AGRICULTURAL CHEMICALS

(Annual Contract)
RFB No. 18-0046

CONTRACT DOCUMENTS

Vendors

Delta Landscape Supply of Georgia, Inc.

Helena Chemical Company

Howard Fertilizer and Chemical Company, Inc.

SiteOne Landscape Supply, LLC

COLUMBUS CONSOLIDATED GOVERNMENT CONTRACT ROUTING MEMORANDUM

DATE:

September 6, 2018

SUBJECT: Agricultural Chemicals (Annual Contract) – RFP No. 18-0046

FROM:

Heather Scheuttig, Purchasing Division

Please route for appropriate signatures the two (2) copies of the attached contract with Delta Landscape Supply of Georgia, Inc. The firm will supply agricultural chemicals on an "as needed" basis.

The initial term of this contract shall be for two years with the option to renew for three additional twelve-month periods. Contract renewal shall be contingent upon the mutual agreement of the City and the Contractor.

Funds are budgeted each fiscal year for this ongoing expense: General Fund – Parks & Recreation - Park Services - Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund -Parks & Recreation - Park Services - Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690,00 for this ongoing expense: Sewer Fund - Public Works-Sewer Maintenance - Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund -Public Works - Right of Way Maintenance - Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Council authorized this contract per Resolution No. 318-18; dated August 28, 2018 (copy is attached).

Signatories	Signatures Required (No initials please)	Date
Purchasing Division Manager Signature of Approval	Alr Millares	9/6/18
City Attorney: Signature required on Contracts	Form Approved: CEF, City Attorney	9/6/18
City Manager: Signature required on Contracts	Soul Holy	9/1/18
Clerk of Council: (Dep.) Signature Required on Contracts & Attest/Seal	Lindsly Stesser	09/7/18
Buyer: Process / Distribute	Adocs Schuss	9/10/18

After all signatures have been applied, please contact Purchasing Division (ext - 3071) for distribution.

CONTRACT

THIS CONTRACT, executed this 2th day of September 2018, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and Delta Landscape Supply of Georgia, Inc., hereinafter called the "Contractor"

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

- 1. That the Contractor met all proposal requirements and was evaluated responsive for providing **Agricultural Chemicals (Annual Contract)**, per **RFB No. 18-0046**, and was awarded the Contract by Columbus City Council on Tuesday, August 28, 2018, Resolution No. 318-18, for the initial term of two years, with the option to renew for three (3) additional twelvementh periods, for furnishing the same in accordance with the specifications prepared by the City and the submittal of the Contractor.
- 2. The Contractor will, at its own cost and expense, furnish all labor, materials, and equipment required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the City's Business Requirements, the City's Request for Bids, dated April 13, 2018 (and all addenda thereto), the Contractor's submittal dated May 16, 2018 and the bid clarification documents which are attached hereto as exhibits "A", "B", and "C" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.
- 3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

A RESOLUTION NO. 3 18 - 18

C.M.08.28-18(4)(E) 318.18

A RESOLUTION AUTHORIZING THE PURCHASE OF AGRICULTURAL CHEMICALS FROM HELENA CHEMICAL COMPANY (SUWANEE, GA), HOWARD FERTILIZER AND CHEMICAL (THOMASVILLE, GA), DELTA LANDSCAPE SUPPLY (NORCROSS, GA), AND SITE ONE LANDSCAPE (CLEVELAND, OH) ON AN "AS NEEDED" BASIS FOR THE ESTIMATED COMBINED ANNUAL CONTRACT VALUE OF \$ 408,023.45.

WHEREAS, the contractors will provide agricultural chemicals to be used by Parks and Recreation to maintain athletic turf and Public Works to maintain City right of ways; and,

WHEREAS, the contract term shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to purchase agricultural chemicals from Helena Chemical Company (Suwanee, GA), Howard Fertilizer and Chemical (Thomasville, GA), Delta Landscape Supply (Norcross, GA), and Site One Landscape (Cleveland, OH) for the estimated combined annual contract value of \$408,023.45. Parks and Recreation has budgeted \$64,000.00 each fiscal year for this ongoing expense: General Fund – Parks & Recreation – Park Services – Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund – Parks & Recreation – Park Services – Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund – Public Works—Sewer Maintenance – Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund – Public Works – Right of Way Maintenance – Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the day of August 2018 and adopted at said meeting by the affirmative vote of members of said Council.

Councilor Allen voting	YES :
Councilor Baker voting	YES .
Councilor Barnes voting	YES
Councilor Davis voting	ABSENT .
Councilor Garrett voting	YES .
Councilor House voting	<u>YES</u> .
Councilor Huff voting	YES.
Councilor Thomas voting	YES .
Councilor Turner Pugh voting	YES .
Councilor Woodson voting	YES

Teresa Pike Tomlinson, Mayor

FORM F

CONTRACT SIGNATURE PAGE AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

Witness as to the signing of the contract	By: Bernice Malcom 5/15/18 Signature of Authorized Representative Date
Witness as to the signing of the contract	Bervice Malcom, President Print Name and Title of Signatory
(Corporate seal, if applicable)	Company: De Ha LANDScape Supply of Georgia, INC.
Company Ordering Address	Company Payment Address
4025 Steve Reynolds Blud, Sk 106	4025 Steve Reynolds BIVD, Ste 106
NUTCYOSS, GA 30093	Norcross, Ga 30093
Contact: Juel Butler	Contact: Joel Butler
Contact Email JBuHera delta landscape. Com	1 Contact Email J Butler Wdeltalandscape, Com
Telephone 770-279-7258 Fax 770-279-1292	Telephone: 770-279-1288 Fax 770 - 279 - 1292
CONSOLIDATED GOVERNMI	ENT OF COLUMBUS, GEORGIA
Accepted this 2 day of Sept. 2018	APPROVED AS TO LEGAL FORM:
h the Ban	Jan Jan Momen
Isaiah Hugley, City Manager	Clifton C. Fay, City Attorney
ATTEST:	AND THE WAS A STANK OF WEST OF STANK OF
Lindsey Glisson Deputy Clerk of Council	By Resolution No. 318-18

EXHIBIT A

Columbus Consolidated Government Agricultural Chemicals (Annual Contract) Business Requirements

RFB No. 18-0046

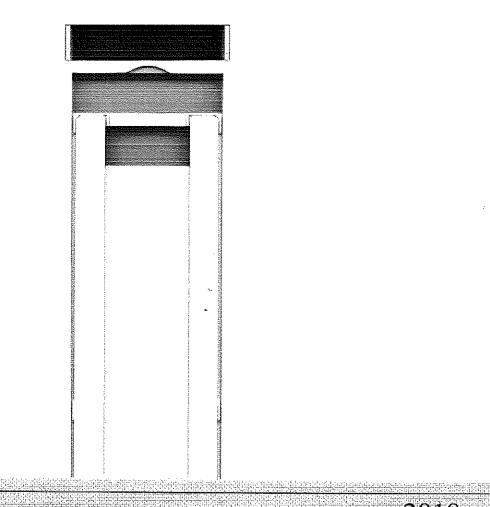
FORM C

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

authorization user identification number and date of authorization are as follows:
154736 5 15 18
Company ID Number (numerical, 4-7 digits) Date of Authorization
**See https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES to access your E-Verify Company Identification Number.
5/15/18
Date of Authorization
De Ha LAndscape Supply of Georgia, INC Name of Contractor
Agricultural Chemicals (Annual Contract); RFB No. 18-0046 Name of Project
Columbus Consolidated Government Name of Public Employer
I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on May , 15 , 2018 in Norcross (city), Gc (state).
Bernice Walcon Signature of Authorized Officer or Agent
Signature of Authorized Officer of Agent
Bernice Malcon
Printed Name and Title of Authorized Officer or Agent
SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE 15th DAY OF May, 2018.
Susan m maddo
NOTARY PUBLIC WINNET INT
My Commission Expires:

A properly completed, notarized E-Verify Affidavit must be included with scaled proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.





Gwinnett County Licensing and Revenue 446 W. Crogan Street - Suite 125 Lawrenceville, GA 30046

NOT TRANSFERABLE

DISPLAY THIS CERTIFICATE AT BUSINESS LOCATION FOR PUBLIC VIEW

Date Issued: Expires:

March 6, 2018 March 31, 2019

Certificate Number:

2018066736 \$1,003.16

Business Name: Description:

DELTA LANDSCAPE

Nursery, Garden Center, and Farm Supply Stores

MAIL TO: DELTA LANDSCAPE C/O DELTA LANDSCAPE SUPPLY OF GEORGIA INC 4025 STEVE REYNOLDS BLVD-SUITE 106 NORCROSS GA 30093-3204

Business Location

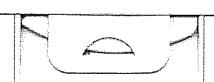
4025 STEVE REYNOLDS BLVD

SUITE 106

Fee:

NORCROSS GA 30093-3204

Only valid at this location and when location conforms to Gwinnett County Ordinance



FORM D

Form W-9

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not

Departr	ent of the Treasury	tweetions and the latest information	send to the IRS.
hiema	tent of the freatury Revenue Service Go to www.irs.gov/FormW9 for insi Name (as shown on your income tax return). Name is required on this line; do	not leave this line blank.	
:	De Ita Land scape Supply		
	2 Business name/disregarded entity namy, if different from above	1 9,00. 9.00,	
1 page 3.	3 Check appropriate box for federal tax classification of the person whose name following seven boxes. Individual/sole proprietor or Mac Corporation S	instruc	mptions (codes apply only to Lentities, not individuals; see tions on page 3):
. თ	Individual/sole proprietor or IMC Corporation III S Corporation single-member LLC		t pæyee code (if any)
og in	Limited liability company. Enter the tax classification (C=C corporation, S:	=S corporation, P=Partnership) ►	·
Print or type. Specific Instructions on	Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tay is disregarded from the owner for U.S. federal tay is disregarded from the owner should check the appropriate box for the tay.	n of the single-member owner. Do not check om the owner unless the owner of the LLC is urposes. Otherwise, a single-member LLC that ax classification of its owner.	· ·
Ö	☐ Other (see instructions) ►	Requester's name and add	o accounts maintained outside the U.S.)
S,	5 Address (number, street, and apt. or suite no.) See instructions.	Requesters name and addi	eas (obtional)
See	4025 Steve Reynolds Blud	,54e 106	
	6 City, state, and ZIP code Not Cross GA 30093		
,	7 List account number(s) here (optional)		
	, 150 5555 510 150 (56 555 5)		
Par	Taxpayer Identification Number (TIN)		
Enter	your TIM in the appropriate boy. The TIN provided must maich the name	re given on line 1 to avoid Social security no	mber
hacker	o withholding. For individuals, this is generally your social security num nt alien, sole proprietor, or disregarded entity, see the instructions for I	nber (SSN), Hov/eyer, for a t	_
entitie	it is your employer identification number (EIN). If you do not have a r	number, see How to get a LLLLLL L	
TIN, la		Also see What Name and Employer identific	cation number
Note:	If the account is in more than one name, see the instructions for line 1. or To Give the Requester for guidelines on whose number to enter.	. Also see yonat wante and	
14GH IIV	2 10 CIVO DIO FICQUESTO IN GALLONINO SI WARREST TO STATE		
Par	T Certification		a strain a figure mention
	penalties of perjury, I certify that:	,	
1 The	number shows an thir form is my correct tay payer identification pumb	per (or I am waiting for a number to be issued to	me); and
2. I an Sen	not subject to backup withholding because: (a) I am exempt from bac rice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and	ckup withholding, or (b) I have not been notified.	by the internal mevenue
3. I an	a U.S. citizen or other U.S. person (defined below); and	reme dia l	
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	of from FATCA reporting is correct.	ankun withbolding bacarea
you ha	cation Instructions. You must cross out item 2 above if you have been no ve failed to report all interest and dividends on your tax return. For real est tion or abandonment of secured property, cancellation of debt, contribution han interest and dividends, you are not required to sign the certification, b	tate transactions, item 2 does not apply. For mong ons to an individual retirement arrangement (IRA), :	iage interest paid, and generally, payments
Sign Here	Signature of U.S. person Bernice Malcom	Date > 5/15/	18
	neral Instructions	 Form 1099-DIV (dividends, including those funds) 	from stocks or mutual
Section noted.	n references are to the Internal Revenue Code unless otherwise	* Form 1099-MISC (various types of income,	prizes, awards, or gross
Fisher	developments. For the latest information about developments	 proceeds) Form 1099-8 (stock or mutual fund sales ar 	id certain other
related	to Form W-9 and its instructions, such as legislation enacted ney were published, go to www.irs.gov/FormW9.	transactions by brokers) Form 1099-S (proceeds from real estate tra-	
Dise	pose of Form	• Form 1099-K (merchant card and third party	v network transactions)
	ividual or entity (Form W-9 requester) who is required to file an	 Form 1098 (home mortgage interest), 1098- 	E (student loan interest),
inform	ation return with the IRS must obtain your correct taxpayer	1098-T (tuition) • Form 1099-C (canceled debt)	
identif	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	 Form 1099-A (acquisition or abandonment of 	f secured property)
taxoay	er Identification number (ATIN), or employer Identification number	Use Form W-9 only if you are a U.S. person	
IFINY.	o report on an information return the amount paid to you, or other It reportable on an information return. Examples of information	alian), to provide your correct TIN.	
return	i reportable of a refiniormation return. Examples of information is include, but are not limited to, the following. 1 1099-INT (interest earned or paid)	If you do not return Form W-9 to the reques be subject to backup withholding. See What i later.	ter with a TIN, you might s backup withholding,
	C.a.M. denodV		Form W-9 (Rev. 11-2017)

Logged in as HSCHEUTTIG CID: 48	8005 <u>Lo</u>	gout CUST	tome
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Search by TIN, Acct., or N

Check for imported payees with non-matching TIN data and verify new payees

TIN Matching allows you to verify your Payee data against the IRS TIN Matching database to verify if you have the cor

Sovos can take care of your mismatched TINs & B-Notices

Sovos offers the ability to automatically mail the appropriate forms to your mismatched payees and request corrected information. The responses come directly to you, and the W-9/B-Notice solicitations are saved for your reference in File Manager. Depending on your subscription, additional fees may apply.

Print & Mail W-9 Solicitations

Print & Mail B-Notices

The W9 Solicitation button has been disabled as you have already sent your solicitations.

Individual TIN Lookup

Verify individual Payee Social Security and Employer ID numbers.

TIN Status: PASS

Name: Delta Landscape Supply

OFAC Check: PASS DMF Check: PASS

Verify Pa

Mismatched Records

TIN Name

Download .

Back to Home

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/5/2018

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 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). CONTACT NAME: Joselyne Diette PHONE (A/C, No, Ext): 7702505317 E-MAIL ioselyne diette PRODUCER Insurance Office of America, Inc. FAX (A/C, No): 678-450-9180 100 Galleria Parkway ADDRESS: joselyne.diette@ioausa.com Suite 600 Atlanta GA 30339 NAIC# INSURER(S) AFFORDING COVERAGE 10335 INSURER A: Bridgefield Casualty Insurance Company DELTLAN-01 26867 INSURER B: Southern Insurance Company of Virginia Delta Landscape Supply of Georgia, Inc INSURER c : Atlantic States Insurance Company 22586 4025 Steve Reynolds Blvd INSURER D : Suite 106 Norcross GA 30093 INSURER E: INSURER F **REVISION NUMBER: CERTIFICATE NUMBER: 26656109** COVERAGES 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. ADDL SUBR POLICY EFF (MM/DD/YYYY) POLICY EXP LIMITS TYPE OF INSURANCE POLICY NUMBER LTR INSD WVD CPA8907671 3/1/2018 3/1/2019 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE С Χ \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X \$100,000 OCCUR MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 \$ 2,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ 2,000,000 POLICY OTHER: COMBINED SINGLE LIMIT 3/1/2019 CAS8907671 3/1/2018 \$1,000,000 AUTOMOBILE LIABILITY В (Ea accident) BODILY INJURY (Per person) Χ ANY AUTO ALL OWNED AUTOS SCHEDULED BODILY INJURY (Per accident) AUTOS NON-OWNED AUTOS PROPERTY DAMAGE \$ Χ (Per accident) HIRED AUTOS ŝ 3/1/2018 3/1/2019 CXS8907671 В Х UMBRELLA LIAB Х EACH OCCURRENCE \$1,000,000 OCCUR **EXCESS LIAB** AGGREGATE \$ 1,000,000 CLAIMS-MADE DED X RETENTIONS O \$ WORKERS COMPENSATION X PER STATUTE 3/1/2018 3/1/2019 196-30603 AND EMPLOYERS' LIABILITY AND EMPLOYERS LIMBILITY
OFFICER/MEMBER EXCLUDED?
(Mandatory in NH)
If yes, describe under
DESCRIPTION OF OPERATIONS below E,L, EACH ACCIDENT \$ 500,000 N / A E,L. DISEASE - EA EMPLOYE \$500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFIC.	ATF	HOL	DER

Columbus Consolidated Government Finance Department | Purchasing Division 100 10th Street, 5th Floor Columbus GA 31901 CANCELLATION

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

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EXHIBIT C

Agricultural Chemicals (Annual Contract)

Delta Landscape Supply of Georgia, Inc. Submission

FORM A

BIDDER'S RESPONSE PAGE

AGRIGULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

PARK SERVICES

Bidder will provide the following services:

	Specialist/Consultant with technical experience in applying mical/liquid fertilizer.	Yes	No_	\times
Tur	f Specialist will provide on-going follow up service and technical owing:	advice, to i	nclud	de the
Α.	In-service training of Columbus Parks & Recreation staff	Yes	No_	<u>X</u>
В.	Take soil samples	Yes X	_No_	· · · · · · · · · · · · · · · · · · ·
C.	Compete laboratory analysis of soil sample	Yes 🔀	_No_	
D.	Present soil analysis as specified under vendor requirements	YesX	No_	
E.	Formulation of fertilizer requirement for each field	Yes	_No_	X
	Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product	Yes	_No_	\checkmark
	Provide at least six (6) on-site inspections per year as requested	Yes	_No_	<u>X_</u>
	Vendor Name: Detta Landocare Supply of	Bergin		

AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046 **BID FORM**

PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID

notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after the items are included in sealed bid:

reets			
☐ Waterial Safety Data St		nda (if any):	m No. 3
□ E-Verify	ZAddenda	ollowing adde	Addendum No. 3
☐ Proof of Insurance	Z Contract Signature Page Z Addenda	Initial below to acknowledge receipt of the following addenda (if any):	Addendum No. 2
☐ Bidder's Qualifications ☐ Proof of Insurance ☐ E-Verify ☐ Material Safety Data Sheets	Z Con	Initial below to ackno	Addendum No. 1 2 Addendum No. 2
Zedform			

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

Vendor Name: Delta Landscape Supply of Sa INC

Item	Item Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	No. Name		Qty.	Size	Cost	Cost
- i	Three Way Selective Herbicide or Equivalent	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	500 Gals			S No Bid

AGRICULTURAL CHEMICALS

		PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.	FB No. 1 ze per iter	8-0046 n.			
Vend	Vendor Name: Delta	Landscape Supply of Ga INC					
Item No.	Product Name	Active Ingredients	Est. Otv.	Unit Size	Unit Cost	Extended Cost	
2.	Three-Way Ester II or Equivalent	Isooctyl (2-ethylhexyl) Ester of 2-Methyl-4-Chlorophenoxyacetic Acid* Butoxyethanol Ester of 3,5,6-Trichloro-2-Pyridinyloxyacetic Acid** 5.00% Dicamba (3,6-Dichloro-o-Anisic Acid)***	30 Cs			\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
3.	Chelated Iron Plus 12-0-0 or Equivalent	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals			P18 00 §	
4.	Pellitized Lime or Equivalent		120 Bags	井の井	3.90	∞`89th \$	
5.	Revolver or Equivalent	Foramsulfuron2.34%	30 Cs)	RS ON \$	
6.	Pre-m 0.86% 0-0-7 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags			bis on 8	
7.	Pre-m 3.3 EC 0.86% 0-0-7 or Equivalent	Pendimethalin 37.4% Liquid	100 Gal			PIS ON \$	
∞ ∞	Pre-m 0.86% 25-2-5 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags			P'S ON \$	
6	24-2-11 or Equivalent	Fertilizer, 40% poly plus sulfer coated urea 6% Fe		700	14.50/bg	% 17,400. 60	
10.	18-24-12 or Equivalent	25% poly plus sulfur coated urea	20 Bags	£8	15.75 Jz	\$ 315.00	
11.	20-1-5 or Equivalent	Organic Fertilizer	20 Bags			\$ No Bid	\neg
B No.	18-0046	Agricultural Chemicals Page 29	29 of 36				

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requiested to enter the Unit Size ner item.

		Vendors are requested to enter the Unit Size per item.	e per iten	D.		
Vend	Vendor Name: Le Ha	a Landscape Supply of Ga INC	J			
Item No.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
12.	25-5-11 or Equivalent	Organic Fertilizer	1200 Bags			S NO BIL
13.	5-10-15 or Equivalent			B#	9.08/kg	\$ 1086.8
14.	Dolimitic Lime or Equivalent		360 Bags			PIS ON S
15.	Garlon *3A or Equivalent	Triclopyr 44.4%	100 Gals			P'S ON
16.	Manicure 6FL or Equivalent	Chlorothalonii 54.0%	25 Gals			\$ NO B'd
17.	Top Choice Insecticide or Equivalent	Fipronil 0.0143%	100 Bags			Pig on
18.	Simazine 4L or Equivalent	Simazine 42.1%	5 Gals			\$ NO GIL
19.	Reward Landscape/ Aquatic herbicide or Equivalent	Diquat 37.3%	20 Gals			P'S ON
20.	Spectacle					\$ NO Bid
21.	Foam Marker	Foam 100%	15 Gals			\$ NO BY
22.	Primo Maxx or Equivalent	Trinexapac-ethyl 11.3%	20 Gals			S NO Bid

Page 30 of 36

Agricultural Chemicals

'B No. 18-0046

PARK SERVICES REQUIREMENTS; RFB No. 18-0046

स्य	PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendor Name: Size per item.	B No. 18-C ze per item.	046		
	Active Ingredients	Est. Ur	Unit Unit		Extended
		Oty. Size	ze Cost		Cost
Rodeo or Equivalent	Glyphosate (for aquatic vegetation)	200 Gals		⇔	No Bid
Roundup Quick Pro or Equivalent	Glyphosate 73.3%; Diquat dibromide 2.9%	200 Gals		€	P, 8 9
	Acephate 75.0%	5 Lbs		\$7	PISO ON
	Bifenthrin 7.9%	50 Gals		69	Pig on
	Pyraclostrobin 23.6%	2 Gals		↔	P, 8 ON
	Dithiopyr 40%	200 Oz		\$	No Bid
	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	500 Gals		₩	PISO ON
	Metasulfuron 60.0%	50 Oz		6/3	PIS ON
	Halosulfuron-Methyl 75.0%	80 Oz	***************************************	₩	No Bid
Monument 75WG or Equivalent	Trifloxysulfuron-sodium 75.0%	20 Oz		6/2	PISI ON
	Quinclorac 75%	100 lbs		₩	NO Bid
			-		

Page 31 of 36

\$ 19269.00

PARK SERVICES GRAND TOTAL

Agricultural Chemicals

'B No. 18-0046

Page 32 of 36

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

Vendor Name: Delta Landscape Symply of Ga Inc

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name	•	Qty.	Size	Cost	Cost
34.	Celsius WG	Thiencarbazone-methyl8.7% Iodosulfuron-methyl-s1.9% Dicamba 57.4%	100 lbs			PS ON
35.	Crosscheck Plus	Bifenthrin 7.9%	300 bags			s no Bd
36.	Liquid Iron		50 Gals			\$ NO GIL
37.	Spreader Sticker/ Surfactant		20 Gals			\$ NO BILL
38.	Spray Tank Cleaner		50 Gals			\$ NO BILL
39.	Sevin 4F or Equivalent	Carbaryl 43.0%	300 Gals			\$ NO B.'J
40.	G-Pro 2.32% or Equivalent	Chlorpyrifos 2.32% (Labeled for Recreational Areas)	80 Bags			\$ NO BY
41.	Spray Dye, Tracker Blue 2.5 Gal		100 Gals			P.O ON \$

AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: De Ha Law Beege Supoly of Georgen

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
Š.	Name		Qty.	Size	Cost	Cost
_ i	Three Way Selective Herbicide	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	500 Gals			\$ No Beel
2.	Chelated Iron Plus 12-0-0	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals			\$ NO Bell
κi.	Induce		50 Gals			\$ NO Bul
4.	Herbicide, Three-Way Ester II		30 Cs			\$ NO BUL
5.	Herbicide, Revolver		30 Cs			s wall
6.	Fertilizer, Lime Pellitized		120 Bags	# 04	3.90	\$ 468.00
7.	Fertilizer, Mulch 70/30		80 Bags	\$Q#	50# 12.50	\$ 1,000,00
×.	Target 6.6 (MSMA)	Monosodium Acid Methanearsonate (MSMA) 51.0%	10 Gals			s No Púd
9.	24-2-11	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags	·		\$ NO Bill
10.	Pre-m 0.86% 0-0-7	Pendimethalin 0.86% Fertilizer	700 Bags			s No Bid
11.	Pre-m 0.86% 25-2-5	Pendimethalin 0.86%	700 Bags			s no Rul

Page 33 of 36

B No. 18-0046

PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

Vendor Name: Delta Low Scape Supply of Georgia

Item	Item Product	Active Ingredients	Est.	Unit		Extended
No.	No. Name		Qty.	Size	Cost	Cost
			200			<i>4</i> , (
12.	Roundup Quick Pro	Glyphosate 73.3%; Diquat dibromide 2.9%	Gals			NO Beel
			200			\$
13.	Rodeo	Glyphosate (for aquatic vegetation)	Gals			NO Bel
			120		-	()
14.	Fertilizer, 13-13-13		Bags	30 #	20# 11.95	1434,00
-			500			\$
15.	Trimec 992	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	Gals			2002 1002
	Spreader Sticker/					\$
16.	Surfactant		20 Gals			3 2
	Aquatic Adjuvant Non-		200			\$
17.	Ionic Surfectant		Gals			N 120%

00714 EC\$ PUBLIC WORKS GRAND TOTAL | \$ 2,902.00 TOTAL BID

d Georgia
Looksup Supply a
: Dette
VENDOR NAME & SIGNATURE:

If certified as a DBE or WBE, list the certifying agency: _

*** COMPLETE THESE PAGES AND RETURN WITH BID *** Agricultural Chemicals

SOLICITATION ID: RFB NO. 18-0046

AGRICULTURAL CHEMICALS

(ANNUAL CONTRACT)

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS INDICATED BY "X"

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

	Required Coverage(s)	Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
	Comprehensive General Liability:		gan -
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	Independent Contractors and Sub Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non-ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Other:		
	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	

	Required Coverage(s)	Limits	Bidders
ļ		(Figures denote minimums)	Limits/Response
	10. Personal and Advertising Injury	\$1 Million each offense, \$1	
	Liability	Million annual aggregate	
L	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full	
		amount of contract	
	18. XCU (Explosive, Collapse,		
	Underground) Coverage		
	19. USL&H (Long Shore Harbor		
	Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment	\$2 Million per occurrence/claim	
	Liability		
_X	22. Carrier Rating shall be Best's Rati		
X	23. Notice of Cancellation, non-renewal or material change in coverage		
	shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional		
X	25. Certificate of Insurance shall show	Bid Number and Bid Title	****
	26. Pollution:	\$2 Million per occurrence/claim	

^{*}If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the <u>Bidders Limits/Response</u> column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the conti	ract, I will comply with cor	ntract insurance requiren	nents and provide the re	guired
Certificate(s).		_	4	•
BIDDER NAME:_	DeHa LANdso	ape Supply	of Georgia	Inc
AUTH. SIGNATUR	./\	malcon	J /	

COMPLETE THIS PAGE AND RETURN WITH BID

COLUMBUS CONSOLIDATED GOVERNMENT CONTRACT ROUTING MEMORANDUM

DATE:

September 6, 2018

SUBJECT: Agricultural Chemicals (Annual Contract) – RFP No. 18-0046

FROM:

Heather Scheuttig, Purchasing Division

Please route for appropriate signatures the two (2) copies of the attached contract with Helena Chemical Company. The firm will supply agricultural chemicals on an "as needed" basis.

The initial term of this contract shall be for two years with the option to renew for three additional twelve-month periods. Contract renewal shall be contingent upon the mutual agreement of the City and the Contractor.

Funds are budgeted each fiscal year for this ongoing expense: General Fund – Parks & Recreation - Park Services - Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund -Parks & Recreation – Park Services – Grounds Maintenance, 0101-270-2100-PSRV-6576, Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund – Public Works–Sewer Maintenance - Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund -Public Works - Right of Way Maintenance - Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Council authorized this contract per Resolution No. 318-18; dated August 28. 2018 (copy is attached).

Signatories	Signatures Required (No initials please)	Date
Purchasing Division Manager Signature of Approval	Alrof. Millowy.	9/4/18
City Attorney: Signature required on Contracts	Form Approved: CCF, City Attorney	9/6/18
City Manager: Signature required on Contracts	Ashleson	9/7/18
Clerk of Council: 0 00. Signature Required on Contracts & Attest/Seal	Hundrey Debac	09171
Buyer: Process / Distribute	Au School	9/10/18

After all signatures have been applied, please contact Purchasing Division (ext - 3071) for distribution.

CONTRACT

THIS CONTRACT, executed this The day of Sept. 2018, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and Helena Chemical Company, hereinafter called the "Contractor"

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

- 1. That the Contractor met all proposal requirements and was evaluated responsive for providing **Agricultural Chemicals (Annual Contract)**, per **RFB No. 18-0046**, and was awarded the Contract by Columbus City Council on Tuesday, August 28, 2018, Resolution No. 318-18, for the initial term of two years, with the option to renew for three (3) additional twelvementh periods, for furnishing the same in accordance with the specifications prepared by the City and the submittal of the Contractor.
- 2. The Contractor will, at its own cost and expense, furnish all labor, materials, and equipment required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the City's Business Requirements, the City's Request for Bids, dated April 13, 2018 (and all addenda thereto), the Contractor's submittal dated May 16, 2018 and the bid clarification documents which are attached hereto as exhibits "A", "B", "C" and "D" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.
- 3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

A RESOLUTION NO. 3 18 - 18

C·m·08·28·18(4)(E) 3 18·18

A RESOLUTION AUTHORIZING THE PURCHASE OF AGRICULTURAL CHEMICALS FROM HELENA CHEMICAL COMPANY (SUWANEE, GA), HOWARD FERTILIZER AND CHEMICAL (THOMASVILLE, GA), DELTA LANDSCAPE SUPPLY (NORCROSS, GA), AND SITE ONE LANDSCAPE (CLEVELAND, OH) ON AN "AS NEEDED" BASIS FOR THE ESTIMATED COMBINED ANNUAL CONTRACT VALUE OF \$ 408,023.45.

WHEREAS, the contractors will provide agricultural chemicals to be used by Parks and Recreation to maintain athletic turf and Public Works to maintain City right of ways; and,

WHEREAS, the contract term shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to purchase agricultural chemicals from Helena Chemical Company (Suwanee, GA), Howard Fertilizer and Chemical (Thomasville, GA), Delta Landscape Supply (Norcross, GA), and Site One Landscape (Cleveland, OH) for the estimated combined annual contract value of \$408,023.45. Parks and Recreation has budgeted \$64,000.00 each fiscal year for this ongoing expense: General Fund – Parks & Recreation – Park Services – Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund – Parks & Recreation – Park Services – Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund – Public Works—Sewer Maintenance – Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund – Public Works – Right of Way Maintenance – Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the day of August 2018 and adopted at said meeting by the affirmative vote of paembers of said Council.

Councilor Allen voting	YES:
Councilor Baker voting	YES .
Councilor Barnes voting	YES
Councilor Davis voting	_ABSENT .
Councilor Garrett voting	YES.
Councilor House voting	YES
Councilor Huff voting	YES .
Councilor Thomas voting	YES .
Councilor Turner Pugh voting	YES .
Councilor Woodson voting	YES .

Teresa Pike Tomlinson, Mayor

Lindsey Glisson, Deputy Clerk of Council

FORM F

CONTRACT SIGNATURE PAGE AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

Witness as to the signing of the contract Witness as to the signing of the contract	By: Signature of Authorized Representative Date Nick Holans Sales Representative Print Name and Title of Signatory
(Corporate seal, if applicable)	Company: Helena Chemical Company
Company Ordering Address 3211 Shawnee Industrial Way Suite 100	Company Payment Address
Suwanne GA 30029	3211 Shavnee Indistral Way Svite 100 Surance 6A 30024
Contact: NICle Adams	Contact: Nick Aubris
Contact Email adams philenegri, COM	Contact Email adoms no helenaagri. Com
Telephone 7703658360 Fax	Telephone: 7703658361 Fax
	IENT OF COLUMBUS, GEORGIA
Accepted this 2 day of Sept. 2018	APPROVED AS TO LEGAL FORM:
Isalah Hugley, City Manager	Clifton C. Fay, City Attorney
ATTEST: Lindsey Glisson Deputy Clerk of Council	EXECUTION AUTHORIZED 8

EXHIBIT A

Columbus Consolidated Government
Agricultural Chemicals
(Annual Contract)
Business Requirements

RFB No. 18-0046

FORM C

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

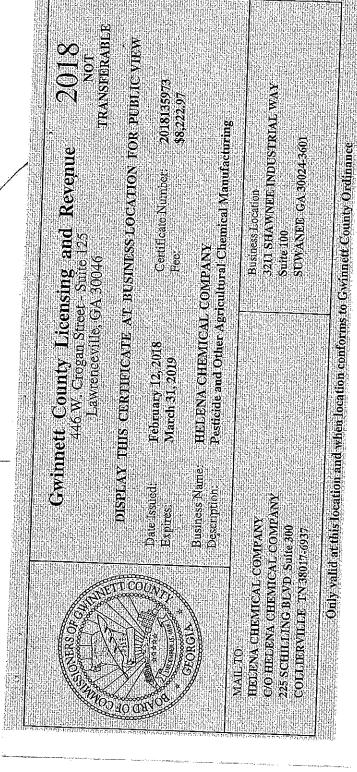
By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of Columbus Consolidated Government has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

188773	04/20/2018
Company ID Number (numerical, 4-7 digits) **See https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES t	Date of Authorization o access your E-Verify Company Identification Number.
04/20/2018 Date of Authorization	
Helena Agri-Enterprises, LLC Name of Contractor	
Agricultural Chemicals (Annual Contract); RFB No. 18 Name of Project	<u>3-0046</u>
Columbus Consolidated Government Name of Public Employer	
I hereby declare under penalty of perjury that the fores	going is true and correct.
Executed on April, 20, 2018 in Collierville Signature of Authorized Officer or Agent	(city), TN(state).
<u>Laura Merewether-Suzanne, Employment Verification</u> Printed Name and Title of Authorized Officer or Ager	nt STATE
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 20 DAY OF april , 2 Dieta Lawa young	NOTARY PUBLIC

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

My Comm. Expires March 21, 2022

NOTARY PUBLIC My Commission Expires





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/24/2018

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 these not confer rights to the certificate holder in lieu of such endorsement(s).

	is certificate does not confer rights t			uch endo					
	DUCER			CONTACT NAME:					
MARSH USA INC. 6410 Poplar Avenue, Suite 540				PHONE (A/C, No, E	PHONE FAX (A/C, No.):				
Memphis, TN 38119 E-MAIL ADDRESS-									
	Altn: kendra.neal@marsh.com Fax 212-94)-1ZØ1				URER(S) AFFOR	DING COVERAGE		NAIC#
S007	12-HCC-#5-17-18 35042	Al		INSURER A	: Sompo Ame	erica Insurance C	ompany		11126
INSU	RED Helena Agri-Enterprises, LLC			INSURER E	s : American G	Guarantee & Liabl	lity Ins Co		26247
	225 Schilling Boulevard			INSURER C	: Allianz Glot	oal Risks Us Insur	ance Company	,	35300
	Suite #300			INSURER D:					
	Collierville, TN 38017			INSURER E:					
				INSURER F	;				
CO			TE NUMBER:		4817404-01		REVISION NUMBER: 2		
IN CF	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY ICLUSIONS AND CONDITIONS OF SUCH	QUIREN PERTAIN POLICIE	MENT, TERM OR CONDITION I, THE INSURANCE AFFORD S. LIMITS SHOWN MAY HAVE	OF ANY O ED BY TH BEEN REI	CONTRACT IE POLICIES DUCED BY I	OR OTHER I S DESCRIBEI PAID CLAIMS.	OCUMENT WITH RESPEC	י סד דג	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SU INSD W	BR /D POLICY NUMBER	P (M	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMITS	3	
A	X COMMERCIAL GENERAL LIABILITY	Х	GDL4000A0			10/01/2018		\$	2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
	X Contractual Liability						MED EXP (Any one person)	\$	15,000
ļ	X Herbicide/Pesticide Liability						PERSONAL & ADV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	5,000,000
	X POLICY PRO- LOC							\$	EXCLUDED
	OTHER:	· ·	ADV40002C0 (AOS)	10	/01/2017	10/01/2018		\$	2 000 000
A	AUTOMOBILE L'ABILITY	Х	ADV40002C0 (AOS)	"	/01/2017	10/01/2018	(Ea accident)	\$	3,000,000
A	X ANY AUTO OWNED SCHEDULED		ADV4001910 (MA)	100	10112011	10/01/2010	,	\$ \$	
	AUTOS ONLY AUTOS	,						\$ \$	
	X HIRED X AUTOS ONLY							\$	
В	V HISTORIA LIAR V	X	IPR379234002	10	/01/2017	10/01/2020			5,000,000
	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS_MADE	^	11 1101 020 1002	10	10112011	10/01/2020		\$ \$	5,000,000
	OBARROWANDS				Ì	•		\$	
Ā	DED RETENTION \$ WORKERS COMPENSATION		WCD40076Y0 (AOS)	10,	/01/2017	10/01/2018	X PER OTH-	*	
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE		WCR40004E0 (WI)	10/	/01/2017	10/01/2018		\$	2,000,000
- 1	OFFICER/MEMBER EXCLUDED? N	N/A		-			E.L. DISEASE - EA EMPLOYEE	•	2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					•		\$	2,000,000
С	Excess General Liability		EIL2010194	10	/01/2017	10/01/2018	Limit:	-	2,000,000
	& Pollution Liability						SIR:		3,000,000
	,								
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: RFB No. 18-0046 Agricultural Chemicals Columbus Consolidated Government is included as additional insured as required by written contract. Helena self-insures for products coverage. Excess General Liability picks up for products coverage after \$3,000,000 self insured retention for products only.									
CEF	RTIFICATE HOLDER			CANCE	LLATION				
Columbus Consolidated Government 100 Tenth Street P O Box 1340 Columbus, GA 31902-1340				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
				AUTHORIZI of Marsh U	ED REPRESEN ISA Inc.	ITATIVE			

Paul Woods

Form (Rev. October 2007)
Department of the Tressury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Interna	1 Revisitie Service						
	Name (as shown on your income tax return)						
8 2	HELENA CHEMICAL COMPANY						
редв	Business name, if different from above						
F		*	5	<i>:</i> -			
Print or type Specific instructions	Check appropriate box: Individual/Sole proprietor: Corporation Partner Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation) Other (see instructions)		bership) ≯		Exempt payee		
Print Trist	Address (number, street, and apt. or suite no.)	-	Requester	s name and ad	ldress (optional)		
<u> </u>	225 SCHILLING BLVD SUITE 300	. [,, ,		
. E	City, state, and ZIP code						
Ğ	COLLIERVILLE, TN 38017						
Saa	List account number(s) here (options)						
- 23							
Par	Taxpayer Identification Number (TIN)						
backu alien,	Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.						
	If the account is in more than one name, see the chart on page 4 for guidelines o er to enter.	n whose		Employer ide	mification number		
Par	II Certification				,		
Under	penalties of perjury, I certify that:			/ · · · · · · · · · · · · · · · · · · ·			
i. Th	e number shown on this form is my correct taxpayer Identification number (or I an	n Waiting i	for a num	ber to be issu	sed to me) and		
2. la Re	2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and						
	ım a U.S. citizen or other U.S. person (defined below).						
withing For me arrang provid	ication instructions, You must cross out item 2 above if you have been notified by olding because you have failed to report all interest and dividends on your tax return ortgage interest paid, acquisition or abandomment of secured property, cancellation ement (IRA), and generally, payments other than interest and dividends, you are no e your correct TIN. See the instructions on page 4.	m. For rea o of debt	d estate ti cootribut	ransactions, i ions to an inc	tem 2 does not apply.		
Sian							

General Instructions

Section references are to the Internal Personal Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer Identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity,

Search by TIN, Acct., or N

Chack for imported payees with non-matching TIN data and verify new payees

TIN Matching allows you to verify your Payee data against the IRS TIN Matching database to verify if you have the coi

Sovos can take care of your mismatched TINs & B-Notices

Sovos offers the ability to automatically mail the appropriate forms to your mismatched payees and request corrected information. The responses come directly to you, and the W-9/B-Notice solicitations are saved for your reference in File Manager. Depending on your subscription, additional fees may apply.

Print & Mail W-9 Solicitations

Print & Mail B-Notices

The W9 Solicitation button has been disabled as you have already sent your solicitations.

Individual TIN Lookup

Verify individual Payee Social Security and Employer ID numbers.

TIN Status: PASS

Name: helena

OFAC Check: NEEDS REVIEW

DMF Check: PASS

Mismatched	Records

TIN	Nam
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Download.

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Verify Payee

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Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

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Name: marubeni

TIN Status: PASS
OFAC Check: PASS
DMF Check: PASS

EXHIBIT C

Agricultural Chemicals (Annual Contract)

Helena Chemical Company Submission

FORM A

BIDDER'S RESPONSE PAGE

AGRIGULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

PARK SERVICES

Bidder will provide the following services:

cher	Specialist/Consultant with technical experience in applying mical/liquid fertilizer. Specialist will provide on-going follow up service and technical	Yes /	No
	owing:	Yes	
Α.	In-service training of Columbus Parks & Recreation staff	Yes X	
В.	Take soil samples	Yes	
C.	Compete laboratory analysis of soil sample	Yes X	
D.	Present soil analysis as specified under vendor requirements		
E.	Formulation of fertilizer requirement for each field	Yes X	_
F.	Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product	Yes X	, ,
G.	Provide at least six (6) on-site inspections per year as requested	Yes <u>X</u>	No
		-1 / /	1

Vendor Name: Helena Chemical Company - Nick Adams

FORM E

AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046 **BID FORM**

PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID

SOLVE TO SE

WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, the items are included in sealed bid:

E-Verify Material Safety Data Sheets	沿 Addenda	llowing addenda (if any):	Addendum No. 3
女 Bid Form □ Bidder's Qualifications 女 Proof of Insurance 凶 E-Verify □ Material Safety Data Sheets	以 Contract Signature Page	Initial below to acknowledge receipt of the following addenda (if any):	Addendum No. 1 NA Addendum No. 2
X Bid Form			

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

2x2.5g| 12,250 Cost Unit Unit Size Qty. Gals Est. 500 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77% Selective herbicide Dimethylamine Salt of 2.4 Active Ingredients Vendor Name: Holena (hamical Company Selective Herbicide or Three Way Equivalent Product Name Item No.

Extended

Cost

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendor Name: Helpha (MUNICA)

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.		0	Qty.	Size	Cost	Cost
2.	Three-Way Ester II or Equivalent	Isooctyl (2-ethylhexyl) Ester of 2-Methyl-4-Chlorophenoxyacetic Acid* Butoxyethanol Ester of 3,5,6-Trichloro-2-Pyridinyloxyacetic	30 Cs (15091) 2x2,591 \$ 601,00	142.5%	\$61,00	s 9,150.00
		Acid**. 5.00% Dicamba (3,6-Dichloro-o-Anisic Acid)***				Batteship II
κi	Chelated Iron Plus 12-0-0 or Equivalent	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals	[652XZ	18/25/14	2x2591#7,50/91 \$ 37,50.00
4.	Pellitized Lime or Equivalent		120 Bags	老5	\$ 5.00/bag	50# \$5.00/bg \$ 600° 00
5.	Revolver or Equivalent	Foramsulfuron2.34%	30 Cs	8702 64th	#577/both	8702 \$577/641 \$ \$577/644e
.6	Pre-m 0.86% 0-0-7 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags	<i>\$0</i> #	\$ 9.45/bag	50# \$9.45/bag \$ 6,615.00
7.	Pre-m 3.3 EC 0.86% 0-0-7 or Equivalent	Pendimethalin 37.4% Liquid	100 Gal	ZZZ.Sgj	\$23.00/91	100 Gal 22.59j \$23.0/9j \$ 2,800.00
∞.	Pre-m 0.86% 25-2-5 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags) #05	504 \$18.99/bg	oe.59216 \$
9.	24-2-11 or Equivalent	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags	** S	14.09/bag	14.09/lay \$ 16,800.00
10.	18-24-12 or Equivalent	25% poly plus sulfur coated urea	S	B	1650/509	\$ 330
11.	20-1-5 or Equivalent	Organic Fertilizer	20 Bags		1)

Agricultural Chemicals

RFB No. 18-0046

Page 29 of 36

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

ğ	Vendor Name: /40/eA	Helena Mamical			Access and the second s		
	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost	
	25-5-11 or Equivalent	Organic Fertilizer	1200 Bags	Soft	\$14,00/	50# \$14,00/g \$ 16,800.00	
	5-10-15 or Equivalent		120 Bags	\$0#	50# \$1315/bg \$ (,578	872) ^{\$}	
	Dolimitic Lime or Equivalent		360 Bags	きい	S. Dalbag	QO S) \$	
	Garlon *3A or Equivalent	Triclopyr 44.4% Tyce 1a * Jane 12 rate	100 Gals	1652XZ	2x25g1 1890/gal	200'b s	
	Manicure 6FL or Equivalent	Chlorothalonii 54.0% Eho 720	25 Gals	165 ZXZ	2x2.591 \$ 42/91	0501 \$	
i	Top Choice Insecticide or Equivalent	Fipronil 0.0143%	100 Bags	5年	\$ \$125/bag \$	s 12,500	
	Simazine 4L or Equivalent	Simazine 42.1%	5 Gals	ZXZ Sgl	\$16,50/9]	2x25gi \$16,50/gl \$ 82.50	
	Reward Landscape/ Aquatic herbicide or Equivalent	Diquat 37.3%	20 Gals	222.591	20 Gals 272.59/ \$ 43/91	\$ 80 b	
	Spectacle			2x19i	2x191 \$1628,50/91	€9	
	Foam Marker	Foam 100% Align	15 Gals	yxigl	4x191 \$43.00/91 \$ 645	s 645	
	Primo Maxx or Equivalent	Trinexapac-ethyl 11.3% ——Nex	20 Gals	Zxioi	20 Gals 2x101 \$145/91	\$ 29,00	

Page 30 of 36

Agricultural Chemicals

RFB No. 18-0046

Quinstartud

Agricultural Chemicals

Page 31 of 36

= 380,00

100 lbs 64/16 \$38/16

2502 \$745/ples \$ 245.00

20 Oz

Trifloxysulfuron-sodium 75.0%

Monument 75WG or Equivalent Drive 75DF or

32.

Quinclorac 75%

Equivalent

33.

-0046		Unit Unit Extended Size Cost Cost	00.002h \$ 16/12\$ 1652XI	6.816 \$72.65 8 72.013	\$	00.000) \$ 16/28\$ 161Xh	es	502 15.78/502 \$ 631.20.00	OD . 052 12/ \$ 16/65.454 165.5X2	802 \$5.0%2 \$ 250.00	1.33 or \$5000/both \$ 3,360.00
LS FB No. 18 se per item		Est. Qty.	200 7 Gals	200 (5 Lbs	50 Gals	2 Gals	200 Oz	500 Gals	50 Oz	80 Oz
AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.	Helena Chemical	Active Ingredients	Glyphosate (for aquatic vegetation)	Glyphosate 73.3%; Diquat dibromide 2.9%	Acephate 75.0%	Bifenthrin 7.9%	Pyraclostrobin 23.6%	Dithiopyr 40%	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	Metasulfuron 60.0%	Halosulfuron-Methyl 75.0%
	Vendor Name: 14e/e/1	Product Name	Rodeo or Equivalent	Roundup Quick Pro or Equivalent	Lesco-Fate or Equivalent	UP-Star Gold or Equivalent	Headline or Equivalent	Dimension Ultra or Equivalent	Trimec 992 or Equivalent	Manor 60DF or Equivalent	Sedge Hammer or Equivalent
	Vende	Item No.	23.	24.	25.	26.	27.	28.	29.	30.	31.

Agricultural Chemicals

RFB No. 18-0046

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

Vendor Name:

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
34.	Celsius WG	Thiencarbazone-methyl8.7% Iodosulfuron-methyl-s1.9% Dicamba 57.4%	100 lbs	200(XS	100 lbs & 100 & \$100/1002	e,000'0/
35.	Crosscheck Plus	Bifenthrin 7.9%	300 bags	P4425	\$18.78/bag	8181818 \$ 5,626,00
36.	Liquid Iron	Tendax Tuf Nectur	50 Gals	ps:1×2	#7.59/gal	50 Gals 2X2.59 #7.59gal \$ 375.00
37.	Spreader Sticker/ Surfactant	Induce	20 Gals	222.5	\$ 22/grd	20 Gals 22,5 \$ 22/grt \$ 440 00
38.	Spray Tank Cleaner	Wipeat Tank Cleaner	50 Gals	h l'bixh	35/ ga	50 Gals 4x191 435/ gal \$ 1750.00
39.	Sevin 4F or Equivalent	Carbaryl 43.0%	300 Gals	1652XZ	16/65/58	30,059,01 8 16/258 185 2x2
40.	G-Pro 2.32% or Equivalent	Chlorpyrifos 2,32% (Labeled for Recreational Areas)	80 Bags			\$
41.	Spray Dye, Tracker Blue 2.5 Gal	Omni Blue Spray Indicator	100 Gals	18:2%	15/521	2x2.5g1 \$25/91 \$ 2500.00
		PARK SERVICES GRAND TOTAL \$ /63,239	GRA	VD T(OTAL	\$ 163,234

AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: /klend Chemial

Ifem	Product	Active Ingredients	Hat	Init	Unit	Extended
No.			Qty.	Size	Cost	Cost
_;	Three Way	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine	500 Gals	122591	272.5gl 824.50/41	\$ (7,750,00
	Selective Herbicide	salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%			,	
2.	Chelated Iron Plus 12-0-0	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals	2x2.5	2x25 750/91 8 37.50	\$ 37.50
3.	Induce		50 Gals	2x25g1	16/2Z\$	50 Gals 2x25g1 \$ 1,100° \$
4.	Herbicide, Three-Way Ester II	Battleship II	30 Cs	12X7.5ql	2X7.59 61.09g1	00'051'b s
5.	Herbicide, Revolver	<u> </u>	30 Cs	#19018	87 of the \$577/644e	\$ 577/bayle
6.	Fertilizer, Lime Pellitized		120 Bags	\$0\$	\$5.00/lag	°9,009 §
7.	Fertilizer, Mulch 70/30		80 Bags))	→
8.	Target 6.6 (MSMA)	Monosodium Acid Methanearsonate (MSMA) 51.0%	10 Gals	1225j	#28.59gl	10 Gals 22531 #28.5491 \$ 28500
9.	24-2-11	25-5-11 50% pt.St.u , 2%Fe Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags	#05	[c]/0:1-1	20# \$14.00/lag \$ 16,800.00
10.	Pre-m 0.86% 0-0-7	Pendimethalin 0.86% Fertilizer	700 Bags		bog/shiba	8,210,00 8 pagky.Pa
11.	Pre-m 0.86% 25-2-5	Pendimethalin 0.86%	700 Bags	\$0\$	\$13.95/2	\$1395hg \$ 9,765.00

Page 33 of 36

Agricultural Chemicals

RFB No. 18-0046

PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

Helena Chemical Vendor Name:

Itam	Itam Product	A ctive Ingredients	Het	Ilnit	Imit	Fytended
No	Nome			Circ	Cost	Cost
700	Manne			2710	CUST	Cust
			200	1.81h	6.81h \$72/50	\$ 72,001
12.	Roundup Quick Pro	Glyphosate 73.3%; Diquat dibromide 2.9%	Gals	Ç 5.≱		gr() 01
			200	Jun (2)	10/10	\$ 110 000
13.	Rodeo	Glyphosate (for aquatic vegetation)	Gals	165030	accide a cigal	4,000
			120	1	-	₩
14.	Fertilizer, 13-13-13		Bags	\		
			200	100	1-1011104	120 1 8 1/6/11 CM 1. 200
15.	Trimec 992	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	Gals	16000	16 hs w	1420
	Spreader Sticker/	<i>†</i>		, ;	张7113	\$ (170
16.	Surfactant	Indice	20 Gals	20 Gals CKU3 ~ 4/9	5/2/	460
	Aquatic Adjuvant Non-	Con Chall	200	12/5/	12/5/12/12/12	\$ 17001.8
17.	Ionic Surfectant	いましょう	Gals	100 m	16/01	7000
						7.
		PUBLIC WORKS GRAND TOTAL \$ /8,272,5°	GRA GRA	ND I	OTAL	\$ 18,272.50
						•

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If certified as a DBE or WBE, list the certifying agency:

*** COMPLETE THESE PAGES AND RETURN WITH BID *** Agricultural Chemicals

RFB No. 18-0046

Page 34 of 36

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706-653-4105, Fax 706-225-3033 BidLine 706-653-4536 www.columbusga.org

April 20, 2018

ADDENDUM NO. 1

Agricultural Chemicals (Annual Contract) RFB No. 18-0046

Proposals should include ackr	knowledgement of receipt for all Addenda:	
Authorized Initials:	Firm: Helena Chemical Company	

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. <u>DUE DATE EXTENSION</u>

The due date is extended; sealed bids are due no later than 2:30 PM on Wednesday, May 16, 2018.

II. ACKNOWLEDGEMENT

Indicate that your company has received this Addendum in the appropriate areas and include with sealed Bid. Failure to acknowledge receipt of this addendum may render your Bid "Incomplete".

Andh NICLE A Dams Andrea J. McCorvey Purchasing Manager

FORM B

SOLICITATION ID: RFB NO. 18-0046

AGRICULTURAL CHEMICALS

(ANNUAL CONTRACT)

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS INDICATED BY "X"

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

	Required Coverage(s)	Limits (Figures denote minimums)	Bidders Limits/Response
X	Employer's Liability	STATUTORY REQUIREMENTS	2,000,000
X	Comprehensive General Liability: 2. General Liability	ALL LEW COST DAMP	60-4
	Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	5 Maggregate
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$2M accurrence \$5M aggregate
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	Selfunsure for first 3million - Excess covers above
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	\$2 M Occurrence \$5M aggregate
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non-ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	\$3MuinCSL
	Other:		
	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	\$5Million

	Required Coverage(s)	Limits	Bidders
		(Figures denote minimums)	Limits/Response
	10. Personal and Advertising Injury	\$1 Million each offense, \$1	
	Liability	Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full	
		amount of contract	
	18. XCU (Explosive, Collapse,		
	Underground) Coverage		
	19. USL&H (Long Shore Harbor		
	Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment	\$2 Million per occurrence/claim	
	Liability		
X	22. Carrier Rating shall be Best's Rati	ng of A-VII or its equivalents	Ves
X	23. Notice of Cancellation, non-renew	al or material change in coverage	
	shall be provided to City at least 30 day	ys prior to action.	Yes
X	24. The City shall be named Additiona	al Insured on all policies	Ves
X	25. Certificate of Insurance shall show	Bid Number and Bid Title	Ves
	26. Pollution:	\$2 Million per occurrence/claim	

^{*}If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the <u>Bidders Limits/Response</u> column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements and provide the required
Certificate(s).
BIDDER NAME: Helping Chemical Company
AUTH. SIGNATURE:

***COMPLETE THIS PAGE AND RETURN WITH BID ***

EXHIBIT D Agricultural Chemicals (Annual Contract) Helena Chemical Company Clarification Documents

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706.225-4087, FAX 706.225.3033 BIDLINE 706.653.4536 www.columbusga.org

July 25, 2018

Mr. Nick Adams Helena Chemical Company 3211 Shawnee Industrial Way, Suite 100 Suwanee, GA 30024

Re: RFB No. 18-0046 – Agricultural Chemicals (Annual Contract)

Dear Mr Adams:

Thank you for your submittal in response to the referenced Request for Bids. During analysis of the bid responses, the Purchasing Division perceived inconsistencies among vendor responses, which have caused a delay to the evaluation and recommendation process. To ensure the user-Department(s) make fair, comparative and cost-effective choices, vendors are required to provide pricing in accordance with the unit of measure specified in the bid. The unit pricing provided by your company for the items shown below did not meet the unit of measure specifications. Therefore, complete the Per Specified Unit of Measure column in the table below to provide updated pricing as specified. (Please note: The pricing must still equate to the extended cost already bid, new pricing will not be accepted.)

No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit
2.	Three-Way Ester II or Equivalent	30 cs	61.00/gal	9,150.00	\$ (case)
5.	Revolver or Equivalent	30 cs	577.00/btl	577.00	\$ (case)

Vendor Signature	Print name of signatory	Date

Additionally, per the attached Bid Form, your firm has listed Induce on line 37 (Parks & Recreation) and lines 3 and 16 (Public Works) however, it is priced as \$22.00 per gallon and \$21.00 per gallon. Please confirm which price is correct.

Your written response is requested no later than 5:00 PM on Friday, July 27, 2018. Please forward your response to the attention of Heather Scheuttig at email hscheuttig@columbusga.org or fax number 706.225.3033.

Sincerely,

Andread McCorvey Purchasing Manager

Attachment

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340 COLUMBUS, GEORGIA 31902-1340 706,225-4087, FAX 706,225,3033 BIDLINE 706,653,4536 www.columbusga.org

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ì	KS & RECREATION Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit	2006 15
	Three-Way Ester II or Equivalent	30 cs	61.00/gal	9,150.00	\$ 305/(54))case) #	a casi
5.	Revolver or Equivalent	30 cs	577.00/btl	577.00	\$2,308 (case)	

Vendor Signature

Print name of signatory

Date

Additionally, per the attached Bid Form, your firm has listed Induce on line 37 (Parks & Recreation) and lines 3 and 16 (Public Works) however, it is priced as \$22.00 per gallon and \$21.00 per gallon. Please confirm which price is correct.

Your written response is requested no later than 5:00 PM on Friday, July 27, 2018. Please forward your response to the attention of Heather Scheuttig at email hscheuttig@columbusga.org or fax number 706,225.3033.

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Sincerely,

Andread McCorvey Purchasing Manager

Attachment

COLUMBUS CONSOLIDATED GOVERNMENT CONTRACT ROUTING MEMORANDUM

DATE:

September 6, 2018

SUBJECT: Agricultural Chemicals (Annual Contract) - RFP No. 18-0046

FROM:

Heather Scheuttig, Purchasing Division

Please route for appropriate signatures the two (2) copies of the attached contract with Howard Fertilizer and Chemical Company, Inc. The firm will supply agricultural chemicals on an "as needed" basis.

The initial term of this contract shall be for two years with the option to renew for three additional twelve-month periods. Contract renewal shall be contingent upon the mutual agreement of the City and the Contractor.

Funds are budgeted each fiscal year for this ongoing expense: General Fund – Parks & Recreation Park Services - Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund -Parks & Recreation - Park Services - Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund – Public Works–Sewer Maintenance - Horticulture/ Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund -Public Works - Right of Way Maintenance - Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Council authorized this contract per Resolution No. 318-18; dated August 28, 2018 (copy is attached).

Signatories	Signatures Required (No initials please)	Date
Purchasing Division Manager Signature of Approval	Adef no Gran	9/6/18
City Attorney: Signature required on Contracts	Form Approved: COF, City Attorny	9/6/18
City Manager: Signature required on Contracts	Assol Husby	9/7/18
Clerk of Council: DLD. Signature Required on Contracts & Attest/Seal	Lindself Glober	09/7/18
Buyer: Process / Distribute	Achous Strategies Strategies	9 10 18

After all signatures have been applied, please contact Purchasing Division (ext - 3071) for distribution.

CONTRACT

THIS CONTRACT, executed this <u>Thiday of September</u> 2018, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and Howard Fertilizer and Chemical Company, Inc., hereinafter called the "Contractor"

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

- 1. That the Contractor met all proposal requirements and was evaluated responsive for providing **Agricultural Chemicals (Annual Contract)**, per **RFB No. 18-0046**, and was awarded the Contract by Columbus City Council on Tuesday, August 28, 2018, Resolution No. 318-18, for the initial term of two years, with the option to renew for three (3) additional twelvementh periods, for furnishing the same in accordance with the specifications prepared by the City and the submittal of the Contractor.
- 2. The Contractor will, at its own cost and expense, furnish all labor, materials, and equipment required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the City's Business Requirements, the City's Request for Bids, dated April 13, 2018 (and all addenda thereto), the Contractor's submittal dated May 16, 2018 and the bid clarification documents which are attached hereto as exhibits "A", "B", "C" and "D" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.
- 3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

A RESOLUTION NO. <u>3 18 - 18</u>

C·m·08·28·18(4)(E) 3 18·18

A RESOLUTION AUTHORIZING THE PURCHASE OF AGRICULTURAL CHEMICALS FROM HELENA CHEMICAL COMPANY (SUWANEE, GA), HOWARD FERTILIZER AND CHEMICAL (THOMASVILLE, GA), DELTA LANDSCAPE SUPPLY (NORCROSS, GA), AND SITE ONE LANDSCAPE (CLEVELAND, OH) ON AN "AS NEEDED" BASIS FOR THE ESTIMATED COMBINED ANNUAL CONTRACT VALUE OF \$ 408,023.45.

WHEREAS, the contractors will provide agricultural chemicals to be used by Parks and Recreation to maintain athletic turf and Public Works to maintain City right of ways; and,

WHEREAS, the contract term shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to purchase agricultural chemicals from Helena Chemical Company (Suwanee, GA), Howard Fertilizer and Chemical (Thomasville, GA), Delta Landscape Supply (Norcross, GA), and Site One Landscape (Cleveland, OH) for the estimated combined annual contract value of \$408,023.45. Parks and Recreation has budgeted \$64,000.00 each fiscal year for this ongoing expense: General Fund — Parks & Recreation — Park Services — Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund — Parks & Recreation — Park Services — Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund — Public Works—Sewer Maintenance — Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund — Public Works — Right of Way Maintenance — Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the day of August 2018 and adopted at said meeting by the affirmative vote of paembers of said Council.

Councilor Allen voting	YES.
Councilor Baker voting	YES .
Councilor Barnes voting	YES
Councilor Davis voting	ABSENT .
Councilor Garrett voting	YES .
Councilor House voting	YES
Councilor Huff voting	YES
Councilor Thomas voting	YES_
Councilor Turner Pugh voting	YES .
Councilor Woodson voting	YES .

Teresa Pike Tomlinson, Mayor

Lindsey Glisson, Deputy Clerk of Council

FORM F

CONTRACT SIGNATURE PAGE AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

Alotton W. Clamo	By: 12 5-15-
Witness as to the signing of the contract	Signature of Authorized Representative Date
Withess as to the signing of the contract (Corporate seal, if applicable)	PHT IRWIN ACCOUNT MINNED Print Name and Title of Signatory Company: Howith FEATILIZER +CHE
Company Ordering Address	Company Payment Address
HOWARD FEFTILIZER YCHEMICHE	POBOY 97826
323 INDUSTRIA BLUD	DALLAS TX 75397
THOMPSUINE OA, 31792' Contact: PAT IRWIN	Contact:
Contact Email Plawin & Howard FERT.com	
TelephoneFax <u>860-893-9844</u> 850-202-6339	Telephone:Fax
CONSOLIDATED GOVERNM	ENT OF COLUMBUS, GEORGIA
Accepted this T day of Sept. 2018	APPROVED AS TO LEGAL FORM:
Isajah Hugley, City Manager	Clifton C. Fay, City Attorney
ATTEST: SUPODLY SILVED	By Resolution No. 318-18

EXHIBIT A

Columbus Consolidated Government
Agricultural Chemicals
(Annual Contract)
Business Requirements

RFB No. 18-0046

FORM D

Form W-9
(Pev November 2017)

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Department of the Tremus; blancal Revenue Service	av/FormW91	or instruct	ions and t	he latest in	formation.		send to the IRS.
HOWARD FERTIL	12ER	kreet do not	HE/		AL C	$Q_{\cdot, \cdot }$	NO.
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2 Check unpropose box for federal tax characteristics of following seven boxes 5 Undividualisate propositions: 6 Corporation	in person who		ntered on in	777	Ny one of the	cancin en	commissation apply only to titles, not lind viduals; see as on page 1)
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\$ 9306 S. ORAL	16E	AVE	- -			ro to equation	i edustra-dil
OPLANDO, FL	328	09					
7.1 ed account exember(s) here explicited.							
Fairt Taxpayer Identification Number Enter your TIN at the appropriate box. The 1th provided in		A Abras Asi	an on itse	to more	1 Secial sa	cilrity remb	Δ1-
backup withholding. For Individuals, this is generally your	etxc≥al securat	y number (SSM), How	ever, for a	T T		
resident alem, sole proprietor, or disregarded entity see it entities, it is your employer identification number (ERI), it y TIN, later.	se instruction sou do not ha	s for Part I. ve a numbe	later, how a ir see Flow	ito get u		. "	
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Number To Give the Requester for guidelines on whose m	umber to ente	ŧ.					
Part II Certification							
Under penalties of penury, I certify that:						•	
 The number shown on this form is my correct taxpayer. I am not subject to backup withholding because: latt ar Service (IRS) that I am subject to backup withholding at no longer subject to backup withholding, and 	n axampt for	n zackup v	athholding.	or ibi i hav	e not been r	etified by t	he Internal Revenue
3. Lam a U.S. citizen or other U.S. person (defined) below)							
4. The FATCA code(s) entered on this form (if any) indicates Certification instructions, You must cross out from 8 above						inet entenais	to the contract of the contrac
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General Instructions		+ Fo t∪nc		ll¥ idividena	is, motuding	those from	stocke or mutual
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TIN Matching allows you to verify your Payee da	ta against the IRS TIN Matching database	e to verify if yo	ou have the
Sovos can take care of your mismatched T	INs & B-Notices	Mismatch	ed Records
Sovos offers the ability to automatically mismatched payees and request corrected directly to you, and the W-9/B-Notice solicit. File Manager. Depending on your subscription	d information. The responses come ations are saved for your reference in	TIN	Nam
Print & Mail W-9 Solicitations	Print & Mail B-Notices	A PACIFICATION OF THE STATE OF	
The W9 Solicitation button has been disabled as you have already sent your solicitations,			

Back to Home

Verify Payee

Download i

Copyright Sovos Compliance Systems, Inc. 1996-2018 All rights reserved. Powered by the Sovos Enterprise Platform.

Name: howard fertilizer

TIN Status: PASS
OFAC Check: PASS
DMF Check: PASS

POSTER # 4926

2018

CITY OCCUPATION TAX POSTER



CITY OF THOMASVILLE THOMAS COUNTY, GEORGIA

HOWARD FERTILIZER & CHEMICAL 323 INDUSTRIAL BLVD THOMASVILLE, GA

HAS BEEN REGISTERED BY THE CITY OF THOMASVILLE AS HAVING PAID THE CITY OCCUPATION TAX ON THE FOLLOWING BUSINESS:

GENERAL WAREHOUSE & STORAGE

FOR THE YEAR 2018
AND IS HEREBY FURNISHED THIS OCCUPATION TAX POSTER

OFFICE OF THE
TAX COORDINATOR



CERTIFICATE OF LIABILITY INSURANCE

3/31/2019

DATE (MM/DO/YYYY) 5/9/2018

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 Lockton Companies

	3280 Peachtree Road NE, Suite #250 Atlanta GA 30305 (404) 460-3600				PHONE (A/C, No, Ext): (A/C, No): E-MAIL ADDRESS:					
		(404) 400-3000				IN:	NAIC#			
						insurer a : Aspen	10717			
NSURED Howard Fertilizer & Chemical Company, Inc.						INSURER B : Start In	demnity & l	Liability Company	38318	
42:	425231 8306 S. Orange Avenue				INSURER C: *** SE					
Orlando FL, 32809-7853										
INSURER E:										
INSURER F:								,		
ÇOI	COVERAGES CERTIFICATE NUMBER: 15368021 REVISION NUMBER: XXXXXXX									
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERI INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH TI CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERM EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									T TO WHICH THIS	
NSR .TR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	^	ommercial general liability Claims-made X occur Pollution Legal Liab	N	۲	ERAH84V18	3/31/2018	3/31/2019	DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY	s 1,000,000 s 300,000 s 25,000 s 1,000,000	
,		AGGREGATE LIMIT APPLIES PER:						ļ	\$ 2,000,000	
	X P	DLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	0	THER:	<u> </u>					COMBINED SINGLE LIMIT	5	
B		MOBILE LIABILITY			1000198907171	3/31/2018	3/31/2019		\$ 1.000.000	

ANY AUTO BODILY INJURY (Per person) \$ XXXXXXX OWNED AUTOS ONLY SCHEDULED \$ XXXXXXX BODILY INJURY (Per accident) AUTOS NON-OWNED AUTOS ONLY PROPERTY DAMAGE Х Х s XXXXXXX AUTOS ONLY s XXXXXXX UMBRELLA LIAB X Χ OCCUR Ν EXAH84W18 3/31/2018 3/31/2019 EACH OCCURRENCE \$ 10,000,000 EXCESS LIAB CLAIMS-MADE AGGREGATE \$ 10,000,000 \$ XXXXXXXX DED RETENTION \$ WORKERS COMPENSATION X PER STATUTE 100000272701 3/31/2018 3/31/2019 AND EMPLOYERS' LIABILITY AND EMPLOYERS CHABILITY
ANY PROPRIETOR/PARTNER/EXECUTIVE
OFFICER/MEMBER EXCLUDED?
(Mandatory in NH)
If yes, describe under
DESCRIPTION OF OPERATIONS below E.L. EACH ACCIDENT \$ 1,000,000 NIA E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 Any/All Leased: \$300K Aggregate Contractors Equipment: UM00022694MA17A 3/31/2018 3/31/2019 N Rented/Borrowed Equipment: \$100K/Any One Item

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Auto Physical Damage Comp/Collision Deductibles: \$2,000 / \$2,000.

CERTIFICATE HOLDER	CANCELLATION See Attachment
15368021 The City of Columbus Purchasing Division PO Box 1340 Columbus GA 31902-1340	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Coldinbus GA 31902-1340	AUTHORIZED REPRESENTATIVE

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EXHIBIT C

Agricultural Chemicals (Annual Contract)

Howard Fertilizer and Chemical Company, Inc. Submission

FORM A

BIDDER'S RESPONSE PAGE

AGRIGULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

PARK SERVICES

Bidder will provide the following services:

	Specialist/Consultant with technical experience in applying mical/liquid fertilizer.	Yes No
	f Specialist will provide on-going follow up service and technical owing:	advice, to include the
Α.	In-service training of Columbus Parks & Recreation staff	YesNo
В.	Take soil samples	Yes No
C.	Compete laboratory analysis of soil sample	Yes No
D.	Present soil analysis as specified under vendor requirements	Yes No
Ε.	Formulation of fertilizer requirement for each field	Yes No No
F.	Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product	Yes No
G.	Provide at least six (6) on-site inspections per year as requested	Yes No

Vendor Name: HOWARD FEATILIZER + CHEMICAL

FORM E

BID FORM

AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

IMPORTANT INFORMATION: PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "incomplete". Use the following check-list to verify the items are included in sealed bid: | Bid Form | Bidder's Qualifications | Proof of Insurance | E-Verify | Material Safety Data Sheets | Contract Signature Page | Addenda | | Initial below to acknowledge receipt of the following addenda (if any): | Addendum No. 1 | Addendum No. 2 | Addendum No. 3 |

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: HOWARO FERTILIZER + CHEMICAL

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
<u>.</u>	Three Way Selective Herbicide or Equivalent	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%, Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	500 Gals	GAL	\$23.00	s 11,500

RFB No. 18-0046

Agricultural Chemicals

Page 28 of 36

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: Howard FERTILIZER & CHEMINA

Item No.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
2.	Three-Way Ester II or Equivalent	Isooctyl (2-ethylhexyl) Ester of 2-Methyl-4-Chlorophenoxyacetic Acid*	30 Cs	GAL	\$ 63.80	\$ \$ 9,570 _.
3, * }	Chelated fron Plus 🐔 . 12-0-0 or Equivalent	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals	GAL.	\$7.69	\$ 38.45
4.	Pellitized Lime of A		120 Bags		\$ 4.83	\$ 579.60
5.	Revolver or Equivalent	Foramsulfuron2.34%	30 Cs	870Z	\$577	\$ 69,240
,).	Pre-m 0.86% 0-0-7 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags	50H	\$ 12.12	s 8,484.00
· .	Pre-m 3,3 EC 0.86% 0-0-7 or Equivalent	Pendimethalin 37.4% Liquid	100 Gal	GAL	\$34.78	s 3,478
; ;	Pre-m 0.86% 25-2-5 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags	50#	1524	\$ 10,668.00
) , ^ `.	24-2-11 or Equivalent	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags	50#	\$13.74	\$16,488.00
0	18-24-12 or	25% poly plus sulfur coated urea	20 Bags	50 H	i I	\$ 270.60
1.	20-1-5 or Equivalent	Organic Fertilizer	20 Bags	50#	8.89	\$ 177.80

RFB No. 18-0046

Agricultural Chemicals

Page 29 of 36

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

Vendor Name: Handa D FENTILIZER & CHEMINA

Item No.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
نده 23.	Rodeo or Equivalent	Glyphosate (for aquatic vegetation)	200 Gals	GAL	\$ 50,78	\$ 10,156.00
* 24.	Roundup Quick Pro or Equivalent	Glyphosate 73.3%; Diquat dibromide 2.9%	200 Gals	6.81h	\$61.92	\$ 12,384.00
25.	Lesco-Fate or Equivalent	Acephate 75.0%	5 Lbs	1b.	6.99	\$ 34.95 :
26.	UP-Star Gold or Equivalent	Bifenthrin 7,9%	50 Gals	6AL	\$ 28.50	\$ 1,425.00
27.	Headline or Equivalent	Pyraclosfrobin 23.6%	2 Gals	GAL	\$394	\$ 788
28.	Dimension Ultra or Equivalent	Dithiopyr 40%	200 Oz	02.	\$3.13	\$ 626.00
29.	Trimee 992 or Equivalent	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	500 Gals	GAL	\$23	\$ 11,500
30.	Manor 60DF or Equivalent	Metasulfuron 60.0%	50 Oz	07.	4.47	\$ 223.50
31	Sedge Hammer or Equivalent	Halosulfuron-Methyl 75.0%	80 Oz	1.33ez	72.53	s 4,362.70
32.	Monument 75WG or Equivalent	Trifloxysulfuron-sodium 75.0%	20 Oz	25.	220	\$ 5,016
33,	Drive 75DF or Equivalent	Quinclorae 75%	100 lbs	16.	UG. 94	s 4, 694

RFB No. 18-0046

Agricultural Chemicals

Page **31** of **36**

AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

Vendor Name: //ownan FEET/LIZER + CHEMICAL

Item No.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
1.	Three Way Selective Herbicide	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	500 Gals	6AL	23	11,500 00
2,	Chelated Iron Plus 12-0-0	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals	GHL	7.69	s 38.45
3.	Induce		50 Gals	GML	21.58	s 1,079
1.	Herbieide, Three-Way Ester II		30 Cs	GAL	63.80	\$ 9670
5.	Herbicide, Revolver		30 Cs	8702	577	\$ 69,240
S. ";	Fertilizer, Lime Pellitized		120 Bags	404	4.83	\$ 579,6
7	Fertilizer, Mulch 70/30		80 Bags		V/A	\$
}.	Target 6.6 (MSMA)	Monosodium Acid Methanearsonate (MSMA) 51.0%	10 Gals	GAL	24.99	s 241.90
)_	24-2-11	Fertilizer, 40% poly plus sulfer coated urea 6% Fe **	1200 Bags	50#	13.74	s 16, 488
0.	Pre-m (),86% ()-0-7	Pendimethalin 0.86% Fertilizer	700 Bags	50#	12.12	s 8,484
1.	Pre-m 0.86% 25-2-5	Pendimethalin 0.86%	700 Bags	SOH	15.24	S 16,668

RFB No. 18-0046

Agricultural Chemicals

Page 33 of 36

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 Телтн Street, P. O. Box 1340 Columbus, Georgia 31902-1340 706-653-4105, Fax 706-225-3033 BidLine 706-653-4536 www.columbusga.org

April 20, 2018

ADDENDUM NO. 1

Agricultural Chemicals (Annual Contract) RFB No. 18-0046

Proposals should include acknowledgement of receipt for all Addenda:

Authorized Initials:

Firm: HOWARD FERTILIZER + CHEMICAL

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. <u>DUE DATE EXTENSION</u>

The due date is extended; sealed bids are due no later than 2:30 PM on Wednesday, May 16, 2018.

II. ACKNOWLEDGEMENT

Indicate that your company has received this Addendum in the appropriate areas and include with sealed Bid. Failure to acknowledge receipt of this addendum may render your Bid "Incomplete".

Andrea J. McCorvey Purchasing Manager

Addendum No. 1 Page (of) RFB No. 48-0046

EXHIBIT D

Agricultural Chemicals (Annual Contract)

Howard Fertilizer and Chemical Company, Inc. Clarification Documents

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706.225-4087, FAX 706.225.3033 BIDLINE 706.653.4536 www.columbusga.org

July 25, 2018

Mr. Pat Irwin Howard Fertilizer and Chemical 323 Industrial Blvd. Thomasville, GA 31792

Re: RFB No. 18-0046 – Agricultural Chemicals (Annual Contract)

Dear Mr. Irwin:

Thank you for your submittal in response to the referenced Request for Bids. During analysis of the bid responses, the Purchasing Division perceived inconsistencies among vendor responses, which have caused a delay to the evaluation and recommendation process. To ensure the user-Department(s) make fair, comparative and cost-effective choices, vendors are required to provide pricing in accordance with the unit of measure specified in the bid. The unit pricing provided by your company for the items shown below did not meet the unit of measure specifications. Therefore, complete the <u>Per Specified Unit of Measure</u> column in the table below to provide updated pricing as specified. (*Please note: The pricing must still equate to the extended cost already bid, new pricing will not be accepted.*)

PAR	KS & RECREATION				
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit of Measure
2.	Three-Way Ester II or Equivalent	30 cs	63.80/gal	9,570.00	\$ (case)
5.	Revolver or Equivalent	30 cs	577.00/87 oz	69,240.00	\$ (case)

Vendor Signature Print name of signatory Date

Your written response is requested no later than 5:00 PM on Friday, July 27, 2018. Please forward your response to the attention of Heather Scheuttig at email hscheuttig@columbusga.org or fax number 706.225,3033.

Sincerely

Andrea J. McCorvey Purchasing Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706.225-4087, Fax 706.225.3033 BIDLINE 706,663,4536 www.columbusga.org

July 25, 2018

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Re: RFB No. 18-0046 - Agricultural Chemicals (Annual Contract)

Dear Mr. Irwin:

Thank you for your submittal in response to the referenced Request for Bids. During analysis of the bid responses, the Purchasing Division perceived inconsistencies among vendor responses, which have caused a delay to the evaluation and recommendation process. To ensure the user-Department(s) make fair, comparative and cost-effective choices, vendors are required to provide pricing in accordance with the unit of measure specified in the bid. The unit pricing provided by your company for the items shown below did not meet the unit of measure specifications. Therefore, complete the Per Specified Unit of Measure column in the table below to provide updated pricing as specified. (Please note: The pricing must still equate to the extended cost already bid, new pricing will not be accepted.)

PAR	KS & RECREATION	Per				
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Specified U Measu	
2.	Three-Way Ester II or Equivalent	30 cs	63.80/gal	9,570.00	\$ 319.00	(case)
5,	Revolver or Equivalent	30 es	577.00/87 oz	69,240.00	\$ 2,308	(case)

Your written response is requested no later than 5:00 PM on Friday, July 27, 2018. Please forward your response to the attention of Heather Scheuttig at email hscheuttig@columbusga.org or fax number 706,225,3033,

Sincerely

Andrea J. McCorvey Purchasing Manager

Page 1 of 1

COLUMBUS CONSOLIDATED GOVERNMENT CONTRACT ROUTING MEMORANDUM

DATE:

September 13, 2018

Carlot Carlo

SUBJECT: Agricultural Chemicals (Annual Contract) - RFP No. 18-0046

FROM:

Heather Scheuttig, Purchasing Division

Please route for appropriate signatures the two (2) copies of the attached contract with SiteOne Landscape Supply. The firm will supply agricultural chemicals on an "as needed" basis.

The initial term of this contract shall be for two years with the option to renew for three additional twelve-month periods. Contract renewal shall be contingent upon the mutual agreement of the City and the Contractor.

Funds are budgeted each fiscal year for this ongoing expense: General Fund – Parks & Recreation - Park Services - Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund -Parks & Recreation - Park Services - Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund - Public Works-Sewer Maintenance - Horticulture/ Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund -Public Works - Right of Way Maintenance - Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Council authorized this contract per Resolution No. 318-18; dated August 28, 2018 (copy is attached).

Signatories	Signatures Required (No initials please)	Date
Purchasing Division Manager Signature of Approval	Glef McCantry	9/13/18
City Attorney: Signature required on Contracts	Form Approved: Cet, City Attorney	9/17/18
City Manager: Signature required on Contracts	March Hordan	9/22/18
Clerk of Council: Dep. Signature Required on Contracts & Attest/Seal	Lindsey Slisser	9/24/18
Buyer: Process / Distribute	Aug School Burghaging Birdalan	9/24/18

After all signatures have been applied, please contact Purchasing Division (ext - 3071) for distribution.

CONTRACT

THIS CONTRACT, executed this 22 day of september 2018, by and between the Consolidated Government of Columbus, Georgia, hereinafter called the "City", and SiteOne Landscape Supply, hereinafter called the "Contractor"

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

- 1. That the Contractor met all proposal requirements and was evaluated responsive for providing **Agricultural Chemicals (Annual Contract)**, per **RFB No. 18-0046**, and was awarded the Contract by Columbus City Council on Tuesday, August 28, 2018, Resolution No. 318-18, for the initial term of two years, with the option to renew for three (3) additional twelvementh periods, for furnishing the same in accordance with the specifications prepared by the City and the submittal of the Contractor.
- 2. The Contractor will, at its own cost and expense, furnish all labor, materials, and equipment required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the City's Business Requirements, the City's Request for Bids, dated April 13, 2018 (and all addenda thereto), the Contractor's submittal dated May 16, 2018 and the bid clarification documents which are attached hereto as exhibits "A", "B", "C" and "D" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.
- 3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

A RESOLUTION NO. <u>3 1 8</u> - 18

C·M·08·28·18(4)(E) 3 18·18

A RESOLUTION AUTHORIZING THE PURCHASE OF AGRICULTURAL CHEMICALS FROM HELENA CHEMICAL COMPANY (SUWANEE, GA), HOWARD FERTILIZER AND CHEMICAL (THOMASVILLE, GA), DELTA LANDSCAPE SUPPLY (NORCROSS, GA), AND SITE ONE LANDSCAPE (CLEVELAND, OH) ON AN "AS NEEDED" BASIS FOR THE ESTIMATED COMBINED ANNUAL CONTRACT VALUE OF \$ 408,023.45.

WHEREAS, the contractors will provide agricultural chemicals to be used by Parks and Recreation to maintain athletic turf and Public Works to maintain City right of ways; and,

WHEREAS, the contract term shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor(s).

NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to purchase agricultural chemicals from Helena Chemical Company (Suwanee, GA), Howard Fertilizer and Chemical (Thomasville, GA), Delta Landscape Supply (Norcross, GA), and Site One Landscape (Cleveland, OH) for the estimated combined annual contract value of \$408,023.45. Parks and Recreation has budgeted \$64,000.00 each fiscal year for this ongoing expense: General Fund – Parks & Recreation – Park Services – Horticulture/Landscaping Supplies, 0101-270-2100-PSRV-6727; General Fund – Parks & Recreation – Park Services – Grounds Maintenance, 0101-270-2100-PSRV-6576. Public Works has budgeted \$217,690.00 for this ongoing expense: Sewer Fund – Public Works–Sewer Maintenance – Horticulture/Landscaping Supplies, 0202-260-3210-SRWM-6727; Paving Fund – Public Works – Right of Way Maintenance – Horticulture/Landscaping Supplies, 0203-260-3120-ROWM-6727.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the day of August 2018 and adopted at said meeting by the affirmative vote of members of said Council.

Councilor Allen voting	YES:
Councilor Baker voting	YES .
Councilor Barnes voting	YES
Councilor Davis voting	ABSENT .
Councilor Garrett voting	YES
Councilor House voting	YES .
Councilor Huff voting	YES .
Councilor Thomas voting	YES .
Councilor Turner Pugh voting	YES .
Councilor Woodson voting	YES

Teresa Pike Tomlinson, Mayor

FORM F

CONTRACT SIGNATURE PAGE AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

·	
Witness as to the signing of the contract Witness as to the signing of the contract (Corporate seal, mapplicable)	By: Many 5/5/18 Signature of Authorized Representative Date My M-Vmus, June Bid Re, Print Name and Title of Signatory Company: SiteOne Landscape Supply
Company Ordering Address SiteOne Landscape Supply 1385 East 36th Street Cleveland, Ohio 44114 Contact: Bill Dut. Contact Email bids@SiteOne.com Telephone@1.321.5375 Fax 248.581-1433	Company Payment Address 24110 Notwork Pl. Chicago IL 60173-1241 Contact: Accounts Receivable Contact Email Accounts Receivable Ositeory.com Telephone: 248-588-2100 Fax
	IENT OF COLUMBUS, GEORGIA
Accepted this Iday of September 2018 Isaliah Hugley, City Manager	APPROVED AS TO LEGAL FORM: Styles Jay, Chy Attorney Clifton C. Fay, City Attorney
ATTEST: Lindsey Glisson Deputy Clerk of Council Lindsey Glisson	EXECUTION AUTHORIZED By Resolution No. 318-18

$\underline{\mathbf{EXHIBIT}\ \mathbf{A}}$

Columbus Consolidated Government Agricultural Chemicals (Annual Contract) Business Requirements

RFB No. 18-0046

Occupation Dax

City of Columbus, Georgia

Expires: December 31, 2018 Date Issued: May 30, 2018 Renew by! April 1, 2019

-icense#: 164940

SITEONE LANDSCAPE SUPPLY 1324 CONCORD BOULEVARD COLUMBUS, GA 31904-AUNTON, ROBERT SEAN Business Address:

THIS RECEIPT NOT OFFICIAL UNLESS MALOR PAID

Occupation Tax
Columbus Consolidated Government

Fee Amount \$75.00

Revenue Code 4140

Administrative Fee

Fee Type

Account #: 14336 C.O. #: CO-03-16-2152

Mailing Address:

SITEONE LANDSCAPE SUPPLY 650 STEPHENSON HIGHWAY ATTN: PAM PENDRICK TROY, MI 48083-

SITEONE LANDSCAPE SUPPLY

LANDSCAPE SUPPLIES

Allowed Activities:

Type of Occupation:

Business Name:

DOM LANDSCAPE SUPPLIES 042299

WHOLESALERS

000001



Unselles Ulexander

The above named having in accordance with the ordinance of Columbus, Georgia paid to the treasurer of said city the amounts shown above on this license, is hereby authorized to

topering all agn

OTHER MISC NONDURABLE GOODS 042299

ADMINISTRATIVE FEE

FINANCE DIRECTOR

conduct the business stated above at the address outlined above in said city, provided however, that this license is granted subject.

FORM C

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of Columbus Consolidated Government has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_76M15
Company ID Number (numerical, 4-7 digits) **See https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES to access your E-Verify Company Identification Number.
3/5/14 Date of Authorization Attack
SiteOne Landscape Supply
Name of Contractor
Agricultural Chemicals (Annual Contract); RFB No. 18-0046 Name of Project
Columbus Consolidated Government Name of Public Employer
I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on 9, 16, 201 y in Cleveland (city), OH (state).
Signature of Authorized Officer or Agent
Printed Name and Title of Authorized Officer or Agent
SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE 13th DAY OF September, 2018.
NOTARY PUBLIC Notary Public - State of Ohio
My Commission Expires: Recorded in Cuyahoga County My Commission Expires (2 - 25 - 19)

A properly completed, notarized E-Verify Affidavit must be included with scaled proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

(Rev. November 2017)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

mema	Hevenue Service Go to www.irs.gov/rommws for in			
	1 Name (as shown on your income tax return). Name is required on this line; of SiteOne Landscape Supply, LLC	to not leave this line blank		
	2 Business name/disregarded entity name, if different from above			
page 3.	3 Check appropriate box for federal tax classification of the person whose na following seven boxes.	-	_	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
ins en	Individual/sole proprietor or II C Corporation II S Corporation single-member IIC	n Li Partnership	☐ Trust/estate	Exempt payee code (if any) 5
t to	Limited liability company. Enter the tax classification (C=C corporation, S			
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification. LLC if the LLC is classified as a single-member LLC that is disregarded if another LLC that is not disregarded from the owner for U.S. federal tax is disregarded from the owner should check the appropriate box for the is disregarded from the owner should check the appropriate box for the it.	rom the owner unless the ourposes. Otherwise, a sing	owner of the LLC is gle-member LLC that	Exemption from FATCA reporting code (if any)
Sec.	☐ Other (see instructions) ►			(Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name ar	nd address (optional)
See	1385 East 36th Street 6 City, state, and ZiP code			
	Cleveland, OH 44114			
	7 List account number(s) here (optional)			
Par	Taxpayer Identification Number (TIN)			
	our TIN in the appropriate box. The TIN provided must match the name	ne given on line 1 to av	oid Social secu	rity number
	o withholding. For individuals, this is generally your social security num nt alien, sole proprietor, or disregarded entity, see the instructions for		ora	
entities	i, it is your employer identification number (EIN). If you do not have a i		ta 📙]
TIN, la	ter. If the account is in more than one name, see the instructions for line 1	Alan ano Mhat Nama	Or Employer k	fentification number
	er To Give the Requester for guidelines on whose number to enter.	. Also see what ivame i		AND THE PROPERTY OF THE PROPER
Part				
	penalties of perjury, I certify that:			
2. I am Serv	number shown on this form is my correct taxpayer identification numb not subject to backup withholding because: (a) I am exempt from bac ice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and	kup withholding, or (b)	I have not been not	tified by the Internal Revenue
	a U.S. citizen or other U.S. person (defined below); and			
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reporting	g is correct.	
you hav acquisit	eation instructions. You must cross out item 2 above if you have been no re failed to report all interest and dividends on your tax return. For real est tion or abandonment of secured property, cancellation of debt, contribution an interest and dividends, you are not required to sign the certification, b	ate transactions, item 2 ons to an individual retire	does not apply. For i ement arrangement (l	mortgage interest paid, RA), and generally, payments
Sign Here	Signature of Waly W Grons	В	nate > 4 26 18	
Gen	eral Instructions	Form 1099-DIV (div funds)	idends, including th	ose from stocks or mutual
Section noted.	references are to the Internal Revenue Code unless otherwise	•	arious types of inco	ome, prizes, awards, or gross
related	developments. For the latest Information about developments to Form W-9 and its instructions, such as legislation enacted by were published, go to www.irs.gov/FormW9.	Form 1099-B (stock transactions by broke		es and certain other
		• Form 1099-S (proce		•
	ose of Form			party network transactions) 098-E (student loan interest),
	ridual or entity (Form W-9 requester) who is required to file an tion return with the IRS must obtain your correct taxpayer	1098-T (tuition)	iorgage interest, i	vao-⊏ (sudent loai iliterest),
dentific	ation number (TIN) which may be your social security number ndividual taxpayer identification number (ITIN), adoption	• Form 1099-C (cancel	•	
axpaye	r identification number (ATIN), or employer identification number			int of secured property) irson (including a resident
	report on an information return the amount paid to you, or other reportable on an information return. Examples of information	alien), to provide your		ान्या प्राप्ताचानासु द १९५१ ० ९११
eturns	include, but are not limited to, the following. 1099-INT (interest earned or paid)			quester with a TIN, you might hat is backup withholding,

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Loggica III da 7 (SCITLO I II G	, CID. 10003 1	105000	Custonic

Search by TIN, Acct., or N

Mismatched Records

Name

TIN

Check for imported payees with non-matching TIN data and verify new payees

TIN Matching allows you to verify your Payee data against the IRS TIN Matching database to verify if you have the cor

Sovos can take care of your mismatched TINs & B-Notices

Sovos offers the ability to automatically mail the appropriate forms to your mismatched payees and request corrected information. The responses come directly to you, and the W-9/B-Notice solicitations are saved for your reference in File Manager. Depending on your subscription, additional fees may apply.

Print & Mail W-9 Solicitations

Print & Mail B-Notices

The W9 Solicitation button has been disabled as you have already sent your solicitations.

Individual TIN Lookup

Verify individual Payee Social Security and Employer ID numbers.

TIN Status: PASS
OFAC Check: PASS

Name: siteone

DMF Check: PASS

Verify Payee

Download .

Back to Home

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/15/2018

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).

this certificate does not confer rights t	o the	cert	ificate holder in lieu of s			s).			
PRODUCER MARSH USA, INC.				CONTA NAME:					
TWO ALLIANCE CENTER				PHONE (A/C, N E-MAIL	o, Ext):		FAX (A/C, No):		
3560 LENOX ROAD, SUITE 2400				E-MAIL ADDRE	SS:				
ATLANTA, GA 30326 Attn: Michelle.W.Robles@marsh.com					INS	SURER(S) AFFOR	RDING COVERAGE		NAIC#
GAWU -17-18	Bid			INSURI	RA: ACE Ameri	ican Insurance Co	mpany		22667
INSURED				INSURI	ER B : Markel Am	erican Insurance	Со.		28932
SiteOne Landscape Supply, LLC 300 Colonial Center Parkway, Suite 600				INSUR	R C : ACE Fire U	Inderwriters Insur	ance Company		20702
Roswell, GA 30076						ins Co Of North A			43575
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CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
							MED EXP (Any one person)	\$	10,000
							PERSONAL & ADV INJURY	\$	1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000
X POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000
OTHER:							Deductible:	\$	100,000
A AUTOMOBILE LIABILITY			ISAH25155518		12/23/17	12/23/18	COMBINED SINGLE LIMIT (Ea accident)	\$	2,000,000
X ANY AUTO							BODILY INJURY (Per person)	\$	
OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$	
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B X UMBRELLA LIAB X OCCUR			MKLM6MM70000033		12/23/17	12/23/18	EACH OCCURRENCE	\$	1,000,000
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	1,000,000
DED X RETENTION \$ 10000								\$	
D WORKERS COMPENSATION			WLRC64781558 (AOS)		12/23/17	12/23/18	X PER OTH-		
C AND EMPLOYERS' LIABILITY Y/N			SCFC64781583 - WI		12/23/17	12/23/18	E.L. EACH ACCIDENT	\$	1,000,000
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED? (Mandatory in NH)	N/A		WLRC64781546 CA & MA		12/23/17	12/23/18	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000
020011 1107 01 07 27 01 10 10 10 10 10 10 10 10 10 10 10 10									
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedul	e, may b	attached if more	e space is require	ed)		
Re: RFB 15-0031, Landscape Materials Columbus Cons				h respect	to the General Lia	ability coverage an	d Auto Liability as		
required by written contract, subject to the terms and condi-	tions of	the po	oficy.						
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									l
CERTIFICATE HOLDER				CANC	ELLATION				
Columbus Consolidated Government							SCRIBED POLICIES BE CA		
100 10th St. Columbus, GA 31902							REOF, NOTICE WILL E Y PROVISIONS.	E DEL	INEKED IN
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				of Mars	h USA Inc.				[
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Issued By: Molly Vorous

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ACORD 25 (2016/03)

EXHIBIT C

Agricultural Chemicals (Annual Contract)

SiteOne Landscape Supply Submission

FORM A

BIDDER'S RESPONSE PAGE

AGRIGULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

PARK SERVICES

Bido	der will provide the following services:	/	/
cher Turf	Specialist/Consultant with technical experience in applying mical/liquid fertilizer. Specialist will provide on-going follow up service and technical pwing:	Yes <u>V</u> advice, to	_ Noinclude the
	In-service training of Columbus Parks & Recreation staff	Yes	_ No _ No
	Take soil samples Compete laboratory analysis of soil sample	Yes	_ No
D.	Present soil analysis as specified under vendor requirements	Yes	No No
E. _.	Formulation of fertilizer requirement for each field Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product	Yes	_ No
G.	Provide at least six (6) on-site inspections per year as requested	Yes	<u>/</u> No
	SiteOne Landscape Supply Vendor Name:		

BID FORM AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID

notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed "Incomplete". Use the following check-list to verify By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after the items are included in sealed bid:

图id Form Ubidder's Qualifications, If Proof of Insurance 世年-Verify If Material Safety Data Sheets

上Contract Signature Page I Addenda

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 WW Addendum No. 2 Addendum No. 3

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: SiteOne Landscape Supply

Item	tem Product	Active Ingredients	Est.	Unit Unit	Unit	Extended	
No.	No. Name		Qty.	Size	Cost	Cost	
	Three Way Selective Herbicide or Equivalent	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	500 Gals	7.20	\$57.99/	*11,580.00	

AGRICULTURAL CHEMICALS

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name: SiteOne Landscape Supply

1200 50 b. #1719 br 1200 50 b. #1719 br 1200 Bags 50 b. #15201/4 100 2.50 Jr #15201/4 100 2.50 Jr #116.163 25 25 2.50 Jr #116.163 26 Gals 3.50 Jr #1148.07 20 Gals 3.50 Jr #1148.07 20 Gals 3.50 Jr #1148.07 20 Gals 3.50 Jr #30.50 15 Gals 19a . #36.50 15 Gals 2.50 Jr #30.50 Jr 30 Gals 3.50 Jr #30.50 Jr 31 Jr Jr Jr Jr Jr Jr 31 Jr Jr Jr Jr Jr Jr Jr 31 Jr Jr Jr Jr Jr Jr Jr 31 Jr Jr Jr Jr Jr Jr Jr Jr	Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
15.5-11 or Equivalent Organic Pertilizer 1200 30 4 1700 100 120	No.	Name)		Size		Cost
S-10-15 or Equivalent Color Equivalent Carlon *3.4 or What 3.4 Carlon *3.4 C	12.	25-5-11 or Equivalent	Organic Fertilizer		5018./ bee	\$17.70/be	s 21, 480.00
Dolimitic Lime or Equivalent Bags The part Figure	13.	U 5-10-15 or Equivalent			0	dig on	\$
Garlon *3A or Make 3H Triclopyr 44.4% Triclopyr 44.4% Triclopyr 44.4% 100 2.5m/l #152.m/l Equivalent Equivalent Top Choice (Hand) Fipronil 0.0143% 100 5a5m/l #116.43 Requivalent Equivalent Simazine 4L or Equivalent Wildle Diquat 37.3% Simazine 42.1% 5 Gals 5 Gals 75m/l #176.41 Reward Landscape/Aquatic herbicide or Equivalent Wildle Diquat Diquat 37.3% 5 Gals 3.5m/l #148.41 Spectacle Foam 100% Foam 100% 15 Gals 1m/l 1m/l Primo Maxx or Primo Maxx or Equivalent Trick PRE Trinexapac-etityl 11.3% 20 Gals 2.5m/l #148.41 Primo Maxx or Equivalent Trick PRE Trinexapac-etityl 11.3% 20 Gals 2.5m/l #148.41	14.	Dolimitic Lime or Equivalent			50 les fez	*2/6*	\$1,806.00
Manicure 6FL or Equivalent Chlorothalonil 54.0% Chlorothalonil 54.0% A.5 Mil. 125 Mag A.5 Mil. 125 Mag <th< td=""><td>15.</td><td>Garlon *3A or Mule? Equivalent</td><td>5H Triclopyr 44.4%</td><td></td><td>40 mg 7</td><td></td><td>09:180'9</td></th<>	15.	Garlon *3A or Mule? Equivalent	5H Triclopyr 44.4%		40 mg 7		09:180'9
Top Choice Phone Fipronil 0.0143% Fipronil	16.	Manicure 6FL or Equivalent	Chlorothalonil 54.0%		2.5 gal.	i	81,166.30
Simazine 4L or Equivalent Reward Landscape/ Aquatic herbicide or Equivalent Iri Walk Digat 37.3% Spectacle Foam Marker Primo Maxx or Equivalent TAKX PRE Trinexapac-ethyl 11.3% Simazine 42.1% Simazine	17.	Top Choice (Hance) Insecticide or Equivalent	Fipronil 0.0143%		50 lb/0		s 2,510.00
Reward Landscape/ Aquatic herbicide or Aquatic herbicide or Equivalent Triwnke Diquat 37.3% Spectacle Foam Marker From Marker Primo Maxx or Primo Maxx or Equivalent Trikx PRE Trinexapac-ethyl 11.3% 20 Gals 2.5ml/ #341.5g/	18.	Simazine 4L or Equivalent	Simazine 42.1%		179518	#71.44/yy	86.EVI 8
Spectacle	19.	Reward Landscape/ Aquatic herbicide or Equivalent Vibue D	Diquat 37.3%	ł I	a sapil		81,184.56
Foam Marker Foam 100% 15 Gals 194 . \$35.50 15 Gals 194 . \$35	20.	Spectacle	9		0	Nobjo	\$
Primo Maxx or Equivalent T-Nex PRE Trinexapac-ethyl 11.3%	21.	Foam Marker	Foam 100%	15 Gals	lgal.	\$35.50/	\$532.50
	22.	Primo Maxx or Equivalent TAK PC		20 Gals	13 Kg 1	#391.52/	\$3,132.w

RFB No. 18-0046

Agricultural Chemicals

*Topchoie: Must purchase 20 bays or more on same invoice to get this price. Lesser grantity price for bay is: #137.50

PARK SERVICES REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

lendors are requested to enter the Unit Size per item

SiteOne Landscape Supply

2.541/ #2,897.50/ 2,897.50/in 25.00 XX Sarle. 1.3302./ 141. 2.5al. Unit Size 194 50 Gals 100 lbs 2 Gals 200 Oz 20 Oz 50 Oz 80 Oz 5 Lbs Gals Qty. Gals Gals Est. 500 200 200 Trimec 992 or LCCa B-Way SchWe Famivalent **Active Ingredients** Glyphosate 73.3%; Diquat dibromide 2.9% Glyphosate (for aquatic vegetation) Trifloxysulfuron-sodium 75.0% Halosulfuron-Methyl 75.0% Pyraclostrobin 23.6% Manor 60DF or MSM Twf 60DF

Fourvalent

Metasulfuron 60.0% Quinclorac 75% Acephate 75.0% Bifenthrin 7.9% Dithiopyr 40% UP-Star Gold or LOGO Chrischenk Plus Lesco-Fate or Applate 170 Headline or (Apony) Roundup Quick Pro or 850 (Juin-My, 75 DF Monument 75WG or Rodeo or Equivalent Dimension Ultra or Sedge Hammer or Drive 75DF or Equivalent (Equivalent Equivalent Equivalent Equivalent Equivalent Haughert Equivalent Equivalent Equivalent Vendor Name: Product Name Item Š. 33 27. 30 32. 28. 29 31. 23. 24. 25. 26.

\$6,820.80/10jys

485.44

\$3944/41. \$1,972.0

\$ 88,35

\$17.67A

\$6,212.80

Extended

Cost

Cost Unit

Agricultural Chemicals

RFB No. 18-0046

* Monument-Must purchase 10 longs or more on Same invoice. 185ser quantitles sold at \$245/box

\$72.89/64. S4,613.40/606Hs.

\$200/000 85,000/628

| ^{\$}3,990.00

\$39.90/

\$330.40/560z.

\$ 7.8 C

8 % S

\$5790fine

\$631.35

\$126.25/

RFB No. 18-0046

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

Vendor Name: SiteOne Landscape Supply

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
34.	Celsius WG (Agamy)	Thiencarbazone-methyl8.7% Iodosulfuron-methyl-s1.9% Dicamba 57.4%	100 lbs	1002./d.	1002/k. Aloo/es.	8 k, 000.00
35.	Crosscheck Plus	Bifenthrin 7.9%	300 bags	2516./ Jed	3516, \$14.31/bg	s4,245.00
36.	Liquid Iron		50 Gals		25ghyy #21.50/my 8450.00	\$ 4 50.00
37.	Spreader Sticker/ Surfactant Surf- Rel 820	078	20 Gals		2541/ #22.84 V	\$262.88
38.	Spray Tank Cleaner Johns Tank Clane	an Si Tank Chaner	50 Gals	216 Kd.	216/d. \$872/eg.	\$ 218 /50/bs.
39.	Sevin 4F or Equivalent	Carbaryl 43.0%	300 Gals	17 this to	2-5/1/ # 115/1/2	\$ 3,800 m
40.	G-Pro 2.32% or Chlor Equivalent	G-Pro 2.32% or Uniority of HE Chivalent Chlorpyrifos 2.32% (Labeled for Recreational Areas)	80 Bags	2.5gl/	\$114.15/	8/169.15/jug
41.	Spray Dye, Tracker Blue 2.5 Gal		100 Gals	2.5gd//4	2 29 / 14 181050/14	\$2,420.00
		PARK SERVICES GRAND TOTAL \$272,012.11	GRA	ND T	OTAL	\$ 272,012.21

AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

SiteOne Landscape Supply

Vendor Name:

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
•	Three Way Selective Herbicide	Selective herbicide Dimethylamine Salt of 2.4 Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic	500 Gals	2.5gd	\$57.40/	811,580.00
		Acid 6.1 % Duniethylainine sait of Dicamba (3, 0-Dichloro-o-anisic Acid) 2.77%)	
2.	Chelated Iron Plus 12-0-0	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals	2.5ml/	\$215%	8 43.00
3.	Induce Applied byo Agustic Surfactant	ie Surfayant	70		# 16.00/C	\$3,218.00
4.	Herbicide, Three-Way Ester II		30 Cs	2.5gd.X 2.66.	2.54.X \$313.69/cs.	811,210-40
5.	Herbicide, Revolver (Ay	(Mena)	30 Cs	14×2018	\$2,708/15.	8702×4/ \$2,708/65. \$69,240.00
6.	Fertilizer, Lime 0 Pellitized	97	120 Bags	50 B./ba	\$2/6%	\$ PW:00
7.	Fertilizer, Mulch 70/30	Fertilizer, Mulch 70/30 Loso Mulch Hydrocorer 70/20 Wood Boor Blend	SS	5016-1/00	417.67 Hay	81,413.60
∞.	Target 6.6 (MSMA) Monosodium Acid M	Wonosodium Acid Methanearsonate (MSMA) 51.0%	10 Gals	2.59419	\$97.00/jy	\$ 388.31
9.	24-2-11	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags	5015,100	#19.17 M	\$ 25,724.00
10.	Pre-m 0.86% 0-0-7	Pendimethalin 0.86% Fertilizer	700 Bags	51111-160	0 10 7 #	8,820.00
Ţ	Pre-m 0.86% 25-2-5	Pendimethalin 0.86%		50/1/04	#14.04/16.g	\$ [2,363.00
а N	N EEG N - 18-0018	رده: + انه نعم لا) C 3 - CC		5	

Agricultural Chemicals

RFB No. 18-0046

Page 33 of 36

PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 AGRICULTURAL CHEMICALS

Vendors are requested to enter the Unit Size per item.

SiteOne Landscape Supply Vendor Name:

Item	Item Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
12.	Roundup Quick Pro	Glyphosate 73.3%; Diquat dibromide 2.9%	200 Gals	407918.9	Ki/hz-98# Kl/918-9	\$6,820.80/80jus
13.	Rodeo Muanat	Glyphosate (for aquatic vegetation)	200 Gals	S. Salling	25 July #77.64 Jug 86,212.80	\$6,212.80
14.	0 Fertilizer, 13-13-13		120 Bags	50/6/100	#13.24 bag	50/2/bas #13.24/bas \$1,591.20
15.	Trimec 992 (250 7-104)	Trimec 992 (240 3-Way Elective 2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	500 Gals	01/1×2.0	254/1/2 #57.96/14 \$11,580.00	8 [,580.00
16.	Spreader Sticker/ Arf-Ac 820	07.8	20 Gals	254/62	254/14 #32.84jy \$ 262.88	\$ 262.88
17.	Aquatic Adjuvant Non- Ionic Surfectant Applied his Muche Curtage	Dio Agustic Cartastant	200 Gals	lof.	\$10.01/97	\$16.09/94 \$12,872.00
		PUBLIC WORKS GRAND TOTAL \$ 82,940.00	S GRA	ND T	OTAL	\$ 182,940.00

TOTAL BID | \$454, 952.2/

VENDOR NAME & SIGNATURE: SiteOne Landscape Supply

If certified as a DBE or WBE, list the certifying agency: M

*** COMPLETE THESE PAGES AND RETURN WITH BID ***

RFB No. 18-0046

Agricultural Chemicals

SOLICITATION ID: RFB NO. 18-0046

AGRICULTURAL CHEMICALS

(ANNUAL CONTRACT)

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS INDICATED BY "X"

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

	Required Coverage(s)	Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	See attached
X	Comprehensive General Liability: 2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and SubContractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non-ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	V
	Other:		
	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	* V

	Required Coverage(s)	Limits	Bidders
	3 ()	(Figures denote minimums)	Limits/Response
	10. Personal and Advertising Injury	\$1 Million each offense, \$1	
	Liability	Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full	
		amount of contract	
	18. XCU (Explosive, Collapse,		
	Underground) Coverage		
	19. USL&H (Long Shore Harbor		
	Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment	\$2 Million per occurrence/claim	
	Liability		
X	22. Carrier Rating shall be Best's Rat	ing of A-VII or its equivalents	V
X	23. Notice of Cancellation, non-renev	val or material change in coverage	
	shall be provided to City at least 30 da	ys prior to action.	0//
X	24. The City shall be named Addition	al Insured on all policies	V /
X	25. Certificate of Insurance shall show	w Bid Number and Bid Title	V
	26. Pollution:	\$2 Million per occurrence/claim	

^{*}If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the <u>Bidders Limits/Response</u> column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements and provide the required
Certificate(s). SiteOne Landscape Supply
BIDDER NAME:
AUTH. SIGNATURE: Molly M Voron

<u>COMPLETE THIS PAGE AND RETURN WITH BID</u>

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340 COLUMBUS, GEORGIA 31902-1340 706-653-4105, Fax 706-225-3033 BidLine 706-653-4536 www.columbusga.org

April 20, 2018

E. G. C

ADDENDUM NO. 1

Agricultural Chemicals (Annual Contract)
RFB No. 18-0046

Proposals should include	acknowledge	ement of receipt for all Addenda:
Authorized Initials:	Firm:	ement of receipt for all Addenda: SiteOne Landscape Supply

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. <u>DUE DATE EXTENSION</u>

The due date is extended; sealed bids are due no later than 2:30 PM on Wednesday, May 16, 2018.

II. ACKNOWLEDGEMENT

Indicate that your company has received this Addendum in the appropriate areas and include with sealed Bid. Failure to acknowledge receipt of this addendum may render your Bid "Incomplete".

Andrea J. McCorvey Purchasing Manager

Addendum No. 1 Page 1 of 1 RFB No. 18-0046

EXHIBIT D

Agricultural Chemicals (Annual Contract)

SiteOne Landscape Supply Clarification Documents

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706.225-4087, FAX 706.225.3033 BIDLINE 706.653.4536 www.columbusga.org

July 25, 2018

Ms. Molly Vorous SiteOne Landscape Supply 1385 East 36th Street Cleveland, OH 44114

Re: RFB No. 18-0046 – Agricultural Chemicals (Annual Contract)

Dear Ms. Vorous:

Thank you for your submittal in response to the referenced Request for Bids. During analysis of the bid responses, the Purchasing Division perceived inconsistencies among vendor responses, which have caused a delay to the evaluation and recommendation process. To ensure the user-Department(s) make fair, comparative and cost-effective choices, vendors are required to provide pricing in accordance with the unit of measure specified in the bid. The unit pricing provided by your company for the items shown below did not meet the unit of measure specifications. Therefore, complete the Per Specified Unit of Measure column in the table below to provide updated pricing as specified. (Please note: The pricing must still equate to the extended cost already bid, new pricing will not be accepted.)

PAR	KS & RECREATION				
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	 Per Specified Unit of Measure
1.	Three Way Selective Herbicide or Equivalent	500 Gals	57.90/jug	11,580.00	\$ (gallon)
3.	Chelated Iron Plus 12-0-0 or Equivalent	5 Gals	21.50/jug	43.00	\$ (gallon)
7.	Pre-m 3.3 EC 0.86% 0-0-7 or Equivalent	100 Gal	75.00/jug	3,000.00	\$ (gallon)
15.	Garlon *3A or Equivalent	100 Gals	152.04/jug	6,081.60	\$ (gallon)
16.	Manicure 6FL or Equivalent	25 Gals	116.63/jug	1,16.30	\$ (gallon)
18.	Simazine 4L or Equivalent	5 Gals	71.64/jug	143.28	\$ (gallon)
19.	Reward Landscape/ Aquatic herbicide or Equivalent	20 Gals	148.07/jug	1,184.56	\$ (gallon)
22.	Primo Maxx or Equivalent	20 Gals	391.58/jug	3,132.64	\$ (gallon)

PAR	KS & RECREATION				n o energy political and plantage property and the total
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit of Measure
23.	Rodeo or Equivalent	200 Gals	77.66/jug	6,212.80	\$ (gallon)
27.	Headline or Equivalent	2 Gals	2,897.50/jug	2,897.50	\$ (gallon)
28.	Dimension Ultra or Equivalent	200 Oz	126.25/ea	631.25	\$ (ounce)
29.	Trimec 992 or Equivalent	500 Gals	57.90/jug	11,580.00	\$ (gallon)
30.	Manor 60DF or Equivalent	50 Oz	47.20/ea	330.40	\$ (ounce)
36.	Liquid Iron	50 Gals	21.50/jug	460.00	\$ (gallon)
37.	Spreader Sticker/Surfactant	20 Gals	32.86/jug	262.88	\$ (gallon)
39.	Sevin 4F or Equivalent	300 Gals	115.00/jug	13,800.00	\$ (gallon)
41.	Spray Dye, Tracker Blue 2.5 Gal	100 Gals	60.50/jug	2,420.00	\$ (gallon)

No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit of Measure
3.	Induce	50 Gals	16.09/qt	3,218.00	\$ (gallon)
8.	Target 6.6 (MSMA)	10 Gals	97.08/jug	388.32	\$ (gallon)
16.	Spreader Sticker/Surfactant	20 Gals	32.86/jug	262.88	\$ (gallon)
17.	Aquatic Adjuvant Non-Ionic Surfactant	200 Gals	16.09/qt	12,872.00	\$ (gallon)

Print name of signatory	Date
I	Print name of signatory

Sincerely,

Andrea J. McCorvey Purchasing Manager

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340 COLUMBUS, GEORGIA 31902-1340 706.225-4087, FAX 706.225.3033 BIDLINE 706.653.4536 www.columbusga.org

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Re: RFB No. 18-0046 - Agricultural Chemicals (Annual Contract)

Dear Ms, Vorous:

Thank you for your submittal in response to the referenced Request for Bids. During analysis of the bid responses, the Purchasing Division perceived inconsistencies among vendor responses, which have caused a delay to the evaluation and recommendation process. To ensure the user-Department(s) make fair, comparative and cost-effective choices, vendors are required to provide pricing in accordance with the unit of measure specified in the bid. The unit pricing provided by your company for the items shown below did not meet the unit of measure specifications. Therefore, complete the Per Specified Unit of Measure column in the table below to provide updated pricing as specified. (Please note: The pricing must still equate to the extended cost already bid, new pricing will not be accepted.)

PAR	KS & RECREATION				
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit of Measure
1.	Three Way Selective Herbicide or Equivalent	500 Gais	57.90/jug	11,580.00	\$ 23-16 (gallon)
3.	Chelated Iron Plus 12-0-0 or Equivalent	5 Gals	21.50/jug	43.00	\$ \$ 100 (gallon)
7.	Pre-m 3.3 EC 0.86% 0-0-7 or Equivalent	100 Gal	75,00/jug	3,000.00	\$ 30.00 (gallon)
15.	Garion *3A or Equivalent	100 Gals	152.04/jug	6,081.60	\$60.816 (gallon)
16.	Manicure 6FL or Equivalent	25 Gals	116.63/jug	1,16.30	\$46.652 (gallon)
18.	Simazine 4L or Equivalent	5 Gals	71.64/jug	143.28	\$ 28.656 (gallon)
19.	Reward Landscape/ Aquatic herbicide or Equivalent	20 Gals	148,07/jug	1,184.56	\$59 228 (gallon)
22.	Primo Maxx or Equivalent	20 Gals	391.58/jug	3,132.64	\$ /56.632 (gallon)

PAI	RKS & RECREATION		· · · · · · · · · · · · · · · · · · ·			
No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Meas	Unit of
23.	Rodeo or Equivalent	200 Gals	77.66/jug	6,212.80	\$31-064	(gallon)
27.	Headline or Equivalent	2 Gals	2,897.50/jug	2,897.50	\$1159.00	(gallon)
28.	Dimension Ultra or Equivalent	200 Oz	126.25/ea	631.25	\$ 3.157	(ounce)
29.	Trimec 992 or Equivalent	500 Gals	57.90/jug	11,580,00	\$ 23.16	(gallon)
30.	Manor 60DF or Equivalent	50 Oz	47.20/ea	330.40	\$ 5-90	(ounce)
36.	Liquid Iron	50 Gals	21.50/jug	460.00	\$ 8.60	(gallon)
37.	Spreader Sticker/Surfactant	20 Gals	32.86/jug	262.88	\$13.144	(gallon)
39.	Sevin 4F or Equivalent	300 Gals	115.00/jug	13,800.00	\$ 46-00	(gallon)
41.	Spray Dye, Tracker Blue 2.5 Gal	100 Gals	60.50/jug	2,420.00	\$24.20	(gallon)

No.	Product Name	Est. Qty.	Unit Cost	Extended Cost	Per Specified Unit of Measure
3.	Induce	50 Gals	16.09/qt	3,218.00	\$ 64.36 (gallon)
8.	Target 6,6 (MSMA)	10 Gals	97.08/jug	388.32	\$38.83Z (gallon)
16,	Spreader Sticker/Surfactant	20 Gals	32.86/jug	262,88	\$ [3.144 (gallon)
17.	Aquatic Adjuvant Non-Ionic Surfactant	200 Gals	16.09/qt	12,872.00	\$ 64.36 (gallon)

Working Mayor Moly W. Vorons 1/25/18
Vendor Signature Print name of signatory Date

Your written response is requested no later than 5:00 PM on Friday, July 27, 2018. Please forward your response to the attention of Heather Scheuttig at email hscheuttig@columbusga.org or fax number 706.225.3033.

Sincerely,

Andrea J. McCorvey Purchasing Manager

EXHIBIT B

Columbus Consolidated Government
Agricultural Chemicals
(Annual Contract)
Request for Bids

RFB No. 18-0046

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706-653-4105, FAX 706-225-3033

Date: April 13, 2018

REQUEST FOR BIDS:	Qualified vendors are invited to submit sealed bids, subject to conditions and instructions as specified, for the furnishing of:		
RFB NO: 18-0046	AGRICULTURAL CHEMICALS (ANNUAL CONTRACT)		
GENERAL SCOPE	Provide agricultural chemicals on an "as needed" basis to Columbus Consolidated Government. The contract term will be for two (2) years, with the option to renew for three additional twelve-month periods.		
DUE DATE	May 9, 2018 – 2:30 PM (EST) Bids must be received and date/time stamped on or before the due date by the Finance Department/Purchasing Division, 5 th Floor – Government Center, 100 10 th St, Columbus, GA. Bids will be opened during the 3:00 PM hour in the Conference Room of the Purchasing Division. Bidders are not required, but are invited, to attend the bid opening.		
ADDENDA	IMPORTANT INFORMATION Any and all addenda will be posted on the Purchasing Division's web page, at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid Opportunities.htm . It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.		
NO BID RESPONSE	Refer to the form on page 3 if you are not interested in this invitation.		



Andrea J. McCorvey Purchasing Manager

IMPORTANT INFORMATION e-Notification

Effective December 31, 2014, Columbus Consolidated Government (the City) discontinued mailing postcard notifications to its registered vendors. The City is using the Georgia Procurement Registry e-notification system. You must register with the Team Georgia Market Place/Georgia Procurement Registry to receive future procurement notifications via

http://doas.ga.gov/state-purchasing/suppliers/gettingstarted-as-a-supplier

If you have any questions or encounter any problems while registering, please contact the Team Georgia Marketplace Procurement Helpdesk:

Telephone: 404-657-6000

Fax:

404-657-8444

Email:

procurementhelp@doas.ga.gov

STATEMENT OF "NO BID" Complete and return this form immediately if you do not intend to Bid: Email: bidopportunities@columbusga.org (706) 225-3033, Attn: Heather Scheuttig, Buyer Fax: Mail: Columbus Consolidated Government Purchasing Division P. O. Box 1340 Columbus, GA 31902-1340 We, the undersigned decline to bid on your RFB No. 18-0046 for Agricultural Chemicals for the following reason(s): Specifications too "tight", i.e. geared toward one brand or manufacturer only (explain below) There is insufficient time to respond to the Invitation for Bids. We do not offer this product or service. We are unable to meet specifications. We are unable to meet bond requirements. Specifications are unclear (explain below). We are unable to meet insurance requirements. Other (specify below) Remarks: COMPANY NAME: DATE: TELEPHONE NUMBER: EMAIL ADDRESS:

GENERAL PROVISIONS

THESE GENERAL PROVISIONS SHALL BE DEEMED AS PART OF THE BID SPECIFICATIONS. The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations for bids and award of all contracts and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

- 1. TERM "CITY." The term "City" as used throughout these documents will mean Consolidated Government of Columbus, GA.
- 2. PREPARATION OF FORM. Bid proposals shall be submitted on the forms provided by the City. All figures must be written in ink or typewritten. Figures written in pencil or erasures are not acceptable. However, mistakes may be crossed out, corrections inserted adjacent thereto, initialed in ink by the person signing the proposal. If there are discrepancies between unit prices quoted and extensions, the unit price will prevail. Failure to properly sign forms, in ink, will render bid incomplete.
- 3. EXECUTION OF THE BID PROPOSAL. Execution of the bid proposal will indicate the bidder is familiar and in compliance with all local laws, regulations, ordinances, site inspections, licenses, dray tags, etc.
- 4. BID SUBMISSION. Bids must be submitted in a sealed envelope or package. The exterior of the envelope or package must reference the bidder's name and address, the bid number, bid title, and must indicate the contents represent a "bid" or "no bid" submission. Failure to properly identify the bid submission may result in rejection of the bid.
- 5. BID DUE DATE. The bid submission must arrive in the Purchasing Division on or before the stated due date and time. Upon receipt, bids will be time and date stamped. Bids will remain sealed and secured until the stated due date and time for the bid opening.
- 6. BID OPENING. The Purchasing Division Manager or Purchasing staff appointee will open bids. The bid amount and other pertinent information as determined by the Purchasing Division Manager will be read and recorded. The bids as recorded at the bid opening represent draft tabulation and may include incorrect price extensions or transcription errors, and are subject to change if conflicting information is discovered during analysis of the bid responses. A bid tabulation will be made available to bidders after extensions have been checked and all other specification compliance has been determined. In the essence of time, bidders may not be allowed to review bids at the bid opening. However, bidders will be allowed to make appointments to review the bids at a later date.
- 7. LATE BIDS. It is the responsibility of the bidder to ensure bids are submitted by the specified due date and time. Bids received after the stated date and time will be returned, unopened, to the bidder. The official clock to determine the date and time will be the time/date stamp located in the Finance Department. All bids received will be time and date stamped by the official clock. The City will not be held responsible for the late delivery of bids due to the U.S. Mail Service, or any other courier service.
- 8. RECEIPT OF ONE SEALED BID. In the event only one sealed bid is received, no formal bid opening shall take place. First, the Purchasing Division shall conduct a survey of vendors to inquire of "no bid" responses and non-responsive vendors. If, from the survey, it is determined by the Purchasing Division that specifications need revision, the one bid received will be returned, unopened, to the responding vendor, with a letter of explanation and a new bid solicitation prepared. If it is determined that other vendors need to be contacted, the bid due date will be extended, and the one bid received will remain sealed until the new bid opening date. The vendor submitting the single bid will receive a letter of explanation. If it is determined the one bid received is from the only responsive, responsible bidder, then the bid shall be opened by the Purchasing Division Manager or designee, in the presence of at least one other witness. The single bid will be evaluated by the using agency for award recommendation.
- 9. RECEIPT OF TIE BIDS. In the event multiple responsive, responsible bidders are tied for the lowest price and all other terms and requirements are met by the all tied bidders, the award recommendation shall be as follows:
- a. Award to the local bidder, if one of the bidders has its principal place of business in Columbus, Georgia.
- b. If all or none of the bidders has its principal place of business in Columbus, Georgia, then award the bid to the bidder who has received the award previously.
- c. If neither bidder received the award previously, and neither of the tied bidders has its principal place of business in Columbus, Georgia, then the bid award shall be equally divided between the tied bidders.
- d. If it is not feasible to divide the award, and if all or none of the tied bidders has its principal place of business in Columbus, Georgia, and neither was awarded the bid previously, then all bids will be rejected and the bid will be re-advertised.

- 10. RECEIPT OF MULTIPLE BIDS. Unless otherwise stated in the bid specifications, the City will accept one and only one bid per vendor. Any unsolicited multiple bid(s) will not be considered. If prior to the bid opening, more than one bid is received from the same vendor, the following will occur: (1) the bidder will be contacted and required to submit written acknowledgment of the bid to be considered; (2) the additional bid(s) will be returned to the bidder unopened. If at the bid opening more than one bid is enclosed in a single bid package, the City will consider the vendor non-responsive and bids will be returned to the bidder.
- 11. CONDITION AND PACKAGING. Unless otherwise defined in the bid specifications, it is understood and agreed that any item offered or furnished shall be new, in current production and in first class condition, that all containers shall be new and suitable for storage or shipment, and that prices include standard commercial packaging.
- **12. FREIGHT/SHIPPING/HANDLING CHARGES.** All freight, shipping, and handling charges shall be included in the bid price. The City will pay no additional charges.
- 13. CORRECTION OR WITHDRAWAL OF BID/CANCELLATION OF AWARDS. Corrections or withdrawals of inadvertently erroneous bids before or after bid opening, or cancellation of awards of contracts based on such bid mistakes may be permitted where appropriate. Mistakes discovered before bid opening may be modified or bid withdrawn by written notice received in the office of Purchasing prior to the time of the bid opening. After bid opening, no changes in bid prices or other provisions of bids prejudicial to the interest of the City or fair competition shall be permitted. In lieu of bid correction, a low bidder alleging a material mistake of fact may be permitted to withdraw its bid if the mistake is clearly evident, or if the bidder submits evidence that clearly and convincingly demonstrates that a mistake was made. All decisions to permit corrections or withdrawals of bids or to cancel awards or contracts based on bid mistakes will be supported by the written determination of the Purchasing Officer.
- 14. ADDENDA AND INTERPRETATIONS. If it becomes necessary to revise any part of this bid, a written addendum will be provided to all bidders. The City is not bound by any oral representations, clarifications, or changes made to the written specifications by City employees, unless such clarification or change is provided to the bidders in written addendum form from the Purchasing Officer. Bidders will be required to acknowledge receipt of the addenda (if applicable) in their sealed bid proposal. The vendor may provide an initialed copy of each addendum or initial the appropriate area on the bid form (pricing page). Failure to acknowledge receipt of the addenda (when applicable) will render bid incomplete. It is the bidder's responsibility to ensure that they have received all addenda.
- 15. BID EVALUATION AND AWARD. During the evaluation of bids, the City reserves the right to request clarification of bid responses and to request the submission of references, if deemed necessary for a complete evaluation of bid responses. Award will be made to the responsive and responsible bidder whose bid is most economical according to criteria designated in the solicitation. The determination of the lowest responsive and responsible bidder may involve all or some of the following factors: prices, conformity to specifications, financial ability to meet the contract, previous performance, facilities and equipment, availability of repair parts, experience, delivery promise, terms of payment, compatibility as required, other cost, and other objective and accountable factors, if any, (which are further described in the specifications). The City shall be the judge of the factors and will make the award in the best interest of the City.
- **16. TIME FOR CONSIDERATION.** Bids must remain in effect for at least sixty (60) days after date of receipt to allow for evaluation.
- 17. BID SECURITY AND PERFORMANCE BOND. Bid security (Bid Bond) shall be required for all competitive sealed bids for construction contracts when the price is estimated by the Purchasing Officer to exceed \$10,000. Bid security shall be a bond provided by a surety company authorized to do business in the State, or in the form of a certified check. Such bonds may also be required on construction contracts under \$10,000 or other procurement contracts when circumstances warrant. Bid security shall be in an amount equal to at least five percent (5%) of the bid amount. The City will accept a copy of a bid bond at the bid opening. However, if a copy of a bid bond is submitted, the bidder must submit to the Purchasing Division the identical original document within five (5) days after the bid opening. If the original document is not received within the five (5) days, the bid will not be considered. When a construction contract is awarded in excess of \$25,000, the successful bidder will be required to furnish a Performance Bond executed by a surety company authorized to do business in the State. The performance bond shall be equal to one hundred percent (100%) of the price specified in the bid.
- 18. SUBCONTRACTING. Should bidder intend to subcontract all or any part of the work specified, name(s) and address(es) of sub-contractor(s) must be provided in bid proposal (use additional sheet if necessary). The bidder shall be responsible for subcontractor(s) full compliance with the requirements of the bid specifications. THE

COLUMBUS CONSOLIDATED GOVERNMENT WILL NOT BE RESPONSIBLE FOR PAYMENTS TO SUBCONTRACTORS.

- 19. DISQUALIFICATION OF BIDDERS AND REJECTION OF BIDS. Bidders may be disqualified and rejection of bid proposals may be recommended by the City for any (but not limited) to the following reasons:
- (A) Receipt after the time limit for receiving bid proposals as stated in the bid invitation.
- (B) Any irregularities contrary to the General Provisions or bid specifications.
- (C) Unbalanced unit price or extensions.
- (D) Unbalanced value of items.
- (E) Failure to use the proper forms furnished by the Consolidated Government.
- (F) Failure to complete the proposal properly
- (G) Omission of warranty, product literature, samples, acknowledgment of addenda or other items required to be included with bid proposal.
- (H) Failure to properly sign forms in ink.

The City reserves the right to waive any minor informality or irregularity. The City reserves the right to reject any and all bids.

- 20. BRAND NAMES "OR EQUAL". Whenever in this invitation any particular material, process and/or equipment are indicated or specified by patent, proprietary or brand name of manufacturer, such wording will be deemed to be used for the purpose of facilitating description of the material, process and/or equipment desired by the City. It is not meant to eliminate bidders or restrict competition in any bid process. Any manufacturers' names, drawings, trade names, brand names, specifications and/or catalog numbers used herein are for the purpose of description and establishing general quality levels. Bidders may propose equivalent equipment, services or manufacturer. Any proposal that is equivalent to or surpasses stated specifications will be considered. Determination of equivalency shall rest solely with the City. Please Note: Due to existing equipment, specific manufacturers may be required to facilitate compatibility.
- 21. ASSIGNMENT OF CONTRACTUAL RIGHTS. It is agreed that the successful bidder will not assign, transfer, convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.
- 22. DISCOUNTS. Terms of payments offered will be reflected in the space provided on the bid proposal form. Cash discounts will be considered net in the bid evaluation process. All terms of payment (cash discounts) will be taken and computed from the date of delivery of acceptable material or services, or the date of receipt of the invoice, whichever is later.
- 23. TAXES. The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.
- **24. FEDERAL, STATE AND LOCAL LAWS.** All bidders will comply with all Federal, State, and Local laws and ordinances, relative to conducting business in Columbus, Georgia.
- 25. BID INCLUSIONS. When bid inclusions are required, such as warranty information, product literature/specifications, references, etc. The inclusions should reference all aspects of the specific equipment or service proposed by the bidder. Do not include general descriptive catalogs. References to literature or other required inclusions submitted previously do not satisfy this provision. Bids found to be in non-compliance with these requirements will be subject to rejection.
- 26. NON-COLLUSION. By signing and submitting this bid, bidder declares that its agents, officers or employees have not directly or indirectly entered into any agreements, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid. In the event, said bidder is found guilty of collusion, the company and agents will be removed from the City's bid list for one full year and any current orders will be canceled.
- **27. INDEMNITY.** The successful bidder agrees, by entering into this contract, to defend, indemnify and hold City harmless from any and all causes of action or claims of damages arising out or under this contract.
- 28. DISADVANTAGED BUSINESS ENTERPRISE. Disadvantaged Business Enterprises (minority or women owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex, sexual orientation, gender identity or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority

business enterprises have an opportunity to participate at all levels of contracting in the performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

- 29. AFFIRMATIVE ACTION PROGRAM NON-DISCRIMINATION CLAUSE. The City has an Affirmative Action Program in connection with Equal Employment Opportunities. The successful bidder will comply with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, and will not discriminate between or among them by reason of race, color, age, religion, sex, sexual orientation, gender identity, national origin or physical handicap.
- 30. AWARDS TO LOCAL BUSINESSES. Except for construction contracts, awards will be made to responsive and responsible local businesses proposing a cost not more than two percent (2%) above the low bid or quote for contracts involving an expenditure of \$25,000.00 or less and made to responsive and responsible local businesses proposing a cost not more than one percent (1%) above the low bid or quote for contracts involving an expenditure greater than \$25,000.00. (Ordinance No. 95-5). **STATE OR FEDERALLY FUNDED PROJECTS EXCLUDED***
- 31. RIGHT TO PROTEST. A protest with respect to an Invitation for bids or Request for Proposals shall be submitted in writing no less than five (5) days **prior** to the opening of bids or the closing date of proposals to the Purchasing Officer. If the matter is not resolved, then an appeal may be filed with the City Manager or City Council.
- 32. FAILURE TO QUOTE. Vendors choosing not to submit a bid are requested to return a Statement of "No Bid".
- **33. PRODUCT/EQUIPMENT DEMONSTRATION SITE VISIT.** During the evaluation of bids, the City reserves the right to request a demonstration or site visit of the product, equipment or service offered by a bidder. The demonstration or site visit shall be at the expense of the bidder. Bidders who fail to provide demonstration or site visit, as requested, will be considered non-responsive.
- 34. CANCELLATION PROVISIONS. When such action is in the best financial interest of the City, contracts for supplies to be purchased or services to be rendered under an annual (term) contract basis may be canceled and readvertised at the discretion of the Purchasing Officer and in accordance with contract terms.

After the receipt of a product or piece of equipment, it is found that said item does not perform as specified and required, payment for said product or equipment will be withheld. The successful vendor will be notified of the non-performance in writing. After notification, the successful vendor will have ten (10) calendar days, from the date of notification, to deliver product or equipment that performs satisfactorily. If a satisfactory product is not delivered within 10 calendar days, from the notification date, the City will cancel the contract (purchase order) and award to the next low, responsive, responsible bidder. The vendor will be responsible for the pick-up or shipment of the unsatisfactory equipment or product.

- 35. QUESTIONS. Questions concerning specifications must be submitted, in writing, at least 5 (five) working days (Monday-Friday) prior to receipt date. Questions received less than five working days prior to receipt date will not be considered.
- **36. SAMPLES.** When samples are required to be included with the proposal response, the bidder will be responsible for the following:
- 1) **Unless otherwise specified**, bidders are required to submit exact samples of item(s) bid. Do not submit sample of "like" item(s).
- 2) Affix an identification label to each individual sample to include bidder's name, bid name and number.
- 3) Make arrangements for the return of sample after the bid award. All shipping costs will be the responsibility of the bidder. If bidder does not make arrangements for return of sample, within 60 days after award, the sample will be discarded.
- **37. GOVERNING LAW.** The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.
- **38. PAYMENT DEDUCTIONS.** The City reserves the right to deduct, from payments to awarded vendor(s), any amount owed to the City for various fees, to include, but not limited to: False Alarm fees, Ambulance fees, Occupation License Fees, Landfill fees, etc.
- **39. PAYMENT TERMS.** The City's standard payment term is usually net 30 days, after successful receipt of goods or services. Payment may take longer if invoice is not properly documented or not easily identifiable, goods/services are not acceptable, or invoice is in dispute.

NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business that is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION.

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER OR IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FAX FORM" TO FAX OR EMAIL QUESTION.

ANY REQUEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

QUESTION/CLARIFICATION FORM

DATE	3:				
TO:	Heather Scheuttig, Buyer Email: bidopportunities@columbus Fax: (706) 225-3033	ga.org			
RE:	Agricultural Chemicals (Annual Contract); RFB No. 18-0046				
Ques	tions/clarification requests must be su	bmitted at least (5) <u>busines.</u>	s days before the due dat	e:	
From	-				
	Company Name	Website			
	Representative	Email Address			
	Complete Address	City	State Zip		
	Telephone Number	er			

GENERAL SPECIFICATIONS

AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

I. SCOPE OF WORK

These specifications describe minimum requirements for the purchase of various fertilizers, herbicides and insecticides to be purchased on an "as needed" basis. The items will be utilized by the Parks & Recreation Department to maintain athletic turf and parks; Public Works Department to maintain rights-of-way. The quantities of items specified herein are based upon the best information obtainable and represent the <u>ESTIMATED</u> usage required for a one-year period. The City may purchase some, all, more or none f the items contained on the bid form.

During the course of this contract, the City may request price quotes for additional items not listed. The awarded vendor(s) will be requested to provide quotes. The additional items will be awarded to the lowest responsive vendor under the same contract terms and will be purchased on an "as needed" basis.

II. VENDOR REQUIREMENTS

Successful bidder must provide a Turf Specialist/Consultant with technical experience in applying chemical/liquid fertilizer as it pertains to athletic turf maintenance.

Turf specialist will be required to provide ongoing follow-up service and technical advice to include the following:

- 1. In-service training of Parks & Recreation Department Staff.
- Taking soil samples.
- 3. Complete laboratory analysis of soil samples taken.
- 4. Presentation of soil analysis results, including major, secondary, micronutrients. EC. PH and organic material.
 - a. Report will provide annual fertilizer application by calendar month, with type and amount required.
 - b. Report will provide recommendations for soil modifications, weed, insect and disease control for the calendar year.
- 5. Formulation of fertilizer requirements for each field.
- 6. Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product.
- 7. Provide at least six (6) on-site inspections per year, or as requested.

III. TERM OF CONTRACT

A. The term of the contract shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods.

Notice of intent to renew will be given to the contractor in writing by the City Purchasing Division Director, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only

after funding appropriations and programs approval have been granted by the Council of the Consolidated Government of Columbus, GA. In the event the necessary funding is not approved, the affected multi-year contract becomes null and void, effective July 1st of the fiscal year for which such approval has been denied.

B. Termination for Convenience

For the protection of both parties, either party giving 30 days' prior notice in writing to the other party may cancel this contract.

IV. ESCALATION CLAUSE

Contract pricing shall remain fixed for the initial two (2) year(s) term of the contract. After the initial term, Contractor may request a price escalation by submitting a fully documented request for a review of the pricing. Such escalation shall not exceed a 5% increase. Price escalation requests must be submitted by January 30th so as to allow Departments to factor the increases into their budgets for the next fiscal year, which will begin July 1.

The Using agency(cies) and Purchasing Manager will review the request and shall approve or disapprove the increases based on budget constraints and other price comparisons. If approved, the price increase shall not commence until the next fiscal year, which will begin July 1.

If for any reason the contractor has a price increase that exceeds five percent (5%), the price increase will be evaluated on a case-by-case basis. The City and the Contractor will have the option to discuss and make adjustments to the requested increase. If either party declines approval of the adjustments, the contract will be considered cancelled on the scheduled expiration date of the contract.

V. QUESTIONS/ADDENDA

Questions and requests for clarification must be submitted within five (5) business days of the due date (see pages 9 & 10). Changes to the specifications (if any) will be provided in the form of an addendum, which will be posted on the web page of the Finance Department/Purchasing Division of Columbus Consolidated Government at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid Opportunities.ht m. It is the vendors' responsibility to periodically visit the web page for addendated before the due date and prior to submitting a quote.

VI. INSURANCE

The contractor shall be required, at their own expense, to furnish to the City of Columbus Purchasing Division, evidence showing the insurance coverage to be in force throughout the term of the contract. Insurance requirements are listed on the attached Insurance Checklist (Form B). The limits shown are minimum limits. Vendor shall indicate the actual limit they will provide for each insurance requirement. The bidder shall complete the Insurance Checklist and include with bid response. Certificate of Insurance is acceptable. The Insurance Checklist will indicate to the City, the bidder's ability and agreement to provide the required insurance, in the event of contract award.

The successful candidate shall provide the required Certificates of Insurance within <u>10</u> <u>business days</u> after award notification. The Certificates of Insurance will be included with the contract documents prior to signing.

VII. GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT/E-VERIFY

In accordance with the Georgia Security and Immigration Compliance Act/E-Verify, every public employer, every contractor of a public employer, and every subcontractor of a public employer's contractor must register and participate in a federal work authorization program (see http://www.dol.state.ga.us/spotlight/sp sb 529 new rules.htm). To access your E-Verify Company Identification Number, see https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES. A properly completed, notarized E-Verify Affidavit (Form C) must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

VIII. INDEMNIFICATION

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

IX. BID SUBMISSION REQUIREMENTS:

Each bidder shall include the following information with bid submission. Bidder shall submit **THE ORIGINAL AND 1 IDENTICAL COP(IES)**. The City reserves the right to request any omitted information, **WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE**. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information (*to exclude E-Verify*). If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "**Incomplete**":

- A. Bid Form (Form E)
- B. Bidder's Response Page (Form A)
- C. Material Safety Data Sheet(s) (MSDS) Must be included with bid response
- D. Insurance (Refer to page 12, section VI, regarding Form B)
- E. E-Verify/GSICA Form (Refer to page 13, Section VII, regarding Form C)
- F. Contract Signature Page (Form F)
- G. Addenda: Vendors must include acknowledgment of receipt of addenda (if any) in their sealed bid. Provide an initialed copy of each addendum or initial the appropriate area on bid form (pricing page). Addenda will be posted at

https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid Opportunities.htm.

Vendors are responsible for periodically visiting the web page, to check for addenda, prior to the bid due date and before submitting a bid.

THE FOLLOWING ITEMS WILL BE REQUIRED OF THE AWARDED VENDOR(S) PRIOR TO CONTRACT SIGNING OR ISSUANCE OF PURCHASE ORDER. AFTER NOTIFICATION, THE AWARDED VENDOR(S) WILL HAVE FIVE (5) BUSINESS DAYS TO PROVIDE THE INFORMATION BELOW, OR THE NEXT RESPONSIVE, RESPONSIBLE BIDDER WILL BE RECOMMENDED FOR AWARD.

1) Business License: Vendors located in Muscogee County shall submit a current <u>copy</u> of their City of Columbus Business License (Occupation License). If the business is not located in Muscogee County and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the vendor will not be required to pay occupation taxes in Columbus, Georgia.

If the business location is not in Georgia, vendor must provide a current copy of their active

Articles of Incorporation from the State and/or a current business license from the City/State in which business is located.

If you have questions regarding this requirement, please contact Yvonne Ivey, Revenue Manager; 706-225-3091.

2) W-9 Request for Taxpayer Identification Number and Certification (Form D)

Bids must be delivered <u>sealed</u> in an envelope or package. The envelope or package should reference the bidder's name, full address and the bid number and/or bid name. Mail or hand-deliver bid to:

Columbus Consolidated Government Purchasing Division

RE: RFB No. 18-0046- Agricultural Chemicals (Annual Contract)

(Mail) P. O. Box 1340 Columbus, GA 31902-1340 (**Deliver**) 5th Floor – Finance Department 100 10th Street Columbus, Georgia 31901

BIDS MUST REACH THE OFFICE OF THE PURCHASING DIVISION NO LATER THAN 2:30 PM ON BID OPENING DATE. BIDS RECEIVED AFTER 2:30 PM WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES.

XI. AWARD/NOTIFICATION/DELIVERY/INVOICE

- A. <u>Award</u>: This contract will be awarded in total to the lowest responsive, responsible bidder, or by line-item to multiple vendors, whichever is in the best interest of the City. The City will be the judge of the factors and will make the award accordingly.
- B. <u>Notification</u>: The agricultural chemicals will be procured on an "as needed" basis, by purchase order.
- C. <u>Delivery</u>: The item(s) shall be delivered to the location indicated on the purchase order. All shipping, delivery and/or freight charges must be included in the Unit Price. Columbus Consolidated Government will pay no additional shipping, delivery, and/or freight charges.
- D. <u>Invoices</u>: After receipt of goods/services, and upon satisfactory delivery, the successful vendor(s) shall forward invoice(s) to the following address:

Columbus Consolidated Government Accounting Division P. O. Box 1340 Columbus, Georgia 31902-1340

The invoice(s) shall reference the bid number (RFB No. 18-0046) and purchase order number.

XII. TERMINATION OF CONTRACT

A. Default: If the contractor refuses or fails to perform any of the provision of this contract with such diligence as will ensure its completion within the time specified in this contract, or

any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Director may notify the contractor in writing of the delay or non-performance and if not cured within ten (10) days or any longer time specified in writing by the Purchasing Division Director, such director may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Director may procure similar supplies or services, from other sources, in a manner and upon terms deeded appropriate by the Purchasing Division Director. The contractor shall continue performance of the contract to the extent it is not terminated and shall be liable for excess costs incurred in procuring similar goods or services.

- B. Compensation: Payment for completed services delivered and accepted by the City shall be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Division Director deem necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.
- C. Excuses for Nonperformance or Delayed Performances: Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms, if the contractor has notified the Purchasing Division Director within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather. If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deeded in default, unless the supplies or services to be furnished by the subcontractor were reasonably obtainable from other sources in sufficient time to permit the vendor to meet the contract requirements.

Upon request of the vendor, the Purchasing Division Director shall ascertain the facts and extent of such failure, and, if such director determines that any failure to perform was occasioned by any one or more of the excusable causes, and that, but for the excusable cause, the contractor's progress and performance would have met the terms of the contact, the delivery schedule shall be revised accordingly.

FORM A

BIDDER'S RESPONSE PAGE

AGRIGULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

PARK SERVICES

Bidder will provide the following services:

che	Specialist/Consultant with technical experience in applying mical/liquid fertilizer.	-	_ No
	f Specialist will provide on-going follow up service and technical owing:	advice, to i	nclude the
A.	In-service training of Columbus Parks & Recreation staff	Yes	_ No
В.	Take soil samples	Yes	_ No
C.	Compete laboratory analysis of soil sample	Yes	_No
D.	Present soil analysis as specified under vendor requirements	Yes	_No
E.	Formulation of fertilizer requirement for each field	Yes	_No
F.	Provide proper settings/calibrations for Parks & Recreation Power Caddy Equipment for each fertilizer product	Yes	_ No
	Provide at least six (6) on-site inspections per year as requested	Yes	_ No
	Vendor Name:		

FORM B

SOLICITATION ID: RFB NO. 18-0046 AGRICULTURAL CHEMICALS

(ANNUAL CONTRACT)

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS INDICATED BY "X"

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
X	Comprehensive General Liability: 2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and SubContractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non-ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Other: 8. Miscellaneous Errors and	\$1 Million per occurrence/claim	
	Omissions		
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	

	Required Coverage(s)	Limits	Bidders
		(Figures denote minimums)	Limits/Response
	10. Personal and Advertising Injury	\$1 Million each offense, \$1	
	Liability	Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full	
		amount of contract	
	18. XCU (Explosive, Collapse,		
	Underground) Coverage		
	19. USL&H (Long Shore Harbor		
	Worker's Compensation Act)	·	
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment	\$2 Million per occurrence/claim	
	Liability		
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		,,,,
X			
	shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional Insured on all policies		
X	25. Certificate of Insurance shall show		
	26. Pollution: \$2 Million per occurrence/claim		

^{*}If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the <u>Bidders Limits/Response</u> column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements and provide the required
Certificate(s).
BIDDER NAME:
AUTH. SIGNATURE:

***COMPLETE THIS PAGE AND RETURN WITH BID ***

VENDOR INFORMATION REGARDING

GEORGIA SECURITY AND IMMIGRATION COMPLIANCE

and

House Bill 87, also known as, The Illegal Immigration Reform and Enforcement Act of 2011

Section 3 of House Bill 87 amends O.C.G.A. §13-10-91.

O.C.G.A. §13-10-91(b)(1) states, in part, "A public employer shall not enter into a contract ... for the physical performance of services unless the contractor registers and participates in the federal work authorization program."

Accordingly, the affidavits on the pages that follow relate to documentation you must provide the City.

All contractors must complete the attached "CONTRACTOR AFFIDAVIT"****. Additionally, if you utilize subcontractors, they must complete the "SUBCONTRACTOR AFFIDAVIT" and or the "SUB-SUBCONTRACTOR AFFIDAVIT."

***In lieu of the affidavit required by this subsection, a contractor, subcontractor, or subsubcontractor who has no employees and does not hire or intend to hire employees for purposes of satisfying or completing the terms and conditions of any part or all of the original contract with the public employer shall instead provide a copy of the state issued driver's license or state issued identification card of such contracting party and a copy of the state issued driver's license or identification card of each independent contractor utilized in the satisfaction of part or all of the original contract with a public employer. A driver's license or identification card shall only be accepted in lieu of an affidavit if it is issued by a state within the United States and such state verifies lawful immigration status prior to issuing a driver's license or identification card.

Information is available at: http://www.dol.state.ga.us/spotlight/sp_sb_529_new_rules.htm

FORM C

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Company ID Number (numerical, 4-7 digits) **See https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES to a	Date of Authorization ccess your E-Verify Company Identification Number.
, 	
Date of Authorization	
Name of Contractor	
Agricultural Chemicals (Annual Contract); RFB No. 18-0 Name of Project	04 <u>6</u>
<u>Columbus Consolidated Government</u> Name of Public Employer	
I hereby declare under penalty of perjury that the foregoi	ng is true and correct.
Executed on,, 201 in	(city),(state).
Signature of Authorized Officer or Agent	
Printed Name and Title of Authorized Officer or Agent	
SUBSCRIBED AND SWORN BEFORE ME	
ON THIS THE DAY OF, 201	•
NOTARY PUBLIC	
My Commission Expires:	

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and incligible for further consideration.

"GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(4)

By executing this affidavit, the undersigned *subcontractor* verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract for

(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) and
(Name of Contractor)
on behalf of <i>Columbus Consolidated Government</i> has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to
(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to
(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) Sub-subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:
Federal Work Authorization User Identification Number
Date of Authorization
Name of Sub-subcontractor Agricultural Chemicals (Annual Contract); RFB No. 18-0046 Name of Project
Columbus Consolidated Government
Name of Public Employer I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on,, 201 in(city),(state).
Signature of Authorized Officer or Agent
Printed Name and Title of Authorized Officer or Agent
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE DAY OF,201
NOTARY PUBLIC My Commission Expires:

FORM D

Form W-9
(Rev. November 2017)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Internal J	ent of the Treasury Revenue Service	► Go to www.irs.gov/FormW9 for ins		st information.	send to the Ins.
	f Name (as shown	on your income tax return). Name is required on this line; de	o not leave this line blank.		
-	2 Queinaes namelo	disregarded entity name, if different from above			
1	Z Eddilos (as)o,				
page 3.	Check appropriate box for federal tax classification of the person whose name is entered on line 1. C following seven boxes.		ne is entered on line 1. Che	ck only one of the	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3);
ns on	Individual/solo single-membe	Exempt payee code (if any)			
Print or type. Specific Instructions on page	Note: Check LLC if the LLC another LLC to is disregarded	y company. Enter the tax classification (C=C corporation, S the appropriate box in the line above for the tax classificatio C classified as a single-member LLC that is disregarded fr hat is not disregarded from the owner for U.S. federal tax p of from the owner should check the appropriate box for the tr	n of the single-member ow orn the owner unless the ov urposes, Otherwise, a singl	mer. Do not check wner of the LLC is le-member LLC that	Exemption from FATCA reporting code (if any)
8	Other (see ins			Rensester's name a	(Applies to accounts maintained outside tha U.S.) and address (optional)
See S	5 Address (number, street, and apt. or suite no.) See instructions. Hequester's name and address (optional)			(
S,	6 City, state, and ZIP code				
	7 List account nun	nber(s) here (optional)			
Part	Taxpa	ver Identification Number (TIN)			
Enter v	our TIN in the aci	propriate box. The TIN provided must match the nan	ne given on line 1 to avo		urity number
backup	withholding, For	individuals, this is generally your social security nun ristor, or disregarded entity, see the instructions for i	nber (SSN). However, fo Part I. later For other	ra 📗	$\neg \bot \mid \cdot \mid \bot \mid \cdot \mid \cdot \mid$
entities	s, it is your employ	yer identification number (EIN). If you do not have a r	number, see How to get	а 🔲	
TIN, lat			41 1426 . 4 8 5	Or Employer	identification number
Note: I	If the account is in ac To Give the Rec	n more than one name, see the instructions for line to quester for guidelines on whose number to enter.	Also see What Name and Employer		I I I I I I I I I I I I I I I I I I I
, 4011100	2 / O C2/ O 1/10 1 101	1400101 101 B-1-011110 011 11110 11110 11110 11110 11110 11110 11110 11110 11110 11110 11110 11110 11110 11110		.	-
Part	II Certifi	cation			# L
Under	penalties of perju				•
2. Lam Serv	not subject to ba rice (IRS) that I an	n this form is my correct taxpayer identification numb ackup withholding because; (a) I am exempt from bac n subject to backup withholding as a result of a failur backup withholding; and	kup withholding, or (b)	l have not been no	otified by the Internal Revenue
3. l am	a U.S. citizen or	other U.S. person (defined below); and			
4. The	FATCA code(s) e	ntered on this form (if any) indicating that I am exemp	at from FATCA reporting	j is correct.	
you hav	ve failed to report t	s. You must cross out item 2 above if you have been no all interest and dividends on your tax return. For real est ant of secured property, cancellation of debt, contribution vidends, you are not required to sign the certification, b	tate transactions, item 2 o ons to an individual retire	does not apply. For ment arrangement	r mortgage interest paid, (IRA), and generally, payments
Sign Here	Signature of U.S. person	•	D	ate 🟲	
Gen	neral Instr	uctions	• Form 1099-DfV (divi	idends, including	those from stocks or mutual
Section references are to the Internal Revenue Code unless otherwise noted. • Form 1099-MISC (various types of income, prizes, awards, or opposeds)		come, prizes, awards, or gross			
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted transportions by brokers)		ales and certain other			
after they were published, go to www.irs.gov/FormW9. • Form 1099-S (proceeds from real estate transactions)					
Purpose of Form An individual or entity (Form W-9 requester) who is required to file an An individual or entity (Form W-9 requester) who is required to file an Form 1099-K (merchant card and third party network transactions) Form 1099-K (merchant card and third party network transactions) Form 1099-K (merchant card and third party network transactions)					
information return with the IRS must obtain your correct taxpayer					
(SSN), individual taxpayer identification number (ITIN), adoption • Form 1099-A (acquisition or abandonment of secured projection)			ment of secured property)		
taxpay (EIN), to	er identification no report on an inf	umber (ATIN), or employer identification number ormation return the amount paid to you, or other	Use Form W-9 only	if you are a U.S.	person (including a resident
(EIN), to report on an information return. Examples of information raturns include, but are not limited to, the following. If you do not return Form W-9 to			requester with a TIN, you might		
	1099-INT (interes		be subject to backup later.	withholding. See	What is backup withholding,
-		Cat. No. 10231X			Farm W-9 (Rev. 11-2017

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are walting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TiN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- . An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- . An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership incorne.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident allen who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- ${\bf 5},$ Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- You do not certify your TIN when required (see the instructions for Part II for details),
- The IRS tells the requester that you furnished an incorrect TIN,
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See Exempt payee code, later, and the separate instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding, if you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal iaw, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line:

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your Individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. berson, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TiN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n)	THEN check the box for	
Corporation	Corporation	
 Individual Sole proprietorship, or Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes. 	Individual/sole proprietor or single- member LLC	
 LLC treated as a partnership for U.S. federal tax purposes, LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes. 	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)	
Partnership	Partnership	
Trust/estate	Trust/estate	

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2-The United States or any of its agencies or instrumentalities
- 3-A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8-A real estate investment trust
- 9---An entity registered at all times during the tax year under the investment Company Act of 1940
- 10-A common trust fund operated by a bank under section 584(a)
- 11-A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

See Form 1099-MISC, Miscellaneous Income, and its instructions.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

- B-The United States or any of its agencles or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E-A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G-A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
 - I-A common trust fund as defined in section 584(a)
 - J-A bank as defined in section 581
 - K-A broke
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See What Name and Number To Give the Requester, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

- Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.
 You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TiN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TiN, but you do not have to sign the certification.

What Name and Number To Give the Requester

What Name and Number	r To Give the Hequester
For this type of account:	Give name and SSN of:
1. Individual	The individual
Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account.
Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usuat revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
 b. So-called trust account that is not a legal or valid trust under state law 	The actual owner ¹
Sole proprietorship or disregarded entity owned by an individual	The owner
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2563	The corporation
 Association, club, religious, charitable, educational, or other tax- exempt organization 	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
 Granter trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671–4(b)(2)(i)(B)) 	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the
number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- . Protect your SSN,
- . Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxoayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity their.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.ldentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

FORM E

BID FORM SRICULTURAL CHEN

AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB NO. 18-0046

IMPORTANT INFORMATION: PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID	
By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "incomplete". Use the following check-list to verify the items are included in sealed bid:	
☐ Bid Form ☐ Bidder's Qualifications ☐ Proof of Insurance ☐ E-Verify ☐ Material Safety Data Sheets	
☐ Contract Signature Page ☐ Addenda	
Initial below to acknowledge receipt of the following addenda (if any):	
Addendum No. 1 Addendum No. 2 Addendum No. 3	

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

[tem	Product	Active Ingredients	Est.	Unit Size	Unit Cost	Extended Cost
No.	Name		Qty.	Size	Cust	Cost
		Selective herbicide Dimethylamine Salt of 2.4	500			\$
'	Three Way Selective Herbicide or Equivalent	Dichlorophenoxyacetic Acid 30.56%; Dimethylamine salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic Acid 8.1% Dimethylamine salt of Dicamba (3, 6-Dichloro-o-anisic Acid) 2.77%	Gals	***************************************		,

RFB No. 18-0046

Agricultural Chemicals

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AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

١	Vendor Name:
Ł	, chicor righter

Item	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
No. 2.	Three-Way Ester II or Equivalent	Isooctyl (2-ethylhexyl) Ester of 2-Methyl-4-Chlorophenoxyacetic Acid*	30 Cs	JIZC	Cost	\$
	Ester II of Equivalent	Butoxyethanol Ester of 3,5,6-Trichloro-2-Pyridinyloxyacetic Acid**				·
		5.00% Dicamba (3,6-Dichloro-o-Anisic Acid)*** 3.60%				
3.	Chelated Iron Plus 12-0-0 or Equivalent	Urea nitrogen 12%, sulfur 4%, chelated iron 6%, chelated manganese 2%	5 Gals			\$
4,	Pellitized Lime or Equivalent		120 Bags			\$
5.	Revolver or Equivalent	Foramsulfuron2.34%	30 Cs			\$
5.	Pre-m 0.86% 0-0-7 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags			\$
7.	Pre-m 3.3 EC 0.86% 0-0-7 or Equivalent	Pendimethalin 37.4% Liquid	100 Gal			\$
3.	Pre-m 0.86% 25-2-5 or Equivalent	Pendimethalin 0.86% Plus Fertilizer	700 Bags			\$
9.	24-2-11 or Equivalent	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	1200 Bags			\$
10.	18-24-12 or Equivalent	25% poly plus sulfur coated urea	20 Bags			\$
11.	20-1-5 or Equivalent	Organic Fertilizer	20 Bags			\$

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Agricultural Chemicals

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AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name:	
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Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name	Ü	Qty.	Size	Cost	Cost
12	25 5 11 or Foundant	Organic Fertilizer	1200			\\s
12.	25-5-11 or Equivalent	C.Samo I stands	Bags			
						\$
13.	5-10-15 or Equivalent		120			
	1		Bags			
14.	Dolimitic Lime or		360			\$
	Equivalent		Bags			<u> </u>
	Garlon *3A or		100			\$,
15.	Equivalent	Triclopyr 44.4%	Gals			
	Manicure 6FL or	G11 11 11 54 00/	25			\$
16.	Equivalent	Chlorothalonil 54.0%	Gals			
	Top Choice	7. 7.001400/	100			\$
17.	Insecticide or	Fipronil 0.0143%	Bags			
	Equivalent					\$
	Simazine 4L or	Simazine 42.1%	5 Gals			Φ
18.	Equivalent	Sunazate 42.176	3 0418			
	Reward Landscape/	Diquat 37.3%	20 Gals			149
19.	Aquatic herbicide or	Diquat 57.570	20 Gais			
	Equivalent					\$
20	Canadagla					*
20.	Spectacle				-	\$
21.	Foam Marker	Foam 100%	15 Gals			•
	Primo Maxx or					\$
22.	Equivalent	Trinexapac-ethyl 11.3%	20 Gals		<u> </u>	

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Agricultural Chemicals

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AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

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Item No.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
			200			\$
23.	Rodeo or Equivalent	Glyphosate (for aquatic vegetation)	Gals			4
23.	Roundup Quick Pro or	Glyphosate 73.3%; Diquat dibromide 2.9%	200			\$
24.	Equivalent		Gals			
	Lesco-Fate or					\$
25.	Equivalent	Acephate 75.0%	5 Lbs			
	UP-Star Gold or	7:0 4 5 700	1.00			\$
26.	Equivalent	Bifenthrin 7.9%	50 Gals			ф.
		Pyraclostrobin 23.6%	2 Gals			\$
27.	Headline or	Fylacioshobili 25.076	2 Gais			
· · · · · · -	Equivalent Dimension Ultra or					\$
28.	Equivalent	Dithiopyr 40%	200 Oz			ľ
	Trimec 992 or		500			\$
29.	Equivalent	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	Gals			
	Manor 60DF or					\$
30.	Equivalent	Metasulfuron 60.0%	50 Oz			
	Sedge Hammer or					\$
31.	Equivalent	Halosulfuron-Methyl 75.0%	80 Oz	-	 	Φ.
	Monument 75WG or	Trifloxysulfuron-sodium 75.0%	20.0-			\$
32.	Equivalent	171HOXYSUITUFOII-SOCIUM 73.0%	20 Oz	ļ 	+	\$
22	Drive 75DF or	Quinclorae 75%	100 lbs			Ψ
33.	Equivalent	Zamororae 1976	100 103			

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Agricultural Chemicals

Page **31** of **36**

AGRICULTURAL CHEMICALS PARK SERVICES REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

tem	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
34.	Celsius WG	Thiencarbazone-methyl8.7% Iodosulfuron-methyl-s1.9% Dicamba 57.4%	100 lbs			\$
			300			\$
35.	Crosscheck Plus	Bifenthrin 7.9%	bags			\$
36.	Liquid Iron		50 Gals			13
30.	Spreader Sticker/					\$
37.	Surfactant		20 Gals			
<i></i>	Duritotalie					\$
38.	Spray Tank Cleaner		50 Gals			
			300			\$
39.	Sevin 4F or	Carbaryl 43.0%	Gals	Ì		
	Equivalent				 	\$
	G-Pro 2.32% or	Chlorpyrifos 2.32% (Labeled for Recreational Areas)	80 Bags			۳ ا
40.	Equivalent	Chiorpyridos 2,3270 (Eastered for Recreational Prices)	100			\ <u>\$</u>
41.	Spray Dye, Tracker		Gals			Ψ
	Blue 2.5 Gal		Uais		_L	

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AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046

Vendors are requested to enter the Unit Size per item.

Vendor Name:		

Item	Product	Active Ingredients	Est.	Unit	Unit	Extended
No.	Name		Qty.	Size	Cost	Cost
		Selective herbicide Dimethylamine Salt of 2.4	500			\$
1.	Three Way	Dichlorophenoxyacetic Acid 30.56%; Dimethylamine	Gals			
	Selective Herbicide	salt of (+) R-2-(2-Methyl-4 Chlorophenoxy propionic				
		Acid 8.1% Dimethylamine salt of Dicamba (3, 6-		İ		
		Dichloro-o-anisic Acid) 2.77%				
2.	Chelated Iron Plus	Urea nitrogen 12%, sulfur 4%, chelated iron 6%,				\$
	12-0-0	chelated manganese 2%	5 Gals		<u> </u>	
3.						\$
	Induce		50 Gals			
4.	Herbicide, Three-Way					\$
	Ester II		30 Cs			
						\$
5.	Herbicide, Revolver		30 Cs	ļ		φ.
6.	Fertilizer, Lime		120			\$
	Pellitized		Bags			
			00.7			\$
7	Fertilizer, Mulch 70/30		80 Bags			
		(1.00.51) 71.00/	1001			\$
8.	Target 6.6 (MSMA)	Monosodium Acid Methanearsonate (MSMA) 51.0%	10 Gals			
			1200	-		\$
9.	24-2-11	Fertilizer, 40% poly plus sulfer coated urea 6% Fe	Bags			\$
		Pendimethalin 0.86%	700			3
10.	Pre-m 0.86% 0-0-7	Fertilizer	Bags			•
			700			\$
11.	Pre-m 0.86% 25-2-5	Pendimethalin 0.86%	Bags	<u></u>		<u> </u>

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Agricultural Chemicals

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AGRICULTURAL CHEMICALS PUBLIC WORKS REQUIREMENTS; RFB No. 18-0046 Vendors are requested to enter the Unit Size per item.

Vo.	Product Name	Active Ingredients	Est. Qty.	Unit Size	Unit Cost	Extended Cost
			200			\$
12.	Roundup Quick Pro	Glyphosate 73.3%; Diquat dibromide 2.9%	Gals	<u> </u>	 	
			200	**************************************		\$
13.	Rođeo	Glyphosate (for aquatic vegetation)	Gals 120	<u> </u>	1	 \$
	D .''' 10 10 10		I			•
14.	Fertilizer, 13-13-13		Bags 500		 	\$
15.	Trimec 992	2, 4-D 30.56%; MCPP 8.17%; Dicamba 2.77%	Gals			"
13.	Spreader Sticker/					\$
16.	Surfactant		20 Gals			
7.7.	Aquatic Adjuvant Non-		200			\$
17.	Ionic Surfectant		Gals			
		PUBLIC WOR	KS GRA	ND T	OTAL	\$

VENDOR NAME & SIGNATURE:	

If certified as a DBE or WBE, list the certifying agency: _

*** COMPLETE THESE PAGES AND RETURN WITH BID ***

Agricultural Chemicals

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RFB No. 18-0046

FORM F

CONTRACT SIGNATURE PAGE AGRICULTURAL CHEMICALS (ANNUAL CONTRACT) RFB No. 18-0046

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

	Bv:
Witness as to the signing of the contract	By: Signature of Authorized Representative Date
Witness as to the signing of the contract	Print Name and Title of Signatory
(Corporate seal, if applicable)	Company:
Company Ordering Address	Company Payment Address
Contact:	Contact:
Contact Email	Contact Email
TelephoneFax	Telephone:Fax
CONSOLIDATED GOVERN	MENT OF COLUMBUS, GEORGIA
Accepted this_ day of20	APPROVED AS TO LEGAL FORM:
Isaiah Hugley, City Manager	Clifton C. Fay, City Attorney
ATTEST:	
Tiny B. Washington, Clerk of Council	

COMPLETE AND RETURN THIS PAGE WITH SEALED RESPONSE

☑ CHECKLIST ☑ Agricultural Chemicals RFB No. 18-0046

CHECK OFF EACH ITEM AS THE NECESSARY ACTION IS COMPLETED:

- ☑ 1. THE CONTRACT SIGNATURE PAGE HAS BEEN SIGNED.
- ☑ 2. PRICING HAS BEEN CHECKED.
- ☑ 3. ADDENDA (IF ANY) HAVE BEEN SIGNED.
- ☑ 4. ALL SUBMISSION REQUIREMENTS ARE INCLUDED.
- ☑ 5. THE MAILING ENVELOPE HAS BEEN ADDRESSED TO:

Columbus Consolidated Government
Purchasing Division – Attn: Heather Scheuttig

5th Floor, Tower Bldg. 100 10th Street OR: P.O. Box 1340

Columbus, Georgia 31902-1340

Columbus, Georgia 31901

☑ 6. THE MAILING ENVELOPE HAS BEEN SEALED AND MARKED WITH THE:

BID TITLE: Agricultural Supplies (Annual Contract)

BID NUMBER: RFB 18-0046 OPENING DATE: May 9, 2018

- PLEASE CONSIDER THE ENVIRONMENT (2)
- ☑ 7. Please ONLY submit what is required; keep the remaining pages of these specifications for your records/recycle.

* Opening date subject to change by Addendum

This checklist is for informative purposes only and is not intended to be a part of the formal bid document.

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340 COLUMBUS, GEORGIA 31902-1340 706-653-4105, Fax 706-225-3033 BidLine 706-653-4536 www.columbusga.org

April 20, 2018

ADDENDUM NO. 1

Agricultural Chemicals (Annual Contract) RFB No. 18-0046

Proposals should include acknowledgement of receipt for all Addenda:	
Authorized Initials:	Firm:

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

I. DUE DATE EXTENSION

The due date is extended; sealed bids are due no later than 2:30 PM on Wednesday, May 16, 2018.

II. ACKNOWLEDGEMENT

Indicate that your company has received this Addendum in the appropriate areas and include with sealed Bid. Failure to acknowledge receipt of this addendum may render your Bid "Incomplete".

Andrea J. McCorvey Purchasing Manager

Addendum No. 1 Page 1 of 1 RFB No. 18-0046