CONTRACT DOCUMENTS

Mobile County Engineering Department

PERFORMANCE BOND

ITEM V

PERFORMANCE BOND

Bond No. 800193287

KNOW ALL MEN BY THESE PRESENTS: That we (Insert here the name & address of legal title of the Contractor)
C. Thornton, Inc 12390 Airport Blvd., Mobile, AL 36608 hereinafter called the Principal, and
(Insert here the name and address of legal title of one or more sureties)
Atlantic Specialty Insurance Company - 605 Highway 169 North, Suite 800, Plymouth, MN 55441 and
N/A
hereinafter called the Surety or Sureties, are held and firmly bound unto Mobile County, a political subdivision of and Body Corporate in the State of Alabama, hereinafter called the Owner in the sum of Thirty Eight Thousand Four Hundred Ten and 00/100 Dollars (\$
WHEREAS, the Principal has, by means of a written agreement, dated entered into a contract with the Owner for:

MCP-001-24 Gulfcrest Road Bridge (STR #177) Rehabilitation

which agreement is by reference made a part hereof,

Leave Blank

NOW THEREFORE, The conditions of this obligation is such that if the Principal shall faithfully perform the Contract on his part, and satisfy all claims and demands, incurred for the same, and shall fully indemnify and save harmless the Owner from all cost and damage which he may suffer by reason of failure to do so, and shall reimburse and repay the Owner all outlay and expense which the Owner may incur in making good for any such default thence this obligation shall be null and void; otherwise, it shall remain in full force and effect.

PROVIDED, HOWEVER, that no suit, action or proceedings, by reason of any default whatever be brought on his Bond after twelve months from the day on which the final payment under the Contract falls due.

PROVIDED, further, that the said surety or sureties, for value received hereby stipulate and agree that no change, extension of time, or addition to the terms of the Contract or to the work to be performed thereunder of the Specifications thereof shall in any way effect their obligations on this bond, and they do hereby waive notice of any such change, extension of time, alteration or addition to the terms of the contract, or to the work, or to the Specifications.

			Leave
Signed and Sealed this day o	f July	, 20 <mark>_25</mark> ←	Blank
	0014		
(Individual principals sign here)			(SEAL)
	(SEAL)		
	(SEAL)		
In the presence of:			
	-		
Attest:	C. Thornton, Inc. M. W. J. C. (Corporate Princip T. ORUNGE Princip and Title Help)	Med Oky Sign Here) Modert	SEAL)
Jan	By: (Surety Sign He	L. Edul	LE CONTRA
Witness: Tyler Tucker	Mark W. Edwards, II, A	uttorney-in-Fact	
Countersigned: Reinf G. W. Harll Richard H. Mitchell, Alabama Resident Agent			2000 Sept. 19



Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: Alisa B. Ferris, Anna Childress, Jeffrey M. Wilson, Joshua T. Jones, Mark W. Edwards II, Richard H. Mitchell, Robert R. Freel, Robert Read Davis, William M. Smith, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: unlimited and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

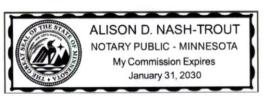
Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this first day of January, 2023.

> SEAL 1986 W YORK

STATE OF MINNESOTA HENNEPIN COUNTY

On this first day of January, 2023, before me personally came Sarah A. Kolar, Vice President and General Counsel of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and she acknowledged the execution of the same, and being by me duly sworn, that she is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated day of day of

ORPORATA SEAL 1986

This Power of Attorney expires January 31, 2030

Leave Blank

Kara L.B. Barrow, Secretary

Please direct bond verifications to surety@intactinsurance.com

LABOR AND MATERIALS BOND

ITEM VI

LABOR AND MATERIALS BOND

Bond No. 800193287

KNOW ALL MEN BY THESE PRESENTS, that weC. Thornton, Inc.
as Principal, and
Atlantic Specialty Insurance Company as Surety, are held and firmly bound unto said Mobile County, a political subdivision of and body corporate in the State of Alabama, hereinafter called the Obligee, in the penal sum of
Thirty Eight Thousand Four Hundred Ten and 00/100 Dollars (\$ 38,410.00) lawful money of the United States, for the payment of which sum and truly to be made, we bind ourselves, our heirs, personal representatives, successors and assigns, jointly and severally, firmly by these presents.
WHEREAS, said principal has entered into a certain Contract with said Obligee, dated
July 16. 20 35 . (Hereinafter called the Contract) for

MCP-001-24 Gulfcrest Road Bridge (STR #177) Rehabilitation

Leave Blank

which Contract and the Specifications for said work shall be deemed a part hereof as fully as if set out herein.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH THAT if the said Principal and all subcontractors to whom any portion of the work in said contract is sublet and all assignees of said Principal and of such subcontractors shall promptly make payments to all persons supplying him or them with labor, materials, or supplies for or in the prosecution of the work provided for in such Contract, or any amendment or extension of or addition to said Contract, and for the payment of reasonable attorney's fees incurred by the successful claimant or plaintiffs in suits or claims against the contractor arising out of or in connection with the said contract, then the above obligation shall be void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER, that this bond is subject to the following conditions and limitations.

(a) Any person, firm or corporation that has furnished labor, materials, or supplies for or in the prosecution of the work provided for in said Contract shall have a direct right to action against the Principal and Surety on this bond, which right of action shall be asserted in a proceeding, instituted in the County in which the work provided for in said Contract is to be performed or in any County in which said Principal or Surety does business. Such right of action shall be asserted in a proceeding instituted in the name of the claimant or claimants for his or their use and benefit against the Principal and Surety or either of them (but not later than one year after the final settlement of said Contract falls due) in which action such claim or claims shall be adjusted and judgment rendered thereon.

- (b) The Principal and Surety hereby designate and appoint the President of the County Commission of Mobile County, Mobile County, State of Alabama, or his successor or representative as the agent of each of them to receive and accept services of process or other pleading issued, or filed in any proceeding instituted on this bond and hereby consent that such service shall be the same as personal service on the Principal and/or Surety.
- (c) The Surety shall not be liable hereunder for any damages or compensation recoverable under Workmen's Compensation or Employer's Liability Statute.
- (d) In no event shall the Surety be liable for a greater sum than the penalty of this bond, or subject to any suit, action or proceeding thereon that is instituted later than one year after the final settlement of said contract.

(e) This Bond is given pursuant to the term	s of § 39-1-1, Code of Alabama, 1975, as amended.
SIGNED, SEALED AND DELIVERED this	day of July , 2025. Leave Blank
(Individual Principals sign here)	
	(SEAL)
Ву:	(SEAL)
In the Presence Of:	
	(Corporate Principal sign/here)
Attest:	BY: Atlantic Specialty Insurance Company Surety Sign Here
Witness: Tyler Tucker	



Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: Alisa B. Ferris, Anna Childress, Jeffrey M. Wilson, Joshua T. Jones, Mark W. Edwards II, Richard H. Mitchell, Robert R. Freel, Robert Read Davis, William M. Smith, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: unlimited and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

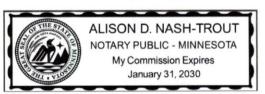
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this first day of January, 2023.

> SFAL 1986

STATE OF MINNESOTA HENNEPIN COUNTY

Sarah A. Kolar, Vice President and General Counsel

On this first day of January, 2023, before me personally came Sarah A. Kolar, Vice President and General Counsel of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and she acknowledged the execution of the same, and being by me duly sworn, that she is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

1986

Signed and sealed. Dated_____

day of duly

This Power of Attorney expires January 31, 2030

Leave Blank CORPORATE SEAL

Kara L.B. Barrow, Secretary

Please direct bond verifications to surety@intactinsurance.com

INSURANCE

INSTRUCTIONS

- 1. The full name (given, initial, surname) and residence of each individual party to the Bond must be inserted in the first paragraph.
- 2. If the Principal is a partnership, the full name of all partners must be inserted in the first paragraph which must recite that they are the partners composing the partnership (to be named) and all partners must execute the Bond as individuals.
- 3. The State of Incorporation of each corporate party to bond must be inserted in the first paragraph and the Bond must be executed under the Corporate Seal of each party attested by its Secretary or other appropriate Officer.
- 4. The date of the Bond must not be prior to the date of the Contract.

ETESNEY



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/18/2025

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

PRODUCER	CONTACT Ashley Spaulding, CISR	CONTACT Ashley Spaulding, CISR			
Thames Batre' Insurance	PHONE (A/C, No, Ext): (251) 643-7043 FAX (A/C, No):	251) 473-9010			
PO Box 6989 Mobile, AL 36660	E-MAIL ADDRESS: ashley@thamesbatre.com				
	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A: Middlesex Insurance Company	23434			
INSURED C Thornton Inc Chylane Gregory 12390 Airport Blvd Mobile, AL 36608	INSURER B : Midwest Employers Casualty Co	23612			
	INSURER C : AGC Workers Comp Fund, Inc	055028			
	INSURER D:				
	INSURER E :				
	INSURER F:				

CERTIFICATE NUMBER: COVERAGES 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,

ISR TR		TYPE OF INSI	JRANCE		ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	S	
A	X	COMMERCIAL GENE		ABILITY		1115				EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
		CLAIMS-MADE	X	OCCUR	X		A0174626	6/30/2024	6/30/2025	PREMISES (Ea occurrence)	\$	10,000
										MED EXP (Any one person) PERSONAL & ADV INJURY	\$	1,000,000
	CEN	N'L AGGREGATE LIMIT	ADDITE	S DED						GENERAL AGGREGATE	s	3,000,000
	GEI	POLICY X PRO-		LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:									\$	
Α	AUT	TOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO			X		A0174626	6/30/2024	6/30/2025	BODILY INJURY (Per person)	\$	
		OWNED AUTOS ONLY	SCH	EDULED OS						BODILY INJURY (Per accident)	\$	
		HIRED AUTOS ONLY	10M TUA	N-OWNED OS ONLY		1				PROPERTY DAMAGE (Per accident)	\$	
											\$	
Α	X	UMBRELLA LIAB	X	OCCUR						EACH OCCURRENCE	\$	5,000,00
		EXCESS LIAB		CLAIMS-MADE			A0174626	6/30/2024	6/30/2025	AGGREGATE	\$	5,000,00
		DED RETENT	TION \$								\$	
В	WOR	RKERS COMPENSATION	ON ITY							X PER OTH-		
	ANY	PROPRIETOR/PARTN	ER/EXE	CUTIVE Y/N	N/A		EWC009234	1/1/2025	1/1/2026	E.L. EACH ACCIDENT	\$	1,000,00
	(Mar	ICER/MEMBER EXCLU ndatory in NH)			N/A	1				E.L. DISEASE - EA EMPLOYEE	\$	1,000,00
	If ye	es, describe under SCRIPTION OF OPERA	TIONS	pelow						E.L. DISEASE - POLICY LIMIT	\$	1,000,00
C	Wo	rkers Compensa	tion				MP088-2025-AL	1/1/2025	12/31/2025	Per Statute		
Α	Equ	uipment Floater					A0174626	6/30/2024	6/30/2025	Leased/Rented		300,00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Project: Gulfcrest Road Bridge Rehabilitation

Regarding effective and expiration, both days are at 12:01 AM Standard Time at the insureds address. Coverage under this program is limited to the Alabama Workers Compensation Act. Alabama Associated General Contractors Self Insurers Fund (dba CompTrust AGC) is rated by AM Best & their rating is A-VII. Midwest Employers Casualty Company is rated by AM Best and their rating is A+ XV.

CERTIFICATE HOLDER

Additional Insured provisions apply with respect to General Liability (including on-going and completed operations), subject to forms CG 71 25 06 22, if SEE ATTACHED ACORD 101

CERTIFICATE HOLDER	
Mobile County Commission 205 Government St.	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Mobile, AL 36602	AUTHORIZED REPRESENTATIVE
	Part Mai

CANCELLATION

LOC #: 1



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY		NAMED INSURED	
Thames Batre' Insurance		C Thornton Inc Chylane Gregory	
POLICY NUMBER		12390 Airport Bívd Mobile, AL 36608	
SEE PAGE 1		Mobile, AL 36608	
CARRIER	NAIC CODE		
SEE PAGE 1 SEE P 1		EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles: required by written contract.

Automobile:

Additional Insured provisions apply with respect to Automobile Liability, subject to form CA 20 48 10 13, if required by written contract.

ITEM VII

INSURANCE REQUIREMENTS

Contractors

Contractor, at its sole expense, shall obtain and maintain in full force the following insurance to protect the Contractor and the Mobile County Commission (MCC) at limits and coverages specified herein. These limits and coverages specified are the minimum to be maintained and are not intended to represent the correct insurance needed to fully and adequately protect the Contractor. If requested by MCC, Contractor will provide copies of policies within 10 days of request.

All insurance will be provided by insurers licensed to conduct business in the State of Alabama and shall have a minimum A.M. Best rating of A- VII and must be acceptable to MCC. Self-insured plans and/or group funds not having an A.M. Best rating must be submitted to MCC for prior approval.

NO WORK IS TO BE PERFORMED UNTIL PROOF OF COMPLIANCE WITH THE INSURANCE REQUIREMENTS HAS BEEN RECEIVED BY MCC.

(a) Worker s Compensation and Employers Liability

Part One: Statutory Benefits as required by the State of Alabama

Part Two: Employers Liability \$1,000,000 Each Accident

\$1,000,000 Each Employee \$1,000,000 Policy Limit

Policy shall contain a Waiver of Subrogation Endorsement in favor of MCC.

(b) Commercial General Liability

Coverage on an Occurrence form with a combined single limit (Bodily Injury and Property Damage combined) as follows:

Each Occurrence	\$1,000,000
Personal and Advertising Injury	\$1,000,000
Products/completed Operation Aggregate	\$2,000,000
General Aggregate	\$2,000,000

- Aggregate Limit applies per Project
- Coverage to include
 - Premises and operations
 - Personal Injury and Advertising Injury
 - Products/Completed Operations
 - Independent Contractors
 - Contractual Liability
 - Explosion, Collapse and Underground hazards
- The Commercial General Liability policy, shall name MCC as Additional Insured for claims arising out of the Contractors and/or any Subcontractors work. The ISO Forms CG 20 07 04 and CG 20 37007 04 or a comparable form that is no more restrictive shall be required. The additional Insured form MUST include the current Operations and Products/Completed Operations of each contractor. The naming of the additional insured does not obligate the additional insured to pay any premiums due.
- Aggregate limits to be on a "per project" basis.

(c) Automobile Liability

Covering all Owned, Non-Owned, and Hired vehicles with a Combined single limit (bodily injury and property damage combined) of \$1,000,000 each accident. The policy shall name MCC as an Additional Insured.

Certificate of Insurance

A Certificate of Insurance evidencing the above minimum requirements must be provided to and accepted by MCC <u>PRIOR</u> to commencement of any work on the contract. Each policy shall be endorsed to provide thirty (30) days prior written notice of cancellation to the MCC

CONTRACT FOR CONSTRUCTION

ITEM VIII

CONTRACT FOR CONSTRUCTION

Leave Blank THIS CONTRACT, entered into this day of by the County Commission of Mobile County, Mobile, Alabama, on behalf of Mobile County, Alabama. hereinafter Party called the Owner, of the First a corporation organized and existing under the laws of the State of Alabama, a Partnership consisting of of the County of Mobile , in the State of Alabama , hereinafter called the Contractor, Party of the Second Part, WITNESSETH: That the parties hereto do mutually agree as follows:

The Contractor shall furnish the materials and perform the work for the construction of MCP-001-24 Gulfcrest Road Bridge (STR #177) Rehabilitation complete in place with all appurtenances, for the consideration of the unit prices set forth in the Contractor's Proposal (estimated to total \$ Thirty-Eight Thousand Four Hundred Ten and 00 /100 Dollars (\$ 38,410.00) for the various items of work and in strict and entire conformity with the provisions of the Contract, and the Advertisement and Proposal, and the Plans and Specifications (including Special Provisions, if any) prepared (or approved) and submitted by the Owner, copies of which are hereto attached, and which said Plans and Specifications and the Advertisement and the Proposal are hereby made a part of this agreement as fully and to the same effect as if the same has been set forth at length in the body of this Agreement.

The work shall be commenced within fifteen (15) days of the date specified in a work order to be issued to the Contractor by the Owner, or its authorized representative, and shall be completed within TWENTY (20) working days from and after the commencement date stipulated in said Work Order. In the event the Contractor should fail to complete the work within the time specified herein, the Contractor shall pay the Owner, as liquidated damages, the amount specified in Section 108 of the Alabama Department of Transportation Standard Specifications for Highway Construction, for each working day beyond the required date of completion.

By signing this contract, the contracting parties affirm, for the duration of the agreement, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a contracting party found to be in violation of this provision shall be deemed in breach of the agreement and shall be responsible for all damages resulting therefrom.

Sourc	e of Sufficient Funds
Χ	County Funds
	Grant Funds
	Other Funds
Availa	bility of Funds
X	Above funds are held by Mobile County at contract execution
	Above funds will become available following contract execution

IN WITNESS WHEREOF, the parties hereto have executed this Contract as of the day and year first above written.

THE MOBILE COUNTY COMMISSION OF MOBILE COUNTY, ALABAMA

Attest: Colorin Kern E. Edwin Kerr	By: Merceria Ludgood President Mobile County Commission (Official Title)
Two Witnesses: Destry Bushy	C. Thornton Inc. (Contractor) 12390 AIRPORT BLVD., MOBILE, ALABAMA 36608 (Business Address)
L Chylane T. Gregory	contifut that I am the
President	, certify that I am the
	_of the Corporation named as Contractor herein, that
Chylane T. Gregory	_who signed this Contract on behalf of the Contractor, was
then President	of said Corporation; that said contract was
duly signed for and in behalf of said	corporation by authority of its governing body, and is within
the scope of its corporation by author	ity of its corporate powers. MUNUL J. MUNUM

(Corporate \$eal)

STATE OF ALABAMA]

COUNTY OF MOBILE]

I, the undersigned authority, a Notary Public in and for said Sthat Chylane T. Gregory	State and County, hereby certify
whose name as President	
of C. Thornton Inc.	, a
corporation, is signed to the foregoing instrument, and who is before me on this day, that being informed of the contents of officer and with full authority executed the same voluntarily a	the within instrument, he, as such
Given under my hand and Official Seal this the 8th day NOTARY PUBLIC, MOBILE COUNTY, ALABAMA	of <u>July</u> , <u>2025</u>
NOTARY POBLIC, MOBILE COUNTY, ALABAMA	
My commission expires	JOSEPH T. REGAN, JR My Commission Expires June 20, 2029
STATE OF ALABAMA]	
COUNTY OF MOBILE]	
hereby certify that MERCERIA LUDGOOD and E. EDWIN and Administrator, respectively, of the MOBILE COUNTY CO body corporate and politic, are signed to the foregoing instacknowledged before me on this day, that, being informed they as such officers and with full authority, executed the sabears date.	DMMISSION of MOBILE COUNTY, a trument and who are known to me d of the contents of the instrument ame voluntarily on the day the same
Given under my hand and notarial seal on this thed	ay of July , J025
NOTARY PUBLIC, MOBILE COUNTY, ALABAMA	
My commission expires	CARRIE PERREIRA Notary Public Alabama State at Large

CONTRACT SIGNATURE PAGES

EXAMPLES

Performance Bond Signature Page Example

Signed and Sealed this	day of _	, 20	
			(SE
Witness: Print Name		Individual principals sign here	(02
Witness: Signature	-	Company Name	
Without Cignature		Company Name	(0 5
			(SE
			(SE
Attest: Print Name		Corporate Principal Sign Here	
Attest: Signature		Company Name	
		Surety Sign Here	(SE
		Print Namo Titlo	_
		Print Name, Title	
Witness: Print Name		Witness: Signature	
Countersigned: Print Name		Countersigned: Signature	

Labor & Materials Bond Signature Page Example

- (b) The Principal and Surety hereby designate and appoint the President of the County Commission of Mobile County, Mobile County, State of Alabama, or his successor or representative as the agent of each of them to receive and accept services of process or other pleading issued, or filed in any proceeding instituted on this bond and hereby consent that such service shall be the same as personal service on the Principal and/or Surety.
- (c) The Surety shall not be liable hereunder for any damages or compensation recoverable under Workmen's Compensation or Employer's Liability Statute.
- (d) In no event shall the Surety be liable for a greater sum than the penalty of this bond, or subject to any suit, action or proceeding thereon that is instituted later than one year after the final settlement of said contract.
- (e) This Bond is given pursuant to the terms of § 39-1-1, Code of Alabama, 1975, as amended.

Signed and Sealed and Delivered	day of, 20_	·
Witness: Print Name	Individual principals sign here	(SEAL)
Witness: Signature	Name & Company Name	_
Attest: Print Name	Corporate Principal Sign Here	(SEAL)
Attest: Signature	Name & Company Name	_
Allest. Oignature	Name & Company Name	
Witness: Print Name	Surety Sign Here	(SEAL)
Witness: Signature	Print Name, Title	

Contract for Construction Signature Page Example

IN WITNESS WHEREOF, the parties hereto have executed this Contract as of the day and year first above written.

THE MOBILE COUNTY COMMISSION OF MOBILE COUNTY, ALABAMA

E. Edwin Kerr, County Administrator	Merceria Lu	dgood	
	President Mobile Cou	nty Commission	
Two Witnesses:			
Two Vittlesses.			
	(Contrac	tor)	
	(Signatu	re)	
	(Street Add	dress)	
	(0.000.00		
	(City, State, Z	ate, Zip Code)	
	9 - 0 - 1 - 1 - 1 - 1 - 1	of	
	, certify that I am the		
the Corporation named as Contractor herein, that			
signed this Contract on behalf of the Con	tractor, was then	of	
said Corporation; that said contract was o	duly signed for and in behalf of said	d corporation	
by authority of its governing body, and is	within the scope of its corporation	by authority of	
its corporate powers.			
	(Corporate Seal)		
	(OUI POI ALC OCAI)		

Contract for Construction Notary Page Example

STATE OF ALABAMA COUNTY OF MOBILE

I, the undersigned authority, a Notary Public in and for said State and County, hereby certif
whose name as
of, a
corporation, is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day, that being informed of the contents of the within instrument, he, as such officer and with full authority executed the same voluntarily and as the act of said corporation.
Given under my hand and Official Seal this the day of,
NOTARY PUBLIC, MOBILE COUNTY, ALABAMA
My commission expires
STATE OF ALABAMA
COUNTY OF MOBILE
I,
Given under my hand and notarial seal on this the day of,,
NOTARY PUBLIC, MOBILE COUNTY, ALABAMA
My commission expires