



# Jackson County, Missouri

## Request for Legislative Action

**REQUESTED MEETING DATE:** \_\_\_\_\_ **SPONSOR:** Jalen Anderson

*To be completed by the County Counselor's Office:*

**NUMBER:** 21661 **ASSIGNED MEETING DATE:** 6/24/2024

**STAFF CONTACT:** Craig Reich **PHONE:** 816-881-3265

**EMAIL:** creich@jacksongov.org

**DEPARTMENT:** Purchasing

**TITLE:** Traffic Signs and Supplies

**SUMMARY:**

Awarding a Twenty-Four Month Term and Supply Contract with (2) Twelve Month Options to Extend for the furnishing of Traffic Signs and Supplies for use by the Road and Bridge Division of Public Works and the Parks + Rec Department to J&A Traffic Signs of Blue Springs, MO under the Terms and Conditions of Invitation to Bid 23-090.

36 invitations were sent out and 6 bids were submitted.

J&A Traffic Signs of Blue Springs, MO was recommended as the lowest/best bid received by both Departments.

The projected annual use of this contract is \$90,000

**FINANCIAL IMPACT:** NO

YES

Amount

Fund

Department

Line-Item Detail

**ACTION NEEDED:** AWARD A CONTRACT

**ATTACHMENT(S):**



## **JACKSON COUNTY Public Works Department**

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Jackson County Technical Center  
303 West Walnut Street  
Independence, Missouri 64050  
jacksongov.org

(816) 881-4530  
Fax: (816) 881-4448

### MEMORANDUM

TO: Craig Reich, Senior Buyer

FROM: Kristi Miller, Public Works

DATE: May 15, 2024

SUBJECT: Bid No. 23-090 – “Traffic Signs and Supplies”

The Public Works Road and Bridge Division recommendation is to award the bid to J&A Traffic signs; lowest/best bid received. In Bonfire, they are identified as bidder 75-3067047. J&A has provided quality products and excellent service in previous years as a term and supply contractor.

Projected usage during the next twelve months is \$60000.

*Frank White, Jr., County Executive*



## JACKSON COUNTY

### Parks + Rec

22807 Woods Chapel Road  
Blue Springs, Missouri 64015  
www.jacksongov.org

*Administration  
Historic Sites  
Ranger Station  
Leisure Services  
(816) 503-4800  
Fax (816) 795-1234*

*Kemper Outdoor  
Education Center  
(816) 229-8980*

*Fred Arbanas  
Golf Course at  
Longview Lake  
(816) 761-9445*

*Blue Springs Marina  
(816) 795-1112*

*Jacomo Marina  
(816) 795-8888*

*Longview Marina  
(816) 966-0131*

*Special Population  
Services  
(816) 763-5130*

## MEMORANDUM

**TO:** Craig Reich, Senior Buyer

**FROM:** Kay Norris, Parks + Rec

**DATE:** May 15, 2024

**SUBJECT:** Bid No. 23-090 – “Traffic Signs and Supplies”

The Parks + Rec Department recommendation is to award the bid to J&A Traffic Signs, lowest/best bid received. In Bonfire, they are identified as bidder 75-3067047. J&A has provided quality products and excellent service in previous years as a term and supply contractor.

**Projected usage** during the next twelve months is \$ 30,000.

**AFFIDAVIT**

STATE OF Missouri )  
 ) SS.  
COUNTY OF JACKSON )

JEFF MINDHAM of the city of Blue Springs  
County of JACKSON State of Missouri being duly sworn on her or his oath, deposes and says,

1. That I am the VICE PRESIDENT (Title of Affiant) of J & A Traffic Products (Name of Bidder) and have been authorized by said Bidder to make this Affidavit upon my best information and belief, after reasonable inquiry as to the representations herein.
2. No Officer, Agent or Employee of Jackson County, Missouri is financially interested directly or indirectly what Bidder is offering to sell to the County pursuant to this Invitation (though no representation is made regarding potential ownership of publicly traded stock of bidder).
3. If Bidder were awarded any contract, job, work or service for Jackson County, Missouri, no Officer, Agent or Employee of the County would be interested in or receive any benefit from the profit or emolument of such.
4. Either Bidder is duly listed and assessed on the tax rolls of Jackson County, Missouri and is not delinquent in the payment of any taxes due to the County or Bidder did not have on December 31, 2024, any property subject to taxation by the County and if bidder is duly listed and assessed on the tax rolls of Jackson County, Missouri, bidder agrees to permit an audit of its records, if requested by the Jackson County Director of Assessment, as they relate to the assessment of Business Personal Property.
5. Bidder has not participated in collusion or committed any act in restraint of trade, directly or indirectly, which bears upon anyone's response or lack of response to the Invitation.
6. Bidder certifies and warrants that Bidder or Bidder's firm/organization is not listed on the General Services Administration's Report of Debarred and/or Suspended Parties, or the State of Missouri and City of Kansas City, Missouri Debarment List.
7. Bidder certifies and affirms its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services.
8. Bidder certifies and affirms that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services.

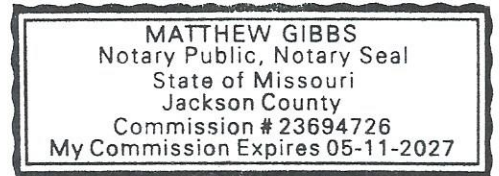
J & A Traffic Products (Name of Bidder)

By: [Signature] (Signature of Affiant)

VICE PRESIDENT (Title of Affiant)

Subscribed and sworn to before me this 19th day of FEBRUARY, 2024

[Signature]



NOTARY PUBLIC in and for the County of JACKSON (SEAL)

State of MISSOURI

My Commission Expires: 5/11/2027



STATEMENT OF NO BID

TO: Jackson County Purchasing Department  
Jackson County Courthouse  
415 East 12th Street, Room G1  
Kansas City, MO 64106

We, the undersigned, have declined to submit a bid in response to this Invitation to Bid for the following reasons(s):

- Specifications too "tight", i.e., geared toward one brand or supplier.
- Insufficient time to respond to the bid.
- We do not offer this product or service.
- Our schedule would not permit us to perform.
- We are unable to meet specifications.
- We are unable to meet bond requirements.
- Specifications are not clear (explain).
- We are unable to meet insurance requirements.
- Remove us from your list for this commodity or service.
- Other (explain). \_\_\_\_\_

REMARKS \_\_\_\_\_  
\_\_\_\_\_

Company Name: J's A Traffic Products  
Signature: [Handwritten Signature]  
Telephone: 816-220-0450  
Date: 2-19-2024

ACKNOWLEDGMENT OF RECEIPT OF ADDENDA

The undersigned acknowledges receipt of Addenda through and including numbers \_\_\_\_\_ and that this Bid is submitted in accordance with information, instructions, and stipulations set forth therein.

  
\_\_\_\_\_  
Signature of Respondent

2-19-2021  
Date

J & A Tratte Pools  
Company Name

605 W. 40 Hwy  
Address

Blue Springs, Mo 64014  
City, State, and Zip

816-226-0450  
Phone





**OFFICE OF THE COUNTY AUDITOR**  
**COMPLIANCE REVIEW OFFICE**  
 415 E 12TH STREET, 2ND FLOOR  
 KANSAS CITY, MISSOURI 64106

(816) 881-3302  
 FAX (816) 881-3340  
 CRO@JACKSONGOV.ORG  
 WWW.JACKSONGOV.ORG/AUDITOR

**JACKSON COUNTY, MISSOURI**  
**CONTRACTOR UTILIZATION PLAN**

**Bid/RFP/RFQ Number:** 23-090  
**Bid/RFP/RFQ Title:** Traffic Signs & Supplies  
**Contracting Department:** Parks + Rec  
**Respondent:** \_\_\_\_\_

I, JEFF MINDHAN, of lawful age and upon my oath state as follows:

1. This Affidavit is made for the purpose of complying with the provisions of the MBE/WBE/VBE submittal requirements on the above Bid/RFP/RFQ and the MBE/WBE/VBE Program and is given on behalf of the Respondent listed above. It sets out the Respondent's plan to utilize MBE and/or WBE and/or VBE prime and subcontractors on the awarded contract.

**The goals set by Jackson County, Missouri are:**

0 % MBE      % WBE      % VBE

2. Bidder stipulates that it will utilize a minimum of the following percentages of MBE/WBE/VBE participation in the above bid:

0 % MBE 0 % WBE 0 % VBE

3. The following are the MBE/WBE/VBE Contractors to be utilized on the above-named solicitation. Respondent maintains that it either has a formal contract or a conditional contract contingent upon award.

**Please note:**

- a. If Bidder is a certified MBE, WBE, or VBE firm, it may list itself in the appropriate area below.
- b. No contractor may be listed under multiple categories below regardless of certifications.

<b>***INTERNAL USE ONLY***</b>	
<b>CUP RECEIVED:</b> _____	<b>CUP APPROVED:</b> _____
<b>GFE RECEIVED:</b> _____	<b>GFE APPROVED:</b> _____
<b>CUP REVISED:</b> _____	<b>REVISION APROVED:</b> _____
<b>APPROVED GOALS:</b> _____ MBE _____ WBE _____ VBE	
<b>RES/ORD:</b> _____	<b>AMT AWARDED:</b> _____
<b>NOTES:</b>	

**MBE SUBCONTRACTORS**



\*\*\*Add Additional Pages as Necessary\*\*\*

**Description**

**Bidder Response**

A.	MBE Firm:		<b>INTERNAL USE ONLY</b>  Certifying Agency: _____ KCMO _____ State of MO  Approved: Y N  Sub A Contract Value: \$
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		

B.	MBE Firm:		<b>INTERNAL USE ONLY</b>  Certifying Agency: _____ KCMO _____ State of MO  Approved: Y N  Sub B Contract Value: \$
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		

C.	MBE Firm:		<b>INTERNAL USE ONLY</b>  Certifying Agency: _____ KCMO _____ State of MO  Approved: Y N  Sub C Contract Value: \$
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		
		<b>TOTAL MBE VALUE</b>	\$

\*\*\*Add Additional Pages as Necessary\*\*\*

**Description**

**Bidder Response**

A:	VBE Firm:		INTERNAL USE ONLY
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		
			Certifying Agency: KCMO State of MO
			Approved: Y N
			Sub A Contract Value: \$

B:	VBE Firm:		INTERNAL USE ONLY
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		
			Certifying Agency: KCMO State of MO
			Approved: Y N
			Sub B Contract Value: \$

C:	VBE Firm:		INTERNAL USE ONLY
	Address line 1:		
	Address line 2-include County:		
	Telephone Number:		
	President/Owner:		
	Email Address:		
	Certifying Agency		
	Expiration Date of Certification:		
	Scopes of Work Utilized:		
	Percentage of Contract Awarded:		
			Certifying Agency: KCMO State of MO
			Approved: Y N
			Sub B Contract Value: \$
			TOTAL VBE VALUE \$

VBE SUBCONTRACTORS

\*\*\*Add Additional Pages as Necessary\*\*\*

**ACKNOWLEDGMENT**

Respondent acknowledges that it is responsible for considering the effect that any change order and/or amendments changing the total contract amount may have on its ability to meet or exceed the subcontractor participation goals.

**Good Faith Effort:**

Respondent further acknowledges that it is responsible for submitting a **Good Faith Effort Form** if it will be unable to meet the participation goals. A **Good Faith Effort Form** documents the efforts a respondent puts forth to achieve the MBE and/or WBE and/or VBE goals on a project. **Simply stating that goals cannot be met is not considered sufficient.**

**Contractor Modification Form:**

If, at any point during the life of the awarded contract, the contractor needs to substitute an approved subcontractor a **Contractor Modification Form** must be submitted to the Compliance Review Office.

**Any Good Faith Effort or Contractor Modification Form must be approved by the Compliance Review Office.**

**\*\*\*Contact the Compliance Review Office for assistance or to request forms.\*\*\***

*I hereby certify that I am authorized to make this Affidavit on behalf of the Respondent named below and who shall abide by the terms set forth herein. I acknowledge that the assigned values determined by this CUP shall be enforceable under the contract terms and conditions.*

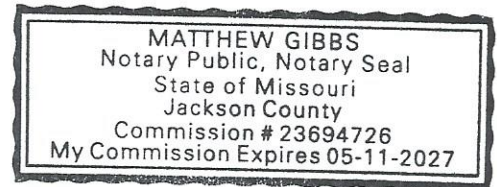
Respondent Primary Contact: JEFF MINUTEMAN  
Title: VICE PRESIDENT Email: jminuteman@jatpi.com  
Date: 2-19-2024 Phone: 816-220-0450

Subscribed and sworn to before me this 19th day of FEBRUARY, 2024.

My Commission Expires: 5/11/2027

[Signature]

Notary Public  
(Attach corporate seal if applicable)



For questions on this form please contact:

Compliance Review Office  
816-881-3302  
CRO@jacksongov.org



Jackson County Missouri

# Certificate of Compliance



In accordance with Jackson County Code Chapter(s) 6 and 10,  
this Certificate of Compliance is hereby issued to:

J A Traffic Products LLC  
627 NW Valley Ridge Circle  
Grain Valley, MO 64029  
2024 Certificate: 20240215VC251

Issued: 2024-02-15  
Expires: 2024-12-31

The above named firm/agency has met the following requirements:

Is duly listed and assessed on the tax rolls of Jackson County, Missouri and is not delinquent in the payment of any taxes due to the County, or did not have on December 31st of the previous year any property subject to taxation by the County

Attests and agrees to Chapter 6 of the Jackson County Code which prohibits discriminatory employment practices and promotes equal employment opportunity by contractors doing business with Jackson County.

Chief Compliance Review Officer  
Jackson County Missouri  
816-881-3302  
compliance@jacksonsongov.org

**A TERM AND SUPPLY CONTRACT** for the furnishing of **Traffic Signs & Supplies** for use by **Various County Departments**.

A Contract between Jackson County Missouri ("County") and the undersigned ("Contractor"), collectively referred to as the "parties". The term "offer" as used herein refers to Contractor's offer made in response to this Bid Number. The parties agree as follows in consideration of the mutual covenants contained herein.

This Contract shall be binding when it is signed by the County's Purchasing Officer and shall run from such date until the end of the 12th consecutive month from the month during which it first took effect unless it is sooner terminated in accord herewith.

This Contract consists of: (1) Contractor's offer, including those papers which Contractor submitted with or expressly incorporated in its offer as a part thereof, to the extent the terms of such papers were expressly or impliedly accepted by the County, or were modified in writing with the express or implied consent of the parties; (2) written modification to this Contract signed by the County's Purchasing Officer and consented to expressly or impliedly by Contractor. This Contract represents the entire agreement between the parties in regard to this Bid Number. All modifications to this Contract must be in writing signed by the County's Purchasing Officer.

The laws of the State of Missouri and Jackson County, Missouri govern this Contract. This Contract shall be binding upon and to the benefit of the successor and assignees of the parties. The Contractor shall not assign this Contract or any monies payable hereunder without the prior written consent of the County. Contractor is an independent contractor of the County and shall indemnify the County for loss, damage, or liability which the County incurs to the extent that such results proximately from the negligence or violation of Contractor or its employees, agents or subcontractors.

In regard to any goods which are included in the sale hereunder, Contractor makes to the County the warranties provided in Article Two of the Uniform Commercial Code of the State of Missouri to the extent that they apply by the terms thereof.

The County gives each of its employees an employee identification card having thereon a photograph of the employee. The County will not pay for any goods and/or services delivered by Contractor to any persons who did not present to Contractor at the time of delivery their County Identification Cards and who were not in fact authorized to receive delivery.

The County reserves the right to terminate this Contract for any reason upon at least 14 days written notice to Contractor. The parties may annually extend this Contract beyond its original term for a time, not to exceed 12 month extensions, from the last day of the original term provided that the County's consent to such an extension and the extension does not involve changes in the specifications, terms and conditions, or increase in prices unless such changes or increases are provided for in said specifications, terms or conditions in effect at the expiration of the original term has been approved by the County Legislature.

The County will pay to Contractor the applicable pricing quoted by Contractor in its offer for any goods and/or services whose purchase was ordered by the County's Purchasing Officer in consequence of the County's acceptance of Contractor's offer. The County will make good faith effort to make payment within thirty (30) days after the latest of: (1) the date of proper delivery to the County; (2) the date of acceptance by the County; (3) the date when the receiving department has received from the Contractor a correct and complete invoice showing the pertinent County Purchase Order Number(s). Payment may be withheld by the County to protect itself from actual or potential loss which has resulted or may result from the Contractor's non-performance of any of its duties required hereunder.

Contractor warrants that no officer or employee of the County, whether elected or appointed, shall in any manner whatsoever be interested in or receive any benefit from the profits or emoluments of this contract. If the County awarded this Contract, would the Contractor sell under the prices and terms of this Contract to any Municipal, County, Public Utility, Hospital, or Educational Institution having membership in the Mid-America Council of Public Purchasing and located within the greater Kansas City Metropolitan Trade Area? (All deliveries are to be F.O.B. Destination and there shall be no obligation on the part of any member of such Council to utilize this Contract).

(Check one) Yes  No  Initials Jm. Minimum order, if applicable \$ \_\_\_\_\_  
ALL PAGES OF THIS INVITATION TO BID ARE EXPRESSLY MADE A PART OF THIS CONTRACT. The format of this Contract has been approved by the County Counselor's Office. Signature of vendor as indicated below MUST BE COMPLETED before contract can be awarded:

CONTRACTOR'S NAME: J & A Traffic Products PHONE NO: 816-226-0450  
ADDRESS: 405 W. 4th Hwy Blue Springs MO 64014 FAX NO: 816-220-3197  
NAME OF AUTHORIZED AGENT (print or type) JEFF MINORHAM DATE: \_\_\_\_\_  
SIGNATURE OF AUTHORIZED AGENT: [Signature] TITLE: Vice President  
EMAIL ADDRESS OF AUTHORIZED AGENT: jmcadham@jatts.com  
FEDERAL ID NO: 75-3067647 and/or SOCIAL SECURITY NO: \_\_\_\_\_  
CHECK IF APPLICABLE: DISADVANTAGED BUSINESS ENTERPRISE (DBE): \_\_\_\_\_ MINORITY BUSINESS ENTERPRISE (MBE): \_\_\_\_\_  
WOMAN OWNED (WBE): \_\_\_\_\_

\*\*\*\*\*  
JACKSON COUNTY MISSOURI BY BOB CRUTSINGER, DIRECTOR OF FINANCE AND PURCHASING

SIGNATURE OF BOB CRUTSINGER: \_\_\_\_\_ DATE: \_\_\_\_\_

## 1.0 INTRODUCTION

- 1.1 Jackson, County Missouri is seeking bids for a Twenty-Four (24) Month Term & Supply Contract with Two (2) Twelve Month Options to Extend for the furnishing of **Traffic Signs and Supplies** for use by **Various County Departments**.

## 2.0 BACKGROUND

- 2.1 Although exact usage cannot be determined, the County expects to spend around \$110,000 on purchases of Traffic Signs and Supplies during the next year. The County may or may not exceed this amount.
- 2.2 The County reserves the right to split the Contract Award for Traffic Signs and Supplies.

## 3.0 AWARD REQUIREMENTS

- 3.1 Certificate of Insurance: The Successful Contractor will be required to submit to the Purchasing Department a Certificate of Insurance meeting or exceeding the provisions of Item 15 under "General Conditions" and Exhibit A included herein within ten (10) business days after receiving Notification of Award. The Certificate of Insurance must be received by the County prior to the commencement of any work on this contract.
- 3.2 W-9 Form: The Successful Contractor must provide a complete IRS W-9 Form for the contract.
- 3.3 Compliance with Chapter 6, Jackson County Code for Minority and Women Business Enterprise utilization will be required.
- 3.4 Successful Contractor shall provide 3 copies of awarded catalog to each County department at no charge, or if online a link to the current catalog website.

## 4.0 SPECIFICATIONS

- 4.1 All traffic control devices shall conform to standards set forth in the UNIFORM TRAFFIC CONTROL DEVICES (1988 edition).
- 4.2 All sign materials shall conform to the specifications set forth in Section 1042 entitled "HIGHWAY SIGN MATERIALS" of the Missouri Standards Specifications for Highway Construction (1990 edition). The only exception to this will be the use of fiberglass reinforced plastic in place of aluminum sign blank material.
- 4.3 Reflective Sheeting, Numbers and Letters shall equal or exceed 3-M engineer grade. Reflective sheeting shall have the manufacturer identified by the use of a "water mark." White engineer grade sheeting shall be "parkway white."
- 4.4 Panels shall be .080 thickness and manufactured from either new or recycled aluminum alloy meeting ASTM #3105-H18 or better.
- 4.5 **PLEASE NOTE: ALL WORDINGS AND SIZES MUST COMPLY WITH FEDERAL SPECIFICATIONS UNLESS OTHERWISE STATED.**
- 4.6 Miscellaneous Items (CATALOG ORDERING): Jackson County needs the ability to purchase additional or miscellaneous items not listed in the quotations section. For miscellaneous items not listed, Bidders must provide the County with a discount percentage off list prices in their catalog.
- 4.7 All catalogs must have pricing or be accompanied by pricing sheets to be considered for award. If catalog is online; bidder must provide website address with bid.

### Delivery

- 4.8 All orders are to be shipped **FOB Destination, Inside Delivery Only**. Contractor pays all freight.

- 4.9 Delivery Locations: Locations include but are not limited to the following:
  - 4.9.1 Road & Bridge Public Works Grain Valley, MO
  - 4.9.2 Various Parks Locations – Lee’s Summit/Blue Springs, MO
- 4.10 All orders shall be packaged adequately to assure safe handling, proper delivery, and acceptable conditions.
- 4.11 All orders must include an itemized packing slip that reflects the Purchasing Order Number and must indicate if the order is complete or a partial ship.
- 4.12 **FUEL SURCHARGE:** No Fuel Surcharges are allowed during the term of any resulting contract or any of its extensions.

Invoicing and Paperwork

- 4.13 The County will utilize Miscellaneous Blanket Purchase Orders on this contract.
- 4.14 Miscellaneous Blanket Purchase Orders are for an estimated dollar amount and the Successful Contractor will bill the County against the Miscellaneous Purchase Order until the stated dollar amount is spent, or the Contract terminates.
- 4.15 A hard copy of the Miscellaneous Purchase Order issued by the Finance and Purchasing Department must be in place with the Successful Contractor before any items can be purchased. Failure to adhere to this policy will result in the immediate termination of any resulting contract.
- 4.16 Price Increases: The Successful Contractor may increase prices only when the increase applies to the General Public and is stated officially in writing to Jackson County, Missouri. Price increase shall not take effect against the County until the Successful Contractor has verified the fulfillment of this condition to the reasonable satisfaction of the County’s Purchasing Department. No price increases will be allowed in the first six (6) months of this contract. Catalog discount will be set for duration of Contract.

**5.0 REQUIRED SUBMITTALS**

- 5.1 Manufacturers Current Catalog with Price Lists on Products being bid.
- 5.2 If the bidder catalog is on-line; bidder must provide website address with the bid.
- 5.3 Contractor Utilization Plan, as provided in Bonfire paperwork.

**6.0 EVALUATION PROCESS**

- 6.1 All bids received that are responsive to the General Conditions, Specifications, and other provisions of this Invitation to Bid will be evaluated. An Evaluation Committee made up of Jackson County, Missouri personnel will evaluate bids and make recommendations. Jackson County, Missouri shall be the sole judge of the bids submitted and its decision shall be final.

**7.0 QUESTIONS**

- 7.1 All questions regarding this Invitation to Bid must be submitted through the Bonfire Portal at <http://jacksongov.bonfirehub.com> via the Opportunity Q&A by 5:00pm CST on February 16<sup>th</sup>, 2024. All questions will be answered in the form of Addenda on the Bonfire website. Failure to follow this procedure MAY result in the REJECTION OF YOUR BID.

**8.0 QUOTATIONS**

- 8.1 All quotation will be accepted via the Bonfire Portal.

SIGNATURE: <i>A. Mull</i>		DATE: <i>2-19-2024</i>
NAME: <i>Jeff Mindham</i>	(Print or Type)	PHONE: <i>816-220-0450</i>
TITLE: <i>Vice President</i>	(Print or Type)	CELL: <i>816-392-6725</i>
COMPANY NAME: <i>J &amp; A Trubble Products</i>	(Print or Type)	FAX: <i>816-220-3197</i>
EMAIL ADDRESS: <i>jmindham@jatps.com</i>	(Print or Type)	
WEB ADDRESS: <i>www.jatps.com</i>	(Print or Type)	



# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**J & A TRAFFIC PRODUCTS**

**2** Business name/disregarded entity name, if different from above

**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.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ **S**

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check 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.

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) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.) See instructions.  
**605 W. 40 Hwy PMB 119**

**6** City, state, and ZIP code  
**BLUE SPRINGS, MO 64029**

**7** List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name 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**

7	5	-	3	0	6	7	0	4	7
---	---	---	---	---	---	---	---	---	---

## 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 ▶ 

Date ▶ **2-19-2024**

## 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](http://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.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/19/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Sentry Insurance 1800 North Point Drive Stevens Point, WI 54481		<b>CONTACT NAME:</b> Sentry Customer Service	
		<b>PHONE (A/C, No, Ext):</b> 800-473-6879	<b>FAX (A/C, No):</b> 800-514-7191
		<b>EMAIL ADDRESS:</b> businessproducts_direct@sentry.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> J & A Traffic Products LLC 605 SW US Highway 40 # 119 Blue Springs, MO 64014-3232		<b>INSURER A:</b> Sentry Insurance Company	<b>NAIC #</b> 24988
		<b>INSURER B:</b>	
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

### COVERAGES

CERTIFICATE NUMBER: 2569491

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> BUSINESSOWNERS LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y		A0116171003	10/28/2023	10/28/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	A0116171002	10/28/2023	10/28/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Refer to attached

### CERTIFICATE HOLDER

Jackson County Missouri  
415 E 12th St  
Kansas City, MO 64106-2706

### CANCELLATION

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

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

A0116171

Sentry Insurance Company

1 00001 000000000 24050 0 N



AGENCY CUSTOMER ID: XXXXX7047

LOC #: \_\_\_\_\_

### ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY Matthew TeStrake		NAMED INSURED J & A Traffic Products LLC
POLICY NUMBER A0116171003		
CARRIER Sentry Insurance Company	NAIC CODE 24988	EFFECTIVE DATE: 10/28/2023

#### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25    FORM TITLE: Certificate of Liability Insurance

#### Certificate Details

Bid Number: 23-090

Additional Insured Status is Subject to the Terms and Conditions of endorsement BP 8021.