



Administrative Services
Purchasing Division

December 18, 2002

Wright Plumbing & Heating, Inc.
1556 Riverside Ave.
Ft. Collins, CO 80524

Re: Bid #5355 Plumber, Inside Water Meter

The City of Fort Collins has elected to renew Bid #5355 Plumber, Inside Water Meter for the City of Fort Collins with your firm. The terms and conditions of this renewal will be the same as stated in the original bid documents with the following increase:

Prices for 2002	Prices for 2003 w/ 2.9% Increase
\$40.00 per hr. – Regular Time	\$41.16 per hr. – Regular Time
\$60.00 per hr. – Overtime	\$61.74 per hr. – Overtime

If the renewal is acceptable to your firm, please sign this letter in the space provided and return to the City of Fort Collins, Purchasing Division, before January 5, 2002. **If delivered**, please deliver to 215 North Mason Street, 2nd Floor, Fort Collins, CO 80524. **If mailed**, the mailing address is P.O. Box 580, Fort Collins, Colorado 80522-0580.

If this renewal is not acceptable with your firm, please send us a written notice stating that you do not wish to renew the bid. If you have any questions regarding this renewal, please contact John Stephen, CPPB, Senior Buyer, at 970-221-6777.

Sincerely,

James B. O'Neill II, CPPO, FNIGP
Director of Purchasing and Risk Management

Willard Wright Pres. 12-31-02
Signature Date

(Please indicate your desire to renew Bid #5355 by signing this letter and returning it with a current copy of insurance forms to Purchasing Division on or before January 5, 2002.)

CERTIFICATE OF LIABILITY INSURANCE

American Family Insurance Company
 American Family Mutual Insurance Company if selection box is not checked.
 6000 American Pky Madison, Wisconsin 53783-0001

Agent's Name Address and Phone Number (Agt./Dist.)

Insured's Name and Address:

Lesa Ringkjob (143-309)
 375 E. Horsetooth Rd. Bldg. 6, Ste. 100
 Fort Collins, CO 80525
 970-223-0940

Wright-Ballard Construction, Inc.
 6821 Aaron Drive
 Fort Collins, CO 80524

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder.
 This certificate does not amend, extend or alter the coverage afforded by the policies listed below.

COVERAGES

This is to certify that 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.

TYPE OF INSURANCE	POLICY NUMBER	POLICY TYPE		LIMITS OF LIABILITY
		Effective (Mo,Day,Yr)	Expiration (Mo,Day,Yr)	
Homeowners/ Mobilehomeowners Liability Boatowners Liability				Bodily Injury and Property Damage Each Occurrence
Personal Umbrella Liability				Bodily Injury and Property Damage Each Occurrence
Farm/Ranch Liability				Bodily Injury and Property Damage Each Occurrence
Workers Compensation and Employers Liability +	05-X34845	2/18/2002	2/18/2003	Farm & Personal Liability Each Occurrence Farm Employer's Liability Each Occurrence Statutory Each Accident **** Disease - Each Employee \$ 100,000 Disease - Policy Limit \$ 500,000
General Liability <input checked="" type="checkbox"/> Commercial General Liability (occurrence) <input type="checkbox"/> <input type="checkbox"/>	06-X92387	4/1/2002	4/1/2003	General Aggregate \$ 1,000,000 Products - Completed Operations Aggregate \$ 1,000,000 Personal and Advertising Injury Each Occurrence \$ 500,000 Fire Damage (Any One Fire) \$ 500,000 Medical Expense (Any One Person) \$ 100,000 Each Occurrence ++ \$ 5,000 Aggregate ++
Businessowners Liability				Bodily Injury - Each Person Bodily Injury - Each Accident Property Damage Bodily Injury & Property Damage Combined
Automobile Liability <input type="checkbox"/> Owned Autos (Basic form) <input type="checkbox"/> Owned Autos (Comp form) <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-owned Autos <input type="checkbox"/> Garage liability				
Excess Liability <input type="checkbox"/> Commercial Blanket Excess <input type="checkbox"/>				Each Occurrence/Aggregate

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

+ The individual or partners shown as Insured *** elected to be covered as employees under this policy.
 ++ Products-Completed Operations aggregate is equal to each occurrence limit and is included in policy aggregate.

CERTIFICATE HOLDER'S NAME AND ADDRESS

City of Fort Collins
 281 N. College Ave
 Fort Collins, CO 80524

CANCELLATION

Should any of the above described policies be canceled before the expiration date thereof, the company will endeavor to mail *(10 days) written notice to the Certificate Holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. *10 days unless different number of days shown.
 This certifies coverage on the date of issue only. The above described policies are subject to cancellation in conformity with their terms and by the laws of the state of issue.

DATE ISSUED
 12/13/02

AUTHORIZED REPRESENTATIVE




WRIGHT PLUMBING & HEATING, INC.

1556 RIVERSIDE AVE. FT. COLLINS, CO 80524
(970) 484-0764 • FAX (970) 484-0768

OCTOBER 8, 2002

CITY OF FT. COLLINS
P.O. BOX 580
FT. COLLINS, CO 80522

ATTN: JOHN STEPHEN
RE: WATER METER PROGRAM

WE HAVE RECEIVED YOUR INVITATION TO CONTINUE WITH THE METERING PROGRAM.
WE WOULD LIKE TO REQUEST THE COST OF LIVING INCREASE ALLOWED PER OUR
CONTRACT.

THANK YOU

Willard Wright
WILLARD WRIGHT



WRIGHT PLUMBING & HEATING, INC.

1556 RIVERSIDE AVE. FT. COLLINS, CO 80524
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THANK YOU

Willard Wright
WILLARD WRIGHT

Insurance ↑ 31%

Lesa Ringkjob
375 E Horsetooth Rd. Bld. 6 ste. 100
Fort Collins, Co 80525
Phone: 970/223-0940
Fax: 970/223-1279
E-mail: lringkjo@amfam.com

To: City of fort collins
Attn: Purchasing dept
Fax #: 2216707
Phone#:

Date: 12/13/02
Time: 10:33 AM

of Pages: 2
(including this page)

From: Lesa Ringkjob
Re: Wright Ballard

Message:

CONSIDER US FOR YOUR OTHER INSURANCE NEEDS

**★ Homeowners ★ Life ★ Auto ★ Business ★
★ Personal & Business Umbrellas ★ Disability Ins.**