



Hamilton College

Lincoln Campus

July 19, 2007

Barnie Blum
Public Works and Utilities
Suite 100
531 Westgate Blvd,
Lincoln NE 68528

Dear Mr. Blum:

Per the steps outlined in your email of 7-5-07, please accept this letter as an application by Hamilton College-Lincoln to string an overhead fiber optic line from the building at 1821 K Street to our building at 1800 J Street via an LES utility pole in the alley between the buildings. The LES utility pole already has an existing line between the buildings. Enclosed is a detail drawing, certificate of insurance and bond.

In your statement we understand that this will need to go to the Lincoln City Council for review and approval. This is among the first stages of part of a larger project to remodel and renovate our campus that is still in development. We would like to have this initial stage of our project expedited by requesting that the City Council schedule first reading, public hearing and vote on the same date and at the earliest possible date.

Please keep us advised of progress on this.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Jami J. Frazier".

Jami Frazier, President
Hamilton College-Lincoln

Enclosures: Certificate of insurance
Bond
Detail drawing

CC: Karl Fredrickson
Darl Nauman
Joan Ross



Hamilton College

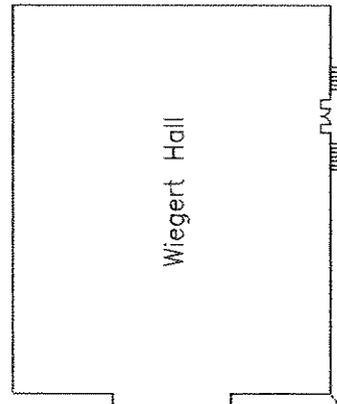
JAMI FRAZIER
Campus President

1821 K Street
Lincoln, NE 68508
Tel: 402.474.5315
Fax: 402.474.5302 Cell: 402.943.6046
jfrazier@hamiltonlincoln.edu
www.hamiltonlincoln.com

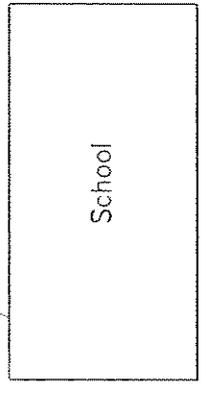
19th Street

J Street

- Street
- Alley
- Parking Lot
- Building
- Telephone Pole
- Proposed Fiber



Alley

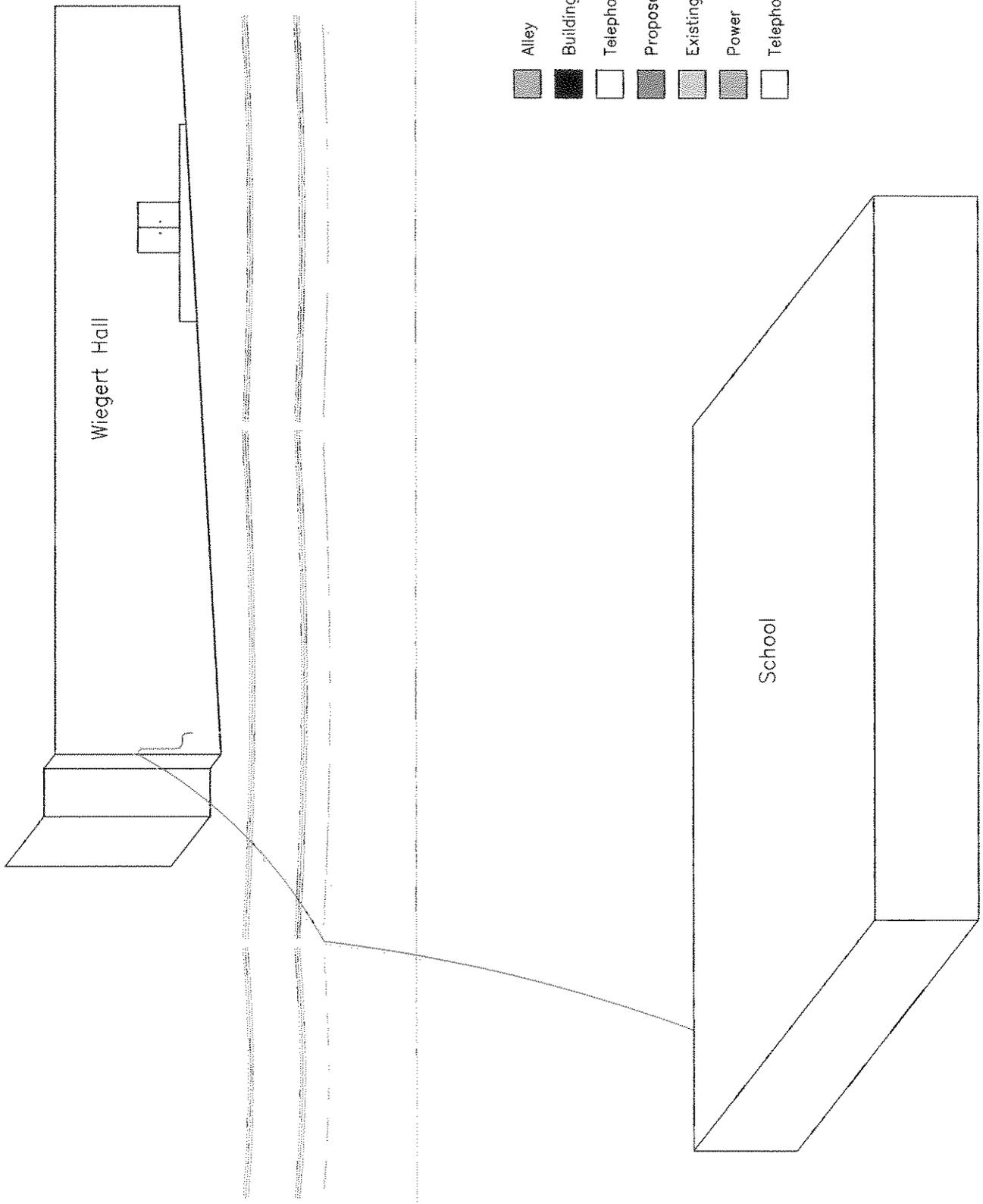


18th Street

K Street

20th Street





ACORD

DATE (MM/DD/YYYY)
08/06/2007

PRODUCER
Aon Risk Services, Inc. of New York
199 Water Street
New York NY 10038-3551 USA

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475 FAX: (866) 467-7847

INSURERS AFFORDING COVERAGE		NAIC#
INSURER A:	Travelers Property Cas Co of America	25674
INSURER B:	Charter Oak Fire Ins Co	25615
INSURER C:	St Paul Fire & Marine Insurance Co.	24767
INSURER D:		
INSURER E:		

INSURED
Kaplan Higher Education Corporation
A DIVISION OF KAPLAN, INC.
THE WASHINGTON POST CO.
1150 15TH STREET, N.W.
WASHINGTON DC 20071 USA

COVERAGE

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSTR LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. FECT <input type="checkbox"/> LOC	TC27GLSA 2667626TIL07 General Liability - Prim	01/01/07	01/01/08	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (50 occ/accident) \$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 \$2,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON OWNED AUTOS	TC23CAP26677583TIL07 Commercial Automobile - A	01/01/07	01/01/08	COMBINED SINGLE LIMIT (50 accidents) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY EA ACC ACC
C		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION	QK09001161 Umbrella Liability - Pri	01/01/07	01/01/08	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	TC20UB2667752207 Workers Compensation - A TRJUB2667753407 Work Comp - TWPE Retro (01/01/07	01/01/08	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <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
A		OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 City of Lincoln Nebraska is named as additional insured for General Liability, as required by written contract, in accordance with policy terms, conditions and exclusions for use of public space for the building at 1821 'K' Street to the building at 1800 'J' Street, Lincoln, NE 68508.

City of Lincoln
555 S. 10th Street
Lincoln NE 68508 USA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE *Aon Risk Services, Inc. of New York*

Holder Identifier: 570024322371 Certificate No.

INLAND INSURANCE COMPANY
Lincoln, Nebraska

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That the **INLAND INSURANCE COMPANY**, a corporation of the State of Nebraska having its principal office in the City of Lincoln, Nebraska, pursuant to the following Bylaw, which was adopted by the Board of Directors of the said Company on July 23, 1981, to wit:

"Article V-Section 6. **RESIDENT OFFICERS AND ATTORNEYS-IN-FACT.** The President or any Vice President, acting with any Secretary or Assistant Secretary, shall have the authority to appoint Resident Vice Presidents and Attorneys-In-Fact, with the power and authority to sign, execute, acknowledge and deliver on its behalf, as Surety: Any and all undertakings of suretyship and to affix thereto the corporate seal of the corporation. The President or any Vice President, acting with any Secretary or Assistant Secretary, shall also have the authority to remove and revoke the authority of any such appointee at any time."
does hereby make, constitute and appoint

J. Scott Nelson or Robert L. Reynoldson or Mary E. Kent or Kent Sprague or Nadine Rohan or J. Masters,
Lincoln, Nebraska or Robert A. Wick, Columbus, Nebraska

its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver for and on its behalf, as Surety:
Any and all undertakings of suretyship

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its offices in Lincoln, Nebraska, in their own persons.

The following Resolution was adopted at the Regular Meeting of the Board of Directors of the **INLAND INSURANCE COMPANY**, held on July 23, 1981:

"RESOLVED, That the signatures of officers of the Company and the seal of the Company may be affixed by facsimile to any Power of Attorney executed in accordance with Article V-Section 6 of the Company Bylaws: and that any such Power of Attorney bearing such facsimile signatures, including the facsimile signature of a certifying Assistant Secretary and facsimile seal shall be valid and binding upon the Company with respect to any bond, undertaking or contract of suretyship to which it is attached."

All authority hereby conferred shall remain in full force and effect until terminated by the Company.

IN WITNESS WHEREOF, **INLAND INSURANCE COMPANY** has caused these presents to be signed by its Vice President and its corporate seal to be hereunto affixed this _____ day of _____, 20_____.

INLAND INSURANCE COMPANY

Secretary

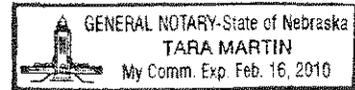
By

Vice President



State of Nebraska }
County of Lancaster } ss.

On this _____ day of _____, 20_____, before me personally came Curtis L. Harter, to me known, who being by me duly sworn, did depose and say that (s)he resides in the County of Lancaster, State of Nebraska; that (s)he is the Vice President of the **INLAND INSURANCE COMPANY**, the corporation described in and which executed the above instrument; that (s)he knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation; that (s)he signed (his) (her) name by like order; and that Bylaw, Article V-Section 6, adopted by the Board of Directors of said Company, referred to in the preceding instrument, is now in force.



My Commission Expires February 16, 2010. Notary Public

I, Cheryl A. Brown, Assistant Secretary of **INLAND INSURANCE COMPANY**, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by said **INLAND INSURANCE COMPANY**, which is still in full force and effect.
Signed and sealed at the City of Lincoln, Nebraska this _____ 18th _____ day of _____ July _____, 20 _____ 07 _____.

Assistant Secretary

INLAND
INSURANCE COMPANY

PO Box 80468
Lincoln, Nebraska 68501

UNIVERSAL
SURETY COMPANY

Bond No. 103150

LICENSE AND/OR PERMIT BOND

KNOW ALL MEN BY THESE PRESENTS:

That we, Hamilton College Lincoln Campus, as Principal, and

Inland Insurance Company incorporated under the laws of the State of Nebraska, with principal offices at Lincoln, Nebraska, as Surety, are held and firmly bound unto City of Lincoln

(Valid only when a County, City, Town or Village is named as Obligee)

in penal sum of Five thousand and no/100 Dollars (\$) lawful money of the United States for which payment, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the said Principal has applied to said Obligee for a license to

occupy space underneath public alley between properties at 18th & K and 18th & J Street. in Lincoln NE

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, That if the said Principal shall indemnify said Obligee against all loss to it caused by said Principal's breach of any ordinance, rule or regulation relating thereto, then the above obligation shall be void, otherwise to be and remain in full force and effect until _____, 20_____, unless renewed by continuation certificate.

THIS BOND MAY BE TERMINATED at any time by the Surety upon sending notice in writing, by certified mail, to the Clerk of the Political Subdivision with whom this bond is filed, and at the expiration of thirty (30) days from the receipt of said notice, this bond shall ipso facto terminate and the Surety shall thereupon be released from any liability for any acts or omissions of the Principal subsequent to said date.

Signed, sealed and dated this 18th day of July, 2007.

Janni J. Fuzgin
Principal
Campus President

Inland Insurance Company

By Mary E. Kent
Attorney-in-Fact - Mary E. Kent

Countersignature (if required)

By _____
Resident Agent