



DEPARTMENT OF FINANCE
Oscar Knott, CPP, CPPO, VCO
Purchasing Director

COMMONWEALTH OF VIRGINIA
County of Henrico

July 17, 2025

Mr. Paul Will
McClung-Logan Equipment Co. Inc
11243 Washington Highway
Glen Allen, VA 23059

RE: Contract # 2566A-Genuine OEM Repair Services and Parts for Off-Road Equipment and Heavy-Duty Diesel Engines (GRADALL)

Dear Mr. Will:

The annual contract the County has with your company to provide **Genuine OEM Repair Services and Parts for Off-Road Equipment and Heavy-Duty Diesel Engines (GRADALL)** is due to expire on **September 30, 2025**. Under the terms of the original agreement, this contract may be renewed for an additional one-year period from **October 1, 2025**, through **September 30, 2026**.

The County would like to renew this contract at current contract pricing. Please complete the information requested and return to Maria Gonzalez at gon036@henrico.gov at your earliest convenience.

Following receipt of this information, the County will determine whether it is in our best interest to renew the contract or re-solicit. In addition, if you agree to renew the contract for an additional one-year period, please instruct your insurance agent to provide to my attention a current copy of a certificate of insurance. **Be sure the certificate lists the County of Henrico as an additional insured for the contract work.**

If you have any questions, please call me at (804) 501-5680 or email me at Her034@henrico.gov. Your cooperation and prompt response will be appreciated.

Sincerely,

Justin M. Herbaugh

Justin M. Herbaugh, VCO, VCA
Procurement Analyst III

CONTRACT # 2566A-Genuine OEM Repair Services and Parts for Off-Road Equipment and Heavy-Duty Diesel Engines (GRADALL)

BUYER NAME: Justin M. Herbaugh, VCO, VCA – Procurement Analyst III

Except for the changes provided herein, all other terms and conditions of this contract remain unchanged and in full force and effect. Please check one of the following:

Yes. Renew the contract for an additional one-year period at current contract pricing.

Yes. Renew the contract for an additional one-year period at new contract pricing.
(list below or attach new pricing sheet)

No. Do not wish to renew the contract. If no, please provide reason below.

Company Name: McClung, Logan

Date: 7-18-2025

Signature: Tom Puell

Title: 7-18-2025

Telephone#: 410-210-2827

Email: puell@mccLUNG-LOGAN.com

SCC#: _____

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services, LLC 4600 S. Ulster Street, Suite 1200 Denver, CO 80237 800 873-8500	CONTACT NAME:		INSURER(S) AFFORDING COVERAGE		NAIC #
	PHONE (A/C, No, Ext):	800 873-8500	FAX (A/C, No):		
INSURED M-L Holdings Company McClung Logan Equipment Co., LLC 4601 Washington Blvd Baltimore, MD 21227	E-MAIL ADDRESS:		INSURER A : Zurich American Insurance Company		16535
	den.certificate@usi.com		INSURER B : Westchester Surplus Lines Insurance Co.		10172
			INSURER C : Gemini Insurance Company		10833
			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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BI/PD GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	x	x	GLO980922411	03/01/2025	03/01/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/>	x	x	BAP980922511	03/01/2025	03/01/2026	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	x	x	G48698384001	03/01/2025	03/01/2026	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		x	WC980922311	03/01/2025	03/01/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	Excess Auto Liab over BAP980922511	x	x	GVE100349301	03/01/2025	03/01/2026	\$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Coverage: Excess Liability over Primary Umbrella
Travelers Excess Policy #EXB022732625NF
Effective: 03/01/2025 Expiration: 03/01/2026
Limits: \$10,000,000 Occurrence (Excess Liability over Policy #WEST030125 Primary \$5M)
Coverage: Excess Liability
(See Attached Descriptions)

CERTIFICATE HOLDER County of Henrico Risk Management P.O. Box 90775 Henrico, VA 23273-0775	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 
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DESCRIPTIONS (Continued from Page 1)

Federal Excess Policy #93644173

Effective: 03/01/2025 Expiration: 03/01/2026

Limits: \$5,000,000 Occurrence (Excess Liability over Policy #EXB0227326 Excess \$10M)

The Umbrella/Excess Liability policy provides excess coverage over the General Liability, Automobile Liability and Employers Liability. The Workers Compensation policy contains an All States Endorsement. Subject to policy terms, conditions, limitations and exclusions. The Certificate Holder is included as additional insured per written contract or agreement on the General Liability, Automobile Liability and Excess Liability. A waiver of subrogation applies to the Certificate Holder under the General Liability, Automobile Liability, Excess Liability and Workers Compensation per written contract or agreement. With respects to General Liability, Automobile Liability and Umbrella/Excess Liability, if you have agreed, in a written contract or written agreement, that a person or organization be added as an additional insured, and that the insurance shall be primary and non-contributory with the additional insured own insurance, such a person or organization is an insured but only with respect to liability caused by your acts or omissions in the performance of your ongoing operations.

Additional Insured Include: County of Henrico and Henrico County Public Schools.