Recorded in Official Records, County of San Bernardino, Errol J. Mackzum, Recorder RECORDING REQUESTED BY No Fee AND WHEN RECORDED MAIL TO Doc No. 19950308804 -09:10am 09/07/95 CITY CLERK CITY OF REDLANDS **35 CAJON STREET** 005 1035168 01 05 PG P O BOX 3005 REDLANDS CA 92373 _ 5 6

NOTICE OF COMPLETION

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SVY CIT-CO

TRANS TAX

Notice pursuant to Civil Code Section 3093, must be filed within 10 days after completion. Notice is hereby given that:

ASSESSOR'S PARCEL NO. UNENDION

NO FEE CHRG EXAM

- The undersigned is owner or corporate officer of the owner of the interest or estate stated below in the property hereinafter described:
- The full name of the owner is:

CITY OF REDLANDS

3. The full address of the owner is:

35 CAJON STREET, P.O. BOX 3005

REDLANDS CA 92373

- 4. The nature of the interest or estate of the owner is; In fee.
- 5. The full names and full addresses of all persons, if any, who hold title with the undersigned as joint tenants or as tenants in common are:
 NOT APPLICABLE
- 6. A work of improvement on the property hereinafter described was completed on August 28, 1995. The work done was: the reconstruction of Citrus Avenue, Contract No. 22-9522-4230.
- 7. The name of the contractor for such work of improvement was: Riverside Construction Company

111 N Main Street, Riverside CA 92501

May 2, 1995 (Date of Contract)

- 8. The property on which said work of improvement was completed is in the city of Redlands, County of San Bernardino, State of California, and is described as follows: Citrus Avenue between Orange Street and Redlands Boulevard.
- 9. The Street address of said property is: None

Dated: August 29, 1995

Signature of owner or corporate officer of owner hames in paragraph 2 or his agent

VERIFICATION

I, the undersigned, say: I am the Public Works Director of the declarant of the foregoing notice of completion; I have read said notice of completion and know the contents thereof; the same is true of my own knowledge.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 29, 1995, at Redlands, California.

(Personal signature of the individual who is swearing that the contents of the notice of completion are true.)

AGREEMENT

THIS	S AC	REE	MENT,	mad	le and en	tered	into this	2nd	day o	of	May	,	1995, by	and
betw	een	the C	city of R	edlaı	nds, a Mu	nicipa	l Corpor	ation,	organ	ized	and	existi	ng unde	r the
laws	of	the	State	of	Californ	ia, h	ereinafte	r ref	ferred	to	as	the	"City"	and
	RIV	ERS	IDE CO	NSTF	RUCTION	COMP	ANY							
a par	tnei	ship	consistii	ig of										-
or an	ind	ividu	al tradii	ig as										
of th	e Ci	ty of	Rive	rsid	le	, C	County of	Ri	versi	de				,
State	of (Califo	ornia, he	reina	after refea	red to	as the "	Contr	actor".					

WITNESSETH: That the City and the Contractor, for the consideration hereinafter named, agree as follows:

1. **SCOPE OF WORK:** The Contractor will furnish all materials and will perform all of the work for the following:

Construction of the Citrus Avenue Downtown project, complete, all as shown on drawing nos. F1486-1 thru 8, inclusive, as specified, and made a part of Contract No. 22-9522-4230.

- 2. THE CONTRACT SUM: \$289,565.00
- 3. TIME FOR COMPLETION: The work to be completed within eighty-five (85) work days from and after the date of the Notice to Proceed.
- 4. CONTRACT DOCUMENTS: The complete contract includes all of the contract documents set forth herein, to wit; Notice Inviting Bids, Instructions to Bidders, Proposals and Bid Form, Bid Bond, Agreement, Faithful Performance Bond, Labor and Material Bond, Plans and Specifications and any addenda thereto.

IN WITNESS WHEREOF, the year first written above.	parties hereto have executed this	is Agreement th	e day and
			(SEAL)
	City of R (Owner) By: Mayor, City of Redlands, Conference of San Bernardino, Californ	County	
ATTEST:			
City Clerk, City of Reglands County of San Bernardino, California	·		
			(SEAL)
	RIVERSIDE CONSTRUCTION CO	<u>. </u>	
Ву:	Signature of Authorized Agent RICHARD LOUNSBURY, SECRET	ARY	
	Title		
	Signature of Authorized Agent	(if necessary)	
	Title	-gananeur	
	266222 A	torinolandiga	

Contractor's License No.

FAITHFUL PERFORMANCE BOND

KNOW ALL PERSONS BY THESE PRESENTS

O	
State ofCALIFORNIA County ofRIVERSIDE	-
On	CANDY M. COONS, NOTARY PUBLIC NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"
Caredy M. Coons Comm. #1035075	ed to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/barke subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/hhe/if authorized capacity(hes), and that by his/her/hhe/if signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
Open East Aug. 7, 1988	WITNESS my hand and official seal. SIGNATURE OF NOTARY
fraudulent reattachment of this form. CAPACITY CLAIMED BY SIGNER	e valuable to persons relying on the document and could prevent
INDIVIDUAL CORPORATE OFFICER	DESCRIPTION OF ATTACHED DOCUMENT
PARTNER(S)	TITLE OR TYPE OF DOCUMENT
ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER:	NUMBER OF PAGES
SIGNER IS REPRESENTING:	DATE OF DOCUMENT
NAME OF PERSON(S) OR ENTITY(IES)	SIGNER(S) OTHER THAN NAMED ABOVE

LABOR AND MATERIAL BOND

KNOW ALL PERSONS BY THESE PRESENTS

	That	RIV	ERSID	E CON	STRUCTIO	N COMP	PANY				a	s Co	ntractor,	and
S	SAFECO	INSU	RANCE	COMP	ANY OF A	MERICA	\	8	as Sure	ety, aı	e hel	d and	firmly l	bound
	unto t	he C	ty of	Redla	nds, here	einafter	r called	City, i	n the s	sum o	f TWO	HUNDE	RED EIGH	ITY-NINE
THOUSAND														
	truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.													
		ct wi	th said		ractor ha									nexed
	NOW, THEREFORE, if said Contractor, or Sub-Contractor, fails to pay for any materials, equipment, or other supplies, or for rental of same, used in connection with the performance of work contracted to be done, or for amounts due under applicable State law for any work or labor thereon, said Surety will pay for the same in an amount not exceeding the sum specified above, and, in the event suit is brought upon this bond, a reasonable attorney's fee to be fixed by the court. This bond shall inure to the benefit of any persons, companies, or corporations entitled to file claims under applicable State law and will remain in force until 90 days after completion.													
	PROVIDED, that any alterations in the work to be done or the materials to be furnished, which may be made pursuant to the terms of said contract, shall not in any way release either said Contractor or said Surety thereunder, nor shall any extensions of time granted under the provisions of said contract release either said Contractor or said Surety, and notice of such alterations or extensions of the contract is hereby waived by said Surety.													
	SIGN	ED A	ND SI	EALE	D, this <u>8</u>	<u>тн</u> day	y of	MAY		,	1995.			
	RIVERS COMPAN	VY	CONSTI		ON (SEAL		AMERIC	SURANC A rety)	E COMP	PANY (SEA	L)			
	By:	(Sign	nature)	m	By:_	` `	nature)	, APTO	RNEY-	·IN-FA	СТ		
							Add	lress:	4 HUTT	ON CF	NTRE			
								TA ANA			<u> </u>	707		
							***************************************	phone		***************************************				
	(Cool on	d Not	a≕al Aa	knowla	dament of	Suretul		*	\/					

State of CALIFORNIA	
State ofCALIFORNIA County ofRIVERSIDE	
On MAY 0 8 1995 before r	me, CANDY M. COONS, NOTARY PUBLIC,
personally appearedELKE H. H.	
	NAME(S) OF SIGNER(S) Droved to me on the basis of satisfactory evidence
Candy M. Coons Common #1055075 One of the county Common and 7, 1889	to be the person(s) whose name(s) is/larke subscribed to the within instrument and acknowledged to me that he/she/they executed the same in Mis/her/htheir authorized capacity(les), and that by Mis/her/htheir signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.
	OPTIONAL —
	prove valuable to persons relying on the document and could prevent
CAPACITY CLAIMED BY SIGNER	DESCRIPTION OF ATTACHED DOCUMENT
☐ INDIVIDUAL ☐ CORPORATE OFFICER	
TITLE(S)	TITLE OR TYPE OF DOCUMENT
PARTNER(S)	
ATTORNEY-IN-FACT	NUMBER OF PAGES
☐ TRUSTEE(S) ☐ GUARDIAN/CONSERVATOR	•
OTHER:	
	DATE OF DOCUMENT
SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES)	
	SIGNER(S) OTHER THAN NAMED ABOVE



POWER OF ATTORNEY

SAFECO INSURANCE COMPANY OF AMERICA GENERAL INSURANCE COMPANY OF AMERICA HOME OFFICE: SAFECO PLAZA SEATTLE, WASHINGTON 98185

NOW ALL BY THESE PRESENTS:				No	9252	
hat SAFECO INSURANCE COMPANY corporation, does each hereby appoint					•	, each a Washington
ts true and lawful attorney(s)-in-fact, will locuments of a similar character issued in						
N WITNESS WHEREOF, SAFECO INSURA executed and attested these presents	NCE COMPANY	OF AMERICA and	GENERAL	INSURANC	CE COMPANY O	F AMERICA have eac
	this	4th	day of	Jar	nuary	, 19 <u>93</u>
						20 4
		CERTIFICATE		· · · · · · · · · · · · · · · · · · ·		
_	•	SAFECO INSURAN NSURANCE COMP			MERICA	
Article V. Section 13 FIDELITY AND	SURETY BONDS	S the Presiden		O	the Secretary s	
President appointed for that purpose by attorneys—in-fact or under other appropriate documents of similar character issued appointment, the signatures may be a for the company, the seal, or a facsimile	iate titles with ed by the comp iffixed by facsin thereof, may be	authority to execution in the course mile. On any instrume impressed or affi	perations, te on behalof its businent conferixed or in	shall each fall of the coness Oring such all any other n	have authority to company fidelity In any instrument uthority or on ar	appoint individuals a and surety bonds and timaking or evidencing by bond or undertaking
President appointed for that purpose by attorneys-in-fact or under other appropriate documents of similar character issues uch appointment, the signatures may be a of the company, the seal, or a facsimile hat the seal shall not be necessary to the Extract from a Resolution of	ate titles with ad by the computing the computation of the computation of the control of the Board of	authority to execution in the course mile. On any instrume impressed or affi such instrument or	perations, ite on beha of its busin nent confer ixed or in undertaking	shall each hif of the coness Oring such an any other ng."	nave authority to company fidelity in any instrument uthority or on ar nanner reproduce PANY OF AMERI	appoint individuals a and surety bonds and t making or evidencing bond or undertaking ed; provided, however
President appointed for that purpose by attorneys-in-fact or under other appropriate documents of similar character issues uch appointment, the signatures may be a of the company, the seal, or a facsimile hat the seal shall not be necessary to the Extract from a Resolution of	iate titles with ad by the complifixed by facsin thereof, may be validity of any of the Board of LINSURANCE (tary or an assistiction 13 of the ney appointment, ttorney appointment,	authority to execution in the course mile. On any instrume impressed or afficient instrument or Directors of SAFE COMPANY OF AME tant secretary of the By-Laws, and executed pursuant tent is in full force	perations, te on beha of its businent confer ixed or in undertaking CO INSUR/ERICA adopte Company thereto, are and effective on behavior and effective on behavior and effective on behavior of the company and the comp	shall each half of the coness O ring such an any other in g." ANCE COMI ted July 28 setting out and t.	nave authority to company fidelity in any instrument uthority or on ar nanner reproduce PANY OF AMERI 1, 1970.	appoint individuals at and surety bonds and t making or evidencing my bond or undertaking ed; provided, however
President appointed for that purpose by attorneys-in-fact or under other appropriate the documents of similar character issue such appointment, the signatures may be a soft the company, the seal, or a facsimile that the seal shall not be necessary to the Extract from a Resolution of and of GENERA. On any certificate executed by the Secre (i) The provisions of Article V, Section (ii) A copy of the power-of-attorn (iii) Certifying that said power-of-attorn.	iate titles with ad by the comp of fixed by facsin thereof, may be validity of any of the Board of LINSURANCE (tary or an assistiction 13 of the ney appointment, attorney appointment of be by facsimile issurance contest of the By-Lathereto, are true to the total thereto, are true to the total thereto, are true to the source of the sourc	authority to execution any in the course mile. On any instrume impressed or affi such instrument or Directors of SAFE COMPANY OF AMERICAL and the seal of the pursuant sent is in full force e, and the seal of the APANY OF AMERICAL aws and of a Rescute and of a Rescute and the seal of the pursuant sent is in full force to the pursuant sent in full	perations, and perations, and perations perations per confer in the company of th	shall each if of the coness O rring such an any other in g." ANCE COMI ted July 28 setting out and t, by may be a GENERAL If the Board of the sound of the	nave authority to company fidelity in any instrument uthority or on armanner reproduce PANY OF AMERICA, 1970. facsimile thereo INSURANCE COINT Directors of time company to the control of the control o	appoint individuals as and surety bonds and traking or evidencing bond or undertaking and provided, however ICA MPANY OF AMERICA hese corporations, and
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F'F	ODUCER LIIS & COMPANY, INC		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.									
	35 14TH STREET VERSIDE CA 92501		C	OMPANIES A	FORDING COVER	AGE						
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			COMPANY									
INS	SURED		LETTER B									
	VERSIDE CONSTRUCTI MPANY	ON	COMPANY C									
	O. BOX 1146		COMPANY D									
	1 N. MAIN STREET VERSIDE, CA 92502-	1146	LETTER	CUTED IN T	WO COUNTERPA	RTS						
	OVERAGES		LETTER									
	THIS IS TO CERTIFY THAT THE POLIC INDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR M. EXCLUSIONS AND CONDITIONS OF	CIES OF INSURANCE LISTED BEL Y REQUIREMENT. TERM OR CON AY PERTAIN, THE INSURANCE AF SUCH POLICIES. LIMITS SHOWN	OW HAVE BEEN ISSUED I DITION OF ANY CONTRAC FORDED BY THE POLICIE MAY HAVE BEEN REDUCE	O THE INSURED NA T OR OTHER DOCU S DESCRIBED HERE D BY PAID CLAIMS.	MED ABOVE FOR THE POL MENT WITH RESPECT TO W IN IS SUBJECT TO ALL THE	ICY PERIOD (HICH THIS E TERMS,						
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A	GENERAL LIABILITY	CBP6156634GL	07/01/94	07/01/95	GENERAL AGGREGATE	\$ 2,000,000						
	X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR.				PRODUCTS-COMP/OP AGG.	\$ 2,000,000						
	CLAIMS MADE X OCCUR. X OWNER'S & CONTRACTOR'S PROT.				PERSONAL & ADV. INJURY EACH OCCURRENCE	\$ 1,000,000 \$ 1,000,000						
	X CONTRACTUAL				FIRE DAMAGE (Any one fire)	\$ 1,000,000 \$ 50,000						
	XCU				MED.EXP. (Any one person)	\$ 5,000						
A	AUTOMOBILE LIABILITY X ANY AUTO	CBP6156634BA	07/01/94	07/01/95	COMBINED SINGLE	\$ 1,000,000						
	ALL OWNED AUTOS				BODILY INJURY							
	SCHEDULED AUTOS				(Per person)	\$						
	HIRED AUTOS				BODILY INJURY							
	NON-OWNED AUTOS				(Per accident)	\$						
	GARAGE LIABILITY				PROPERTY DAMAGE	\$						
	EXCESS LIABILITY				EACH OCCURRENCE	\$						
	UMBRELLA FORM OTHER THAN UMBRELLA FORM				AGGREGATE							
	WORKER'S COMPENSATION				STATUTORY LIMITS							
	AND				EACH ACCIDENT	\$						
	EMPLOYERS' LIABILITY				DISEASE-POLICY LIMIT	\$						
	OTHER				DISEASE—EACH EMPLOYEE	\$						
	OTHER											
DE	SCRIPTION OF OPERATIONS/LOCATIONS/VI	FHICLES/SPECIAL ITEMS	·····									
RE			S AVENUE DOWN	NTOWN PROJ	ECT							
С	CITY OF REDIPLOTED BOX 300		EXPIRATION DATE	THEREOF, THE ISS IS WRITTEN NOTICE	BED POLICIES BE CANCELI UING COMPANY WILL END TO THE CERTIFICATE HOL TICE SHALL IMPOSE NO O	EAVOR-TO LDER NAMED TO THE						
	REDLANDS CA	92373	AUTHODIZED DEDDESE	MTATR/E	R. Priis	PRESENTATIVES:						

ACORD CORPORATION 1990

ACORD 25-S (7/90)

CERTIFICATE OF INSURANCE "CANCELLATION" CONTINUED

Should any of the described policies be cancelled before the expiration date thereof, the issuing company will mail 45 days written notice via Certified Mail, Return Receipt Requested, to the certificate holder named, except in the case of non-payment of premium where 10 days written notice will be served.

PRO	DDUCER		INSURANCE HAGE 00642 ISSUE DATE (MM/DD/YY) 1 05/08/95 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE									
	IIS & COMPANY, INC 35 14TH STREET	•	COMPANIES AFFORDING COVERAGE COMPANY A REPUBLIC INDEMNITY CO OF AMERICA LETTER									
	VERSIDE CA 92501											
				MOANIV								
INS	URED			TER B								
RI	VERSIDE CONSTRUCTION	ON	COMPANY C									
CO	MPANY		LETTER									
	O. BOX 1146		COMPANY D									
	1 N. MAIN STREET			TER								
3.1	VERSIDE, CA 92502-	1146			CUTED IN T	WO COUNTERPAR	RTS					
CO	VERAGES		LEI	TER	National Section							
	THIS IS TO CERTIFY THAT THE POLIC INDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR MA EXCLUSIONS AND CONDITIONS OF S	CIES OF INSURANCE LISTED BELC PREQUIREMENT, TERM OR COND BY PERTAIN, THE INSURANCE AFF SUCH POLICIES, LIMITS SHOWN IN	OW HADITION	AVE BEEN ISSUED T N OF ANY CONTRAC ED BY THE POLICIE HAVE BEEN REDUCE	O THE INSURED NA T OR OTHER DOCUI S DESCRIBED HERE D BY PAID CLAIMS.	MED ABOVE FOR THE POLI MENT WITH RESPECT TO W IN IS SUBJECT TO ALL THE	CY PERIOD HICH THIS TERMS,					
ю	TYPE OF INSURANCE	POLICY NUMBER		POLICY EFFECTIVE	POLICY EXPIRATION	LIMIT	s					
TR				DATE (MM/DD/YY)	DATE (MM/DD/YY)		<u> </u>					
	GENERAL LIABILITY					GENERAL AGGREGATE	\$					
	COMMERCIAL GENERAL LIABILITY					PRODUCTS-COMP/OP AGG.	\$					
	CLAIMS MADE OCCUR. OWNER'S & CONTRACTOR'S PROT.					PERSONAL & ADV. INJURY EACH OCCURRENCE	\$ s					
	OWNER'S & CONTRACTOR'S PROT.					FIRE DAMAGE (Any one fire)	\$					
						MED.EXP. (Any one person)	\$					
	AUTOMOBILE LIABILITY					COMBINED SINGLE	Ψ					
	ANY AUTO					LIMIT	\$					
	ALL OWNED AUTOS					BODILY INJURY						
	SCHEDULED AUTOS					(Per person)	\$					
	HIRED AUTOS					BODILY INJURY						
	NON-OWNED AUTOS					(Per accident)	\$					
	GARAGE LIABILITY					PROPERTY DAMAGE	\$					
	EXCESS LIABILITY					EACH OCCURRENCE	\$					
	UMBRELLA FORM					AGGREGATE	\$					
	OTHER THAN UMBRELLA FORM											
A	WORKER'S COMPENSATION	39 05903		07/01/94	07/01/95	STATUTORY LIMITS						
	AND				' '	EACH ACCIDENT	\$ 1,000,000					
	EMPLOYERS' LIABILITY					DISEASE-POLICY LIMIT	\$ 1,000,000					
						DISEASE-EACH EMPLOYEE	\$ 1,000,000					
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AC	ORD 25-S (7/90)					©ACORD	CORPORATION 1990					

CERTIFICATE OF INSURANCE "CANCELLATION" CONTINUED

Should any of the described policies be cancelled before the expiration date thereof, the issuing company will mail 45 days written notice via Certified Mail, Return Receipt Requested, to the certificate holder named, except in the case of non-payment of premium where 10 days written notice will be served.