



DIGITAL ENGINEERING & IMAGING, INC.

2024-042

January 31, 2024

Mr. Jon McCraw
City Manager
City of Diamondhead
5000 Diamondhead Circle
Diamondhead, MS 39525

Re: Diamondhead Roadway Improvements – Phase 4
Pay Application No.7-Final
DE Project No. 730-1001-004

Dear Mr. McCraw,

Please find attached Payment Request No. 7-Final from Huey P. Stockstill, LLC. for construction on the above referenced project in the amount of **\$17,251.58**.

We have verified all quantities and work completed and we recommend approval for payment. The retainage amount of \$17,251.58 will be released in this payment.

Attached are copies of the Contractor's Affidavit of Payments of Debts and Claims and Consent of Surety to Final Payment.

Should you have questions or need additional information, please contact our office.

Sincerely,

DIGITAL ENGINEERING

A handwritten signature in black ink, appearing to read 'John M. Stein'.

John M. Stein, P.E.
Manager of Engineering Operations

cc: Jeb Seal, HPS
Jeannie Klein, COD

Enclosures

APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 22076-7

To Owner: CITY OF DIAMONDHEAD

Project: 22076. DIAMONDHEAD ROADWAY IMP.
PH. 4

Application No. : 10

Distribution to :
☐ Owner
☐ Architect
☐ Contractor

From Contractor: Huey P. Stockstill, LLC

P. O. Box 758

Picayune, MS 39466

Via Architect:

Contract For:

Project Nos:

Contract Date:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract Continuation Sheet is attached.

1. Original Contract Sum \$729,975.00
2. Net Change By Change Order \$258.42
3. Contract Sum To Date \$730,233.42
4. Total Completed and Stored To Date \$730,233.42

5. Retainage:

a 0.00% of Completed Work \$0.00
b 0.00% of Stored Material \$0.00

Total Retainage \$0.00

6. Total Earned Less Retainage \$730,233.42

7. Less Previous Certificates For Payments \$712,981.84

8. Current Payment Due \$17,251.58

9. Balance To Finish, Plus Retainage \$0.00

| CHANGE ORDER SUMMARY | Additions | Deductions |
|--|-----------|------------|
| Total changes approved in previous months by Owner | \$0.00 | \$0.00 |
| Total Approved this Month | \$258.42 | \$0.00 |
| TOTALS | \$258.42 | \$0.00 |
| Net Changes By Change Order | \$258.42 | |

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents. That all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: Huey P. Stockstill, LLC

By: Amanda Cavan Date: 12/2/2023

State of: MS

Subscribed and sworn to before me this

Notary Public:

My Commission expires:

County of: Hancock
Dec. day of December 2023



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 17,251.58

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:

By:

Date: 1/31/24

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Progress Bill

From: Huey P. Stockstill, LLC
P. O. Box 768
Picayune, MS 39466

Invoice: 22076-7
Date: 12/08/23
Application #: 10

To: CITY OF DIAMONDHEAD

Invoice Due Date: 01/07/24
Payment Terms: Net 30 Days

Contract: 22076. DIAMONDHEAD ROADWAY IMP. PH. 4

| Item | Description | Contract Amount | Contract Quantity | U/M | Quantity JTD | Unit Price | Materials On-Site | Total | | Amount Previous | Quantity This Period | Amount This Period |
|-----------------------------|--|-----------------|-------------------|-----|--------------|------------|-------------------|------------------------------|---------|-----------------|----------------------|--------------------|
| | | | | | | | | Completed And Stored To Date | % | | | |
| 1 | Mobilization | 38,000.00 | 0.000 | LS | 0.000 | 0.000000 | 0.00 | 38,000.00 | 100.00% | 38,000.00 | 0.000 | 0.00 |
| 2 | Pre-Construction Video | 1,500.00 | 0.000 | LS | 0.000 | 0.000000 | 0.00 | 1,500.00 | 100.00% | 1,500.00 | 0.000 | 0.00 |
| 3 | Construction Layout | 1,800.00 | 0.000 | LS | 0.000 | 0.000000 | 0.00 | 1,800.00 | 100.00% | 1,800.00 | 0.000 | 0.00 |
| 4 | Maintenance of Traffic | 10,000.00 | 0.000 | LS | 0.000 | 0.000000 | 0.00 | 10,000.00 | 100.00% | 10,000.00 | 0.000 | 0.00 |
| 5 | Clean-up, Dressing & Sodding | 0.00 | 0.000 | LS | 0.000 | 0.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| 6 | Asphaltic Conc. Pavement, 1.5" | 533,927.24 | 38,137.660 | SY | 38,137.660 | 14.000000 | 0.00 | 533,927.24 | 100.00% | 533,927.24 | 0.000 | 0.00 |
| 7 | Overlay | 19,599.66 | 6,533.220 | SY | 6,533.220 | 3.000000 | 0.00 | 19,599.66 | 100.00% | 19,599.66 | 0.000 | 0.00 |
| 8 | Cold Planing/Disposal of Asphaltic Concrete Paveme | 46,398.18 | 365.340 | SY | 365.340 | 127.000000 | 0.00 | 46,398.18 | 100.00% | 46,398.18 | 0.000 | 0.00 |
| 9 | Full Depth Patch | 17,017.28 | 1,215.520 | SY | 1,215.520 | 14.000000 | 0.00 | 17,017.28 | 100.00% | 17,017.28 | 0.000 | 0.00 |
| 10 | Asphaltic Concrete Leveling Course, 0' - 1.5' | 33,366.06 | 427.770 | SY | 427.770 | 78.000000 | 0.00 | 33,366.06 | 100.00% | 33,366.06 | 0.000 | 0.00 |
| 11 | Remove and Replace Asphalt Roadway (4.5" Thick Min | 4,088.00 | 292.000 | LF | 292.000 | 14.000000 | 0.00 | 4,088.00 | 100.00% | 4,088.00 | 0.000 | 0.00 |
| 12 | Thermo Stop Bar (24" Width) | 8,534.00 | 4,267.000 | LF | 4,267.000 | 2.000000 | 0.00 | 8,534.00 | 100.00% | 9,564.00 | 0.000 | 0.00 |
| 13 | Plastic Pmt Striping (Yellow Solid Double Line) | 16,003.00 | 16,003.000 | LF | 16,003.000 | 1.000000 | 0.00 | 16,003.00 | 100.00% | 16,003.00 | 0.000 | 0.00 |
| 14 | Plastic Pmt Striping (White Solid Line)(4" Width) | 0.00 | 0.000 | CY | 0.000 | 80.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| 15 | Remove Unsuitable Material & Replace with Select | 0.00 | 0.000 | CY | 0.000 | 110.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| 16 | Remove Unsuitable Material & Replace w 610 Stone | 0.00 | 0.000 | SY | 0.000 | 2.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| 17 | Geotextile Fabric | 0.00 | 0.000 | LF | 0.000 | 40.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| | Extruded Asphalt Concrete Curb | 0.00 | 0.000 | LF | 0.000 | 0.000000 | 0.00 | 0.00 | 0.00% | 0.00 | 0.000 | 0.00 |
| Total Billed To Date: | | | | | | | | | | 730,233.42 | | |
| Less Retainage: | | | | | | | | | | 0.00 | | |
| Less Previous Applications: | | | | | | | | | | 712,981.84 | | |
| Total Due This Invoice: | | | | | | | | | | 17,251.58 | | |

CONSENT OF SURETY TO FINAL PAYMENT

ALA Document G707

Bond No. 43BCSIT5438

| | |
|------------|-------------------------------------|
| OWNER | <input type="checkbox"/> |
| ARCHITECT | <input type="checkbox"/> |
| CONTRACTOR | <input type="checkbox"/> |
| SURETY | <input checked="" type="checkbox"/> |
| OTHER | <input type="checkbox"/> |

TO OWNER:
(Name and address)

City of Diamondhead
5000 Diamondhead Circle
Diamondhead, MS 39525

PROJECT:
(Name and address)

Diamondhead Roadway Improvements- Phase 4

ARCHITECT'S PROJECT NO.:

CONTRACT FOR:

CONTRACT DATED:

In accordance with the provisions of the Contract between the Owner and the Contractor as indicated above, the
(Insert name and address of Surety)

Hartford Accident and Indemnity Company
One Hartford Plaza
Hartford, CT 06155-0001

, SURETY,

on bond of
(Insert name and address of Contractor)

Huey P. Stockstill, LLC
P.O. Box 758
Picayune, MS 39466

, CONTRACTOR,

hereby approves of the final payment to the Contractor, and agrees that final payment to the Contractor shall not relieve the Surety of
any of its obligations to
(Insert name and address of Owner)

City of Diamondhead
5000 Diamondhead Circle
Diamondhead, MS 39525

, OWNER,

as set forth in said Surety's bond.

IN WITNESS WHEREOF, the Surety has hereunto set its hand on this date: January 31, 2024
(Insert in writing the month followed by the numeric date and year.)



Attest:
(Seal): see attached power of attorney

Hartford Accident and Indemnity Company

(Surety)

By: Angie M. Strickland
(Signature of authorized representative)

Angie M. Strickland Attorney-in-Fact
(Printed name and title)

POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD

BOND, T-11

One Hartford Plaza

Hartford, Connecticut 06155

Bond.Claims@thehartford.com

call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Code: SurePath

- ☐ Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☒ Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
- ☐ Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint
Angie M. Strickland of Jackson, MS

their true and lawful Attorney-in-Fact, to sign its name as surety(ies) only as delineated above by ☒, and to execute, seal and acknowledge the following bond, undertaking, contract or written instrument:

Bond No. 43BCSIT5438

on behalf of

Huey P. Stockstill, LLC

naming

City of Diamondhead

as Oblige in the amount of See Bond Form

on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on May 23, 2016 the Companies have caused these presents to be signed by its Assistant Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



Shelby Wiggins

Shelby Wiggins, Assistant Secretary

Joelle L. LaPierre

Joelle L. LaPierre, Assistant Vice President

STATE OF FLORIDA

COUNTY OF SEMINOLE

SS. Lake Mary

On this 20th day of May, 2021, before me personally came Joelle LaPierre, to me known, who being by me duly sworn, did depose and say: that (s)he resides in Seminole County, State of Florida; that (s)he is the Assistant Vice President of the Companies, the corporations described in and which executed the above instrument; that (s)he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that (s)he signed his/her name thereto by like authority.



Jessica Ciccone

Jessica Ciccone
My Commission #111122280
Expires June 20, 2025

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of January 31, 2024.

Signed and sealed in Lake Mary, Florida.



Keith D. Dozois

Keith D. Dozois, Assistant Vice President



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/31/2024

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).

| | |
|--|---|
| PRODUCER Jackson-Alliant Insurance Services, Inc. 1817 Crane Ridge Drive Suite 300 Jackson MS 39216 | CONTACT NAME: Jamie White PHONE (A/C, No, Ext): 601-709-4613 E-MAIL ADDRESS: jwhite@alliant.com FAX (A/C, No): 601-709-4615 |
| INSURED Huey P. Stockstill, LLC P.O. Box 758 Picayune MS 39466 | INSURER(S) AFFORDING COVERAGE INSURER A: Zurich American Insurance Comp INSURER B: Endurance American Specialty I INSURER C: Landmark American Insurance Co INSURER D: Homesite Insurance Company of INSURER E: INSURER F: |
| | NAIC # 16535 41718 33138 11156 |

COVERAGES**CERTIFICATE NUMBER:** 1597635815**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 INSD | 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 <input checked="" type="checkbox"/> Cont. Liab. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER: | Y | Y | GLO 3719181-02 | 10/1/2023 | 10/1/2024 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 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 <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 | Y | BAP 3719182-02 | 10/1/2023 | 10/1/2024 | COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B D C | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | Y | Y | ELD30011563702 CXP000201-02 LHA104374 | 10/1/2023 10/1/2023 10/1/2023 | 10/1/2024 10/1/2024 10/1/2024 | EACH OCCURRENCE \$ 9,000,000 AGGREGATE \$ 9,000,000 \$ |
| A | <input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N N | Y | WC 3719180-02 | 10/1/2023 | 10/1/2024 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |

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

Project: Diamondhead Roadway Improvements City of Diamondhead, MS. Digital Engineering Project No. 730-1000-012, Asphalt Overlay various roads, milling and striping. City of Diamondhead, Digital Engineering & Imaging, Inc. and all other parties required by the written contract are included as additional insureds on all policies except the worker's compensation policy and provided a waiver of subrogation where required by written contract

CERTIFICATE HOLDER**CANCELLATION**

City of Diamondhead
5000 Diamondhead Circle
Diamondhead MS 39525

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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