

# City of Santa Fe, New Mexico

# memo

Date: March 6, 2023

To: John Blair, City Manager

Via: *Regina Wheeler*  
Regina Wheeler - Mar 6, 2023 12:15 MST  
Regina Wheeler, Public Works Department Director

From: Angelica M. Serrano, Parking Administrative Manager

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## ACTION:

Approval to enter a (5) five-year Agreement with the option to renew for five (5) one-year terms with Loretto Tours, LLC d/b/a Loretto Lines for the use of the curbside parking space from the City to load and unload passengers on and off of a tour vehicle. The City shall receive a total amount of \$5110.00 annually plus applicable gross receipts tax for the use of (1) one reserved parking space located at approximately 111 W. San Francisco St.

## BACKGROUND AND SUMMARY:

The City of Santa Fe Parking Division previously (pre-Covid) held an agreement with Loretto Tours leasing a parking space located at approximately 111 W. San Francisco St. Parking staff negotiated the terms of the attached (5) five-year Agreement. The terms and conditions of this agreement are standard and inline with the Parking Division's other related parking service agreements.

Attachments: Original Agreement with Attachments  
Contract Summary

**NON-EXCLUSIVE LICENSE AGREEMENT**

This Non-Exclusive License Agreement ("License") is made and entered into this 1 day of March, 2023, by and between the City of Santa Fe, ("Licensor") a New Mexico Municipal Corporation and Loretto Tours, LLC d/b/a Loretto Lines ("Licensee"). The date of this Agreement shall be the date when it is executed by the City or the Contractor, whichever occurs last.

IN CONSIDERATION of the Licensee's promises herein, the Licensor hereby grants a License to the Licensee, revocable and terminable as hereinafter provided, to enter on and make use of the property of the Licensor as follows:

1. PREMISES

The Licensee may occupy, subject to all terms and conditions of this License, 109 E. San Francisco Street, the property described on Exhibit "A" hereinafter referred to as the "Premises".

2. USE OF THE PREMISES

The Premises shall be used by the Licensee solely for the purpose of operating a tour service and for parking Licensee's vehicles on the Premises.

A. The Licensee shall be permitted non-exclusive use of the Premises, solely for the purpose of loading and unloading passengers on and off a tour vehicle as described hereinafter and regulated by this License. The Licensee shall not obstruct or impede traffic and shall not create a hazard during the loading and unloading of passengers. No vehicle engine shall be permitted to idle for longer than 5 minutes while loading or unloading passengers from any tour vehicle.

B. The Premises shall be used only for the purposes indicated in this Agreement and the Licensee shall not have the right to make alterations, attach fixtures, erect additions, or structures, in or upon the dedicated space without the approval of the Licensor. Signs displaying

prices and boarding times shall meet the standards outlined in the Historical District Ordinance Sign Regulations governing the design, color, texture, finish, and materials. No sign shall be located within any public right-of-way.

C. The Licensee shall not have access to the Premises during special events requiring closure of the streets surrounding the Plaza, including but not limited to Girls Inc., July 4<sup>th</sup> Pancake Breakfast, Santa Fe Fiestas, Indian Market, Spanish Market and other special Plaza events. An alternate space will not be provided during these special events. The Licensor will notify the Licensee in writing, at least two weeks in advance of such events.

### 3. CONDITIONS OF LICENSE USE

The following conditions are imposed upon Licensee:

A. The Licensee must hold a valid permit or certificate as required by the Public Regulation Commission for tour/sightseeing services.

B. The vehicles operated from the Premises are restricted to a motorized single unit design and shall not exceed 20 feet in length or 8.5 feet in width. If Licensee elects to use a sound system in said vehicle, it shall be a low volume multi-speaker system.

C. Licensee shall provide the proposed tour vehicles and proof of vehicle insurance to the City of Santa Fe Parking Division for inspection. Should Licensee alter a tour vehicle in any manner, other than a recommended manufacturer's alteration, Licensee shall provide the vehicle and proof of insurance to the City's Parking Division for inspection.

### 4. TERM

The term of this License shall commence on March 1, 2023, and shall terminate on April 30, 2028.

### 5. TERMINATION

This License may be terminated by either of the parties hereto upon written notice delivered to the other party at least thirty (30) days prior to the intended date of termination. By

such termination, neither party may nullify obligations already incurred for performance or failure to perform prior to the date of termination. Upon termination of this License, there shall be no refund of the License fee or any portion thereof.

6. FEE

A. For this License, the Licensee shall pay to Licensor the following amounts:

Year 1: March 1, 2023, through February 28, 2024 -- \$ 5,110.00 plus applicable gross receipts tax.

Year 2: March 1, 2024, through February 28, 2025 -- \$ 5,110.00 plus applicable gross receipts tax.

Year 3: March 1, 2025 through February 28, 2026 -- \$ 5,110.00 plus applicable gross receipts tax.

Year 3: March 1, 2026 through February 28, 2027 -- \$ 5,110.00 plus applicable gross receipts tax.

Year 3: March 1, 2027 through February 28, 2028 -- \$ 5,110.00 plus applicable gross receipts tax.

B. Licensee shall pay the fee no later than April 1<sup>st</sup> of every year at the Parking Division Office, 500 Market St., Suite 200, Santa Fe, NM, 87501.

C. The fee may be split into two payments; first payment of \$2,555 plus applicable gross receipts tax is due April 1<sup>st</sup> of every year and the second payment in the same amount is due July 1<sup>st</sup>.

D. Failure to pay the fee shall result in the termination of this License.

7. LIABILITY & INSURANCE

Licensee shall carry and maintain in full force and effect during the term of this Agreement, public liability insurance covering bodily injury and property damage liability, for



each tour vehicle, in a form and with an insurance company acceptable to Licensor, with limits of coverage not less than as stated in the New Mexico Torts Claims Act for each person injured and for each accident resulting in damage to property, against all claims and lawsuits arising from the Licensee's use of the Premises. Licensee shall cause the Licensor to be named as additional insured on such policy of insurance. Licensee shall deliver a copy of such policy to Licensor before the Licensor records the Lease Agreement. Such policy shall provide that the coverage evidenced thereby shall not be terminated or modified without 30 days prior written notice to the Licensor.

8. NO INTEREST CREATED

The Licensee agrees that no interest or estate of any kind whatsoever in the Premises is conveyed by virtue of this License Agreement or any occupancy or use hereunder. Licensee shall not assign, sublicense or otherwise transfer this License Agreement, and any such actions taken by Licensee shall result in the immediate termination of this License Agreement.

9. SUBCONTRACTING

The Licensee shall not subcontract any portion of the services to be performed under this Licensee without the prior written approval of the Licensor.

10. NO THIRD-PARTY BENEFICIARIES

By entering into this License, the parties do not intend to create any right, title or interest in or for the benefit of any person other than the Licensor and the Licensee. No person shall claim any right, title or interest under this Licensee or seek to enforce this Licensee as a third party of the City to recover excessive illegal payments.

11. NOTICES

Any notices required or permitted to be delivered hereunder shall be in writing and shall be deemed to be delivered, given and received when (i) personally delivered, or (ii) five days after the same are deposited in the United States mail, postage prepaid, registered or certified mail,

return receipt requested, addressed to the applicable party at the address indicated below for such party, or at such other address as may be designated by either party in a written notice to the other party.

Licensors: City of Santa Fe  
Parking Division  
P. O. Box 909  
Santa Fe, NM 87504-0909

Licensee: Loretto Tours, LLC  
Attn: Christian Andersson  
PO Box 2021  
Santa Fe, NM 87504

12. NON-DISCRIMINATION

During the term of this Agreement, Licensee shall not discriminate against any employee or applicant for an employment position to be used in the performance of services by Licensee hereunder, on the basis of ethnicity, race, age, religion, creed, color, national origin, ancestry, sex, gender, sexual orientation, physical or mental disability, medical condition, or citizenship status.

13. APPLICABLE LAW; CHOICE OF LAW; VENUE

Licensee shall abide by all applicable federal and state laws and regulations, and all ordinances, rules and regulations of the City of Santa Fe. In any action, suit or legal dispute arising from this Agreement, the Licensee agrees that the laws of the State of New Mexico shall govern. The parties agree that any action or suit arising from this Agreement shall be commenced in a federal or state court of competent jurisdiction in New Mexico. Any action or suit commenced in the courts of the State of New Mexico shall be brought in the First Judicial District.

14. AMENDMENT

This License Agreement shall not be altered, changed or amended except by amendment in writing executed by the parties hereto.

IN WITNESS WHEREOF, Licensor and Licensee have set their hands on the day and year first above written.

CITY OF SANTA FE

John Blair  
John Blair (Mar 20, 2023 09:42 MDT)

JOHN BLAIR, CITY MANAGER

ATTEST:

Kristine Mihelcic  
KRISTINE BUSTOS MIHELICIC, CITY CLERK XIV

CITY ATTORNEY'S OFFICE

Marcos Martinez  
Marcos Martinez (Mar 3, 2023 14:08 MST)  
SENIOR ASSISTANT CITY ATTORNEY

APPROVED FOR FINANCES:

Emily K. Oster  
Emily K. Oster (Mar 19, 2023 10:08 MDT)  
EMILY OSTER, FINANCE DIRECTOR  
5350451 | 471400 AH  
ORG/OBJ

LICENSEE:

Christian Andersson  
CHRISTIAN ANDERSSON

CRS#  
Registration No.  
NM Taxation & Revenue  
Department CRS #

**EXHIBIT "A"**

1. PREMISES.

A. The Premises is located at approximately 111 W. San Francisco St. to a point occupying one meter space, not to include No Parking Zones or Loading Zones.

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>LORETTO TOURS LLC</b>	
2 Business name/disregarded entity name, if different from above <b>LORETTO LINES</b>	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
<input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <b>S</b> Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	
<input type="checkbox"/> Other (see instructions) ▶	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	Exempt payee code (if any) _____
	Exemption from FATCA reporting code (if any) _____
5 Address (number, street, and apt. or suite no.) See instructions. <b>PO BOX 2021</b>	
Requester's name and address (optional)	
6 City, state, and ZIP code <b>SANTA FE, NM 87504</b>	
7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number													
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2	0	-	8										
4	1	9	5										
5	5	9											

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>7/6/2022</b>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is Backup Withholding*, later.



STATE OF NEW MEXICO  
Taxation and Revenue Department



Susana Martinez  
Governor

Demesia Padilla, CPA  
Secretary

LORETTO LINE  
PO BOX 2021  
SANTA FE, NM 87504-2021

February 11, 2013  
CRS: 03-083042-00-7  
Letter ID: L1600602944

STATE OF NEW MEXICO TAXATION AND REVENUE DEPARTMENT  
REGISTRATION CERTIFICATE

Date ID Issued <b>16-Feb-2007</b>	IDENTIFICATION NUMBER <b>03-083042-00-7</b>	Business Start Date <b>01-Apr-2007</b>
Business Location <b>207 OLD SANTA FE TRAIL</b>	Business End Date	
City and State <b>SANTA FE, NM</b>	Zip Code <b>87501</b>	
Taxpayer Name <b>MAGGIE ANDERSSON</b>	Taxpayer Type <b>PROPRIETOR</b>	
Firm Name <b>LORETTO LINE</b>	Filing Frequency <b>MONTHLY</b>	
Mailing Address <b>PO BOX 2021</b>		
City and State <b>SANTA FE, NM</b>	Zip Code <b>87504-2021</b>	

This Registration Certificate is issued pursuant to Section 7-1-12 NMSA 1978 for Gross Receipts, County Gross Receipts, Municipal Gross Receipts, Compensating and Withholding Taxes. This copy must be displayed conspicuously in the place of business. Any purchaser of the registrant's business is subject to certain requirements under Section 7-1-61 NMSA 1978.

Division Director Tax Administration

By 

Any inquiries concerning your Identification Number should be addressed to the Audit & Compliance Division, P.O. Box 630, Santa Fe, New Mexico 87504-0630

Form Revised 02/2003

THIS CERTIFICATE IS NOT TRANSFERABLE

STATE OF NEW MEXICO TAXATION AND REVENUE DEPARTMENT  
REGISTRATION CERTIFICATE

Date ID Issued <b>16-Feb-2007</b>	IDENTIFICATION NUMBER <b>03-083042-00-7</b>	Business Start Date <b>01-Apr-2007</b>
Business Location <b>207 OLD SANTA FE TRAIL</b>	Business End Date	
City and State <b>SANTA FE, NM</b>	Zip Code <b>87501</b>	
Taxpayer Name <b>MAGGIE ANDERSSON</b>	Taxpayer Type <b>PROPRIETOR</b>	
Firm Name <b>LORETTO LINE</b>	Filing Frequency <b>MONTHLY</b>	
Mailing Address <b>PO BOX 2021</b>		
City and State <b>SANTA FE, NM</b>	Zip Code <b>87504-2021</b>	

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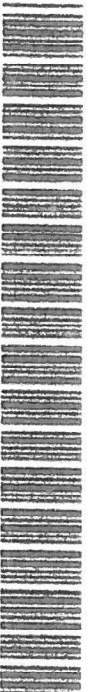
Division Director Tax Administration

By 

Any inquiries concerning your Identification Number should be addressed to the Audit & Compliance Division, P.O. Box 630, Santa Fe, New Mexico 87504-0630

Form Revised 02/2003

THIS CERTIFICATE IS NOT TRANSFERABLE



121600802944072



## CITY OF SANTA FE OTHER METHOD PROCUREMENT CHECKLIST

Contractor Name: Loretto Tours LLC Loretto Lines

Procurement Title: Agreement

Other Methods: State Price Agreement  Cooperative  Sole Source  Exempt  Other  Lease

Department Requesting/Staff Member Public Works / Angelica M. Serrano

**Procurement Requirements:**

*A procurement file shall be maintained for all contracts, regardless of the method of procurement. The procurement file shall contain the basis on which the award is made, all submitted bids, all evaluation materials, score sheets, quotations and all other documentation related to or prepared in conjunction with evaluation, negotiation, and the award process. The procurement shall contain a written determination from the Requesting Department, signed by the purchasing officer, setting forth the reasoning for the contract award decision before submitting to the Committees.*

**REQUIRED DOCUMENTS FOR APPROVAL BY PURCHASING\***

YES	N/A	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved Procurement Checklist (by Purchasing)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Departments Recommendation of Award Memo addressed to Finance
<input type="checkbox"/>	<input checked="" type="checkbox"/>	State Price Agreement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cooperative Agreement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sole Source Request and Determination Form
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contractors Exempt Letter
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Purchasing Officers approval for exempt procurement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	BAR
<input type="checkbox"/>	<input checked="" type="checkbox"/>	FIR
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contract, Agreement or Amendment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Current Business Registration and CRS numbers on contract or agreement
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Summary of Contracts and Agreements form
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Certificate of Insurance
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

Angelica M. Serrano / Parking Administrative Manager  
 Department Rep Printed Name and Title

[Signature]  
 Department Rep Signature attesting that all information included

[Signature]  
 Purchasing Officer attesting that all information is reviewed

**REQUIRED DOCUMENTS FOR OTHER METHOD FILE\***

YES	N/A	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	State Price Agreement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cooperative Agreement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sole source Request and Determination Form
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contractors Exempt Letter
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Purchasing Officers approval of exempt procurement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Copies of all Sole Source submittals

\*

Other: \_\_\_\_\_

**AWARD\***

YES N/A

Fully executed Memo to Committees from the Department with recommendation of award  
 Other: \_\_\_\_\_

**CONTRACT\***


YES N/A

Copy of Executed Contract  
  Copy of all documentation presented to the Committees  
  Finalized Council Committee Minutes  
 Other: \_\_\_\_\_

Include all other substantive documents and records of communication that pertain to the procurement and any resulting contract.

**Create a separate file folder which may contain any documents with trade secrets or other competitively sensitive, confidential or proprietary information.**

Amelina M. Serrano' Parking Administrative Manager  
Department Rep Printed Name and Title

  
Department Rep Signature attesting that all information included





# City of Santa Fe

## Real Estate Summary of Contracts, Agreements, Amendments & Leases

### Section to be completed by department

11. Munis Contract # 3203952

Contractor: Loretto Tours LLC dba Loretto Lines

Description: Lease of curbside parking space located at approximately 111 W. San Francisco

Contract  Agreement  Lease / Rent  Amendment

Term Start Date: 3-1-2023 Term End Date: 4-30-2028

Approved by Council Date: \_\_\_\_\_

### Contract / Lease:

Amendment # \_\_\_\_\_ to the Original Contract / Lease # \_\_\_\_\_

Increase/(Decrease) Amount \$ \_\_\_\_\_

Extend Termination Date to: \_\_\_\_\_

Approved by Council Date: \_\_\_\_\_

### Amendment is for:

2. **HISTORY** of Contract, Amendments & Lease / Rent - Please Elaborate (option: attach spreadsheet if multiple amendments)

3. Procurement History: \_\_\_\_\_

[Signature] Mar 17, 2023  
Purchasing Officer Review: \_\_\_\_\_ Date: \_\_\_\_\_  
Comment & Exceptions: No procurement / Lease only

4. Funding Source: Parking Enterprise Fund Org / Object: 5350451 | 471400

Andy Hopkins Mar 17, 2023  
Budget Officer Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Comment & Exceptions: \_\_\_\_\_

Staff Contact who completed this form: Angelica Serranom Phone # 505.955.6711

Email: amserrano@santafenm.gov

### To be recorded by City Clerk:

Clerk # \_\_\_\_\_

Date of Execution: \_\_\_\_\_



**City of Santa Fe**

Treasury Department  
200 Lincoln Ave.  
Santa Fe, New Mexico 87504-0909  
505-955-6551

**BUSINESS REGISTRATION**

**Business Name:** LORETTO TOURS LLC  
DBA: LORETTO LINE

**Business Location:** 207 OLD PECOS TRL  
SANTA FE, NM 87501

**Owner:** LORETTO TOURS LLC

**License Number:** 225894

**Issued Date:** November 17, 2022

**Expiration Date:** November 17, 2023

**CRS Number:** 03083042007

**License Type:** Business License - Renewable

**Classification:** Business Registration - Standard

**Fees Paid:** \$35.00

LORETTO TOURS LLC  
207 OLD SANTA FE TRL  
SANTA FE, NM 87501

THIS IS NOT A CONSTRUCTION PERMIT OR SIGN PERMIT.  
APPROPRIATE PERMITS MUST BE OBTAINED FROM THE CITY  
OF SANTA FE BUILDING PERMIT DIVISION PRIOR TO  
COMMENCEMENT OF ANY CONSTRUCTION OR THE  
INSTALLATION OF ANY EXTERIOR SIGN.

THIS REGISTRATION/LICENSE IS NOT TRANSFERABLE TO  
OTHER BUSINESSES OR PREMISES.

TO BE POSTED IN A CONSPICUOUS PLACE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/07/2023

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).

<b>PRODUCER</b>		<b>CONTACT NAME:</b> Maria Vigil	
Jemez Agency 2610 Trinity Dr Ste 6		<b>PHONE (A/C, No, Ext):</b> 505.662.5181	<b>FAX (A/C, No):</b> 505.662.1427
Los Alamos NM 87544		<b>E-MAIL ADDRESS:</b> mvigil@thejemezagency.com	
<b>INSURED</b>		<b>INSURER(S) AFFORDING COVERAGE</b>	
Loreto Tours PO Box 2021		<b>INSURER A:</b> NATIONAL INDEMNITY GROUP OF INSURANCE	
Santa Fe NM 87501		<b>INSURER B:</b>	
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**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	ADU	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <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 \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			70APS078570	03/01/2023	11/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			72XAS004411	03/01/2023	11/01/2023	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER****CANCELLATION**

City of Santa Fe Parking Division  PO Box 909  Santa Fe, NM 87504	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 <i>Maria J. Vigil</i>
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# 23-0125 Loretto Tours PW PARKING

Final Audit Report

2023-03-20

Created:	2023-03-17
By:	Xavier Vigil (xivigil@ci.santa-fe.nm.us)
Status:	Signed
Transaction ID:	CBJCHBCAABAAANMe03xLI1Y4_bGexBRnb55phDHptMZZA

## "23-0125 Loretto Tours PW PARKING" History

-  Document created by Xavier Vigil (xivigil@ci.santa-fe.nm.us)  
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2023-03-18 - 11:44:18 PM GMT- IP address: 174.205.46.242
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-  Signer jwblair@santafenm.gov entered name at signing as John Blair  
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-  Document emailed to Kristine Mihelcic (kmmihelcic@santafenm.gov) for signature  
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Document e-signed by Kristine Mihelcic (kmmihelcic@santafenm.gov)

Signature Date: 2023-03-20 - 5:09:28 PM GMT - Time Source: server- IP address: 174.205.50.1



Agreement completed.

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