

CITY COUNCIL MINUTES

August 25, 2025

Standard Purchasing Resolution 2: Award to Low Bidder Meeting Specifications – Lloyd A. Stage Nature Center Sugar and Storage Shed Replacement and **Standard Purchasing Resolution 5: Approval to Expend Budgeted Funds – Shed Design, Construction Documents & Contract Administration and Budget Amendment**
(Introduced by: Allyson Leach, Assistant Recreation Director)

Resolution #2025-08-111

Moved by Chamberlain-Creanga
Seconded by Chanda

RESOLVED, That Troy City Council hereby **AWARDS** a contract for construction of a Sugar and Storage Shed at the Lloyd A. Stage Nature Center to **Venture Building Company** of **Shelby Township, MI** for an estimated total cost of **\$209,700** plus a 10% contingency of \$20,790, at prices contained in the bid tabulation dated July 24, 2025, a copy of which shall be **ATTACHED** to the original Minutes of this meeting.

BE IT FURTHER RESOLVED, That Troy City Council hereby **AUTHORIZES** the expenditure of budgeted capital funds to **Anderson, Eckstein & Westrick, Inc.** of **Shelby Township, MI** for the Design, Construction Documents and Contract Administration Services for the construction of the Sugar and Storage Shed at the Lloyd A. Stage Nature Center in the amount of **\$48,300**.

BE IT FURTHER RESOLVED, That Troy City Council **APPROVES** a budget amendment to the Nature Center Buildings and Improvement Capital Fund and Project Number 2025C0044 in the amount of \$128,970.

BE IT FINALLY RESOLVED, That the award is **CONTINGENT** upon the contractors' submission of properly executed contract documents, including insurance certificates and all other specified requirements.

Yes: All-7
No: None

MOTION CARRIED

PURCHASE ORDER

No. 2026-00000318
DATE: 09/02/2025
PAGE: 1 of 1
FOB DESTINATION

Ship To

CITY OF TROY
Building Operations
6685 COOLIDGE
TROY, MI 48098

Bill To

CITY OF TROY
Building Operations
4693 ROCHESTER ROAD
TROY, MI 48085


COUNCIL RESOLUTION
2025-08-111

VENDOR NO. 178907

Vendor

VENTURE BUILDING COMPANY, INC
6951 23 MILE ROAD
SHELBY TOWNSHIP, MI 48316

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	Lump Sum	Nature Center Sugar and Storage Shed Construction	209,700.0000	\$209,700.00
				

Entered By: Nellie Bert

\$209,700.00

Special Instructions:

CITY COUNCIL AWARD DATE: 8/25/2025. Contract for Construction of the Sugar Shed in accordance with the specifications and completion date of ITB-COT 25-20. CERTIFICATE OF INSURANCE and ENDORSEMENTS shall be on file through contract completion.

TERMS & CONDITIONS

- Purchases of Municipalities are exempt from State Sales and Federal Excise Taxes.
- Prior to acceptance, vendor agrees to provide City with information under the Right-to-Know Law, P.A. 1986, No. 80, and fully comply with all terms and conditions of the Michigan Occupational Safety and Health Act, MCL 408.1001, et seq. including vendor shall provide City with an "MSDS". Vendor also agrees to be responsible for all required labeling.
- In cases of emergency/disaster, the City can purchase up to six(6) times the order amount for a period of six(6) months at the price contained in the contract.
- Purchase Orders are signed electronically based upon computer generated "on-line" authorized approvals. Authentic signatures are on file in the City of Troy Purchasing Department.

NOTICE: The City could put the vendor on notice that vendors will be held financially responsible for any claims or awards made against the City as a result of the vendor's action. If the City has to defend the initial lawsuit, the City will bring in the vendor as a co-defendant or sue the vendor, either as the result of settling a claim or the conclusion of the lawsuit.

I HEREBY CERTIFY THAT THIS ORDER IS PROPERLY AUTHORIZED AND APPROVED.



PURCHASE ORDER

No. 2026-00000317
DATE: 09/02/2025
PAGE: 1 of 1
FOB DESTINATION

Ship To

CITY OF TROY
Building Operations
6685 COOLIDGE
TROY, MI 48098

Bill To

CITY OF TROY
Building Operations
4693 ROCHESTER ROAD
TROY, MI 48085

VENDOR NO. 171988

Vendor

ANDERSON, ECKSTEIN & WESTRICK, INC.
51301 SCHOENHERR ROAD
SHELBY TOWNSHIP, MI 48315

COUNCIL RESOLUTION

2025-08-111


CONTRACT

2018-90000005

INSTRUCTIONS

Return to Department

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	Lump Sum	Land Improvements - Nature Center Sugar Shed Construction Services Per AEW Additional Services, No. 2 Dated 08.04.2025	27,200.0000	\$27,200.00
				

Entered By: Nellie Bert

\$27,200.00

Special Instructions:

CITY COUNCIL AWARD DATE: CITY COUNCIL AWARD DATE: 8/25/2025. Contract for Design, Construction Documents and Contract Administration Services for the Sugar and Storage Shed at the Lloyd A. Stage Nature Center. CERTIFICATE OF INSURANCE and ENDORSEMENTS shall be on file through contract completion.

TERMS & CONDITIONS

1. Purchases of Municipalities are exempt from State Sales and Federal Excise Taxes.
2. Prior to acceptance, vendor agrees to provide City with information under the Right-to-Know Law, P.A. 1986, No. 80, and fully comply with all terms and conditions of the Michigan Occupational Safety and Health Act, MCL 408.1001, et seq. including vendor shall provide City with an "MSDS". Vendor also agrees to be responsible for all required labeling.
3. In cases of emergency/disaster, the City can purchase up to six(6) times the order amount for a period of six(6) months at the price contained in the contract.
4. Purchase Orders are signed electronically based upon computer generated "on-line" authorized approvals. Authentic signatures are on file in the City of Troy Purchasing Department.

NOTICE: The City could put the vendor on notice that vendors will be held financially responsible for any claims or awards made against the City as a result of the vendor's action. If the City has to defend the initial lawsuit, the City will bring in the vendor as a co-defendant or sue the vendor, either as the result of settling a claim or the conclusion of the lawsuit.

I HEREBY CERTIFY THAT THIS ORDER IS PROPERLY AUTHORIZED AND APPROVED.



Opening Date - 07/24/2025
Date Reviewed - 07/24/2025

CITY OF TROY
BID TABULATION
SUGAR SHED

VENDOR NAME:	Venture Building Company, Inc.	Trademark Property Solutions	Usztan LLC
CITY:	Shelby Twp., MI	Oxford, MI	Oakland, MI
CHECK AMOUNT:	\$5,000.00	\$5,000.00	\$5,000.00
CHECK NUMBER:	40502964	9499913772	9171032999
PROPOSAL: CONSTRUCTION OF THE LLOYD A. STAGE NATURE CENTER SUGAR SHED			
LUMP SUM PRICE:	\$209,700.00	\$264,806.26	\$268,400.00
Warranty:	24 months	2 yr workmanship and materials provided by contractor	1 year craftsmanship
Start Date:	August 28, 2025	September 2, 2025	September 2, 2025
Anticipated Duration to Complete:	10 weeks	November 15, 2025	90 days
Attended Mandatory Pre-Bid Meeting: Y/ N	Y	Y	Y
Contact Information Provided: Y/ N	Y	Y	Y
Proposed Payment Schedule:	Not Specified	See attached payment schedule	Monthly draws for completed labor and material purchases
References: Y/ N	Y	Y	Y
Insurance: Y/ N	Y	Y	Y
Exceptions:	None	Underground wire feed upgrade if required	VOLUNTARY ALTERNATES 1. In lieu of powder coat finish on coiling door, substitute with standard painted finish – deduct \$2,300 2. If asbestos inspection report is needed, required by MIOSHA – add \$1,800 3. In lieu of FRP door, substitute with fire rated galvanized HM door and frame. Apply composite trim to replicate pattern – deduct \$18,000 4. Additional paving as per print - add \$6,500
Acknowledgement:	Y	One Signature Missing	Y
Signed Addendum:	Y	Addendum 2 Missing	Y
Forms:	Y	Y	Y
Low Bidder Meeting Specifications			

(*Bid Opening conducted via a Zoom Meeting)

ATTEST:
Joe Lagarde
Brian Goul
Andrew Chambliss
Nellie Bert
Dina Gates

No Bid: Panel Built, Inc

Emily Frontera
Purchasing Manager

CITY OF TROY
BID TABULATION
SUGAR SHED

ITB-COT 25-20
Page 2 of 2

VENDOR NAME:	National Restoration, Inc.	NRC Builders	C.E. Gleeson Constructors, Inc.
CITY:	Milford, MI	Novi, MI	Troy, MI
CHECK AMOUNT:	\$5,000.00	\$5,000.00	\$5,000.00
CHECK NUMBER:	2810703	50161319	7602
PROPOSAL: CONSTRUCTION OF THE LLOYD A. STAGE NATURE CENTER SUGAR SHED			
LUMP SUM PRICE:	\$324,000.00	\$370,000.00	\$422,700.00
Warranty:	2 year warranty	1 year	1 year
Start Date:	August 18, 2025	September 1, 2025	September 8, 2025
Anticipated Duration to Complete:	30 Days	November 15, 2025	10 weeks; November 15, 2025
Attended Mandatory Pre-Bid Meeting: Y/ N	Y	Y	Y
Contact Information Provided: Y/ N	Y	Y	Y
Proposed Payment Schedule:	One payment for 50% (less 10% retainage) when project is 50% complete, 2nd payment for 50%, less retainage, after substantial completion. Then, 10% retainage after final walkthrough	30 days - monthly	Net 30 days
References: Y/ N	Y	Y	Y
Insurance: Y/ N	Y	Y	Y
Exceptions:	None	None	AEW Requested Alternate - Additional HMA per drawing C-1: ADD \$16,050
Acknowledgement:	Y	Y	Y
Signed Addendum:	Y	N	Y
Forms:	Y	Y	Y



**CITY OF TROY
BID PROPOSAL**

ITB-COT 25-20
Page 1 of 8

The undersigned proposes to **CONSTRUCT A SUGAR SHED AT THE LLOYD A. STAGE NATURE CENTER** in accordance with the attached bid specifications that are to be considered an integral part of this proposal, at the following prices:

COMPANY NAME: Venture Building Company

The bid document contains the following sections:

Instructions to Bidders (3 pages)	Maintenance & Guarantee Bond (2 pages)
Bid Proposal (8 pages)	General Conditions (2 pages)
Forms (8 forms)	Sample Insurance Certificate & Endorsements (4 pages)
Public Act 57 (2 pages)	Statement of No Bid (1 page)
Consent of Surety - Sample (1 page)	Specifications (112 pages)
Performance Bond (1 page)	Drawings (14 pages)
Labor & Material Bond (1 page)	

PROPOSALS: The undersigned as bidder declares that he/she having examined the specifications and the site of the proposed work, and being familiar with all of the conditions surrounding the construction of the proposed project, including all necessary materials, labor and equipment for the construction of the Sugar Shed and to complete the program in accordance with the bid specifications, within the time set forth therein, and at the prices stated below. These prices are to cover all expenses incurred in performing the work required under the contract documents, of which this Proposal is part.

BID PROPOSAL: Provide all labor, materials, related equipment, tools and supervision necessary for the complete construction of the Sugar Shed as per all work herein described.

SCOPE OF WORK:

The following Scope of Work shall be used as a guide for the construction of the LLOYD A. STAGE NATURE CENTER SUGAR SHED. Should there be any discrepancies between the Scope of Work and the Specifications, the Specifications shall supersede the Scope of Work. The intent of these specifications is to describe the construction of the Sugar Shed at the Nature Center.

LOCATION(S):

Lloyd A. Stage Nature Center 6685 Coolidge Hwy. Troy, MI 48098.

Provide all labor, materials, related equipment, tools and supervision necessary for the complete construction of the Sugar Shed at the Lloyd A. Stage Nature Center as per all work herein described.

CONSTRUCTION OF THE LLOYD A. STAGE NATURE CENTER SUGAR SHED:

LUMP SUM PRICE: \$ 209,700.

COMPANY NAME: Venture Building Company, Inc.

The anticipated City Council Award Date is August 25, 2025.
Project completion shall be no later than November 15, 2025.

STATE WARRANTY:

24 months

STATE START DATE (anticipated & approximate):

Aug. 28th, 2025

ANTICIPATED DURATION TO COMPLETE:

10 weeks

UNIT PRICES :

Unit prices prevail. The City of Troy Purchasing Department will correct all mathematical errors.

PREVAILING WAGE PROJECT:

This is not a prevailing wage project.

MANDATORY PRE-BID MEETING:

Mandatory Pre-Bid Meeting will be held on JULY 10, 2025 at 10:00 AM at the Lloyd A. Stage Nature Center, located at 6685 Coolidge Hwy., Troy, MI 48098. The meeting will be held with prospective bidders to answer and/or clarify questions regarding bid specifications, drawings and site plans. All interested parties must attend, failure to do so, may result in your company considered as non-responsive and no longer eligible for award.

ADDITIONAL INFORMATION:

For additional information or questions concerning this project, please contact Mr. Dennis Trantham, Deputy Public Works Director at (248) 524-3503 or dennis.trantham@troymi.gov between the hours of 8:00 a.m. to 4:00 p.m., Monday through Friday.

SITE INSPECTIONS:

All bidders should examine the site(s) to determine the amount and scope of work to be performed as per the bid specifications. If the bidder does not conduct site inspection(s), that bidder accepts full responsibility and risk for any errors or omissions in his/her bid proposal.

PERMITS:

All work performed must meet City and State Code. The Contractor shall obtain all applicable and required permits and arrange for inspections. Applicable permits may be obtained by going to the City of Troy Building Department located on the second floor of City Hall. All Permit fees will be waived.

BID DEPOSIT AND FORFEITURE:

The bid deposit of the lowest bidder shall be forfeit if, after bid opening, a change in the bid price or other provision of the bid is required by the bidder that is prejudicial to the interest of the City of Troy or fair competition. Failure to include a pdf copy of the bid deposit check may result in rejection of the submitted proposal as non-responsive or incomplete.

AWARD:

The evaluation and award of this bid shall be a combination of factors, including but not limited to: cost, professional competence, equipment, references, and the correlation of the bid proposal submitted to the needs of the City of Troy.

The City of Troy reserves the right to award this bid to the lowest responsible bidder meeting specifications if deemed in the City's best interest to do so; to reject low bids which have major deviations from specifications; to accept a higher bid which has only minor deviations, whatever is deemed to be in the City of Troy's best interest

COMPANY NAME:

Kenture Building Company, Inc.

DOWNPAYMENTS AND PREPAYMENTS:

Any bid submitted which requires a down payment or prepayment of any kind prior to delivery of material and acceptance, as being in conformance with specifications will not be considered for award.

DELIVERY:

All materials are to be F.O.B. delivered, freight paid, to the various work sites within the City of Troy.

COMPLETION DATE:

The contractor awarded the project shall complete the work within thirty (30) days from notice to proceed and/or complete by the date of November 15, 2025.

CONTACT INFORMATION:

Name: Mike McLaughlin

Hours of operation: 7AM - 8pm 24 Hr. Contact Phone No. 586-201-9235
Monday thru Sat.

LOCAL PREFERENCE:

The City of Troy reserves the right to award a contract to a local business, one that pays City of Troy taxes (real and/or personal), if the bid of a local vendor is within 5% of the lowest responsive and responsible non-local bidder, then the local vendor is given one chance to match the low bid.

PURCHASE ORDER:

After the Troy City Council has approved the award, the City of Troy Purchasing Department will send an award notification to the successful bidder(s). The successful bidder(s) once notified, will be required to submit the specified bonds. A purchase order will be issued in approximately one-week and released, once acceptable bonds and insurance are received. A purchase order issued in conjunction with the Contract Form (provided in the Forms Section) from the City of Troy will create a bilateral contract between the parties, and the successful bidder(s) shall commit to perform the contract in accordance with specifications.

CONTRACT FORMS:

Bidders should complete the Legal Status of Bidder, Non-Collusion Affidavit, Certification regarding Debarment, the Certification regarding "Iran Linked Business" and the Familial Disclosure Forms and return with your bid proposal.

CONTRACT TERMINATION: The City of Troy shall reserve the right to terminate the contract upon written notice due to poor performance. The City of Troy designated representative will be solely responsible for determining acceptable performance levels. His/her decision will be deemed in the City of Troy's best interest and will be final. The City of Troy reserves the right to re-award the contract to the next low bidder or re-bid the contract.

TERMINATION FOR CONVENIENCE:

The City may cancel the contract for its convenience, in whole or in part, by giving the contractor written notice 30 days prior to the date of cancellation. If the City chooses to cancel this contract in part, the charges payable under this contract shall be equitably adjusted to reflect those services that are cancelled.

PROGRESS PAYMENTS:

The City of Troy will consider a progress payment schedule for work as completed in accordance with specifications. (See General Conditions, page 1 of 2). The Project Construction Manager or Designated City Representative will have final approval of the schedule as presented. No payments for work will be made until the designated City representative approves the work as complete in accordance with specifications. Prior to release of the final payment, consent of surety document (A1A Document G707) will be required and signed by the surety Company. The City of Troy reserves the right to reject the payment schedule if deemed necessary, and determine the final schedule.

Proposed Payment Schedule _____

(Please submit an attachment identified as _____ if more space is necessary.)

COMPANY NAME: Venture Building Company

REFERENCES:

The City of Troy requires that your company list at least three (3) locations, listing names of owners, addresses, and phone numbers where they have recently completed similar work in the past three (3) years.

OWNER: Shadow Pines / Bolyard Lumber Project
ADDRESS: 3833 Albatross, Rochester Hills, MI
PHONE: (248) 852-8004 CONTACT: Liz Bolyard Moore
EMAIL: liz@bolyardlumber.com

OWNER: Encore Project
ADDRESS: 25 mile & Jewel, Shelby Twp.
PHONE: (586) 524-3390 CONTACT: Phil Ruggeri
EMAIL: pruggeri@ruggierilegal.com

OWNER: N.C. Cement - Buildout
ADDRESS: 23 mile Rd
PHONE: (586) 405-9727 CONTACT: NICK
EMAIL: _____

MICHIGAN CONSTRUCTION LIEN ACT:

The bidder agrees that, if awarded the Contract he/she will abide by all requirements of the Michigan Construction Lien Act (P.A. 1980, No. 497) as amended and effective March 1, 1982, and to provide full and complete Sworn Statements on Owner-approved forms.

PUBLIC ACT 57:

Public Act 57 requires contractors to provide certain notices to governmental entities concerning improvements on real property; to allow for modifications of contracts for improvement of real property; to provide for remedies; and to repeal acts and parts of acts. This contract shall comply with all applicable provisions of Public Act 57 [a copy of the act is attached for reference (2 pages)].

BOND SUBMITTAL:

Subsequently, upon notice of award to the successful bidder, the Contractor shall qualify for, sign, and deliver to the City of Troy an executed Performance Bond, an executed Labor and Materials Payment Bond, and an executed two-year Maintenance Bond secured by a surety company, acceptable to the City of Troy by being licensed to do business in Michigan, and be included on the U. S. Treasury Department Surety List and/or have a rating of A (-) or better by A. M. Best, and/or Standard and Poor, on standard AIA forms, each in the amount of one hundred percent (100%) of the contract sum. Attorneys-in-fact who sign such bonds must attach a certified copy of their Power of Attorney when the bonds are submitted.

SUBCONTRACTORS:

The undersigned agrees to submit a list of proposed subcontractors, if applicable, for approval by the designated City representative within 72 hours after notification of being the low qualified bidder. The Contractor shall list the name and address of the proposed Subcontractors and sub-subcontractors when required by the City. Approval of a Subcontractor or sub-subcontractors will not be given unless and until it is determined by the City that he/she is qualified to perform the type and magnitude of work proposed and shall have executed a Subcontract or sub-subcontract in a form acceptable to the City. It will be understood that this may occur prior to bid award, but the bidder's status will not be final until approved by the Troy City Council.

The Contractor shall abide by the provisions set forth therein. Any item of work performed by other than the Contractor or approved Subcontractors will be considered as unauthorized and shall not be paid for under the provision of the Contract.

COMPANY NAME: Venture Building Company

COMPLETION SCHEDULE:

The work shall commence upon City Council Approval. A work schedule shall be provided to Mr. Dennis Trantham, Deputy Public Works Director. The designated City representative shall approve the work schedule prior to the start of the project. His/her decision as to acceptability shall be deemed in the City of Troy's best interest. The City of Troy is the only party to this contract that may authorize amendment of this schedule. The contractor is required to start the project within 10 working days after notification to proceed.

IMPORTANT INFORMATION:

The City shall have the right to require by written order, changes in, additions to, or deductions from the work required by the Contract Documents provided that if changes, additions, or deductions are made, the general character of the work as a whole is not changed thereby. Adjustments in the Contract price, if any, because of any change, addition, or deduction in the work, shall be determined as hereinafter provided, and any claim for extension of time for completion shall be adjusted at the time of ordering the change, addition, or deduction. No claim for change, addition, or deduction, or adjusting of price, or extension of time for completion thereof, shall be made or allowed unless done in pursuance of written order from the City specifically authorizing such change, addition, or deduction. Drawings without a written order shall not be considered such authority. Written notice of such claims shall be made to the designated City representative before the commencement of the work. Where the written order diminishes the quality of work to be done, this shall not constitute a basis for a claim for damages or anticipated profits on the work that may be dispensed with.

PREVAILING WAGES:

This is not a Prevailing Wage project.

VENDOR ASSESSMENT PROGRAM:

The City of Troy reserves the right to evaluate and assess the performance of the awarded vendor(s) periodically throughout the progress of the project and contract. The evaluation will be conducted with the vendor during a meeting where the elements of the evaluation will be discussed providing the vendor an opportunity to review the scores and provide feedback to the City of Troy. The vendor's performance assessment information may be used by the City of Troy to help evaluate the vendor's capabilities to perform other work for the City in the future.

COMPANY NAME: Venture Building Company

INSURANCE:

Insurance requirements shall be in accordance with the attached **SAMPLE INSURANCE CERTIFICATE** and **ENDORSEMENT**. The required Insurance Certificate and Endorsement must be submitted to the city within 5 days of the verbal/ electronic request after the bid award. The Insurance Certificate and Endorsement may be faxed to the Purchasing Office at (248) 619-7608, and is the only bid document accepted in this format.

The contractor, or any of their subcontractors, shall not commence work under this contract until they have obtained the insurance required, and shall keep such insurance in force during the entire life of this contract. All coverage shall be with insurance companies licensed and admitted to business in the State of Michigan and acceptable to the City of Troy. The requirements below should not be interpreted to limit the liability of the Contractor. All deductibles and self-insured retentions (SIR's) are the responsibility of the Contractor.

- (☒) We can meet the specified insurance requirements.
- () We cannot meet the specified insurance requirements.
- () We do not carry the specified limits but can obtain the additional insurance coverage of \$_____, at the cost of \$_____.
- NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.
- () Our proposal is reduced by \$_____ if we lower the requirement to \$_____.
- NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.

IMPORTANT: A Certificate of Insurance on an ACORD Form showing present coverage as well as the required endorsements SHALL be attached to the proposal document at the time of submission of the proposal to the Office of the City Clerk.

NOTE: Failure on the part of any bidder to contact his/her insurance carrier to verify that the insurance carried by the bidder meets City of Troy specifications may result in this proposal being completed incorrectly.

OTHER: Sole proprietors must execute a certificate of exemption from Worker's Compensation requirements or provide proof of Worker's Compensation Insurance. All coverage shall be with insurance carriers licensed and admitted to do business in Michigan in accordance with all applicable statutes of the State of Michigan and acceptable to the City of Troy.

INSURANCE VERIFICATION:

A bidder shall complete the above portion, which details additional costs that may be incurred for specified coverage without purchasing the additional coverage prior to bid submission.

WORKERS' COMPENSATION INSURANCE, including Employers' Liability Coverage, in accordance with all applicable statutes of the State of Michigan.

COMMERCIAL GENERAL LIABILITY INSURANCE on an "Occurrence Basis" with limits of liability not less than \$1,000,000.00 per occurrence and aggregate. Coverage shall include the following extensions: (A) Contractual liability; (B) Products and Completed Operations; (C) Independent Contractors Coverage; (D) Broad Form General Liability Extensions or equivalent, if not already included; (E) Deletion of all Explosion, Collapse, and Underground (XCU) Exclusions, if applicable.

AUTOMOBILE LIABILITY, including Michigan No-Fault Coverages, with limits of liability not less than \$1,000,000.00 per occurrence combined single limit for Bodily Injury, and Property Damage. Coverage shall include all owned vehicles, all non-owned vehicles, and all hired vehicles.

COMPANY NAME: Venture Building Company

ADDITIONAL INSURED:

Commercial General Liability and Automobile Liability, as described in the attached SAMPLE shall include an Additional Insured Endorsement stating the following shall be **Additional Insureds**: *The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof.* It is understood and agreed by naming the City of Troy as additional insured, coverage afforded is considered to be primary and any other insurance the City of Troy may have in effect shall be considered secondary and/or excess.

CANCELLATION NOTICE:

All policies, as described above, shall include an endorsement stating that it is understood and agreed that Thirty (30) days, Ten (10) days for non-payment of premium, Advance Written Notice of Cancellation, Non-Renewal, Reduction, and/or Material Change shall be mailed to:

City of Troy
Purchasing Manager
500 West Big Beaver
Troy, MI 48084

PROOF OF INSURANCE COVERAGE:

The Contractor shall provide the City of Troy, at the time that the contracts are returned by him/her for execution, a Certificate of Insurance as well as the required endorsements. In lieu of required endorsements, if applicable, a copy of the policy sections where coverage is provided for additional insured and cancellation notice would be acceptable. Copies or certified copies of all policies mentioned above all shall be furnished, if so requested.

If any of the applicable coverages expire during the term of this contract, the Contractor shall deliver renewal certificates and endorsements to the City of Troy at least ten (10) days prior to the expiration date.

LETTER VERIFICATION:

The recommended bidder will be notified to submit a letter from the *insurance agent or carrier* that the insurance to be supplied will meet specifications. As an alternative, the recommended bidder may submit the certificate of insurance meeting specifications at this time at his/her option. ***The City must receive this letter or certificate within 5 business days after verbal / electronic notification has been delivered to the recommended bidder or the bidder will be considered non-responsive and the bid un-awardable.*** This process will occur before presentation of the award recommendation to the Troy City Council.

FINAL INSURANCE CERTIFICATE SUBMISSION:

After approval by Troy City Council, the City's Purchasing Manager will review the insurance certificates and endorsements to ensure all acceptable documents have been received and allow (5) business additional days after verbal / electronic notification to submit final insurance certificate(s) in accordance with specifications. The City of Troy reserves the right to WITHHOLD AND KEEP any bid surety for failure to comply. The company will be considered in default of contract and will be barred from doing business with the City of Troy for a minimum of three (3) years for failing to meet insurance requirements.

COMPANY NAME:

Venture Building Company

SIGNATURE PAGE

PRICES:

Prices shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices shall remain firm through project completion and final acceptance in accordance with the bid specifications.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: 

NOTE: The undersigned has checked carefully the bid figures and understands that he/she shall be responsible for any error or omission in this bid offer and is in receipt of all addenda as issued.

TAX ID: 38-3175190

COMPANY: Venture Building Company, Inc.

ADDRESS: 6951 23 Mile Rd. CITY: Shelby Twp. STATE: MI ZIP: 48316

PHONE: 586 201-9235 FAX NUMBER: ()

REPRESENTATIVE NAME: Michael McLaughlin

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: 

PAYMENT TERMS: Upon completion WARRANTY: 24 months

BID CHECK #: 40502964 COMPLETION: Nov. 6th, 2025

EMAIL: julia.capital@outlook.com

EXCEPTIONS:

Any exceptions, substitutions, deviations, etc. from the City of Troy specifications and this bid proposal must be stated below. The reason for the exception(s), deviation(s), substitution(s), are an integral part of this bid offer.

N/A

ACKNOWLEDGEMENT:

I, Michael McLaughlin, certify that I have read the **Instructions to Bidders** (3 Pages) and that the bid proposal documents contained herein were obtained directly from the City's Purchasing Department or the MITN website, www.bidnetdirect.com/city-of-troy-mi and is an official copy of the Authorized Version.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: 

IMPORTANT: All City of Troy purchases require a MATERIAL SAFETY DATA SHEET, where applicable, in compliance with the MIOSHA "Right to Know" Law. Please include a copy of any relevant SDS at the time of bid submission.

NOTE: The City of Troy, at their discretion, may require the bidder(s) to supply a Financial Report from an impartial Financial Credit Reporting Service before award of contract.

US FUNDS: All prices are to be quoted in U. S. Currency.

Please be advised that the City of Troy Purchasing Department has authorized the following ANSWERS TO QUESTIONS regarding Bid Proposal **ITB-COT 25-20, Nature Center Sugar Shed**. The CHANGES will be considered an integral part of the original proposal documents.

I, the undersigned bidder, have read this **Addendum 1** and have integrated the clarification(s) and or change(s) into the *Bid Proposal and Specifications* for **ITB-COT 25-20, NATURE CENTER SUGAR SHED**. All other items in the original bid proposal remain the same. This Addendum 1 should be attached to the electronic bid submission, on or before **Thursday, July 24, 2025 at 10:00 AM EDT**.

COMPANY:

Venture Building Company

NAME OF AUTHORIZED COMPANY REPRESENTATIVE:

Michael McLaughlin

(Print)

SIGNATURE:



ADDRESS:

6951 23 Mile Rd.

Shelby Twp., MI 48316

DATE:

July 21, 2025

Please be advised that the City of Troy Purchasing Department has authorized the following ANSWERS TO QUESTIONS regarding Bid Proposal **ITB-COT 25-20, Nature Center Sugar Shed Construction**. The CHANGES will be considered an integral part of the original proposal documents.

I, the undersigned bidder, have read this **Addendum 2** and have integrated the clarification(s) and or change(s) into the *Bid Proposal and Specifications* for **ITB-COT 25-20, NATURE CENTER SUGAR SHED CONSTRUCTION**. All other items in the original bid proposal remain the same. This Addendum 2 should be attached to the electronic bid submission, on or before **Thursday, July 24, 2025 at 10:00 AM EDT**.

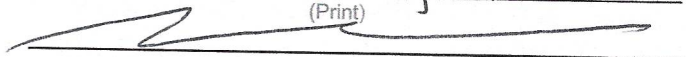
COMPANY:

Venture Building Company

NAME OF AUTHORIZED COMPANY REPRESENTATIVE:

Michael McLaughlin

SIGNATURE:

 (Print)

ADDRESS:

6951 23 mile Rd.

Shelby Twp., MI 48316

DATE:

7/24/2025



Legal Status of Bidder:

The Bidder shall fill out the appropriate form and strike out the other two:

A corporation duly organized and doing business under the laws of the State of MI for whom Michael McLaughlin, bearing the office title of President, whose signature is affixed to this proposal, is duly authorized to execute contracts.

A partnership, all members of which, with addresses, is:

~~_____~~ ~~_____~~
~~_____~~ ~~_____~~
~~_____~~ ~~_____~~
~~_____~~ ~~_____~~
~~_____~~ ~~_____~~
~~_____~~ ~~_____~~

AN INDIVIDUAL, WHOSE SIGNATURE IS AFFIXED TO THE PROPOSAL:

~~_____~~ ~~_____~~



CITY OF TROY
OAKLAND COUNTY, MICHIGAN
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

Michael McLaughlin, being duly sworn deposed, says that he/she
(Print Full Name)

is President. The party making the foregoing proposal or bid,
(State Official Capacity in Firm)

that such bid is genuine and not collusion or sham; that said bidder has not colluded, conspired, connived, or agree, directly or indirectly, with any bidder or person, to put in a sham bid or to refrain from bidding and has not in any manner directly or indirectly sought by agreement or collusion, or communication or conference, with any person to fix the bid price or affiant or any other bidder, or to fix any overhead, profit, or cost element of said bid price, or that of any other bidder, or to secure the advantage against the City of Troy or any person interested in the proposed contract; and that all statements contained in said proposal or bid are true.


SIGNATURE OF PERSON SUBMITTING BID

Julia Fecarotta
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 23rd day of July, 2018 in and for
Macomb County.

My commission expires:

June 10, 2030

JULIA FECAROTTA
Notary Public, State of Michigan
County of Macomb
My Commission Expires 06-10-2030
Acting in the County of Macomb



**CERTIFICATION REGARDING
DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

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

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in transactions under any non-procurement programs by any federal, state or local agency.
2. Have not, within the three year period preceding, had one or more public transactions (federal, state, or local) terminated for cause or default; and
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) and have not, within the three year period preceding the proposal, been convicted of or had a civil judgment rendered against it:
 - a. For the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction (federal, state, or local), or a procurement contract under such a public transaction;
 - b. For the violation of federal, or state antitrust statutes, including those proscribing price fixing between competitors, the allocation of customers between competitors, or bid rigging; or
 - c. For the commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

I understand that a false statement on this certification may be grounds for the rejection of this proposal or the termination of the award. In addition, the general grant of this authority exists within the City's Charter, Chapter 12, Section 12.2- Contracts.

☒ I am able to certify to the above statements.

Venture Building Company, Inc.
Name of Agency/Company/Firm (Please Print)

Michael McLaughlin, President
Name and title of authorized representative (Please Print)

[Signature]
Signature of authorized representative

Date 7/23/2025

☐ I am unable to certify to the above statements. Attached is my explanation.



**VENDOR CERTIFICATION
THAT IT IS NOT AN
"IRAN LINKED BUSINESS"**

Pursuant to Michigan law, (the Iran Economic Sanctions Act, 2012 PA 517, MCL 129.311 et seq.), before accepting any bid or proposal, or entering into any contract for goods or services with any prospective Vendor, the Vendor must first certify that it is not an "IRAN LINKED BUSINESS", as defined by law.

Vendor	
Legal Name	Venture Building Company Michael McLaughlin
Street Address	6951 23 Mile Road
City	Shelby Twp.
State, Zip	Michigan 48316
Corporate I.D. Number/State	38 - 3175190 - MI
Taxpayer I.D. #	364 - 08 - 7168

The undersigned, with: 1.) full knowledge of all of Vendors business activities, 2.) full knowledge of the requirements and possible penalties under the law MCL 129.311 et seq. and 3.) the full and complete authority to make this certification on behalf of the Vendor, by his/her signature below, certifies that: the Vendor is NOT an "IRAN LINKED BUSINESS" as require by MCL 129.311 et seq., and as such that Vendor is legally eligible to submit a bid and be considered for a possible contract to supply goods and/or services to the City of Troy.

Signature of Vendor's Authorized Agent: _____

Printed Name of Vendor's Authorized Agent: Michael McLaughlin

Witness Signature: _____

Printed Name of Witness: _____

Julia Fecarotta



Proposer's Sworn and Notarized Familial Disclosure
(to be provided by the Proposer)

The undersigned, the owner or authorized officer of Venture Building (the "Proposer"), pursuant to the familial disclosure requirement provided in the Request for Proposal, hereby represent and warrant, except as provided below, that no familial relationships exist between the owner(s) or any employees of Venture Building and any member of the City of Troy City Council or City of Troy management.

List any Familial Relationships:

BIDDER:

By: Venture Building Company
Its: President

STATE OF MICHIGAN

)ss.

COUNTY OF Macomb

This instrument was acknowledged before me on the 23rd day of July, 2025, by

Julia Decast



**City of Troy
Oakland County, Michigan
Contract Form**

ARTICLES OF AGREEMENT, made and entered into this 23rd day of July
2025 by and between Venture Bldg. Co. of Shelby Twp., MI
(Name) (City and State)

herein after called the Contractor and the City of Troy, Troy, Michigan hereinafter called the Owner,

WITNESSETH, that the Contractor and the Owner for the considerations hereinafter named, agree as follows:

1. That all Contract Documents, as defined in the Bid Specifications ITB-COT 25-20 "Lloyd A. Stage Nature Center Sugar Shed", hereto attached or herein referred to shall be and are hereby made a part of the agreement and contract.
2. The Contractor shall, under penalty of bonds submitted, furnish all labor, materials, and equipment necessary and perform all of the work as set forth in his/her Proposal in strict accordance with the specifications and other documents which have been made a part of this contract in the manner, time, and place as therein set forth.
3. In consideration whereof, the Owner agrees to pay to the Contractor the amounts provided in the attached Proposal, being the product of the unit prices therein set forth, multiplied by the number of units actually constructed, all in the time and manner as set forth in the Contract Documents.
4. IN WITNESS whereof said parties have hereunto set their hands and seals, the day and year first above written.

SIGNED BY:

[Signature]
Signature of Authorized Representative

Michael McLaughlin
Printed Name of Authorized Representative

Venture Building Company
Contractor (Company Name)

President
Title of Authorized Representative

WITNESS:

[Signature]
Signature of Witness

Julia Fecarotta
Printed Name of Witness

APPROVED BY (THE OWNER, CITY OF TROY):

Purchasing Manager – Emily Frontera

City Manager – Frank A. Nastasi

Mayor – Ethan Baker

RESOLUTION NUMBER: _____

APPROVED AS TO FORM AND LEGALITY:

BY: _____
City Attorney – Lori Grigg Bluhm

ATTEST: _____
City Clerk – M. Aileen Dickson

GRETCHEN WHITMER
Governor

Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes
Company Builder License

VENTURE BUILDING COMPANY
43231 SCHEONHERR RD
STERLING HEIGHTS, MI 48313

License No.
2102219946

MUST BE DISPLAYED IN A CONSPICUOUS PLACE

Expiration Date:
05/31/2027

This document is duly
issued under the laws of the
State of Michigan

0900152



VENTBUI-01

MFISHER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/23/2025

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

Acrisure Great Lakes Partners Insurance Services, LLC
223 West Grand River Ave #1
Howell, MI 48843

CONTACT NAME: Maggie Fisher

PHONE

(A/C, No, Ext):

FAX

(A/C, No):

E-MAIL ADDRESS: MFisher@acrisure.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Michigan Millers Mutual Insurance Company 14508

INSURER B: Auto-Owners Insurance Company 18988

INSURER C: Home-Owners Insurance Company 26638

INSURER D: Zurich American Insurance Company of Illinois 27855

INSURER E:

INSURER F:

INSURED

Venture Building Co Inc
43231 Schoenherr Rd.
Sterling Heights, MI 48313-1957

COVERAGES

CERTIFICATE NUMBER:

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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		C0563296	10/27/2024	10/27/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			4968573003	2/15/2025	2/15/2026	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			4968573004	2/15/2025	2/15/2026	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		A106656824	2/15/2025	2/15/2026	<input checked="" type="checkbox"/> PER <input type="checkbox"/> OTH-ER \$ STATUTE \$ 500,000 E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Builders Risk			BR74121834	3/20/2025	3/20/2026	Any One Building \$ 850,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof are included as Additional Insured for General Liability coverages when required by a written contract.

CERTIFICATE HOLDER

City of Troy
Purchasing Manager
500 West Big Beaver
Troy, MI 48084

CANCELLATION

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

Save this Copy
for your records.



40502964

CASHIER'S CHECK - Customer Receipt

Pay to the

Order of: CITY OF TROY***

July 23, 2025

\$*****5,000.00

Amount: FIVE THOUSAND 00/100 US DOLLARS

Memo:

TROY PROJECT

Purchased by:

JULIA ANN FECAROTTA

Transaction #:

815662147

Cost Center:

5197

Method of Purchase: Cash/Check

NON-NEGOTIABLE

The purchase of a Surety Bond may be required before any Cashier's Check on this bank will be replaced or refunded in the event it is lost, misplaced, or stolen.

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT.

CHECK BACKGROUND AREA CHANGES COLOR GRADUALLY FROM TOP TO BOTTOM.



FIFTH THIRD BANK

CASHIER'S CHECK

Pay to the

Order of: CITY OF TROY***

July 23, 2025

\$*****5,000.00

Amount: FIVE THOUSAND 00/100 US DOLLARS

Drawn on:

Fifth Third Bank
National Association

Transaction Number: 815662147

Cost Center: 5197

Memo:

TROY PROJECT
Purchased by: JULIA ANN FECAROTTA

The purchase of a Surety Bond may be required before any Cashier's Check on this bank will be replaced or refunded in the event it is lost, misplaced, or stolen.

Fifth Third Bank

Authorized Signature

⑈40502964⑈ ⑆042101190⑆ 0082649531⑈

X

FIRST THRO BANK

DO NOT WRITE/SIGN/STAMP BELOW THIS LINE
DEPOSITORY BANK ENDORSEMENT



5000

SECURE

THE FIRST NATIONAL BANK



1283533 SECURE

2000

2000 1000 500 0



SECURE

These and other findings indicate that the program is having a positive impact on the lives of the children and their families. The program is also having a positive impact on the community as a whole, by providing a safe and healthy environment for all.

1283533



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM



Date: August 20, 2025

To: Frank A. Nastasi, City Manager

From: Robert J. Bruner, Deputy City Manager
Chris Wilson, Assistant City Manager
Rob Maleszyk, Chief Financial Officer
Kyle Vieth, Controller
Kurt Bovensiepe, Public Works Director
Dennis E. Trantham, Deputy Public Works Director
Brian Goul, Recreation Director
Emily Frontera, Purchasing Manager

Subject: Standard Purchasing Resolution 2: Award to Low Bidder Meeting Specifications - Lloyd A. Stage Nature Center Sugar and Storage Shed Replacement and Standard Purchasing Resolution 5: Approval to Expend Budgeted Funds – Shed Design, Construction Documents & Contract Administration and Budget Amendment (Introduced by Allyson Leach, Assistant Recreation Director)

History

- The Sugar and Storage Shed at the Nature Center is deteriorating and is becoming a safety hazard. Replacement is necessary.
- The Sugar and Storage Shed is used February and March for the Troy Nature Society Maple Syrup Program which has attendance of approximately 1,000 visitors annually.
- The shed is also used for storage for the two vehicles and trailer used year-round for access to the preserve. Additionally, the shed provides storage for the large number of tools provided for groups attending the many invasive pull and clean up days held April through November. Finally, it also houses the tables and chairs used by various groups for programs, activities, and rentals conducted at the pavilion.
- The current shed is 527 square feet, the new proposed shed will be 920 square feet in order to add additional space for storage due to increased programming and the addition of the pavilion at the location.
- Anderson, Eckstein, and Westrick (AEW) of Shelby Township, MI, one of the City's professional service engineering firms, was awarded the Design and Bid Documents and has also been chosen to conduct the Contract Administration for the project.
- Design and Bid Documents for the project totaled \$21,100.

Purchasing

On July 24, 2025 a bid opening was conducted as required by City Charter/Code for the Construction of the Sugar and Storage Shed at the Lloyd A. Stage Nature Center. The bid was posted on the MITN Purchasing Group website; www.bidnetdirect.com/city-of-troy-mi. Eleven hundred and thirty-five (1135) vendors were notified via the MITN website. Six (6) bid responses and one (1) no bid were received. Below is a detailed summary of potential vendors for the bid opportunity:



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Purchasing (continued)

Companies notified via MITN	1135
Troy Companies notified via MITN	20
Troy Companies - Active email Notification	19
Troy Companies - Free	1
Companies that viewed the bid	146
Troy Companies that viewed the bid	4

MITN provides a resourceful online platform to streamline the procurement process, reduce costs, and make it easier and more transparent for vendors to do business with the City of Troy. **Active MITN** members with a current membership and paying annual dues receive automatic electronic notification which allows instant access to Bids, RFPS and Quote opportunities with the City. **Active MITN non-paying** members are responsible to monitor and check the MITN website for opportunities to do business with the City. **Inactive MITN** member status can occur when a company does not renew their account upon expiration. Inactive members cannot be notified of solicitations or access any bid information.

- All six (6) bids were reviewed.
- The bid from *Venture Building Company, Inc of Shelby Township, MI* is low bid meeting all specifications.
- *Venture Building Company, Inc.* bid was reviewed in detail by line item by City staff and AEW.
- AEW has worked with *Venture Building Company, Inc.* in the past and is recommending them for the project.
- Based on the review process it is being recommended to award the bid to the low bidder meeting specifications; *Venture Building Company, Inc of Shelby Township, MI*
- The current contract with AEW for engineering and design services was renewed by City Council on May 23, 2022 (Resolution #2022-05-071-J-4b). Under the current contract pricing, AEW proposes a fee of \$48,300 for Design, Construction Documents and Contract Administration Services.

Financial

Funds for this project were budgeted in the amount of \$150,000. The estimated total cost of the project is \$258,000 with a 10% contingency amount of \$20,970 for a not to exceed amount of \$278,970. The project will require a budget amendment in the amount of \$128,970 to the Nature Center Buildings and Improvements Capital Fund under Project Number 2025C0044 for the 2026 fiscal year. Expenditures will be charged to Account Number 401.771.975.

Recommendation

City Management recommends a contract be awarded to the lowest bidder meeting specifications *Venture Building Company of Shelby Township, MI* for the construction of a new Sugar and Storage Shed at the Nature Center in the amount of \$209,700 with a 10% contingency amount of \$20,970, at prices contained in the bid tabulation dated July 24, 2025. City Management further recommends granting the authority to expend budgeted capital funds to *Anderson, Eckstein & Westrick, Inc. of Shelby Township, MI* for Design, Construction Documents and Contract Administration Services for the Sugar and Storage Shed Project in the amount of \$48,300 for a not to exceed total project amount of \$278,970.

It is also recommended that City Council approve a budget amendment to the Nature Center Building and Improvements Capital Fund and Project Number 2025C0044 in the amount of \$128,970.

Opening Date - 07/24/2025
Date Reviewed - 07/24/2025

CITY OF TROY
BID TABULATION
SUGAR SHED

VENDOR NAME:	Venture Building Company, Inc.	Trademark Property Solutions	Usztan LLC
CITY:	Shelby Twp., MI	Oxford, MI	Oakland, MI
CHECK AMOUNT:	\$5,000.00	\$5,000.00	\$5,000.00
CHECK NUMBER:	40502964	9499913772	9171032999
PROPOSAL: CONSTRUCTION OF THE LLOYD A. STAGE NATURE CENTER SUGAR SHED			
LUMP SUM PRICE:	\$209,700.00	\$264,806.26	\$268,400.00
Warranty:	24 months	2 yr workmanship and materials provided by contractor	1 year craftsmanship
Start Date:	August 28, 2025	September 2, 2025	September 2, 2025
Anticipated Duration to Complete:	10 weeks	November 15, 2025	90 days
Attended Mandatory Pre-Bid Meeting: Y/ N	Y	Y	Y
Contact Information Provided: Y/ N	Y	Y	Y
Proposed Payment Schedule:	Not Specified	See attached payment schedule	Monthly draws for completed labor and material purchases
References: Y/ N	Y	Y	Y
Insurance: Y/ N	Y	Y	Y
Exceptions:	None	Underground wire feed upgrade if required	VOLUNTARY ALTERNATES 1. In lieu of powder coat finish on coiling door, substitute with standard painted finish – deduct \$2,300 2. If asbestos inspection report is needed, required by MIOSHA – add \$1,800 3. In lieu of FRP door, substitute with fire rated galvanized HM door and frame. Apply composite trim to replicate pattern – deduct \$18,000 4. Additional paving as per print - add \$6,500
Acknowledgement:	Y	One Signature Missing	Y
Signed Addendum:	Y	Addendum 2 Missing	Y
Forms:	Y	Y	Y
Low Bidder Meeting Specifications			

(*Bid Opening conducted via a Zoom Meeting)

ATTEST:
Joe Lagarde
Brian Goul
Andrew Chambliss
Nellie Bert
Dina Gates

No Bid: Panel Built, Inc

Emily Frontera
Purchasing Manager

CITY OF TROY
BID TABULATION
SUGAR SHED

ITB-COT 25-20
Page 2 of 2

VENDOR NAME:	National Restoration, Inc.	NRC Builders	C.E. Gleeson Constructors, Inc.
CITY:	Milford, MI	Novi, MI	Troy, MI
CHECK AMOUNT:	\$5,000.00	\$5,000.00	\$5,000.00
CHECK NUMBER:	2810703	50161319	7602
PROPOSAL: CONSTRUCTION OF THE LLOYD A. STAGE NATURE CENTER SUGAR SHED			
LUMP SUM PRICE:	\$324,000.00	\$370,000.00	\$422,700.00
Warranty:	2 year warranty	1 year	1 year
Start Date:	August 18, 2025	September 1, 2025	September 8, 2025
Anticipated Duration to Complete:	30 Days	November 15, 2025	10 weeks; November 15, 2025
Attended Mandatory Pre-Bid Meeting: Y/ N	Y	Y	Y
Contact Information Provided: Y/ N	Y	Y	Y
Proposed Payment Schedule:	One payment for 50% (less 10% retainage) when project is 50% complete, 2nd payment for 50%, less retainage, after substantial completion. Then, 10% retainage after final walkthrough	30 days - monthly	Net 30 days
References: Y/ N	Y	Y	Y
Insurance: Y/ N	Y	Y	Y
Exceptions:	None	None	AEW Requested Alternate - Additional HMA per drawing C-1: ADD \$16,050
Acknowledgement:	Y	Y	Y
Signed Addendum:	Y	N	Y
Forms:	Y	Y	Y



ANDERSON, ECKSTEIN & WESTRICK, INC.

CIVIL ENGINEERS - SURVEYORS - ARCHITECTS

Shelby Township - Roseville - Livonia

586.726.1234 | www.aewinc.com

November 25, 2024

Dennis Trantham, Deputy Director of Public Works
City of Troy
4693 Rochester Road
Troy, MI 48085

Reference: **Proposal for Professional Services**
City of Troy, Sugar Shed
Troy, Michigan

Dear Mr. Trantham:

Thank you for considering our firm for professional architectural and engineering services for the above referenced project.

Understanding of the Project

The City would like to remove and replace the existing shed that houses their maple syrup evaporator at Stage Nature Center located at 6685 Coolidge Highway.

The existing wood framed shed is less than 1,000 square feet and has electrical and water services that are fed from the existing Nature Center. The proposed shed will be slightly larger and will reuse the existing utility service leads. The proposed shed will be wood framed with a concrete slab on grade and sloped roof. A temporary stone driveway may be needed for construction access, the construction and restoration of the road would be performed by the City. The anticipated construction budget is approximately \$150,000.00 for the building.

Following is a summary of our services broken into two phases. Phase one would be conceptual design services. Once phase one is approved by the City, phase two would follow and consist of architecture and civil engineering.

Services to be Provided

Phase One, Conceptual Design:

- Meeting to review past and current needs
- Analysis of the proposed site
- Virtual meeting to review the building program and site analysis
- Develop conceptual site plan
- Develop conceptual floor plan
- Develop one exterior building elevation and rendering
- Virtual meeting to review concepts, make any requested revisions
- Develop opinion of probable cost



Dennis Trantham
November 25, 2024
Page 2

Phase Two, Construction Documents:

- Site plan approval package, assumed to be approved administratively
- Civil engineering, design and permit documents
- Architecture, design and permit documents
- Minimal electrical and plumbing design and permit documents
- Design meeting to review final bidding package
- Bidding package to be posted on BidNet by the City

Additional Services Available

The following services are available but not included in this proposal.

- Topographical, tree and boundary surveys
- Property Title and easement work
- Construction staking
- Full time construction observation and part time construction administration
- As-built plans
- Furniture, fixture and equipment design
- IT and other low voltage system design
- LEED design
- ZBA and other meetings in addition to those listed under services to be provided

Services Not Provided

Security design, Material testing, environmental testing, geotechnical investigations, and wetlands delineation are outside the scope of services that AEW can provide. We will gladly coordinate these services when requested, to be performed by outside consultants as selected by the Client. All services provided by a sub-consultant of AEW will incur a seven and one half (7.5%) percent prime consultant markup.

Responsibilities of the Client

The client is responsible for the following.

- One point of contact and timely access to key staff
- Equipment cut sheets and utility needs of equip. to be housed within the shed
- Timely review of submitted documents
- Temporary driveway design and construction

Fee for Professional Services

We propose to furnish the services outlined for the following fees:

Phase One, Design:	\$6,500.00
Phase Two, Construction Documents:	\$9,000.00



Dennis Trantham
November 25, 2024
Page 3

Any additional services will be provided on an hourly basis according to our rate schedule effective for the period in which the work is performed.

Schedule

We are prepared to begin within 14 working days of receiving an executed copy of this proposal.

Opinions of Probable Cost

Opinions of probable construction cost provided represent AEW's best judgment as a design professional familiar with the industry. However, it is recognized that AEW has no control over the cost of labor, materials, equipment or services provided by others, or over the contractor's methods of determining prices, or over competitive bidding or market conditions. Therefore, AEW does not guarantee that proposals, bids, or actual construction cost will not vary from the opinions of probable cost prepared in any manner by our firm.

Execution of the Agreement

We trust that this proposal meets your needs. Please advise if any modifications or clarifications are required. When you are prepared to authorize us to proceed, please sign, date, and return one copy of this agreement with original signatures for our use.

We appreciate the opportunity to work with you on this project. If you have any questions or require additional information please call me.

Sincerely,

A handwritten signature in blue ink, appearing to read 'J. Arlow'.

Jason Arlow
Director of Architecture,
Executive Vice President

Accepted By

Signature

Printed Name, Title

Date

CC: Jennifer Chehab, PE - AEW

[SugarShed112524.docx](#)



ANDERSON, ECKSTEIN & WESTRICK, INC.
CIVIL ENGINEERS SURVEYORS ARCHITECTS
51301 Schoenherr Road 586.726.1234
Shelby Township, MI 48315 www.aewinc.com

Authorization for Additional Services

Project: **City of Troy Sugar Shed**
 AEW Project No. 0238-0042

Date: 2/25/2025

Anderson, Eckstein and Westrick, Inc., respectfully submits the following request for additional services for the above referenced project.

Description of Service Request (Limited)

Add topographical survey and tree pickup at the Stage Nature Center Sugar Shed Site.

Lump Sum Cost Added to Current AE Contract: \$5,600.00

Sincerely,

Anderson, Eckstein and Westrick, Inc.

Jason R. Arlow, AIA
Executive Vice President

Accepted By

Signature

**Dennis Trantway - Deputy Public Works
Director**

Printed Name, Title

3.5.25

Date



ANDERSON, ECKSTEIN & WESTRICK, INC.

CIVIL ENGINEERS - SURVEYORS - ARCHITECTS

Shelby Township - Roseville - Livonia

586.726.1234 | www.aewinc.com

Authorization for Additional Services, No.2

Project: **City of Troy Sugar Shed**
AEW Project No. 0238-0042

Date: August 4, 2025

Anderson, Eckstein and Westrick, Inc., respectfully submits the following request for additional services for the above referenced project.

Description of Service Request (Limited)

Construction Contract Administration for 10 weeks, services limited to the following:

1. Draft AIA construction contract
2. Pre-construction Meeting
3. Construction staking
4. 24 hours of onsite observation as needed
5. Shop drawing review (assuming 12 submittals)
6. RFI responses (assuming 10, one per week)
7. 2 pay request reviews and recommendations
8. Punchlist walk with owner and contractor
9. Project closeout

Lump Sum Fee: \$27,200.00

Not included in the above fee:

- Construction material testing, assuming City will contract PSI directly
- As built plans

Sincerely,

Anderson, Eckstein and Westrick, Inc.

Accepted By

Jason R. Arlow, AIA
Executive Vice President

Signature

Printed Name, Title

Date



VENTBUI-01

CSMITH3

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/28/2025

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 Acrisure Great Lakes Partners Insurance Services, LLC 223 West Grand River Ave #1 Howell, MI 48843	CONTACT NAME: Carie Smith		
	PHONE (A/C, No, Ext):	FAX (A/C, No):	
	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		
INSURED Venture Building Co Inc 6951 23 Mile Rd Shelby Township, MI 48316	INSURER A : Michigan Millers Mutual Insurance Company		NAIC # 14508
	INSURER B : Auto-Owners Insurance Company		18988
	INSURER C : Home-Owners Insurance Company		26638
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

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 type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X		C0563296	10/27/2024	10/27/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 \$
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	X		4968573003	2/15/2025	2/15/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			L0305918	2/15/2025	2/15/2026	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	A106656824	2/15/2025	2/15/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof are included as Additional Insured for General Liability and Auto Liability coverages when required by a written contract. 30 Day Notice of Cancellation applies. Insurance is Primary and Non-Contributory.

CERTIFICATE HOLDER

CANCELLATION

City of Troy Purchasing Manager 500 West Big Beaver Troy, MI 48084	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

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

THE CITY OF TROY
PURCHASING MANAGER
500 WEST BIG BEAVER
TROY MI 48084

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

Who Is An Insured (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
ANY PERSON OR ORGANIZATION THAT YOU ARE REQUIRED TO ADD AS ADD'L INS TO THIS POLICY BY WRITTEN CONTRACT OR AGRMT	

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



Michigan Millers
Mutual Insurance Company
Lansing, Michigan

**COMMERCIAL LINES
EVIDENCE OF INSURANCE**

Policy Number C 0563296 00

Renewal of Number

THE CITY OF TROY
PURCHASING MANAGER
500 WEST BIG BEAVER
TROY MI 48084

Producer

ACRISURE GREAT LAKES INS SVS
223 W GRAND RIVER AVE, #1
HOWELL MI 48843

586-286-8200

0021307

Policy Period: From 08/08/2025 to 10/27/2025 at 12:01 A.M. Standard Time at your mailing address shown above.

Named Insured And Mailing Address
VENTURE BUILDING CO INC
6951 23 MILE RD
SHELBY TOWNSHIP MI 48316

Business Description: STORAGE

EVIDENCE OF INSURANCE

This verifies that you have been shown as a CANCELLATION INTEREST on the policy shown above for the insurance coverages and limits shown below. These coverages are subject to all the provisions of this policy.

To reduce the handling and administrative cost, we are not including the policy Jacket, Declaration, Forms, or Endorsements of the actual policy. Provided below is the necessary information for you. Policy coverage is not in any way changed or extended by this form. If you require any additional information please contact the agency shown above and they will obtain it for you from MICHIGAN MILLERS MUTUAL INSURANCE COMPANY.

Prem. No.	Location Address	Description of Property/Limit
00000		30

P.O. Box 30060 Lansing, MI 48909-7560 517-482-6211 FAX 517-482-1590



Michigan Millers
Mutual Insurance Company
Lansing, Michigan

**COMMERCIAL LINES
EVIDENCE OF INSURANCE**

Policy Number C 0563296 00

Renewal of Number

Agent

THE CITY OF TROY
PURCHASING MANAGER
500 WEST BIG BEAVER
TROY MI 48084

ACRISURE GREAT LAKES INS SVS
223 W GRAND RIVER AVE, #1
HOWELL MI 48843

586-286-8200

0021307

Policy Period: From 08/08/2025 to 10/27/2025 at 12:01 A.M. Standard Time at your mailing address shown.

Named Insured And Mailing Address
VENTURE BUILDING CO INC
6951 23 MILE RD
SHELBY TOWNSHIP MI 48316

Business Description: STORAGE

EVIDENCE OF INSURANCE

This verifies that you have been shown as a CANCELLATION INTEREST on the policy shown above for the insurance coverages and limits shown below. These coverages are subject to all the provisions of the policy.

To reduce the handling and administrative cost, we are not including the policy Jacket, Declaration, Forms, or Endorsements of the actual policy. Provided below is the necessary information for you. Policy coverage is not in any way changed or extended by this form. If you require any additional information please contact the agency shown above and they will obtain it for you from MICHIGAN MILLERS MUTUAL INSURANCE COMPANY.

Vehicle No.	Vehicle Description
00000	

P.O. Box 30060 Lansing, MI 48909-7560 517-482-6211 FAX 517-482-1590



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/8/2025

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 Gompers, Cornish & Barr 22955 21 Mile Road Macomb MI 48042	CONTACT NAME: Lisa Gerber PHONE (A/C, No, Ext): 586-949-2300 E-MAIL ADDRESS: lgerber@gcbinsurance.com FAX (A/C, No):
INSURED Anderson, Eckstein & Westrick, Inc. 51301 Schoenherr Rd. Shelby Township MI 48315	INSURER(S) AFFORDING COVERAGE INSURER A: Frankenmuth Insurance Company INSURER B: Global Aerospace Inc. INSURER C: CFC Underwriting Limited INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:** 1923928178**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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		6695659	7/1/2025	7/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<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		6695658	7/1/2025	7/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			6695659	7/1/2025	7/1/2026	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
A	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 <input type="checkbox"/>	N/A	6695657	7/1/2025	7/1/2026	<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
B C	Aviation Liability Cyber Liability			9000936 ESO0740415546	7/1/2025 7/1/2025	7/1/2026 7/1/2026	Bodily Injury Property Damage Limit of Liability \$2,000,000 Included \$2,000,000

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

The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof are Additional Insured with respect to Automobile Liability and General Liability if required in a written contract or agreement with the insured. Automobile Liability and General Liability is primary and non-contributory if required in a written contract or agreement with the insured. With respect to General Liability, 10 days notice of cancellation for non-payment and 30 days notice of cancellation for any other reason.

CERTIFICATE HOLDER**CANCELLATION**

City of Troy, Purchasing Manager
500 West Big Beaver
Troy MI 48084

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.

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD

THIS CERTIFICATE SUPERSEDES PREVIOUSLY ISSUED CERTIFICATE

**COMMERCIAL GENERAL LIABILITY
CG 20 01 04 13**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PRIMARY AND NONCONTRIBUTORY –
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**Primary And Noncontributory --
Other Insurance Condition**

This endorsement modifies insurance provided under the following:

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

- A. The following is added to the **Other Insurance Condition** in the Business Auto Coverage Form and the **Other Insurance - Primary And Excess Insurance Provisions** in the Motor Carrier Coverage Form and supersedes any provision to the contrary:

This Coverage Form's Covered Autos Liability Coverage is primary and will not seek contribution from any other insurance available to an "insured" under your policy provided that:

1. Such "insured" is a Named Insured under such other insurance; and
2. You have agreed in writing in a contract or agreement fully executed prior to loss, that this insurance would be primary and would not seek contribution from any other insurance available to such "insured".

- B. The following is added to the **Other Insurance Condition** in the Auto Dealers Coverage Form and supersedes any provision to the contrary:

This Coverage Form's Covered Autos Liability Coverage and General Liability Coverages are primary and will not seek contribution from any other insurance available to an "insured" under your policy provided that:

1. Such "insured" is a Named Insured under such other insurance; and
2. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to such "insured".

**COMMERCIAL AUTO
CA 20 48 10 13****THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****DESIGNATED INSURED FOR
COVERED AUTOS LIABILITY COVERAGE**

This endorsement modifies insurance provided under the following:

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

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Autos Liability Coverage under the Who Is An Insured provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: ANDERSON ECKSTEIN & WESTRICK INC**Endorsement Effective:** 07/01/2021**SCHEDULE****Name Of Person(s) Or Organization(s):**

"Any Person(s) or Organization(s) to which the Named Insured agrees in a written contract or agreement executed prior to loss."

51301 Schoenherr Rd
Shelby Township, MI 48315-2733

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Each person or organization shown in the Schedule is an "insured" for Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in Paragraph **A.1.** of Section **II** – Covered Autos Liability Coverage in the Business Auto and Motor Carrier Coverage Forms and Paragraph **D.2.** of Section **I** – Covered Autos Coverages of the Auto Dealers Coverage Form.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – AUTOMATIC STATUS WHEN
REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU
(INCLUDING PRODUCTS-COMPLETED OPERATIONS)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Section II – Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations or have performed operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions or the acts or omissions of those acting on your behalf in the performance of your ongoing operations for the additional insured.
2. "Your work" performed for the additional insured and included in the "products-completed operations hazard".

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

- a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.

2. Any person(s) or organization(s) for whom you are performing operations or have performed operations that is an additional insured on a specifically named endorsement attached to this policy.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance**:

The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement you have entered into with the additional insured; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.