

Proposal No. 2022M-022EN-001



AVENCO-C01

THENBEST

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/12/2022

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).

PRODUCER
Houchens Insurance Group
1240 Fairway Street
Bowling Green, KY 42103

AGENT: Tina Henbest, ACSRC, CRIS, MLIS
PHONE (AC No, Ext): (270) 628-1402 4286 FAX (AC, Ext): (270) 843-8808
E-MAIL: thenbest@higusa.com
ADDRESS:

INSURER(S) AFFORDING COVERAGE

INSURER A: Ohio Casualty Insurance Company NAIC # 24074

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED
Avenue Construction, LLC
7118 Peach Court
Brentwood, TN 37027

COVERAGES

CERTIFICATE 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.

| POLICY LINE | TYPE OF INSURANCE | ADDITIONAL COVERAGES | POLICY NUMBER | POLICY PERIOD | REVISION | LIMITS |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------|---------------|----------|------------------------------------------------------------------|
| | COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> | | | | | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (SUBROGATION) \$ |
| | | | | | | MEDICAL EXPENSES \$ |
| | | | | | | PERSONAL & AD&M \$ |
| | GEN'L AGGREGATE LIMIT APPLIES WITH POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC <input type="checkbox"/> | | | | | GENERAL AGGREGATE \$ |
| | OTHER | | | | | PRODUCTS - COMPOUND AGG \$ |
| | AUTOMOBILE LIABILITY | | | | | COMBINED SINGLE LIMIT \$ |
| | ANY AUTO | | | | | PERSONAL & AD&M \$ |
| | OWNED AUTO ONLY | SCHEDULED AUTO \$ | | | | PERSONAL & AD&M \$ |
| | NON-OWNED AUTO ONLY | NON-SCHEDULED AUTO \$ | | | | PERSONAL & AD&M \$ |
| | UMBRELLA LIAB EXCESS LIAB | OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> | | | | EACH OCCURRENCE \$ |
| | | PRO <input type="checkbox"/> RETENTION <input type="checkbox"/> | | | | AGGREGATE \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | FL <input type="checkbox"/> N/A | | | | FL - EACH OCCIDENT \$ |
| | ANY INDEMNITY FOR PARTNER OR OFFICER (Variety 9.50) | | | | | FL - DISEASE OR INJURY \$ |
| | IF YES, describe cover | | | | | FL - DISEASE - POLICY LIMIT \$ |
| A Builders Risk | | | 0MO(23)62098643 | 4/1/2022 | 4/1/2023 | \$10K deduct 12,937,343 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Location: 4040 Travis Dr, Nashville, TN
Thirty (30) days Notice of Cancellation applies

CERTIFICATE HOLDER

CANCELLATION

The Metropolitan Government of Nashville and Davidson
County
Metro Legal & Claims
c/o Insurance and Safety Division
222 3rd Avenue North, Ste 4501
Nashville, TN 37203

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

Christa Veltri

ACORD 25 (2018/03)

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14 April, 2022

Metro Department of Public Works
750 South 5th Street
Nashville, TN. 37206

Right of Way Encroachment Request

To the Director of Engineering of Public Works:

We are seeking approval of an encroachment into the public right of way at 4040 Travis Drive. Due to the constraints of the site, there is a building encroachment into the right of way on the side of Travis Drive.

This Building encroachment is a pergola/ patio for the units above and projects into the right of way 1' 0" for a distance of 14' 6".

Sincerely,

A handwritten signature in black ink, appearing to read 'John Barnett' with a stylized flourish at the end.

John Barnett, AIA, LEED AP, Principal
Barnett Design Studio, LLC



21 April 2022

Metro Department of Public Works
750 South 5th Street
Nashville, TN. 37206

Right of Way Encroachment Request

To the Director of Engineering of Public Works:

We are seeking approval of an encroachment into the public right of way at the corner of Welch Rd. and Travis Drive. Due to the constraints of the site, there is an aerial encroachment into the right of way on the corner of these two streets.

This aerial encroachment is a building element that sticks out of the building five feet 3 inches (5' 3") and provides shade for the windows below. This element would encroach into the right of way by 3' 7" MAX. and tapers down for a length of 25'. This encroachment would be 9' above the sidewalk at this corner.

Sincerely,

A handwritten signature in black ink, appearing to read 'John Barnett' with a stylized flourish at the end.

John Barnett, AIA, LEED AP, Principal
Barnett Design Studio, LLC

Metropolitan Government Department of Public Works

750 South 5th Street ▯ Nashville, TN 37206 ▯ (615) 862-8750 ▯ www.nashville.gov/public-works

Mandatory Referral Application:

Encroachment: Sign / Awning / Fiber Optic Cable / Other

*** Before filing this application, please review checklist on the back of this application. ***

Encroachment Type:

- ☐ Awning
☐ Fiber Optic Cable (▲ ground)
☐ Fiber Optic Cable (▼ ground)
☐ Sign
☒ Other Building

Date Submitted: 4-21-2022

Mandatory Referral Project No. _____

(MPW staff assigns project #)

Parcel Number: 13315010600

Map & Parcel(s): _____
Street Address(es): 4040 Travis Drive, Nashville, TN.

Notarized Signature of Property Owner(s):

You must obtain the *notarized* signature of all property owners on whose property the sign or awning will occur. Failure to provide this information will deem your application *incomplete* and postpone your application's consideration by the Metropolitan Planning Commission. Copy form below for additional signatures.

As the owner(s) of property, I/we agree to the submission of this mandatory referral application to the Metropolitan Government Department of Public Works for a sign, awning or fiber optic cable encroachment.

Date: 326 WELCH PARTNERS
(Company Name)

[Signature]
(Signature of Property Owner)
TOMY HARRIS
(Name of Property Owner)
HARRIS
(Title of Property Owner)
4040 TRAVIS DR
NASHVILLE TN
(Address of Property (including city & state))



STATE OF TENNESSEE
COUNTY OF WILLIAMSON
Sworn to and subscribed before
Me this 12 day of April, 2022
Toni C. Cebulski
(Notary Public)
My Commission Expires: 2/20/2023

Applicant: All correspondence will be mailed to the applicant.

☐ Architect ☐ Engineer ☐ Property Owner ☐ Other: contractor

Name: 326 WELCH PARTNERS

Business: 326 WELCH PARTNERS

Address: 7110 PEACH CT

City: BRENTWOOD State: TN Zip: 37027

Phone: 615 467 6330

☒ business ☐ home ☐ business ☐ mobile

Fax: 615 467 6331

☒ business ☐ home ☐ business ☐ mobile

E-mail: tharris@avenueconstruction.com

Applicant's Signature: [Signature]

Filing Fee (All application fees are non-refundable)

Encroachment: Sign / Awning / Fiber Optic Cable \$250.00
Other

Amount paid: \$ _____

Accepted by: _____ Date: _____

LICENSE AGREEMENT FOR PRIVATE ENCROACHMENTS
INTO THE PUBLIC RIGHT OF WAY

I/We, _____, in consideration of the Resolution No. _____, to construct, maintain, install and/or operate an encroachment into, onto, over, or under the public right of way located at in Nashville, Davidson County, Tennessee, do hereby, for myself, my agents, customers, and assigns, waive and release and hold harmless The Metropolitan Government of Nashville and Davidson County, its agents, employees, and assigns from any and all claims, rights, or demands for damages that may arise from my/our use, construction and/or maintenance of the encroachment, to wit: (SEE ATTACHED DESCRIPTION OF ENCROACHMENT). I/We hereby certify to the Metropolitan Government of Nashville and Davidson County that I/We have executed a bond or liability insurance policy in such amount as agreed upon by the Director of Public Works and the Metropolitan Attorney, and in the form approved by the Metropolitan Attorney (per Metropolitan Code Section 38-1-1), which operates to indemnify and save The Metropolitan Government of Nashville and Davidson County harmless from all claims or demands that may result to persons or property by reason of the construction, operations or maintenance of the encroachment. I/We further agree that my/our obligations hereunder may not be assigned except upon approval of the Director of Public Works and the Metropolitan Attorney. I/We further acknowledge that any action that results in a failure to maintain said bond or liability insurance for the protection of The Metropolitan Government of Nashville and Davidson County shall operate to the granting of a lien to The Metropolitan Government of Nashville and Davidson County in the amount of the last effective bond/insurance policy. Said insurance or bond may not be cancelable or expirable except on 30 days notice to the Director of Public Works.

I/We further recognize that the license granted hereby is revocable by The Metropolitan Government upon recommendation of the Director of Public Works and approval by resolution of the Metropolitan County Council if it is determined to be necessary to the public welfare and convenience. In the event the Metropolitan Government revokes this license as contemplated by this paragraph, licensee will not be entitled to any compensation of any kind. This license shall also be strictly subject to the right of way easement owned by The Metropolitan Government. I/We agree to maintain, construct and use the encroachment in such a way as will not interfere with the rights and duties of the Metropolitan Government

as owner of the right of way. Said interference shall be additional grounds for revocation of the license for encroachment. I/We agree to pay the cost of construction, maintenance, use, as well as relocations cost of said encroachment. Licensee's failure to complete construction of the contemplated encroachment within 36 months of the date of approval by the Metropolitan Council will cause this license to terminate automatically. In the event the encroachment contemplated by this license is substantially destroyed, this license shall terminate unless fully restored by licensee within 36 months from the date of such destruction. In the event this license is revoked or terminated for any reason, licensee shall restore all public property to the condition obtaining at the time the license became effective at licensee's sole cost and expense.

DATE: 4/12/2022

326 WELCH PARTNERS
(Owner of Property)

4040 TRAVIS DR
(Address of Property)

NASHVILLE TN
(City and State)

STATE OF TENNESSEE)
COUNTY OF Williamson ~~DAVIDSON~~

Sworn to and subscribed before

Me this 12th day of April, 2022

Toni C. Cebulski
(NOTARY PUBLIC)

My Commission Expires: 2/20/2023



CERTIFICATE OF INSURANCE

This is to further certify to the Metropolitan Government of Nashville and Davidson County concerning the policies of insurance listed above and the coverage provided thereby that:

1. The Contractual Insurance coverage is on a Blanket Broad Form basis unless specifically indicated below.
2. The company or companies, upon request, agree to deliver within fifteen (15) days a certified copy of any and/or all of the policies of insurance to The Metropolitan Government of Nashville and Davidson County,
3. If one (1) or more Umbrella Excess policies are used, there is no gap between the limits of the primary policies and the deductible feature of the Umbrella Excess policies,
4. Coverage under the primary policies have no deductible features unless there is a check mark here (). If there are deductible features or the insured has adopted a funded self-insurance program, they are fully explained on an attached sheet which becomes a part of this Certificate, and
5. The coverage provided shall not be cancelled, reduced in coverage, or allowed to lapse unless and until The Metropolitan Government of Nashville and Davidson County receives at least thirty (30) days advance written notice of same. The written notice must be delivered to the Metropolitan Risk Manager at his office shown as the address of the Certificate Holder below or the secondary Certificate Holder, if one is so listed below.

Name and Address of Certificate Holder

The Metropolitan Government of
Nashville and Davidson County
Metro Legal & Claims
C/O Insurance and Safety Division
222 3rd Avenue North, Ste #501
Nashville, TN 37201

Date Issued: 4/12/2022

Houchens Insurance Group

(Agency or Company)

by Christa Vella
(Authorized Representative)
(Attach Power of Attorney)



AVENCO-C01

THENBEST

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/12/2022

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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).

| | | |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|
| PRODUCER Houchens Insurance Group 1240 Fairway Street Bowling Green, KY 42103 | CONTACT NAME: Tina Henbest, ACSRC, CRIS, MLIS | |
| | PHONE (A/C, No, Ext): (270) 529-1402 4266 | FAX (A/C, No): (270) 843-8808 |
| | E-MAIL ADDRESS: thenbest@higusa.com | |
| | INSURER(S) AFFORDING COVERAGE | NAIC # |
| | INSURER A: Ohio Casualty Insurance Company | 24074 |
| INSURED Avenue Construction, LLC 7110 Peach Court Brentwood, TN 37027 | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| | INSURER F: | |

COVERAGES

CERTIFICATE 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 | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|-----------------|-------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: | | | | | | EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$ |
| | AUTOMOBILE LIABILITY <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) \$ \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$ |
| A | Builders Risk | | | BMO(23)62898663 | 4/1/2022 | 4/1/2023 | \$10K dedt 12,937,343 |

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

Location: 4040 Travis Dr, Nashville, TN

Thirty (30) days Notice of Cancellation applies.

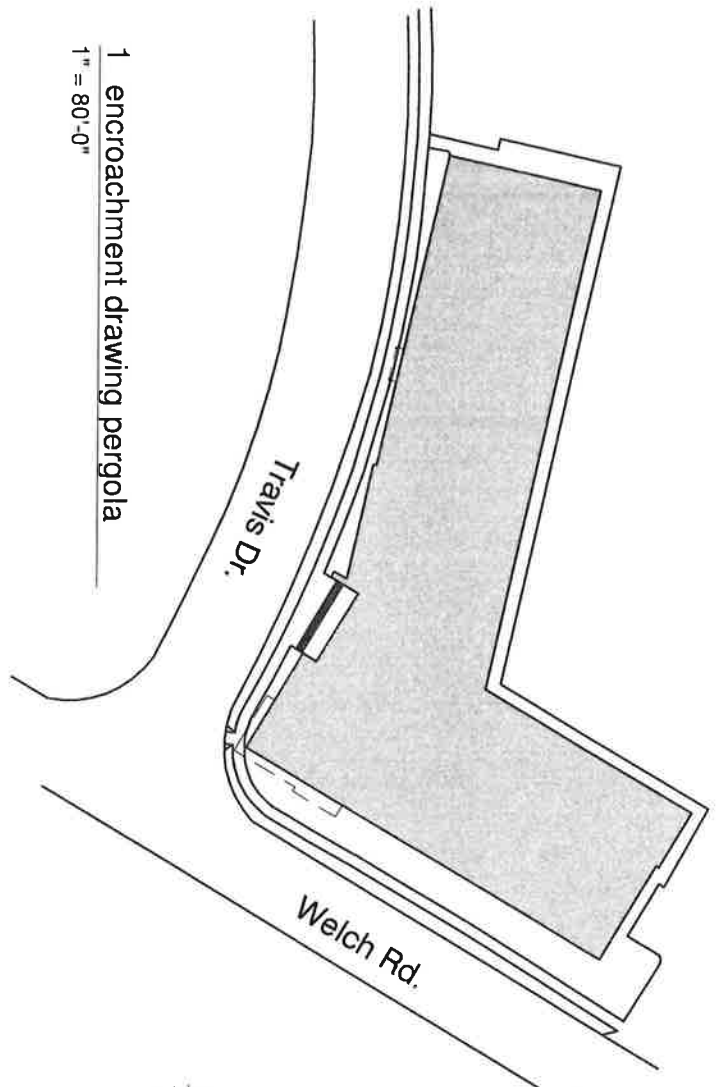
CERTIFICATE HOLDER

CANCELLATION

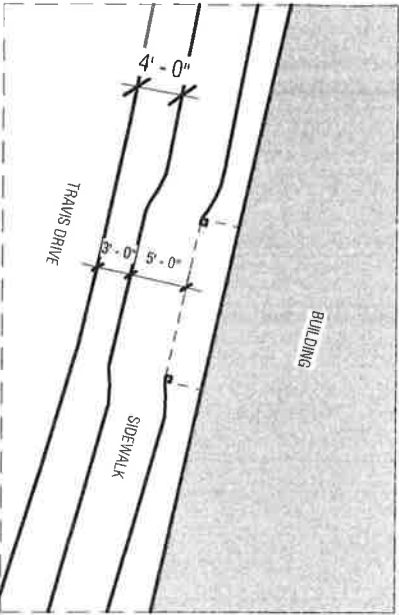
The Metropolitan Government of Nashville and Davidson County
Metro Legal & Claims
c/o Insurance and Safety Division
222 3rd Avenue North, Ste #501
Nashville, TN 37201

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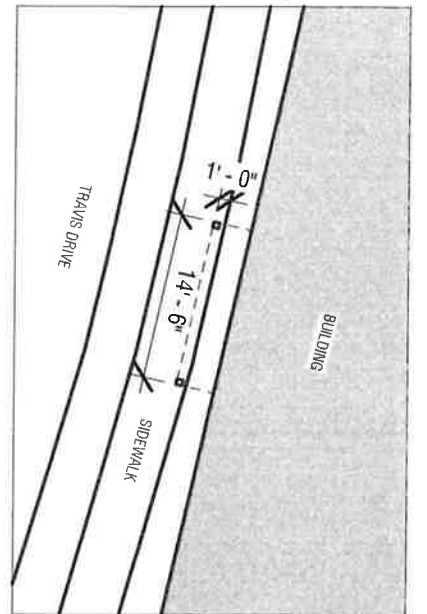
AUTHORIZED REPRESENTATIVE



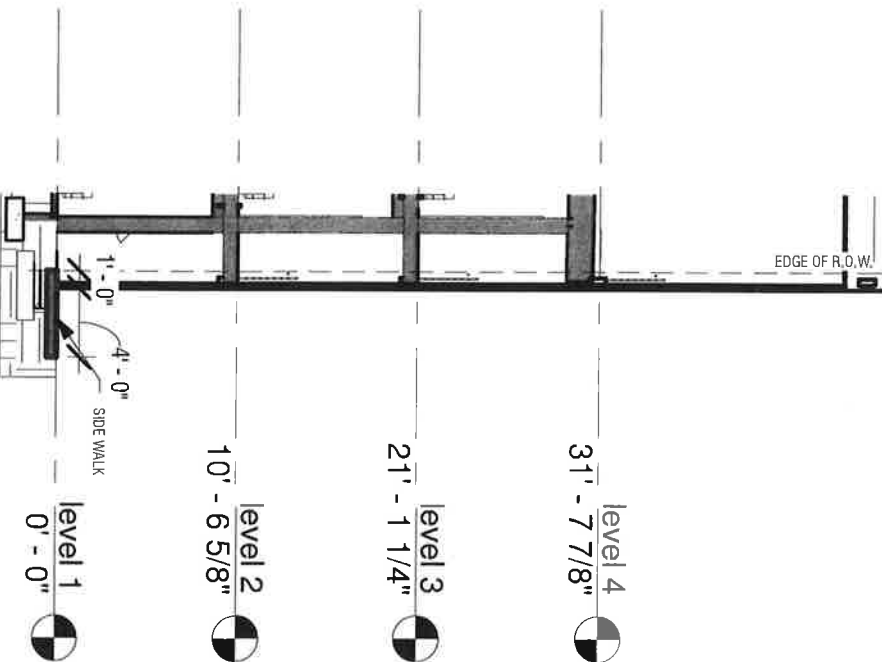
1 encroachment drawing pergola



3 encroachment drawing pergola sidewalk variance
1/16" = 1'-0"



2 encroachment drawing pergola enlarged
1/16" = 1'-0"



4 encroachment section pergola
3/32" = 1'-0"

encroachment exhibit

Project number 1911

Date 04.05.2022

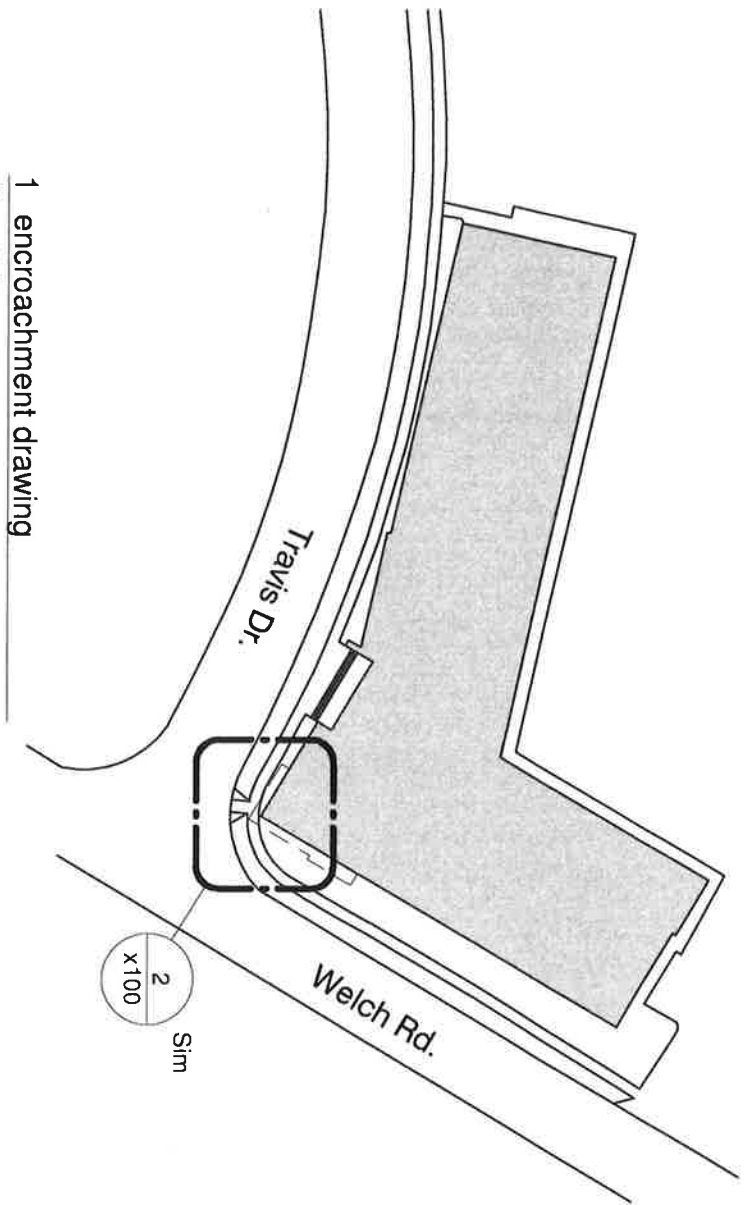
welch road apartments



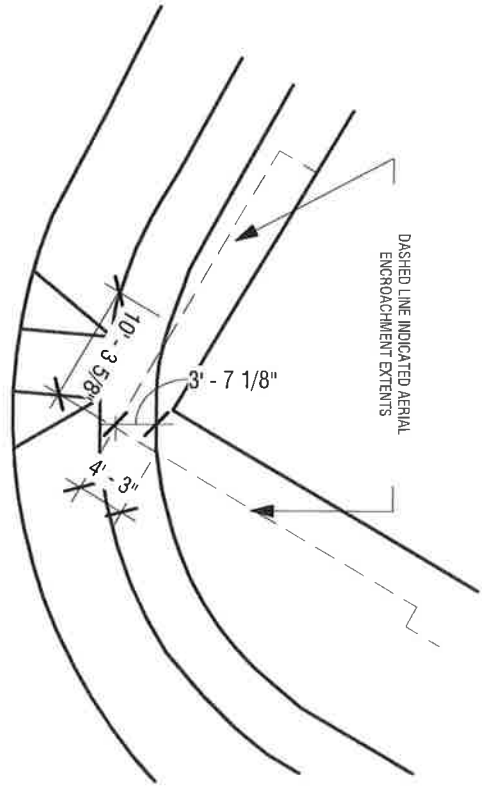
BARNETT
DESIGN
STUDIO

416 MAIN STREET || SUITE A || FRANKLIN, TN || 37064
615.538.7750 || INFO@BARNETTDDESIGNSTUDIO.COM

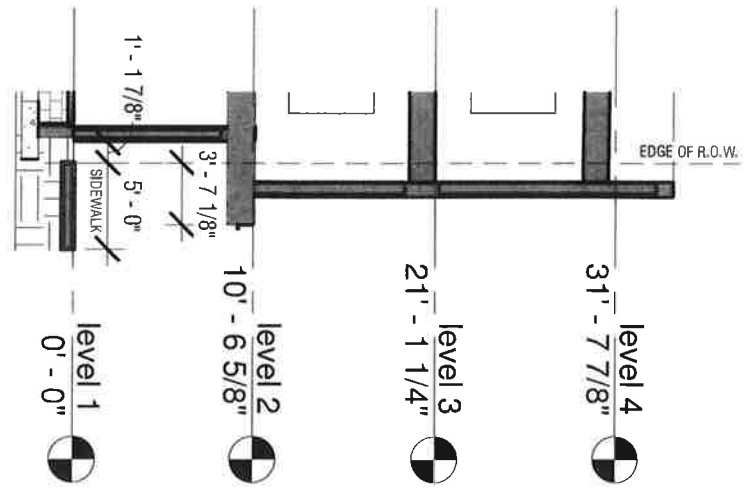




1 encroachment drawing
1" = 80'-0"



2 encroachment drawing - enlarged
1/16" = 1'-0"



3 encroachment section
3/32" = 1'-0"

| | |
|----------------------|------------|
| encroachment exhibit | |
| Project number | 1911 |
| Date | 04.05.2022 |

welch road apartments

BARNETT DESIGN STUDIO

416 MAIN STREET || SUITE A || FRANKLIN, TN || 37064
615.538.7750 || INFO@BARNETTDDESIGNSTUDIO.COM

