

December 1, 2020

Re: RFB for Biosolids Hauling

Dear Bidders:

We have had a few clarifications with the above bid.

The fields that have been approved for the WTTP Bio-solids (sludge) spreading shall have priority for the WTP Lime spreading. So we are expecting both to be awarded by the same contractor, but for budgeting purposes the City does need to know the cost of spreading each item per gallon. The winning bid will be based on the combination of the price per gallon. Any additional cost for agitation of the WTP Lime will be at the expense of the contractor.

Please use the below bid form below and not the one originally provided in the RFB under item B Contractor Certification.

Also attached is the insurance requirements and a sample copy of the contract.

Sincerely,

Charley Brinkmeier

Charley Brinkmeier Project Manager



Biosolids hauling RFB Addendum #1

Business Name		_
Address		_
Contact Name		_
Telephone Number		
Mobile Number		
Email Address		_
Cost per gallon of WTTP Biosolic	ds \$	_
Cost per gallon of WTP Lime	\$	_
Total	\$	_
The contact name must be the p contractor regarding all matters r the individual agrees and unders addendum #1.	elated to this bid a	and addendum. By signing,
Bidder's signature	 Date	

2020 Contract for the City of Antigo

This agreement is between the ${\bf City\ of\ Antigo\ }$ herein cal	led "CITY" and
herein called "CONTRACTOR".	
The City and Contractor, agree as follows:	
I) Scope of Work: Hauling Biosolids and Lime to the appreciate that was opened on December 7 2020.	proved fields as specified by the bid
 Insurance. The Contractor shall not commence work obtained all insurance required under this agreement a by the City. Nor shall the Contractor allow any subcor subcontract until all similar insurance required of the s approved. 	and such insurance has been approved atractor to commence work on a
Worker's Compensation and Employer's Liability:	Statutory
General Liability: Bodily Injury, including death	\$1,000,000 each person \$1,000,000 each occurrence
Property Damage Or Combined Single Limit	\$1,000,000 each occurrence \$1,000,000 each occurrence
Independent Contractor's (if applicable) (contingent liability):	
Bodily Injury, including death	\$1,000,000 each person \$1,000,000 each occurrence \$1,000,000 each occurrence
Property Damage Automobile Liability: Bodily Injury, including death	\$1,000,000 each person
Property Damage	\$1,000,000 each occurrence \$1,000,000 each occurrence
Professional Liability (if applicable)	\$ 1,000,000 indicating if claims made type of policy

An umbrella policy of \$1,000,000 may be used to satisfy the above requirements. The City of Antigo must be named as an additional insured with a copy of the endorsement forwarded to the City Clerk-Treasurer's Office. No insurance shall be canceled without notifying the City in writing thirty (30) days prior to cancellation.

Contract Amount

Performance and Payment Bond

(if applicable)

- 3) **Proof of Insurance.** The Contractor shall furnish the City with proof of insurance which shall consist of a certificate of insurance.
- 4) **Performance/Payment Bond.** The City may require a Performance Bond and Payment Bond in an amount of the estimated work to be completed for the faithful performance of this

contract and for the payment of all persons performing labor and furnishing materials in connection with this contract.

	neir employees and equipment to perform any part of roper verbal notification and approved by the		
6) Term. The term of this contract shall be effective beginning on 2020, and shall continue until 2021			
City shall give written notice to the Conwork continues, the City upon second w	ctory work by the Contractor, as judged by the City, the tractor identifying the deficiencies. If unsatisfactory written notice, may declare this agreement null and agreement for any reason upon a 90-day written notice.		
shall inure to the benefit of and binding	. All of the provisions and agreements of this contract g upon the heirs, executors, administrators, gns of the respective parties hereto as fully as upon the		
Company Name			
Authorized Signer			
Address			
Phone			
In Witness whereof, the parties hereto hav	re signed this Agreement.		
This agreement will be effective on			
City of Antigo	Contractor		
Mayor			
Attest:	Witness:		
Address for giving notice	Address for giving notice		
700 Edison Street			
Antigo, WI 54409			
Phone: (715) 623-3633			