



19

NAVARRO COUNTY ROAD AND BRIDGE DEPARTMENT

NAVARRO COUNTY COURTHOUSE

300 W. 3<sup>RD</sup> AVE. Suite 2

CORSICANA, TEXAS 75110

APPROVAL FORM FOR UTILITY EASEMENTS

Date: 6/9/2025

Applicant: Oncor Electric Delivery - William Scoggins

Address: 777 Main St, Fort Worth, TX 76102

Phone #: 979.716.7038

Type of utility construction requested: (pipeline and product, cable and type, utility and type:

Utility - see attached scope of work

Name of Utility Company: Oncor Electric Delivery

Location of Utility Construction: (location map must be attached) (see attached map)

Calhoun St, NE CR 1050 and NE CR 1040

Attach location map or drawing, description of proposed utility line and appurtenances fully shown with distance of utility lines being replaced or installed in relationship with County Roads. Show on map or drawing, the location of the length of bore and size of encasement that the utility line will be passing through.

Estimated start date of construction: 7/1/2025

Estimated completion date of construction: 1/30/2026

Contractor on Site: Overhead  
United Utility  
7240 N Interstate 35E  
Waxahachie, TX 75165

Aaron Anderson (Operations Manager)  
24 Hour Emergency #: 903.275.2929  
email: aaron.anderson@unitedutility.com

Contractor on Site: Underground  
Ferreira Power South  
2822 N Beach St.,  
Haltom City, TX 76111

Tyler Veron (Superintendent)  
24 Hour Emergency #: 903.647.2834  
email: tveron@ferreirapowersouth.com

County of Navarro

Specifications for placing utilities within Navarro County Right-Of-Way

1. In the event it becomes necessary to alter or relocated the utility for which permission is sought, due to widening or improving the county road within the existing road easement at the point or along the route of said utility construction, applicant or its successor, if any, will perform the alteration or relocation at its own cost and expense, and said company will save and hold harmless Navarro County from any claims, or causes of action due to any claims for damages or injuries sustained by any person or property occasioned by its operation under this permit.
2. All road crossings will be bored unless a variance is granted.
3. All road crossings will at a minimum depth of 72" below the lowest existing grade.
4. All parallel utility construction will be a minimum depth of 72" below existing road grade.
5. All right-of-way disturbed by the utility construction will be restored daily to a condition that is as good or better than before construction.
6. In the event construction is delayed or halted by adverse weather conditions, labor stoppages or mechanical difficulties, the company will insure that all ditches are cleaned and will drain as good or better than before construction.
7. The County Commissioner of said Precinct may require the applicant to file a bond for road repairs and damage repairs in the amount the Commissioner determines to cover damage costs for said job. Upon completion of construction at a road crossing or parallel construction in the Right-of-way, contractor will notify the Commissioner so an inspection can be made.
8. A route map of any proposed pipeline together with cross sections shall be submitted with the application. All road crossings shall be located with GPS coordinates.
9. The applicant in consideration of the approval of this request by the Navarro County Commissioners Court does hereby agree, upon completion of the placement of the utilities as set forth in this request, to return the county road, its right-of-way and any improvements or additions to a condition which, in the opinion of the County Commissioner , equals or exceeds the condition in which said county road or right-of-way prior to the time construction started.
10. The applicant shall indemnify, defend, and hold Navarro County harmless from any obligation or claim for damages that may be alleged or any costs or expenses, including but not limited to, reasonable attorneys' fees arising from the applicant's emplacement of the object in the right-of-way which Navarro County may incur, or any claims Navarro County may be legally required to pay resulting from damages caused by the installation contemplated by this agreement. The applicant shall indemnify, defend, and hold Navarro County harmless at any future date for accidental damages to the above ground and/or buried utilities by road working equipment such as motor graders, posthole diggers, shredders, brush cutters, drainage ditch clearing equipment, etc. In the event such damages should occur, the applicant will be notified immediately.

The undersigned agrees that he has read and will abide by all requirements set forth in this form.

Signature of Applicant: William Scoggins

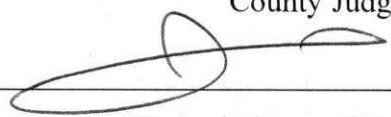
Date: 6/9/2025

NAVARRO COUNTY

By: 

County Judge

Date: 6-23-25

By: 

Commissioner of Precinct 1

Date: 06/23/25

# SCOPE OF WORK

To install 607t of Underground 1000KCMIL AL. Install 1-50/3 Wood Pole, 1-ABS, 1- 4ft x 8ft x 4ft pull box, and install necessary ancillaries. To install 1 Nova Recloser. It is proposed to remove 1-4H Recloser

GPS: 32.2450529, -96.4946343 (Recloser)

GPS: 32.247564, -96.488109 (Underground)



**PLAN LEGEND**

**COLOR CODES**

- EXISTING TO REMAIN
- EXISTING TO BE REMOVED
- NEW TO BE ADDED
- EXISTING TRANSMISSION
- FOREIGN ELECTRIC
- SEPARATE WORK ORDER ON SAME PROJECT

**SYMBOLS (USE WITH COLORS ABOVE)**

- POLE WOOD (N.T.S.)
- POLE CONCRETE (N.T.S.)
- TRANSMISSION TOWER (N.T.S.)
- PRIMARY PULL BOX
- POWER LINE OVERHEAD
- POWER LINE UNDERGROUND
- POWER LINE SECONDARY/SERVICE
- SINGLE CIRCUIT
- DOUBLE CIRCUIT
- SLACK SPAN
- OVERHEAD GUY
- ANCHOR
- TRANSFORMER/AUTO-TRANSFORMER
- STREET LIGHT (POLE MOUNT/STANDALONE)
- AIR BREAK SWITCH/TRIPSWITCH
- LIGHTNING ARRESTOR/MIDSPAN TAP
- RISERS 10 and 30
- INTELLRUPTER/RECLOSURE (SCADA)
- VOLTAGE REGULATOR/CAPACITOR
- PRIMARY DISCONNECT
- PRIMARY METERING EQUIPMENT
- JUNCTION POINT/MANHOLE
- STREET SIGN/SIGNAL
- WATER VALVE/WATER METER

**OTHER**

- PROPERTY LINE
- TRANSMISSION ROW
- ROAD ROW (TxDOT/CITY/COUNTY)
- PROPOSED ROAD ROW
- RAILROAD ROW
- FENCE
- EDGE OF PAVEMENT
- RAILROAD
- GAS LINE
- TELE LINE
- WATER LINE
- SEWER (STORM DRAINAGE)

**EASEMENTS**

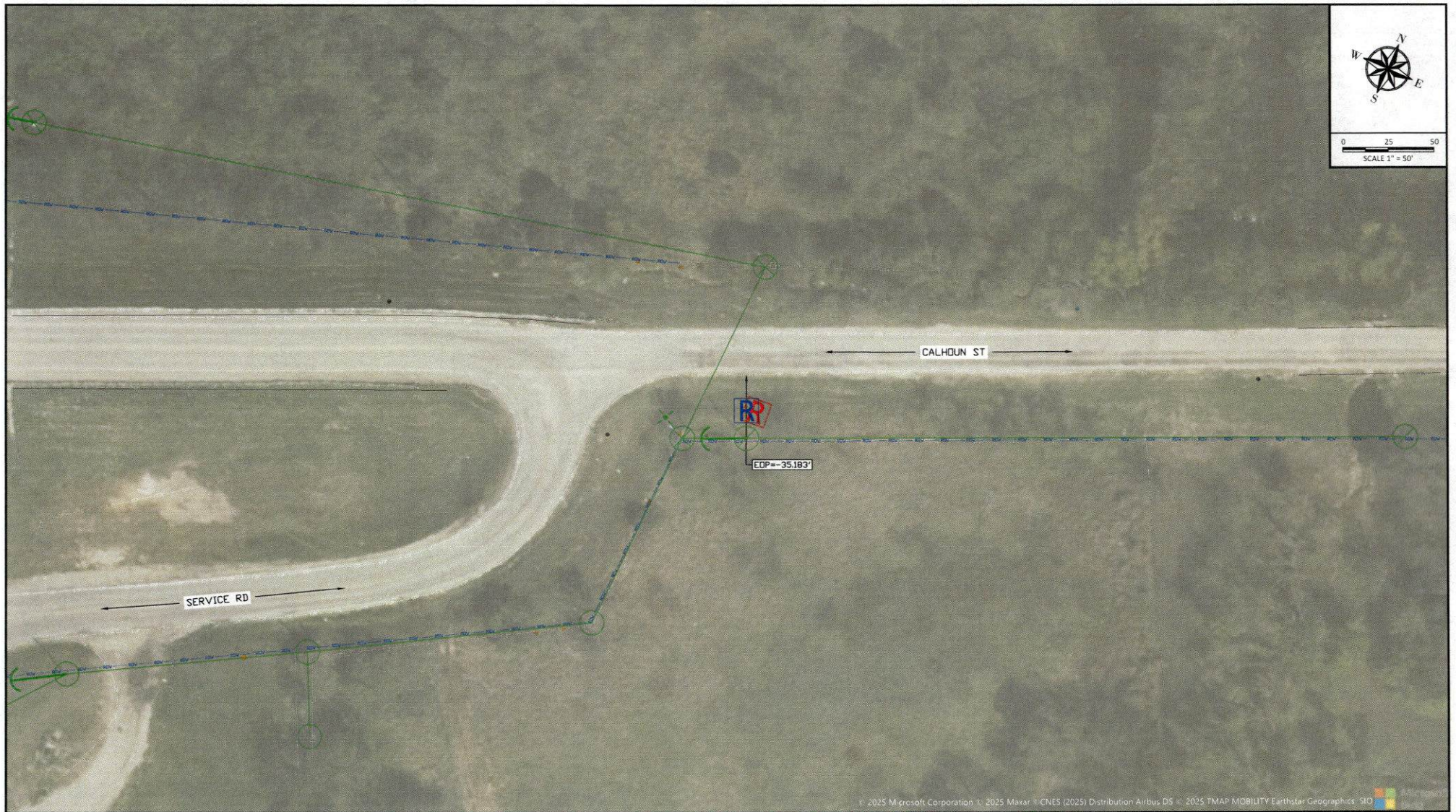
- EXISTING EASEMENT
- PROPOSED EASEMENT
- TEMPORARY EASEMENT



THIS DRAWING IS THE PROPRIETARY AND CONFIDENTIAL PROPERTY OF ONCOR AND IS INTENDED FOR REVIEW PURPOSES ONLY. FIRM: F-1394

COORDINATE SYSTEM: TSS-NC CITY: COUNTY: NAVARRO	ONCOR TO REPLACE 4H 100 RECLOSER WITH KYLE NOVA WITH FORM 6 CONTROLS ON THE SOUTH SIDE OF CALHOUN ST AND INSTALL 1 50/3 WOOD POLE AND BORE 3-1000AL IN 6" CONDUIT WITH SPARE ALONG NE 1050 RD	M&S ENGINEERING 2025 MWAX011 RICE SUB - 1 SOLUTIONS: S5, S6, S7.1 WO: 28145970	ONCOR	DATE: 6/9/2025 SHEET: ANS B   Scale As Shown MANAGER: K. PECK AEGIS: N/A CAD: F. LEE OVERVIEW
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THIS DRAWING IS THE PROPRIETARY AND CONFIDENTIAL PROPERTY OF ONCOR AND IS INTENDED FOR REVIEW PURPOSES ONLY.

FIRM: F-1394

COORDINATE SYSTEM:  
TX83-NCF  
CITY:  
RICE  
COUNTY:  
NAVAMBO

ONCOR TO REPLACE 4H 100 RECLOSER WITH KYLE NOVA WITH  
FORM 6 CONTROLS ON THE SOUTH SIDE OF CALHOUN ST  
GPS: 32.2450529, -96.4946343

MAIN OFFICE  
1100 N. 10TH AVE  
SPRINGDALE, TEXAS 75782  
PHONE 409.245.1234  
FAX 409.245.1235

**M&S ENGINEERING**  
OWNER: ELECTRICITY DELIVERY COMPANY  
TEAM: REGISTERED ELECTRICAL ENGINEERS



2025 MWAX011 RICE SUB - 1  
SOLUTIONS: S5, S6, S7.1  
WO: 28145970

DATE: 6/3/2025  
SHEET: AND 8 | Scale: As Shown  
MANAGER: K. RECK  
AEGIS: N/A  
CAD: F. LEE  
SHEET: 1 OF 2





THIS DRAWING IS THE PROPRIETARY AND CONFIDENTIAL PROPERTY OF ONCOR AND IS INTENDED FOR REVIEW PURPOSES ONLY.

FIRM: F-1394

COORDINATE SYSTEM:  
TXS-NCP  
CITY:  
RICE  
COUNTY:  
NAVARRO

ONCOR TO INSTALL 1 50/3 WOOD POLE AND BORE 3-1000AL IN  
6" CONDUIT WITH SPARE ALONG NE 1050 RD  
GPS: 32.247564, -96.488109 TO 32.248847, -96.488318

MAIN OFFICE  
P.O. BOX 810  
SPRING BRANCH, TEXAS 75781  
PHONE: 936.261.1100  
FAX: 936.261.1170

**M&S ENGINEERING**  
CIVIL & ELECTRICAL ENGINEERING & SURVEYING  
TEXAS REG. ENGINEERING FIRM # 1394

**ONCOR.**

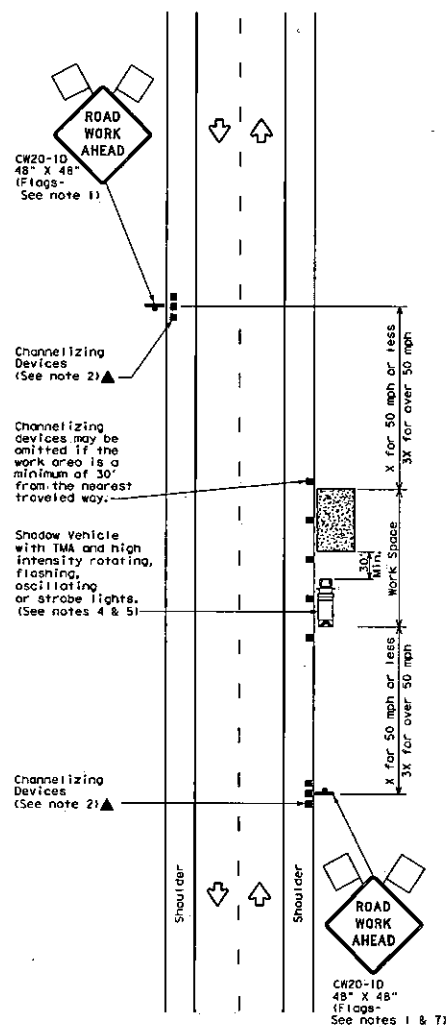
2025 MWAX011 RICE SUB - 1  
SOLUTIONS: S5, S6, S7.1  
WO: 28145970

DATE: 6/3/2025  
SHEET: AND-8 | SCOPED SHOWN  
MANAGER: K. RECK  
AEGIS: N/A  
CAD: F. LEE  
SHEET: 2 OF 2



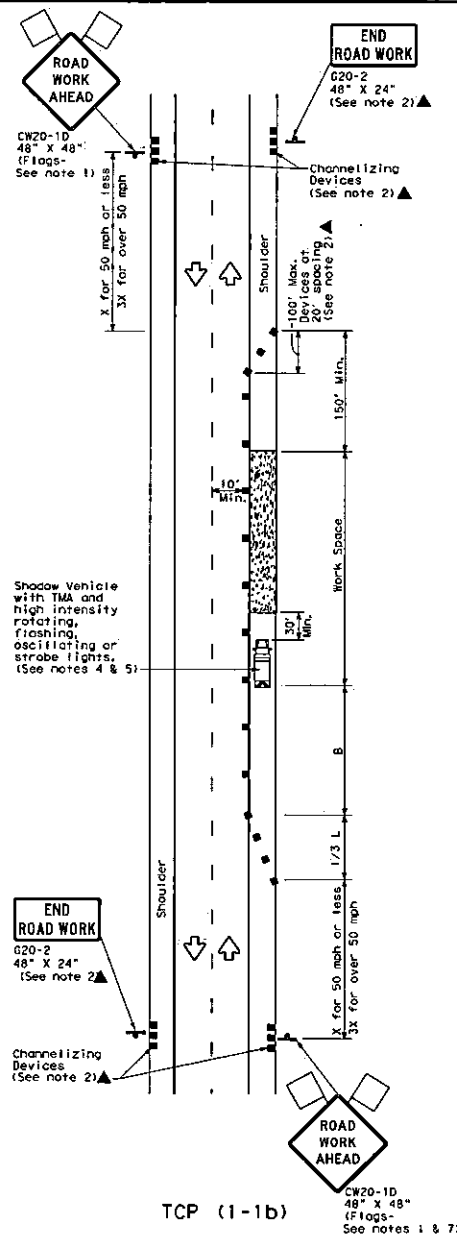
DISCLAIMER: The use of this standard is governed by the "Texas Engineering Practice Act". No warranty of any kind is made by TxDOT for any purpose whatsoever. TxDOT assumes no responsibility for the conversion of this standard to other formats or for indirect results or damages resulting from its use.

DATE: FILE:



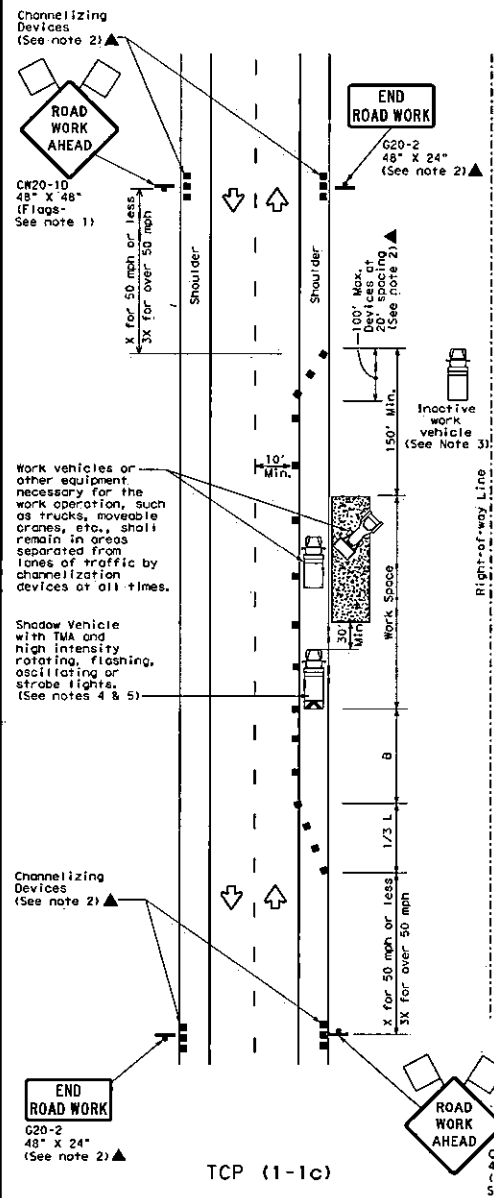
TCP (1-1a)

**WORK SPACE NEAR SHOULDER**  
Conventional Roads



TCP (1-1b)

**WORK SPACE ON SHOULDER**  
Conventional Roads



TCP (1-1c)

**WORK VEHICLES ON SHOULDER**  
Conventional Roads

LEGEND			
	Type 3 Barricade		Channelizing Devices
	Heavy Work Vehicle		Truck Mounted Attenuator (TMA)
	Trailer Mounted Flashing Arrow Board		Portable Changeable Message Sign (PCMS)
	Sign		Traffic Flow
	Flag		Flagger

Posted Speed MPH	Formula	Minimum Desirable Taper Lengths ft			Suggested Maximum Spacing of Channelizing Devices ft		Minimum Sign Spacing ft	Suggested Longitudinal Buffer Space ft
		10' Offset	11' Offset	12' Offset	On a Taper	On a Tangent		
30	$L = \frac{WS^2}{60}$	150'	165'	180'	30'	60'	120'	90'
35		205'	225'	245'	35'	70'	160'	120'
40		265'	295'	320'	40'	80'	240'	155'
45	L = WS	450'	495'	540'	45'	90'	320'	195'
50		500'	550'	600'	50'	100'	400'	240'
55		550'	605'	660'	55'	110'	500'	295'
60		600'	660'	720'	60'	120'	600'	350'
65		650'	715'	780'	65'	130'	700'	410'
70		700'	770'	840'	70'	140'	800'	475'
75		750'	825'	900'	75'	150'	900'	540'

\* Conventional Roads Only

\*\* Taper lengths have been rounded off.

L=Length of Taper (FT) W=Width of Offset (FT) S=Posted Speed (MPH)

TYPICAL USAGE				
MOBILE	SHORT DURATION	SHORT TERM STATIONARY	INTERMEDIATE TERM STATIONARY	LONG TERM STATIONARY
	✓	✓		

**GENERAL NOTES**

- Flags attached to signs where shown are REQUIRED.
- All traffic control devices illustrated are REQUIRED, except those denoted with the triangle symbol may be omitted when stated elsewhere in the plans, or for routine maintenance work, when approved by the Engineer.
- Inactive work vehicles or other equipment should be parked near the right-of-way line and not parked on the paved shoulder.
- A Shadow Vehicle with a TMA should be used anytime it can be positioned 30 to 100 feet in advance of the area of crew exposure without adversely affecting the performance or quality of the work. If workers are no longer present but road or work conditions require the traffic control to remain in place, Type 3 Barricades or other channelizing devices may be substituted for the Shadow Vehicle and TMA.
- Additional Shadow Vehicles with TMAs may be positioned off the paved surface, next to those shown in order to protect wider work spaces.
- See TCP(15-1) for shoulder work on divided highways, expressways and freeways.
- CW21-5 "SHOULDER WORK" signs may be used in place of CW20-10 "ROAD WORK AHEAD" signs for shoulder work on conventional roadways.



**TRAFFIC CONTROL PLAN  
CONVENTIONAL ROAD  
SHOULDER WORK**

TCP (1-1) - 18

FILE: tcp1-1-18.dgn	DATE: 12/18/95	BY: JMB	CHECKED: JMB	DATE: 12/18/95
DESIGNED: JMB	REVISIONS:	DATE: 12/18/95	BY: JMB	CHECKED: JMB
2-94 4-95	8-95 2-12	1-97 2-18		

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/06/2025

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Conner Strong & Buckelew 32 Old Slip, Suite 3204 New York, NY 10005	CONTACT NAME: Breffni McEntee		
	PHONE (A/C, No, Ext): 646-891-4981	FAX (A/C, No): 646-843-3936	
	E-MAIL ADDRESS: bmcentee@connerstrong.com		
INSURED  Ferreira Power South, LLC 12800 US Highway 1, Suite 280 Juno Beach, FL 33408	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Liberty Mutual Fire Insurance Co.		23035
	INSURER B: AXIS Surplus Insurance Company		26620
	INSURER C: Trisura Specialty Insurance Company		16188
	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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			TB2631510814024	07/01/2024	07/01/2025	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY			AS2631510814014	07/01/2024	07/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			P00100376214601	07/01/2024	07/01/2025	EACH OCCURRENCE \$3,000,000 AGGREGATE \$3,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WA263D510814034	07/01/2024	07/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	Excess Liability			123AEFFFC012024	07/01/2024	07/01/2025	\$10M Occ. / \$20M Agg.

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

## Evidence of Insurance

## CERTIFICATE HOLDER

## CANCELLATION

Navarro County Road and Bridge  
Department  
Navarro County Courthouse  
300 W 3rd Ave Ste 2  
Corsicana, TX 75110

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

*W. Michael Trapp*





# CERTIFICATE OF LIABILITY INSURANCE

6/30/2025

DATE (MM/DD/YYYY)

6/5/2025

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).

<b>PRODUCER</b> Lockton Companies, LLC DBA as Lockton Insurance Brokers, LLC in CA CA license #0F15767 3657 Briarpark Dr., Ste. 700 Houston TX 77042 (866) 260-3538	<b>CONTACT NAME:</b>
	<b>PHONE (A/C, No, Ext):</b>
<b>INSURED</b> 1556235 United Utility Services, LLC 3440 Toringdon Way, Suite 307 Charlotte NC 28277	<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b>
<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURER A:</b> Starr Indemnity & Liability Company	<b>NAIC #</b> 38318
<b>INSURER B:</b> Steadfast Insurance Company	26387
<b>INSURER C:</b>	
<b>INSURER D:</b>	
<b>INSURER E:</b>	
<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:** 21924116**REVISION NUMBER:** XXXXXXXX

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	N	1000090774241	6/30/2024	6/30/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	N	1000679556241 (AOS) 1000679633241 (MA)	6/30/2024 6/30/2024	6/30/2025 6/30/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	N	N	1000095623241	6/30/2024	6/30/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N	100 0005424 100 0005425 100 0005426 100 0005427	6/30/2024 6/30/2024 6/30/2024 6/30/2024	6/30/2025 6/30/2025 6/30/2025 6/30/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Professional Liability Contractors Pollution	N	N	EOC 3956166-05	6/30/2024	6/30/2025	\$5,000,000 Each Claim \$10,000,000 Each Claim \$15,000,000 Policy Aggregate

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

The General Liability and Auto Liability include a blanket automatic additional insured endorsement [provision] that confers additional insured status to the certificate holder only if there is a written contract between the named insured and the certificate holder that requires the named insured to name the certificate holder as an additional insured. In the absence of such a contractual obligation on the part of the named insured, the certificate holder is not an additional insured under the policy.

**CERTIFICATE HOLDER****CANCELLATION** See Attachment

21924116  
NAVARRO COUNTY ROAD AND BRIDGE DEPARTMENT  
NAVARRO COUNTY COURTHOUSE  
300 W. 3RD AVE. Suite 2  
CORSICANA TX 75110

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

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**Schedule of Named Insureds:**

- B&B Electrical & Utility Contractors, LLC
- B&B Electrical Holdings, LLC
- Coastal Electrical Construction, LLC
- Crosseyed Beaver Holdings, LLC
- D&D Power, LLC
- D.B.E. Management, LLC
- East Dixon Property Holdings, LLC
- Alaska Transmission Line Construction, LLC
- Power Delivery Holdings, LLC
- Southern Energy Systems, LLC
- United Utility Engineering, Inc.
- United Utility Power Services, LLC
- United Utility Services Engineering, D.P.C.
- United Utility Services, LLC
- W.A. Chester America, LLC
- W.A. Chester, LLC
- Williams Electric Utility Services, LLC