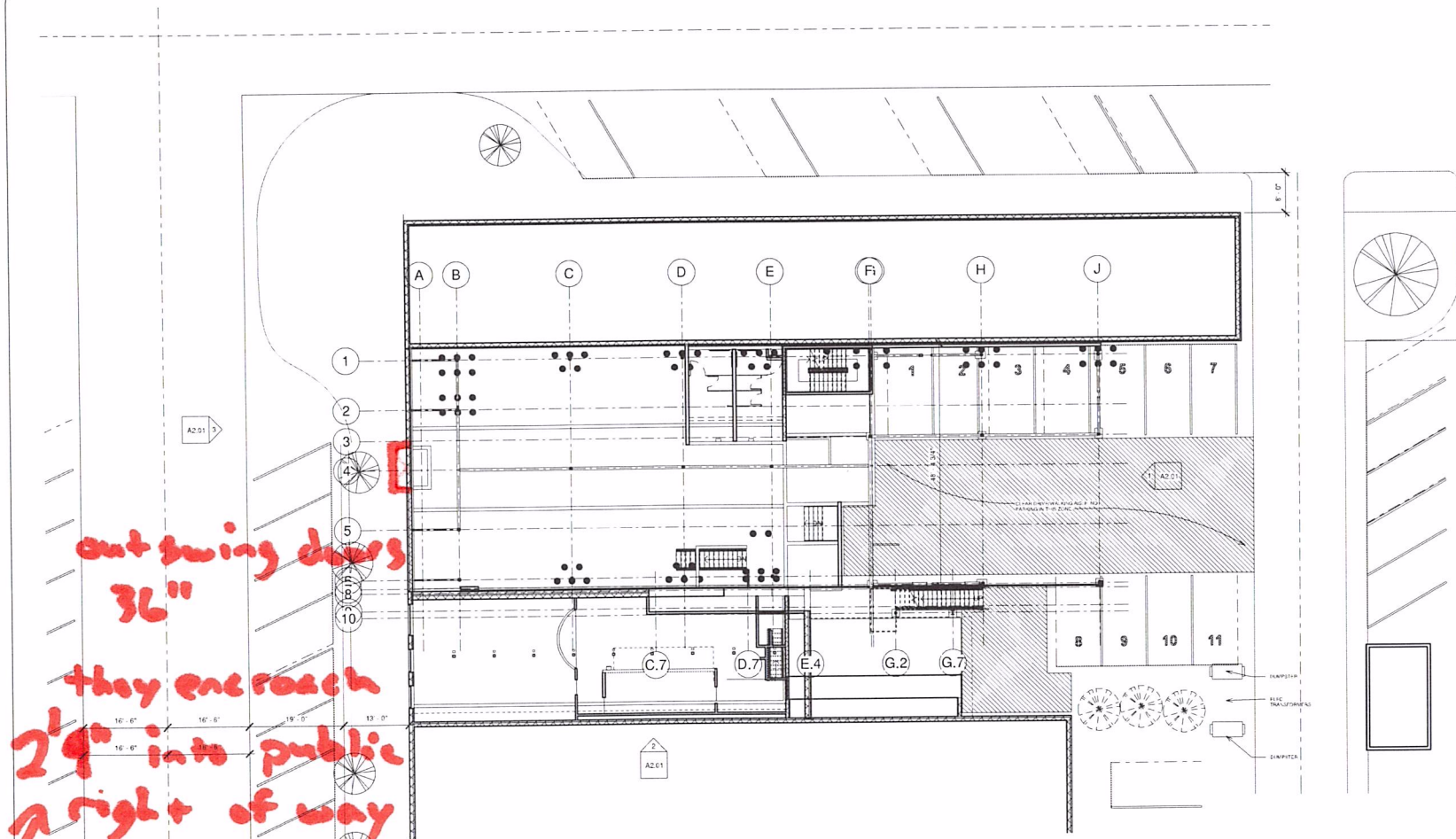


This store front was built different than the plans for a multitude of reasons. We found out when demoing the building that the store front was designed for glass that was 4 foot taller than planned. Using the height of glass made it hard to build in the alcove. The alcove also did not meet ADA requirements and this does. ADA is federal so it usually super cedes local codes. The public right of way is smaller than the normal 36" so the doors swing 2.4' into the public right of way. There are seven other doors downtown that currently swing into the tan part of the sidewalk which is in the public right of way. The doors cannot swing in because of the fire code. The way the doors are built now, meets both the fire code and ADA requirements. BHPC and SHPO had both approved the exterior design. So the only remaining thing is the doors, when open, encroach 2.4" into the 96" public right of way.



1 ARCHITECTURAL SITE PLAN  
3/32" = 1'-0"

(two foot four inches)

**SITE NOTES:**  
1. SITE LOCATION INDICATED AT TOTAL OF 11 PLOTS.



ID8Architecture, LLC  
414 Main Ave. Suite 3  
Brookings, SD 57006  
(605) 695-9635  
(W) www.id8arc.com



No.	Description	Date

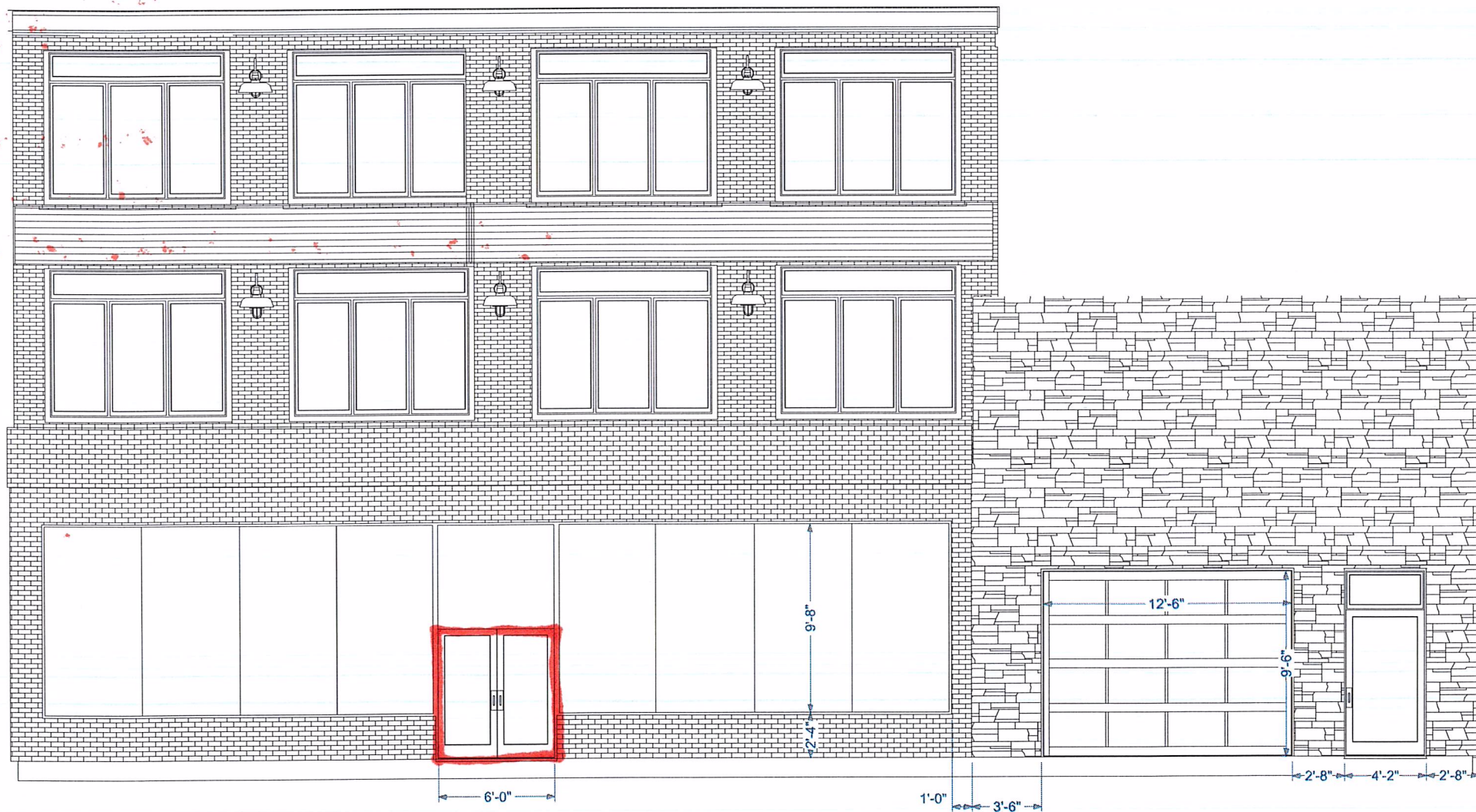
**BEN FRANKLIN BUILDING**

Enter address here

ALL DIMENSIONS & SIZE DESIGNATIONS ARE SUBJECT TO VENDOR SUPPLY, TIME, PRICE & AVAILABILITY. VERIFY ALL DIMENSIONS PRIOR TO CONSTRUCTION.

Architect	ARB
Prepared by	ARB
Drawn by	ARB
Job Number	1818
SITE	
SCALE	As indicated

A1.01



Outswing doors 36"

They encroach 2'4" into public right of way  
(two feet four inches)



TI 1" CLEAR TEMPERED IG 270 LOW-E (ON 2) + ARGON



ELEV. BFE-1 1" GLAZING  
1 THUS  
CMI NARROW STILE DOORS WITH 10" BOTTOM RAIL  
CTS 1 3/4" X 4 1/2"  
FINISH: DARK BRONZE ANODIZED

HARDWARE			
DESCRIPTION	PART NUMBER	FINISH	MFG.
CLOSERS	5300	DKBRZ	HAGER
BUTT HINGES	N/A	DK BRZ	CMI
HOOK LOCK	N/A	N/A	CMI
FLUSH BOLTS	N/A	DK BRZ	CMI
WEATHERSTRIPPING	N/A	N/A	CMI
BUTT THRESHOLD	N/A	MILL	CMI
SWEEPS	N/A	DK BRZ	SEALEZE



JOB #: 19-241

CERTIFICATION OF COMPLIANCE  
THIS MATERIAL HAS BEEN REVIEWED FOR  
COMPLIANCE WITH DESIGN CONCEPT AND  
ARE CONFORMANCE WITH DESIGN DRAWINGS,  
SPECIFICATIONS, AND APPLICABLE CODES.

PROJECT: BEN FRANKLIN SQUARE

RECORDING ID

ARCHITECT:

CONSTRUCTION MANAGER:

REVISION

#	DATE

DATED DRAWN: 20 MARCH 2020

DRAWN BY: BEAR SOLD BY: BEAR

SCALE: 1"=2'-0"

PROJECT MGR: BRAD SKYBERG

SHEET: E1

# EXHIBIT



Prepared By:



Civil Engineers & Land Surveyors  
Brookings, South Dakota  
Ph. 605-696-3200



May, 2020  
Scale: 1" = 20'



KINDHOL-01

RKOCH

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/22/2020

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

<b>PRODUCER</b> McKinneyOlson Insurance 1412 S. Minnesota Avenue Sioux Falls, SD 57105	<b>CONTACT NAME:</b> Rhonda Koch	
	<b>PHONE (A/C, No, Ext):</b> (605) 274-2626	<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> rhondak@mckinneyolson.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
	<b>INSURER A :</b> Auto-Owners Insurance	<b>18988</b>
<b>INSURED</b>  Kind Holdings, LLC 120 Main Ave S Brookings, SD 57006	<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	ADDL INSD	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  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X		77885258	6/19/2020	6/19/2021	EACH OCCURRENCE \$ <b>1,000,000</b>
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b>
							MED EXP (Any one person) \$ <b>10,000</b>
							PERSONAL & ADV INJURY \$ <b>1,000,000</b>
							GENERAL AGGREGATE \$ <b>2,000,000</b>
							PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>
							\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$
	DED <input type="checkbox"/> RETENTION \$						AGGREGATE \$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
							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)  
Additional Insured - City of Brookings - Policy endorsed for Form #CG 20 12 - hold harmless clause for the life of the structure located in the public right-of-way.

## CERTIFICATE HOLDER

## CANCELLATION

City of Brookings  
Brookings, SD 57006

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