

**CITY OF VALDEZ
TEMPORARY LAND USE PERMIT APPLICATION FORM**

Application Fee: \$50.00 (Non-Refundable) Waived 2017 per Resolution #12-72

File No. 21-03

Date Recv'd. 2/18/2021

Directions:

1. Please type or print legibly.
2. Please submit this application form to the Office of Community & Economic Development, P.O. Box 307, Valdez, Alaska 99686.
3. Please answer all questions on this form, or put N/A (not applicable) in the spaces provided, as the answer applies.

Applicant name: Pruhs Construction Company

Mailing address: 2193 Viking Drive

City, State, Zip: Anchorage, Alaska 99501

Daytime telephone: (907) 279-1020

SIGNATURE: 

Representative name: Ken Radach

Mailing address: 2193 Viking Drive

City, State, Zip: Anchorage, Alaska 99501

Daytime telephone: (907) 770-6814

Legal Description of Property Affected by Application:

Located in Township _____ Range _____ Section _____, CRM
Lot/Block/Tract/Subd. Tract G Harbor Subdivision (Sea Otter) Plat # _____
Street Address/Other description 31,250 SF Portion of 228 S Harbor Drive
Tax # _____ Size of Property _____

Type of business to be placed on the property: Construction Equipment Staging

Size of temporary building(s) to be placed on the property: None

Duration of lease requested (6 months maximum): January 1, 2021 to June 30, 2021

Special lease requirements: _____

Submitted materials attached - The following submitted materials must be submitted when applying for a lease on City land.

- ☒ 1. Plot Plan – A drawing of the proposed lease property showing:
- _____ a. Size of lot (to scale)
 - _____ b. Placement and size of buildings, storage units, miscellaneous structures planned (to scale)
 - _____ c. Water & sewer lines, locations of septic tanks, if needed
 - _____ d. Parking spaces (numbered on the drawing with a total number indicated).
- _____ 2. Fees – All applicable fees must be submitted prior to the execution of a lease.
- a. Application Fee (\$50.00). Covers the costs associated with processing the application (Non-refundable).

✓ 3. Liability Insurance – The Permittee shall, at its own expense, maintain and keep force during the terms of this Permit adequate insurance to protect both Valdez and Permittee against comprehensive public liability claims arising from the use of the property in the minimum limit of ONE MILLION DOLLARS (\$1,000,000) combined single limit to protect against liability for personal injury, death or property damage.

4. Financial Data – The applicant is a:

Sole proprietorship _____

Partnership _____

Corporation ✓ _____

Other (Please explain) _____

5. Partnership Statement – If applicant is a partnership, answer the following:

a. Date of Organization _____

b. General partnership () / Limited partnership ()

c. Statement of partnership recorded? () yes () no

Where _____

d. Has the partnership done business in Alaska?

() yes () no

When _____

Where _____

e. Name, address and partnership share of each general and limited partner. If a partner is a corporation, complete page for corporation.

Limited/

General

Name

Address

Share

f. Attach a complete copy of the partnership agreement.

6. Corporation Statement—If applicant is a corporation, answer the following:

a. Date of incorporation 2000

b. Where incorporated Alaska

c. Is the corporation authorized to do business in Alaska?

☒ yes ☐ no

If so, as of what date 2000

d. The corporation is held:

Publicly ☐ Privately ☒

e. If publicly held, how and where is the stock traded?

f. Furnish the name, title, and address of each officer and in addition, the same information for each principal stockholder owning more than ten percent of the corporation.

<u>Name</u>	<u>Title</u>	<u>Address</u>	<u>Share</u>
J. Dana Pruhs	President	2193 Viking Drive; Anchorage, Alaska 99501	

g. Furnish the names of the officers specifically authorized to execute contracts and other corporate commitments under the corporate articles and/or by-laws.

J. Dana Pruhs

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/12/2020

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 Marsh & McLennan Agency LLC 1031 W 4th Ave, Suite 400 Anchorage, AK 99501 907 276-5617	CONTACT NAME: Anna Crocker	
	PHONE (A/C, No, Ext): 907 257-6372	FAX (A/C, No):
	E-MAIL ADDRESS: anna.crocker@marshmc.com	
INSURED Pruhs Construction Company LLC Pruhs Corporation 2193 Viking Drive Anchorage, AK 99501	INSURER(S) AFFORDING COVERAGE	
	INSURER A : The Charter Oak Fire Insurance Company	NAIC # 25615
	INSURER B : Travelers Property Casualty Co of Amer	25674
	INSURER C : Markel American Insurance Company	28932
	INSURER D : Travelers Indemnity Company	25658
	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"/> PD Ded:2,500 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			DTCO6D510195COF20	10/10/2020	10/10/2021	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
D	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> Hired PhysDmg <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			8100P9122562026G	10/10/2020	10/10/2021	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Physical Dmg \$ACV
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			CUP0N8582642026	10/10/2020	10/10/2021	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	UB7J09162422026G	10/10/2020	10/10/2021	<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	Leased & Rented Equipment			MKLM41M0051595	10/10/2020	10/10/2021	\$600,000

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

RE: 226 S Harbor Drive, Tract G Harbor Subdivision Sea otter(zoned light industrial)
 201 S Harbor Drive (Tract S, Harbor Subdivision) and ~ 19,293 SF of adjacent ROW on South Harbor Drive (Fishermans dock) zoned light industrial
 134 East Pioneer Drive, Lot 3 Pioneer Commercial Subdivision (zoned general commercial)
 150 Pioneer Drive, Lots 3-6, Block 25, Mineral Creek Subdivision (zoned central business district)
 (See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

City of Valdez PO Box 307 Valdez, AK 99686	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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