

820 Chadwick Street
 Indianapolis, IN 46225
 (317) 535-4448
 (888) 544-4810
 Option 2



Estimate

Date	Estimate #
2/17/2020	537

OPTION 'A'

Account #	GPPD53	Rep	MK
Bill To	GREENFIELD POLICE-KIM GOVERN 10 SOUTH STATE ST GREENFIELD, IN 46140	Ship To	GREENFIELD POLICE-KIM GOVERN 10 SOUTH STATE ST GREENFIELD, IN 46140

Qty	Item	Description	MSRP	Cost	Total
1	SIFMS119	2020 Ford Interceptor Utility, ILS, Front, SOLO, 3 Red, 3 Blue, w/ 2 Take Downs, w/ Interface Module, 1566841897	1310.00	565.00	565.00
1	SIFMH104	2020 Ford Interceptor Utility, ILS, Rear Hatch, SOLO, 4 Red, 4 Blue, w/ Splitter, 1566842120	1310.00	565.00	565.00
1	MPSC-R	MicroPulse C, 6 Red, Surface / Stud Mount, Black Bezel	151	98.00	98.00
1	MPSC-B	MicroPulse C, 6 Blue, Surface / Stud Mount, Black Bezel	151	98.00	98.00
3	MPS600U-RR	MicroPulse Ultra, SOLO, 6 Red, Surface Mount, w/ Black Flange	149	79.00	237.00
3	MPS600U-BB	MicroPulse Ultra, SOLO, 6 Blue, Surface Mount, w/ Black Flange	149	79.00	237.00
1	MPS6U-FPU20FOG	2020 Ford Interceptor Utility, Fog Light Brackets, MPS3U/MPS6U WEDGE KIT, MPS600U ULTRA	80.00	57.00	57.00
2	MPSM6U-SPACKCKT	MicroPulse, Wide Angle, DUO, 9 Red / 9 White	25	17.7085	35.42
1	MPSW9-RW	MicroPulse, Wide Angle, DUO, 9 Blue / 9 White	231.00	154.00	154.00
1	MPSW9-BW	Pair of side mirror brackets, each bracket holds (1) MPSW9 light, Ford Police Interceptor Utility 2020	231.00	154.00	154.00
1	MPSMW9-FPU20MIR	Ford Police Interceptor Utility 2020	31.00	21.96	21.96
2	XSM1C-BRW	XSTRLEAM4, Single Head, Blue / Red / White, +12v Cord Tracer, 5 Lamp Housing, SOLO, Red - Blue - Red - Blue - Red, 2020 Ford Interceptor Utility	219	60.00	120.00
1	TCRHSS111	2020 Ford Interceptor Utility	978.00	547.00	547.00
1	TCRHSS112	Tracer, 5 Lamp Housing, SOLO, Blue - Red - Blue - Red - Blue, 2020 Ford Interceptor Utility	978.00	547.00	547.00
1	ETTFPUL-16	Flashback Plug-In Alternating Tailight Flasher, Solid State - 2.4 F.p.s. for Ford Utility 2016-2017	\$140.00	89.4452	89.45
1	640000	PA640, Lights, Siren Controller	733	359.00	359.00
1	ES100C	100W Siren Speaker	315	151.00	151.00
1	ESB-FPU20ND	2020 Ford Interceptor Utility, ES100C, Speaker Bracket	40.00	27.00	27.00
1	RUMBLER-3	Rumbler Siren System, 2 Speakers, Amplifier	741	444.00	444.00
1	RB-FPU20	2020 Ford Interceptor Utility, Rumbler Bracket Kit	50.00	35.00	35.00
1	C-VS-0618-INUT*H	2020 Ford Interceptor Utility Fiat 24" Console Housing only	355.60	355.60	355.60
1	C-EB35-F64-1P	3.5" Equipment Bracket	0	0.00	0.00
1	C-FP-1	1" Filler Plate	11.90	0.00	0.00
1	C-CUP2-I	4" Internal cup holders	45.42	31.80	31.80
1	C-LP2-PS1-USB	1.5" 2 Lighter plug outlet with 1 Dual USB charging port	122.93	86.05	86.05

ESTIMATE PRICING VALID FOR 30 DAYS

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2/17/2020	537

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Bill To	Ship To		
GREENFIELD POLICE-KIM GOVERN 10 SOUTH STATE ST GREENFIELD, IN 46140		GREENFIELD POLICE-KIM GOVERN 10 SOUTH STATE ST GREENFIELD, IN 46140	

Qty	Item	Description	MSRP	Cost	Total
1	C-PM-124	Printer Mount, Utilizes 6" Console space, Brother PocketJet, 2020 Ford Interceptor Utility	218.00	152.60	152.60
1	C-ARM-103	Arrest for top mount, console, large pad	127.67	89.40	89.40
1	C-HDM-204	8.5" Heavy Duty Telescoping Pole, side mount, short handle	182.77	127.95	127.95
1	C-HDM-303	Heavy duty fixed top offset platform, 6" offset	43.58	30.50	30.50
1	C-MD-204	Tilt swivel motion device	82.19	57.55	57.55
1	C-ADP-101	Universal adapter plate	50.06	40.048	40.05
1	475-1434	2020 Ford Interceptor Utility, Weapon Rack Base	138.46	121.62	121.62
1	475-1435	2020 Ford Interceptor Utility, Weapon Rack Base, Driver Side Bracket	27.69	24.35	24.35
1	475-1436	2020 Ford Interceptor Utility, Weapon Rack Base, Passenger Side Bracket	27.69	24.35	24.35
1	475-1514	2020 Ford Interceptor Utility, Weapon Rack, Hardware Kit	29.23	25.75	25.75
1	92536	806 - 960 MHz, Low Profile Antenna, Black	43.53	39.00	39.00
1	429700	Antenna Cable, 3/4" NMO Mount, RG58/U, 25', No Connector	29.04	20.00	20.00
1	22174	Mini UHF Connector, Camp On, 052/213	5.30	2.25	2.25
1	TYR0361240	5 Terminal Relay, SPD, w/ Hanger	13.00	10.00	10.00
1	15600-0821	ATO Fuse Block, w/ Ground Gang, 8 Position	21.00	21.00	21.00
1	Elec3	Misc. Electrical Supplies	98.00	75.00	75.00
1	Labor	Install Equipment	1,300.00	1,300.00	1,300.00
1	Freight	Freight Charge	60.00	60.00	60.00
2020 Ford Interceptor Utility					
Attn. Capt. Brian Hartman					

ESTIMATE PRICING VALID FOR 30 DAYS

Subtotal	\$7,236.65
Sales Tax (7.0%)	\$0.00
Total	\$7,236.65

Signature

2020 Ford Explorer Light Package Equipment List

OPTION "A"

1	565.00	ILS Low Pro	Federal Low Profile ILS Visor Light Red/Blue with take downs (2020 Ford Utility)
1	565.00	ILS Low Pro (Rear)	Federal Low Profile ILS Rear Hatch Interior Light Red/Blue for Ford Utility
1	98.00	MPS-C-R	Federal MicroPulse C Series (red) Stud Mount in Grill
1	98.00	MPS-C-B	Federal MicroPulse C Series (blue) Stud Mount in Grill
1	79.00	MPS600U-RR	Federal MicroPulse 600U Surface Mount (red/red) Fog Light area
1	79.00	MPS600U-BB	Federal MicroPulse 600U Surface Mount (blue/blue) Fog Light area
1	57.00	MPS6U-FPIU20FOG	Federal MPS6 Bracket for Fog Light Area 2020+ Ford Utility
1	154.00	MPSW9-RW	Federal MicroPulse Wide Angle (red/white) Under Door Mirror
1	154.00	MPSW9-BW	Federal MicroPulse Wide Angle (blue/white) Under Door Mirror
1	212.00	MPSMW9-FPIU20MIR	Federal Side Mirror Brackets for 2020+ Ford Utility (Pair)
2	120.00	XSM1-BRW	Federal XStream Single Head (Blue/Red/White) Rear Cargo Side Windows
1	1094.00	HG2-Runners WHEEL TRACER	HG2 Side Runners 58" Red/Blue for 2020+ Ford Utility
1	79.00	MPS600U-RR	Federal MicroPulse 600U Surface Mount (red/red) License Plate Area
1	79.00	MPS600U-BB	Federal MicroPulse 600U Surface Mount (blue/blue) License Plate Area
2	354.00	MPSM6U-SPACRKT	Kit of four 5 degrees rubber mounting wedges for MPS600U In license plate area
1	79.00	MPS600U-RR	Federal MicroPulse 600U Surface Mount (red/red) bottom of hatch
1	79.00	MPS600U-BB	Federal MicroPulse 600U Surface Mount (blue/blue) bottom of hatch
1	89.45	EDL-TAIL	Federal Tail Light Flasher
1	359.00	2955S5A6 PA640	Whelen Siren/Switch Control

2020 Ford Explorer Light Package Equipment List

OPTION "A"

1	178.00	ES100C	Federal Signal 100 Watt Speaker Includes ES8-FPIU20ND
1	444.00	Rumber-3	Federal Rumber Low Frequency Siren
1	350.00	RB-FPIU20	Federal Rumber Mount for 2020+ Ford Utility
1	355.00	C-VS-0618-INUT	Havis 24" Console 2020+ Ford Utility
1	152.60	C-PM-124	Havis PocketJet Printer Mount for Ford Interceptor Utility
1	31.80	C-EUP2-1	Havis 4" Internal Cup Holder
1	86.05	C-LP2-P51-USB	Havis 2 Lighter Plug Outlet w/1 USB Cut Outs
1	89.40	C-ARM-103	Havis Flip-up Arm Rest
1	127.95	C-HDM-204	Havis Heavy Duty Side Computer Mount
1	30.50	C-HDM-303	Heavy Duty Fixed Top Offset Platform, 6" Offset
1	57.55	C-MD-204	Havis Low Profile Tilt Swivel Motion Device
1	1512.25	Installation (See Note Below) + Ardenma, CoAxial, Freight	Includes all wiring, fusing, and shop material (includes installation of Body Worn Camera System)
1	211.02	Jotto Desk	Dual gun rack back seat mount. (All is needed is the base plate for 2020+ Ford Utility)
1	40.00	C-APP-101	Adaptic plate

Note: Installation includes existing radars/new radars, existing gun racks, existing radios and antennas, and printer along with all power cables. Installation will need to take place at the Greenfield City Garage, or your shop if your shop is located within 30 miles from the Greenfield Police Department.



820 Chadwick Street
Indianapolis, IN 46225
(317) 634-4824
Fax (317) 634-4833
www.waymires.com

Waymire Fleet Equipment takes pride in the installations that we provide to our customers. This pride is shown through the "Limited Lifetime Warranty" that is backed by each and every installation. The warranty is valid for the original owner. This installation warranty only covers products purchased from Waymire Fleet Equipment. Manufacturer warranty will apply to all other products we install. At Waymire Fleet Equipment's discretion, labor to remove and replace product that has failed is not covered, unless the failure is due to improper installation. Labor fees may also apply for product removal due to accidents and/or owner neglect. Any modifications or tampering with the wiring we install will VOID our warranty. Shipping charges to return defective product to manufacturer for repair may also apply. Thank you for your continued business, we look forward to assisting you again.

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 POLICES 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
 Huntington Insurance Inc.
 45 N. Pennsylvania St., 5TH Floor
 Indianapolis, IN 46204
 800 284-6687

INSURED
 Wayneire Auto Parts & Service, Inc.
 437 W McCarty Street
 Indianapolis, IN 46225

CONTRACT: Michole James
 NAME: Michole James
 A/C No. Exp: 317-639-7241 FAX: 877-205-2538
 E-MAIL: michole.james@huntington.com
 ADDRESS: michole.james@huntington.com

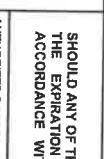
INSURER A: Selective Insurance
 INSURER B: Accident Fund Insurance Comp of America
 INSURER C:
 INSURER D:
 INSURER E:
 INSURER F:

COVERAGES
 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 POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	APPLICABLE POLICY NUMBER	POLICY PERIOD (MM/DD/YYYY)	POLICY EXPIRES (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR	S2195959	10/01/2019	10/01/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (ea occurrence) \$500,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	AUTOMOBILE LIABILITY	S2195959	10/01/2019	10/01/2020	COMBINED SINGLE LIMIT (ea accident) \$1,000,000 BODILY INJURY (Per person) \$1,000,000 BODILY INJURY (Per person) \$1,000,000 PROPERTY DAMAGE (Per accident) \$500,000 F&B EXCESS \$500,000
A	UMBRELLA LIAB EXCESS LIAB CLAIMS-MADE	S2195959	10/01/2019	10/01/2020	EACH OCCURRENCE \$2,000,000 AGGREGATE \$2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	WCVE1968930	10/01/2019	10/01/2020	PER STATUTE \$500,000 E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: Vehicle upfitting.

CERTIFICATE HOLDER
 Greenfield Police Department
 10 South State Street
 Greenfield, IN 46140

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
 AUTHORIZED REPRESENTATIVE


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CERTIFICATE HOLDER MAILING ADDRESS:

Greenfield Police Department
10 South State Street
Greenfield, IN 46140

If you would prefer to receive future certificates electronically, please submit your request including email address or fax number to Huntington Insurance, Inc.:

Email: ComInsurance@Huntington.com
Fax: 877-236-2261

Please Reference: Waynre Auto Parts & Service, Inc.

This page has been left blank intentionally.

1. Name of the entity (do not include tax-exempt status) and its address (street, city, state, and ZIP code). If different from above, check the appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

2. Business name (if different from above) and its address (street, city, state, and ZIP code). If different from above, check the appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

3. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

4. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

5. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

6. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

7. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

8. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

9. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

10. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

11. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

12. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

13. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

14. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

15. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

16. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

17. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following options below.

Print or type. See specific instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name shown on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, line 1. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

2. I am a U.S. citizen or other U.S. person (defined below); and

3. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For new entity transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, or cessation of job, contributions to an individual retirement arrangement (IRA), and generally payments other than interest and dividends, you are not required to sign this certification, but you must provide your correct TIN. See the instructions for Part II, line 4.

5. I am a U.S. citizen or other U.S. person (defined below); and

6. I am a U.S. citizen or other U.S. person (defined below); and

7. I am a U.S. citizen or other U.S. person (defined below); and

8. I am a U.S. citizen or other U.S. person (defined below); and

9. I am a U.S. citizen or other U.S. person (defined below); and

10. I am a U.S. citizen or other U.S. person (defined below); and

11. I am a U.S. citizen or other U.S. person (defined below); and

12. I am a U.S. citizen or other U.S. person (defined below); and

13. I am a U.S. citizen or other U.S. person (defined below); and

14. I am a U.S. citizen or other U.S. person (defined below); and

15. I am a U.S. citizen or other U.S. person (defined below); and

16. I am a U.S. citizen or other U.S. person (defined below); and

17. I am a U.S. citizen or other U.S. person (defined below); and

18. I am a U.S. citizen or other U.S. person (defined below); and

19. I am a U.S. citizen or other U.S. person (defined below); and

20. I am a U.S. citizen or other U.S. person (defined below); and

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption (employer) identification number (A TIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amounts reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-DIV (interest earned or paid)
- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (mortgage interest), 1098-E (Student Loan Interest), 1098-T (tuition)
- Form 1099-C (cancelled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien) to provide your correct TIN. If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is Backup Withholding, later.

**AFFIDAVIT REGARDING CONTRACTOR DOING BUSINESS WITH THE
GOVERNMENT OF IRAN**

Pursuant to Indiana Code 5-22-16.5, the Contractor entering into a Contract with the Owner is required to certify they are not engaged in business with the Government of Iran, as defined in IC 5-22-16.5.

The undersigned, on behalf of the Contractor, being first duly sworn, deposes and states that the Contractor is not disqualified because of the requirement of IC 2-22-16.5.

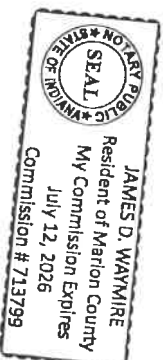
(Contractor): Waymire Fleet Equipment
By (Written Signature): Mike Kistler
(Printed Name): Mike Kistler
(Title): Sales Manager

Important – Notary Signature and Seal Required in the Space Below

STATE OF INDIANA
COUNTY OF MARION

Subscribed and sworn to before me this 21 day of FEBRUARY, 2020.

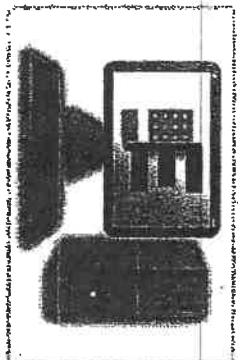
My commission expires: July 12 2026
(Signed) James D. Waymire





U.S. Citizenship and Immigration Services

What is E-Verify?



E-Verify is an Internet-based system that compares information from an employee's Form I-9, Employment Eligibility Verification, to data from U.S. Department of Homeland Security and Social Security Administration records to confirm employment eligibility.

Why E-Verify?

Why do people come to the United States illegally? They come here to work. The public can, and should, choose to reward companies that follow the law and employ a legal workforce.

The U.S. Department of Homeland Security is working to stop unauthorized employment. By using E-Verify to determine the employment eligibility of their employees, companies become part of the solution in addressing this problem.

Employment eligibility verification is good business and it's the law.

Who Uses E-Verify?

More than 288,000 employers, large and small, across the United States use E-Verify to check the employment eligibility of their employees, with about 1,200 new businesses signing up each week.

While participation in E-Verify is voluntary for most businesses, some companies may be required by state law or federal regulation to use E-Verify. For example, most employers in Arizona and Mississippi are required to use E-Verify. E-Verify is also mandatory for employers with federal contracts or subcontracts that contain the Federal Acquisition Regulation E-Verify clause.

This page provides general information about E-Verify and is meant to provide an overview of the program. For instructions and policy guidance, visit the For Employers and For Employees sections of the website.

CLAUSE FOR CONTRACTS

Employment Eligibility Verification

The Contractor affirms under the penalties of perjury that he/she/it does not knowingly employ an unauthorized alien.

The Contractor shall enroll in and verify the work eligibility status of all his/her/its newly hired employees through the E-Verify program as defined in IC 22-5-1-7.3. The Contractor is not required to participate should the E-Verify program cease to exist. Additionally, the Contractor is not required to participate if the Contractor is self-employed and does not employ any employees.

The Contractor shall not knowingly employ or contract with an unauthorized alien. The Contractor shall not retain an employee or contract with a person that the Contractor subsequently learns is an unauthorized alien.

The Contractor shall, prior to performing any work, require his/her/its subcontractors, who perform work under this contract, to certify to the Contractor that the subcontractor does not knowingly employ or contract with an unauthorized alien and that the subcontractor has enrolled and is participating in the E-Verify program. The Contractor agrees to maintain this certification throughout the duration of the term of a contract with a subcontractor.

The Owner may terminate for default if the Contractor fails to cure a breach of this provision no later than thirty (30) days after being notified by the Owner. If Contractor employs or contracts with an unauthorized alien but the Owner determines that terminating the contract would be detrimental to the public interest or public property, the Owner may allow the contract to remain in effect until the Owner procures a new Contractor. If Contractor violates the terms of this provision, the Owner shall require Contractor to remedy the violation no later than thirty (30) days after Owner notifies Contractor of such violation. If Contractor fails to remedy the violation within the thirty (30) day period, Owner shall terminate the contract for breach of contract. If Owner terminates the contract, Contractor shall, in addition to any other contractual remedies, be liable to Owner for actual damages incurred due to said breach of contract. There is a rebuttable presumption that Contractor did not knowingly employ an unauthorized alien if Contractor verified the work eligibility status of the employee through the E-Verify program and documented said verification to Owner immediately upon notice of alleged violation.

INDIANA LEGAL EMPLOYMENT DECLARATION

The State of Indiana has enacted a law (I.C. 22-5-1.7) requiring all state agencies and political subdivisions request verification from their contractors that their employees are legally eligible to work in the United States. This Declaration serves as notice that all Contractors doing business with the City of Greenfield must, as a term of their contract:

1. Enroll in and verify the work eligibility status of newly-hired employees of the contractor through the E-Verify programs (but is not required to do this if the E-Verify program no longer exists); and
2. Verify, by signature below, that the Contractor does not knowingly employ unauthorized aliens.

I, Mike Kotle, a duly authorized agent of Warmire Fleet (name of Company), declare under penalties of perjury that Warmire Fleet (name of Company) does not employ unauthorized aliens to the best of its knowledge and belief.

Warmire Fleet
(Name of Company)

By: Mike Kotle
(Authorized Representative of Company)

Subscribed and sworn to before me on this 21 day of February 2024.

My Commission Expires: July 12 2026

County of Residence: Marion

Notary Public - Signature JAMES D. WARMIRE

Notary Public - Printed Name JAMES D. WARMIRE

