



Financial Services  
Purchasing Division  
215 N. Mason St. 2<sup>nd</sup> Floor  
PO Box 580  
Fort Collins, CO 80522  
970.221.6775  
970.221.6707- fax  
fcgov.com/purchasing

April 7, 2014

Colorado Carriage  
Tammy Jo Rice  
410 Franklin Street  
Fort Collins, CO 80521

Re: Renewal, RFP# 7230 Downtown Concessionaires

Dear Ms. Rice:

The City of Fort Collins wishes to extend the agreement term for the above captioned request for proposal per the existing terms and conditions, and subsequent revision letters, for the following concession site:

**Site #12 – Loading Zone, Mountain Avenue entrance to Old Town Square.  
For day and night use.**

The term will be extended for one (1) additional year, June 1, 2014 through May 31, 2015.

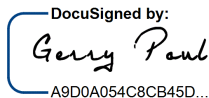
Previously agreed to minimum days and hours of operation are:

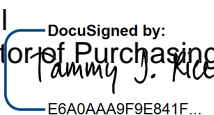
Monday – Friday between 5:00pm and 9:00pm on a seasonal basis; Saturday – Sunday between 12:00pm and 9:00pm on a seasonal basis.

If the renewal extension is acceptable to your firm, please sign this letter in the space provided and return to the City of Fort Collins, Purchasing Division, P. O. Box 580, Fort Collins, CO 80522, within the next fifteen (15) days.

If this extension is not agreeable with your firm, we ask that you send us a written notice stating that you do not wish to renew the contract and state the reason for non-renewal.

Please contact Jill Wilson, Buyer, at (970) 221-6216 if you have questions.

Sincerely,   
DocuSigned by:  
A9D0A054C8CB45D...

Gerry S. Paul  
Interim Director of Purchasing and Risk Management  
  
DocuSigned by:  
E6A0AAA9F9E841F...

Signature

Date

(Please indicate your desire to extend the Agreement for RFP# 7230 by signing this letter and returning it to Purchasing Division within the next fifteen days.)

cc: Linda Samuelson



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/06/2014

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

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

PRODUCER <b>JOHN C. BECKETT &amp; ASSOCIATES, INC.</b> 220 Smith Street  Ft. Collins CO 80524-		CONTACT NAME: PHONE (A/C, No, Ext): (970) 484-2805 FAX (A/C, No): (970) 484-2885 E-MAIL ADDRESS: linda@beckettinsurance.com PRODUCER CUSTOMER ID #: Colorado Carriage & Wagon	
INSURED <b>Colorado Carriage &amp; Wagon</b> 410 Franklin St.  Fort Collins CO 80521-		INSURER(S) AFFORDING COVERAGE <b>INSURER A NAUTILUS INSURANCE COMPANY</b> INSURER B : INSURER C : 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			NN411176	01/03/2014	01/03/2015	EACH OCCURRENCE	\$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR				/ /	/ /	MED EXP (Any one person)	\$ 5000
					/ /	/ /	PERSONAL & ADV INJURY	\$ 2,000,000
					/ /	/ /	GENERAL AGGREGATE	\$ 2,000,000
					/ /	/ /	PRODUCTS - COMP/OP AGG	\$ INCLUDED
					/ /	/ /		\$
	AUTOMOBILE LIABILITY			NO COVERAGE	/ /	/ /	COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO				/ /	/ /	BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS				/ /	/ /	BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS				/ /	/ /	PROPERTY DAMAGE (Per accident)	\$
	HIRED AUTOS				/ /	/ /		\$
	NON-OWNED AUTOS				/ /	/ /		\$
	UMBRELLA LIAB			NO COVERAGE	/ /	/ /	EACH OCCURRENCE	\$
	EXCESS LIAB				/ /	/ /	AGGREGATE	\$
	DEDUCTIBLE				/ /	/ /		\$
	RETENTION \$				/ /	/ /		\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			NO COVERAGE	/ /	/ /	WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A		/ /	/ /	E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below				/ /	/ /	E.L. DISEASE - EA EMPLOYEE	\$
					/ /	/ /	E.L. DISEASE - POLICY LIMIT	\$
				NO COVERAGE	/ /	/ /		\$

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

CERTIFICATE HOLDER IS AN ADDITIONAL INSURED PER WRITTEN CONTRACT ON THE GENERAL LIABILITY FOR THE ONGOING OPERATIONS OF THE INSURED.

## CERTIFICATE HOLDER

## CANCELLATION

( ) - (970) 224-6134  
 PURCHASING DEPT  
  
 CITY OF FORT COLLINS  
 215 N MASON 2ND FLOOR  
  
 FORT COLLINS CO 80522-0580

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