AMENDMENT NO. 1 TO THE SERVICE AGREEMENT FOR BROKER OF RECORD SERVICES FOR PROPERTY INSURANCE

Whereas, on December 15, 2015, the Corpus Christi City Council authorized a Service Agreement for Broker of Record Services for Property Insurance ("the Agreement") with Carlisle Insurance ("Contractor");

Whereas, the parties desire to amend the Service Agreement to add additional Broker of Record Services;

NOW, THEREFORE, THE PARTIES AGREE TO AMEND THE AGREEMENT AS FOLLOWS:

1. In addition to the Services specified in the original Agreement, Contractor agrees to provide Broker of Record services for the following:

Excess Workers' Compensation;

(2) Excess Liability Insurance; and

(3) Liability and Property Insurance comparable to the coverages currently provided to the City by Texas Municipal League Risk Pool.

The City Risk Manager will coordinate with Contractor to develop required specifications. The Contractor will solicit quotes for these insurance coverages and provide the quotes and coverages to the City Risk Manager upon a mutually agreed upon schedule. The City agrees to pay Contractor \$60,000 per year for the additional services provided under this Amendment No. 1 for services from April 1st of the upcoming year to April 1st of the subsequent year thereafter.

2. Required Disclosures of Interests. (a) Contractor agrees to comply with City of Corpus Christi Ordinance No. 17112 and complete the *Disclosure of Interests* form as part of this Amendment No. 1. (b) Contractor agrees to comply with Texas Government Code section 2252.908 and complete Form 1295 Certificate of Interested Parties as part of this contract. For more information, please review the information on the Texas Ethics Commission website at <u>https://www.ethics.state.tx.us</u>. (c) Contractor agrees to comply with Chapter 176 of the Texas Local Government Code and file Form CIQ with the City Secretary's Office, if required. For more information and to determine if you need to file a Form CIQ, please review the information on the City Secretary's website at <u>http://www.cctexas.com/government/city-secretary/conflictdisclosure/index.</u> (d) As required by House Bill 89 adopted during the 2017 regular session of the Texas Legislature, the signatory executing this Amendment on behalf of Contractor verifies that the Contractor does not boycott Israel and will not boycott Israel during the term of the Agreement.

3. All other terms and conditions of the previously executed Agreement between the parties which are not inconsistent herewith shall continue in full force and effect.

4. This Amendment becomes effective on April 1, 2018. The Contractor's notification to proceed will be issued to the Contractor by the Risk Manager.

EXECUTED IN DUPLICATE ORIGINALS this <u>19th</u> day of <u>December</u>, 2017, by the authorized representative of the parties.

INDEXED

2017-508 12/19/17 M2017-193

Carlisle Insurance

Contractor: Carlisle Insurance

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· 1, By: Name: Carlisle Title: Date:

City of Corpus Christi, Texas

By: Margie C. Rose Name: e ose Title: Cit anager Date: 13.20,17

Approved as to legal form: 12 . 20. 17

Linz Amila

Lisa Aguilar, Assistant City Attorney For the City Attorney

uerta ATTEST: 1 e REBECCA HUERTA CITY SECRETARY

SY COUNCIL SECRETARY

CERTIFICATE OF INTERESTED PA	ARTIES		FORM	1295
				10[1
Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		OFFICE USE ONLY CERTIFICATION OF FILING		
 Name of business entity filing form, and the city, state and country of the business entity's place of business. 		Certificate Number: 2017-289374		
Carlisle Insurance Agency, Inc Corpus Christi, TX United States		Date Filed: — 12/01/2017		
Name of governmental entity or state agency that is a party to the contract for which the form is being filed. City of Corpus Christi		Date Acknowledged:		
Provide the identification number used by the governments description of the services, goods, or other property to be 111	al entity or state agency to track or ident provided under the contract.	ify the col	ntract, and pro	vide &
Agreement			Nature of interest	
4 Name of Interested Party	City, State, Country (place of bus	liness)	(check a Controlling	pplicable) Intermediar
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5 Check only if there is NO Interested Party. X				<u> </u>
	vear, or affirm, under penalty of perjury, that	the above	e disclosure is tr	ue and correct
GLADYS ADDISON	N. C. C.	, <u> </u>	(
AFFIXNOTARY STAMP SEAL ABOVE	Signature of authorized agent of			
Sworn to and subscribed before me, by the said Christ 20_17, to centify which, witness my hand and seal of of	bphar Chase Carlistenhis the trice.		day of)ecembr
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Signature of officer administering bath Printed n	iane or oracer administering oam	The Of		