



PINAL COUNTY
wide open opportunity

Offer & Acceptance Form

Pinal County
Finance Department
31 N. Pinal St.
Bldg. A
P.O. Box 1348
Florence, AZ 85132

OFFER AND ACCEPTANCE FORM

TO PINAL COUNTY:

The undersigned hereby offers and agrees to furnish the material, service, or construction in compliance with all terms, conditions, specifications, and amendments in the Solicitation.

	President
Authorized Signature	Title
Mark A. Johnson	5/21/2012
Printed Name	Date
Arizona Brake & Clutch Supply, Inc.	602-256-7966
Company Name	Telephone
2211 N. Black Canyon Hwy.	Phoenix, AZ 85009
Address	City, State, Zip

For clarification of this offer, contact:

Name: Mark Johnson Phone: 602-256-7966 Fax: 602-254-1283

ACCEPTANCE OF OFFER (For Pinal County Use Only)

The offer is hereby accepted and the Responder is now bound to sell or provide the materials, services, or construction as indicated by the Purchase Order or Notice of Award and based upon the solicitation, including all terms, conditions, specifications, amendments, etc. and the Offer as accepted by Pinal County.

The contract is for:

This contract shall henceforth be referenced to as Contract No. PC-112217. The Offeror is cautioned not to commence any billable work or to provide any material or service under this contract until Offeror receives an executed purchase order or notice to proceed.

Awarded this 20th day of June, 2012.

<u>David Snider</u>	<u>Chairman</u>	<u>David Snider</u>
Name (Print)	Title	Signature

Approved as to form: 
Pinal County Attorney's Office



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OFFER AND ACCEPTANCE FORM – Page 2

By signing the previous page of the Offer and Acceptance Form, Responder certifies:

- A. The submission of the bid did not involve collusion or other anti-competitive practices.
- B. The Responder shall not discriminate against any employee or applicant for employment in violation of Federal Executive Order 11246.
- C. The Responder has not given, offered to give, nor intends to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the Submittal.
- D. The Responder certifies that it complies with Executive Order 12549 related to Federal Government Debarment and Suspension (see 4-7)
- E. The Responder certifies that the individual signing the bid is an authorized agent for the Responder and has the authority to bind them to the contract.

F. Intergovernmental Cooperative Purchasing

The County has entered into various cooperative purchasing agreements with other Arizona government entities in order to conserve resources, reduce overhead and purchase costs and improve delivery time. The contract resulting from this Solicitation may be extended for use by other municipalities, school districts and government agencies in the State of Arizona with the approval of the Contractor. Orders placed by other agencies and payment thereof will be the sole responsibility of that agency. The County shall not be responsible for any disputes arising out of transactions made by others.

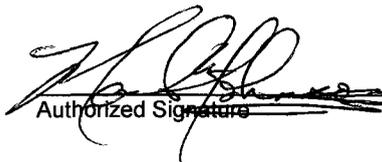
Pursuant to PC-112217 Special Terms and Conditions, paragraph 5, titled Eligible Agencies (Cooperative Usage), Responder shall designate whether other governmental entities will be allowed to purchase from this contract:

Yes []

No []

Arizona Brake & Clutch Supply, Inc.

Firm


 Authorized Signature

 ORIGINAL

OFFERED BY:



Arizona Brake & Clutch Supply, Inc.
2211 North Black Canyon Hwy
Phoenix, Arizona 85009
602/256-7966
602/254-1283 facsimile

**Pinal County Finance Department
Elizabeth Zink, Buyer II
31 North Pinal Street, Building A
Florence, AZ 85132**

**RFP PC-112217
VEHICLES & EQUIPMENT:
PARTS, REPAIRS & SERVICES**



PINAL COUNTY
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Addendum Acknowledgement Form

Pinal County
Finance Department
31 N. Pinal St.
Bldg. A
P.O. Box 1348
Florence, AZ 85132

ADDENDUM ACKNOWLEDGEMENT FORM

Solicitation Addendums are posted on the Pinal County website at the following address:
<http://pinalcountyz.gov/Departments/Finance/Pages/BidsProposals.aspx> . It is the responsibility of the Responder to periodically check this website for any Solicitation Addendum.

This page is used to acknowledge any and all addendums that might be issued. Any addendum issued within five days of the solicitation due date, will include a new due date to allow for addressing the addendum issues. Your signature indicates that you took the information provided in the addendums into consideration when providing your complete response.

Please sign and date:

ADDENDUM NO. 1 Acknowledgement _____
Signature Date

ADDENDUM NO. 2 Acknowledgement _____
Signature Date

ADDENDUM NO. 3 Acknowledgement _____
Signature Date

If no addendums were issued, indicate below, sign the form and return with your response.

Arizona Brake & Clutch Supply, Inc.

Firm

Authorized Signature



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Non-Collusion Statement

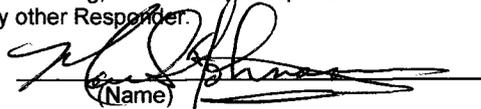
Pinal County
Finance Department
31 N. Pinal St.
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Florence, AZ 85132

NON-COLLUSION STATEMENT

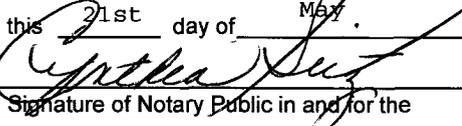
State of Arizona)
County of Maricopa) ss.
Mark A. Johnson, affiant,
the President (Name)
Arizona Brake & Clutch Supply, Inc. (Title)
(Contractor/Offeror)

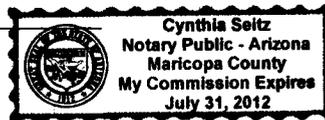
the persons, corporation, or company who makes the accompanying Offer, having first been duly sworn, deposes and says:

That such Offer is genuine and not sham or collusive, nor made in the interest of, or behalf of, any persons not herein named, and that the Responder has not directly or indirectly induced or solicited any other Responder to put in a sham Offer, or any other person, firm or corporation to refrain from offering, and that the Responder has not in any manner sought by collusion to secure for itself an advantage over any other Responder.


(Name)
Mark A. Johnson, President
(Title)

Subscribed and sworn to before me
this 21st day of May, 2012


Signature of Notary Public in and for the
State of Arizona
County of Maricopa



NAME AND ADDRESS OF CERTIFICATE HOLDER:	DATE ISSUED _____ _____ AUTHORIZED REPRESENTATIVE
---	---

Request for Taxpayer Identification Number and Certification

**Give form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) ARIZONA BRAKE & CLUTCH SUPPLY, INC.	
	Business name, if different from above ARIZONA BRAKE & CLUTCH SUPPLY, INC.	
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	Address (number, street, and apt. or suite no.) 2211 N. BLACK CANYON HWY	
	City, state, and ZIP code PHOENIX, AZ 85009	
List account number(s) here (optional)		Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								
or								
Employer identification number								
8	6	0	2	9	8	4	8	7

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶	Date ▶ 5-21-12
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Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
 - A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
 - Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.
- Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,



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Responders Checklist

Pinal County
 Finance Department
 31 N. Pinal St.
 Bldg. A
 P.O. Box 1348
 Florence, AZ 85132

RESPONDERS CHECKLIST

	Yes/No
Did you sign your Offer sheet?	Yes
Did you sign and notarize the Non-collusion statement?	Yes
Did you acknowledge all addendums, if any?	Yes
Did you complete all required Response Forms?	Yes
Did you include your W-9 Form?	Yes
Did you include any necessary attachments?	Yes
Is the outside of your submittal marked with the Solicitation #, Due Date and Time?	Yes
Did you include one original and the required number of copies?	Yes
Did you follow the order for submissions of documents?	Yes
Did you include proof of insurance(s) if requested?	Yes

 <p>PINAL COUNTY <i>wide open opportunity</i></p>	<p>RFP PC-112217 Vehicles & Equipment: Parts, Repairs & Services Response Form</p>	<p>Pinal County Finance Department 31 N. Pinal St. Bldg. A P.O. Box 1348 Florence, AZ 85132</p>
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Responder Name: ARIZONA BRAKE & CLUTCH SUPPLY, INC.

Responders shall complete the following Response Form, indicating their responses in the spaces provided. Additional pages may be added so long as they are clearly referenced in the spaces provided.

Please note: Any exception and the total number of exceptions taken will negatively affect your evaluation score. Compliance to Terms & Conditions has been identified as an evaluation criteria for this Solicitation.

Any exception not contained within this section of the Solicitation will be deemed invalid and will not be considered.

Acceptability of Responses

Offers that do not include this completed Response Form or that do include an incomplete Response Form or that include a completed Response Form with unacceptable responses may cause the entire offer to be deemed unacceptable and therefore non-responsive.

1 Price

Responders shall complete the following pricing tables below.

1.1 Parts (per Section 2.1.1 of the Statement of Work)

Responder shall state the offered discount for parts in the table below. Pricing shall be a discount from list or published price. Using blank spaces in the tables below, Responder shall state additional discounts offered on other parts provided that could benefit Pinal County.

Responder Response

Manufacturer	% Discount from List Price or Published Price	Source for Manufacturer's pricing (website, etc.)
Allis Chalmers	56.5%-69% off (see addendum)	Manufacturers price list
Allmand	"	"
Artic Cat	"	"
Bear Cat	"	"
Big Tex	"	"
Blue Bird	"	"
Broce	"	"
Carson	"	"
Case	"	"
Caterpillar	"	"



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RFP PC-112217
Vehicles & Equipment: Parts,
Repairs & Services
Response Form

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Chevrolet	56.5%-69% off (see addendum)	Manufacturers price list
Crafc	"	"
Dodge	"	"
EZ-Go	"	"
Fleming	"	"
Ford	"	"
Freightliner	"	"
GMC	"	"
Gorman Rupp	"	"
Gravely	"	"
Haul Mark	"	"
Honda	"	"
Hummer	"	"
Hyster	"	"
Ingersoll Rand	"	"
International	"	"
Interstate	"	"
Isuzu	"	"
Jeep	"	"
John Deere	"	"
Kenworth	"	"
Kodiak	"	"
Kubota	"	"
Landa	"	"
Mega	"	"



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Nissan	56.5%-69% off (see addendum)	Manufacturers price list
Oldsmobile	“	“
Pace	“	“
Polaris	“	“
Peterbilt	“	“
Pontiac	“	“
Porter	“	“
Ranco	“	“
Rosco	“	“
Solar Tech	“	“
Suzuki	“	“
Towmaster	“	“
Trail King	“	“
Trail-Eze	“	“
United Truck Equipment	“	“
Vermeer	“	“
Water Buffalo	“	“
Western Star	“	“
White/GMC	“	“
Yale	“	“
Other		
Expedited parts delivery fee (Fixed fee, not discount from list price)	\$75.00	



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**RFP PC-112217
Vehicles & Equipment: Parts,
Repairs & Services
Response Form**

Pinal County
Finance Department
31 N. Pinal St.
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P.O. Box 1348
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1.3 Other services or major services (other than listed above in section 1.2)

Responder shall provide labor rates and fees listed below. Note: Any fees or rates not included will not be considered part of the final contract. Parts as needed for repairs may be charged in excess of labor rates/shop fees/etc. Parts shall be a discount from list price. Responders shall include such parts in section 1.1 pricing table above.

Description	Rate	Comment
Shop labor rate	\$65.00/hour	
Shop labor rate – after hours	\$90.00/hour	
Field service call rate	\$90.00/hour	
Field service call rate – after hours	\$120.00/hour	
Mileage	-0-	
Hazardous Waste Fee	-0-	
Environmental Fee	-0-	
Shop supplies	2% of invoice	
Other		



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Response Form

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Florence, AZ 85132

2 Capacity of Offeror

2.1. Responder shall provide:

2.1.1 Name, Title and email address of Primary Responder

Mark A. Johnson, President, mjohnson@arizonabrake.com

2.1.2 Address, phone, fax and email address of Primary Servicing Office

2211 N. Black Canyon Hwy., Phoenix, AZ 85009

Phone: 602-256-7966 Fax: 602-254-1283 email: mjohnson@arizonabrake.com

2.1.3 Address, phone, fax and email address of additional Servicing Offices (if different than 2.1.2)

N/A

2.1.4 Name, Title and email address of Key Personnel assigned to Pinal County. Responders shall include a description of their responsibilities under the contract (Ordering, Billing, Customer Service, etc).

Bob Brock, Sales, bbrock@arizonabrake.com (ordering & customer service)

Trish Welch, Sales Coordinator, sales@arizonabrake.com (ordering & customer service)

2.2 Responder shall provide general background information regarding their company. Responder shall describe in detail their overall experience in the industry relative to the Products and/or Services offered. Responders shall include at least three (3) references in this regard.

See attachment marked Exhibit 2.2

2.3 Responder shall describe the services or materials offered in response to Section 2 - General Requirements in the Statement of Work on page 11 of the Request for Proposal (Section 2.1.2).

Responder Response

2.3.1 Responder will indicate which flat rate manual will be used that is compatible with the vehicle or equipment being serviced. Include Name, Date and Volume.

Not applicable – quote is for parts and labor only

2.4 Responder shall describe their compliance with Section 3 – Specific Requirements in the Statement of Work on page 11 of the Request for Proposal.

2.4.1 Certified as a manufacturer's authorized service facility – indicate which manufacturers. Responders shall include a copy of the certification or include a letter from the manufacturer.

N/A

2.4.2 Certification of technicians – indicate which certifications (ASE, etc). Responders shall include a copy of the certifications as applicable.

N/A

2.4.3 Service hours of operation

7:00 a.m. – 7:00 p.m. Monday thru Friday and 7:00 a.m. – Noon on Saturday

2.4.4 Responder shall describe how service trucks are generally equipped in order to comply with the Scope of Work.

N/A

2.5 Responder shall indicate which County locations (cities) they will provide on-site services and repairs per



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Florence, AZ 85132

Section 3.1.3 of the Statement of Work (for example, a Coolidge vendor may want to provide services to Coolidge and Florence only).

N/A

2.6 Responders shall indicate the types of vehicles your facility can repair:

- 2.6.1 Light Duty Vehicles (1 ton and below):
- 2.6.2 Medium Duty Vehicles (1-1/2 ton to 26,000 GVW):
- 2.6.3 Heavy Duty Vehicles (26,000 GVW and Heavier):
- 2.6.4 Heavy Equipment (Off Road):

2.7 Responder shall specify which of the Fleet Maintenance yards to which they would provide expedited parts delivery service. See Exhibit 1 for a list of locations. Include any fees associated with expedited delivery on price list in Section 1.1.

2.7.1 Location

All locations

2.7.2 Frequency

See attachment marked Exhibit 2.7.2

2.7.3 Same day delivery

All locations subject to expedited fee

3 Method of Approach

3.1 Responder shall describe in detail their methodology in providing any inventory replacement program, scheduled maintenance program, etc. (if offered), to assist and improve the scheduling of general maintenance and upkeep of vehicles and equipment in accordance with Statement of Work paragraph 3.3.

N/A

4 Conformance to Terms and Conditions and Statement of Work

Response Form Responses

Arizona Brake & Clutch Supply, Inc. have read, understand, and shall comply with all Terms and Conditions and Scope of Work. Responders that accept the County's Terms and Conditions and Instructions shall check **YES** or **NO** to clearly indicate their acceptance. Responders who take exception to the County's Terms and Conditions and Scope of Work shall likewise clearly indicate their exception and provide Responder's suggested language.

YES, I acknowledge that I have read and understand all Terms and Conditions and the Scope of Work and will comply in any resultant contract.

NO, I acknowledge that I have read, understand all Terms and Conditions and the Scope of Work and will comply in any resultant contract with the exceptions listed below.



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Pinal County
Finance Department
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Exceptions (If checked NO)

Responders that take exception to any Terms and Conditions or Scope of Work shall justify their exception as well as proposing any changes to the County's language with the Responder's suggested changes clearly indicated. Additional pages may be added so long as they are clearly referenced in the spaces provided. Please note that taking exception to any Terms and Conditions or Scope of Work may affect your evaluation score. Both the number of exceptions and the severity of the exceptions can affect your score and may have you deemed non-responsive for this solicitation.

Cite the specific Term and Condition for which an exception is taken: **N/A**

Responder's justification for the exception: **N/A**

Responder's suggested changes: **N/A**



Arizona Brake & Clutch Supply, Inc.

P.O. Box 6369 • Phoenix, AZ 85005 • 2211 N. Black Canyon Highway • Phoenix, AZ 85009 • (602) 256-7966 • Wats 1-800-352-6301 • Fax (602) 254-1283

ADDENDUM

AIR BRAKES

Bendix 56.5% off list price

BATTERIES

Exide 58% off list price

BEARING & SEALS

Federal Mogul (National) 60% off list price
Stemco 58.8% off list price
Timken 60% off list price

BELTS & HOSES

Dayco 69% off list price

BRAKE DRUMS

Gunite 60% off list price
Webb Wheel 60% off list price

BRAKE PARTS

Raybestos 64.4% off list price

BRAKE SHOES

Arizona Brake & Clutch 60% off list price w/core exchange

BRAKE SHOES BOXED KITS

Arizona Brake & Clutch 60% off list price w/core exchange

WINDSHIELD FLUID

Great Dane 56% off list price

WIPER BLADES

Sloan 56% off list price

EXHIBIT 2.2



Arizona Brake & Clutch Supply, Inc.

2211 N. Black Canyon Hwy.

Phoenix, AZ 85009

Arizona Brake & Clutch Supply has serviced Arizona since 1941. We are a proud member of Local First Arizona. We understand your needs and offer the products and services that fleets, school districts, municipalities and diesel shops have come to rely on and trust. We supply quality parts and services throughout Arizona, as well as areas in California and New Mexico.

Mark Johnson, the President of Arizona Brake & Clutch Supply, has over 35 years experience in the industry and has owned the company since 1991.

We have a staff of knowledgeable sales associates as well as ASE certified personnel.

For all your brake and clutch related components, we are the experts whether it be an antique car, off-highway equipment, or anything in between.

Following is a list of references for your review:

REFERENCES

Arizona Department of Transportation
1739 W. Jackson St.
Phoenix, AZ 85007

Susanna Hernandez – (602) 712-7211

Contract Dated: 8/2010 Aftermarket Automotive Parts & Service

City of Phoenix
251 W. Washington Street
Phoenix, AZ 85003

Mike Meloy – (602) 495-7545

Contract Dated: 9/2009 Automotive & Equipment Parts

Maricopa County
320 W. Lincoln Street
Phoenix, AZ 85003

Andrea Stupka – (602) 506-3504

Contract Dated: 7/2010 HD Truck & Industrial Parts and Service

City of Scottsdale
9191 E. San Salvadore
Scottsdale, AZ 85258

Jesse Montano – (480) 391-5570

Contract Dated: 8/2009 Vehicle Brake System Components



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**EXHIBIT 1: Fleet Services
Maintenance Yards
RFP PC-112217 Vehicle &
Equipment Parts, Repairs & Services**

Pinal County
Finance Department
31 N. Pinal St.
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P.O. Box 1348
Florence, AZ 85132

EXHIBIT 2.7.2

FLEET SERVICES MAINTENANCE YARDS

Fleet Services operates eight (8) maintenance yards. Operating hours are Monday through Friday, (excluding holidays), 5:00 a.m. to 3:30 p.m.

Florence Yard Weekly on Tuesday
900 S. Pinal Parkway
Florence, AZ 85132
520-866-7930

Hidden Valley Yard Weekly on Tuesday
43910 W. Meadow View Rd
Maricopa, AZ 85138
520-251-2358

San Tan Yard Weekly on Tuesday
3535 E. Hunt Highway
Queen Creek, AZ 85243
520-866-7043

Riverside Yard Weekly on Wednesday
54964 E. Florence/Kelvin Highway
Kearny, AZ 85137

Apache Junction Yard Weekly on Thursday
305 E. Superstition Drive
Apache Junction, AZ 85119
623-583-1836

Casa Grande Yard Weekly on Wednesday
22539 W. Peters Rd
Casa Grande, AZ 85122
520-866-7731

Oracle Yard Monthly on Wednesday
860 Justice Drive
Oracle, AZ 85623
520-896-2272

Arizona City Yard Monthly on Wednesday
7945 W. Battaglia Drive
Arizona City, AZ 85193
520-466-5642

DECLARATIONS
COMMERCIAL GENERAL LIABILITY COVERAGE PART

LIMITS OF INSURANCE

Limit

GENERAL AGGREGATE LIMIT (Other than Products-Completed Operations)		<u>\$2,000,000</u>
PRODUCTS - COMPLETED OPERATIONS AGGREGATE LIMIT		<u>\$2,000,000</u>
PERSONAL & ADVERTISING INJURY LIMIT		<u>\$1,000,000</u>
EACH OCCURRENCE LIMIT		<u>\$1,000,000</u>
DAMAGE TO PREMISES RENTED TO YOU LIMIT	Any one premises	<u>\$100,000</u>
MEDICAL EXPENSE LIMIT	Any one person	<u>\$5,000</u>

RETROACTIVE DATE (Claims Made Coverage Form CG 00 02 only)

Coverage A of this Insurance does not apply to "bodily injury" or "property damage" which occurs before the Retroactive Date, if any, shown below.

Retroactive Date: _____

Refer to General Liability Schedule CG-F-8 for Locations and Classifications.

ENDORSEMENTS APPLICABLE:

See Schedule Attached

Includes copyrighted material of Insurance Services office, Inc. with its permission.

**DECLARATIONS
BUSINESS AUTO COVERAGE PART**

ITEM ONE - NAMED INSURED and Address - Refer to COMMON POLICY DECLARATIONS

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This coverage part provides only those coverages for which an "X" is shown in the Coverages Provided Column below. Each of these coverages will apply to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from SECTION ONE - COVERED AUTOS of the Business Auto Coverage Form.

COVERAGES	COVERED AUTOS (Entry of one or more symbols shows which "autos" are covered "autos")	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	COVERAGES PROVIDED
Liability	1	\$ 1,000,000	X
Personal Injury Protection (or equivalent No-fault cov.)		Separately stated in each P.I.P. Endorsement	
Added Personal Injury Protection (or equivalent No-fault cov.)		Separately stated in each P.I.P. Endorsement	
Property Protection (Michigan only)		Separately stated in the P.P.I. Endorsement \$ Deductible (Nil if nothing shown)	
Auto Medical Payments	2A	\$ 5,000	X
Uninsured Motorists	2A	SEE CA-F-93	X
Underinsured Motorists	2A	SEE CA-F-93	X
Physical Damage Comprehensive Coverage	2A	Actual Cash Value or Cost of Repair, whichever is less, minus the deductible stated in the auto schedule for each covered "auto" for all "loss" except fire or lightning.	X
Physical Damage Specified Causes of Loss Coverage		Actual Cash Value or Cost of Repair, whichever is less, minus \$25 Deductible for each covered "auto" for "loss" caused by mischief or vandalism.	
Physical Damage Collision Coverage	2A	Actual Cash Value or Cost of Repair, whichever is less, minus the deductible stated in the auto schedule for each covered "auto".	X

DESCRIPTION OF ADDITIONAL COVERED AUTO DESIGNATION SYMBOLS

- Symbol 10 = EXCLUDING ANY "AUTO" NOT HAVING AN ACTUAL CASH VALUE OF AT LEAST
- Symbol 11 =
- Symbol 12 =
- Symbol 13 =

ITEM THREE - SCHEDULE OF COVERED "AUTOS" YOU OWN - REFER TO AUTO SCHEDULE

ITEM FOUR - SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUM - LIABILITY INSURANCE

State	Estimated Cost of Hire For Each State	Rate Per Each \$100 Cost of Hire
IF ANY		

Cost of hire means the total amount you incur for the hire of "autos" you do not own (not including "autos" you borrow or rent from your employees or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

ITEM FIVE - SCHEDULE FOR NON-OWNERSHIP LIABILITY: Rating Basis - Number of Employees: 34

FORMS AND ENDORSEMENTS APPLICABLE: SEE SCHEDULE ATTACHED

**WORKERS COMPENSATION AND EMPLOYER'S LIABILITY INSURANCE POLICY
INFORMATION PAGE**

MUTUAL COMPANY
PARTICIPATING
NONASSESSABLE POLICY
NCCI Carrier Code: 16446

FEDERATED MUTUAL
INSURANCE COMPANY
Processing Office:
P.O. Box 328
Owatonna, MN 55060-0328



HOME OFFICE: OWATONNA
MINNESOTA 55060

Policy No. **RENEWAL**
9431931
Prior Policy No.
Account No. **338-487-2**

Producer / Agent:
BRIAN P KEITH

Phone: 800-533-0472

ITEM 1. NAMED INSURED AND ADDRESS:

**ARIZONA BRAKE & CLUTCH SUPPLY
INC
2211 N BLACK CANYON HWY
PHOENIX AZ 85009**

Entity Type Corporation
FEIN 86-0298487

See Extension of Information Page "Named Insured"

Other workplaces not shown above: See Extension of Information Page "Other Workplaces of the Insured"

ITEM 2. POLICY PERIOD: The policy period is from **03-01-2012** to **03-01-2013** 12:01 A.M. Standard time, at the insured's mailing address.

ITEM 3. COVERAGE:

- A. WORKERS COMPENSATION INSURANCE:** Part One of the policy applies to the Workers Compensation law of the states listed here: **AZ**
- B. EMPLOYERS LIABILITY INSURANCE:** Part Two of the policy applies to work in each state listed in Item 3.A. The limits of our liability under Part Two are:
- | | | |
|---------------------------|------------------|---------------|
| Bodily Injury by Accident | \$500,000 | each accident |
| Bodily Injury by Disease | \$500,000 | policy limit |
| Bodily Injury by Disease | \$500,000 | each employee |
- C. OTHER STATES INSURANCE:** Part Three of the policy applies to states, if any, listed here: **All states except states designated in Item 3.A. and ND OH WA WY**
- D. ENDORSEMENTS:** This policy includes these endorsements and schedules: See Extension of Information Page "List of Endorsements"

Insured Copy

A STOCK COMPANY

Commercial Umbrella Liability Policy
FEDERATED SERVICE
 INSURANCE COMPANY
 HOME OFFICE: OWATONNA
 MINNESOTA 55060
 Phone No. (507) 455-5200



Policy No..9896562

Account No. 338-487-2

DECLARATIONS

Item 1. Named Insured and Address:

ARIZONA BRAKE & CLUTCH SUPPLY
 INC
 2211 N BLACK CANYON HWY
 PHOENIX AZ 85009

Item 2. Policy Period: (Mo. Day Yr.)

From 03-01-2012 to 03-01-2013

12:01 A.M., standard time at the address of the named insured as stated herein.

The named insured is:

Corporation

Business of named insured is:

Item 3. \$2,000,000 Occurrence Limit

Item 4. \$2,000,000 Aggregate Limit

Item 5. \$3,409 Annual Premium

Item 6. Schedule of Underlying Insurance Policies.

**CERTIFIED ACTS OF
 TERRORISM PREMIUM:**

\$14

Type of Insurance	Limits of Liability		Insurer - Federated unless otherwise indicated.
	Per Occurrence	Aggregate	
GENERAL LIABILITY			
<input checked="" type="checkbox"/> Commercial General Liability	\$1,000,000	\$2,000,000	
<input type="checkbox"/> Businessowners			
<input type="checkbox"/> Dwelling			
<input type="checkbox"/> Dwelling			
<input type="checkbox"/> Dwelling			
AUTO LIABILITY			
<input checked="" type="checkbox"/> Business Auto	\$1,000,000		
<input type="checkbox"/> Garage			
<input type="checkbox"/> Businessowners			
<input type="checkbox"/> Personal Auto			
OTHER UNDERLYING INSURANCE			
<input type="checkbox"/> Equipment Dealers Stock Floater, Coverage B - Property of Others			
<input checked="" type="checkbox"/> Garagekeepers			
<input type="checkbox"/> Legal Liability - Building			
EMPLOYERS LIABILITY		Limits of Liability	
<input checked="" type="checkbox"/> Employers Liability	\$500/500/500		
<input type="checkbox"/> State Fund			
<input type="checkbox"/> Self-insured Work Comp			

Endorsement(s) attached hereto: See Schedule of Forms and Endorsements Attached

Date

Authorized Representative