

FORM
50

Bidder Certification

Los Angeles City
ETHICS COMMISSION

This form must be submitted with your bid or proposal to the City department that is awarding the contract noted below. If you have questions about this form, please contact the Ethics Commission at (213) 978-1960.



Original Filing



Amendment: Date of Signed Original _____. Date of Last Amendment _____.

Reference Number (Bid, Contract, or BAVN) 200204	Awarding Authority (Department awarding the contract) CHIEF LEGISLATIVE ANALYST
Bidder Name PACIFIC URBANISM	
Address 225 E 16TH ST, LOS ANGELES, CA 90015	
Email Address office@pacificurbanism.com	Phone Number (619) 454-5078

Certification

I certify the following on my own behalf or on behalf of the entity named above, which I am authorized to represent:

A. I am applying for one of the following types of contracts with the City of Los Angeles:

1. A goods or services contract with a value of more than \$25,000 and a term of at least three months;
2. A construction contract with any value and duration;
3. A financial assistance contract, as defined in Los Angeles Administrative Code § 10.40.1(h), with a value of at least \$100,000 and a term of any duration; or
4. A public lease or license, as defined in Los Angeles Administrative Code § 10.40.1(i), with any value and duration.

B. I acknowledge and agree to comply with the disclosure requirements and prohibitions established in the Los Angeles Municipal Lobbying Ordinance if I qualify as a lobbying entity under Los Angeles Municipal Code § 48.02.

I certify under penalty of perjury under the laws of the City of Los Angeles and the state of California that the information in this form is true and complete.

Dario Rodman-Alvarez

Name

President

Title



Signature

6/14/2021

Date

FORM
55Prohibited Contributors
(Bidders)Los Angeles City
ETHICS COMMISSION

This form must be completed in its entirety and submitted with your bid or proposal to the City department that is awarding the contract. Failure to submit a completed form may affect your bid or proposal. If you have questions about this form, please contact the Ethics Commission at (213) 978-1960.

☒ **Original Filing** ☐ **Amendment:** Date of Signed Original 6/14/2021 Date of Last Amendment _____

Reference Number (Bid, Contract, or BAVN): 200204 Date Bid Submitted: 6/14/2021

Contract Description (Title of the RFP or City contract solicitation and description of the services to be provided):
Line Drawing & Mapping Services for the Los Angeles City Council Redistricting Commission

Awarding Authority (Department awarding the contract): Chief Legislative Analyst

Bidder Name: Pacific Urbanism

Bidder Address: 225 E. 16th St, Los Angeles, CA 90015

Bidder Email Address: dario@pacificurbanism.com Bidder Phone Number: 619-454-5078

Schedule Summary

Please complete all three of the following:

1. **SCHEDULE A – Bidder's Principals** (check one)

The bidder has one or more **PRINCIPALS**, as defined in LAMC § 49.7.35(A)(6).
At least one principal is required for entities. (If you check "Yes", Schedule A is required.)

Yes
☒No
☐2. **SCHEDULE B – Subcontractors and Their Principals** (check one)

The bidder has one or more **SUBCONTRACTORS** on this bid or proposal with
subcontracts worth \$100,000 or more. (If you check "Yes", Schedule B is required.)

Yes
☒No
☐

3. **TOTAL NUMBER OF PAGES SUBMITTED** (including this cover page): 3

Certification

I certify the following under penalty of perjury under the laws of the City of Los Angeles and the state of California:

A) I understand, will comply with, and have notified my principals and subcontractors of the requirements and restrictions in Los Angeles City Charter § 470(c)(12) and any related ordinances; B) I understand that I must amend this form within ten business days if any information changes; C) I am the bidder named above or I am authorized to represent the bidder named above, and my name appears below; and D) The information provided in this form is true and complete to the best of my knowledge and belief.

Dario Rodman-Alvarez

Name

President

Signature

6/14/2021

Title

Date

Schedule A - Bidder's Principals

Please identify the names and titles of all the bidder's principals (attach additional sheets if necessary). Principals include a bidder's board chair, president, chief executive officer, chief operating officer, and individuals who serve in the functional equivalent of one or more of those positions. Principals also include individuals who hold an ownership interest in the bidder of at least 20 percent and employees of the bidder who are authorized by the bid or proposal to represent the bidder before the City.

Name: Dario Rodman-Alvarez Title: President
Address: 225 E. 16th St, Los Angeles, CA 90015

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

☐ Check this box if additional Schedule A pages are attached.

Schedule B - Subcontractors and Their Principals

Please identify all subcontractors whose subcontracts are worth \$100,000 or more. Separate Schedule B pages are required for each subcontractor who meets the threshold.

Subcontractor's Name

N/A

Subcontractor's Address

Please check one of the following options:

This subcontractor has one or more principals. ☐ Yes* ☐ No

* Each principal's name and title must be identified below. Attach additional sheets if necessary. Principals include a subcontractor's board chair, president, chief executive officer, chief operating officer, and individuals who serve in the functional equivalent of one or more of those positions. Principals also include individuals who hold an ownership interest in the subcontractor of at least 20 percent and employees of the subcontractor who are authorized by the bid or proposal to represent the subcontractor before the City.

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

Name: _____ Title: _____
Address: _____

☐ Check this box if additional Schedule B pages are attached.

APPENDIX XVI

IRAN CONTRACTING ACT OF 2010 COMPLIANCE AFFIDAVIT

(California Public Contract Code Sections 2200-2208)

The California Legislature adopted the Iran Contracting Act of 2010 to respond to policies of Iran in a uniform fashion (PCC § 2201(q)). The Iran Contracting Act prohibits bidders engaged in investment activities in Iran from bidding on, submitting proposals for, or entering into or renewing contracts with public entities for goods and services of one million dollars (\$1,000,000) or more (PCC § 2203(a)). A bidder who “engages in investment activities in Iran” is defined as either:

1. A bidder providing goods or services of twenty million dollars (\$20,000,000) or more in the energy sector of Iran, including provision of oil or liquefied natural gas tankers, or products used to construct or maintain pipelines used to transport oil or liquefied natural gas, for the energy sector of Iran; **or**
2. A bidder that is a financial institution (as that term is defined in 50 U.S.C. § 1701) that extends twenty million dollars (\$20,000,000) or more in credit to another person, for 45 days or more, if that person will use the credit to provide goods or services in the energy sector in Iran and is identified on a list created by the California Department of General Services (DGS) pursuant to PCC § 2203(b) as a person engaging in the investment activities in Iran.


The bidder shall certify that at the time of submitting a bid for new contract or renewal of an existing contract, the bidder is **not** identified on the DGS list of ineligible businesses or persons and that the bidder is **not** engaged in investment activities in Iran in violation of the Iran Contracting Act of 2010.

California law establishes penalties for providing false certifications, including civil penalties equal to the greater of \$250,000 or twice the amount of the contract for which the false certification was made; contract termination; and three-year ineligibility to bid on contracts (PCC § 2205).

To comply with the Iran Contracting Act of 2010, the bidder shall provide its vendor or financial institution name, and City Business Tax Registration Certificate (BTRC) if available, in completing **ONE** of the options shown below.

OPTION #1: CERTIFICATION

I, the official named below, certify that I am duly authorized to execute this certification on behalf of the bidder or financial institution identified below, and that the bidder or financial institution identified below is **not** on the current DGS list of persons engaged in investment activities in Iran and is **not** a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person or vendor, for 45 days or more, if that other person or vendor will use the credit to provide goods or services in the energy sector in Iran and is identified on the current DGS list of persons engaged in investment activities in Iran.

Vendor Name/Financial Institution (printed) Pacific Urbanism		BTRC (or n/a) 000287799100018
By (Authorized Signature) 		
Print Name and Title of Person Signing Dario Rodman-Alvarez, President		
Date Executed 3/16/2021	City Approval (Signature)	(Print Name)

OPTION #2: EXEMPTION

Pursuant to PCC § 2203(c) and (d), a public entity may permit a bidder or financial institution engaged in investment activities in Iran, on a case-by-case basis, to be eligible for, or to bid on, submit a proposal for, or enter into, or renew, a contract for goods and services. If the bidder or financial institution identified below has obtained an exemption from the certification requirement under the Iran Contracting Act of 2010, the bidder or financial institution shall complete and sign below and attach documentation demonstrating the exemption approval.

Vendor Name/Financial Institution (printed)		BTRC (or n/a)
By (Authorized Signature)		
Print Name and Title of Person Signing		
Date Executed	City Approval (Signature)	(Print Name)

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Fasting Coyote Inc.	
	2 Business name/disregarded entity name, if different from above Pacific Urbanism	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions. 225 E 16th St	Requester's name and address (optional)
	6 City, state, and ZIP code Los Angeles, CA 90015	
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given 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, later. 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.

Social security number									
			-			-			
or									
Employer identification number									
8	1	-	4	6	0	5	1	8	3

Part II Certification

Under penalties of perjury, I certify that:

- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► <i>Dario Rodman-Alvarez</i>	Date ► 01/24/2020
-----------	--	--------------------------

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 taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- 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 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled 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.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

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

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



CITY OF LOS ANGELES

Office of Finance
P.O. Box 53200
Los Angeles CA 90053-0200

225 E 16TH STREET
LOS ANGELES, CA 90015-3615



***** ALL FOR AADC 900 11
FASTING COYOTE INC 2476
PACIFIC URBANISM
225 E 16TH ST
LOS ANGELES CA 90015-3615

THIS CERTIFICATE MUST BE POSTED AT PLACE OF BUSINESS

CITY OF LOS ANGELES TAX REGISTRATION CERTIFICATE

THIS CERTIFICATE IS GOOD UNTIL SUSPENDED OR CANCELLED

BUSINESS TAX

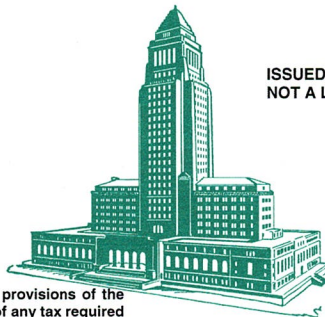
ISSUED: 2/8/2020

ACCOUNT NO.	FUND/CLASS	DESCRIPTION	STARTED	STATUS
0002877991-0001-8	L049	Professions / Occupations	1/1/2014	Active

FASTING COYOTE INC
PACIFIC URBANISM
225 E 16TH ST
LOS ANGELES CA 90015-3615

I
S
S
U
E
D
T
O

225 E 16TH STREET
LOS ANGELES, CA 90015-3615



ISSUED FOR TAX COMPLIANCE PURPOSES ONLY
NOT A LICENSE, PERMIT, OR LAND USE AUTHORIZATION

"No registration certificate or permit issued under the provisions of the Business Tax ordinances of the LAMC, or the payment of any tax required under the provisions of the Business Tax ordinances of the LAMC shall be construed as authorizing the conduct or continuance of any illegal business or of a legal business in an illegal manner."

ISSUED BY:

Clavi Bantels

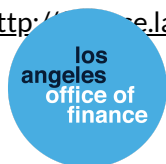
DIRECTOR OF FINANCE

NOTIFY THE OFFICE OF FINANCE IN WRITING OF ANY CHANGE IN OWNERSHIP OR ADDRESS - Office of Finance, P.O. Box 53200, Los Angeles CA 90053-0200

FORM 2000 (Rev. 11/15)

IMPORTANT - READ REVERSE SIDE

(<http://latax.lacity.org/>)



Annual Business Taxes

Renewal Confirmation

This is a confirmation receipt for your submitted renewal. Please print and keep this receipt for your records.

Transaction Information:

Your Renewal was submitted and received on 03/31/2021.

The confirmation number for this transaction is **F0002877991000182021**

Your on-line payment for \$2,335.55 was submitted and received.

The payment reference number is 1601188384

Based on the information that you have submitted thus far, the following are your identified taxable business activities.

Note: The issuance of a Tax Registration Certificate and the payment of the business tax do not authorize the conduct or continuance of any illegal business or of a legal business in an illegal manner within the City of Los Angeles. The City has enacted regulatory ordinances in areas such as zoning, building safety, police, fire, hazardous material disclosure, sanitation, health, etc., which must be complied with in order to lawfully conduct a business within the City. Failure to comply with these regulatory ordinances may result in legal action being taken against the taxpayer.

Legal Name: FASTING COYOTE INC

Account Number: 000287799100018

Business Location: 225 E 16TH STREET
LOS ANGELES, CA 90015-3615

Taxable Activities:

<u>Business Activity</u>	<u>Basis for Tax</u>
Professions / Occupations(L049)	519255

[Print this Screen](#)[Exit E-Filing](#)

Connect With Us

[\(http://business.lacity.org/\)](http://business.lacity.org/)

Disclaimer

Non-financial information such as name, business address (including home-based businesses), mailing address, etc., contained in your City of Los Angeles tax and permit records, is subject to public disclosure under provisions of the California Public Records Act, Government Code Section 6250 et seq. Your residential information may also be subject to public disclosure if that location is utilized for business and/or mailing purposes.

Contact Us

- 📍 200 N. Spring Street, Los Angeles, CA 90012
- ☎ Call 311
- ✉ [Submit Feedback \(http://finance.lacity.org/submit-feedback\)](http://finance.lacity.org/submit-feedback)

© Copyright 2016 City of Los Angeles. All rights reserved. [Disclaimer](#)
(<http://disclaimer.lacity.org/disclaimer.htm>) | [Privacy Policy](#) (<http://disclaimer.lacity.org/privacy.htm>)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/14/2021

PRODUCER IOA Insurance Services 4370 La Jolla Village Dr Suite 600 San Diego, CA 92122	THIS CERTIFICATION 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.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Fasting Coyote Inc. dba Pacific Urbanism 225 E. 16th St Los Angeles, CA 90015	INSURER A: RLI Insurance Company	13056
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR/ADD'L LTR/INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Cont Liab/Sev of Int GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PSB0008506	09/23/2020	09/23/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 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 Deductible \$ 0
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> No Co. Owned Autos	PSB0008506	09/23/2020	09/23/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	FAWC286137	02/28/2021	02/28/2022	WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	OTHER Property Special Form/RC	PSB0008506 PSB0008506	09/23/2020	09/23/2021	BPP - 10,000 Deductible - 850

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

RE: Location at 225 E 16th Street, Los Angeles, CA 90015
Proof of insurance

30 days' notice of cancellation with 10 days notice for non-payment of premium in accordance with the policy provisions

CERTIFICATE HOLDER

City of Los Angeles
Office of the City Administrative Officer, Risk Management
200 North Main Street, Room 1240
Los Angeles, CA 90012

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Casey Haynes

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

Workers' Compensation



Your policy is active and connected to payroll

Your Policy Berkshire Hathaway GUARD

Details

Policy #
FAWC286137

Effective Date
February 28, 2021

Renewal Date
February 28, 2022

Accident Limit
\$1,000,000.00

Disease Limit
\$1,000,000.00

Estimated Annual Premium
\$2,481.00

How to Submit a Claim

Your workers' compensation insurance company, Berkshire Hathaway GUARD, is ready to help if an employee is injured on the job. You can call their workers' compensation claim specialists at 888-639-2567 and they will take you and your employee through the process of submitting a claim.

Cost Details

The cost of your policy depends on how much you pay your employees and the jobs they perform. The rate for every \$100 you pay your employees is as follows:

State	Code	Job Description	Rate
CO	8601	Architectural Or Engineering Firm-Including Salespersons & Drivers	\$0.48
CA	8601	Architectural Or Engineering Firm-Including Salespersons & Drivers	\$0.61



Effective with UNDERWRITERS AT LLOYD'S, LONDON

Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No. 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022

Insurance for Architects, Engineers, and Construction Managers

DECLARATIONS

See CA-specific Notices (D1 & D2)

Broker No.:	US 0003028	RT Specialty of Illinois, LLC
Certificate No.:	ANE1667300.21	500 W Monroe St. Fl 30
Renewal of:	ANE1667300.20	Chicago, IL 60661
1. Named Insured:	Fasting Coyote Inc. dba Pacific Urbanism	
Address:	PO Box 15548 Los Angeles, CA 90015-0548	
2. Policy Period:	Inception Date: 03/02/2021	Expiration Date: 03/02/2022
	Inception date shown shall be at 12:01 A.M. (Standard Time) to Expiration date shown above at 12:01 A.M. (Standard Time) at the address of the Named Insured.	
3. General terms and conditions wording:	WCL P0001 CW (07-19) The General terms and conditions apply to this policy in conjunction with the specific wording detailed in each section below.	
4. Endorsements:	E6015.9 - Lloyd's Syndicate (3624) Endorsement, E6017.3 - Nuclear Incident Exclusion Clause-Liability-Direct (Broad) Endorsement, E6018.2 - Applicable Law Endorsement, E6019.1 - Service of Suit (CA), E6020.3 - War and Civil War Exclusion Endorsement, E6035.1 - Conditional Return of Premium Endorsement, E6026.1 - Amend Retroactive Date (Specific) Endorsement, and E6361.1 - Cyber Incidents Clarification Endorsement (PL)	
5. Optional Extension Period:	12/24/36 months at 75/150/225 percent of the annual premium, for eligible coverage parts.	
6. Notification of claims to:	Hiscox Claims 520 Madison Avenue, 32nd floor New York, NY 10022	
Additional Notification requirements:	NONE	
7. Policy Premium:	\$4,160	Premium Allocated to TRIA: \$0
		Administration Fee: \$75
Surplus Lines Tax	\$127.05	
Stamping Office Fee	\$10.59	



Effective with UNDERWRITERS AT LLOYD'S, LONDON

Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No. 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022

Insurance for Architects, Engineers, and Construction Managers

DECLARATIONS

Architects, Engineers, and Construction Managers Professional Liability Claims-Made and Reported Coverage Part: WCLANE P0001 CW (12-14)

Covered Professional Services:	Solely in the performance of services as a construction manager and/or providing urban planning, for others for a fee.
Professional Liability (PL):	\$ 1,000,000 Each Claim / \$ 1,000,000 Aggregate
Defense of Licensing Proceedings:	\$ 10,000 Aggregate Limit (Separate Limit)
Subpoena Assistance:	\$ 10,000 Aggregate Limit (Separate Limit)
Mold:	\$ 250,000 Each Claim Limit (Shared Limit with PL)
Retroactive Date:	03-02-2016
Retention:	\$ 5,000
PL Premium:	\$ 4,160
Endorsements:	E6606.4 - Construction Managers Endorsement, and E6159.2 - Predecessor Firm Endorsement

In accordance with the authorization granted to Hiscox Inc. under Contract No. B1234HisInc2020 by certain Underwriters at Lloyd's, London, whose names and the proportions underwritten by them can be ascertained by reference to the said Contract, which bears the Seal of Lloyd's Policy Signing Office and is on file at the office of the said Agency and in consideration of the premium specified herein, the said Underwriters do hereby bind themselves, each for their own part and not one for another, their heirs, executors and administrators, to insure as follows in accordance with the terms and conditions contained or endorsed hereon.

The Certificate terms and conditions contained herein or endorsed hereon and such other provisions, agreements or conditions as may be endorsed hereon or added hereto are hereby incorporated in this Certificate. No representative of the Underwriters shall have the power to waive or be deemed to have waived any provision or condition of this Certificate unless such waiver, if any, shall be written upon or attached hereto; nor shall any privilege or permission affecting the insurance under this Certificate exist or be claimed by the Insured(s) unless so written or attached.

IN WITNESS WHEREOF this Certificate has been signed at New York, New York

Authorized Representative
Hiscox Inc.

WCL D0001 CW (04/19)

General Terms and Conditions

I. Our promise to you	In consideration of the premium charged, and in reliance on the statements made and information provided to us , we will pay covered amounts as defined in this policy, provided you properly notify us of claims, breaches, events, or occurrences , and meet your obligations to us in accordance with the terms of this policy.
II. Limits of liability	Regardless of the number of Coverage Parts you have purchased, the maximum we will pay for all covered amounts will be as follows:
A. Coverage part limit	Each Coverage Part purchased will be subject to a coverage part limit (if one is stated in the Declarations), which is the maximum amount we will pay for all covered amounts under that Coverage Part, other than coverage enhancements or other items we have expressly agreed to pay in addition to the limit. The coverage part limit will be in excess of any applicable retention .
B. Each claim limit	The Each Claim Limit identified in the Declarations is the maximum amount we will pay for all covered amounts for each covered claim , unless a lower sublimit is specified, in which case the sublimit is the maximum amount we will pay for the type of covered claim to which the sublimit applies. The Each Claim Limit, or any sublimit, will be in excess of any applicable retention and will be a part of, and not in addition to, any applicable coverage part limit .
C. Each breach limit	The Each Breach Limit identified in the Declarations (if you have purchased a relevant Coverage Part) is the maximum amount we will pay for all covered amounts for each covered breach , unless a lower sublimit is specified, in which case the sublimit is the maximum amount we will pay for the type of covered breach or costs to which the sublimit applies. The Each Breach Limit, or any sublimit, will be in excess of any applicable retention and will be a part of, and not in addition to, any applicable coverage part limit .
D. Each occurrence limit	The Each Occurrence Limit identified in the Declarations (if you have purchased a relevant Coverage Part) is the maximum amount we will pay for all covered amounts for each covered occurrence , unless a lower sublimit is specified, in which case the sublimit is the maximum amount we will pay for the type of covered occurrence to which the sublimit applies. The Each Occurrence Limit, or any sublimit, will be in excess of any applicable retention and will be a part of, and not in addition to, any applicable coverage part limit .
E. General liability coverage part limits	If you have purchased a General Liability Coverage Part, additional rules for applying limits are contained in Section IV. Limits of liability, of that Coverage Part.
F. Commercial umbrella coverage part limits	If you have purchased a Commercial Umbrella Coverage Part, additional rules for applying limits are contained in Section IV. Limits of liability, of that Coverage Part.
G. Related claims	All related claims , regardless of when made, will be treated as one claim , and all subsequent related claims will be deemed to have been made against you on the date the first such claim was made. If, by operation of this provision, the claim is deemed to have been made during any period when we insured you , it will be subject to only one retention and one Each Claim Limit regardless of the number of claimants, insureds , or claims involved.
H. Shared limits	<p>If you have purchased more than one of the following Coverage Parts:</p> <ol style="list-style-type: none"> 1. Cyber Coverage Part; 2. Technology Professional Liability Coverage Part; or 3. Digital Media Liability Coverage Part, <p>then the coverage part limits applicable to those Coverage Parts will be shared, and any payments we make under one Coverage Part, other than coverage enhancements or other items we have expressly agreed to pay in addition to the limit, will reduce the coverage part limits for all Coverage Parts.</p> <p>If the applicable coverage part limits are different, the maximum amount we will pay for covered amounts under all Coverage Parts combined, other than coverage enhancements or other items we have expressly agreed to pay in addition to the limits, will be the highest available coverage</p>

General Terms and Conditions

part limit.

III. Your obligations to us

- | | |
|--|--|
| A. Named insured responsibilities | <p>It will be the responsibility of the named insured (or, if there is more than one named insured, the first one listed on the Declarations) to act on behalf of all insureds with respect to the following:</p> <ol style="list-style-type: none"> 1. timely giving and receiving notice of cancellation or non-renewal; 2. timely payment of premium; 3. receipt of return premiums; 4. timely acceptance of changes to this policy; and 5. timely payment of retentions. |
| B. Your duty to cooperate | <p>You must cooperate with us in the defense, investigation, and settlement of any claim, potential claim, breach, event, occurrence, or other matter notified to us, including but not limited to:</p> <ol style="list-style-type: none"> 1. notifying us immediately if you receive any settlement demands or offers, and sending us copies of any demands, notices, summonses, or legal papers; 2. submitting to examination and interrogation under oath by our representative and giving us a signed statement of your answers; 3. attending hearings, depositions, and trials as we request; 4. assisting in securing and giving evidence and obtaining the attendance of witnesses; 5. providing written statements to our representative and meeting with such representative for the purpose of investigation and/or defense; 6. providing all documents and information we may reasonably request, including authorizing us to obtain records; and 7. pursuing your right of recovery from others. |
| C. Your obligation not to incur any expense or admit liability | <p>You must not make any payment, incur any expense, admit any liability, assume any obligation, or enter into any settlement negotiations or agreements without our prior consent. If you do so, it will be at your own cost and expense.</p> |
| D. Your representations | <p>You warrant that all representations made and all materials submitted by you or on your behalf in connection with the application for this policy are true, accurate, and not misleading, and agree they were relied on by us and were material to our decision to issue this policy to you. If we learn any of the representations or materials were untrue, inaccurate, or misleading in any material respect, we are entitled to treat this policy as if it had never existed.</p> |

IV. Optional extension period

1. If **we** or the **named insured** cancel or non-renew this policy, then the **named insured** will have the right to purchase an optional extension period for the duration and at the percentage of the expiring premium stated in Item 5 of the Declarations. The optional extension period, if purchased, will start on the effective date of cancellation or non-renewal. However, the right to purchase an optional extension period will not apply if:
 - a. this policy is canceled by **us** for nonpayment of premium; or
 - b. the total premium for this policy has not been fully paid.
2. The optional extension period will apply only to **claims** that:
 - a. are first made against **you** and reported to **us** during the optional extension period; and
 - b. arise from **your professional services** performed, or a **breach, data breach**, offense, or **occurrence** that takes place, on or after the **retroactive date** but prior to the

General Terms and Conditions

effective date of cancellation or non-renewal of this policy.

3. The additional premium will be fully earned at the inception of the optional extension period.
4. Notice of election and full payment of the additional premium for the optional extension period must be received by **us** within 30 days after the effective date of cancellation or non-renewal, otherwise any right to purchase the optional extension period will lapse.

The limits of liability applicable during any purchased optional extension period will be the remaining available **coverage part limit**. There will be no separate or additional limit of liability available for any purchased optional extension period.

The right to purchase an optional extension period will apply only to Coverage Parts **you** have purchased that include coverage written on a claims-made or loss occurring and discovered basis, and not to any Coverage Parts written on an occurrence basis.

V. Other provisions affecting coverage

The following provisions apply to all Coverage Parts **you** have purchased. If there is a conflict between any of the provisions here and a provision contained in a Coverage Part, then the provision in the Coverage Part will govern the coverage provided under that Coverage Part.

- | | |
|------------------------------|--|
| A. Alteration and assignment | No change in, modification of, or assignment of interest under this policy will be effective unless made by written endorsement to this policy signed by our authorized representative. |
| B. Bankruptcy or insolvency | Your bankruptcy or insolvency will not relieve us of any of our obligations under this policy. |
| C. Cancellation | <ol style="list-style-type: none">1. This policy may be canceled by the named insured by giving written notice, which must include the date the cancellation will be effective, to us at the address stated in the Declarations.2. This policy may be canceled by us by mailing to the named insured by registered, certified, or other first class-mail (or by email where allowed by applicable law), at the named insured's address (or email address) stated in Item 1 of the Declarations, written notice which must include the date the cancellation will be effective. The effective date of the cancellation will be no less than 60 days after the date of the notice of cancellation, or ten days if the cancellation is due to nonpayment of premium.3. The mailing (or emailing) of the notice will be sufficient proof of notice, and this policy will terminate at the date and hour specified in the notice.4. If this policy is canceled by the named insured, we will retain the customary short rate proportion of the premium.5. If this policy is canceled by us, we will return a pro rata proportion of the premium.6. Payment or tender of any unearned premium by us will not be a condition precedent to the cancellation, but such payment will be made as soon as possible. |
| D. Change in control | <p>If, during the policy period identified in Item 2 of the Declarations, the named insured consolidates with, merges into, or sells all or substantially all of its assets to any other person or entity, or any other person or entity acquires ownership or control of the named insured, then the named insured will provide us written notice no later than 30 days after the effective date of such change in control, together with any other information we may require.</p> <p>We will not cancel this policy solely because of a change in control, but unless you and we agree in writing otherwise, after the effective date of any change in control, this policy will cover only claims arising from professional services performed, or breaches, data breaches, offenses, or occurrences that took place, prior to the change in control.</p> |
| E. Coverage territory | This policy will apply to your professional services performed, and breaches , offenses, events , or occurrences that take place, anywhere in the world, provided that any action, arbitration, or other proceeding (if you have purchased a relevant Coverage Part) is brought within the United States, its territories or possessions, or Canada. |

General Terms and Conditions

- F. Estates, heirs, legal representatives, spouses, and domestic partners
- In the event of an **employee's** death or disability, this policy will also apply to **claims** brought against the **employee's**:
1. heirs, executors, administrators, trustees in bankruptcy, assignees, and legal representatives; or
 2. lawful spouse or lawful domestic partner;
- but only:
- a. for a covered **claim** arising from the scope of the **employee's** work for **you**; or
 - b. in connection with their ownership interest in property which the claimant seeks as recovery in a covered **claim** arising from the scope of the **employee's** work for **you**.
- G. False or fraudulent claims
- If any **insured** commits fraud in connection with any **claim, potential claim, breach, offense, event, or occurrence**, whether regarding the amount or otherwise, this insurance will become void as to that **insured** from the date the fraud is committed.
- H. Other insurance
- Any payment due under this policy is specifically excess of and will not contribute with any other valid and collectible insurance, unless such other insurance is written specifically as excess insurance over this policy. However, if **you** have purchased a General Liability Coverage Part, rules for how that Coverage Part will be treated when there is other valid and collectible insurance are contained in Section V. Other provisions affecting coverage, D. Other insurance, of that Coverage Part.
- If the same **claim or related claims, breach, event or related events, or occurrence** is covered under more than one Coverage Part, **we** will pay only under one Coverage Part, which will be the Coverage Part that provides the most favorable coverage.
- I. Subrogation
- In the event of any payment by **us** under this policy, **we** will be subrogated to all of **your** rights of recovery to that payment.
- You** will do everything necessary to secure and preserve **our** subrogation rights, including but not limited to the execution of any documents necessary to allow **us** to bring suit in **your** name.
- You** will do nothing to prejudice **our** subrogation rights without **our** prior written consent.
- Any recovery first will be paid to **you** up to the amount of any **retention you** have paid, and then to **us** up to the amount of any **covered amounts we** have paid.
- J. Titles
- Titles of sections of and endorsements to this policy are inserted solely for convenience of reference and will not be deemed to limit, expand, or otherwise affect the provisions to which they relate.

VI. Definitions applicable to all Coverage Parts

- The following definitions apply to all Coverage Parts **you** have purchased. If the same term is defined here and in a Coverage Part, then the definition in the Coverage Part will govern the coverage provided under that Coverage Part.
- Application**
- means the signed application for the policy and any attachments and materials submitted with that application. If this policy is a renewal or replacement of a previous policy issued by **us**, **application** also includes all previous signed applications, attachments, and materials.
- Coverage part limit**
- means the amount stated in the Declarations as the aggregate limit applicable to each Coverage Part **you** have purchased which is subject to an aggregate limit.
- Covered amounts**
- means any amounts **we** have expressly agreed to pay under any Coverage Part **you** have purchased.
- Employee**
- means any past, present, or future:
1. employee (including any part-time, seasonal, leased, or temporary employee or any volunteer);

General Terms and Conditions

2. partner, director, officer, or board member (or equivalent position); or
3. independent contractor;

of a **named insured**, but only while in the course of their performance of work or services on behalf of or at the direction of the **named insured**.

Named insured

means the individual, corporation, partnership, limited liability company, limited partnership, or other entity identified in Item 1 of the Declarations.

Policy period

means the period of time identified in Item 2 of the Declarations, and any optional extension period, if purchased.

Professional services

means those services identified as Covered Professional Services under any Coverage Part on the Declarations containing such a description.

Related claims

means all **claims** that are based upon, arise out of, or allege:

1. a common fact, circumstance, situation, event, service, transaction, cause, or origin;
2. a series of related facts, circumstances, situations, events, services, transactions, sources, causes, or origins;
3. a continuous or repeated act, error, or omission in the performance of **your professional services**; or
4. the same **breach, event, occurrence**, or offense.

The determination of whether a **claim** is related to another **claim** or **claims** will not be affected by the number of claimants or **insureds** involved, causes of action asserted, or duties involved.

Retention

means the amount or time identified as such in the Declarations.

Retroactive date

means the date identified as such in the Declarations.

We, us, or our

means the Underwriters identified on the Declarations as issuing this policy.

You, your, or insured

means any individual or entity expressly described as an **insured** in any Coverage Part **you** have purchased.

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

I. What is covered

We will pay up to the **coverage part limit** for **damages** and **claim expenses** in excess of the **retention** for covered **claims** against **you** alleging a negligent act, error, or omission in **your professional services** performed on or after the **retroactive date**, including but not limited to:

1. **property damage**;
2. **bodily injury**;
3. **pollution liability**;
4. **third party discrimination**; or
5. **personal and advertising injury**,

provided the **claim** is first made against **you** during the **policy period** and is reported to **us** in accordance with Section V. Your obligations.

II. Coverage enhancements

We will also make the following payments:

Pre-claim assistance

- A. We will pay up to \$50,000 for reasonable and necessary fees, costs, and expenses we incur to investigate or monitor a **potential claim** arising out of **your professional services** performed on or after the **retroactive date**, provided **you** first become aware of the circumstances leading to the **potential claim** during the **policy period**, and it is reported to **us** in accordance with Section V. Your obligations. Our obligation to make any payments under this subsection A will cease when a **claim** is made against **you** arising out of the same circumstances as the **potential claim** we investigated or monitored.

No **retention** will apply to amounts we pay under this subsection A, and such amounts will be in addition to, and not part of, the **coverage part limit**.

Mold liability sublimit

- B. We will pay **damages** and **claim expenses** up to the limit stated in the Declarations for any **claim** against **you** arising out of any actual, alleged, or threatened existence, growth, release, escape of, exposure to, inhalation of, or contact with mold, spores, or fungi, provided the **claim** is first made against **you** during the **policy period**, it directly results from **your** performance of **professional services** on or after the **retroactive date**, and it is reported to **us** in accordance with Section V. Your obligations.

You must pay the **retention** stated in the Declarations in connection with any payment we make under this subsection B, and any payments we make will be a part of, and not in addition to, the **coverage part limit**.

FHA/OSHA/ADA regulatory proceedings

- C. We will pay up to \$25,000 for the reasonable and necessary fees, costs, and expenses incurred with **our** prior consent in the investigation, defense, or appeal of any regulatory or administrative proceeding against **you** arising out of any actual or alleged violation of the Fair Housing Act (FHA), Occupational Safety and Health Act (OSHA), Americans with Disabilities Act of 1990 (ADA), or any state law equivalents, including any resulting fines, penalties, or costs to comply with any orders to remediate, provided **you** first receive notice of such proceeding during the **policy period**, it directly results from **your** performance of **professional services** on or after the **retroactive date**, and it is reported to **us** in accordance with Section V. Your obligations.

No **retention** will apply to amounts we pay under this subsection C, and such amounts will be in addition to, and not part of, the **coverage part limit**.

Defense of licensing proceedings

- D. We will pay up to the limit stated in the Declarations for the reasonable and necessary fees, costs, and expenses incurred with **our** prior consent in the investigation, defense, or appeal of any state, federal, or other licensing board inquiry or proceeding concerning **your** eligibility or license to engage in **your professional services**, provided **you** first receive notice of such inquiry or proceeding during the **policy period**, it relates to **your professional services** performed on or after the **retroactive date**, and it is reported to **us** in accordance with Section V. Your obligations.

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

No **retention** will apply to amounts **we** pay under this subsection D, and such amounts will be in addition to, and not part of, the **coverage part limit**.

Subpoena assistance

- E. **We** will pay up to the limit stated in the Declarations for the reasonable and necessary fees, costs, and expenses incurred with **our** prior consent to respond to a subpoena arising from the performance of **your professional services**, provided **you** first receive notice of such subpoena during the **policy period**, it relates to **your professional services** performed on or after the **retroactive date**, and it is reported to **us** in accordance with Section V. Your obligations.

No **retention** will apply to amounts **we** pay under this subsection E, and such amounts will be in addition to, and not part of, the **coverage part limit**.

Supplemental payments

- F. **We** will pay reasonable expenses, including loss of wages and a \$250 travel per diem, incurred by **you** if **we** require **you** to attend depositions, arbitration proceedings, or trials in connection with the defense of a covered **claim**, but **we** will not pay more than an aggregate of \$10,000 per **claim** for such expenses, regardless of the number of **insureds**.

No **retention** will apply to amounts **we** pay under this subsection F, and such amounts will be in addition to, and not part of, the **coverage part limit**.

III. Who is an insured

For purposes of this Coverage Part, **you**, **your**, or **insured** means a **named insured**, **subsidiary**, **employee**, **independent contractor**, **joint venture**, or **acquired entity**, as defined below:

Named insured

means the individual, corporation, partnership, limited liability company, limited partnership, or other entity identified in Item 1 of the Declarations.

Subsidiary

means any entity of which the **named insured** has majority ownership before or as of the inception of the **policy period**.

Employee

means any past, present, or future:

1. person employed by the **named insured** or **subsidiary** as a permanent, part-time, seasonal, leased, or temporary employee, or any volunteer; or
2. partner, director, officer, or board member (or equivalent position) of the **named insured** or **subsidiary**,

but only while in the course of their performance of **professional services** on behalf of or at the direction of such **named insured** or **subsidiary**.

Independent contractor

means any person or entity contracted by the **named insured** or **subsidiary** to perform the same **professional services** as the **named insured** or **subsidiary**, but only while in the course of their performance of **professional services** on behalf of or at the direction of the **named insured** or **subsidiary**.

Joint venture

means a business enterprise in which the **named insured** or **subsidiary** participates pursuant to a written agreement, but only for:

1. **professional services** performed by the **named insured** or **subsidiary**; and
2. the same percentage of covered **damages** and **claim expenses** as the percentage of the **named insured's** or **subsidiary's** participation in the joint venture.

Acquired entity

means an entity in which the **named insured**, during the **policy period**:

1. acquires substantially all of the assets;
2. acquires the majority of its voting securities, as a result of which it becomes a **subsidiary**; or
3. merges and leaves the **named insured** as the surviving entity.

With respect to an **acquired entity** whose revenues exceed 10% of the annual revenues of the **named insured** at the time of its creation or acquisition, any coverage under this policy will expire

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

90 days after the effective date of its creation or acquisition unless, within such 90 day period:

1. the **named insured** provides **us** with written notice of such creation or acquisition;
2. the **named insured** provides **us** with information related to such creation or acquisition as **we** may reasonably require;
3. the **named insured** accepts any special terms, conditions, exclusions, or additional premium charge as **we** may reasonably require; and
4. **we** agree by written endorsement to provide such coverage.

This policy will apply to an **acquired entity** only with respect to **your professional services** performed after the acquisition, merger, or creation.

IV. Defense and settlement of claims

Defense

We have the right and duty to defend any covered **claim**, even if such **claim** is groundless, false, or fraudulent.

We have the right to select and appoint counsel to defend **you** against a covered **claim**. **You** may request in writing that **we** appoint defense counsel of **your** own choice, but whether to grant or deny such a request will be at **our** sole discretion.

Settlement

We have the right to solicit and negotiate settlement of any **claim** but will not enter into a settlement without **your** consent, which **you** agree not to withhold unreasonably. If **you** withhold consent to a settlement recommended by **us** and acceptable to the party who made the **claim**, the most **we** will pay for that **claim** is the sum of:

1. the amount of **our** recommended settlement;
2. **claim expenses** incurred up to the date of **our** recommendation;
3. 50% of all **claim expenses** incurred after **our** recommendation; and
4. 50% of all **damages** in excess of the settlement amount recommended by **us**.

V. Your obligations

Notifying us of claims and coverage enhancements

You must give written notice to **us** of any **claim**, or any other matter covered under Section II. Coverage enhancements, as soon as possible, but in any event, no later than 60 days after the end of the **policy period**.

All such notifications must be in writing and include a copy of the **claim** or other covered matter, and must be submitted to **us** via the designated email address or mailing address identified in Item 6 of the Declarations.

Notifying us of potential claims

You have the option of notifying **us** of **potential claims** that may lead to a covered **claim** against **you**.

In order to do so, **you** must give written notice to **us** as soon as possible and within the **policy period**, and the notice must, to the greatest extent possible, identify the details of the **potential claim**, including identifying the potential claimant(s), the likely basis for liability, the likely demand for relief, and any additional information about the **potential claim** **we** may reasonably request.

The benefit to **you** of notifying **us** of a **potential claim** is that if an actual **claim** arises from the same circumstances as the properly notified **potential claim**, then **we** will treat that **claim** as if it had first been made against **you** on the date **you** properly notified **us** of it as a **potential claim**, even if that **claim** is first made against **you** after the **policy period** has expired.

All **potential claim** notifications must be in writing and submitted to **us** via the designated email address or mailing address identified in Item 6 of the Declarations.

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

Retention

Our obligation to pay **damages** and **claim expenses** under this Coverage Part is in excess of the **retention**, which **you** must pay in connection with each covered **claim**.

However, if a **claim** is resolved without payment of any **damages** by **us**, **you** will receive a credit of 50% of the **retention** or \$25,000, whichever is less, and **we** will pay **claim expenses** in excess of this reduced amount.

VI. Exclusions – What is not covered

We will have no obligation to pay any sums under this Coverage Part, including any **damages** or **claim expenses**, for any **claim**:

Antitrust/deceptive trade practices

1. based upon or arising out of any actual or alleged:
 - a. false, deceptive, or unfair trade practices;
 - b. unfair competition, impairment of competition, restraint of trade, or antitrust violations;
 - c. violation of the Sherman Anti-Trust Act, the Clayton Act, the Robinson-Patman Act, all including as may be amended, or any similar federal, state, or local statutes, rules, or regulations in or outside the U.S.; or
 - d. deceptive or misleading advertising.

Bodily injury to an insured

2. based upon or arising out of any actual or alleged physical injury, sickness, disease, death, humiliation, mental injury, mental anguish, emotional distress, suffering, or shock sustained by an **insured** or any employee of an **insured**.

Breach of contract

3. based upon or arising out of any actual or alleged breach of any contract or agreement, or any liability of others that **you** assume under any contract or agreement; however, this exclusion will not apply to any liability **you** would have in the absence of the contract or agreement.

Breach of warranty/guarantee

4. based upon or arising out of any actual or alleged breach of express warranties or guarantees, except any warranty or guarantee to perform **your professional services** consistent with applicable industry standards or with reasonable skill or care. This exclusion will not apply to any liability **you** would have in the absence of the warranties or guarantees.

Construction services

5. based upon or arising out of any actual or alleged performance of or failure to perform any **construction** or **construction**-related services of any kind, including any management, supervision, observation, or monitoring services on projects where **you** are also performing any **construction**.

Criminal proceedings

6. brought in the form of a criminal proceeding, including but not limited to a criminal investigation, grand jury proceeding, or criminal action.

Employment related liability

7. based upon or arising out of any actual or alleged:
 - a. obligation under any workers' compensation, unemployment compensation, employers' liability, fair labor standards, labor relations, wage and hour, or disability benefit law, including any similar provisions of any federal, state, or local statutory or common law;
 - b. liability or breach of any duty or obligation owed by **you** as an employer or prospective employer; or
 - c. harassment, wrongful termination, retaliation, or discrimination, including but not limited to adverse or disparate impact.

However, part c of this exclusion will not apply to a covered **claim** for **third party discrimination**.

Excluded costs and damages

8. to the extent it seeks or includes:
 - a. fines, penalties, taxes, or sanctions against **you**;

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

	<ul style="list-style-type: none"> b. overhead costs, general business expenses, salaries, or wages incurred by you; c. the return, reduction, or restitution of fees, commissions, profits, or charges for goods provided or services rendered; d. liquidated or multiple damages; e. restitution, disgorgement of profits, any advantage to which you were not legally entitled, or unjust enrichment; or f. the cost of complying with injunctive relief.
Excluded statutory violations	<p>9. based upon or arising out of any actual or alleged violation of the following laws:</p> <ul style="list-style-type: none"> a. the Securities Act of 1933; b. the Securities Exchange Act of 1934; c. any state blue sky or securities laws; d. the Racketeer Influenced and Corrupt Organizations Act, 18 U.S.C. § 1961 <i>et seq.</i>; or e. the Employee Retirement Income Security Act of 1974, <p>all including as may be amended, or any similar provisions of any foreign, federal, state, or local statutory or common law and any rules or regulations promulgated under such laws.</p>
Failure to maintain insurance or bonds	10. based upon or arising out of any actual or alleged failure to procure or maintain adequate insurance or bonds.
Improper billing	11. based upon or arising out of any actual or alleged inaccurate, improper, or fraudulent billings or invoices, including but not limited to a qui tam action or any action under the False Claims Act, as may be amended, or any similar provisions of any foreign, federal, state, or local statutory or common law.
Insured vs. insured	12. brought by or on behalf of one insured or affiliate against another insured or affiliate .
Intellectual property	13. based upon or arising out of any actual or alleged infringement, use, or disclosure of any intellectual property, including but not limited to copyright, trademark, trade dress, patent, service mark, service name, title, or slogan, or any publicity rights violations, cyber squatting violations, moral rights violations, any act of passing-off, or any misappropriation of trade secret.
Intentional acts	<p>14. based upon or arising out of any actual or alleged fraud, dishonesty, criminal conduct, or any knowingly wrongful, malicious, or intentional acts or omissions, except that:</p> <ul style="list-style-type: none"> a. we will pay claim expenses until there is a final adjudication establishing such conduct; and b. this exclusion will not apply to otherwise covered intentional acts or omissions resulting in personal and advertising injury. <p>This exclusion will apply to the named insured or subsidiary only if the conduct was committed or allegedly committed by any:</p> <ul style="list-style-type: none"> a. partner, director, officer, or member of the board (or equivalent position) of the named insured or subsidiary; or b. employee of the named insured or subsidiary if any partner, director, officer, or member of the board (or equivalent position) of the named insured or subsidiary knew or had reason to know of such conduct by the employee. <p>This exclusion will apply separately to each insured and will not apply to any insured who did not commit, participate in, acquiesce to, or ratify such conduct committed by another insured.</p>
Manufacture of goods/products	15. based upon or arising out of any goods or products manufactured, sold, handled, or distributed by you .

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

Misappropriation of funds	16. based upon or arising out of the actual or alleged theft, misappropriation, commingling, or conversion of any funds, monies, assets, or property.
Pollution/environmental	17. based upon or arising out of any actual, alleged, or threatened discharge, dispersal, release or escape of pollutants , including any direction or request to test for, monitor, clean up, remove, contain, treat, detoxify, or neutralize pollutants , or any generation, transportation, storage, or disposal of any pollutants , or the presence of pollutants on any property or facilities owned or rented by you ; however, this exclusion will not apply to a covered pollution liability .
Prior acts/notice/knowledge	<p>18. based upon or arising out of any actual or alleged breach of duty or negligent act, error, or omission that:</p> <ul style="list-style-type: none"> a. was committed prior to the retroactive date; b. was the subject of any notice given under any other policy of which this policy is a renewal or replacement; c. was the subject of, or is related to, any prior or pending litigation, claim, written demand, arbitration, administrative or regulatory proceeding or investigation, or licensing proceeding that was filed or commenced against you and of which you had notice prior to the policy period; or d. you had knowledge of prior to the policy period, and there was a reasonable basis to believe that the act, error, or omission could result in a claim. <p>However, if this policy is a renewal or replacement of a previous policy we issued that provided materially identical coverage, and is part of an unbroken chain of successive policies issued by us, the policy period referred to in paragraphs c and d, above, will be the policy period of the first such policy we issued.</p>
Privacy	<p>19. based upon or arising out of any actual or alleged:</p> <ul style="list-style-type: none"> a. unauthorized acquisition, access, use, or disclosure of, improper collection or retention of, or failure to protect any non-public personally identifiable information or confidential corporate information that is in your care, custody, or control; or b. violation of any privacy law or consumer data protection law protecting against the use, collection, or disclosure of any information about a person or any confidential corporate information.
Subsidiary outside control of named insured	<p>20. a. based upon or arising out of professional services performed by or on behalf of a past or present subsidiary while the named insured does not have majority ownership or management control of it; or</p> <p>b. made against a subsidiary or anyone acting on its behalf while the named insured does not have majority ownership or management control of it.</p>
Unsolicited telemarketing	21. based upon or arising out of any actual or alleged violation of any federal, state, local, or foreign statutes, ordinances, or regulations relating to unsolicited telemarketing, solicitations, emails, faxes, text messages, or any other communications of any type or nature, including but not limited to the Telephone Consumer Protection Act, CAN-SPAM Act, or any "anti-spam" or "do-not-call" statutes, ordinances, or regulations.

VII. Definitions

The following definitions apply to this Coverage Part. Additional definitions are contained in Section III. Who is an insured, and in the General Terms and Conditions, Section VI. Definitions applicable to all Coverage Parts.

Affiliate

means any person or entity related to any **insured** through common ownership, control, or management as follows:

1. any person or entity:
 - a. which wholly or partly owns, operates, controls, or manages the **named insured**;

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

- b. which was operated, controlled, or managed by the **named insured**; or
 - c. in which any **insured** has an ownership interest of 25% or more,
at anytime during or after the performance of the **professional services** giving rise to the **claim**; or
2. any entity for which any **insured** is an officer or director at the time the **claim** is made.

Affiliate does not include a **subsidiary**.

Bodily injury

means physical injury, sickness, disease, or death sustained by a person, which directly results from **your** performance of **professional services**, and any resulting humiliation, mental injury, mental anguish, emotional distress, suffering, or shock.

Claim

means any written assertion of liability or any written demand for financial compensation or non-monetary relief.

Claim expenses

means the following sums incurred in excess of the **retention** and with **our** prior written consent:

- 1. all reasonable and necessary fees, costs, and expenses (including the fees of attorneys and experts) incurred in the investigation, defense, or appeal of a **claim**; and
- 2. premiums on appeal bonds, attachment bonds, or similar bond, but **we** will have no obligation to apply for or furnish any such bonds.

Construction

means assembly, erection, excavation, fabrication, installation, demolition, or other similar or related work or services on any building, structure, or facility, including on any element or component of such.

Damages

means the following amounts incurred in excess of the **retention**:

- 1. a monetary judgment or monetary award that **you** are legally obligated to pay (including pre- or post-judgment interest and awards of claimant's attorney fees); or
- 2. a monetary settlement negotiated by **us** with **your** consent.

Damages includes punitive damages to the full extent they are insurable under the law of any applicable jurisdiction that most favors coverage.

Personal and advertising injury

means injury, other than **bodily injury** or **property damage**, arising out of one or more of the following offenses:

- 1. false arrest, detention, or imprisonment;
- 2. malicious prosecution;
- 3. wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of premises;
- 4. slander, libel, or defamation, or disparagement of goods, products, or services, whether in connection with **your professional services** or **your** advertising of it; or
- 5. oral or written publication of material, whether in connection with **your professional services** or **your** advertising of it, that violates a person's right of privacy.

Pollutants

means any solid, liquid, gaseous, biological, radiological, or thermal irritant or contaminant, including smoke, vapor, dust, asbestos, silica, nanoparticles, fibers, soot, fumes, acids, alkalis, chemicals, nuclear materials, germs, and waste. Waste includes, but is not limited to, materials to be recycled, reconditioned, or reclaimed.

Pollution liability

means a **claim** against **you** arising out of any actual, alleged, or threatened discharge, dispersal, release, or escape of **pollutants** directly resulting from **your** performance of **professional services** and includes the reasonable and necessary fees, costs, and expenses **you** incur with **our** prior consent to test for, monitor, clean up, remove, contain, treat, detoxify, or neutralize **pollutants**.

Potential claim

means any acts, errors, or omissions of an **insured** or other circumstances reasonably likely to lead to a **claim** covered under this policy.

Architects, Engineers, and Construction Managers Professional Liability Coverage Part

Professional services	means only those services identified as Covered Professional Services under the Architects, Engineers, and Construction Managers Professional Liability Coverage Part section of the Declarations.
Property damage	means physical damage to or destruction of any tangible property which directly results from your performance of professional services , and any resulting loss of use of that property.
Retention	means the amount stated as such under the Architects, Engineers, and Construction Managers Professional Liability Coverage Part section of the Declarations.
Third party discrimination	means any non-physical harassment of or unlawful discrimination against a person or entity other than an insured or an employee of an insured , including any resulting violation of civil rights, but only if such harassment or discrimination directly results from your performance of professional services .
You, your, or insured	means a named insured, subsidiary, employee, independent contractor, joint venture, or acquired entity , as defined in Section III. Who is an insured.



Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022
(646) 452-2353

Endorsement 1

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6015.9 Lloyd's Syndicate (3624) Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

The Underwriters referred to in the Declarations are identified as follows:

Proportion Percent: 100%
Syndicate: 3624
Contract #: B1234HISINC2021
Binder Registration Date: September 14, 2020
Authorization Date: December 22, 2005

Endorsement effective:	03/02/2021	Certificate No.:	ANE1667300.21
Endorsement No:	1	Processed Date:	12/29/2020
Hiscox Inc.			

Authorized Representative
Kevin Kerridge

Endorsement 2

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6017.3 Nuclear Incident Exclusion Clause-Liability-Direct (Broad) Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

We will have no obligation to pay any sums under this policy, including any **damages, claim expenses**, or other **covered amounts**, for any **claim, event, or occurrence**:

- A. Under any liability coverage, for injury, sickness, disease, death, or destruction:
1. for which **you** are also insured under a nuclear energy liability policy issued by the Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters, or Nuclear Insurance Association of Canada, or would be insured under any such policy but for exhaustion of its limit of liability; or
 2. resulting from the **hazardous properties of nuclear material** and with respect to which:
 - a. any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, as amended; or
 - b. **you** are, or had this policy not been issued would be, entitled to indemnity from the United States of America, or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
- B. Under any Medical Payments coverage, or under any Supplementary Payments provision relating to immediate medical or surgical relief, for expenses incurred with respect to bodily injury, sickness, disease, or death resulting from the **hazardous properties of nuclear material** and arising out of the operation of a **nuclear facility** by any person or organization.
- C. Under any liability coverage, for injury, sickness, disease, death, or destruction resulting from the **hazardous properties of nuclear material**, if:
1. the **nuclear material** is at any **nuclear facility** owned or operated by **you** or on **your** behalf, or has been discharged or dispersed from such a facility;
 2. the **nuclear material** is contained in **spent fuel or waste** which is or was at any time possessed, handled, used, processed, stored, transported, or disposed of by **you** or on **your** behalf; or
 3. the injury, sickness, disease, death, or destruction arises out of the furnishing by **you** of services, materials, parts, or equipment in connection with the planning, construction, maintenance, operation, or use of any **nuclear facility**, but if such facility is located within the United States of America, its territories or possessions, or Canada, this exclusion (3) applies only to injury to or destruction of property at such **nuclear facility**.

As used in this endorsement:

Hazardous properties includes radioactive, toxic, or explosive properties;

Nuclear material means **source material, special nuclear material, or byproduct material**;

Nuclear reactor means any apparatus designed or used to sustain nuclear fission in a self-supporting chain reaction or to contain a critical mass of fissionable material;

Source material, special nuclear material, and byproduct material have the meanings given them in the Atomic Energy Act of 1954, as amended;

Spent fuel means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a **nuclear reactor**;

Waste means any waste material:

Endorsement 2

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

1. containing **byproduct material**; and
2. resulting from the operation by any person or organization of any **nuclear facility** included in paragraph 1 or 2 of the definition of **nuclear facility**;

Nuclear facility means:

1. any any **nuclear reactor**;
2. any any equipment or device designed or used for:
 - a. separating the isotopes of uranium or plutonium;
 - b. processing or utilizing **spent fuel**; or
 - c. handling, processing, or packaging **waste**;
3. any equipment or device used for the processing, fabricating, or alloying of **special nuclear material**, if at any time the total amount of such material in **your** custody at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235; or
4. any structure, basin, excavation, premises, or place prepared or used for the storage or disposal of **waste**.

Nuclear facility includes the site on which any of the foregoing is located, all operations conducted on such site, and all premises used for such operations;

With respect to injury to or destruction of property, "injury" or "destruction" includes all forms of radioactive contamination of property.

Endorsement effective:	03/02/2021	Certificate No.:	ANE1667300.21
Endorsement No:	2	Processed Date:	12/29/2020

Hiscox Inc.



Authorized Representative
Kevin Kerridge



Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022
(646) 452-2353

Endorsement 3

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6018.2 Applicable Law Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

This policy is subject to the applicable state law to be determined by the court of competent jurisdiction as determined by the provisions of the Service of Suit Endorsement to this policy.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 3

Processed Date: 12/29/2020

Hiscox Inc.

Authorized Representative
Kevin Kerridge

Endorsement 4

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6019.1 Service of Suit Endorsement (California)

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

In the event **we** fail to pay any amount claimed to be due under this policy, **we** agree to submit to the jurisdiction of a Court of competent jurisdiction within the United States at **your** request. Nothing in this clause is intended to constitute a waiver of **our** right to commence an action in any Court of competent jurisdiction in the United States, to remove an action to a United States District Court, or to seek a transfer of a case to another Court as permitted by the laws of the United States or of any state in the United States.

Service of process in any suit against **us** may be made on:

Compliance Department
Hiscox Insurance Agency
101 California Street, Suite 4350
San Francisco, CA 94111

In any suit instituted against **us**, **we** agree to abide by the final decision of such Court, or in the event of an appeal, of any Appellate Court.

The above named are authorized to accept service of process on **our** behalf in any such suit and will enter a general appearance on **our** behalf in the event such suit is instituted.

Further, pursuant to any statute of any state, territory, or district of the United States which makes provision therefore, **we** designate the Superintendent, Commissioner, or Director of Insurance, or other officer specified for that purpose in the statute, as **our** agent for service of process in any action, suit, or proceeding instituted by **you** or on **your** behalf, or any other beneficiary under this policy, and designate the above named as the person to whom such agent is authorized to mail process.

Endorsement effective:	03/02/2021	Certificate No.:	ANE1667300.21
Endorsement No:	4	Processed Date:	12/29/2020

Hiscox Inc.



Authorized Representative
Kevin Kerridge

Endorsement 5

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6020.3 War and Civil War Exclusion Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed the General Terms and Conditions are amended as follows:

This policy does not apply to and **we** will have no obligation to pay any sums under this policy, including any **damages, claim expenses**, or other **covered amounts**, for any **claim, event, or occurrence** directly or indirectly occasioned by, happening through, or in consequence of:

1. war, invasion, acts of foreign enemies, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military, or usurped power; or
2. confiscation, nationalization, requisition, destruction of, or damage to property by or under the order of any government, public, or local authority.

However, this exclusion will not apply to coverage under the General Liability Coverage Part (if purchased) for damage by fire to premises while rented to **you** or temporarily occupied by **you** with the owner's permission. Any payments **we** make for **property damage** to such premises will be subject to the Damage to Premises Limit.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 5

Processed Date: 12/29/2020

Hiscox Inc.



Authorized Representative
Kevin Kerridge

Endorsement 6

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6035.1 Conditional Return of Premium Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

At the end of **your** next fiscal year, if **your** actual gross annual revenue is less than 75% of the projected gross annual revenue on which **we** based the premium charged for this policy, **we** will retroactively reduce the premium for this policy by 5% and return 5% of the premium **you** paid.

In order to obtain the 5% reduction, **you** must provide formal written proof of your gross annual revenue in a form satisfactory to **us**, such as a corporate income tax return, form 990, CPA audited/reviewed financial statements, or other documentation **we** may approve. The 5% reduction will be applied (and any return premium paid) only after **we** receive such documentation, or after the end of the **policy period**, whichever is later.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 6

Processed Date: 12/29/2020

Hiscox Inc.



Authorized Representative
Kevin Kerridge

Endorsement 7

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6606.4 Construction Managers Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed the Architects, Engineers, and Construction Managers Professional Liability Coverage Part is amended as follows:

The following exclusions are added to Section VI. Exclusions – What is not covered:

- CM-1. based upon or arising out of **your** making of any payment:
 - a. without prior receipt of an architect's certificate, where such certificate is required as a condition of payment; or
 - b. without prior receipt of appropriate waivers or releases of lien from the general contractor, or from subcontractors, where work or materials have been supplied by subcontractors.
- CM-2. based upon or arising out of faulty workmanship, breach of contract, or defective materials provided by or on behalf of **your** contractors or subcontractors.
- CM-3. based upon or arising out of any estimates of probable construction costs, including but not limited to any cost estimates being exceeded.
- CM-4. based upon or arising out of **your** performance of or failure to perform services as an architect, engineer, or general contractor.
- CM-5. based upon or arising out of **your** inability or failure to pay, collect, or safeguard funds.
- CM-6. based upon or arising out of the direct hiring of trade contractors by **you**.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 7

Processed Date: 12/29/2020

Hiscox Inc.

A handwritten signature in blue ink, appearing to read "Kevin Kerridge".

Authorized Representative
Kevin Kerridge



Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022
(646) 452-2353

Endorsement 8

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6026.1 Amend Retroactive Date (Specific) Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

For Fasting Coyote Inc. dba Pacific Urbanism, the Retroactive Date stated in the Declarations is amended to 03/07/2019.

Endorsement effective:	03/02/2021	Certificate No.:	ANE1667300.21
Endorsement No:	8	Processed Date:	12/29/2020
Hiscox Inc.			

Authorized Representative
Kevin Kerridge

Endorsement 9

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6159.2 Predecessor Firm Endorsement

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed the Architects, Engineers, and Construction Managers Professional Liability Claims-Made and Reported Coverage Part is/are amended as follows:

I. The following is added to the end of Section II. Coverage enhancements:

Professional services by PF-A.
predecessor firm

We will pay **damages** and **claim expenses** up to the Each Claim Limit identified in the Declarations for any **claim** against **you** alleging a negligent act, error, or omission in **your predecessor firm's** performance of **professional services**, provided the **claim** is first made against **you** during the **policy period** and is reported to **us** in accordance with Section V. Your obligations.

You must pay the **retention** stated in the Declarations in connection with any payment **we** make under this subsection PF-A, and any payments **we** make will be a part of, and not in addition to, the **coverage part limit**.

II. The following definition is added to the end of Section VII. Definitions:

**Predecessor
firm**

means Dario Rodman-Alvarez dba Dario Alvarez Consulting Services, but only for **professional services** performed on or after the **retroactive date** and before 03/07/2019.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 9

Processed Date: 12/29/2020

Hiscox Inc.



Authorized Representative
Kevin Kerridge

Endorsement 10

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

E6361.1 Cyber Incidents Clarification Endorsement (PL)

In consideration of the premium charged, and on the understanding this endorsement leaves all other terms, conditions, and exclusions unchanged, it is agreed:

I. The professional liability Coverage Part is amended as follows:

In Section VI. Exclusions – What is not covered, the “Privacy” exclusion is deleted in its entirety and replaced with the following:

- Privacy and cyber incidents PR-1. based upon or arising out of any actual or alleged:
- a. unauthorized acquisition, access, use, or disclosure of, improper collection or retention of, or failure to protect any non-public personally identifiable information or confidential corporate information that is in **your** care, custody, or control;
 - b. violation of any privacy law or consumer data protection law protecting against the use, collection, or disclosure of any information about a person or any confidential corporate information;
 - c. total or partial damage to, loss, corruption, deterioration, destruction, or alteration of, or the inability or impaired ability to access or manipulate any electronic data, software, electronic databases, computers, or any part of a computer system or network;
 - d. denial of service or delay, disruption, impairment, failure, or outage of any part of a computer system or network;
 - e. unauthorized or unlawful access to any electronic data or any part of a computer system or network, including through the transmission of any malicious code, such as a computer virus, worm, logic bomb, malware, spyware, Trojan horse, or other fraudulent or unauthorized computer code; or
 - f. threat, hoax, or demand relating to subparts a through e above.

II. The General Liability Coverage Part (if purchased) is amended as follows:

In Section VI. Exclusions – What is not covered, D. Exclusions applicable to the entire general liability coverage part, the “Privacy” exclusion is deleted in its entirety and replaced with the following:

We will have no obligation to pay any sums under this Coverage Part for medical expenses, or for any claim, including any damages or claim expenses, for bodily injury, property damage, or personal and advertising injury:

- Privacy and cyber incidents PR-1. based upon or arising out of any actual or alleged:
- a. unauthorized acquisition, access, use, or disclosure of, improper collection or retention of, or failure to protect any non-public personally identifiable information or confidential corporate information that is in **your** care, custody, or control;

Endorsement 10

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

- b. violation of any privacy law or consumer data protection law protecting against the use, collection, or disclosure of any information about a person or any confidential corporate information;
- c. denial of service or delay, disruption, impairment, failure, or outage of any part of a computer system or network;
- d. unauthorized or unlawful access to any electronic data or any part of a computer system or network, including through the transmission of any malicious code, such as a computer virus, worm, logic bomb, malware, spyware, Trojan horse, or other fraudulent or unauthorized computer code; or
- e. threat, hoax, or demand relating to subparts a through d above.

This exclusion will apply even if the **claim** against **you** alleges negligence or other wrongdoing in the:

- i. failure to prevent any cyber incident listed in subparts a through d above or any resulting **property damage, bodily injury, or personal and advertising injury**; or
- ii. failure to report any cyber incident listed in subparts a through d above to the authorities.

III. The Technology Professional Liability Coverage Part (if purchased) is amended as follows:

In Section VII. Definitions, the definitions of "**Breach of contract**", "**Indemnity**", and "**Negligence**" are deleted in their entirety and replaced with the following:

Breach of contract

means the unintentional breach of a written contract with **your client**, including an unintentional breach resulting from a cyber incident **you** sustain that prevents or impedes **your** performance of **technology services**.

Indemnity

means an indemnification obligation owed by **you** to a **client** under a written contract.

However, **indemnity** does not include any obligation owed by **you** under a written contract, including a client services agreement, regarding an actual or suspected data breach of personally identifiable information or confidential corporate information that is held or transmitted in any form.

Negligence

means any:

- 1. negligent act, error, or omission;
- 2. breach of any duty to use reasonable care; or
- 3. negligent misrepresentation,



Administered by Hiscox Inc. d/b/a Hiscox Insurance Agency in CA License No 0F09668
520 Madison Avenue 32nd Floor, New York, NY 10022
(646) 452-2353

Endorsement 10

NAMED INSURED: Fasting Coyote Inc. dba Pacific Urbanism

including any of the above that results:

- a. from a cyber incident **you** sustain which prevents or impedes **your** performance of **technology services**; or
- b. in a cyber incident impacting **your client**; however, this subsection b will not include an actual or suspected data breach sustained by **your client**.

IV. In the event that there is a conflict between this Endorsement and any other term or condition in another endorsement attached to and forming a part of this policy with respect to coverage for any **claim** or other covered matter, **we** will apply the terms or conditions that are more favorable to **you** for such **claim** or other covered matter.

Endorsement effective: 03/02/2021

Certificate No.: ANE1667300.21

Endorsement No: 10

Processed Date: 12/29/2020

Hiscox Inc.

Authorized Representative
Kevin Kerridge

IMPORTANT NOTICE:

- 1. The insurance policy that you have purchased is being issued by an insurer that is not licensed by the State of California. These companies are called “nonadmitted” or “surplus line” insurers.**
- 2. The insurer is not subject to the financial solvency regulation and enforcement that apply to California licensed insurers.**
- 3. The insurer does not participate in any of the insurance guarantee funds created by California law. Therefore, these funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised.**
- 4. The insurer should be licensed either as a foreign insurer in another state in the United States or as a non-United States (alien) insurer. You should ask questions of your insurance agent, broker, or “surplus line” broker or contact the California Department of Insurance at the toll-free number 1-800-927-4357 or internet website www.insurance.ca.gov. Ask whether or not the insurer is licensed as a foreign or non-United States (alien) insurer and for additional information about the insurer. You may also visit the NAIC’s internet website at www.naic.org. The NAIC—the National Association of Insurance Commissioners—is the regulatory support organization created and governed by the chief insurance regulators in the United States.**
- 5. Foreign insurers should be licensed by a state in the United States and you may contact that state’s department of insurance to obtain more information about that insurer. You can find a link to each state from this NAIC internet website: https://naic.org/state_web_map.htm.**
- 6. For non-United States (alien) insurers, the insurer should be licensed by a country outside of the United States and should be on**

the NAIC's International Insurers Department (IID) listing of approved nonadmitted non-United States insurers. Ask your agent, broker, or "surplus line" broker to obtain more information about that insurer.

7. California maintains a "List of Approved Surplus Line Insurers (LASLI)." Ask your agent or broker if the insurer is on that list, or view that list at the internet website of the California Department of Insurance: www.insurance.ca.gov/01-consumers/120-company/07-lasli/lasli.cfm.

8. If you, as the applicant, required that the insurance policy you have purchased be effective immediately, either because existing coverage was going to lapse within two business days or because you were required to have coverage within two business days, and you did not receive this disclosure form and a request for your signature until after coverage became effective, you have the right to cancel this policy within five days of receiving this disclosure. If you cancel coverage, the premium will be prorated and any broker's fee charged for this insurance will be returned to you.



ECONOMIC AND TRADE SANCTIONS POLICYHOLDER NOTICE

Hiscox is committed to complying with the U.S. Department of Treasury Office of Foreign Assets Control (OFAC) requirements. OFAC administers and enforces economic sanctions policy based on Presidential declarations of national emergency. OFAC has identified and listed numerous foreign agents, front organizations, terrorists, and narcotics traffickers as Specially Designated Nationals (SDN's) and Blocked Persons. OFAC has also identified Sanctioned Countries. A list of Specially Designated Nationals, Blocked Persons and Sanctioned Countries may be found on the United States Treasury's web site <http://www.treas.gov/offices/enforcement/ofac/>.

Economic sanctions prohibit all United States citizens (including corporations and other entities) and permanent resident aliens from engaging in transactions with Specially Designated Nationals, Blocked Persons and Sanctioned Countries. Hiscox may not accept premium from or issue a policy to insure property of or make a claim payment to a Specially Designated National or Blocked Person. Hiscox may not engage in business transactions with a Sanctioned Country.

A Specially Designated National or Blocked Person is any person who is determined as such by the Secretary of Treasury.

A Sanctioned Country is any country that is the subject of trade or economic embargoes imposed by the laws or regulations of the United States.

In accordance with laws and regulations of the United States concerning economic and trade embargoes, this policy may be rendered void from its inception with respect to any term or condition of this policy that violates any laws or regulations of the United States concerning economic and trade embargoes including, but not limited to the following:

- (1) Any insured under this Policy, or any person or entity claiming the benefits of such insured, who is or becomes a Specially Designated National or Blocked Person or who is otherwise subject to US economic trade sanctions;
- (2) Any claim or suit that is brought in a Sanctioned Country or by a Sanctioned Country government, where any action in connection with such claim or suit is prohibited by US economic or trade sanctions;
- (3) Any claim or suit that is brought by any Specially Designated National or Blocked Person or any person or entity who is otherwise subject to US economic or trade sanctions;
- (4) Property that is located in a Sanctioned Country or that is owned by, rented to or in the care, custody or control of a Sanctioned Country government, where any activities related to such property are prohibited by US economic or trade sanctions; or
- (5) Property that is owned by, rented to or in the care, custody or control of a Specially Designated National or Blocked Person, or any person or entity who is otherwise subject to US economic or trade sanctions.

Please read your Policy carefully and discuss with your broker/agent or insurance professional. You may also visit the US Treasury's website at <http://www.treas.gov/offices/enforcement/ofac/>.

Hiscox is committed to complying with trade and economic sanctions. To that end:

- I. No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, Australia, United Kingdom or United States of America.
- II. The U.S. Department of Treasury Office of Foreign Assets Control (OFAC) administers and enforces economic sanctions policy based on Presidential declarations of national emergency. OFAC has identified and listed numerous foreign agents, front organizations, terrorists, and narcotics traffickers as Specially Designated Nationals (SDN's) and Blocked Persons. OFAC has also identified Sanctioned Countries. A list of Specially Designated Nationals, Blocked Persons and Sanctioned Countries may be found on the United States Treasury's web site <http://www.treas.gov/offices/enforcement/ofac/>.

Economic sanctions prohibit all United States citizens (including corporations and other entities) and permanent resident aliens from engaging in transactions with Specially Designated Nationals, Blocked Persons and Sanctioned Countries. Hiscox may not accept premium from or issue a policy to insure property of or make a claim payment to a Specially Designated National or Blocked Person. Hiscox may not engage in business transactions with a Sanctioned Country.

A Specially Designated National or Blocked Person is any person who is determined as such by the Secretary of Treasury.

A Sanctioned Country is any country that is the subject of trade or economic embargoes imposed by the laws or regulations of the United States.

In accordance with laws and regulations of the United States concerning economic and trade embargoes, this policy may be rendered void from its inception with respect to any term or condition of this policy that violates any laws or regulations of the United States concerning economic and trade embargoes including, but not limited to the following:

- (1) Any insured under this Policy, or any person or entity claiming the benefits of such insured, who is or becomes a Specially Designated National or Blocked Person or who is otherwise subject to US economic trade sanctions;
- (2) Any claim or suit that is brought in a Sanctioned Country or by a Sanctioned Country government, where any action in connection with such claim or suit is prohibited by US economic or trade sanctions;
- (3) Any claim or suit that is brought by any Specially Designated National or Blocked Person or any person or entity who is otherwise subject to US economic or trade sanctions;
- (4) Property that is located in a Sanctioned Country or that is owned by, rented to or in the care, custody or control of a Sanctioned Country government, where any activities related to such property are prohibited by US economic or trade sanctions; or
- (5) Property that is owned by, rented to or in the care, custody or control of a Specially Designated National or Blocked Person, or any person or entity who is otherwise subject to US economic or trade sanctions.



ECONOMIC AND TRADE SANCTIONS POLICYHOLDER NOTICE

Please read your Policy carefully and discuss with your broker/agent or insurance professional. You may also visit the US Treasury's website at <http://www.treas.gov/offices/enforcement/ofac/>.



Policyholder Notice Complaints or Comments

Any complaints or comments may be sent:

- By Mail to:

Legal Department
Hiscox USA
520 Madison Avenue, 32nd Floor
New York, NY 10022; or

- By Email to:

us_helpdesk_rfl@hiscox.com

Hiscox Inc.
520 Madison Avenue – 32nd Floor
New York, NY 10022

CYBER NOTICE

Pursuant to Lloyd’s Market Bulletin Y5258, Hiscox Inc. (“we/us/our”) and all Lloyd’s syndicates will clarify whether coverage is provided for losses caused by a cyber event. Starting January 1, 2021, Hiscox Inc. policies incepting on or after January 1, 2021 will include specific language affirmatively stating whether we are covering or excluding losses caused by cyber events.

Your **Hiscox Pro™** policy will include the following endorsement(s), depending on the type of coverage(s) you have purchased:

Allied Healthcare Professional Liability (Including all tailor-made products)	<p><u>Cyber Clarification Endorsement</u> affirmatively stating our intent to cover specified covered losses arising from described cyber events or incidents.</p> <p>This endorsement clarifies and does not alter the intended scope of coverage offered under your policy.</p>
A&E Professional Liability (Including all tailor-made products)	<p><u>Cyber Exclusion Endorsement</u> explaining the intent to exclude losses arising from described cyber events or incidents.</p> <p>This endorsement potentially reduces the scope of coverage offered under the policy.</p>
Miscellaneous Professional Liability (Including all tailor-made products)	<p><u>Cyber Exclusion Endorsement</u> explaining the intent to exclude losses arising from described cyber events or incidents.</p> <p>This endorsement potentially reduces the scope of coverage offered under the policy.</p>
Technology Professional Liability	<p><u>Cyber Clarification Endorsement</u> affirmatively stating our intent to cover specified covered losses arising from described cyber events or incidents.</p> <p>This endorsement clarifies and does not alter the intended scope of coverage offered under your policy.</p>
Creative Industries Media and Professional Liability	<p><u>Cyber Exclusion Endorsement</u> explaining the intent to exclude losses arising from described cyber events or incidents.</p> <p>This endorsement clarifies and does not alter the intended scope of coverage offered under your policy.</p>



Hiscox Inc.
520 Madison Avenue – 32nd Floor
New York, NY 10022

General Liability	<u>Cyber Exclusion Endorsement</u> explaining the intent to exclude losses arising from described cyber events or incidents. This endorsement potentially reduces the scope of coverage offered under the policy.
Business Personal Property	The Insured will have already received a separate notice explaining how cyber events or incidents are being addressed under this coverage.
Crime	The Insured will have already received a separate notice explaining how cyber events or incidents are being addressed under this coverage.
Any limitations contained in the above referenced endorsement(s) will not apply to otherwise covered losses explicitly described in the endorsement(s), or to loss covered in a Network Security and Privacy, Drone Liability, or other similar endorsement you have purchased, if applicable.	

If you have additional questions or concerns about the endorsement or this Notice, please contact your authorized insurance agent or broker. Thank you for your business and we look forward to continue providing you with quality service.



CONFORMITY NOTICE

(This does not amend, extend, or alter the coverages or any other provisions contained in your policy)

Whenever the symbol "\$" is used in this policy, it shall mean United States Dollars (USD).

IMPORTANT NOTICE:

- 1. The insurance policy that you have purchased is being issued by an insurer that is not licensed by the State of California. These companies are called "nonadmitted" or "surplus line" insurers.**
- 2. The insurer is not subject to the financial solvency regulation and enforcement that apply to California licensed insurers.**
- 3. The insurer does not participate in any of the insurance guarantee funds created by California law. Therefore, these funds will not pay your claims or protect your assets if the insurer becomes insolvent and is unable to make payments as promised.**
- 4. The insurer should be licensed either as a foreign insurer in another state in the United States or as a non-United States (alien) insurer. You should ask questions of your insurance agent, broker, or "surplus line" broker or contact the California Department of Insurance at the toll-free number 1-800-927-4357 or internet website www.insurance.ca.gov. Ask whether or not the insurer is licensed as a foreign or non-United States (alien) insurer and for additional information about the insurer. You may also visit the NAIC's internet website at www.naic.org. The NAIC-the National Association of Insurance Commissioners-is the regulatory support organization created and governed by the chief insurance regulators in the United States.**
- 5. Foreign insurers should be licensed by a state in the United States and you may contact that state's department of insurance to obtain more information about that insurer. You can find a link to each state from this NAIC internet website: https://naic.org/state_web_map.htm.**
- 6. For non-United States (alien) insurers, the insurer should be licensed by a country outside of the United States and should be on**

the NAIC's International Insurers Department (IID) listing of approved nonadmitted non-United States insurers. Ask your agent, broker, or "surplus line" broker to obtain more information about that insurer.

7. California maintains a "List of Approved Surplus Line Insurers (LASLI)." Ask your agent or broker if the insurer is on that list, or view that list at the internet website of the California Department of Insurance: www.insurance.ca.gov/01-consumers/120-company/07-lasli/lasli.cfm.

8. If you, as the applicant, required that the insurance policy you have purchased be effective immediately, either because existing coverage was going to lapse within two business days or because you were required to have coverage within two business days, and you did not receive this disclosure form and a request for your signature until after coverage became effective, you have the right to cancel this policy within five days of receiving this disclosure. If you cancel coverage, the premium will be prorated and any broker's fee charged for this insurance will be returned to you.

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

June 14, 21

Attn: Frank Cardenas
Los Angeles City Hall
200 N Spring St, Room 275
Los Angeles, CA 90012

Re: Records Retention Practices

Pacific Urbanism uploads and maintains all files prepared, received or sent into Dropbox, a cloud based online data storage system. All files from PDF's, GIS mapping files, Excel CSV and any other files are continuously uploaded into Dropbox and are readily accessible for distribution as needed. Only and all members of the Project Team have access to the file system. All active and closed files are saved into Dropbox and are never deleted unless file storage quantities arise. If file storage ever becomes an issue, each project folder is saved onto a hard drive and stored at Pacific Urbanism's office location permanently.

Sample file storage documentation will gladly be provided upon request upon selection for interview.

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

June 14, 21

Attn: Frank Cardenas
Los Angeles City Hall
200 N Spring St, Room 275
Los Angeles, CA 90012

Re: Recycled Paper

All documents submitted as part of this proposal have been printed on Boise Aspen 30 Multi-Use Recycled Copy Paper, made with 30% post-consumer fiber.

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

June 14, 21

Attn: Frank Cardenas
Los Angeles City Hall
200 N Spring St, Room 275
Los Angeles, CA 90012

Re: Statement Regarding Additional Data

There is no other data we wish to present.

ATTACHMENT B - CONFLICT AND IMPARTIALITY STATEMENT

Complete, sign (original signature) and return in the Requirements Portion of the Final Bid Submission.

The Conflict and Impartiality Statement is required to be completed by the Proposer and each participant who will exercise a major administrative role or major policy or consultant role, as identified by the Proposer, including subcontractors, to the agreement.

Full disclosure is required; however, disclosure of a potential conflict is not an automatic disqualification. Please explain any potential conflict in the space provided below.

Within the 10 years immediately preceding the submittal of the proposal, all of the parties listed above:

- Have not been appointed to, elected to, or have been a candidate for office within the City of Los Angeles;
- Have not served as an officer, employee, or paid consultant of a political party or of the campaign committee of a candidate for office within the City of Los Angeles;
- Have not been a registered federal, state, or local lobbyist;
- Have not served as a paid staff of a candidate for office within the City of Los Angeles;
- Have not contributed five hundred dollars (\$500) or more to any member of the Los Angeles City Council;
- Have not been staff or consultants to, persons under a contract with, nor are persons with an immediate family relationship with a member of the Los Angeles City Council;
- Have no personal, family, financial relationships, commitments, or aspirations that a reasonable person would consider likely to improperly influence someone making a redistricting decision;

Explain any potential conflict below (additional pages may be attached if needed):

— PACIFIC URBANISM PROVIDES ENTITLEMENTS AND PERMITTING —
— SERVICES FOR CLIENTS IN THE LOS ANGELES AREA. —

— DARIO RODMAN-ALVAREZ DONATED \$1,000 TO THE GUBERNATORIAL —
— CAMPAIGN FOR ANTONIO VILLARAIGOSA —
—
—

ATTACHMENT B - CONFLICT AND IMPARTIALITY STATEMENT (cont.)

In addition, please respond to the following (additional pages may be attached if needed):

1. Does your firm represent any interests that may constitute a conflict of interest in your contracting with the City, the Commission, the Port of Los Angeles, Los Angeles World Airports, the Los Angeles Department of Water and Power, or any other City agency or affiliated entity. If YES, please provide the details of the such interests below.

YES _____ NO ☒ _____

2. Is your firm are currently a party to an active claim or lawsuit against the City of Los Angeles or any of its related public or proprietary agencies. If YES, please provide the details of such claim or lawsuit below.

YES _____ NO ☒ _____

3. Has the person or entity submitting this proposal, during the past 10 years, performed services of any kind, whether for a fee or on a voluntary basis, for any political party, interest group or other entity that has supported, donated money to, raised money for candidate for public office, taken a position on a ballot initiative or sought to influence the redistricting process? If YES, please provide the details of the activity below.

YES _____ NO ☒ _____

4. The Commission will be the sole provider of funds for the services to be provided pursuant this RFP. Will Proposer receive funding from any source other than the Commission, in cash or in kind, to perform services pursuant to this RFP? If YES, please provide the details of such funding below.


YES _____ NO ☒ _____

5. Does Proposer have any occupational, academic, volunteer, or other life experiences that show an ability to set aside personal interests, political opinions, and group allegiances to achieve a broad objective? If YES, please provide the details of the activity below.

YES _____ NO ☒ _____

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal black lines across its entire width, providing a template for handwriting practice or general note-taking. The margins are consistent on all sides.

Date: 6/14/2021

Signature: 

Printed Name: DARIO RODMAN-ALVAREZ

Title: PRESIDENT

Organization: PACIFIC URBANISM

Telephone Number: 619 454 5078

Email Address: dario@pacificurbanism.com

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

June 14, 21

Attn: Frank Cardenas
Los Angeles City Hall
200 N Spring St, Room 275
Los Angeles, CA 90012

Re: Additional Content

List of References

Name: Paavo Monkkonen
Contact: paavo@luskin.ucla.edu
Title: Associate Professor of Urban Planning
Telephone: 310-482-7733
Dates of services provided: 2016-present
Description: Research and data analysis (Venice Price Change analysis, Housing Allocation Index, Affirmatively Furthering FAIR Housing Metric, Zoning/Land Use Analysis)

Name: George Francisco
Contact: gianfrancisco@hotmail.com
Title: Venice community member
Telephone: N/A
Dates of services provided: 2016-present
Description: Research and data analysis (Liquor license spatial analysis, Venice Community Plan Area land use and planning studies)

Name: Elizabeth Mitchell
Contact: emitchell@spertuslaw.com
Title: Attorney
Telephone: 213-205-6521
Dates of services provided: 2020
Description: Research and data analysis (Homeless Off-Street Sanctuary and Suitable Site Analysis)

The City of Los Angeles may contact any of the above references for the purposes of requesting information on the performance of the Proposer.

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

Four (4) Qualified Employees Who Will Be Performing Work:

1. Dario Rodman-Alvarez, President (2016-present)

Community planning and development, qualitative and quantitative data collection and analysis, geographic information systems, natural resource planning, research publications, and project management. Esri ArcGIS, XLStat. Literature reviews, methodology and research design.

2. Rudi Mattheis-Brown, Studio Director (2016-present)

Registered Architect in the State of CO, spatial analysis, urban design and land use planning, qualitative and quantitative data collection and analysis, geographic information systems, affordable and moderate income rate housing market analyses, and project and staff management. Esri ArcGIS Urban, data visualizations.

3. Luis de la Rosa, Project Manager (2019-present)

Urban studies and quantitative analysis, geographic information systems, project coordination, data collection. Data visualization, map dashboards, Esri ArcGIS, publications and copyrighting.

4. Travis Bruce, Regional Manager (2017-present)

Project and staff management, zoning and building code analyses, community outreach, environmental studies.

Pacific Urbanism **has not** received a suspension, revocation, or disciplinary action from any government entity which would affect a license to perform court reporters services.

ADDRESS
225 E. 16TH ST.
LOS ANGELES, CA 90015



EMAIL
OFFICE@PACIFICURBANISM.COM

FROM THE OFFICE OF PACIFIC URBANISM

June 14, 21

Attn: Frank Cardenas
Los Angeles City Hall
200 N Spring St, Room 275
Los Angeles, CA 90012

Re: Plan for how to conduct line drawing and mapping services during a pandemic

Pacific Urbanism has conducted various public presentations for the Venice Neighborhood Council and its Homeless Committee, as well as public workshops with community members of the Historic Oakwood neighborhood in Venice. We draw from this experience in providing information and opportunities for public feedback by continuously emphasizing the accessibility of our research to community members by various means including online presentations and downloadable files available to the public.

Due to this, we have been able to continue our community planning research efforts throughout the COVID-19 pandemic by strengthening the availability of our research through online dissemination and other social distancing measures. Our team is fully equipped to present and edit results through screen-share with multiple participants and gather feedback in real time.

Pacific Urbanism is well versed in project coordination through social distancing measures, and is able to quickly gather the staff required for any given task mentioned in this proposal or further requested by the Commission.

Please feel free to reach out with any further questions regarding our office standards for social distancing while working with members of the public.