid page submitted by low bidder O.G. Construction Company, LLC reflected a total base bid of \$178,257.25. All figures have been verified for correctness and are without any mathematical errors, as such, the bid is accepted as is. Our engineering firm has completed the necessary investigations concerning the contractor providing the lowest responsible bid for the above reference project.

Mr. Omar F. Garcia, Managing Member for O.G. Construction Company, LLC has completed other Hidalgo Urban County Projects similar in scope and has the necessary work experience and equipment resources to complete the proposed project. Based on the research conducted, our office recommends the contract for the City of Progreso Street Improvement Project totaling \$178,257.25 be awarded to O.G. Construction Company, LLC subject to the availability of funding needed for the project.

Please call me, if you should have any questions or concerns regarding this matter. Thank you.

Sincerely,  
Fulcrum Consulting Services

Daniel Campos, P.E.  
Senior Project Engineer

XC: Mrs. Monica Leal – UCP Project Coordinator

# HIDALGO COUNTY PURCHASING DEPARTMENT BID TABULATION SHEET

**DEPARTMENT NAME: HIDALGO COUNTY – URBAN COUNTY PROGRAM**

**BID OPENING DATE: January 4, 2017**

**BID OPENING TIME: 9:30 A.M.**

**DESCRIPTION OF BID: City of Progreso - Street Improvements Project**

**BID NO: 5016-65-0311-5000-6500-UCP-ML**  
**Addendum 1 Required**

**PROCUREMENT SPECIALIST:**

<b>BID # RFB #</b>	<b>NAME OF COMPANY</b>	<b>Acknowledgement of Addendum 1</b>	<b>BASE BID</b>	<b>BID BOND OR CHECK INCLUDED</b>
#1	G & T Paving, LLC	ACKNOWLEDGED	\$244,407.68	INCLUDED
#2	Jimmy Closner & Sons Const. Co., Inc.	ACKNOWLEDGED	\$416,767.00	INCLUDED
#3	RDH Site & Concrete, LLC	ACKNOWLEDGED	\$317,120.50	INCLUDED
#4	Earthworks Enterprise	ACKNOWLEDGED	\$200,010.70	INCLUDED
#5	Diamond Eight Industries, LLC	ACKNOWLEDGED	\$246,645.75	INCLUDED
#6	Clore Construction	NOT ACKNOWLEDGED	\$343,957.49	INCLUDED
#7	O. G. Construction, LLC	ACKNOWLEDGED	\$178,257.25	INCLUDED
#8	J. M. Construction	ACKNOWLEDGED	\$191,996.50	INCLUDED
#9	GNH Company, LLC	ACKNOWLEDGED	\$203,174.00	INCLUDED
#10				
#11				
#12				
#13				

**\*TYPED AS READ AT BID OPENING, AMOUNTS NOT VERIFIED/CALCULATED**

**CONSTRUCTION  
CONTRACT**

This Agreement entered into this **February 6, 2017** by and between Hidalgo County acting by and through Hidalgo County Urban County Program, hereinafter called the "OWNER", acting herein through its County Judge and **OG Construction Co., LLC (a limited liability company)** (a partnership) (an individual) of **Edinburg**, State of Texas, hereinafter called "CONTRACTOR".

**WITNESSETH**

That for and in consideration of the payments and agreements hereinafter mentioned, to be made and performed by the OWNER, the CONTRACTOR hereby agrees with the OWNER to commence and complete the construction described as follows:

**PROJECT NAME:** **City of Progreso – Street Improvements Project**  
**PROJECT No.:** **5016-65-0311-5000-6500-UCP-ML**  
**PROJECT DESCRIPTION:** **Street Improvements Project**

hereinafter called the project, for the sum of **(\$178,257.25) One Hundred Seventy-Eight Thousand Two Hundred fifty-Seven dollars and twenty-five cents** and all extra work in connection therewith, under the terms as stated in the General and Special Conditions of the Contract; and at his (its or their) own proper cost and expense to furnish all the materials, supplies, machinery, equipment, tools, superintendence, labor, insurance, and other accessories and services necessary to complete the said project in accordance with the conditions and prices stated in the Proposal, the General Conditions, Supplemental General Conditions and Special Conditions of the contract, the plans, which include all maps, plats, blue prints, and other drawings and printed or written explanatory matter thereof, the specifications and contract documents therefore as prepared by **Fulcrum Consulting Services** and as enumerated in Paragraph 1 of the Supplemental General Conditions, all of which are made a part hereof and collectively evidence and constitute the contract.

The CONTRACTOR hereby agrees to commence work under this contract on or after a date to be specified in a written "Notice to Proceed" of the OWNER and to fully complete the project within **(60) Sixty** consecutive calendar days thereafter. The CONTRACTOR further agrees to pay, as liquidated damages, the sum of **(\$500.00) Five hundred dollars and zero cents** for each consecutive calendar day thereafter as hereinafter provided in Paragraph 19 of the General Conditions.

The OWNER agrees to pay the CONTRACTOR in current funds for the performance of the contract, subject to additions and deductions, as provided in the General Conditions of the contract, and to make payments on account thereof as provided in Paragraph 25, "Payments to Contractor", of the General Conditions.

IN WITNESS WHEREOF, the parties to these presents have executed this contract in four (4) counterparts, each of which shall be deemed an original, in year and day first above mentioned.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/18/2017

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 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).

<b>PRODUCER</b> MS&B Bonds and Insurance Services 1421 Hanz Drive  New Braunfels TX 78130	<b>CONTACT NAME:</b> Doug Brewka <b>PHONE (A/C, No, Ext):</b> (830) 387-7019 <b>E-MAIL ADDRESS:</b> dbrewka@msbbonds.com		<b>FAX (A/C, No):</b> (830) 387-7022
	<b>INSURER(S) AFFORDING COVERAGE</b>		
<b>INSURED</b> OG Construction Co., LLC 4021 N. Closner Blvd  Edinburg TX 78541	<b>INSURER A:</b> Southwest Risk		<b>NAIC #</b>
	<b>INSURER B:</b> Union Standard Ins Group		<b>43435</b>
	<b>INSURER C:</b> Service Lloyds		
	<b>INSURER D:</b> Liberty Mutual		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES**      **CERTIFICATE NUMBER:** CL1682609311      **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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		3C51918	8/29/2016	8/29/2017	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 - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Physical Damage		CAA4695484-12	8/29/2016	8/29/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ UIM UM Conversion \$ 1,000,000
A	<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 type="checkbox"/> RETENTION \$		MKLV4EUL100230	8/29/2016	8/29/2017	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 Products/Completed Ops \$ 1,000,000
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N/A	WC0094984-2016A	8/29/2016	8/29/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	<b>Inland Marine</b> <b>Leased/Rented Equipment</b>		8232415	8/29/2016	8/29/2017	Limit Per Item \$250,000 Limit Per Occurrence \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 The General Liability policy includes a blanket automatic additional insured endorsement [provision] that provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status. The General Liability and Workers Compensation policies includes a blanket automatic waiver of subrogation endorsement that provides this feature only when there is a written contract between the named insured and the certificate holder that requires it. The General Liability policy contains a special provision with "Primary and Noncontributory" wording.

<b>CERTIFICATE HOLDER</b>  Hidalgo County Urban County Program 427 E. Duranta Ave. Suite 107 Alamo, TX 78516	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  Tom Brewka/BREWKD

© 1988-2014 ACORD CORPORATION. All rights reserved.

## COMMENTS/REMARKS

Project: City of Progresso Street Improvements Project - Bid No.:  
5016-65-0311-5000-6500-UCP-ML

**CERTIFICATE OF INTERESTED PARTIES**

**FORM 1295**

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY  
CERTIFICATION OF FILING**

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**

O.G. Construction Co., LLC  
EDINBURG, TX United States

**Certificate Number:**  
2017-156698

**Date Filed:**  
01/20/2017

**Date Acknowledged:**

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**

Hidalgo County

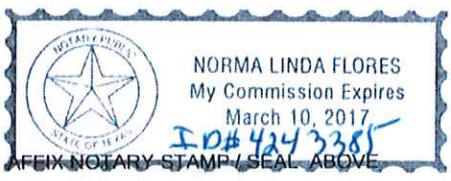
**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

5016-65-0311-5000-6500-UCP-ML  
Street Improvements

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Garcia, Omar	Edinburg, TX United States	X	

**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*[Signature]*  
\_\_\_\_\_  
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Omar F Garcia, this the 20 day of Jan, 202017, to certify which, witness my hand and seal of office.

*[Signature]* Signature of officer administering oath  
Norma L Flores Printed name of officer administering oath  
Notary Title of officer administering oath

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

## OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:  
 2017-156690

Date Filed:  
 01/20/2017

Date Acknowledged:  
 01/31/2017

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

O.G. Construction Co., LLC  
 EDINBURG, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Hidalgo County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

5016-05-0310-5000-0500-UCP-ML  
 Water Line Improvements

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Garcia, Omar	Edinburg, TX United States	X	

5 Check only if there is NO Interested Party.

6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

\_\_\_\_\_  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath