CONTRACT AMENDMENT

This CONTRACT AMENDMENT is made and entered into between KITSAP COUNTY, a municipal corporation, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "COUNTY", and Stephen Group International, LLC., hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-237-20, executed on May 7, 2020, amended on August 31, 2020, December 30, 2020, April 14, 2021, March 3, 2022, June 14, 2022, September 7, 2022, and February 16, 2023 shall be further amended as follows:

- 1. The Date of the expiration of the contract is extended to 12/31/2023.
- 2. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda, or modifications thereto, remain in full force and effect.

This amendment shall be effective upon execution by the parties.

DATED this day December 023.

STEPHEN GROUP INTERNATIONAL, LLC.

BOARD OF COUNTY COMMISSIONERS KITSAP COUNTY, WASHINGTON

Charlette Sten

JAKE STEPHEN, President

CHARLOTTE GARRIDO, Chair

KATHERINE T. WALTERS, Commissioner

CHRISTINE ROLFES, Commissioner

ATTEST:

Dana Daniels, Clerk of the Board

MMELTON



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/14/2022

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.

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

	SUBROGATION IS WAIVED, subjents to certificate does not confer rights to the confer rights to				ıch end	lorsement(s)		require an endorsemen	t. As	tatement on			
	DUCER				CONTACT NAME: PHONE (A/C, No, Ext): (A/C, No). (866) 276-3775 (A/C, No):								
	neWest Insurance - TAG 00 SW Barrows Rd, Ste 202												
	verton, OR 97007				EMAIL	SS:							
						INS	SURER(S) AFFO	RDING COVERAGE		NAIC#			
					INSURE	41297							
INSU	RED				INSURE								
	Stephen Group Internationa	l. LLC	2		INSURER C:								
	PO Box 65429	.,			INSURE								
	University Place, WA 98464				INSURE								
					INSURE								
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:							
IN CI EX	IIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY CCLUSIONS AND CONDITIONS OF SUCH	QUIRI PER POLIC	EMEN TAIN, CIES. I	IT, TERM OR CONDITION (THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE E	OF ANY DED BY	CONTRACT THE POLICIE EDUCED BY P	OR OTHER I	DOCUMENT WITH RESPEC	OT TO	WHICH THIS			
INSR	TYPE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT					
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000			
	CLAIMS-MADE X OCCUR	X	X	RBS0115973		4/1/2022	4/1/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000			
								MED EXP (Any one person)	\$	5,000			
								PERSONAL & ADV INJURY	\$	1,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000			
	X POLICY PRO-							PRODUCTS - COMP/OP AGG	\$	2,000,000			
	OTHER:	<u> </u>						STOP GAP	\$	1,000,000			
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$				
	ANY AUTO							BODILY INJURY (Per person)	\$				
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$				
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$				
									\$				
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$				
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$				
	DED RETENTION \$								\$				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER					
		N/A						E.L. EACH ACCIDENT	\$				
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE	\$				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$				
Α	Errors & Omissions	X	X	RB\$0115973		4/1/2022	4/1/2023	each claim		1,000,000			
Α	Errors & Omissions	X	X	RBS0115973		4/1/2022	4/1/2023	aggregate		2,000,000			
DES	 CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORE) 101, Additional Remarks Schedu	ıle, may b	e attached if mor	e space is requir	red)					
Cert	ficate holder is additional insured per	GLS5	78					·					
CEI	RTIFICATE HOLDER				CANCELLATION								
	Kitsap County Department of Care of Housing and Homel 614 Division St MS-23				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								

Port Orchard, WA 98366-4676

AUTHORIZED REPRESENTATIVE

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.	
RBS-0115973	4/1/2022	Stephen Group International, LLC	46722	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

BLANKET ADDITIONAL INSURED AND WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART ERRORS AND OMISSIONS COVERAGE PART

- **A.** With respect to this endorsement, **SECTION II-WHO IS ANINSURED** is amended to include as an additional insured any person or organization whom you are required to add as an additional insured on this policy under a written contract, written agreement or written permit which must be:
 - 1. Currently in effect or becoming effective during the term of the policy; and
 - Executed prior to the "bodily injury," "property damage," "personal and advertising injury" or "damages."
- B. The insurance provided to these additional insureds is limited as follows:
 - 1. That person or organization is an additional insured only with respect to liability for "bodily injury," "property damage," "personal and advertising injury" or "damages" caused, in whole or in part, by:
 - a. Your acts or omissions; or
 - b. The acts or omissions of those acting on your behalf.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

2. With respect to the insurance afforded to these additional insureds, the following exclusions are added to SECTION I-COVERAGES, paragraph 2. Exclusions:

This insurance does not apply to "bodily injury," "property damage," "personal and advertising injury" or "damages" occurring after:

- **a.** All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project
- 3. The limits of insurance applicable to the additional insured are those specified in the written contract, written agreement or written permit or in the Declarations for this policy, whichever is less.



These limits of insurance are inclusive of, and not in addition to, the Limits of Insurance shown in the Declarations for this policy.

- **4.** Coverage is not provided for "bodily injury," "property damage," "personal and advertising injury" or "damages" arising out of the sole negligence of the additional insured.
- 5. The insurance provided to the additional insured does not apply to "bodily injury," "property damage," "personal and advertising injury" or "damages" arising out of an architect's, engineer's or surveyor's rendering of or failure to render any professional services including:
 - **a.** The preparing, approving or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
 - b. Supervisory, inspection, architectural or engineering activities.
- **6.** Any coverage provided hereunder will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless a written contract specifically requires that this insurance be primary.

When this insurance is excess, we will have no duty under **SECTION I-COVERAGES** to defend the additional insured against any "suit" if any other insurer has a duty to defend the additional insured against that "suit." If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insured's rights against all those other insurers.

C. With respect to the insurance afforded to these additional insureds, the following is added to paragraph
8. Transfer Of Rights Of Recovery Against Others To Us Condition of the Commercial General Liability Coverage Form and Errors And Omissions Coverage Form:

We waive any right of recovery we may have against an additional insured because of any payment we make under this Coverage Part, to whom the insured has waived its right of recovery. Such waiver by us applies only to the extent that the insured has waived its right of recovery against an additional insured prior to loss, but only with respect to liability for "bodily injury," "property damage," "personal and advertising injury" or "damages" caused, in whole or in part, by:

- 1. Your acts or omissions; or
- 2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations.

Nationwide

DATE



Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name:	Steph	en Gro	oup Interr	natio	Principal:						Fro	om: 1	1/15/2022	то: 11/15 /	2023
WA UBI Number:					RCW:	All					▼ Pe	nalty E	Due:	Wage Due:	
License Number:											Α	ll .	~	All	~
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