

**GENERAL MEETING OF THE BOARD OF DIRECTORS
OF THE
CENTRAL TEXAS REGIONAL MOBILITY AUTHORITY**

RESOLUTION NO. 25-073

**APPROVING A CONTRACT WITH NORTEX CONCRETE LIFT AND
STABILIZATION, INC. FOR CONCRETE SLAB LIFTING AND STABILIZATION
ON THE 290 TOLL**

WHEREAS, the Mobility Authority performs regular inspections of its toll facilities to ensure their safety and quality are appropriately maintained for the traveling public; and

WHEREAS, in the course of these inspections the Mobility Authority observed a degraded ride quality on the 290 Toll; and

WHEREAS, by Resolution No. 25-035, dated June 25, 2025, the Board of Directors approved Fiscal Year 2026 Operating Budget which included funds for addressing ride quality issues on the 290 Toll; and

WHEREAS, Nortex Concrete Lift & Stabilization, Inc. participates in the Texas Multiple Award Schedule (TXMAS) Program administered by the State Comptroller's Office as part of Texas SmartBuy Membership Program; and

WHEREAS, in accordance with Article 15 of the Mobility Authority Policy Code, purchases made through a cooperative program such as the Texas SmartBuy Membership Program are deemed to have satisfied Mobility Authority procurement requirements; and

WHEREAS, in order to address the ride quality issues on the 290 Toll, the Executive Director has negotiated a scope of work with Nortex Concrete Life & Stabilization, Inc. which is attached hereto as Exhibit A; and


WHEREAS, the Executive Director recommends entering into a contract for slab lifting and stabilization services Nortex Concrete Lift & Stabilization, Inc. through the TMAS Program in an amount not to exceed \$400,000, including contingency.

NOW THEREFORE, BE IT RESOLVED that the Board of Directors hereby approves the proposed scope of work with Nortex Concrete Lift & Stabilization, Inc. in the form or substantially the same form attached hereto as Exhibit A; and

BE IT FURTHER RESOLVED that the Board of Directors hereby authorizes the Executive Director to enter into a contract with Nortex Concrete Lift & Stabilization, Inc. in the amount of \$400,000, including contingency.

Adopted by the Board of Directors of the Central Texas Regional Mobility Authority on the 17th day of December 2025.

Submitted and reviewed by:


James M. Bass
Executive Director

Approved:



Robert W. Jenkins, Jr.
Chairman, Board of Directors

Exhibit A

NORTEX

CONCRETE LIFT & STABILIZATION

Central Texas Regional Mobility Authority
3300 N. IH 35, Suite 300
Austin, TX 78705

Attn: Mike Sexton

Subject: Central Texas Regional Mobility Authority with use of contract number TXMAS-22-74501 for concrete pavement lifting and stabilization with polyurethane foam injections.

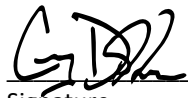
Date: December 4, 2025

This is an Agreement between Nortex Concrete Lift & Stabilization, Inc., and the Central Texas Regional Mobility Authority, for concrete pavement lifting and stabilization services with polyurethane foam injections to properly repair dips, heaves, and bridge approach slabs on the 290 Toll main lanes and SH-183A Toll main lanes at specific locations described in the documentation.

Enclosed you will find the following documents:

1. Scope of work to be performed at specified locations including 2 year warranty
2. Award Letter from Texas Comptroller of Public Accounts for Contract TXMAS-22-74501
3. TXMAS-22-74501 price list for all associated services under the contract
4. Quote with price list for repairs on expressway main lanes under contract TXMAS-22-74501
5. Incidental price list for lane closure fees, message boards, and off duty officers
6. TXDOT special spec 3008 for "Soil Densification and Raising Concrete Slabs with HDPF"
7. NCFI Polyurethanes Certificate of Conformance and material data sheets
8. Signed Form 1295
9. Nortex Concrete Lift - 2025 Certificates of Insurance for CTRMA

Compensation to be paid based on actual pounds of polyurethane foam material pumped at each location as specified in the contract documents. Once approved and executed, the purchase order for polyurethane injections repairs must be issued in the Texas SmartBuy online purchasing portal to receive the specified contract pricing.



Signature

12/4/25

Date

Casey DeRosa
General Manager
Nortex Concrete Lift & Stabilization, Inc.

Signature

Date

Mike Sexton
Director of Engineering
Central Texas Regional Mobility Authority



RAISING & UNDERSEALING CONCRETE PAVEMENT SCOPE OF WORK AND QUALITY CONTROL PLAN

Nortex Concrete Lift & Stabilization, Inc. is committed to maintaining an effective Quality Control Plan that reinforces our commitment to deliver a consistent high-quality product and service to our customers.

This plan addresses the following:

Equipment

Work Site Preparations

Construction Methods

Monitoring Procedures

Clean Up Procedures

Spill Clean Up Procedures

Material Information

Warranty Information

Equipment: A listing of lifting and undersealing equipment, this list is a minimum and shall not preclude the use of additional equipment.

- A. Pneumatic drills and electric drills capable of drilling 5/8-inch diameter holes.
- B. Truck mounted pumping units (Gusmer H20/35 Hydraulic Proportioner Pumps) capable of injecting high-density polyurethane foam between the concrete pavement and the sub-base, and capable of controlling the rate of rise of the pavement.
- C. Hilti Self Leveling Laser Level unit and lifting gages to ensure that pavement is lifted to an even plane.

Work Site Preparations: Shall be specified per contract documents and/or general accepted practices and procedures.

- A. The contractor shall review a profile of the pavement and footing provided by the owner to determine where the slab and footing need to be raised or void filled.

Construction Methods:

- A. Drilling: A series of 5/8" holes shall be drilled at four to six foot intervals through the concrete pavement. The contractor will determine the exact location and spacing of holes based on site conditions and scope of work.
- B. Injecting: The injector on the discharge guns shall make a tight seal in the injection hole. The polyurethane foam is two-component mixtures that meet at the discharge gun and is injected beneath the concrete pavement with approximately 1000 psi. The polyurethane foam initially remains in liquid form for approximately 15 – 20 seconds, which allows the material to move laterally beneath the concrete filling all voids in the area. The polyurethane foam then begins to set up and expand into its solid form exerting the necessary lifting force.
- C. Project Specifics: As discussed at sites where the wall/coping cracking is present, or the MSE wall panels protrude, and main settlement is along the wall; Nortex will start by drilling a row of holes 5' from the coping/wall. The length of the row will go from end to end of the settlement area or wall cracking area (whichever is greater). Polyurethane material will be injected just below the concrete to fill in any void and create a polyurethane barrier. Additional rows of holes will then be drilled and injected no closer to the wall to lift the settled area as best as possible. All injections at these locations will be performed this way to limit the pressure being applied to the protruded MSE wall panels, and to keep material from getting along the walls edge line to minimize additional cracking.

Monitoring Procedures:

- A. Controlling rise: The amount of rise shall be controlled using the pumping unit, by regulating the rate of injection of material. Lifting gauges and Laser shall be used to monitor the rise and ensure pavement is lifted to an even plane. Mix Ratio's on Gauges must be monitored periodically to ensure proper mixture of material being pumped along with monitoring of heat to keep foam somewhere in the vicinity of 80 to 140 degrees Fahrenheit (depending on outside air temperature).

- B. Drain inlets, asphalt shoulders, MSE walls, etc...will be monitored closely and consistently to ensure material below ground has not traveled to an area it is not intended to go.
- C. Supervisor shall be on site during entire operation and be fully trained in mechanical operation of equipment. Supervisor shall be responsible for safety of his crew at all times and responsible for monitoring lifting procedures.

Clean Up Procedures:

- A. All excess polyurethane material will be removed from the job site.
- B. All injections holes will be re-drilled to a depth of 2-3" and then non shrink cementitious grout will be poured into the open hole and struck flush with pavement surface.
- D. Entire work area will be cleaned and cleared to properly restore the operation lane.

Spill Clean Up Procedures:

- A. Entire area of spill to be covered and dispersed evenly with absorbent material kept on hand.
- B. After setting phase absorbent material is cleaned up and disposed of in thick trash bags and tied off for proper disposal.
- C. Process can be repeated until spill is sufficiently cleaned.

Material Information:

- A. All material used is certified for compliance with all state, and local authorities pertaining to the contract documents or special provisions. TXDOT ss3025 is provided along with NCFI Polyurethanes 24-003 material technical data sheet.

Warranty Information:

- A. All locations repaired under this contract stand by an industry standard two-year warranty that if a slab settles more than ½" in that period then it will be repaired free of charge. Traffic control and other incidental services would not be covered under the warranty.

**GLENN HEGAR TEXAS COMPTROLLER OF PUBLIC ACCOUNTS****NOTICE OF AWARD**

Nortex Concrete Lift & Stabilization, Inc.
Attn: Casey DeRosa
201 NW 26th St.
Fort Worth, TX 76164-7110

Re: Contract No. & Description: TXMAS-22-74501 Road and Highway Building
Materials, Asphaltic
Term of Contract: Date of Deputy Comptroller's signature on this Notice of
Award through December 20, 2022

The Comptroller of Public Accounts (CPA) accepts the TXMAS Offer Packet of Nortex Concrete Lift & Stabilization, Inc. (Contractor) and hereby awards Contractor a TXMAS contract (Contract). Contractor's awarded services will be processed through our Statewide Contract Management office (SCM) and will be available for purchase on the Texas SmartBuy online ordering system.

The Contract consists of the documents stated in Section 2 Contract Documents of the TXMAS Terms and Conditions CPA Addendum 1. The attached final catalog consists of services and pricing submitted and agreed upon by CPA and Contractor. The final catalog may exclude any services that CPA has decided not to award. Any excluded services are not permitted to be sold under the Contract and may not be added at any time during the life of the Contract.

To the extent there are conflicts between the Base Contract (between Oklahoma Office of Management & Enterprise Services (OMES) and Contractor, dated 11/18/2021) and the TXMAS Terms and Conditions, the TXMAS Terms and Conditions control, including the following stipulations:

1. TXMAS Terms and Conditions Section 20 Force Majeure controls over the Base Contract Terms and Conditions 23 Force Majeure.
2. TXMAS Terms and Conditions Section 28 Indemnification controls over the Base Contract Terms and Conditions 16. Indemnification.
3. TXMAS Terms and Conditions Section 40 Limitation of Liability controls over the Base Contract Terms and Conditions 16.5 Limitation of Liability.
4. TXMAS Terms and Conditions Section 43 Severability controls over the Base Contract Terms and Conditions 26.10 Severability.

Contractor may advertise the awarded Contract to Texas state agencies and Texas SmartBuy Member entities. Prior to mass advertising, a draft must be submitted to the TXMAS program for approval. Please complete the attached ECSM Submission Checklist and submit it with the draft advertisement to: txmas@cpa.texas.gov

Contractor shall be responsible for the fulfillment of any Purchase Order issued through Texas SmartBuy pursuant to the terms and conditions of the Contract. Contractor shall not ship any products or provide services until receipt of a Purchase Order issued through Texas SmartBuy.

CPA does not guarantee a specific volume to be purchased throughout the term of the Contract. No minimum compensation to the Contractor is guaranteed.

Texas Comptroller of Public Accounts

DocuSigned by:

Lisa Craven

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Lisa Craven

Deputy Comptroller

Date: 5/26/2022 | 9:02 AM CDT



Contract: TXMAS-22-74501
 Description: Road and Highway Building
 Materials
 Contract Dates: 12/21/24 – 12/20/2025
 Renewal Options: No remaining terms



Contractor:
 Nortex Concrete Lift & Stabilization, Inc.
 201 NW 26th St.
 Fort Worth, TX 76164
 VID: 12002919921

TXMAS-22-74501 – Slab Jacking Price List

Item Number	Description/Measurement	Unit	Price per Unit
	Concrete Pavement Lifting and Stabilization		
1000003294	Polyurethane Injections (200 LBS - 1,000 LBS)	LB	\$4.81
1000002795	Polyurethane Injections (1,001 LBS – 5,000 LBS)	LB	\$4.60
1000003269	Polyurethane Injections (5,001 LBS – 10,000 LBS)	LB	\$4.45
1000003346	Polyurethane Injections (10,001 LBS and above)	LB	\$4.30
41114603	Dynamic Cone Penetrometer Testing	Each	\$456.00
	Value Added Section		
VA-1	Concrete Joint Grinding (0 – 1,000 Linear Feet)	LF	\$6.09
VA-2	Concrete Joint Grinding (1,001 & above Linear Feet)	LF	\$4.06
VA-3	Cleaning & Resealing with Joint Sealant	LF	\$25.38
VA-4	Soil Densification (Polyurethane Injections at Depths from 3.0 FT – 10.0 FT)	LB	\$5.06
VA-5	Soil Densification (Polyurethane Injections at Depths 10.1 FT and Above)	LB	\$5.47



Quote

TO: Central Texas Regional Mobility Authority (CTRMA)
ATTN: John Jones - Asst. Director of Engineering-Maintenance
RE: TXMAS-22-74501 Polyurethane Injection Repairs
DATE: 12/3/2025

REMIT PAYMENT TO:
 P.O. Box 4935
 Fort Worth, TX 76164

Loc #	Direction	Highway	Work Area	Dimensions	Lift	lift/stabilize	deep injection
						QTY LBS.	QTY LBS.
1	EB	290 Express @ 183 Overpass	Departure	45' x 55'	2.0"	2700	
2	EB	290 Express @ Springdale Rd	Approach	65' x 65'	2.0"-3.0"	4000	
3	EB	290 Express @ Springdale Rd	Departure	75' x 65'	2.0"-3.0"	4200	
4	EB	290 Express @ Ferguson Branch	Departure	40' x 50'	3.0"		2400
5	EB	290 Express @ Walnut Creek	(Can not fix - departure higher than bridge deck)				
6	EB	290 Express @ RM 590.3	Heave - 2 Left Lanes	150' x 30'	3.0"-4.0"		4800
7	EB	290 Express @ RM 590.7-590.8	Heave - 2 Left Lanes	140'x30'	3.0"-4.0"		4700
8	EB	290 Express before Giles Overpass	3 dips- Entrance and Right Lanes	90' x 35' 50' x 35' 60' x 35'	2.0"-4.0"	7400	
9	EB	290 Express @ Harris Branch	Approach	50' x 60'	3.0"		3200
10	EB	290 Express @ Harris Branch	Departure	50' x 60'	3.0"		3200
11	EB	290 Express @ TX -130	Approach	40' x 60'	2.0"-3.0"		3000
12	EB	290 Express @ TX -130	Departure	40' x 60'	2.0"-3.0"		3000
13	WB	290 Express @ TX -130	Departure	48' x 60'	2.0"-3.0"	3200	
14	WB	290 Express @ RM 592.4	Dip - Left 3 Lanes	65' x 46'	3.0"-4.0"		3700
15	WB	290 Express @ Harris Branch	Departure	45' x 60'	2.0"-3.0"	3200	
16	WB	290 Express @ Tuscany Way	Approach	45' x 60'	2.0"-3.0"	3200	
17	WB	290 Express @ Tuscany Way	Departure	45' x 60'	3.0"	3200	
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
TOTAL:						31100	28000

ITEM	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	EXTENSION
1000003346	Polyurethane Injections (10,000 LBS and above)	LB	31100	\$4.30	\$133,730.00
VA-4	Soil Densification (Polyurethane Injections at Depths from 3.0 - 10.0 FT)	Day	28000	\$5.06	\$141,680.00
				TAX:	EXEMPT
				TOTAL:	\$275,410.00

All pricing from Texas Smartbuy Contract TXMAS-22-74501. You will only be charged for LBS pumped.

NORTEX CONCRETE LIFT & STABILIZATION

201 NW 26th St, Fort Worth, TX 76164
 Tel: 817-831-1240 Fax: 817-831-1245

Russell Capps

russell@nortexconcretelift.com
 817-269-9968



201 NW 26th St.
Fort Worth, TX 76164
(817) 831-1240 office
(817) 831-1245 fax

TXMAS-22-74501 Concrete pavement lifting and stabilization with polyurethane injections and value-added services

Price sheet per location for traffic control and off duty officers

Item Number	Description/Measurement	Unit	Unit Price	Quantity	Total
Incidental	Message Board/s: All Project	Night	\$100	24	\$2,400
Incidental	Off Duty Officer/s: All Project	Hour	\$70	153	\$10,710
Location #1	EB 290 Express @ 183 Overpass, Departure Slab, 45'x55', 2.0" Lift				
Incidental	Single RL, swap to single LL, exit remains open – Freeway/highway	Night	\$2,500	1	\$2,500
Location #2	EB 290 Express @ Springdale Rd, Approach Slab, 65'x65', 2"-3" Lift				
Incidental	Single RL with exit ramp closed, Double LL closure – Freeway/highway	Night	\$3500	2	\$7,000
Location #3	EB 290 Express @ Springdale Rd, Departure Slab, 75'x65', 2'-3" lift				
Incidental	Included w/ location #2	Night	n/a	n/a	\$0
Location #4	EB 290 Express @ Ferguson Rd, Departure Slab, 40'x50', 3" lift				
Incidental	Double LL, swap to a single RL– Freeway/highway	Night	\$3,500	1	\$3,500
Location #5	EB 290 Express @ Walnut Creek (Can not fix-departure is higher than bridge deck)				
Location #6	EB 290 Express @ RM 590.3, Heave – 2 Left Lanes, 150'x30', 3-4" lift				
Incidental	Double LL closure – Freeway/highway	Night	\$3,500	1	\$3,500
Location #7	EB 290 Express @ RM590.7-590.8 2 Left Lanes, 140'x30', 3-4" lift				
Incidental	Double LL Closure – Freeway/highway	Night	\$3,500	1	\$3,500
Location #8	EB 290 Express before Giles Overpass, 3 Dips Entrance/RL– 90'x35', 50'x35', 60'x35', 2-4" lift				
Incidental	Single RL with Entrance Ramp Closed	Night	\$3,500	2	\$7,000

Item Number	Description/Measurement	Unit	Price per Unit	Quantity	Total
Location #9	EB 290 Express @ Harris Branch, Approach Slab, 50'x60', 3.0" Lift				
Incidental	Double LL Closure, Single RL with chute for on ramp– Freeway/highway	Night	\$3,500 \$2,500	1 1	\$6,000
Location #10	EB 290 Express @ Harris Branch, Departure Slab, 50'x60', 3.0" Lift				
Incidental	Included w/ location #9	Night	n/a	n/a	\$0
Location #11	EB 290 Express @ TX-130, Approach Slab, 40'x60', 2-3" Lift				
Incidental	Double LL Closure, swap to single RL Closure Freeway/highway	Night	\$3,500	1	\$3,500
Location #12	EB 290 Express @ TX-130, Departure Slab, 40'x60', 2-3" Lift				
Incidental	Double LL Closure, swap to a single RL Closure Freeway/highway	Night	\$3,500	1	\$3,500
Location #13	WB 290 Express @ TX-130, Departure Slab, 40'x60', 2-3" Lift				
Incidental	Single RL Closure, swap to single LL – Freeway/highway	Night	\$3,500	1	\$2,500
Location #14	WB 290 Express @ RM 592.4, Dip 3 Left Lanes, 65'x46", 3-4" Lift				
Incidental	Single RL on main lanes, Single LL on Connection Ramp lanes, swap to single LL on main lanes	Night	\$3,500	1	\$3,500
Location #15	EB 290 Express @ Harris Branch, Departure Slab, 45'x60', 2-3" Lift				
Incidental	Double LL closure, swap to double RL closure Freeway/highway	Night	\$3,500	1	\$3,500
Location #16	EB 290 Express @ Tuscany Way, Approach Slab, 45'x60', 2-3" Lift				
Incidental	Double LL closure, Double RL closure -Freeway/highway	Night	\$3,500	2	\$7,000
Location #17	EB 290 Express @ Tuscany Way, Departure Slab, 45'x60', 3" Lift				
Incidental	Included w/ location #16	Night	n/a	n/a	\$0
Total Purchase Price=				\$69,610	

Special Specification 3008

Soil Densification and Raising Concrete Slabs with High-Density Polyurethane Foam (HDPF)



1. DESCRIPTION

Soil densification to strengthen base and sub-base soils under concrete pavement by furnishing and injecting a two-part, 1:1-by-volume, water-resistant, high-density polyurethane foam (HDPF) into the foundation soils beneath the pavement through holes or injection tubes at locations shown on the plans or as directed, while monitoring for movement at the surface.

2. MATERIALS

Furnish a two-part, 1:1-by-volume HDPF. The material must reach 90% compressive strength within 30 min. of injection and have a water-insoluble diluent, which will permit the formation of polyurethanes in excess water.

Furnish materials in accordance with the following.

- **ASTM D1622.** Density: 3.8 lb.—4.2 lb. per cubic foot.
- **ASTM D1621.** Compressive strength: 60 psi (minimum).
- **ASTM D1623.** Tensile strength: 90 psi (minimum).
- **ASTM C273.** Shear strength: 45 psi (minimum).
- **ASTM D790.** Flexural strength: 90 psi (minimum).
- **ASTM D1940.** Closed cell content: +85%.

Furnish non-shrink grout to patch drill holes. The grout must meet [DMS-4675](#), "Cementitious Grouts and Mortars for Miscellaneous Applications," and be used within the shelf life and temperature limitations set by the manufacturer.

3. EQUIPMENT

Provide machinery, tools, and equipment necessary for proper execution of the work. At minimum, provide the following.

- 3.1. **Dynamic Cone Penetrometer (DCP).** Provide a portable DCP for onsite soil investigation to assist in location and depth of weak foundation soils and determination of correct injection pattern and injection elevations through tubes to densify weak soils. The DCP must be capable of taking readings as approved. Extension rods are required to perform this investigation.
- 3.2. **Drill.** Use a pneumatic or electric drill capable of efficiently drilling 5/8-in.—2-in. diameter (if needed for multiple injection tubes) injection holes through the pavement without damaging the structural integrity of the existing pavement. Drill host holes for the placement of injection tubing cut to proper lengths per the plans, or as indicated in the field quality control (QC) plan and DCP testing.
- 3.3. **Pumps.** Furnish at least two trucks each with two mounted pumping units capable of injecting the polyurethane material at a controlled rate into the foundation soils to the require depths. Ensure:
 - the pumping units are equipped with certified flow meters to precisely measure the amount of each component injected, so that the 1:1 ratio by volume is maintained for QC and a certified volume of injected polymer material is obtained; and

- the pumping units are equipped with pressure and temperature control devices capable of maintaining proper temperature.

- 3.4. **Level.** Provide satisfactory equipment, such as rotating laser levels and receivers, to monitor movement of the pavement to within 1 mm, to verify that the injected foundation soils have been properly densified and to ensure the proper lift of pavement to grade is achieved.

4. CONSTRUCTION

- 4.1. **Preparation.** Prepare a profile of each area to determine the extent of the concrete slab that requires adjustment or raising. Ensure that the finished concrete slabs will conform to the grades and cross-section of the slabs as shown on the plans or as directed. Determine the exact locations of the injection holes for each treated area. Obtain approval for the injection hole locations.
- 4.2. **Drilling.** Use drilling operations that do not damage the surrounding concrete. Drill injection holes through the concrete, with 5/8-in.–2-in. diameter holes, vertical and round, and to a depth indicated in the approved field QC plan. Install injection tubes to the prescribed injection depth or depths.
- 4.3. **Mixing.** Use the flow meters to perform a quality check on the ratio of the two-part chemical system. The Part A (Resin) to the Part B (ISO) ratio by volume should be 1:1. Each day, reset the flow meters on the pumping units to zero. Perform a test shot of material from one injection gun at a time with at least 0.5 gal. of each material, comparing the digital output in gallons of resin to the gallons of ISO to determine the injected ratio. The ratio range must be between 0.95 and 1.05 for all the injection guns to be used on the project. Be prepared to show the most recent calibration documents for the flow meters before using on the project.
- 4.4. **Injection and Patching.** Inject high-density polyurethane formulation through holes by injection tubes into the foundation soils beneath the pavement to the prescribed depth or depths. Control the stabilization of the foundation soils by regulating the rate of injection of the material. Continuously monitor for movement of the pavement. Foundation soils are stabilized enough when movement of the pavement is not detected. Continue injection into the soils as needed to lift the pavement to grade. If no vertical movement has occurred, the Department may direct the Contractor to cease injecting. Take precautions to prevent the intrusion of injected material into any drainage facility and other structures. Remove any excessive polyurethane material after the nozzle is removed from the hole. Push down or drill out injection tubing 2 in. below the pavement surface and install a rapid-set, non-shrink patching material into the drilled-out holes. Strike patches flush with the surface of the surrounding pavement.
- 4.5. **Set Time.** Open pavement to construction traffic within 30 min. of final injection of the polyurethane material because material is at a minimum 90% strength within 30 min. Pavement must be free of debris and swept clean before opening to traffic.
- 4.6. **Repairs.** As directed, repair any pavement slab or bridge approach or departure slab that has cracked or did not achieve required grades as a result of the Contractor's operation, at no additional cost to the Department.
- 4.7. **Ride Quality.** Use Surface Test Type B, Schedule 3, to evaluate ride quality in accordance with Item 585, "Ride Quality for Pavement Surfaces," unless otherwise shown on the plans.

5. MEASUREMENT

This Item will be measured by the pound of HDPF injected and accepted. Measure the two chemical components and total to calculate the total weight of the material.

6. PAYMENT

The work performed and materials furnished in accordance with this Item and measured as provided under "Measurement" will be paid for at the unit price bid for "Soil Densification and Raising Concrete Slabs with

HDPF." This price is full compensation for drilling, furnishing and injecting polyurethane material, concrete repairs, labor, materials, tools, and incidentals.

January 6, 2025

Subject:TXDOT SS 3008: Certificate of Conformance

Re: Soil Densification and Raising Concrete Slab with HDPF

To whom it may concern,

When processed through proper equipment in full working condition, at a 1:1 ratio, 24-003 is a two-part, closed-cell polyurethane system. Due to its chemistry which includes a water insoluble diluent, this system is hydrophobic and hydro-insensitive, allowing its formation in the presence of water.

NCFI 24-003 meets or exceeds all physical properties outlined below when properly processed.

Technical Properties	Requirements
Density, minimum and maximum, per ASTM D-1622 (air rise)	3.8 lbs/ft3 – 4.2 lbs/ft3
Compressive Strength, minimum, per ASTM D-1621	60 PSI
Tensile Strength, minimum, per ASTM D-1623	90 PSI
Shear Strength, minimum, per ASTM C-273	45 PSI
Flexural Strength, minimum, per ASTM D-790	90 PSI
Closed Cell Content, per ASTM D-1940	+85%
Curing Rate	90 percent of compressive strength within 30 minutes after injection

Flexural Strength at 4PCF reaches a minimum of 87PSI Free Rise poured and when restricted (or confined) it can reach up to 390PSI.

Products are warrantied for a six-month shelf life.

For any further inquiries please contact your Account Manager.

Regards,



Samantha Poirier - Senior Chemist

TERRATHANE™ Product Line

The TerraThane™ product line is comprised of uniquely formulated, dual-component systems designed for a variety of geotechnical applications, such as lifting, soil compaction, void filling, and I/I mitigation. Each batch goes through stringent testing and quality assurance standards to ensure reliability in the field.

TERRATHANE™ 24-003

TerraThane™ 24-003 is a 4lb hydrophobic/hydro-insensitive, MDI-based, water blown system that is designed for exceptional spread and lifting capacity. The hydrophobic nature of 24-003 allows it to maintain exceptional physical properties even in saturated conditions. Available with NSF/ANSI 61 Section 5 – 2017 certification.

APPLICATIONS

Bridge Approaches and Departures
Highway and Streets
Airport Runways and Taxiways
Concrete Slab Lifting
Joint Matching
Void Filling
Deep Soil Injection



**CERTIFIED TO
NSF/ANSI 61**

*Upon request

UNIQUE ADVANTAGES

Hydrophobic / Hydro-Insensitive
Certified to NSF/ANSI-61
Contains No Solvents
Strengthens Loose Soil
Water Blown System

Reactivity at 110°F

Cream Time	5-8 seconds
Gel Time	11-15 seconds
Tack Free Time	16-19 seconds
Rise Time	25-30 seconds

Chemical Resistance

Solvents... **Excellent**

Mold and Mildew... **Excellent**

Performance

Wet Environments... **Excellent**

Lifting Capacity... **Excellent**

Physical Properties

Physical Properties	Test Method	Free Rise	Restrained
Density	ASTM D1622	4 pcf	5 – 6 pcf
Compressive Strength	ASTM D1621	80 psi	80 – 100 psi
Compressive Modulus	ASTM D1621	1900 psi	3000 psi
Tensile Strength	ASTM D1623	85 psi	100 – 120 psi
Tensile Modulus	ASTM D1623	1446 psi	3100 psi
Water Absorption	ASTM D2842	≤0.04lbs/ft ²	≤0.04lbs/ft ²
Closed Cell Content		>92%	>92%
Max Service Temp		200°F	200°F
Elongation	ASTM D1623	5.1%	
Shear Strength	ASTM C273	52 psi	90 psi
Shear Modulus	ASTM C273	602 psi	677 psi
Flexural Strength	ASTM D790	87 psi	139 psi
Flexural Modulus	ASTM D790	1625 psi	3147 psi

Special Testing

NYDOT Hydro-Insensitivity test, GTP-9		>96% density retention >93% comp strength retention	
Dimensional Stability, % volume change, 28 days aging (ASTM D-2126)	Heat age at 158°F	Freezer at -20°F	Humid age at 100% RH & 120°F
	-1.5%	-0.1%	-1.0%

Component Properties

Component	B-24-003	A2-000
Appearance	Transparent Liquid	Clear Brown Liquid
Brookfield Viscosity @20rpm	500 cps at 72°F	200 cps at 72°F
Specific Gravity	1.05	1.24
Weight per Gallon	8.9 lbs	10.3 lbs
Storage Temperature	50-100°F	50-100°F

Mix Ratio

By weight... 118 parts A-side: 100 parts B-side

By volume... 100 parts A-side: 100 parts B-side

Processing Parameters

A-side Temperatures	100 – 120°F
B-side Temperatures	100 – 120°F
Mixing Pressure	1000 psi static 800 psi dynamic

Storage and Handling

For optimum shelf life, the recommended storage temperature is 50°F to 100°F. **Do not expose A-side to lower temperatures – freezing may occur.** Avoid moisture contamination during storage, handling, and processing. After opening, pad the containers and day tanks with either nitrogen or dry air (desiccant cartridge or air dryer @ -40°F dew point).

Store components at 70°F to 90°F for several days prior to use to minimize viscosity issues.

Shelf life of B-side is 6 months and A-side is 2 years for factory sealed containers.

Application Cautions

Careful consideration should be given to selection and application of any NCFI Polyurethane foam system where excessive foam mass build-up can occur. Excessive polyurethane foam lift thickness will result in high internal temperatures within the injected foam, which can result in degraded foam properties, or in extreme cases, fire or spontaneous combustion. **Any flammability rating contained in this literature is not intended to reflect hazards presented by this or any other material under actual fire conditions.** Each person, firm or corporation engaged in the application, installation or use of any polyurethane product should carefully determine whether there is a potential fire hazard associated with such product in a specific usage and utilize all appropriate precautionary and safety measures. Please consult NCFI Polyurethanes for safety considerations, polyurethane system selection and application recommendations.

The Information contained herein is believed to be reliable, but no representations, guarantees, or warranties of any kind are made as to its accuracy, suitability for particular applications or the results to be obtained there from. The information is based on laboratory work with small-scale equipment and does not necessarily indicate end product performance. Because of the variation in methods, conditions and equipment used commercially in processing these materials, no warranties or guarantees are made as to the suitability of the products for the application disclosed. Full-scale testing and end product performance are the sole responsibility of the user. NCFI Polyurethanes shall not be liable for and the customer assumes all risk and liability of any use or handling of any material beyond NCFI's direct control. NCFI MAKES NO WARRANTIES, EXPRESSED OR IMPLIED, BUT NOT LIMITED TO, THE IMPLIED WARRANTIES OR MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. Nothing contained herein is to be considered as permission, recommendations, nor as an inducement to practice any patented invention without permission of the patent owner.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Nortex Concrete Lift & Stabilization, Inc.
Fort Worth, TX United States

Certificate Number:
2025-1393252

Date Filed:
11/24/2025

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Central Texas Regional Mobility Authority

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

CTRMA 2025 - Nortex
Roadway Repairs - Polyurethane Injections with Soil Densification

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



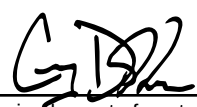
6 UNSWORN DECLARATION

My name is Casey DeRosa, and my date of birth is 12/26/1983.

My address is 201 NW 26th St., Fort Worth, TX, 76164, USA.
(city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 24 day of November, 2025.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)



NTXCOMM01C

LMENDOZA

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/24/2025

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).

PRODUCER INSURICA 500 West 7th Street, Suite 1800 Fort Worth, TX 76102	CONTACT NAME: Liliana Mendoza	
	PHONE (A/C, No, Ext): (817) 471-1814	FAX (A/C, No):
	E-MAIL ADDRESS: Liliana.Mendoza@INSURICA.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : AXIS Surplus Insurance Company	26620
INSURED NORTEX Concrete Lift and Stabilization, Inc. 201 NW 26th St. Fort Worth, TX 76164	INSURER B : Insurance Company of the West	27847
	INSURER C : Certain Underwriters at Lloyd's, London	NA
	INSURER D : Ohio Casualty Insurance Company	24074
	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 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:			P00100178576701	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
	AUTOMOBILE LIABILITY <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) \$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			P00100178569001	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 4,000,000
							AGGREGATE \$ 4,000,000
							\$
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 <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	N/A	WTX 5086650 00	10/1/2025	10/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
							E.L. EACH ACCIDENT \$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Pollution Liability			CSIEL00951-02	10/1/2025	10/1/2026	Aggregate \$2M/Each> 1,000,000
D	Inland Marine			BMO65543060	11/21/2025	11/21/2026	Leased and Rented 100,000

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

The General Liability policy includes a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status. The General Liability and Work Comp policies includes a blanket waiver of subrogation endorsement that provides this feature only when there is a written contract between the named insured and the certificate holder that requires it. Umbrella Policy is a follow form Policy to GL, BA, WC.

CERTIFICATE HOLDER

CANCELLATION

CTRMA Central Texas Regional Mobility Authority 3300 N IH-35, Suite Austin, TX 78705	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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/12/2025

PRODUCER
HALEY CARTER STATE FARM
328 W MAIN ST., STE 1
AZLE, TX 76020



INSURED
NORTEX CONCRETE LIFT & STABILIZATION, INC.
201 NW 26TH ST
FORT WORTH, TX 76164

THIS CERTIFICATE IS ISSUED AS 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.

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: State Farm Mutual Auto Insurance Company 25178
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
		<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
		GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
A	X	AUTOMOBILE LIABILITY	96 0737-A01-43	07/01/25	07/01/26	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input checked="" type="checkbox"/> HIRED AUTOS					
		<input checked="" type="checkbox"/> NON-OWNED AUTOS					
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
							\$
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input type="checkbox"/> RETENTION \$					\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CTRMA and TXDOT are listed as additional insured's with waiver of subrogation

CERTIFICATE HOLDER

CTRMA
Central Texas Regional Mobility Authority
3300N IH-35, Suite 300
Austin, TX 78705

CANCELLATION

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
JUDY BUTLER, SSA



SCHEDULE OF FORMS & ENDORSEMENTS	
Policyholder Notices and Policy Forms	Form Number and Edition Date
POLICYHOLDER NOTICE	AXIS 105 0316
SERVICE OF SUIT	AXIS 106 0415
POLICYHOLDER NOTICE - ECONOMIC AND TRADE SANCTIONS	AXIS 906 0316
TEXAS NOTICE	AXIS TX 901 0420
POLICYHOLDER DISCLOSURE - NOTICE OF TERRORISM INSURANCE COVERAGE - TRIA DECLINED	TRIA DECLINED DISCLOSURE
COMMERCIAL GENERAL LIABILITY COVERAGE FORM	CG 0001 0413
COMMON POLICY CONDITIONS	IL 0017 1198
Endorsements	Form Number and Edition Date
CONTROLLED SUBSTANCE EXCLUSION ENDORSEMENT	AXIS 1011960 0519
PER- AND POLYFLUOROALKYL SUBSTANCES (PFAS) EXCLUSION	AXIS 1012886 0821
HUMAN TRAFFICKING EXCLUSION ENDORSEMENT	AXIS 1013128 0422
BIOMETRIC INFORMATION EXCLUSION	AXIS 1013198 0423
EMPLOYEE BENEFITS LIABILITY COVERAGE	CG 0435 1207
PRIMARY AND NONCONTRIBUTORY - OTHER INSURANCE CONDITION	CG 2001 1219
ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION	CG 2010 1219
ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS	CG 2037 1219
EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - LIMITED BODILY INJURY EXCEPTION NOT INCLUDED	CG 2107 0514
EXCLUSION – UNMANNED AIRCRAFT	CG 2109 0615
EXCLUSION - DESIGNATED PROFESSIONAL SERVICES	CG 2116 0413
COMMUNICABLE DISEASE EXCLUSION	CG 2132 0509
EXCLUSION - DESIGNATED WORK	CG 2134 0187
EMPLOYMENT-RELATED PRACTICES EXCLUSION	CG 2147 1207
EXCLUSION - DESIGNATED ONGOING OPERATIONS	CG 2153 0196
EXCLUSION - DESIGNATED OPERATIONS COVERED BY A CONSOLIDATED (WRAP-UP) INSURANCE PROGRAM	CG 2154 0196
TOTAL POLLUTION EXCLUSION WITH A BUILDING HEATING, COOLING AND DEHUMIDIFYING EQUIPMENT EXCEPTION AND A HOSTILE FIRE EXCEPTION	CG 2165 1204
FUNGI OR BACTERIA EXCLUSION	CG 2167 1204



EXCLUSION - CONTRACTORS - PROFESSIONAL LIABILITY	CG 2279 0413
WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US	CG 2404 1219
AMENDMENT OF INSURED CONTRACT DEFINITION	CG 2426 0413
NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM)	IL 0021 0908
AMENDMENT TO INSURING AGREEMENTS ENDORSEMENT	SI 0001 0915
AMENDMENT AGGREGATE LIMITS OF INSURANCE (PER PROJECT AND TOTAL POLICY AGGREGATE)	SI 106 0915
DEDUCTIBLE LIABILITY INSURANCE	SI 107 0521
OPERATIONS EXCLUSION - RESIDENTIAL WORK	SI 114 0915
EXCLUSION - PUNITIVE OR EXEMPLARY DAMAGES	SI 121 0915
COMPOSITE RATE	SI 128 1220
TRANSMISSIBLE SPONGIFORM ENCEPHALOPATHY (TSE) EXCLUSION	SI 140 0915
MINIMUM EARNED PREMIUM ENDORSEMENT	SI 191 0422
WARRANTY OF SUBCONTRACTOR LIMITS - AGG'D DEDUCTIBLE AMENDED	SI 196 0915
LIMITED ADVICE OF CANCELLATION PROVIDED VIA EMAIL TO ENTITIES OTHER THAN THE FIRST NAMED INSURED	SI 216 0915
AMENDMENT OF DEFINITION OF EMPLOYEE	SI 218 0915
AMENDMENT OF DEFINITION OF PERSONAL AND ADVERTISING	SI 219 0915
AMENDMENT TO BREACH OF CONTRACT EXCLUSION	SI 220 0915
AMENDMENT TO INFRINGEMENT OF COPYRIGHT, PATENT, TRADEMARK OR TRADE SECRET EXCLUSION	SI 221 0915
ASBESTOS EXCLUSION	SI 222 0121
CROSS SUITS EXCLUSION	SI 223 0121
EIFS EXCLUSION	SI 224 0121
HABITATIONAL EXCLUSION	SI 225 0915
LEAD EXCLUSION	SI 226 0121
PREMIUM AUDIT - ADVANCE MINIMUM AND DEPOSIT PREMIUM ENDORSEMENT	SI 227 0121
REPRESENTATIONS AND WARRANTIES ENDORSEMENT	SI 228 0121
SILICA EXCLUSION	SI 229 0121
TERRORISM EXCLUSION	SI 230 0915
EXPOSURE BASIS DEFINITIONS ENDORSEMENT	SI 250 0121

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization where the Named Insured has agreed in a written contract or agreement to name as an additional insured provided that the contract or agreement was executed prior to the loss or occurrence.	"All locations" as designated and described in the written executed contract or agreement
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization where the Named Insured has agreed in a written contract or agreement to name as an additional insured provided that the contract or agreement was executed prior to the loss or occurrence.	"All locations" as designated and described in the written executed contract or agreement
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):
Any person or organization you have agreed to waive any right of recovery against in a written contract or agreement executed prior to the loss or occurrence.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights Of Recovery Against Others To Us** of **Section IV – Conditions**:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and

- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):
Any person or organization you have agreed to waive any right of recovery against in a written contract or agreement executed prior to the loss or occurrence.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights Of Recovery Against Others To Us** of **Section IV – Conditions**:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

TEXAS WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because Texas is shown in Item 3.A. of the Information Page.

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule, but this waiver applies only with respect to bodily injury arising out of the operations described in the Schedule where you are required by a written contract to obtain this waiver from us.

This endorsement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

The premium for this endorsement is shown in the Schedule.

Schedule1. ☐ Specific Waiver

Name of person or organization

☒ Blanket Waiver

Any person or organization for whom the Named Insured has agreed by written contract to furnish this waiver.

2. Operations:

TEXAS OPERATIONS ONLY

3. Premium:

The premium charge for this endorsement shall be 2 percent of the premium developed on payroll in connection with work performed for the above person(s) or organization(s) arising out of the operations described.

4. Advance Premium:

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective **10-01-2025** Policy No. **WTX 5086650 00**
Insured **NORTEX Concrete Lift and Stabilization, Inc.**
Insurance Company **INSURANCE COMPANY OF THE WEST**

Endorsement No.
Premium \$ **INCL.**

Countersigned By _____



End No.	Effective Date of Endorsement	Policy Number	<input type="checkbox"/> Additional/ <input type="checkbox"/> Return Premium
	12:01 a.m. on 10/1/2025 If the above date is blank, then this endorsement is effective on the effective date of the policy.	P00100178576701	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITED ADVICE OF CANCELLATION PROVIDED VIA E-MAIL TO ENTITIES OTHER THAN THE FIRST NAMED INSURED

This policy is amended as follows:

In the event that we cancel this policy for any reason other than non-payment of premium, and

1. the cancellation effective date is prior to this policy's expiration date;
2. the "First Named Insured" is under an existing contractual obligation to notify a certificate holder when this policy is canceled (hereinafter, the "Certificate Holders") and has provided to the us, either directly or through its broker of record, the email address of a contact at each such entity; and
3. we received this information after the "First Named Insured" receives notice of cancellation of this policy and prior to this policy's cancellation effective date, via an electronic spreadsheet that is acceptable to us;

we will endeavor to provide advice of cancellation (the "Advice") via e-mail to each such Certificate Holder within 30 days after the "First Named Insured" provides such information to us; provided, however, that if a specific number of days is not stated above, then the Advice will be provided to such Certificate Holder(s) as soon as reasonably practicable after the "First Named Insured" provides such information to us.

Proof of that we emailed the Advice, using the information provided by the "First Named Insured" will serve as proof that we have fully satisfied any obligations under this endorsement.

This endorsement does not affect, in any way, coverage provided under this policy or the cancellation of this policy or the effective date thereof, nor shall this endorsement invest any rights in any entity not insured under this policy.

The following Definition applies to this endorsement:

"First Named Insured" means the first Named Insured shown on the Declarations Page of this policy.

All other provisions of the policy remain unchanged.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

30 DAYS NOTICE OF CANCELLATION ENDORSEMENT - BLANKET

If this policy is cancelled prior to the expiration date, we will mail thirty (30) days written notice according to the following:

Notice Of Cancellation By Us To Additional Insured When Required By Written Contract

We will provide written Notice of Cancellation to an additional insured stating when, not less than the 30 days shown in the Schedule of this endorsement, cancellation will become effective.

This condition only applies if this policy is cancelled by us, and:

1. Cancellation is for reasons other than nonpayment of premium or any applicable deductible;
2. You are required by written contract to provide the additional insured with such notice; and
3. You agree to provide us with a list of the applicable additional insureds, including their complete mailing addresses, within seven (7) days of our request.

If notice is mailed, proof of mailing is sufficient proof of such notice.

If this policy is cancelled for non-payment of premium, we will mail ten (10) days written notice.

Failure to do so shall impose no obligation or liability of any kind upon the Company, its agents or representatives.

All other terms and conditions of this policy remain unchanged.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Nortex Concrete Lift & Stabilization, Inc.
Fort Worth, TX United States

Certificate Number:
2025-1393252

Date Filed:
11/24/2025

Date Acknowledged:
12/01/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Central Texas Regional Mobility Authority

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

CTRMA 2025 - Nortex
Roadway Repairs - Polyurethane Injections with Soil Densification

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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CTRMA 2025 - Nortex
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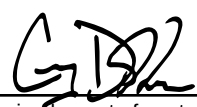
6 UNSWORN DECLARATION

My name is Casey DeRosa, and my date of birth is 12/26/1983.

My address is 201 NW 26th St., Fort Worth, TX, 76164, USA.
(city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 24 day of November, 2025.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)