

PHONE 887/1577/  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

RECEIVED  
NOV 16 1981

November 13, 1981

MATERIALS MGMT.

Sunoco Terminals, Inc.  
P. O. Box 758  
Nederland, Texas 77627

Re: Contract No. FS-100-57

Attention: Mr. G.L. Dauberman

Dear Mr. Dauberman;

Enclosed, please find copies of our revised Labor and Equipment Rate Schedule.

Due to the sharp rise in labor, parts, fuel and etc., we find it necessary to increase our prices. The new charges will become effective as of December 1, 1981.

If you have any further questions, regarding these changes, or if any further information is required, please do not hesitate to contact me.

Sincerely yours,

MAVERICK CONSTRUCTION CO,

*James E. Faris*  
James E. Faris  
President

JEF/mm

Enclosure

PLAINTIFF'S EXHIBIT

SUN-101

cc sent to Corpus Christi - 11/16/81

PHONE 289-1282  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

ALL PRICES EFFECTIVE AS OF DECEMBER 1, 1981

1. The first 8 hours of each employee is paid straight time. All hours worked in excess of 8 hours per day, the employee is paid time and one half for each hour worked.
2. Small Tools @5% of the Gross Labor
3. Special Tools, if required will be furnished along with materials and supplies at cost plus 20%
4. Materials and Supplies will be furnished at cost plus 20%
5. Equipment not owned, but furnished by the Contractor will be invoiced at cost plus 20%

PHONE ~~888/1997~~  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

ALL PRICES EFFECTIVE AS OF DECEMBER 1, 1981

| <u>LABOR<br/>CLASSIFICATION</u> | <u>CODE</u> | <u>STRAIGHT TIME<br/>CHARGE</u> | <u>OVERTIME<br/>CHARGE</u> |
|---------------------------------|-------------|---------------------------------|----------------------------|
| General Superintendent          | 100         | \$20.75                         | \$31.12                    |
| Foreman                         | 200         | 17.80                           | 26.70                      |
| Labor Foreman                   | 225         | 13.75                           | 20.62                      |
| Operators                       | 300         | 14.50                           | 21.75                      |
| Craftsman 1st Class             | 400         | 13.75                           | 20.62                      |
| Craftsman 2nd Class             | 425         | 12.20                           | 18.30                      |
| Skilled 1st Class               | 500         | 11.10                           | 16.65                      |
| Skilled 2nd Class               | 525         | 9.80                            | 14.70                      |
| Truck Driver                    | 600         | 10.50                           | 15.75                      |
| Welder Small Rig                | 700         | 17.60                           | 26.40                      |
| Utility Laborer                 | 800         | 9.50                            | 14.25                      |
| Laborer                         | 825         | 9.00                            | 13.50                      |

PHONE ~~593-1597~~  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

ALL PRICES EFFECTIVE AS OF DECEMBER 1, 1981

EQUIPMENT  
WITHOUT OPERATORS

|                                                                                         |                         |
|-----------------------------------------------------------------------------------------|-------------------------|
| Backhoe (J.D. 300 or 400)                                                               | \$15.50 Pr. Hr          |
| Trencher                                                                                | 17.00 Pr. Hr            |
| Maintainer                                                                              | 20.00 Pr. Hr            |
| Pneumatic Roller                                                                        | 14.00 Pr. Hr            |
| Vibratory Roller                                                                        | 15.00 Pr. Hr            |
| 1½ C.Y. Wheel Loader                                                                    | 20.00 Pr. Hr            |
| 1 C.Y. Backhoe                                                                          | 24.00 Pr. Hr.           |
| 12 Ton Hydraulic Crane                                                                  | 24.00 Pr. Hr.           |
| ¾ C.Y. Backhoe                                                                          | 18.00 Pr. Hr.           |
| Service Truck                                                                           | 10.00 Pr. Hr.           |
| ½ Ton Pickup                                                                            | 6.00 Pr. Hr.            |
| Water Truck                                                                             | 13.00 Pr. Hr.           |
| 1½" Water Pumps                                                                         | 23.00 Pr. Day           |
| Small Tools                                                                             | 5% Gross Labor          |
| Haul Truck                                                                              | 3.50 Pr.<br>Hauled Mile |
| Air Compressor                                                                          | 11.00 Pr. Hr.           |
| Backhoe With Hydraulic Impactor                                                         | 23.00 Pr. Hr.           |
| Truck Mounted High Pressure Pump with 1,000 Gallon<br>Tank & 600' of High Pressure Hose | 26.00 Pr. Hr.           |
| 8"x10" Delano Pump                                                                      | 24.00 Pr. Hr.           |
| Case Dozer                                                                              | 23.00 Pr. Hr.           |
| Flat Bed Dump Truck                                                                     | 9.00 Pr. Hr.            |

PHONE 997-1597  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

ALL PRICES EFFECTIVE AS OF DECEMBER 1, 1981

EQUIPMENT

WITHOUT OPERATORS

|                               |             |
|-------------------------------|-------------|
| Traction Broom Model 200      | \$11.00 Pr. |
| 600 Gallon Asphalt Tat Pot    | 17.00 Pr.   |
| Chain Saw                     | 22.00 Pr. I |
| Jay Tamper                    | 55.00 Pr. I |
| Jack Hammer                   | 6.00 Pr. I  |
| 25 C.Y. Dump Truck            | 29.00 Pr. I |
| 2½ C.Y. Loader                | 22.00 Pr. I |
| 17 C.Y. Scraper               | 42.00 Pr. H |
| 5 Ton Hydraulic Model Crane   | 18.00 Pr. H |
| Welder 200 AMP                | 10.00 Pr. H |
| 3" Water Pump                 | 58.00 Pr. D |
| 3" Diaphragm Pump             | 58.00 Pr. D |
| 2" Water Pump                 | 35.00 Pr. D |
| Caterpillar Compactor D.W.20  | 24.00 Pr. H |
| Tampo Compactor R.P. 16D      | 22.00 Pr. H |
| Boat Barge 8' x 20' 165hp     | 35.00 Pr. H |
| Aluminum Boat 50 hp Jet Drive | 17.00 Pr. H |
| 850 Case Backhoe              | 15.50 Pr. H |

AIR HOSE

|                  |            |
|------------------|------------|
| 1" x 50' Section | 6.00 Pr. D |
|------------------|------------|

PHONE 882/1597/1  
289-1282

P. O. BOX 4141

*Maverick Construction Company*  
CORPUS CHRISTI, TEXAS 78408

ALL PRICES EFFECTIVE AS OF DECEMBER 1, 1981

EQUIPMENT  
WITHOUT OPERATORS

SUCTION HOSE

|                   |               |
|-------------------|---------------|
| 2" x 20' Section  | \$12.00 Pr. I |
| 3" x 20' Section  | 12.00 Pr. I   |
| 8" x 20' Section  | 46.00 Pr. I   |
| 10" x 20' Section | 46.00 Pr. I   |
| 12" x 20' Section | 52.00 Pr. I   |

DISCHARGE HOSE

|                   |             |
|-------------------|-------------|
| 2" x 50' Section  | 12.00 Pr. D |
| 3" x 50' Section  | 12.00 Pr. D |
| 8" x 50' Section  | 46.00 Pr. D |
| 10" x 50' Section | 46.00 Pr. D |
| 12" x 50' Section | 52.00 Pr. D |

# Certificate of Insurance

**cord**

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 LISTED BELOW.

|                                                                                                                       |                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>NAME AND ADDRESS OF AGENCY</b><br>Hughston Insurance Agency, Inc.<br>P.O. Box 186<br>Brownsville, Texas 78522-0186 | <b>COMPANIES AFFORDING COVERAGES</b><br>COMPANY LETTER <b>A</b> Select Insurance Company<br>COMPANY LETTER <b>B</b> Texas Pacific Indemnity<br>COMPANY LETTER <b>C</b><br>COMPANY LETTER <b>D</b><br>COMPANY LETTER <b>E</b> |
| <b>NAME AND ADDRESS OF INSURED</b><br>Maverick Construction Company<br>P.O. Box 4141<br>Corpus Christi, Texas 78408   |                                                                                                                                                                                                                              |

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. 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.

| COMPANY LETTER | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | POLICY NUMBER | POLICY EXPIRATION DATE | Limits of Liability in Thousands (000)     |                 |                 |
|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------|--------------------------------------------|-----------------|-----------------|
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        |                                            | EACH OCCURRENCE | AGGREGATE       |
| A              | <b>GENERAL LIABILITY</b><br><input checked="" type="checkbox"/> COMPREHENSIVE FORM<br><input checked="" type="checkbox"/> PREMISES—OPERATIONS<br><input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD<br><input type="checkbox"/> UNDERGROUND HAZARD<br><input checked="" type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD<br><input checked="" type="checkbox"/> CONTRACTUAL INSURANCE<br><input checked="" type="checkbox"/> BROAD FORM PROPERTY DAMAGE<br><input checked="" type="checkbox"/> INDEPENDENT CONTRACTORS<br><input checked="" type="checkbox"/> PERSONAL INJURY | GA5049310     | 12/1/82                | BODILY INJURY                              | \$              | \$              |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | PROPERTY DAMAGE                            | \$              | \$              |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | BODILY INJURY AND PROPERTY DAMAGE COMBINED | \$ 500          | \$ 500          |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | PERSONAL INJURY                            |                 | \$ 500          |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        |                                            |                 |                 |
| A              | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> COMPREHENSIVE FORM<br><input checked="" type="checkbox"/> OWNED<br><input checked="" type="checkbox"/> HIRED<br><input checked="" type="checkbox"/> NON-OWNED                                                                                                                                                                                                                                                                                                                                                        | GA5049310     | 12/1/82                | BODILY INJURY (EACH PERSON)                | \$ 500          |                 |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | BODILY INJURY (EACH ACCIDENT)              | \$ 500          |                 |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | PROPERTY DAMAGE                            | \$ 100          |                 |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        | BODILY INJURY AND PROPERTY DAMAGE COMBINED | \$              |                 |
| B              | <b>EXCESS LIABILITY</b><br><input checked="" type="checkbox"/> UMBRELLA FORM<br><input type="checkbox"/> OTHER THAN UMBRELLA FORM                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Binder        |                        | BODILY INJURY AND PROPERTY DAMAGE COMBINED | \$ 4,000        | \$ 4,000        |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        |                                            |                 |                 |
| A              | <b>WORKERS' COMPENSATION and EMPLOYERS' LIABILITY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | WC5903166     | 12/1/82                | STATUTORY                                  |                 |                 |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                        |                                            | \$ 100          | (EACH ACCIDENT) |
|                | OTHER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |                        |                                            |                 |                 |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

# S (B) 00178

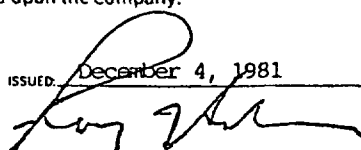
**Cancellation:** Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 10 days written notice to the below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

NAME AND ADDRESS OF CERTIFICATE HOLDER:

Sunoco Terminals, Inc.  
 P.O. Box 758  
 Nederland, Texas 77627

DATE ISSUED:

December 4, 1981



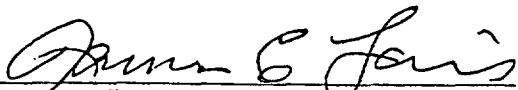
tion, as well as other requirements specified in section 114 and section 30 of the Air Act and the Water Act, respectively, and all regulations and guidelines issued thereunder before the award of the contract.

2. That no portion of the work required by this contract will be performed at a facility listed on the Environmental Protection Agency List of Violating Facilities on the date when the contract was awarded unless and until the EPA eliminates the name of such facility or facilities from such listing.
3. To use its best efforts to comply with clean air standards and clean water standards at the facility in which the contract is being performed.
4. To insert the substance of the provisions of this clause into any nonexempt subcontract, including this paragraph.

**CLEAN AIR AND WATER CERTIFICATION** [Applicable if contract amount exceeds \$100,000, "or the contracting officer has determined that orders under an indefinite quantity contract in any year will exceed \$100,000," or a facility to be used has been the subject of a conviction under the Clean Air Act (42 U.S.C. 1857c-8(c)(1)) or the Federal Water Pollution Control Act (33 U.S.C. 1319(c)) and is listed by EPA, or is not otherwise exempt.]

Contractor/supplier certifies as follows:

1. Any facility to be utilized in the performance of the proposed contract has not been listed on the Environmental Protection Agency List of Violating Facilities.
2. Contractor/supplier will promptly notify the Contracting Officer, prior to award of the receipt of any communication from the Director, Office of Federal Activities, Environmental Protection Agency, indicating that any facility which contractor/supplier proposes to use for the performance of the contract is under consideration to be listed on the EPA List of Violating Facilities.

  
(Signature of Authorized Representative)

President

(Title of Authorized Representative)

July 17, 1981

Date

supplier proposes to use for the performance of the contract is under consideration to be listed on the EPA List of Violating Facilities.

3. Contractor/supplier will include substantially this certification, including this paragraph (3), in every nonexempt subcontract.

**R. NON-SEGREGATED FACILITIES CERTIFICATION** [Applicable if contract amount exceeds \$10,000 (40 CFR 1.8).]

Contractor/supplier certifies that it does not and will not maintain any facilities it provides for its employees in a segregated manner or permit its employees to perform their services at any location under its control where segregated facilities are maintained, and that contractor/supplier will obtain a similar certification in the form approved by the Director, Office of the Federal Contract Compliance Programs, prior to the award of any non-exempt subcontract.

**CONTRACTOR/SUPPLIER CLASSIFICATION** — Check appropriate block(s).

☐ **SMALL BUSINESS CONCERN**

Firms which are independently owned and operated, not dominant in their field and meet employment and/or sales standards developed by the Small Business Administration and set forth in 41 CFR Sec. 1-1.701-1.

☐ **MINORITY BUSINESS ENTERPRISE** (defined in Paragraph H)

☐ **WOMEN-OWNED BUSINESS CONCERN** (defined in Paragraph J)

☐ **SMALL BUSINESS CONCERN OWNED AND CONTROLLED BY SOCIALLY AND ECONOMICALLY DISADVANTAGED INDIVIDUALS** (defined in Paragraph L)

Maverick Construction Co.

Company

P. O. Box 4141

Corpus Christi, Texas 78408

Address

FOLD AND STAPLE OR TAPE TOGETHER AND STAMP CERTIFICATE SO THAT PRE-ADDRESSED PANEL MARKED "RETURN" FACES OUTWARD.

RECEIVED  
JUL 23 1981  
MATERIALS MGMT.