

**EXHIBIT D**  
**-Work Authorization Form**

**HIDALGO COUNTY**  
**Professional Construction**  
**Material Testing Engineer Services**

WORK AUTHORIZATION NO.   1  

**THIS WORK AUTHORIZATION is made pursuant to the terms and conditions of Section I.A. of the Agreement made by and between HIDALGO COUNTY, acting by and through the Hidalgo County Urban County Program, hereinafter called the “Owner,” and, Millenium Engineers Group, Inc. professional engineers of Pharr , Texas, hereinafter called “Engineer”.**

**PART 1. SCOPE OF WORK**

The purpose of this Work Authorization is for the “engineering services” to provide Construction material testing engineer services.

The scope of services to be provided by the Owner is identified in EXHIBIT “A” – Scope of Services to be provided by the Owner attached hereto.

The scope of services to be provided by the Engineer is identified in EXHIBIT “B” – Scope of Services to be provided by the Engineer attached hereto.

**PART 2. ESTIMATED COST**

The estimated cost for services under this Work Authorization is \$19,107.00. This amount is based upon the costs outlined in the Estimated Cost Proposal attached hereto as EXHIBIT “D”.

**PART 3. PAYMENT**

Compensation and payment to the Engineer for the services established under this Work Authorization shall be made in accordance with Article/Part/Section \_\_\_\_\_ of the Agreement.

**PART 4. FUNDING**

This Work Authorization No.   1   shall be funded through funding source:

Account No. \_\_\_\_\_

**PURCHASE ORDER NUMBER: \_\_\_\_\_ (MUST BE INCLUDED AFTER CC APPROVAL)**

**PART 5. PERIOD OF SERVICE**

This Work Authorization shall become effective on the date of final acceptance of the parties hereto, and terminate upon completion of scopes of the work authorization.

**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 Urban County Program, Patricio R. Avila, Director as to content and detail of this Work Authorization No.   1  .

**HIDALGO COUNTY  
URBAN COUNTY PROGRAM**

**BY:** \_\_\_\_\_  
Nellie Flores, Division Manager III

**PART 8. ACCEPTANCE AND APPROVAL**

This Work Authorization is hereby accepted, approved by Hidalgo County Commissioners’ Court on \_\_\_\_\_ as indicated below and effective as of 5th day of March, 2024.

**THE ENGINEER:**  
MILLENNIUM ENGINEER GROUP, INC.

**THE OWNER:**  
HIDALGO COUNTY

\_\_\_\_\_  
By: Andres Palma, P.E.

\_\_\_\_\_  
By: Richard F. Cortez, County Judge

**ATTEST:**

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

**APPROVED AS TO FORM:**

**Hidalgo County Office of the Criminal  
District Attorney Toribio “Terry” Palacios**

**By:** \_\_\_\_\_  
Victor M. Garza, Assistant District Attorney

**EXHIBIT E**  
**-Supplemental Agreement Form**

THE STATE OF TEXAS   §  
                                  §  
COUNTY OF HIDALGO   §

**SUPPLEMENTAL AGREEMENT NO.**  
**TO AGREEMENT FOR PROFESSIONAL**  
**“CONSTRUCTION MATERIAL TESTING SERVICES”**

**THIS SUPPLEMENTAL AGREEMENT** is made pursuant to the terms and conditions of paragraph 5 of the Agreement made by and between **HIDALGO COUNTY, acting herein by and through the Commissioner’s Court, hereinafter called the “Owner”**, a \_\_\_\_\_ 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 Construction Material Testing Services hereinafter referred to as the (“Project”); and,

**WHEREAS**, Paragraph \_\_\_\_ of the Agreement, (paragraph title), establishes \_\_\_\_\_; and,

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

**A. AGREEMENT**

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

**I. Paragraph \_\_\_\_** of the Agreement, (paragraph 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 \_\_\_\_\_, 2024.

**THE ENGINEER:**  
**MILLENNIUM ENGINEERS GROUPE, INC.**

**THE OWNER:**  
**HIDALGO COUNTY**

\_\_\_\_\_  
**By: Andres Palma, P.E.**

\_\_\_\_\_  
**By: Richard D. Cortez, County Judge**

**ATTEST:**

\_\_\_\_\_  
**Arturo Guajardo Jr., County Clerk**

**LIST OF ATTACHMENTS**

**(as required)**

**APPROVED AS TO FORM:**

**Hidalgo County Office of the Criminal  
District Attorney Toribio “Terry” Palacios**

**By: \_\_\_\_\_  
Victor M. Garza, Assistant District Attorney**

**EXHIBIT F**  
**-Certificates of Insurance**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/13/2024

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).

<b>PRODUCER</b> Fenner & Esler Agency, Inc 467 Kinderkamack Road P. O. Box 60 Oradell NJ 07649-0060		<b>CONTACT NAME:</b> Kevin M. Esler <b>PHONE (A/C, No, Ext):</b> (201) 262-1200 <b>E-MAIL ADDRESS:</b> certs@fenner-esler.com <b>FAX (A/C, No):</b> (201) 262-7810	
<b>INSURED</b>		<b>INSURER(S) AFFORDING COVERAGE</b>	
Millennium Engineers Group, Inc. PO Box 4569 Edinburg TX 78540		<b>INSURER A:</b> Continental Casualty Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	
		<b>NAIC #</b> 20443	

**COVERAGES**      **CERTIFICATE NUMBER:** Master 23-24      **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"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		Y	6011181339	11/22/2023	11/22/2024	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 4,000,000
							PRODUCTS - COMP/OP AGG	\$ 4,000,000
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE			6011181387	11/22/2023	11/22/2024	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
	<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		Y/N N/A				PER STATUTE	
							OTHER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	Professional & Pollution Incident Liability - Retro Date: Full Prior Acts			MCH288364872	12/12/2023	12/12/2024	Per Claim Limit	\$5,000,000
							Aggregate Limit	\$5,000,000
							Deductible per claim	\$10,000

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

RE: 2022/23 Hidalgo Flood Drainage Improvements Project; 5022/23-35-0309-5000-0000-UCP-EP; Additional Insured - Hidalgo County - Urban County Program as respects general liability where required by written contract.

**CERTIFICATE HOLDER**      **CANCELLATION**

Hidalgo County - Urban County Program 1916 Tesoro St Pharr TX 78577	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.

