



**Thompson**

Benjamin Diebold  
Director of Operations - Government Services  
Email: bdiebold@thompsonind.com - Phone: 504-810-0471

May 4, 2020

Office of Infrastructure and Reconstruction  
Puerto Rico Department of Education

ATTENTION: Recovery <recovery@de.pr.gov

**RE: Thompson Construction Group, Inc. – Re: Request for Proposal PRDE (ER) 2019-02 Program Management Services**

To Whom It May Concern:

Thompson Construction Group, Inc. will honor our price submittal put forth in the original bid from April 2019. At this time we do not request any proposal changes, pricing changes, or rate changes. There are also no substantial changes in our teaming agreements.

Please accept this statement as our recommitment to the original proposal. We will honor those prices for the term of the requested new Bid Bond. Please find the bid bond and certificate of insurance attached.

We look forward to your quick decision on this matter.  
If any questions or issues arise, please contact us immediately.

Sincerely,

Benjamin J Diebold  
Director of Operations  
Thompson Construction Group, Inc.

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: USI Insurance Services, LLC-CL, 1301 Gervais St., Suite 500, Columbia, SC 29201, 803 602-3020. CONTACT NAME: Aura Lewis, PHONE: 803-602-3014, FAX: (A/C, No):, E-MAIL ADDRESS: aura.lewis@usi.com. INSURER(S) AFFORDING COVERAGE: INSURER A: Zurich American Insurance Company (NAIC # 16535), INSURER B: Travelers Property Cas. Co. of America (NAIC # 25674), INSURER C: Illinois Union Insurance Company (NAIC # 27960), INSURER D: Lloyd's of London (NAIC # 85202), 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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSR, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation and Employers' Liability, Pollution Liab, Professional Liab.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Puerto Rico Department of Education, its affiliates and the respective officers, directors and employees of each shall be named as additional insured under General Liability, Auto Liability and Umbrella policies on a primary and noncontributory basis, if required by written/executed contract. Waiver of Subrogation in favor of Commonwealth of Virginia, its affiliates and the respective officers, directors and employees of each in respect to General Liability, Auto Liability, Umbrella, and Workers Compensation policies when required by contract.

CERTIFICATE HOLDER: Puerto Rico Department of Education, PO Box 190759, San Juan, PR 00919-0759. CANCELLATION: 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: Kenneth Baylor

# CNA SURETY

## Bid Bond

Bond No. Bid Bond

### CONTRACTOR:

(Name, legal status and address)

Thompson Construction Group, Inc.  
100 N. Main Street  
Sumter, SC 29150

### SURETY: Continental Casualty Company: Illinois Corporation

(Name, legal status and principal place of business)

333 S. Wabash Avenue  
41st Floor  
Chicago, IL 60604

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

### OWNER:

(Name, legal status and address)

Puerto Rico Department of Education  
PO Box 190759  
San Juan, PR 00919-0759

**BOND AMOUNT:** Two Hundred Fifty Thousand Dollars and 00/100--(\$250,000.00)

### PROJECT:

(Name, location or address, and Project number, if any)

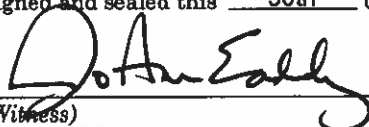
"PRDE (ER)-2019-02 PROGRAM MANAGEMENT SERVICES."

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated hereinto. When furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 30th day of April, 2020.

  
(Witness)

Thompson Construction Group, Inc.  
(Principal)

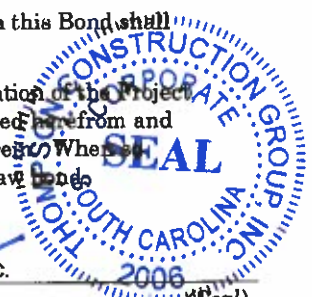
(Title)

Continental Casualty Company

(Surety)

(Title) Maria A. Bras - Attorney in Fact

  
(Witness) Rafael E. Bras



**CAUTION:** You should sign an original AIA Contract Document, on which this text appears in RED. An original ass that changes will not be obscured.

Printed in cooperation with the American Institute of Architects (AIA).

The language in this document conforms exactly to the language used in AIA Document A310 - Bid Bond - 2010 Edition.

**POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT**

Know All Men By These Presents, That Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company (herein called "the CNA Companies"), are duly organized and existing insurance companies having their principal offices in the City of Chicago, and State of Illinois, and that they do by virtue of the signatures and seals herein affixed hereby make, constitute and appoint

**Maria A Benitez, Maria A Bras, Lizzamarie Torres-Delgado, Individually**

of San Juan, PR their true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on their behalf bonds, undertakings and other obligatory instruments of similar nature

**- In Unlimited Amounts -**

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of their insurance companies and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the Resolutions printed on the reverse hereof, duly adopted, as indicated, by the Boards of Directors of the insurance companies.

In Witness Whereof, the CNA Companies have caused these presents to be signed by their Vice President and their corporate seals to be hereto affixed on this 25th day of March, 2014.



Continental Casualty Company  
National Fire Insurance Company of Hartford  
American Casualty Company of Reading, Pennsylvania

Paul T. Bruflat  
Paul T. Bruflat Vice President

State of South Dakota, County of Minnehaha, ss:

On this 25th day of March, 2014, before me personally came Paul T. Bruflat to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company described in and which executed the above instrument; that he knows the seals of said insurance companies; that the seals affixed to the said instrument are such corporate seals; that they were so affixed pursuant to authority given by the Boards of Directors of said insurance companies and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance companies.



My Commission Expires 6/23/2015

J. Mohr  
J. Mohr Notary Public

**CERTIFICATE**

I, D. Bult, Assistant Secretary of Continental Casualty Company, an Illinois insurance company, National Fire Insurance Company of Hartford, an Illinois insurance company, and American Casualty Company of Reading, Pennsylvania, a Pennsylvania insurance company do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the Resolutions of the insurance companies printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance companies this 30TH day of APRIL, 2020.



Continental Casualty Company  
National Fire Insurance Company of Hartford  
American Casualty Company of Reading, Pennsylvania

D. Bult  
D. Bult Assistant Secretary

## Authorizing Resolutions

ADOPTED BY THE BOARD OF DIRECTORS OF CONTINENTAL CASUALTY COMPANY:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company at a meeting held on May 12, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execute power of attorneys on behalf of Continental Casualty Company.

ADOPTED BY THE BOARD OF DIRECTORS OF NATIONAL FIRE INSURANCE COMPANY OF HARTFORD:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company by unanimous written consent dated May 10, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execute power of attorneys on behalf of National Fire Insurance Company of Hartford.

ADOPTED BY THE BOARD OF DIRECTORS OF AMERICAN CASUALTY COMPANY OF READING, PENNSYLVANIA:

This Power of Attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the Board of Directors of the Company by unanimous written consent dated May 10, 1995:

"RESOLVED: That any Senior or Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Senior or Group Vice President to the Secretary of the Company prior to such execution becoming effective."

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execute power of attorneys on behalf of American Casualty Company of Reading, Pennsylvania.

Company #: 3116854



Commonwealth of Puerto Rico  
**OFFICE OF THE COMMISSIONER OF INSURANCE**

Certificate of Authority

This is to certify that

**Continental Casualty Company**

333 S. Wabash Ave.  
Chicago IL 60604

has complied with the corresponding requirements of the Insurance Code of Puerto Rico and is therefore granted authority to transact, within Puerto Rico Agricultural, Casualty, Disability, Marine and Transportation, Property, Surety, Vehicle insurance.

This authorization shall be in force from July 01, 2019 to June 30, 2020 unless previously suspended, revoked or terminated pursuant to the law and regulations in force.

In witness whereof, I hereunto subscribe my name and affix my official seal at Guaynabo, Puerto Rico. this 10th day of June, 2019.



A handwritten signature in cursive script, appearing to read "Javier Rivera Ríos".

Javier Rivera Ríos  
Commissioner of Insurance

Maria A Bras Benitez  
 PO BOX 196555  
 SAN JUAN PR 00919

License No. 12576 Commonwealth of Puerto Rico NPN: 6883801  
**OFFICE OF THE COMMISSIONER OF INSURANCE**  
**Maria A Bras Benitez**  
 250 PONCE DE LEON AVE.  
 SUITE 405  
 SAN JUAN PR 00918

This is to certify that pursuant to requirements of the Insurance Code of Puerto Rico the above named is qualified to do business in Puerto Rico with the authority listed below.

POWER OF ATTORNEY	EFFECTIVE DATE	EXPIRATION DATE	MAXIMUM AMOUNT	DATE OF POWER
Greenwich Insurance Company	03/01/2020	02/28/2022	UNLIMITED	01/28/2003
St. Paul Fire & Marine Insurance Company	03/01/2020	02/28/2022	UNLIMITED	08/03/2006
XL Reinsurance America Inc.	03/01/2020	02/28/2022	\$ 20,000,000.00	04/08/2005
Travelers Casualty and Surety Company	03/01/2020	02/28/2022	UNLIMITED	08/03/2006
R L I Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	09/13/2012
XL Specialty Insurance Company	03/01/2020	02/28/2022	UNLIMITED	08/21/2001
Zurich American Insurance Company	03/01/2020	02/28/2022	UNLIMITED	07/12/2006
Fidelity And Deposit Company of Maryland	03/01/2020	02/28/2022	UNLIMITED	07/12/2008
Argonaut Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	07/05/2012
United States Fidelity And Guaranty Company	03/01/2020	02/28/2022	UNLIMITED	08/03/2006
Western Surety Company	03/01/2020	02/28/2022	UNLIMITED	12/09/2010
The Guarantee Company of North America USA	03/01/2020	02/28/2022	UNLIMITED	02/23/2013
Continental Casualty Company	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
Travelers Casualty and Surety Company of America	03/01/2020	02/28/2022	UNLIMITED	03/30/2012
Atlantic Specialty Insurance Company	03/01/2020	02/28/2022	\$ 50,000,000.00	08/05/2013
National Fire Insurance Company of Hartford	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
American Casualty Company of Reading, Pennsylvania	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
North American Specialty Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/18/2015
Washington International Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
Westport Insurance Corporation	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
Liberty Mutual Insurance Company	03/01/2020	02/28/2022	UNLIMITED	01/15/2013
Aspen American Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
The Continental Insurance Company	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
Endurance Assurance Corporation	03/01/2020	02/28/2022	UNLIMITED	04/24/2017
Great American Insurance Company	03/01/2020	02/28/2022	\$ 10,000,000.00	07/17/2017
Berkley Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	12/10/2019

This qualification shall remain in effect until the expiration date, when applicable, unless previously suspended, revoked or terminated pursuant to the law and regulations in force.

To validate the accuracy of this license you may review the same at <https://sbs.naic.org/sole-external-lookup/>

Robert Ceraso  
 Chief Deputy Commissioner

License No: 12576 Commonwealth of Puerto Rico NPN: 6883801  
**OFFICE OF THE COMMISSIONER OF INSURANCE**  
**Maria A Bras Benitez**  
 250 PONCE DE LEON AVE.  
 SUITE 405  
 SAN JUAN PR 00918

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R L I Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	09/13/2012
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Fidelity And Deposit Company of Maryland	03/01/2020	02/28/2022	UNLIMITED	07/12/2008
Argonaut Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	07/05/2012
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Western Surety Company	03/01/2020	02/28/2022	UNLIMITED	12/09/2010
The Guarantee Company of North America USA	03/01/2020	02/28/2022	UNLIMITED	02/23/2013
Continental Casualty Company	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
Travelers Casualty and Surety Company of America	03/01/2020	02/28/2022	UNLIMITED	03/30/2012
Atlantic Specialty Insurance Company	03/01/2020	02/28/2022	\$ 50,000,000.00	08/05/2013
National Fire Insurance Company of Hartford	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
American Casualty Company of Reading, Pennsylvania	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
North American Specialty Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/18/2015
Washington International Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
Westport Insurance Corporation	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
Liberty Mutual Insurance Company	03/01/2020	02/28/2022	UNLIMITED	01/15/2013
Aspen American Insurance Company	03/01/2020	02/28/2022	UNLIMITED	04/16/2015
The Continental Insurance Company	03/01/2020	02/28/2022	UNLIMITED	07/10/2014
Endurance Assurance Corporation	03/01/2020	02/28/2022	UNLIMITED	04/24/2017
Great American Insurance Company	03/01/2020	02/28/2022	\$ 10,000,000.00	07/17/2017
Berkley Insurance Company	03/01/2020	02/28/2022	\$ 25,000,000.00	12/10/2019

This qualification shall remain in effect until the expiration date, when applicable, unless previously suspended, revoked or terminated pursuant to the law and regulations in force.

To validate the accuracy of this license you may review the same at <https://sbs.naic.org/sole-external-lookup/>

Robert Ceraso  
 Chief Deputy Commissioner



April 30, 2020

No.

**REVISED PROPOSAL SUBMITTAL FORM 7: CERTIFICATE OF INSURANCE COVERAGE**

PROOF THAT COVERAGE IS EITHER CURRENTLY IN PLACE OR WILL BE PROVIDED MUST BE SUBMITTED WITH THE PROPOSER PROPOSAL.

**PROPOSER NAME:** THOMPSON CONSTRUCTION GROUP, INC.

**PROPOSER ADDRESS:** 100 N. MAIN STREET, SUMTER, SC 29150

**NAME OF SURETY:** CONTINENTAL CASUALTY COMPANY

**NAME OF AGENT:** WILLIS TOWERS WATSON

**AGENT'S PHONE:** 336-266-1620

The undersigned hereby certifies that THOMPSON CONSTRUCTION GROUP, INC. (the "Proposer") and its subcontractor(s) has or will have the following insurance coverage, respectfully:

TYPE OF COVERAGE	MINIMUM LIMITS	POLICY OR BINDER NO	ACTUAL LIMITS PROVIDED	EXPIRATION DATE
COMMERCIAL/GENERAL LIABILITY OCCURRENCE /AGGREGATE	As per Part VII of RFP Refer to Tab 10	Provided by	Others	
PRODUCTS AND COMPLETED OPERATIONS LIABILITY	As per Part VII of RFP REFER TO TAB 10	Provided by	Others	
AUTOMOBILE LIABILITY	As per Part VII of RFP REFER TO TAB 10	Provided by	Others	
EMPLOYERS' LIABILITY	As per Part VII of RFP REFER TO TAB 10	Provided by	Others	
WORKER'S COMP	CONTRACTOR'S STATE & PUERTO RICO MINIMUM COMPENSATION	Provided by	Others	
PROFESSIONAL LIABILITY	As per Part VII of RFP REFER TO TAB 10	Provided by	Others	
BID BOND	\$250,000			

Addenda #5

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April 30, 2020

PAYMENT BOND	100% OF THE CONTRACT PRICE			
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**PROOF THAT COVERAGE IS EITHER CURRENTLY IN PLACE OR WILL BE PROVIDED MUST BE SUBMITTED WITH THE PROPOSER PROPOSAL.** This can be done by one of the two following methods:

1. Complete form "CERTIFICATION OF INSURANCE COVERAGE" or
2. Submit a Certificate of Insurance on a form provided by your Insurance Agent. This form must include the following clauses:
  - (a) The Commonwealth of Puerto Rico, the Department of Education, all Commonwealth Departments, Agencies, Municipalities, Boards and Commissions, its officers, agents, servants, employees and volunteers are hereby named as Additional Insured.
  - (b) The policy(s) cannot be reduced or canceled without at least ninety (90) days' prior written notice to the Puerto Rico Department of Education.
  - (c) The insurance company is prohibited from pleading government function in the absence of any specified written authority from the Puerto Rico Department of Education.
  - (d) The policy(s) will automatically include and cover all phases of work, equipment, persons, et cetera which are normally covered while performing work under the above contract, whether specifically written therein or not.

Regardless of the method used, the form **MUST** be totally complete, **MUST** show that all Limits of Insurance are or will be met, and **MUST** be signed by the Agent.

The successful Proposer will be required to provide insurance coverage as shown in General Conditions of RFP and Contract, prior to providing any services. This insurance coverage must be maintained throughout the term of the contract.

CONTINENTAL CASUALTY COMPANY

Signature:

*Maria A. Bras*

Name:

MARIA A. BRAS

Title:

ATTORNEY IN FACT

Date:

APRIL 30, 2020

Addenda #5

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