

325-998-2216



GOOD FENCES MAKE GOOD NEIGHBORS AND WE ARE THE SECURE CHOICE.

Business address: 1009 West Commerce Brownwood, Texas 76801 Mailing Address: 310 Cedar Street Bangs, Texas 76823

Quote

Brown County Sheriff Dept.

1655' of 6' 9 gauge chain link + 3 strand barbed wire @ \$18.03 per foot = \$29,839.65

1990' of 18" razor tape @ \$4 per foot = \$7960.00

3 - 25' cantilever gates with HySecurity solar operator, keypad, intercom, and free exit loop. @ \$9334.16 each = \$28,002.48

Total due \$65,802.13

Estimated Completion within 30 days of start date Accepted by_____

Proposal becomes void unless accepted within 7 days. The above work will be completed in a professional manner for the amount shown. Payable at 50% down with the balance upon completion. Any alterations or deviation from above specifications will become an extra charge over the sum stated in this contract. I/We agree to the above listed proposal and authorize The Fence Guyz to start and complete the said proposal. I/We also agree to payments and terms stated in this proposal.

All material remain the property of The Fence Guyz until paid in full.

Customer is responsible for damage to underground lines. Cast iron products not warranted

December 22, 2014

1 Year Warranty

Exhibit #5



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/09/2014

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 be endorsed. If SUBROGATION IS WAIVED, subject to

| | ne terms and conditions of the policy ertificate holder in lieu of such endo | | | ndorsement. A stat | tement on th | is certificate does not c | onfer ri | ghts to the |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------|----------------------------------------------|----------|-------------|
| PRODUCER | | | | CONTACT NAME: | | | | |
| Sm | ith and Sharpe Agencies | | PHONE (205) CAC ASTO | | | | | |
| | 1 W. Adams | | (A/C, No. Ext): (325) 646-45/8 (A/C, No): (325) 643-5300 E-MAIL ADDRESS: cmsharpe@smithandsharpeins.com | | | | | |
| P. | O. Box 130 | | | INSURER(S) AFFORDING COVERAGE NAIC # | | | | |
| Brownwood TX 76801- | | | | INSURER A: Western World Insurance Company | | | | HAIO W |
| INSU | RED Kimie Dawn Burch | | INSURER B: | | | | | |
| db | a: The Fence Guyz | | INSURER C: | | | | | |
| 31 | 0 Cedar St | INSURER D: | | | | | | |
| | | | | INSURER E : | | | | |
| Bangs TX 76823- | | | | INSURER F: | | | | |
| СО | VERAGES CEI | RTIFICATI | E NUMBER: | 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 | INSR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | s | |
| A GENERAL LIABILITY | | 11110 | NPP8224098 | 05/17/2014 | | EACH OCCURRENCE | \$ | 1,000,000 |
| | X COMMERCIAL GENERAL LIABILITY | | | 1 1 | 11 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ | 100,000 |
| | CLAIMS-MADE X OCCUR | | | / / | 11 | MED EXP (Any one person) | \$ | 5,000 |
| | | 1 1 | | / / | 11 | PERSONAL & ADV INJURY | \$ | 1,000,000 |
| | | | | / / | 1 1 | GENERAL AGGREGATE | \$ | 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | / / | 1 1 | PRODUCTS - COMP/OP AGG | \$ | 1,000,000 |
| | POLICY PRO- JECT LOC | | | 1 1 | / / | | \$ | |
| | AUTOMOBILE LIABILITY | | - | / / | / / | COMBINED SINGLE LIMIT (Ea accident) | \$ | |
| | ANY AUTO | | | / / | / / | BODILY INJURY (Per person) | \$ | |
| | ALL OWNED SCHEDULED AUTOS | | | / / | / / | BODILY INJURY (Per accident) | \$ | |
| | HIRED AUTOS NON-OWNED AUTOS | | | / / | / / | PROPERTY DAMAGE (Per accident) | \$ | |
| | | | | / / | / / | | \$ | |
| | UMBRELLA LIAB OCCUR | | | / / | / / | EACH OCCURRENCE | \$ | |
| | EXCESS LIAB CLAIMS-MADI | | | / / | / / | AGGREGATE | \$ | |
| | DED RETENTION \$ | | | / / | / / | Luce exercic Large | \$ | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N | | | / / | / / | WC STATU- TORY LIMITS ER | | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | N/A | | / / | / / | E.L. EACH ACCIDENT | \$ | |
| (Mandatory in NH) If yes, describe under | | | | ', ', | / / | E.L. DISEASE - EA EMPLOYEE | \$ | |
| | DESCRIPTION OF OPERATIONS below | - | | / / | / / | E.L. DISEASE - POLICY LIMIT | \$ | |
| | | | | / / | / / | | | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) | | | | | | | | |
| | DTIFICATE US. DES | | | OANGELL SEGO | | | | |
| CE | RTIFICATE HOLDER | , , | | 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 WITHOUTH THE THE THE THE THE THE THE THE THE T | | | | | |



GOOD FENCES MAKE GOOD NEIGHBORS AND WE ARE THE SECURE CHOICE.

The Fence Guyz

Commercial & Residential Chain-link, Wood, Wrought Iron, Ornamental Gates and Entryways Serving Brownwood, Abilene, San Angelo & surrounding areas 15 yrs experience

325-200-8879



325-998-2216

athis Hes Aush

SS ORIGIN ID: ELPA

SHIP DATE: 16DEC14 ACTWGT: 0.4 LB CAD: /OFFC1522 DIMS: 0x0x0 IN

BILL SENDER

TO ATTN: LES RUSH, SGT. OF OP. BROWN COUNTY SHERIFFS OFFICE 1050 W COMMERCE ST UNITED STATES US

BROWNWOOD TX 76801

WED - 17 DEC 10:30A PRIORITY OVERNIGHT

76801 TX-US AUS

A8 BWDA



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Feli location advant
Feli location beautible?
Felici School Power
Feli Ross Placet Deer Parties 8066 7906 9518 79912 Brown County Sheriff's office Company United Building Company Address 7112 Colden Hawk DV. Address 1050 W COMMI exce Express US Airbill 1 From 12/16/11 Sender's Leo Sabty Your Internal Billing Reference con Brownwood

Other

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