

ARLINGTON COUNTY, VIRGINIA
OFFICE OF THE PURCHASING AGENT

INVITATION TO BID NO. 21-DPR-ITB-283

ADDENDUM NO. 1

Arlington County Invitation to Bid No. 21-DPR-ITB-283 for Tree Services is amended as follows:

Reference Bid Due Date: Change to: **ELECTRONIC SEALED BIDS WILL BE RECEIVED BY ARLINGTON COUNTY VIA VENDOR REGISTRY UNTIL 1:00 P.M. ON THE 4th DAY OF NOVEMBER 2020.**

PUBLIC BID OPENING ON NOVEMBER 4, 2020 AT 1:00 P.M.:

[Join Public Bid Opening Microsoft Teams Meeting](#)
+1 347-973-6905 United States, New York City (Toll)
Conference ID: 852 405 272#

Bid Form is hereby replaced in its entirety with the Revised Bid Form. Bid response **Must** be on the **"Revised Bid Form"**.

The following clarifications are made as a result of vendor inquiries:

1. Could you provide current pricing that the County pays for these services?
Answer: Yes. See current prices attached to this Addendum No. 1.
2. Could you clarify if the due date is 11/4 or 11/2 (on bid paperwork)?
Answer: The bid due date is November 4, 2020 at 1:00 pm.
3. Is there an annual budget/estimate of usage?
Answer: Annual budget not available. Estimate of current work is attached with the current prices attached to this Addendum No. 1
4. Can you provide prior year quantities and \$ spend for similar services?
Answer: See current prices attached to this Addendum No. 1.
5. Can you clarify if/how section B will factor into contract award?
Answer: Section B and C are for information and additional work purpose not specified in Section A. The County will award the contract to the lowest responsive and responsible Bidder determined by the Grand Total of Section A (items I, II, III) on the Bid Form.

The balance of the solicitation remains unchanged.

Arlington County, Virginia

Tomeka Price

Tomeka Price, VCO, VCA
Procurement Officer
tprice@arlingtonva.us

RETURN THIS PAGE, FULLY COMPLETED AND SIGNED, WITH YOUR BID:

BIDDER ACKNOWLEDGES RECEIPT OF ADDENDUM NUMBER 1.

FIRM NAME: _____

**AUTHORIZED
SIGNATURE:** _____ **DATE:** _____

ARLINGTON COUNTY, VIRGINIA

INVITATION TO BID NO. 21-DPR-ITB-283

REVISED BID FORM

SUBMIT ONE FULLY COMPLETED AND SIGNED BID FORM ELECTRONICALLY VIA VENDOR REGISTRY

BIDS WILL BE OPENED AT 1:00 P.M., ON **NOVEMBER 4, 2020**

FOR PROVIDING TREE SERVICES PER THE TERMS, CONDITIONS AND SPECIFICATIONS OF THIS SOLICITATION

- A Tree Services** - Prices bid shall be inclusive of all labor, material, and equipment necessary for the provision of tree services.

#	ITEM DESCRIPTION	UNIT OF MEASURE	NON-EMERGENCY UNIT PRICES	EMERGENCY UNIT PRICES
SECTION I. TREE REMOVAL (To be considered for an award in this Section all items must be bid)				
A	Up to 6" DBH	EACH	\$ _____	\$ _____
B	Over 6" to 12" DBH	EACH	\$ _____	\$ _____
C	Over 12" to 18" DBH	EACH	\$ _____	\$ _____
D	Over 18" to 24" DBH	EACH	\$ _____	\$ _____
E	Over 24" to 30" DBH	EACH	\$ _____	\$ _____
F	Over 30" to 36" DBH	EACH	\$ _____	\$ _____
G	Over 36" to 42" DBH	EACH	\$ _____	\$ _____
H	Over 42" DBH	EACH	\$ _____	\$ _____
SECTION I. TREE REMOVAL TOTAL			\$ _____	\$ _____
#	ITEM DESCRIPTION	UNIT OF MEASURE	NON-EMERGENCY UNIT PRICES	EMERGENCY UNIT PRICES
Section II. Tree Pruning Services (To be considered for an award in this Section all items must be bid)				
A	Up to 6" DBH	EACH	\$ _____	\$ _____
B	Over 6" to 12" DBH	EACH	\$ _____	\$ _____
C	Over 12" to 18" DBH	EACH	\$ _____	\$ _____
D	Over 18" to 24" DBH	EACH	\$ _____	\$ _____
E	Over 24" to 30" DBH	EACH	\$ _____	\$ _____
F	Over 30" to 36" DBH	EACH	\$ _____	\$ _____
G	Over 36" to 42" DBH	EACH	\$ _____	\$ _____
H	Over 42" DBH	EACH	\$ _____	\$ _____
Section II. Tree Pruning Services Total			\$ _____	\$ _____
#	ITEM DESCRIPTION	UNIT OF MEASURE	NON-EMERGENCY UNIT PRICES	EMERGENCY UNIT PRICES
Section III. Stump Removal (To be considered for an award in this Section all items must be bid)				
A	Stump removal/grinding	INCH	\$ _____	\$ _____
Section III. Stump Removal Total			\$ _____	\$ _____
GRAND TOTAL OF SECTIONS I, II, & III			\$ _____	\$ _____

For Informational Purposes:

- B Hourly rates - All costs associated with response and mobilization for hourly or daily work, such as trail clearing, or time-based emergency response shall be included in the hourly rate for non-emergency and emergency services. Time worked shall be calculated as time spent on the job at the worksite only. Portal to portal charges is not allowed.**

CREW COST PER HOUR DURING WORKING HOURS, INCLUDING THE COST OF STANDARD EQUIPMENT IDENTIFIED IN THE SOLICITATION:

#	LABOR CATEGORY	NON-EMERGENCY HOURLY RATE	EMERGENCY HOURLY RATE
Monday through Friday 7:00 AM TO 5:00 PM			
1	WORKING FOREMAN	\$	\$
2	CLIMBER/PRUNER	\$	\$
3	GROUNDS PERSON	\$	\$
4	CERTIFIED ARBORIST	\$	\$
Monday through Friday 5:01 PM TO 6:59 AM			
1	WORKING FOREMAN	\$	\$
2	CLIMBER/PRUNER	\$	\$
3	GROUNDS PERSON	\$	\$
4	CERTIFIED ARBORIST	\$	\$
Weekends and Holidays			
1	WORKING FOREMAN	\$	\$
2	CLIMBER/PRUNER	\$	\$
3	GROUNDS PERSON	\$	\$
4	CERTIFIED ARBORIST	\$	\$
SUBTOTAL OF HOURLY RATES		\$	\$
GRAND TOTAL OF NON-EMERGENCY AND EMERGENCY HOURLY RATES			\$_____
INSERT THE NUMBER OF HOURS AFTER NOTIFICATION THAT CREWS WILL BE AT THE JOBSITE LOCATION, FOR AN EMERGENCY RESPONSE ONLY. RECEIPT OF NOTIFICATION SHALL BE WITHIN 1 HOUR OF CALL OR OTHER METHOD OF COMMUNICATION. TIME PROPOSED SHALL NOT EXCEED FOUR (4) HOURS:			_____HRS

C. Additional Equipment/Rental Operator Hourly Rate: \$_____

Company Qualifications: Bidders shall have five (5) years of experience in tree pruning, tree removal, and stump removal. The experience shall be work of similar size and scope.

Project Experience: Bidders shall provide a list of projects, of similar size and scope, that have been executed during the past five (5) years. Bidders' list shall include the following information to show compliance with the experience criteria:

- Contract Name
- Contract description and scope of work
- Contract manager's name, telephone number, and email address
- Final contract value

Staffing Qualifications: All key personnel proposed for this project must have experience as designated key personnel in similar size and type of projects.

THE FULL LEGAL NAME OF THE ENTITY SUBMITTING THIS BID MUST BE WRITTEN IN THE SPACE BELOW. THIS BID FORM AND ALL OTHER DOCUMENTS THAT REQUIRE A SIGNATURE MUST BE FULLY AND ACCURATELY COMPLETED AND SIGNED BY A PERSON WHO IS AUTHORIZED TO BIND THE BIDDER, OR THE BID MAY BE REJECTED.

SUBMITTED BY:

(legal name of entity)

AUTHORIZED SIGNATURE:

PRINT NAME AND TITLE:

ADDRESS:

CITY/STATE/ZIP:

TELEPHONE NO.:

E-MAIL

ADDRESS:

**THIS ENTITY IS INCORPORATED
IN:**

THIS ENTITY IS A:

*(check the applicable
option)*

CORPORATION ☐

LIMITED PARTNERSHIP ☐

GENERAL PARTNERSHIP ☐

UNINCORPORATED
ASSOCIATION ☐

LIMITED LIABILITY COMPANY ☐

SOLE PROPRIETORSHIP ☐

**IS BIDDER AUTHORIZED TO TRANSACT BUSINESS IN THE
COMMONWEALTH OF VIRGINIA?**

YES ☐ NO ☐

**IDENTIFICATION NO. ISSUED TO THE ENTITY BY THE
SCC:**

Any Offeror exempt from Virginia State Corporation Commission (SCC) authorization requirement must include a statement with its proposal explaining why it is not required to be so authorized.

**ENTITY'S DUN & BRADSTREET D-U-N-S NUMBER: (if
available)**

**HAS YOUR FIRM OR ANY OF ITS PRINCIPALS BEEN DEBARRED
FROM SUBMITTING BIDS TO ARLINGTON COUNTY,
VIRGINIA, OR ANY OTHER STATE OR POLITICAL SUBDIVISION
WITHIN THE PAST THREE YEARS?**

YES ☐ NO ☐

HAS YOUR FIRM DEFAULTED ON ANY PROJECT IN THE LAST THREE YEARS?

YES ☐ NO ☐

HAS YOUR FIRM HAD ANY TYPE OF BUSINESS, CONTRACTING OR TRADE LICENSE, REGISTRATION OR CERTIFICATION REVOKED OR SUSPENDED IN THE PAST THREE YEARS?

YES ☐ NO ☐

HAS YOUR FIRM AND ITS PRINCIPALS/OWNERS BEEN CONVICTED OF ANY CRIME RELATING TO ITS CONTRACTING BUSINESS IN THE PAST TEN YEARS?

YES ☐ NO ☐

HAS YOUR FIRM BEEN FOUND IN VIOLATION OF ANY LAW APPLICABLE TO ITS CONTRACTING BUSINESS (LICENSING LAWS, TAX LAWS, WAGE, AND HOUR LAWS, PREVAILING WAGE LAWS, ENVIRONMENTAL) WHERE THE RESULT OF SUCH VIOLATION WAS THE PAYMENT OF A FINE, BACK PAY DAMAGES, OR ANY OTHER PENALTY IN THE AMOUNT OF \$5000 OR MORE?

YES ☐ NO ☐

BIDDER STATUS: MINORITY OWNED: ☐ WOMAN OWNED: ☐ NEITHER: ☐

THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLOWING:

THE OFFICIAL COPY OF THE SOLICITATION DOCUMENTS, WHICH INCLUDES ANY ADDENDA, IS THE ELECTRONIC COPY THAT IS AVAILABLE FROM THE [VENDOR REGISTRY WEBSITE](#).

POTENTIAL BIDDERS ARE RESPONSIBLE FOR DETERMINING THE ACCURACY AND COMPLETENESS OF ALL SOLICITATION DOCUMENTS THEY RECEIVE FROM ANY SOURCE, INCLUDING THE COUNTY.

The undersigned acknowledges receipt of the following Addenda:

ADDENDUM NO. 1 DATE: _____ INITIAL: _____

ADDENDUM NO. 2 DATE: _____ INITIAL: _____

ADDENDUM NO. 3 DATE: _____ INITIAL: _____

TRADE SECRETS OR PROPRIETARY INFORMATION:

Trade secrets or proprietary information submitted by a Bidder in connection with a procurement transaction will not be subject to public disclosure under the Virginia Freedom of Information Act. Pursuant to Section 4-111 of the Arlington County Purchasing Resolution, however, a Bidder seeking to protect submitted data or materials from disclosure must, before or upon submission of the data or materials, identify the data or materials to be protected and state the reasons why protection is necessary.

Please mark one:

☐ No, the bid that I have submitted does not contain any trade secrets and/or proprietary information.

☐ Yes, the bid that I have submitted does contain trade secrets and/or proprietary information.

If Yes, you must clearly identify below the exact data or materials to be protected and list all applicable page numbers of the bid that contain such data or materials:

State the specific reason(s) why protection is necessary:

If you fail above to identify the data or materials to be protected or to state the reason(s) why protection is necessary, you will not have invoked the protection of Section 4-111 of the Purchasing Resolution. Accordingly, upon the award of a contract, the bid will be open for public inspection consistent with applicable law.

CERTIFICATION OF NON-COLLUSION: The undersigned certifies that this bid is not the result of or affected by (1) any act of collusion with another person engaged in the same line of business or commerce (as defined in Virginia Code §§ 59.1-68.6 *et seq.*) or (2) any act of fraud punishable under the Virginia Governmental Frauds Act (Virginia Code §§ 18.2-498.1 *et seq.*).

CONTACT PERSON AND MAILING ADDRESS FOR DELIVERY OF NOTICES

Provide the name and address of the person who is designated to receive notices and other communications regarding this solicitation. Refer to the "Notices" section in the draft Contract Terms and Conditions for information regarding the delivery of notices.

NAME: _____

ADDRESS: _____

E-MAIL: _____

BIDDER NAME: _____

REFERENCES

Bidders should provide three (3) references for similar services that have been provided by the Bidder within the past five (5) years. The County reserves the right to evaluate the quality of the Contractor's work through site visits with the Contractor's references.

REFERENCE 1: Contact Name: _____
Organization: _____
Phone Number: _____
E-mail Address: _____
Contract/Project Name: _____
Contract/Project Dates (from-to): _____
Contract/Project Description: _____

REFERENCE 2: Contact Name: _____
Organization: _____
Phone Number: _____
E-mail Address: _____
Contract/Project Name: _____
Contract/Project Dates (from-to): _____
Contract/Project Description: _____

REFERENCE 3: Contact Name: _____
Organization: _____
Phone Number: _____
E-mail Address: _____
Contract/Project Name: _____
Contract/Project Dates (from-to): _____
Contract/Project Description: _____

BIDDER NAME: _____

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS MARKED "X".

COVERAGES REQUIRED

COVERAGE MINIMUM(S)

- X_1. Workers' Compensation.....Statutory limits of Virginia
- X_2. Employer's Liability \$100,000 accident, \$100,000 disease, \$500,000 disease policy limit
- X_3. Commercial General Liability\$1,000,000 CSL BI/PD each occurrence, \$2 Million annual aggregate
- X_4. Premises/Operations\$500,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- X_5. Automobile Liability\$1 Million BI/PD each accident, Uninsured Motorist
- X_6. Owned/Hired/Non-Owned Vehicles\$1 Million BI/PD each accident, Uninsured Motorist
- X_7. Independent Contractors.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- X_8. Products Liability.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- X_9. Completed Operations.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- X_10. Contractual Liability (Must be shown on Certificate).....\$1 Million CSL BI/PD each occurrence,
\$1 Million annual aggregate
- X_11. Personal and Advertising Injury Liability. \$1 Million each offense, \$1 Million annual aggregate
12. Umbrella Liability\$1 Million Bodily Injury, Property Damage, and Personal Injury
13. Per Project Aggregate
14. Professional Liability
- a. Architects and Engineers \$1 Million per occurrence/claim
- b. Asbestos Removal Liability \$2 Million per occurrence/claim
- c. Medical Malpractice \$1 Million per occurrence/claim
- d. Medical Professional Liability.....\$1 Million per occurrence/claim
- X_15. Miscellaneous E&O \$1 Million per occurrence/claim
16. Motor Carrier Act End. (MCS-90) \$1 Million BI/PD each accident, Uninsured Motorist
17. Motor Cargo Insurance
18. Garage Liability \$1 Million Bodily Injury, Property Damage per occurrence
19. Garagekeepers Liability \$500,000 Comprehensive, \$500,000 Collision
20. Inland Marine-Bailee's Insurance..... \$ _____
21. Moving and Rigging Floater Endorsement to CGL
22. Crime and Employee Dishonesty Coverage \$ _____
23. Builder's RiskProvide Coverage in the full amount of Contract, including any amendments
24. XCU Coverage..... Endorsement to CGL
25. USL&H Federal Statutory Limits
- X_26. Carrier Rating shall be A.M. Best Co.'s Rating of A-VII or better or equivalent
- X_27. Notice of Cancellation, nonrenewal or material change in coverage shall be provided to County at least 30 days prior to action.
- X_28. The County shall be an Additional Insured on all policies except Workers Compensation and Auto and Professional Liability.
- X_29. Certificate of Insurance shall show Bid Number and Bid Title.
- X_30. Environmental Impairment Liability, including coverage of on-site cleanup.....BI/PD \$3 Million per occurrence/\$6 Million Aggregate
- a. Should the work require to clean up, remediation, and/or removal of bio-solids, bio-hazards waste, and any hazardous or toxic material via transportation request:
 Business Auto Liability.....\$2 Million per occurrence with MCS-90 and CA 9948(or equivalent) endorsements specifically referenced in the certificate of insurance
31. Cyber insurance.....\$2Million per occurrence/Aggregate
32. OTHER INSURANCE REQUIRED: _____

INSURANCE AGENT'S STATEMENT:

I have reviewed the above requirements with the Offeror named below and have advised the Offeror of required coverages not provided through this agency.

AGENCY NAME: _____

AUTH. SIGNATURE: _____

BIDDER'S STATEMENT:

If awarded the Contract, I will comply with all Contract insurance requirements.

BIDDER NAME: _____

AUTH. SIGNATURE: _____

A. UNIT PRICES FOR TREE/STUMP REMOVAL BY DIAMETER CLASS

DESCRIPTION MEASURED AT 4.5'DBH	EST. % OF WORK*	REMOVAL OF TREE/STUMP COMBINED	REMOVAL OF EACH TREE	REMOVAL OF EACH STUMP AT 6" HT
1. CLASS A. (6" TO 12")	5	\$ <u>204.44</u>	\$ <u>154.44</u>	\$ <u>50</u>
2. CLASS B. (OVER 12" TO 18")	5	\$ <u>424.44</u>	\$ <u>350.44</u>	\$ <u>74</u>
3. CLASS C. (OVER 18" TO 24")	20	\$ <u>1444.44</u>	\$ <u>1,340.44</u>	\$ <u>104</u>
4. CLASS D. (OVER 24" TO 30")	25	\$ <u>1494.44</u>	\$ <u>1,340.44</u>	\$ <u>154</u>
5. CLASS E. (OVER 30" TO 36")	15	\$ <u>1544.44</u>	\$ <u>1,330.44</u>	\$ <u>214</u>
6. CLASS F. (OVER 36" TO 42")	10	\$ <u>1644.44</u>	\$ <u>1,400.44</u>	\$ <u>244</u>
7. CLASS G. (OVER 42" TO 48")	15	\$ <u>1704.44</u>	\$ <u>1,460.44</u>	\$ <u>244</u>
8. CLASS H. (OVER 48")	5	\$ <u>1704.44</u>	\$ <u>1,460.44</u>	\$ <u>244</u>

A STANDARD SERVICES

Note: Prices bid shall be inclusive of all labor, material and equipment necessary for the provision of tree pruning services. This contract is subject to compliance with Living Wage

#	DESCRIPTION OF TREE SIZES	UNIT PRICES YR 1	UNIT PRICES YR 2	UNIT PRICES YR 3	UNIT PRICES YR 4	UNIT PRICES YR 5	UNIT PRICES YR 6	UNIT PRICES YR 7
1	Up to 6" DBH	\$ <u>50</u>	\$ <u>50</u>	\$ <u>50</u>	\$ <u>50</u>	\$ <u>50</u>	\$ <u>55</u>	\$ <u>55</u>
2	Over 6" to 12" DBH	\$ <u>95</u>	\$ <u>95</u>	\$ <u>95</u>	\$ <u>95</u>	\$ <u>95</u>	\$ <u>100</u>	\$ <u>100</u>
3	Over 12" to 18" DBH	\$ <u>165</u>	\$ <u>165</u>	\$ <u>165</u>	\$ <u>165</u>	\$ <u>165</u>	\$ <u>175</u>	\$ <u>175</u>
4	Over 18" to 24" DBH	\$ <u>250</u>	\$ <u>250</u>	\$ <u>250</u>	\$ <u>250</u>	\$ <u>250</u>	\$ <u>275</u>	\$ <u>275</u>
5	Over 24" to 30" DBH	\$ <u>350</u>	\$ <u>350</u>	\$ <u>350</u>	\$ <u>350</u>	\$ <u>350</u>	\$ <u>375</u>	\$ <u>375</u>
8	Over 30" to 36" DBH	\$ <u>450</u>	\$ <u>450</u>	\$ <u>450</u>	\$ <u>450</u>	\$ <u>450</u>	\$ <u>475</u>	\$ <u>475</u>
9	Over 36" to 42" DBH	\$ <u>500</u>	\$ <u>500</u>	\$ <u>500</u>	\$ <u>500</u>	\$ <u>500</u>	\$ <u>525</u>	\$ <u>525</u>
10	Over 42" DBH	\$ <u>600</u>	\$ <u>600</u>	\$ <u>600</u>	\$ <u>600</u>	\$ <u>600</u>	\$ <u>625</u>	\$ <u>625</u>

B. FULL CREW HOURLY RATES

ALL FULL CREW SERVICES PROVIDED WHICH ARE NOT INCLUDED IN THE UNIT PRICES IN ITEM A, OR AS EMERGENCY SERVICES IN ITEM C, SHALL BE BILLED AT THE RATES BELOW. THESE RATES INCLUDE THE COST OF LABOR, AND ANY STANDARD EQUIPMENT NECESSARY TO PERFORM THE SERVICES REQUIRED ON WEEKDAYS FROM 7:00 AM TO 5:00 PM.

1. FULL CREW COST PER HOUR, INCLUDING THE COST OF STANDARD EQUIPMENT IDENTIFIED IN THE SOLICITATION:

\$ 144.44

INDIVIDUAL CREW MEMBER PRICES. EQUIPMENT COSTS ARE NOT INCLUDED IN THE FOLLOWING RATES:

2. WORKING FOREMAN

\$ 29.44/HR.

3. CLIMBER/TRIMMER

\$ 24.44/HR.

4. GROUNDSPERSON

\$ 24.44/HR.

C. EMERGENCY SERVICES RATES

EMERGENCY SERVICES AS SPECIFIED IN THE SOLICITATION REQUIRING A FULL CREW SHALL BE BILLED ON AN HOURLY BASIS AT THE RATES BELOW. THESE RATES SHALL INCLUDE THE COST OF LABOR, AND ANY STANDARD EQUIPMENT NECESSARY TO PERFORM THE SERVICES REQUIRED.

FULL CREW COST PER HOUR DURING REGULAR WORKING HOURS, INCLUDING THE COST OF STANDARD EQUIPMENT IDENTIFIED IN THE SOLICITATION:

1. Regular Working Hours (7:00 am to 5:00 pm)

\$ 144.44/HR.

2. Weekends (7:00 am to 5:00 pm)

\$ 144.44/HR.

3. Nights and County-Observed Holidays

\$ 144.44/HR.

INDIVIDUAL CREW MEMBER PRICES. STANDARD EQUIPMENT COSTS ARE NOT INCLUDED IN THE FOLLOWING RATES:

	<u>WEEKDAYS</u> <u>7AM - 5PM</u>	<u>WEEKENDS</u> <u>7AM - 5PM</u>	<u>NIGHTS &</u> <u>HOLIDAYS</u>
4. WORKING FOREMAN	\$ <u>29.44</u> /HR.	\$ <u>29.44</u> /HR.	\$ <u>29.44</u> /HR.
5. CLIMBER/TRIMMER	\$ <u>24.44</u> /HR.	\$ <u>24.44</u> /HR.	\$ <u>24.44</u> /HR.
6. GROUNDSPERSON	\$ <u>24.44</u> /HR.	\$ <u>24.44</u> /HR.	\$ <u>24.44</u> /HR.

B EMERGENCY SERVICES

EMERGENCY SERVICES AS SPECIFIED IN THE SOLICITATION REQUIRING A FULL CREW SHALL BE BILLED ON AN HOURLY BASIS AT THE RATES BELOW. THESE RATES SHALL INCLUDE THE COST OF LABOR, AND ANY STANDARD EQUIPMENT NECESSARY TO PERFORM THE SERVICES REQUIRED.

FULL CREW COST PER HOUR DURING REGULAR WORKING HOURS, INCLUDING THE COST OF STANDARD EQUIPMENT IDENTIFIED IN THE SOLICITATION:

[illegible]