EXHIBIT E
KEY PERSONNEL LIST

OWNER PERSONNEL

PROJECT MANAGER: CHUCK JAMES

PROJECT REPRESENTATIVE: TOM PICKRELL AND JOHN CONRADY

CONSULTANT'S PROJECT STAFF

The following personnel will be assigned by the CONSULTANT to work on the Project. Any changes require OWNER's written approval.

PROJECT REPRESENTATIVE: STEVE RICHARDSON

PRINCIPAL: STEVE RICHARDSON

PROJECT CONSULTANT:

LEED PROJECT ADMINISTRATOR (Accredited by USGBC):

CONSULTANT'S SUBCONSULTANT(S)

The following subconsultant(s) will be contracted with and utilized by the CONSULTANT to work on the Project. Any changes require OWNER approval.

CIVIL ENGINEER:

STRUCTURAL ENGINEER:

MECHANICAL ENGINEER:

ELECTRICAL ENGINEER:

LANDSCAPE DESIGN:

INDEPENDENT COST ESTIMATOR (NOT the CONSULTANT):

INTERIOR DESIGN:

SKATEPARK DESIGN:

AQUATIC DESIGN:

GEOTECHNICAL ENGINEER:

LAND SURVEYOR:
I. PROJECT MEETINGS

A. Administrative and procedural requirements for project meetings, including, but not limited to, following:

1. Pre-Design Scheduling Conference (During Contract Negotiations)
2. Design Baseline Schedule Review Conference
3. Progress meetings

1. PRE-DESIGN SCHEDULING CONFERENCE (COMPLETED PRIOR TO AWARD OF CONTRACT):

A. The CONSULTANT and OWNER scheduled a Pre-Design Conference before the award of the Contract. The conference was held at a convenient location approved by the OWNER.

B. The OWNER and CONSULTANT conducted the meeting and review with the CONSULTANT their responsibilities and personnel assignments.

C. Attendees: Authorized representatives of the OWNER, CONSULTANT and its subconsultants, CONSULTANT's scheduler, and other concerned parties. Participants at conference become familiar with Project and authorized to conclude matters relating to the design.

D. The OWNER provided the CONSULTANT with a standard scheduling template.

E. Agenda: Discussed items of significance, including, but not limited to the following:

   1. Team Introduction (including the CONSULTANT(S) scheduler)
   2. Project Overview
   3. Project Communication
   4. Authorities and Responsibilities
   5. Progress Meetings
   6. Design Schedule Requirements
   7. Standard Design Schedule Template
   8. Submittal Requirements and Review Procedures
   9. Time Extension Procedures
   10. Request for Information Procedures
   11. Substantial Completion

2. DESIGN BASELINE SCHEDULE REVIEW CONFERENCE:

A. Within the first 10 calendar days of the Contract approval, authorized representatives of the OWNER, CONSULTANT and its subconsultants, manufacturers, suppliers, and other concerned parties will meet for the specific purpose of reviewing the Project's Design Baseline Schedule.

B. Agenda: Discuss items of significance, including, but not limited to the following:

   1. Team Introduction
   2. Introduction of the Design Consultants scheduler
   3. Project Overview and Periods of Performance
   4. Project Communication
   5. Design Schedule Requirements
   6. Standard Design Schedule Template
   7. Project Milestones
   8. Design Deliverables
   9. Submittal Requirements and Review Procedures
   10. Establish the timing of Progress Updates and Meetings

3. PROGRESS MEETINGS:

A. The CONSULTANT will conduct (TBD) weekly or bi-weekly progress meetings at a day and time set by the OWNER as required to keep the project on schedule, to review progress, and to solve or avert potential problems. Minutes of meeting will be distributed to the attendees by the end of the next business day. Revisions or corrections are to be returned within two working days of receiving the minutes.
B. Attendees: Representatives from the OWNER and CONSULTANT will be represented at these meetings. Participants at the conference will be familiar with Project and authorized to conclude matters relating to the Work.

C. CONSULTANT will present, discuss the progress since the last meeting; determine where each activity is in relation to Project Approved Baseline Schedule, whether on time or ahead or behind schedule; determine how the activities behind schedule will be expedited; secure commitments from parties involved to do so; discuss whether schedule revisions are required to ensure that current and subsequent activities will be completed within Contract time.

D. Agenda: Discuss items of significance, including, but not limited to the following:

1. Review and correct or approve minutes of previous progress meeting.
2. Review other items of significance that could affect progress.
3. Review and current status of the CONSULTANT's (TBD) 30 calendar day work plan.
4. Review of the CONSULTANT’s near term deliverables.
5. Include other topics for discussion as appropriate to status the Project.
6. Initiate whatever actions are necessary to resolve impediments to perform the Work.

II. GENERAL

A. Administrative and procedural requirements for schedules required for proper performance of Work including, but not limited to the following:

1. PROGRESS OF WORK

A. It is understood and acknowledged by all parties that the Work cannot be efficiently managed without the use of a Design Schedule, updated frequently and utilized by the CONSULTANT for the planning, management and coordination of the Work. It is further acknowledged that the OWNER will be made aware of any event or circumstance that negatively affects the CONSULTANT's ability to complete the project as agreed in the OWNER approved Exhibit F Baseline Schedule. The Work will be executed with such progress as required to prevent any delay to the completion of the Contract. Therefore, all requirements of this Contract as to scheduling and reporting, as well as time limits for completion of the Work, are of the essence.

2. SCHEDULE METHODOLOGY

A. The scheduling method to be used shall be a Critical Path Method schedule in the form of an activity on node Precedence Diagram Network (PDN) with capabilities of identifying the critical path.

B. The scheduling system to be utilized will be a Primavera scheduling solution. These include, Project Planner Version 3.1 or later, Primavera Suretrak 3.0, Primavera Contractor, or Primavera P6 or later. This will be referred to as the Scheduling System. The system will be capable of handling, processing, printing, and plotting data to satisfy all requirements of this Section. The CONSULTANT will maintain the Scheduling System, the schedule, and the scheduling staff required to support and maintain the system and processes.

3. INTEGRATED PROJECT SCHEDULE TEMPLATE

A. The work assigned to the selected CONSULTANT represents one of the nine phases typically performed in the life cycle of the projects managed by the OWNER’s representative (Clark County Real Property Management). A critical component of the OWNER’s project management plan is the coordination and forecasting of the work as it transitions from one phase to the next. To facilitate this coordination the OWNER has developed a scheduling template integrating each of the phases into a master project plan. All project participates, including the selected CONSULTANT shall develop a Baseline Schedule within the structure established by the Schedule Template.

B. It is expressly understood the OWNER’s intent in providing the Schedule Template to the selected CONSULTANT is not to dictate how the design is performed. The Schedule Template simply provides the frame work and integration points for which the Baseline Schedule is to be developed and maintained.
C. No change, modification, substitution or updating of the CONSULTANT's Baseline Schedule will be performed by the CONSULTANT without explicit written permission by the OWNER. Acceptance of any such Schedule, report or update by the OWNER serves only to acknowledge that the CONSULTANT has fulfilled the contractual requirement to submit the same; in doing so, the OWNER assumes no responsibility for any loss or damage to the CONSULTANT and the CONSULTANT remains solely responsible for the choice of sequences, durations, logic, and procedures reflected therein.

D. The CONSULTANT, with approval of the OWNER, will modify the Integrated Project Schedule Template as required to develop the Design Schedule for the work in accordance with the requirements of this Section. The purpose of the Design Schedule shall be to:

1. Depict the CONSULTANT's plan for performing the Work.
2. Assure adequate planning, scheduling, and reporting during execution of the design and related activities so they may be prosecuted in an orderly and expeditious manner, within the Contract time and the Milestones stipulated by the Contract.
3. Assist the CONSULTANT and OWNER in monitoring the progress of the Work and evaluating proposed changes to the Contract and the Design Schedule.
4. Assist in detecting problems for the purpose of taking corrective action and to provide a mechanism or tool for determining and monitoring such corrective actions.
5. Coordinate the execution of following project phases.

E. DESIGN SCHEDULE CODING STRUCTURE

1. The OWNER's coding dictionary included in the Schedule Template facilitates the OWNER's reporting requirements. These four codes included in the Schedule Template shall not be altered. Additional coding may be added by the CONSULTANT as needed.

4. DESIGN CONSULTANT'S PROJECT SCHEDULER

A. The CONSULTANT is required to employ or retain the services of a Project Scheduler. The Project Scheduler shall have at least five years of verifiable experience as the person primarily responsible for preparing and maintaining detailed project schedules on projects of the same or similar nature as this project.

B. The Project Scheduler is required to attend all meetings pertaining to scheduling and progress of the work.

C. Within five calendar days after the Notice to Proceed, the CONSULTANT shall provide a statement to the OWNER with the following:

1. Identification, qualifications, and experience of the CONSULTANT's Project Scheduler and all other members of the CONSULTANT's scheduling staff.
2. The OWNER reserves the right to disapprove any candidate proposed for the Project.
3. The OWNER reserves right to remove, without rights to work on the project, any member of the CONSULTANT's scheduling staff that is, in the OWNER's opinion, incompetent in scheduling.

D. Related Sections: Other Division 1 Specification Sections including, but not limited to, following:

1. Section TBD Payment Procedures
2. Section TBD Submittal Schedule
3. Section TBD Schedule of Values

III. DESIGN SCHEDULE MILESTONES

A. The OWNER will provide project specific time constraint Milestones (if required) to support the phases following the design effort. The CONSULTANT shall maintain these Milestones in the Design Schedule.

B. The Milestones listed in these specifications, or elsewhere in the CONSULTANT's Contract, represent only the major milestones. The Milestone completion durations indicated are considered essential to the satisfactory performance of this Contract and to the coordination of all Work on the Project.
C. Refer to the Contract for the project required Milestones and durations. Earlier completion dates may be established by the CONSULTANT subject to approval by the OWNER. The OWNER reserves the right to require the CONSULTANT to prosecute the Work in accordance with the specified Milestone durations. The CONSULTANT shall create all Project Milestones deemed necessary by the OWNER, including but not limited to the following:

1. Develop and Submit Baseline Schedule
2. Schematic Drawings
3. Design Development
4. 60% CD’s
5. 85% CD’s

IV. SUBMITTALS

A. DESIGN SCHEDULE BASELINE SCHEDULE: Within the first ten working days of the Contract the CONSULTANT shall meet with the OWNER to develop a digital copy of the Baseline Design Schedule. The Design Schedule Update shall reflect the CONSULTANT’s plan for completing the work included in the scope of the Contract.

B. DESIGN SCHEDULE MONTHLY UPDATES: On the third Friday of each month, the CONSULTANT shall submit a digital copy of the current progress of the Design Schedule status through the middle of the month. The status shall include actual dates for activities that have started and/or completed, expected completion dates for activities in progress, and proposed durations and sequence for the remaining activities in the Design Schedule. The Design Schedule Update shall reflect the CONSULTANT’s plan for completing the remaining work included in the scope of the Contract.
EXHIBIT G
CBE NO. 601438-09
ARCHITECTURAL AND ENGINEERING SERVICES FOR COUNTYWIDE OZONE DEPLETION EPA REGULATORY PROGRAM
(AC AND CHILLER REFRIGERANT REPLACEMENT INVENTORY AND ASSESSMENT - VARIOUS BUILDINGS)

INSURANCE REQUIREMENTS

TO ENSURE COMPLIANCE WITH THE CONTRACT DOCUMENT, CONSULTANT SHOULD FORWARD THE FOLLOWING INSURANCE CLAUSE AND SAMPLE INSURANCE FORM TO THEIR INSURANCE AGENT PRIOR TO PROPOSAL SUBMITTAL.

1. **Format/Time:** The CONSULTANT shall provide Owner with Certificates of Insurance, per the sample format (page B-3), for coverages as listed below, and endorsements affecting coverage required by this Contract within 10 calendar days after the award by the Owner. All policy certificates and endorsements shall be signed by a person authorized by that insurer and who is licensed by the State of Nevada in accordance with NRS 680A.300. All required aggregate limits shall be disclosed and amounts entered on the Certificate of Insurance, and shall be maintained for the duration of the Contract and any renewal periods.

2. **Best Key Rating:** The Owner requires insurance carriers to maintain during the contract term, a Best Key Rating of A VII or higher, which shall be fully disclosed and entered on the Certificate of Insurance.

3. **Owner Coverage:** The Owner, its officers and employees must be expressly covered as additional insureds except on workers’ compensation and professional liability insurance coverages. The CONSULTANT’s insurance shall be primary as respects the Owner, its officers and employees.

4. **Endorsement/Cancellation:** The CONSULTANT’s general liability and automobile liability insurance policy shall be endorsed to recognize specifically the CONSULTANT’s contractual obligation of additional insured to Owner and must note that the Owner will be given thirty (30) calendar days advance notice by certified mail “return receipt requested” of any policy changes, cancellations, or any erosion of insurance limits.

5. **Deductibles:** All deductibles and self-insured retentions shall be fully disclosed in the Certificates of Insurance and may not exceed $25,000.

6. **Aggregate Limits:** If aggregate limits are imposed on bodily injury and property damage, then the amount of such limits must not be less than $2,000,000.

7. **Commercial General Liability:** Subject to paragraph 6 of this Exhibit, the CONSULTANT shall maintain limits of no less than $1,000,000 combined single limit per occurrence for bodily injury (including death), personal injury and property damages. Commercial general liability coverage shall be on a “per occurrence” basis only, not “claims made,” and be provided either on a Commercial General Liability or a Broad Form Comprehensive General Liability (including a Broad Form CGL endorsement) insurance form.

8. **Automobile Liability:** Subject to paragraph 6 of this Exhibit, the CONSULTANT shall maintain limits of no less than $1,000,000 combined single limit per occurrence for bodily injury and property damage to include, but not be limited to, coverage against all insurance claims for injuries to persons or damages to property which may arise from services rendered by CONSULTANT and any auto used for the performance of services under this Contract.

9. **Professional Liability:** The CONSULTANT shall maintain limits of no less than $1,000,000 aggregate. If the professional liability insurance provided is on a Claims Made Form, then the insurance coverage required must continue for a period of 2 years beyond the completion or termination of this Contract. Any retroactive date must coincide with or predate the beginning of this and may not be advanced without the consent of the Owner.

10. **Workers’ Compensation:** The CONSULTANT shall obtain and maintain for the duration of this contract, a work certificate and/or a certificate issued by an insurer qualified to underwrite workers’ compensation insurance in the State of Nevada, in accordance with Nevada Revised Statutes Chapters 616A-616D, inclusive, provided, however, a CONSULTANT that is a Sole Proprietor shall be required to submit an affidavit (Attachment 1) indicating that the CONSULTANT has elected not to be included in the terms, conditions and provisions of Chapters 616A-616D, inclusive, and is otherwise in compliance with those terms, conditions and provisions.

11. **Failure To Maintain Coverage:** If the CONSULTANT fails to maintain any of the insurance coverages required herein, Owner may withhold payment, order the CONSULTANT to stop the work, declare the CONSULTANT in breach, suspend or terminate the Contract, assess liquidated damages as defined herein, or may purchase replacement insurance or pay premiums due on existing policies. Owner may collect any replacement insurance costs or premium payments made from the CONSULTANT or deduct the amount paid from any sums due the CONSULTANT under this Contract.

12. **Additional Insurance:** The CONSULTANT is encouraged to purchase any such additional insurance, as it deems necessary.
Damages: The CONSULTANT is required to remedy all injuries to persons and damage or loss to any property of Owner, caused in whole or in part by the CONSULTANT, their subcontractors or anyone employed, directed or supervised by CONSULTANT.

Cost: The CONSULTANT shall pay all associated costs for the specified insurance. The cost shall be included in the price(s).

Insurance Submittal Address: All Insurance Certificates requested shall be sent to the Clark County Purchasing and Contracts Division, Attention: Insurance Coordinator. See the mailing address specified in Item 16.8 below.

Insurance Form Instructions: The following information must be filled in by the CONSULTANT's Insurance Company representative:

1. Insurance Broker's name, complete address, phone and fax numbers.
2. CONSULTANT's name, complete address, phone and fax numbers.
3. Insurance Company's Best Key Rating
4. Commercial General Liability (Per Occurrence)
   (A) Policy Number
   (B) Policy Effective Date
   (C) Policy Expiration Date
   (D) General Aggregate ($2,000,000)
   (E) Products-Completed Operations Aggregate ($2,000,000)
   (F) Personal & Advertising Injury ($1,000,000)
   (G) Each Occurrence ($1,000,000)
   (H) Fire Damage ($50,000)
   (I) Medical Expenses ($5,000)

5. Automobile Liability (Any Auto)
   (J) Policy Number
   (K) Policy Effective Date
   (L) Policy Expiration Date
   (M) Combined Single Limit ($1,000,000)

6. Worker's Compensation

7. Professional Liability
   (N) Policy Number
   (O) Policy Effective Date
   (P) Policy Expiration Date
   (Q) Aggregate ($1,000,000)

8. Description: Project Number and Name of Contract (must be identified on the initial insurance form and each renewal form).

9. Certificate Holder:

   Clark County
   c/o Purchasing and Contracts Division
   Government Center, Fourth Floor
   500 South Grand Central Parkway
   P.O. Box 551217
   Las Vegas, Nevada 89155-1217

10. Appointed Agent Signature to include license number and issuing state.
## CLARK COUNTY CERTIFICATE OF INSURANCE

### PRODUCER
1. INSURANCE BROKER'S NAME
   - ADDRESS
   - CONTACT NAME
   - PHONE & FAX NUMBERS

### INSURED
2. INSURED'S NAME
   - ADDRESS
   - PHONE & FAX NUMBERS

### COVERAGES

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.

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<th>CO LTH</th>
<th>TYPE OF INSURANCE</th>
<th>POLICY NUMBER</th>
<th>POLICY EFFECTIVE DATE (MM/DD/YY)</th>
<th>POLICY EXPIRATION DATE (MM/DD/YY)</th>
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### 8. DESCRIPTION OF PROJECT:
CBE NO. 601436-09; ARCHITECTURAL AND ENGINEERING SERVICES FOR COUNTYWIDE OZONE DEPLETION EPA REGULATORY PROGRAM (AC AND CHILLER REFRIGERANT REPLACEMENT INVENTORY AND ASSESSMENT - VARIOUS BUILDINGS)

### 9. CERTIFICATE HOLDER
CLARK COUNTY, NEVADA
C/O PURCHASING AND CONTRACTS DIVISION
500 S. GRAND CENTRAL PKY 4TH FL
BOX 551217
LAS VEGAS, NV 89155-1217

### CANCELLATION

Should any of the above described policies be canceled before the expiration date thereof, the issuing company will mail 30 days written notice to the certificate holder named to the left.

10. APPOINTED AGENT SIGNATURE
    INSURER LICENSE NUMBER ____________________.
    ISSUED BY STATE OF ____________________.
POLICY NUMBER: ________________ COMMERCIAL GENERAL AND AUTOMOBILE LIABILITY

CBE NUMBER AND PROJECT NAME: __________________________________________________________

THIS ENDORSEMENT CHANGED THE POLICY. PLEASE READ IT CAREFULLY

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY AND AUTOMOBILE LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

CLARK COUNTY, NEVADA
C/O PURCHASING & CONTRACTS DIVISION
500 S. GRAND CENTRAL PKWY 4TH FL
PO BOX 551217
LAS VEGAS, NEVADA 89155-1217

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

CLARK COUNTY, NEVADA, ITS OFFICERS, EMPLOYEES AND VOLUNTEERS ARE INSURED WITH RESPECT TO LIABILITY ARISING OUT OF THE ACTIVITIES BY OR ON BEHALF OF THE NAMED INSURED IN CONNECTION WITH THIS PROJECT.
ATTACHMENT 1

AFFIDAVIT

I, ____________________________, on behalf of my company, ____________________________, being

(Name of Sole Proprietor) (Legal Name of Company)

duly sworn, depose and declare:

1. I am a Sole Proprietor;

2. I will not use the services of any employees in the performance of this contract, identified as CBE No. 601438-09, entitled ARCHITECTURAL AND ENGINEERING SERVICES FOR COUNTYWIDE OZONE DEPLETION EPA REGULATORY PROGRAM (AC AND CHILLER REFRIGERANT REPLACEMENT INVENTORY AND ASSESSMENT - VARIOUS BUILDINGS);

3. I have elected to not be included in the terms, conditions, and provisions of NRS Chapters 616A-616D, inclusive; and

4. I am otherwise in compliance with the terms, conditions, and provisions of NRS Chapters 616A-616D, inclusive.

I release Clark County from all liability associated with claims made against me and my company, in the performance of this contract, that relate to compliance with NRS Chapters 616A-616D, inclusive.

Signed this ________ day of ____________, ________.

Signature __________________________

State of Nevada )
 )ss.
County of Clark )

Signed and sworn to (or affirmed) before me on this _____ day of ________, 200__, by ________________________________
(name of person making statement).

______________________________
Notary Signature

STAMP AND SEAL
EXHIBIT H
SUBCONTRACTOR INFORMATION

DEFINITIONS

MINORITY OWNED BUSINESS ENTERPRISE (MBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more minority persons of Black American, Hispanic American, Asian-Pacific American or Native American ethnicity.

WOMEN OWNED BUSINESS ENTERPRISE (WBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more women.

PHYSICALLY-CHALLENGED BUSINESS ENTERPRISE (PBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more disabled individuals pursuant to the federal Americans with Disabilities Act.

SMALL BUSINESS ENTERPRISE (SBE): An independent and continuing Nevada business for profit which performs a commercially useful function, is not owned and controlled by individuals designated as minority, women, or physically-challenged, and where gross annual sales does not exceed $2,000,000.

NEVADA BUSINESS ENTERPRISE (NBE): Any Nevada business which has the resources necessary to sufficiently perform identified County projects, and is owned or controlled by individuals that are not designated as socially or economically disadvantaged.

It is our intent to utilize the following MBE, WBE, PBE, SBE, and NBE subcontractors in association with this Contract:

1. Subcontractor Name: ________________________________
   Contact Person: ________________________________ Telephone Number: ________________________________
   Description of Work: ________________________________
   Estimated Percentage of Total Dollars: ________________________________
   Business Type: □ MBE □ WBE □ PBE □ SBE □ NBE

2. Subcontractor Name: ________________________________
   Contact Person: ________________________________ Telephone Number: ________________________________
   Description of Work: ________________________________
   Estimated Percentage of Total Dollars: ________________________________
   Business Type: □ MBE □ WBE □ PBE □ SBE □ NBE

3. Subcontractor Name: ________________________________
   Contact Person: ________________________________ Telephone Number: ________________________________
   Description of Work: ________________________________
   Estimated Percentage of Total Dollars: ________________________________
   Business Type: □ MBE □ WBE □ PBE □ SBE □ NBE

4. Subcontractor Name: ________________________________
   Contact Person: ________________________________ Telephone Number: ________________________________
   Description of Work: ________________________________
   Estimated Percentage of Total Dollars: ________________________________
   Business Type: □ MBE □ WBE □ PBE □ SBE □ NBE

☐ No MBE, WBE, PBE, SBE, or NBE subcontractors will be used.