

DODGE COUNTY MOVING PERMIT

COPY

Agenda Item # 23a

Date 5/19/21

This is to advise you, Sears Homes that your Permit Appli-

cation Number 307 has been approved to move 16' x 80'

Manufactured Home

over the routes indicated on your attached map on May 10 - May 31, 2021.

Sean Andrews
Dodge County Highway Superintendent

cust

By _____


May 10, 2021
Date

DODGE COUNTY MOVING PERMIT APPLICATION

For Buildings over 12 feet in Width

Number 307

1. THAT, The Applicant, Sears Homes, applies to move a Manufactured Home 16 x 80' over the Public Right-of-Way in Dodge County, Nebraska on May 10 - May 31, 2021 over the following route per attached map.
2. THAT, the Applicant does hereby agree to hold the County of Dodge, Officers, Agents, or Employees forever harmless from any and all liabilities resulting from said move.
3. THAT, the Applicant shall provide all barricades, flags, flag people, vehicles, and warning lights necessary for adequate warning to other road users.
4. THAT, the Applicant hereby submits a Certified Check in the amount of \$500.00 made payable to the Dodge County Highway Department, which shall become the property of Dodge County as liquidated damages, if any signs, bridges, or any other county or township property is damaged, as well as tree trimmings, moving blocks, and any other tools that are left remaining in Dodge County's Right-of-Way. The Check will be returned after 5 days from the date of permit application if all of the above requirements are met.
5. THAT, the Applicant shall submit an Insurance Certificate with this application, verifying General Liability of \$1,000,000.00; Personal Injury of \$500,000.00; Medical Expense (Any one person) of \$5,000.00; Each Occurrence of \$500,000.00.


Signature of Applicant

PO Box 27844
Applicant's Address

Kalita NE 10817

05-10-2021
Date Filed with Dodge County Board of Supervisors

RECEIVED
Dodge Co Highway Dept
2021 MAY 10 PM 2:15



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/10/2021

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).

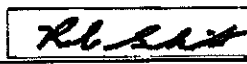
PRODUCER Dodge Partners Insurance, LLC 8701 W Dodge Rd, Suite 100 Omaha NE 68114-3429		CONTACT NAME: Katie Shipp PHONE (A/C, No, Ext): (402) 938-5016 FAX (A/C, No): (402) 938-5090 E-MAIL ADDRESS: KShipp@dodgepartners.com	
INSURED SEARS MFG. HOMES, INC. PO BOX 27844 RALSTON NE 68127-0844		INSURER(S) AFFORDING COVERAGE INSURER A: Employers Mutual Casualty Company NAIC # 21415 INSURER B: Progressive Casualty Ins Co 38628 INSURER C: Accident Fund General Insurance Company 12304 INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2012301518 **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 SUBR INSD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOG OTHER:			5D37855	11/22/2020	11/22/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			08335963-2	11/22/2020	11/22/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ UNIN/VIJN Motorist \$ 1,000,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	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/A	WCV6174805	11/22/2020	11/22/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Builder's Risk - Installation Floater			5C37855	11/22/2020	11/22/2021	Limit \$150,000 Deductible \$500

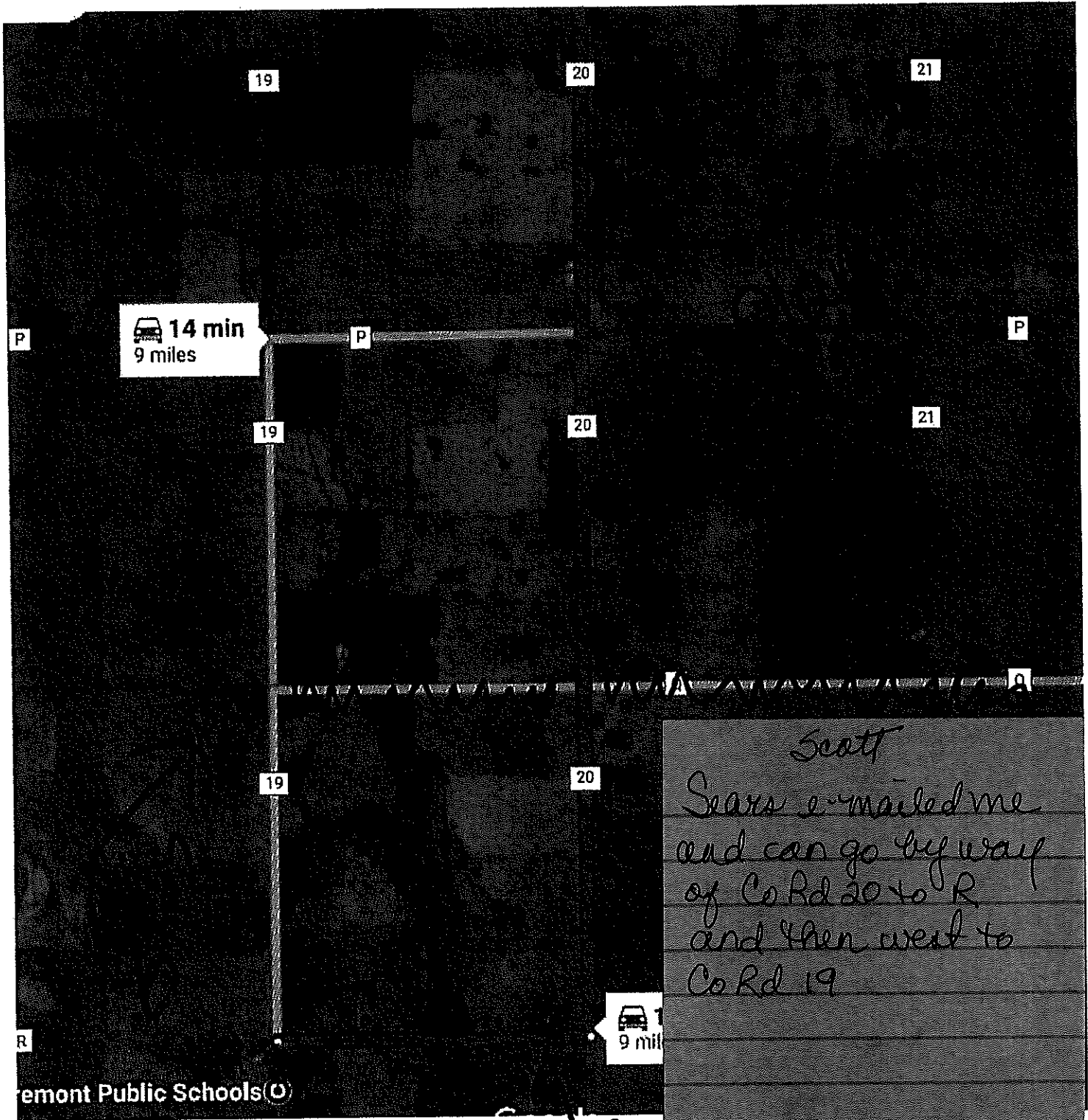
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Progressive Northern Insurance, Policy #08335983-1, Effective 11/22/20 - 11/22/21: Toler Liability- \$1,000,000 & Motor Truck Cargo Legal Liability- \$75,000 limit, \$1,000 deductible

CERTIFICATE HOLDER		CANCELLATION	
Dodge County Hwy Dept 435 North Park Room 204 Fremont NE 68025		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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From Cr K \$275

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Scott
Sears e-mailed me
and can go by way
of Co Rd 20 to R
and then west to
Co Rd 19

CR