

FIELD PARAMETERS

pH	Dissolved Oxygen
Turbidity	Colors and Sheens (by observation)
Temperature	Specific Conductivity
Static Water Level in Wells Prior to Purging	

LABORATORY PARAMETERS

Total Ammonia -N	Nitrate-Nitrogen
Chlorides	Sodium
Iron	Mercury
Total Dissolved Solids (TDS)	Gross Alpha

Analysis 4 - Wetlands Mitigation Project (Semi-Annually)

Surface water in the Wetlands Mitigation Area shall be sampled semi-annually in March and September of every year and analyzed for those parameters listed in FAC Rule 62- 701.510(7)(b).

FIELD PARAMETERS

pH	Dissolved Oxygen
Turbidity	Colors and Sheens (by observation)
Temperature	Specific Conductivity

LABORATORY PARAMETERS

Unionized Ammonia	Total Hardness (as mg/L CaCO ₃)
Iron	Biochemical Oxygen Demand (BOD ₅)
Mercury	Nitrate-Nitrogen
Total Dissolved Solids (TDS)	Total Organic Carbon (TOC)
Fecal Coliform	Total Phosphorus (as mg/L P)
Chlorophyll A	Total Nitrogen
Chemical Oxygen Demand (COD)	Total Suspended Solids (TSS)
Those parameters listed in 40 CFR, Part 258, Appendix I	

Analysis 5 - Leachate Treatment System (Monthly Sampling and Quarterly Reporting)

Monthly sampling ~~and quarterly reporting are~~ required by Appendix 3 Condition IV.1 of the permit ~~for~~ **requires two (2) samples consisting of one (1) composite sample from** the 1A, 1B and Cell 3 Influent **site** and **one (1) sample from the** Triplex Effluent leachate treatment sites. Samples are to be analyzed for the following permit-specific parameters:

FIELD PARAMETERS

pH	Specific Conductivity
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LABORATORY PARAMETERS

Chloride	Total Dissolved Solids
Sodium	Iron
Total Ammonia -N	Nitrate-Nitrogen
Mercury	

Sampling must occur each month ~~such that the quarterly reports can be submitted to FDEP by January 31 (Oct-Dec data), April 30 (Jan-Mar data), July 31 (Apr-Jun data), and Oct 31 (Jul-Sept data)~~ of **the** each year in order for the Solid Waste Department to comply with DEP Permit Conditions.

Analysis 6 – Well and Water System Bacteriological Sampling (Annual Sampling in March)

The Arbuckle Creek Landfill water system must be sampled at the raw well, break room sink and office sink in March consisting of three (3) samples every year for the following parameters:

LABORATORY PARAMETERS

Total Coliform
E. Coli

G. SITE 2: HIGHLANDS COUNTY SOLID WASTE MANAGEMENT CENTER CONSTRUCTION AND DEMOLITION WASTE LANDFILL

Monitoring well MW-1 is established as the background well. Monitoring wells MW-26 and MW-27 are designated as downgradient detection wells to monitor the zone of discharge.

Analysis 6 Analysis 7- Monitoring Wells (Semi-Annual)

Ground water monitoring wells MW-1, MW-26, and MW-27 shall be routinely sampled semi-annually in March and September of every year and analyzed for the following parameters:

FIELD PARAMETERS

pH	Turbidity
Temperature	Colors and Sheens (by observation)
Specific conductivity	Dissolved Oxygen
Wells Prior to Purging	Static Water Level in

LABORATORY PARAMETERS

Aluminum	Cadmium
Chloride	Chromium
Nitrate-Nitrogen	Lead
Sulfate	Mercury
Total Dissolved Solids (TDS)	Total Ammonia -N
Iron	Xylenes
Sodium	Arsenic
Those parameters listed in EPA Methods 601 and 602	

H. SITE 3: DESOTO CITY CLASS I LANDFILL (CLOSED)

Monitoring wells MW-10S and MW-12S are established as the background wells. Monitoring wells MW-6SR, MW-9S, MW-11S, MW-13S, MW-14S, and MW-15S are designated as compliance wells

Analysis 7 Analysis 8 - Monitoring Wells (Semi-Annual)

All ground water monitoring wells shall be sampled semi-annually in March and September of every year and analyzed for the parameters listed in 62-701.510(7)(a) FAC as required by Permit Specific Conditions 3(a) and 3(b):

The pricing provided shall be all inclusive of travel, labor and materials and incidentals necessary to provide the services described herein. (No additional trip, service, or mileage charges)

This Bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; Bidder has not solicited or induced any person, firm or corporation to refrain from bidding; and Bidder has not sought by collusion to obtain for itself any advantage over any other Bidder or over the County. The signature below, by an authorized representative, affirms they have read and understand the solicitation requirements.

Bidder is familiar with and is satisfied as to all Laws and Regulations that may affect cost, progress, performance, and furnishing of the Work.

PRICING:

The undersigned does hereby declare that the undersigned has examined the project site and the complete specifications of this ITB entitled "~~Soil Removal~~" "**Water Sampling for Solid Waste**" and agrees to supply all equipment, labor and insurances to complete the work required in accordance with the complete specifications.

ITEM NO.	ITEM DESCRIPTION	Analyses/Yr Grab Sample/Yr	UNIT	UNIT COST	EXTENDED PRICE (Unit * Qty)
GENERAL					
1	ANALYSIS #1	2	EA	\$	\$
2	ANALYSIS #2	2	EA	\$	\$
3	ANALYSIS #3	2	EA	\$	\$
4	ANALYSIS #4	2	EA	\$	\$
5	ANALYSIS #5	12 24	EA	\$	\$
6	ANALYSIS #6	1 3	EA	\$	\$
7	ANALYSIS #7	2	EA	\$	\$
8	ANALYSIS # 8	2	EA	\$	\$
BASE BID AMOUNT TOTAL (Items 1-7 8, written numerically):					\$

PRICE ADJUSTMENT CLAUSE

STATEMENT OF ISSUE: The commodity(s) or services represented in the attached Invitation to Bid may be considered volatile price item(s) which may show drastic swings in price and availability from wholesalers to the retailers during the contract period. In consideration, the COUNTY is including this price adjustment clause in the Invitation to Bid to encourage adequate competition and fair pricing on the (estimated) indefinite quantity requirement and to discourage padding or hedging prices.

The COUNTY’s price adjustment criteria are as follows:

VENDOR shall agree that submitted pricing will be held firm for one (1) year ~~three (3) years~~ of the contract term. Pricing will be reviewed at the anniversary date thereafter. A price escalation or reduction may be requested by the VENDOR or the COUNTY, to the price of all items. The COUNTY may, in its sole discretion, accept an equitable adjustment in the Contract terms or pricing if pricing or availability of supply is affected by extreme and unforeseen volatility in the marketplace, that is, by circumstances that satisfy all the following criteria: (1) the volatility is due to causes wholly beyond the VENDOR’s control, (2) the volatility affects the marketplace or industry, not just the particular Contract source of supply, (3) the effect on pricing or availability of supply is substantial, (4) the volatility so affects the VENDOR that continued performance of the Contract would result in a substantial loss and (5) No price adjustment will be approved to compensate a vendor for inefficiency or for errors or omissions in judgment or for additional profit.

Requests from the VENDOR for price adjustments shall be RECEIVED IN WRITING (via email or mail) and are subject to County Board approval (if applicable) and executed contract amendment before becoming effective. Failure to reach agreement for a price adjustment may, at the sole option of the COUNTY, result in the termination of the Agreement for cause.

Official VERIFIABLE documentation of such changes SHALL be provided with the request for price adjustment in order to substantiate any requested change. The COUNTY reserves the right to consider various pertinent information sources to evaluate price increase requests (such as the CPI and PPI, US CITY Average, as published by the US Department of Labor, Bureau of Labor Statistics). The COUNTY also reserves the right to consider other information related to special economic and/or industry circumstances, when evaluating a price change request. Changes may be either increases or decreases, and may be requested by either party.

As an authorized representative of the company listed below I fully understand, accept and agree to abide by the procedures denoted in this price adjustment clause.

VENDOR NAME _____

ADDRESS _____

AUTHORIZED SIGNATURE _____

PRINTED SIGNATURE _____ DATE _____