

The Board of Supervisors met on 12/27/22 at 10:00 a.m. in the Story County Administration Building. Latifah Faisal and Lisa Heddens, with Faisal presiding. Linda Murken absent.

(all audio of meetings available at storycountyiowa.gov).

ADOPTION OF AGENDA: Heddens moved, Faisal seconded adoption of the agenda. Motion carried unanimously (MCU) on a roll call vote.

PROCLAMATION RECOGNIZING JANUARY 2023 AS RADON AWARENESS MONTH IN STORY COUNTY: The Board read the proclamation in full. Heddens moved, Faisal seconded the approval of the Proclamation Recognizing January 2023 as Radon Awareness Month in Story County. Roll call vote. (MCU)

MINUTES: 12/20/22 Minutes – will be considered at a future meeting.

PERSONNEL ACTIONS: 1) new hire, effective 1/4/23, in a) Environmental Health for Hayley Nelson @ \$21.21/hr. Heddens moved, Faisal seconded the approval of personnel actions as presented. Roll call vote. (MCU)

Heddens moved, Faisal seconded the approval of Consent Agenda as listed.

1. Renewal Class E Retail Alcohol License for Casey's General Store #2301, 17005 US Highway 69, Gilbert, Iowa, effective 2/28/23-2/27/24, including Sunday service
2. Final Pay Voucher for Manatt's Inc. for HMA Resurfacing Project #FM-C085(165)--55-85
3. Additional Lease Contract between Marco Printing and Story County Information Technology for print services for the Story County Sheriff for \$37.50 a month
4. Utility Permit: #23-6720

Roll call vote. (MCU)

LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE SUPERVISORS: The Board members reported on upcoming meetings.

Heddens moved, Faisal seconded to adjourn at 10:03 a.m. Roll call vote. (MCU)

Story County Board of Supervisors Meeting Agenda
Administration Building
900 6th St., Nevada, IA - Limited Agenda
12/27/22

1. SPECIAL NOTE TO THE PUBLIC: This Meeting Is Also Being Offered Via Zoom. While Joining Via Zoom, If You Have A Question And/Or Comment, You May Raise Your Hand To Speak During Public Forum Or Use The Chat Feature And The Chair Will Ask The Zoom Moderator To Review All Comments During Public Forum.

Members of the public can participate by using the information below:

To join the zoom meeting by computer, tablet, smartphone:

Join from a PC, Mac, iPad, iPhone or Android device:

Please click this URL to join.

[HTTPS://US02WEB.ZOOM.US/J/89020467327?
PWD=SNNXWfVJN1HYTXVDB3Z3RUPLB2TVQT09](https://us02web.zoom.us/j/89020467327?pwd=SNNXWfVJN1HYTXVDB3Z3RUPLB2TVQT09)

Passcode: 018323

Description: Weekly Board Meeting

Or One tap mobile:

+16469313860,,89020467327#,,,,*018323# US

+19292056099,,89020467327#,,,,*018323# US (New York)

Or join by phone:

Dial (for higher quality, dial a number based on your current location):

US: +1 646 931 3860 or +1 929 205 6099 or +1 301 715 8592 or +1 309 205 3325 or
+1 312 626 6799 or +1 719 359 4580 or +1 253 215 8782 or +1 346 248 7799 or +1 386
347 5053 or +1 564 217 2000 or +1 669 444 9171 or +1 669 900 6833

Webinar ID: 890 2046 7327

Passcode: 018323

International numbers available:

[HTTPS://US02WEB.ZOOM.US/U/KQDBHTWZL](https://us02web.zoom.us/j/89020467327?pwd=SNNXWfVJN1HYTXVDB3Z3RUPLB2TVQT09)

2. CALL TO ORDER: 10:00 A.M.
3. PLEDGE OF ALLEGIANCE:
4. ADOPTION OF AGENDA:
5. PUBLIC COMMENT #1:
This comment period is for the public to address topics on today's agenda
6. Consideration Of Proclamation Recognizing January 2023 As Radon Awareness Month In Story County

Department Submitting Board of Supervisors

Documents:

RADON AWARENESS MONTH.PDF

7. CONSIDERATION OF MINUTES:

I. 12/20/22 Minutes

Department Submitting Auditor

8. CONSIDERATION OF PERSONNEL ACTIONS:

I. Action Forms

- 1) new hire, effective 1/4/23, in a) Environmental Health for Hayley Nelson @ \$21.21/hr.

Department Submitting HR

9. CONSENT AGENDA:

(All items listed under the consent agenda will be enacted by one motion. There will be no separate discussion of these items unless a request is made prior to the time the Board votes on the motion.)

I. Consideration Of Renewal Class E Retail Alcohol License For Casey's General Store #2301, 17005 Hwy 69, Gilbert, Ia., Effective 2/28/23-2/27/24, Including Sunday Service

Department Submitting Auditor

Documents:

CASEYS.PDF

II. Consideration Of Final Pay Voucher For Manatt's Inc., For HMA Resurfacing Project #FM-C085(165)-55-85

Department Submitting Engineer

Documents:

FPV MANATTS.PDF

III. Consideration Of Additional Lease Contract Between Marco Printing And Information Technology For Print Services For Story County Sheriff For \$37.50/Mo

Department Submitting Information Technology

Documents:

MARCO CONTRACT DEC 2022.PDF

IV. Consideration Of Utility Permit(S): #23-6720
Consent

Department Submitting Engineer

Documents:

UT 23 6720.PDF

10. UPCOMING AGENDA ITEMS:

11. PUBLIC COMMENT #2:

Comments from the Public on Items not on this Agenda. The Board may not take any Action on the Comments due to the Requirements of the Open Meetings Law, but May Do So In the Future.

12. LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE SUPERVISORS:

13. ADJOURNMENT:

Story County strives to ensure that its programs and activities do not discriminate on the basis of race, color, national origin, sex, age or disability. Persons requiring assistance, auxiliary aids or services, or accommodation because of a disability may contact the county's ADA coordinator at (515) 382-7204.

Story County Board of Supervisors

Agenda

12/27/22

NAME

ADDRESS

Sandra King
Laura Johnston

BOS
EH



PROCLAMATION

Radon Awareness Month

January 2023

WHEREAS, radon is a colorless, odorless, naturally occurring radioactive gas that threatens the health of our citizens; and

WHEREAS, radon is the second leading cause of lung cancer deaths in the United States and the number one cause among non-smokers; and

WHEREAS, one in 15 homes across the U.S. has an elevated radon level; and

WHEREAS, any home in Story County may have an elevated level of radon, even if other homes in the same neighborhood do not; and

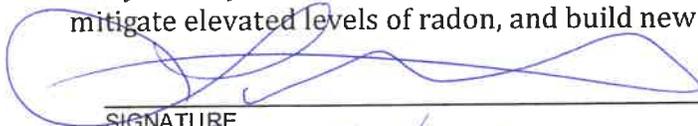
WHEREAS, testing for radon is simple and inexpensive; and

WHEREAS, identified radon problems can be fixed; and

WHEREAS, educating Story County residents about how radon can adversely impact personal health; and

WHEREAS, Story County, Iowa and the U.S. Environmental Protection Agency are supporting efforts to encourage Americans to test their homes for radon, mitigate elevated levels of radon, and build new homes with radon-resistant materials and features.

NOW, THEREFORE, BE IT RESOLVED THAT We, the Story County Board of Supervisors, do hereby proclaim January 2023 as "**RADON AWARENESS MONTH**" and encourages the citizens of Story County to educate themselves and others on radon awareness, test their home for radon, mitigate elevated levels of radon, and build new homes with radon-resistant techniques.


SIGNATURE _____ DATE 12.27.22


SIGNATURE _____ DATE 12-29-22

SIGNATURE _____ DATE _____





State of Iowa

Alcoholic Beverages Division

APPROVED

Board Member Initials:

Meeting Date: 12-27-22

Follow-up action:

Applicant

| | | | | |
|---------------------------|-----------------------------|----------------|--------|-------|
| NAME OF LEGAL ENTITY | NAME OF BUSINESS(DBA) | BUSINESS | | |
| Casey's Marketing Company | Casey's General Store #2301 | (515) 233-5069 | | |
| ADDRESS OF PREMISES | PREMISES SUITE/APT NUMBER | CITY | COUNTY | ZIP |
| 17005 Hwy 69 | | Gilbert | Story | 50010 |
| MAILING ADDRESS | CITY | STATE | ZIP | |
| 1 SE CONVENIENCE BLVD | Ankeny | Iowa | 50021 | |

Contact Person

| | | |
|-----------------|----------------|-------------------------|
| NAME | PHONE | EMAIL |
| Madison Paulson | (515) 381-5974 | madi.paulson@caseys.com |

License Information

| | | | |
|----------------|--------------------------------|----------|------------------------------|
| LICENSE NUMBER | LICENSE/PERMIT TYPE | TERM | STATUS |
| LE0002103 | Class E Retail Alcohol License | 12 Month | Submitted to Local Authority |

| | | |
|--------------------------|---------------------------|----------------------|
| TENTATIVE EFFECTIVE DATE | TENTATIVE EXPIRATION DATE | LAST DAY OF BUSINESS |
| Feb 28, 2023 | Feb 27, 2024 | |

SUB-PERMITS

Class E Retail Alcohol License

PRIVILEGES



State of Iowa

Alcoholic Beverages Division

Status of Business

BUSINESS TYPE

Corporation

Ownership

• Individual Owners

| NAME | CITY | STATE | ZIP | POSITION | % OF OWNERSHIP | U.S. CITIZEN |
|---|-----------|-------|-----------|---------------------|----------------|--------------|
| ERIC LARSEN | ANKENY | Iowa | 50023 | TREASURER | 0.00 | Yes |
| SCOTT FABER | JOHNSTON | Iowa | 50131 | SECRETARY | 0.00 | Yes |
| BRIAN JOHNSON | JOHNSTON | Iowa | 50131 | VICE PRESIDENT | 0.00 | Yes |
| DOUGLAS BEECH | ANKENY | Iowa | 50021 | ASSISTANT SECRETARY | 0.00 | Yes |
| SAMUEL JAMES | ANKENY | Iowa | 50021 | PRESIDENT | 0.00 | Yes |
| 42-0935283 Casey's General Stores, Inc. | Ankeny | Iowa | 50021-804 | Owner | 100.00 | Yes |
| JESSICA GENERAL STORES | Urbandale | Iowa | 50322 | | | |

Insurance Company Information



State of Iowa

Alcoholic Beverages Division

INSURANCE COMPANY

POLICY EFFECTIVE DATE

POLICY EXPIRATION DATE

DRAM CANCEL DATE

OUTDOOR SERVICE EFFECTIVE
DATE

OUTDOOR SERVICE EXPIRATION
DATE

BOND EFFECTIVE DATE

TEMP TRANSFER EFFECTIVE
DATE

TEMP TRANSFER EXPIRATION
DATE



Iowa Department of Transportation
CONTRACT CONSTRUCTION PROGRESS VOUCHER

FM-C085 (165) --55-85
 HMA Resurfacing
 STORY COUNTY ENGINEER

Contract 038291

Voucher No. 7

DATE LAST VOUCHER 11-16-22 MO. DAY YR.
 THIS VOUCHER 11-29-22 MO. DAY YR.

| ITEM NO. | QUANTITY AWARDED | QUANTITY AUTHORIZED | RET. % | ITEM DESCRIPTION | UNITS OF MEASURE | FCT. | RURAL | | URBAN | |
|----------|------------------|---------------------|--------|--|------------------|------|---------------|-------------------|---------------|-------------------|
| | | | | | | | PARTICIPATING | NON-PARTICIPATING | PARTICIPATING | NON-PARTICIPATING |
| 0010 | 2860.200 | 2860.200 | 3.000 | GRANULAR SHLD, TYPE B | Ton | 410 | 000 | 3139110 | 000 | 000 |
| 0020 | 5.400 | 5.400 | | CLEAN+PREPARATION OF BASE | Miles | 441 | 000 | 5400 | 000 | 000 |
| 0030 | 366.700 | 366.700 | | PAV'T, SCARIFICATION | Sq Yard | 441 | 000 | 366700 | 000 | 000 |
| 0040 | 6414.100 | 6414.100 | | HMA ST INTERMEDIATE, 1/2" | Ton | 442 | 000 | 6214900 | 000 | 000 |
| 0050 | 6414.100 | 6414.100 | | HMA ST SURF, 1/2", NO FRIC | Ton | 442 | 000 | 6325930 | 000 | 000 |
| 0060 | 769.700 | 769.700 | | ASPH BINDER, PG 58-28S | Ton | 442 | 000 | 645150 | 000 | 000 |
| 0070 | 1200.000 | 1200.000 | | HMA PAV'T SAMPLE | Lump Sum | 442 | 000 | 1200000 | 000 | 000 |
| 0080 | 1229.800 | 1229.800 | | PAINTED PAV'T MARK, WATERBORNE/SOLVENT | Station | 442 | 000 | 1187873 | 000 | 000 |
| 0090 | 3000.000 | 3000.000 | | TRAFFIC CONTROL | Lump Sum | 401 | 000 | 3000000 | 000 | 000 |
| | | | | TOTAL | | | | | | |

I certify that the work items shown herein are just and unpaid, and that the requirements of the Iowa Department of Transportation specifications for this project, including all requirements as to maximum hours of labor and minimum wages have been complied with.

SIGNATURES REQUIRED ON LINES 1 & 2 FOR PROGRESS PAYMENT AND LINES 1-3 FOR FINAL PAYMENT AS APPLICABLE.

1. 12-19-22 Jay Moran PROJECT ENGINEER CERTIFICATION
 DATE

2. 12-27-22 CHAIRMAN OF BOARD OF SUPERVISORS APPROVAL
 DATE

3. 12-15-22 DISTRICT CONSTRUCTION/LOCAL SYSTEMS ENGINEER OR OFFICE DIRECTOR APPROVAL
 DATE

Project records reviewed.
 Project records not reviewed. Recommend payment based on the project engineers certification.
 IDOT is not involved in this Farm to Market project.

CLAIMANT'S CERTIFICATION (Required for Final Payment Only)
Ashley Lint the Contract Admin.
 for Manatt's Inc (contractor) certify that the work items shown herein are just and unpaid, and that the requirements of the Iowa Department of Transportation specifications for this project, including all requirements as to maximum hours of labor and minimum wages have been complied with.
Ashley Lint SIGNED CLAIMANT (CONTRACTOR)
12-15-22 DATE

CERTIFICATION FOR HOURS AND LABOR APPLIES ONLY TO FEDERAL PARTICIPATING PROJECT.

Contract 038291

Iowa Department of Transportation
CONTRACT CONSTRUCTION PROGRESS VOUCHER

FM-C085(165) --55-85
 HMA Resurfacing
 STORY COUNTY ENGINEER

Voucher No. 7

DATE LAST VOUCHER 11-16-22 THIS VOUCHER MO. DAY YR.

| ITEM NO. | QUANTITY AWARDED | QUANTITY AUTHORIZED | ITEM DESCRIPTION | UNIT OF MEASURE | FCT. | RURAL | | URBAN | | |
|----------|------------------|---------------------|------------------|-----------------|------|---------------|-------------------|---------------|-------------------|--|
| | | | | | | PARTICIPATING | NON-PARTICIPATING | PARTICIPATING | NON-PARTICIPATING | |
| 0100 | 30.000 | 30.000 | 3.000 | Each | 401 | 000 | 34500 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |
| 0110 | 6.000 | 6.000 | 6.000 | Each | 401 | 000 | 9000 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |
| 0120 | 7000.000 | 7000.000 | 7000.000 | Lump Sum | 401 | 000 | 7000000 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |
| 8001 | 1.000 | 1.000 | 1.000 | Each | 401 | 000 | 1000 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |
| 8002 | 1.000 | 1.000 | 1.000 | Each | 401 | 000 | 1000 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |
| 8999 | 1.000 | 1.000 | 1.000 | Lump Sum | 401 | 000 | 000 | 000 | 000 | |
| | TOTAL TO DATE | | | | | | | | | |

I certify that the work items shown herein are just and unpaid, and that the requirements of the Iowa Department of Transportation for this project, including all requirements as to maximum hours of labor and minimum wages have been complied with.

SIGNATURES REQUIRED ON LINES 1 & 2 FOR PROGRESS PAYMENT AND LINES 1-3 FOR FINAL PAYMENT AS APPLICABLE.

1. DATE _____ PROJECT ENGINEER CERTIFICATION

2. DATE _____ CHAIRMAN OF BOARD OF SUPERVISORS APPROVAL
 IDOT is not involved in this Farm to Market project.

3. DATE _____ DISTRICT CONSTRUCTION/LOCAL SYSTEMS ENGINEER OR OFFICE DIRECTOR APPROVAL
 Project records reviewed. Project records not reviewed. Recommend payment approved for payment based on the project engineers certification.

CERTIFICATION FOR HOURS AND LABOR APPLIES ONLY TO FEDERAL PARTICIPATING PROJECT.

CLAIMANT'S CERTIFICATION (Required for Final Payment Only)

I, _____ the _____ (contractor) certify that the work items shown herein are just and unpaid, and that the requirements of the Iowa Department of Transportation for this project, including all requirements as to maximum hours of labor and minimum wages have been complied with.

DATE _____ SIGNED CLAIMANT (CONTRACTOR)



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 5 NAME: nothing

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ na Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance na Excess B&W Print Charge \$ na

POOL 6 NAME: Veteran Affairs Printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 25.50 Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 7 NAME: Facilities Management copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 54.46 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 8 NAME: Facilities Management printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 51.00 Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE TITLE Chair, BOS DATED 12-27-22



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 1 NAME: Auditor & Elections copier

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Includes rows 1-5 and summary rows for Minimum Payment, Color Print Allowance, B&W Print Allowance, Excess Color Print Charge, and Excess B&W Print Charge.

POOL 2 NAME: Auditor & Elections printer

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Includes rows 1-5 and summary rows for Minimum Payment, Color Print Allowance, B&W Print Allowance, Excess Color Print Charge, and Excess B&W Print Charge.

POOL 3 NAME: Board of Supervisors Copier

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Includes rows 1-5 and summary rows for Minimum Payment, Color Print Allowance, B&W Print Allowance, Excess Color Print Charge, and Excess B&W Print Charge.

POOL 4 NAME: Board of Supervisors Printer

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Includes rows 1-5 and summary rows for Minimum Payment, Color Print Allowance, B&W Print Allowance, Excess Color Print Charge, and Excess B&W Print Charge.

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Signature area with fields for TITLE (chair, BOS), DATED (12-27-22), and STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE.



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 25 NAME: Sheriff Office copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 277.13 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 26 NAME: Sheriff office printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1 HPI - 3PZ75ABGJ (E42540F) - [1315 S B AVE NEVADA, IA 50201-2806]
2
3
4
5
Minimum Payment* \$ 215.13 Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 27 NAME: Environmental Health Copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 54.46 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 28 NAME:

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ Color Print Allowance Excess Color Print Charge* \$
plus applicable taxes B&W Print Allowance Excess B&W Print Charge \$

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE TITLE Chair, BOS DATED 12-27-22

Any provision in the Agreement stating that we may assign this Agreement is hereby amended and restated as follows: "We may sell, assign, or transfer this Agreement without notice to or consent from you, and you waive any right you may have to such notice or consent."

Any provision in the Agreement stating that you grant us a security interest in the Equipment to secure all amounts owed to us under any agreement is hereby amended and restated as follows: "To the extent permitted by law, you grant us a security interest in the Equipment to secure all amounts you owe us under this Agreement and any supplements hereto. You authorize and ratify our filing of any financing statement(s) and the naming of us on any vehicle title(s) to show our interest."

Any provision in the Agreement stating that a default by you under any agreement with our affiliates or other lenders shall be an event of default under the Agreement is hereby amended and restated as follows: "You will be in default if: (i) you do not pay any Payment or other sum due to us under this Agreement when due or you fail to perform in accordance with the covenants, terms and conditions of this Agreement; (ii) you make or have made any false statement or misrepresentation to us; or (iii) you dissolve, liquidate, terminate your existence or are in bankruptcy."

Any provision in the Agreement stating that you shall pay our attorneys' fees is hereby amended and restated as follows: "In the event of any dispute or enforcement of rights under this Agreement or any related agreement, you agree to pay, to the extent permitted by law and to the extent of legally available funds, our reasonable attorneys' fees (including any incurred before or at trial, on appeal or in any other proceeding), actual court costs and any other collection costs, including any collection agency fee."

Any provision in the Agreement requiring you to pay amounts due under the Agreement upon the occurrence of a default, failure to appropriate funds or failure to renew the Agreement is hereby amended to limit such requirement to the extent permitted by law and legally available funds.

3. If your end-of-term option is the purchase of all Equipment for \$1.00 or \$101.00, the following applies: Unless otherwise required by law, upon your acceptance of the Equipment, title to the Equipment shall be in your name, subject to our interest under this Agreement.

4. With respect to any "Financed Items," the following provisions shall be applicable to such Financed Items:

This Addendum concerns the granting to you of certain software and/or software license(s) ("Licensed Software"), the purchase by you of certain software components, including but not limited to, software maintenance and/or support ("Products") and/or the purchase by you of certain implementation, integration, training, technical consulting and/or professional services in connection with software ("Services") (collectively, the "Financed Items") from software licensor(s) and/or supplier(s) (collectively, the "Supplier"), all as further described in the agreement(s) between you and Supplier (collectively, the "Product Agreement"). For essential governmental purposes only, you have requested and we have agreed that instead of you paying the fees pursuant to the Product Agreement to Supplier for the Financed Items, we will satisfy your obligation to pay such fees to Supplier, and in consideration thereof, you shall repay the sums advanced by us to Supplier by promptly making certain installment payments to us, which are included in the Payments set forth in the Agreement.

To the extent permitted by law, you grant us a security interest in the license(s), including without limitation, all of your rights in the Licensed Software granted thereunder, the Products, all rights to payment under the Product Agreement, the Financed Items, and all proceeds of the foregoing to secure all amounts you owe us under this Agreement. You authorize and ratify our filing of any financing statement(s) to show our interest.

Ownership of any Licensed Software shall remain with Supplier thereof. All Financed Items shall be provided by a Supplier unrelated to us, and your rights with respect to such Financed Items shall be governed by the Product Agreement between you and Supplier, which shall not be affected by this Agreement. **IN NO EVENT SHALL WE HAVE ANY OBLIGATION TO PROVIDE ANY FINANCED ITEMS, AND ANY FAILURE OF SUPPLIER TO PROVIDE ANY FINANCED ITEMS SHALL NOT EXCUSE YOUR OBLIGATIONS TO US IN ANY WAY. YOU HAVE SELECTED SUPPLIER AND THE FINANCED ITEMS BASED UPON YOUR OWN JUDGMENT. WE DO NOT TAKE RESPONSIBILITY FOR THE INSTALLATION OR PERFORMANCE OF THE FINANCED ITEMS. SUPPLIER IS NOT AN AGENT OF OURS AND WE ARE NOT AN AGENT OF SUPPLIER, AND NOTHING SUPPLIER STATES OR DOES CAN AFFECT YOUR OBLIGATIONS HEREUNDER. YOU WILL MAKE ALL PAYMENTS UNDER THIS AGREEMENT REGARDLESS OF ANY CLAIM OR COMPLAINT AGAINST ANY SUPPLIER, LICENSOR OR MANUFACTURER, AND ANY FAILURE OF A SERVICE PROVIDER TO PROVIDE SERVICES WILL NOT EXCUSE YOUR OBLIGATIONS TO US UNDER THIS AGREEMENT. WE MAKE NO WARRANTIES, EXPRESS OR IMPLIED, AS TO THE FINANCED ITEMS COVERED BY THE PRODUCT AGREEMENT AND TAKE ABSOLUTELY NO RESPONSIBILITY FOR MERCHANTABILITY OR FITNESS FOR ANY PARTICULAR PURPOSE OR AS TO ANY PATENT, TRADEMARK OR COPYRIGHT INFRINGEMENT, CONDITION, QUALITY, ADEQUACY, TITLE, DATA ACCURACY, SYSTEM INTEGRATION, FUNCTION, DEFECTS OR ANY OTHER ISSUE IN REGARD TO THE FINANCED ITEMS. YOU HEREBY WAIVE ANY CLAIM (INCLUDING ANY CLAIM BASED ON STRICT LIABILITY OR ABSOLUTE LIABILITY IN TORT) THAT YOU MAY HAVE AGAINST US FOR ANY LOSS, DAMAGE (INCLUDING, WITHOUT LIMITATION, LOSS OF PROFITS, LOSS OF DATA OR ANY OTHER DAMAGES) OR EXPENSE CAUSED BY THE FINANCED ITEMS COVERED BY THE PRODUCT AGREEMENT OR A TERMINATION OF THE FINANCED ITEMS PURSUANT TO AN EVENT OF DEFAULT, EVEN IF WE HAVE BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGE, LOSS, EXPENSE OR COST.**

The following shall be additional events of default under the Agreement: (i) you fail to perform in accordance with the covenants, terms and conditions of the Product Agreement, or (ii) the Product Agreement is terminated, suspended, materially restricted or limited.

The following shall be additional remedies we have for your default under the Agreement: We shall have the right to: (a) cause the termination of the Financed Items and you irrevocably consent to such termination of the Financed Items by Supplier; and (b) require you to immediately stop using the Financed Items (regardless of whether you are in default under the Product Agreement) and you shall, at our option, either deliver to us a certification executed by a duly authorized officer certifying that you have ceased use of the Financed Items or deliver the Financed Items to a location designated by us. In the event you are entitled to transfer the right to use the Financed Items to any third party, you hereby agree to transfer any such right to use the Financed Items to any third party selected by us and acknowledge that you shall have no right to fees payable by any third party in connection with such transfer. However, we shall not be required to mitigate our damages caused by a default by transferring any Financed Items to a third party.

By signing this Addendum, Customer acknowledges the applicable changes noted above are incorporated by reference into the Agreement. In all other respects, the terms and conditions of the Agreement remain in full force and effect and remain binding on Customer. In the event of any conflict between the terms and conditions of the Agreement and this Addendum, the terms and conditions of this Addendum shall control. Customer has caused this Addendum to be executed by its duly authorized officer as of the date below.

LESSOR ACCEPTANCE

CUSTOMER ACCEPTANCE

Marco Technologies LLC

STORY COUNTY OF

LESSOR

CUSTOMER

X

SIGNATURE

SIGNATURE

TITLE

DATE

Chair, BOS

12.27.20

TITLE

DATE

NOTE: CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.



STATE AND LOCAL GOVERNMENT ADDENDUM

AGREEMENT NO. 1694448-001

Phone: 800.892.8548 | Fax: 800.847.3087

Addendum to Agreement # _____ and any future supplements/schedules thereto, between _____, as Customer and Marco Technologies LLC, as Lessor ("Agreement"). The words "you" and "your" refer to Customer. The words "we," "us" and "our" refer to Lessor.

1. The parties wish to amend the above-referenced Agreement by adding the following language:

REPRESENTATIONS AND WARRANTIES OF CUSTOMER: You hereby represent and warrant to us that: (i) you have been duly authorized under the Constitution and laws of the applicable jurisdiction and by a resolution or other authority of your governing body to execute and deliver this Agreement and to carry out your obligations hereunder; (ii) all legal requirements have been met, and procedures have been followed, including public bidding, in order to ensure the enforceability of this Agreement; (iii) this Agreement is in compliance with all laws applicable to you, including any debt limitations or limitations on interest rates or finance charges; (iv) the Equipment will be used by you only for essential governmental or proprietary functions of you consistent with the scope of your authority, will not be used in a trade or business of any person or entity, by the federal government or for any personal, family or household use, and your need for the Equipment is not expected to diminish during the term of this Agreement; (v) you have funds available to pay Payments until the end of your current appropriation period, and you intend to request funds to make Payments in each appropriation period, from now until the end of the term of this Agreement; and (vi) your exact legal name is as set forth on page one of this Agreement.

INITIAL TERM AND RENEWAL TERM(S): The term of the Agreement consists of an initial term beginning on the date we pay Supplier and ending at the end of your fiscal year in which we pay Supplier, and a series of renewal terms, each co-extensive with your fiscal year. Except to the extent required by applicable law, if you do not exercise your right to terminate the Agreement under the Non-Appropriation or Renewal paragraph as of the end of any fiscal year, the Agreement will be deemed automatically renewed for the next succeeding renewal term.

An election by you to terminate the Agreement under the Non-Appropriation or Renewal paragraph is not a default. Notwithstanding anything to the contrary set forth in the Agreement, if we cancel the Agreement following a default by you, we may require that you pay the unpaid balance of Payments under the Agreement through the end of your then-current fiscal year, but we may not require you to pay future Payments due beyond that fiscal year or the anticipated residual value of the Equipment. If we sell the Equipment following a default by you, you will not be responsible for a deficiency, except to the extent of our costs of repossession, moving, storage, repair and sale, and our attorneys' fees and costs.

NON-APPROPRIATION OR RENEWAL: If either sufficient funds are not appropriated to make Payments or any other amounts due under this Agreement or (to the extent required by applicable law) this Agreement is not renewed either automatically or by mutual ratification, this Agreement shall terminate and you shall not be obligated to make Payments under this Agreement beyond the then-current fiscal year for which funds have been appropriated. Upon such an event, you shall, no later than the end of the fiscal year for which Payments have been appropriated or the term of this Agreement has been renewed, deliver possession of the Equipment to us. If you fail to deliver possession of the Equipment to us, the termination shall nevertheless be effective but you shall be responsible, to the extent permitted by law and legally available funds, for the payment of damages in an amount equal to the portion of Payments thereafter coming due that is attributable to the number of days after the termination during which you fail to deliver possession and for any other loss suffered by us as a result of your failure to deliver possession as required. You shall notify us in writing within seven days after (i) your failure to appropriate funds sufficient for the payment of the Payments or (ii) to the extent required by applicable law, (a) this Agreement is not renewed or (b) this Agreement is renewed by you (in which event this Agreement shall be mutually ratified and renewed), provided that your failure to give any such notice under clause (i) or (ii) of this sentence shall not operate to extend this Agreement or result in any liability to you.

SUPPLEMENTS; SEPARATE FINANCINGS: To the extent applicable, in the event that the parties hereafter mutually agree to execute and deliver any supplement or schedule ("Supplement") under the above-referenced Agreement, such Supplement, as it incorporates the terms and conditions of the Agreement, shall be a separate financing distinct from the Agreement or other Supplements thereto. Without limiting the foregoing, upon the occurrence of an event of default or a non-appropriation event with respect to the Agreement or a Supplement (each, a separate "Contract"), as applicable, we shall have the rights and remedies specified in the Agreement with respect to the Equipment financed and the Payments payable under such Contract, and we shall have no rights or remedies with respect to Equipment financed or Payments payable under any other Contract unless an event of default or non-appropriation event has also occurred under such other Contract.

2. The parties wish to amend the above-referenced Agreement by restating certain language as follows:

Any provision in the Agreement stating that you shall indemnify and hold us harmless is hereby amended and restated as follows: "You shall not be required to indemnify or hold us harmless against liabilities arising from this Agreement. However, as between you and us, and to the extent permitted by law and legally available funds, you are responsible for and shall bear the risk of loss for, shall pay directly, and shall defend against any and all claims, liabilities, proceedings, actions, expenses, damages or losses arising under or related to the Equipment, including, but not limited to, the possession, ownership, lease, use or operation thereof, except that you shall not bear the risk of loss of, nor pay for, any claims, liabilities, proceedings, actions, expenses, damages or losses that arise directly from events occurring after you have surrendered possession of the Equipment in accordance with the terms of this Agreement to us or that arise directly from our gross negligence or willful misconduct."

Any provision in the Agreement stating that the Agreement is governed by a particular state's laws and you consent to such jurisdiction and venue is hereby amended and restated as follows: "This Agreement will be governed by and construed in accordance with the laws of the state where you are located. You consent to jurisdiction and venue of any state or federal court in such state and waive the defense of inconvenient forum."

Any provision in the Agreement stating this Agreement supersedes any invoice and/or purchase order is hereby amended and restated as follows: "You agree that the terms and conditions contained in this Agreement, which, with the acceptance certification, is the entire agreement between you and us regarding the Equipment and which supersedes any purchase order, invoice, request for proposal, response or other related document."

Any provision in the Agreement stating that this Agreement shall automatically renew unless the Equipment is purchased, returned or a notice requirement is satisfied is hereby amended and restated as follows: "Unless the purchase option is \$1.00 or \$101.00, you agree to send us written notice at least 30 days before the end of the final renewal term that you want to purchase or return the Equipment, and you agree to so purchase or return the Equipment not later than the end of the final renewal term. If you fail to so purchase or return the Equipment at or before the end of the final renewal term, you shall be a holdover tenant with respect to this Agreement and the Equipment, and this Agreement shall renew on a month-to-month basis under the same terms hereof until the Equipment has been purchased or returned."

NOTE: CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 21 NAME: Conservation printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 16.54 Color Print Allowance 0 Excess Color Print Charge* \$ 0.090000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 22 NAME: Engineering office copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 54.46 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 23 NAME: Engineering Office Printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 28.36 Color Print Allowance 0 Excess Color Print Charge* \$ 0.090000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 24 NAME: C911 Service printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 14.75 Color Print Allowance 0 Excess Color Print Charge* \$ 0.090000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE TITLE char, BOS DATED 12.27.22



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 17 NAME: County Attorney copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 269.04 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 18 NAME: County Attorney printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 38.39 Color Print Allowance 0 Excess Color Print Charge* \$ 0.090000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 19 NAME: Animal Shelter copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 54.46 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 20 NAME: Conservation copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 149.26 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE TITLE DATED 12-27-02



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 13 NAME: Treasurer copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 62.47 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 14 NAME: Treasurer printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 26.52 Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

POOL 15 NAME: Community Services copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 76.82 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 16 NAME: nothing

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ na Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance na Excess B&W Print Charge \$ na

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

STORY COUNTY OF CUSTOMER (as referenced above) SIGNATURE TITLE char, BOS DATED 12-27-22



Pool Billing Schedule

APPLICATION NO. 1833606

AGREEMENT NO. 1694448-001

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyowa.gov

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 9 NAME: Information Technology Copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 54.46 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 10 NAME: Planning & Development copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 61.70 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 11 NAME: Recorder Copier

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 60.37 Color Print Allowance 0 Excess Color Print Charge* \$ 0.035000
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.003500

POOL 12 NAME: Recorder Printer

Pool Location: MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1
2
3
4
5
Minimum Payment* \$ 9.08 Color Print Allowance na Excess Color Print Charge* \$ na
plus applicable taxes B&W Print Allowance 0 Excess B&W Print Charge \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

SIGNATURE TITLE chair, BOS DATED 12-27-22

STORY COUNTY OF CUSTOMER (as referenced above)



MAP Supplement

| | | |
|----------------------------|---------------------------------|-------------------------------|
| APPLICATION NO. 1833606 | MASTER AGREEMENT NO. 1694448 | SUPPLEMENT NO. 1694448-001 |
|----------------------------|---------------------------------|-------------------------------|

Meter Reading Contact Person: Tim Patterson tpatterson@storycountyiowa.gov

CUSTOMER INFORMATION

| | | | | |
|--|-------------|--------------|--|--|
| FULL LEGAL NAME STORY COUNTY OF | | | STREET ADDRESS 900 SIXTH ST | |
| CITY NEVADA | STATE IA | ZIP 50201 | PHONE (515)382-6581 | |
| BILLING NAME (IF DIFFERENT FROM ABOVE) | | | BILLING STREET ADDRESS | |
| CITY | STATE | ZIP | E-MAIL bsteinback@storycountyiowa.gov | |

EQUIPMENT WITH CONSOLIDATED MINIMUMS - ADDED

| MAKE/MODEL/ACCESSORIES | SERIAL NUMBER | START METER COLOR | START METER BW |
|-----------------------------|---------------|-------------------|----------------|
| 1 See Attached Pool Billing | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Minimum Payment* \$ See Attached Color Print Allowance See Attached Excess Color Print Charge* \$ See Attached
 B&W Print Allowance See Attached Excess B&W Print Charge* \$ See Attached
 *plus applicable taxes

EQUIPMENT WITH CONSOLIDATED MINIMUMS - DELETED

| MAKE/MODEL/ACCESSORIES | SERIAL NUMBER | END METER COLOR | END METER BW |
|------------------------|---------------|-----------------|--------------|
| 1. | | | |
| 2. | | | |

MARCO SUPPORT DESK (By selecting "YES" you agree that the Marco Support Desk Monthly Fee will be added to this Supplement's monthly invoice.)

| | | | | | |
|--|---|---|---|--|--|
| | Do you wish to enroll in the Marco Support Desk for equipment listed herein? <input checked="" type="checkbox"/> Yes OR <input type="checkbox"/> No | Combined Total of all Equipment Enrolled: <div style="border: 1px solid black; padding: 2px; display: inline-block;">16+</div> | Marco Support Desk Device Monthly Fees 1 - 5 Devices: \$10 6 - 15 Devices: \$20 16+ Devices: \$30 | | |
| | If enrolled, the equipment on this Agreement will qualify for Marco Support Desk. If no box is checked, then you have elected to waive Marco Support Desk coverage for equipment listed herein. | | | | |

FREQUENCY OF MINIMUM PAYMENT

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

METER READING FREQUENCY

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

TERM (Complete One Term Option)

Mos. Term applies to this Agreement (as defined below) only.
 53 Mos. The end of term of this Agreement shall coincide with the end of term date set forth in the above-referenced Master Agreement and/or previous supplement(s), as applicable.

SUPPLIES COVERAGE LEVELS: Please Check One: All Inclusive HP OEM No Supplies Included
 (If no box is checked, no supplies will be included) (Billed at Standard Pricing)

OWNER ACCEPTANCE

Print Name: _____ Signature: _____ Title: _____
 Owner: **Marco Technologies, LLC** Dated: _____

PRIVACY AND INFORMATION SECURITY

You acknowledge that the Equipment you have received may be equipped with a hard drive that may store personal and confidential information ("PCI") and you understand the privacy and information security risks associated with PCI that may be stored on your Equipment. You agree to be responsible for safeguarding any PCI and you agree to indemnify and hold Marco Technologies LLC harmless from any loss, misappropriation or breach of the PCI that may be stored on your Equipment.

| | | |
|--------------------------------|--|-------------------------|
| STORY COUNTY OF | | TITLE <u>Chair, BOS</u> |
| CUSTOMER (as referenced above) | | DATED <u>12-27-22</u> |
| SIGNATURE | | |

CUSTOMER ACCEPTANCE

The "Master Agreement" refers to the MAP Agreement between Customer and Owner identified in Owner's records by the Master Agreement no. referenced above. This MAP Supplement incorporates by reference the terms and conditions of the Master Agreement and constitutes an agreement between you and us with respect to the Equipment referenced herein, separate and distinct from the Master Agreement. We agree to rent to you the Equipment described above on the terms set forth in this MAP Supplement, together with the terms and conditions set forth in the Master Agreement (collectively, the "Agreement"). If any provision in this MAP Supplement conflicts with a provision in the Master Agreement, the provision in this MAP Supplement shall control. **BY SIGNING BELOW OR AUTHENTICATING AN ELECTRONIC RECORD HEREOF, YOU CERTIFY THAT YOU HAVE REVIEWED AND DO AGREE TO ALL TERMS AND CONDITIONS OF THE MASTER AGREEMENT AND THIS MAP SUPPLEMENT.**

| | | |
|--------------------------------|--|-------------------------|
| STORY COUNTY OF | | TITLE <u>Chair, BOS</u> |
| CUSTOMER (as referenced above) | | DATED <u>12-27-22</u> |
| SIGNATURE | | |

42-6005024
 FEDERAL TAX I.D. # _____ PRINT NAME Latifah Taisal Page 1 of 1
 Confidential

STORY COUNTY UTILITY PERMIT

Date 12/19/22

To the Board of Supervisors, Story County, Iowa:

The Alliant Energy (IP&L) Company, incorporated under the laws of Iowa, with its principal place of business at 1284 XE Place Ames IA 50014, does hereby make application requesting permission to occupy certain portions of public right-of-way and that the County Engineer be directed to establish the location of lines of transmission of underground electricity on secondary route 585th Ave, from Cambridge, IA town limits to HWY 210, a distance of .4 miles.

Agreements: The utility company, corporation, applicant, permittee, or licensee, (hereinafter referred to as the permittee) agrees that the following stipulations shall govern under this permit.

1. The Permittee will file a plat setting out the location of proposed line on the secondary route and that the description of the proposed installation including type, height, and spacing of poles, maximum voltage, lengths of cross arms, minimum clearance and number of wires, type, size and capacity of underground cables, conduits, tile lines, and pipe lines, maximum working pressures for pipe lines carrying gas or flammable petroleum products are described as follows:
2. The installation shall meet the requirements of county, state, and federal laws, franchise rules, and of the Iowa State Commerce Commission Regulations and Directives, Utilities Division, the Iowa State Department of Health, and any other laws or regulations applicable.
3. The Permittee shall be fully responsible for any future adjustments of its facilities within the established highway right-of-way caused by highway construction or maintenance operations.
4. Story County assumes no responsibility for damages to the Permittee's property occasioned by any construction or maintenance operations on said highways.
5. The Permittee shall take all reasonable precautions during the construction and maintenance of said installation to protect and safeguard the lives and property of the traveling public and adjacent property owners.
6. The Permittee, and its contractors, shall carry on the construction or repair of the accommodated utility with serious regard to the safety of the public. Traffic protection shall be in accordance with Part VI of the current Iowa Department of Transportation Manual on Uniform Control Devices for Streets and Highways.
7. The Permittee shall be responsible for any damage resulting to said highways because of the construction operation, or maintenance of said utility, and shall reimburse Story County for any expenditure the County may have to make on said highways because of said permittee's utility having been constructed, operated, and maintained thereon.
8. The Permittee shall indemnify and save harmless Story County from any and all causes of action, suits at law or in equity, or losses, damages, claims, or demands, and from any and all

liability and expense of whatsoever nature for, on account of or due to the acts or omissions of said Permittee's officers, members, agents, representatives, contractors, employees or assigns arising out of or in connection with its (or their) use or occupancy of the public highway under this permit.

9. Noncompliance with any of the terms of permit, or agreement, may be considered cause for shut down of utility construction operations, or revocation of the permit.

10. The following special requirements, if applicable, shall apply to this permit:

Whenever the route of the proposed cable line runs along a paved secondary highway, the location of said cable shall be constructed on top of the road shoulder so as to be within approximately two-feet of the pavement edge.

Whenever the route of the proposed cable line runs along a dirt or gravel surfaced highway, the location of said cable shall be constructed on top of the road surface and as near possible to the shoulder line

Whenever a cross road culvert or bridge is encountered along the route of the proposed cable lines, said cable shall be constructed around the ends of said cross road culvert or bridge even though this looping is not designated on the situation plans attached hereto.

The crossing of the cable line from one side of the highway to the other shall be accomplished at a near right angle rather than diagonally so as to disturb the roadbed of the traveled way as little as possible.

Whenever the route of the proposed cable line is to cross a paved highway, such crossing shall be in a bored hole rather than open cut trench.

Date _____

Name of Company (Applicant - Permittee)

Josh Long *Josh Long* 515-465-7412
by _____ Phone no.

Recommended for Approval:

Date 12-19-22

Dawn Mon

County Engineer Phone no. 515-382-7355

Approved:

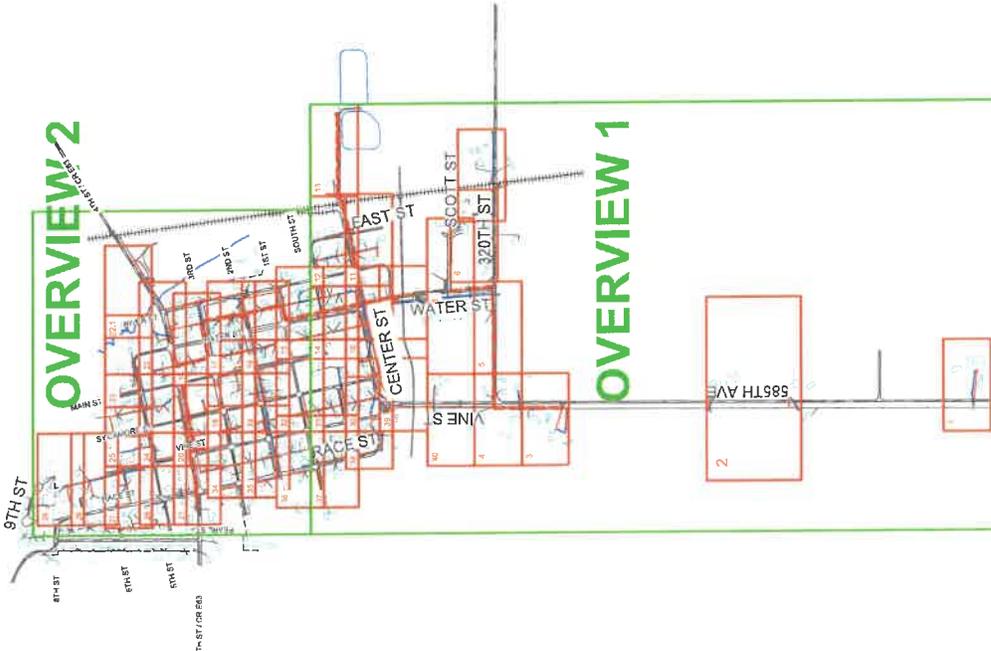
Date 12-27-22

[Signature]

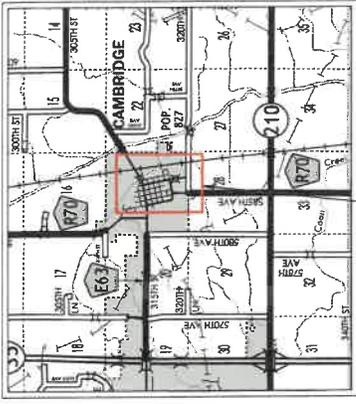
Chair, Board of Supervisors
Story County, Iowa

Three (3) copies of this form will be required for each installation. A plat shall be attached to each copy submitted.

UTILITIES SHOWN ON THIS PLAN ARE INDICATED IN ACCORDANCE WITH AVAILABLE RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING EXACT LOCATIONS AND DEPTHS OF ALL UTILITIES FROM FIELD VERIFICATION AND CONTACT WITH UTILITY OWNERS. CONTRACTOR IS TO FOLLOW NESC CODE AND ALLIANT ENERGY I.P.L. CONSTRUCTION STANDARDS AT ALL TIMES. GUYING, ANCHORING, AND OTHERS WITH LOCATIONS AND DEPTHS FROM FIELD VERIFICATION. LOCATIONS AND DEPTHS FROM FIELD VERIFICATION ARE TO BE USED AS EXACT. SOME INTENDED STRUCTURE LOCATIONS AND DIRECTIONS ARE MANIPULATED FOR DRAWING NEATNESS AND CLARITY. FIELD VERIFICATION LOCATIONS REQUIRED PRIOR TO CONSTRUCTION. RIGHT OF WAY AND PARCELS ARE DEPICTED IN ACCORDANCE WITH AVAILABLE COUNTY GIS DATA.



VICINITY MAP



PROJECT LOCATION

PROJECT CONTACTS

CONTRACT DESIGNER:
DYLAN VASSAR
(920) 392-2495 (CELL)

ALLIANT ENERGY ENGINEER:
JOSH LONG
(515) 401-2121 (CELL)

IOWA ONE CALL:
(800)-232-6989 OR 811

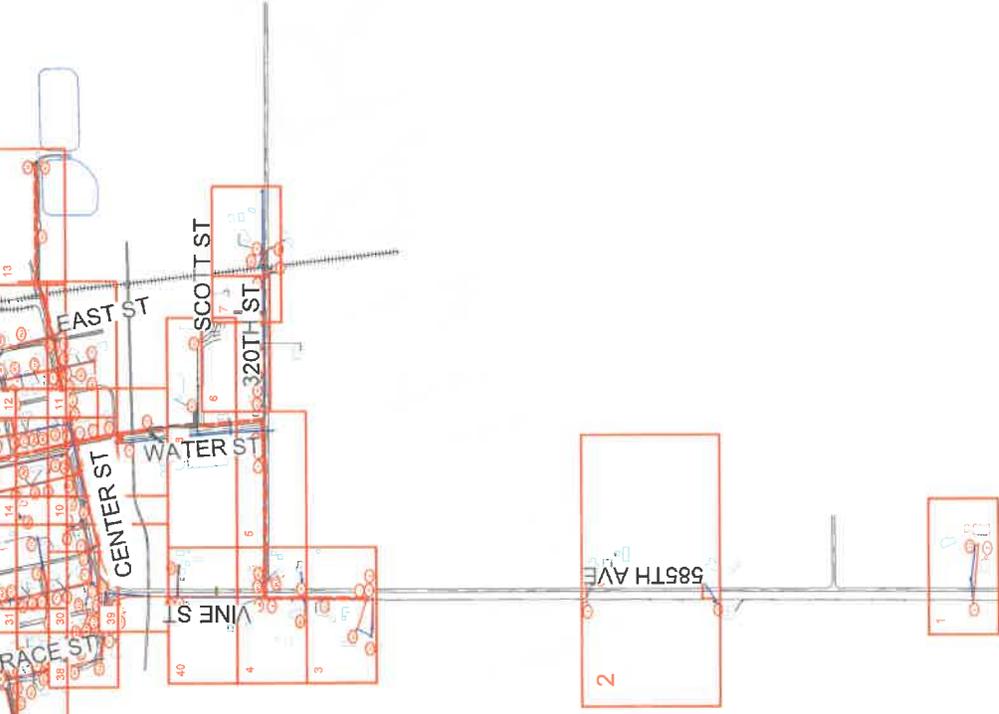
PERMITS REQUIRED:
STORY COUNTY &
UP RAILROAD



ALLIANT ENERGY HAS DIRECTED THAT ENGINEERING RISING TO THE LEVEL OF PROFESSIONAL ENGINEERING IS NOT REQUIRED OR INTENDED FOR THIS PLAN. A MI-TECH ENGINEER DOES NOT REVIEW THE PLAN SET, INCLUDING ALL CALCULATIONS OR ANALYSIS, FOR THE INTENT OF PROVIDING PROFESSIONAL ENGINEERING SERVICES. ALL PROFESSIONAL ENGINEERING OR DESIGN ISSUES OR QUESTIONS SHALL BE DIRECTED TO ALLIANT ENERGY. MI-TECH WILL USE INDUSTRY STANDARDS FOR REVIEWS AND COMPLETION OF THE SCOPE OF SERVICES FOR ALLIANT ENERGY.

| | | | | | | | | | |
|---|--|--|--|---|--|----------------------------------|--|-----------------|--|
|  | |  | | ALLIANT ENERGY WORK REQUEST # 4269171 | | LOCATION: CAMBRIDGE, IA | | | |
| LINETYPES | | SYMBOL LEGEND | | FILED BY: D.V. 6/4/2021 | | DATE: 6/4/2021 | | | |
| EXISTING SECONDARY SERVICE NEW SECONDARY NEW 3PH LINE IUG NEW 3PH LINE UG EXISTING LINE IUG EXISTING LINE UG EXISTING LINE OH NEW 3PH LINE OH NEW 3PH LINE OH | | TRANSMISSION POLE NEW POLE EXISTING CAPACITOR NEW CAPACITOR EXISTING SWITCH N.O. NEW SWITCH N.O. EXISTING SWITCH N.C. NEW SWITCH N.C. EXISTING GROUND NEW GROUND EXISTING TRANSFORMER 3PH PAD MOUNTED NEW TRANSFORMER 3PH PAD MOUNTED EXISTING TRANSFORMER 1PH PAD MOUNTED NEW TRANSFORMER 1PH PAD MOUNTED EXISTING TRANSFORMER 3PH POLE MOUNTED NEW TRANSFORMER 3PH POLE MOUNTED EXISTING TRANSFORMER 2PH POLE MOUNTED NEW TRANSFORMER 2PH POLE MOUNTED EXISTING TRANSFORMER 1PH POLE MOUNTED NEW TRANSFORMER 1PH POLE MOUNTED EXISTING | | NEW POLE POWER POLE NEW WARNING MARKER METER PHASING SERIS STREET LIGHT COMM. PEDESTAL | | DRAFTED BY: R.L. 12/8/2022 | | DATE: 12/8/2022 | |
| DESIGNING SECONDARY SERVICE NEW 3PH LINE UG NEW 3PH LINE UG EXISTING LINE IUG EXISTING LINE UG EXISTING LINE OH NEW 3PH LINE OH NEW 3PH LINE OH | | ANCHOR NEW ANCHOR EXISTING FLUSE NEW FLUSE EXISTING GROUND NEW GROUND EXISTING | | DESIGNED BY: D.V. UNKNOWN | | DATE: UNKNOWN | | | |
| EXISTING SECONDARY SERVICE NEW SECONDARY NEW 3PH LINE UG NEW 3PH LINE UG EXISTING LINE IUG EXISTING LINE UG EXISTING LINE OH NEW 3PH LINE OH NEW 3PH LINE OH | | TRANSFORMER 3PH PAD MOUNTED NEW TRANSFORMER 3PH PAD MOUNTED EXISTING TRANSFORMER 1PH PAD MOUNTED NEW TRANSFORMER 1PH PAD MOUNTED EXISTING TRANSFORMER 3PH POLE MOUNTED NEW TRANSFORMER 3PH POLE MOUNTED EXISTING TRANSFORMER 2PH POLE MOUNTED NEW TRANSFORMER 2PH POLE MOUNTED EXISTING TRANSFORMER 1PH POLE MOUNTED NEW TRANSFORMER 1PH POLE MOUNTED EXISTING | | APPROVAL DATE: A.S. | | IOWA REG. APPROVAL DATE: A.S. | | | |

UTILITIES SHOWN ON THIS PLAN ARE INDICATED IN ACCORDANCE WITH AVAILABLE RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING EXACT LOCATIONS AND DEPTHS OF ALL UTILITIES FROM FIELD VERIFICATION AND CONTACT WITH UTILITY OWNERS. CONTRACTOR IS TO FOLLOW NESC CODE AND ALLIANT ENERGY IPL CONSTRUCTION STANDARDS AT ALL TIMES. GUYING, ANCHORING, POLE LOCATION AND CONDUCTOR ARE SHOWN TO REFLECT GENERAL FIELD CONDITIONS AND SHOULD NOT BE INTERPRETED AS EXACT. SOME INTENDED STRUCTURE LOCATIONS AND DIRECTIONS ARE MANIPULATED FOR DRAWING NEATNESS AND CLARITY. FIELD VERIFICATION IS REQUIRED PRIOR TO CONSTRUCTION. RIGHT OF WAY AND PARCELS ARE DEPICTED IN ACCORDANCE WITH AVAILABLE COUNTY GIS DATA.



mi-tech
 800.465.6100
 1001 1st Ave - Urbandale, IA 50319

ALLIANT ENERGY HAS DIRECTED THAT ENGINEERING RISING TO THE LEVEL OF PROFESSIONAL ENGINEERING IS NOT REQUIRED OR INTENDED FOR THIS PLAN. A MI-TECH ENGINEER DOES NOT REVIEW THE PLAN SET, INCLUDING ALL CALCULATIONS OR ANALYSIS, FOR THE INTENT OF PROVIDING PROFESSIONAL ENGINEERING SERVICES. ALL PROFESSIONAL ENGINEERING OR DESIGN ISSUES OR QUESTIONS SHALL BE DIRECTED TO ALLIANT ENERGY. MI-TECH WILL USE INDUSTRY STANDARDS FOR REVIEWS AND COMPLETION OF THE SCOPE OF SERVICES FOR ALLIANT ENERGY.

ALLIANT ENERGY WORK REQUEST # 4269171 **LOCATION:** CAMBRIDGE, IA

FIELD BY: D.V. **DATE:** 6/4/2021
DRAWN BY: R.L. **DATE:** 12/8/2022
DESIGNED BY: D.V. **DATE:** UNKNOWN
IOVA PE: A. S. **APPROVAL DATE:**

SYMBOL LEGEND

| | | | | | | | |
|----------------------------------|---------------------------------------|-----------------------|----------------------------|------------------------|------------------------|----------------|--------------------|
| TRANSFORMER 3PH PAD MOUNTED NEW | TRANSFORMER 3PH PAD MOUNTED EXISTING | TRANSMISSION POLE NEW | TRANSMISSION POLE EXISTING | CAPACITOR NEW | CAPACITOR EXISTING | NEW POLE | POWER PEG EXISTING |
| TRANSFORMER 3PH PAD MOUNTED NEW | TRANSFORMER 3PH PAD MOUNTED EXISTING | POLE EXISTING | POLE EXISTING | ANCHOR NEW | ANCHOR EXISTING | WARNING MARKER | WARNING MARKER |
| TRANSFORMER 3PH POLE MOUNTED NEW | TRANSFORMER 3PH POLE MOUNTED EXISTING | ANCHOR NEW | ANCHOR EXISTING | SWITCH I.O. NEW | SWITCH I.O. EXISTING | METER | METER |
| TRANSFORMER 3PH POLE MOUNTED NEW | TRANSFORMER 3PH POLE MOUNTED EXISTING | FUSE NEW | FUSE EXISTING | SWITCH I.N.C. NEW | SWITCH I.N.C. EXISTING | PHASING | PHASING |
| TRANSFORMER 3PH POLE MOUNTED NEW | TRANSFORMER 3PH POLE MOUNTED EXISTING | GROUND NEW | GROUND EXISTING | STREET LIGHT | STREET LIGHT | SOFS | SOFS |
| TRANSFORMER 3PH POLE MOUNTED NEW | TRANSFORMER 3PH POLE MOUNTED EXISTING | GROUND NEW | GROUND EXISTING | SWITCH I.N.C. EXISTING | SWITCH I.N.C. EXISTING | ODUM FESTIVAL | ODUM FESTIVAL |

LINE TYPES

| | | | | | | | | |
|----------------------------|-----------------|-----------------|------------------|------------------|-----------------|-----------------|----------|-----------|
| EXISTING SECONDARY SERVICE | EASEMENT | GAS | WATER | ELECTRICAL | STORM | SANITARY | CABLE TV | TELEPHONE |
| NEW 3PH LINE UG | NEW 3PH LINE UG | NEW 3PH LINE UG | EXISTING LINE UG | EXISTING LINE OH | NEW 3PH LINE OH | NEW 3PH LINE OH | | |

Alliant Energy

OVERVIEW

UTILITIES SHOWN ON THIS PLAN ARE INDICATED IN ACCORDANCE WITH AVAILABLE RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING EXACT LOCATIONS AND DEPTHS OF ALL UTILITIES FROM FIELD VERIFICATION AND CONTACT WITH UTILITY OWNERS. CONTRACTOR IS TO FOLLOW THE IOWA ELEC. CODE AND ALL APPLICABLE REGULATIONS. ALL UTILITIES, INCLUDING GAS, WATER, SANITARY, AND CABLE TV, SHALL BE SHOWN TO REFLECT GENERAL REAL WORLD LOCATIONS AND DIRECTIONS, AND SHOULD NOT BE INTERPRETED AS EXACT. SOME INTENDED STRUCTURE LOCATIONS AND DIRECTIONS ARE MANIPULATED FOR DRAWING NEATNESS AND CLARITY. FIELD VERIFICATION IS REQUIRED PRIOR TO CONSTRUCTION. RIGHT OF WAY AND PARCELS ARE DEPICTED IN ACCORDANCE WITH AVAILABLE COUNTY GIS DATA.



ALLIANT ENERGY HAS DIRECTED THAT ENGINEERING RISING TO THE LEVEL OF PROFESSIONAL ENGINEERING IS NOT REQUIRED OR INTENDED FOR THIS PLAN. A MI-TECH ENGINEER DOES NOT REVIEW THE PLAN SET INCLUDING ALL CALCULATIONS OR ANALYSIS, FOR THE INTENT OF PROVIDING PROFESSIONAL ENGINEERING SERVICES. ALL PROFESSIONAL ENGINEERING OR DESIGN ISSUES OR QUESTIONS SHALL BE DIRECTED TO ALLIANT ENERGY. MI-TECH WILL USE INDUSTRY STANDARDS FOR REVIEWS AND COMPLETION OF THE SCOPE OF SERVICES FOR ALLIANT ENERGY.

| | | | | | | | |
|---|--|---|--|---|--|-----------------------------------|--|
|  | |  | | ALLIANT ENERGY WORK REQUEST # 4269171 | | LOCATION: CAMBRIDGE, IA | |
| FIELD BY: D.V. | | DATE: 6/4/2021 | | DESIGNED BY: D.V. | | APPROVAL DATE: UNKNOWN | |
| DRAFTED BY: R.L. | | DATE: 12/8/2022 | | DESIGNED BY: D.V. | | APPROVAL DATE: UNKNOWN | |
| DATE: UNKNOWN | | DATE: UNKNOWN | | DESIGNED BY: D.V. | | APPROVAL DATE: UNKNOWN | |

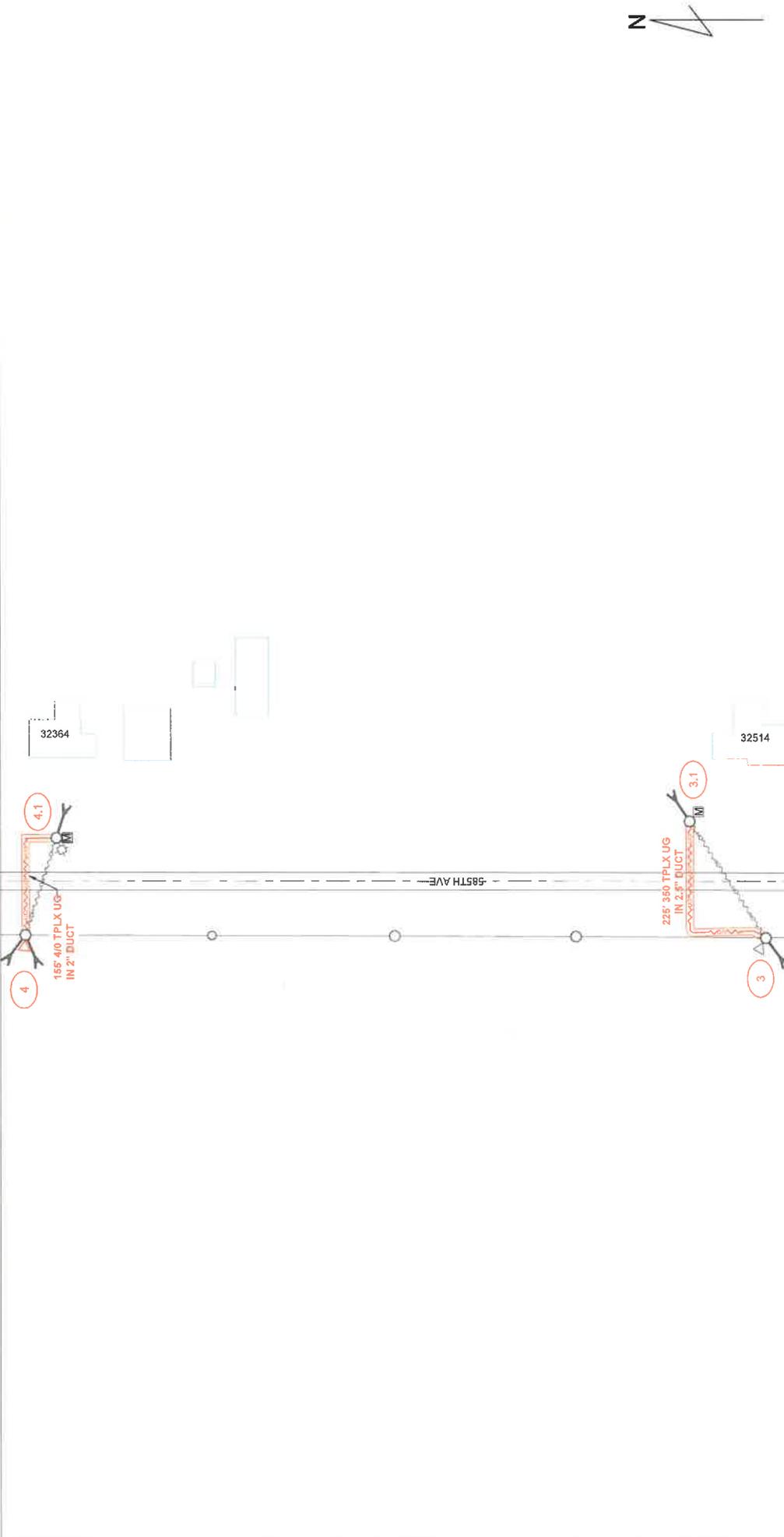
LINETYPES

| | |
|----------------------------|-----|
| EXISTING SECONDARY SERVICE | --- |
| NEW SECONDARY | --- |
| NEW 3PH LINE UG | --- |
| NEW 3PH LINE OH | --- |
| EXISTING LINE UG | --- |
| EXISTING LINE OH | --- |
| NEW 3PH LINE OH | --- |
| NEW 3PH LINE OH | --- |

SYMBOL LEGEND

| | |
|---------------------------------------|---|
| TRANSMISSION POLE NEW | ○ |
| TRANSMISSION POLE EXISTING | ○ |
| ANCHOR NEW | ○ |
| ANCHOR EXISTING | ○ |
| FUSE NEW | ○ |
| FUSE EXISTING | ○ |
| GROUND NEW | ⊕ |
| GROUND EXISTING | ⊕ |
| TRANSFORMER 3PH PAD MOUNTED NEW | ⊗ |
| TRANSFORMER 3PH PAD MOUNTED EXISTING | ⊗ |
| TRANSFORMER 1PH PAD MOUNTED NEW | ⊗ |
| TRANSFORMER 1PH PAD MOUNTED EXISTING | ⊗ |
| TRANSFORMER 3PH POLE MOUNTED NEW | ⊗ |
| TRANSFORMER 3PH POLE MOUNTED EXISTING | ⊗ |
| TRANSFORMER 1PH POLE MOUNTED NEW | ⊗ |
| TRANSFORMER 1PH POLE MOUNTED EXISTING | ⊗ |
| SWITCH NEW | ⊕ |
| SWITCH EXISTING | ⊕ |
| SWITCH M.C. NEW | ⊕ |
| SWITCH M.C. EXISTING | ⊕ |
| STREET LIGHT | ⊕ |
| COMM. FOOTSTAL | ⊕ |

UTILITIES SHOWN ON THIS PLAN ARE INDICATED IN ACCORDANCE WITH AVAILABLE RECORDS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING EXACT LOCATIONS AND DEPTHS OF ALL UTILITIES FROM FIELD VERIFICATION AND CONTACT WITH UTILITY OWNERS. CONTRACTOR IS TO FOLLOW NESC CODE AND ALLIANT ENERGY IPL CONSTRUCTION STANDARDS AT ALL TIMES. GUYING, ANCHORING, POLE LOCATION AND CONDUCTOR ARE SHOWN TO REFLECT GENERAL REAL WORLD LOCATIONS AND DIRECTION, AND SHOULD NOT BE INTERPRETED AS EXACT. SOME INTENDED STRUCTURE LOCATIONS AND DIRECTIONS ARE MANIPULATED FOR DRAWING NEATNESS AND CLARITY. FIELD VERIFICATION IS REQUIRED PRIOR TO CONSTRUCTION. RIGHT OF WAY AND PARCELS ARE DEPICTED IN ACCORDANCE WITH AVAILABLE COUNTY GIS DATA.



mi-tech
 P.O. Box 1000 • Green Bay, Wisconsin • 920.663.6636

LINE TYPES

| | |
|----------------------------|------------|
| EXISTING SECONDARY SERVICE | BASEMENT |
| NEW 3PH LINE UG | GAS |
| NEW 3PH LINE UG | WATER |
| EXISTING LINE UG | ELECTRICAL |
| EXISTING LINE OH | STORM |
| NEW 3PH LINE OH | SANITARY |
| NEW 3PH LINE OH | CABLE TV |
| NEW 3PH LINE OH | TELEPHONE |

SYMBOL LEGEND

| | |
|---------------------------------------|----------------------|
| TRANSFORMER 3PH PAD MOUNTED NEW | NEW POLE |
| TRANSFORMER 3PH PAD MOUNTED EXISTING | POWER FED NEW |
| TRANSFORMER 3PH PAD MOUNTED NEW | POWER FED EXISTING |
| TRANSFORMER 3PH PAD MOUNTED EXISTING | WARNING MARKER |
| ANCHOR NEW | WETTERS |
| ANCHOR EXISTING | CHASING |
| FUSE NEW | SIGNS |
| FUSE EXISTING | STREET LIGHT |
| GROUND NEW | SWITCH N.C. EXISTING |
| GROUND EXISTING | SWITCH N.C. EXISTING |
| TRANSFORMER 3PH POLE MOUNTED NEW | SWITCH N.C. EXISTING |
| TRANSFORMER 3PH POLE MOUNTED EXISTING | SWITCH N.C. EXISTING |

ALLIANT ENERGY WORK REQUEST # 4269171 **LOCATION:** CAMBRIDGE, IA

FILED BY: D.V. **DATE:** 6/4/2021

DRAWN BY: R.L.L. **DATE:** 12/9/2022

DESIGNED BY: D.V. **DATE:** UNKNOWN

IOWA P.E.: A.S. **APPROVAL DATE:**

Alliant Energy

2

ALLIANT ENERGY HAS DIRECTED THAT ENGINEERING ARISING TO THE LEVEL OF PROFESSIONAL ENGINEERING IS NOT REQUIRED OR INTENDED FOR THIS PLAN. A MI-TECH ENGINEER DOES NOT REVIEW THE PLAN SET, INCLUDING ALL CALCULATIONS OR ANALYSIS, FOR THE INTENT OF PROVIDING PROFESSIONAL ENGINEERING SERVICES. ALL PROFESSIONAL ENGINEERING OR DESIGN ISSUES OR QUESTIONS SHALL BE DIRECTED TO ALLIANT ENERGY. MI-TECH WILL USE INDUSTRY STANDARDS FOR REVIEWS AND COMPLETION OF THE SCOPE OF SERVICES FOR ALLIANT ENERGY.

Darren R. Moon

From: Darren R. Moon
Sent: Monday, December 19, 2022 9:59 AM
To: 'Dylan Vassar'
Cc: Jacob Grimsled; joshualong@alliantenergy.com
Subject: RE: Alliant WR 4269171 Cambridge, IA Town Story County Permit

IMPORTANT NOTE:

I will go ahead and approve these but it is very important that the line is bored **at least 5 feet below** the lowest ditch bottom elevation. There are tiles under the roadway pavement for the entire stretch, if you hit the tile, the pavement will have to be removed to fix it. We had the pavement collapse this past summer where the tile was broken which is where the concrete patch is on the northbound lane. This is also an old State highway so we do not have any of the original plans to show us where the tile is located but the tile is running longitudinally under the pavement where we fixed it. I believe that there may also be tile in the east ditch bottom. Your south crossing #1 is the most concerning for tile so make sure you go extra deep under the pavement but all of them could potentially have tile. Please let me know if you have any questions. Thank you,

Story County Engineer
837 N Ave.
Nevada, IA 50201
515-382-7359
dmoon@storycountyiowa.gov

From: Dylan Vassar <dvassar@mi-tech.us>
Sent: Wednesday, December 14, 2022 12:11 PM
To: Darren R. Moon <DMoon@storycountyiowa.gov>; Engineer and Secondary Roads <EngineerWeb@storycountyiowa.gov>
Cc: Jacob Grimsled <jagrimsl@mi-tech.us>; joshualong@alliantenergy.com
Subject: Alliant WR 4269171 Cambridge, IA Town Story County Permit

[External Sender - Please Use Caution]

Darren,

I'm submitting a Story County Utility Permit on behalf of Alliant Energy for some work we'd like to do just South of Cambridge, IA. This work will be an overhead to underground project and all cable will be directional drilled and placed in conduit. Please see attached Permit Application for a reference on the exact locations. Let me know if you have any comments or concerns with this project or permit. Crews would like to start here sometime at the beginning of the year in 2023. Again, please let me know if you have any questions.

Thank you,

Dylan Vassar
Power Distribution Tech
Mi-Tech Services, Inc.
46 S. Rolling Meadows Dr.
Fond du Lac, WI 54937
Mobile: 920.392.2495
Email: dvassar@mi-tech.us
www.mi-tech.us





an  company

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