

h) **Standard Purchasing Resolution 2: Award to Low Bidders Meeting Specifications  
– Transit Mixed Concrete**

Resolution #2018-03-041-J-4h

RESOLVED, That Troy City Council hereby **AWARDS** a one (1) year contract to provide Transit Mixed Concrete with an option to renew for one (1) additional year to the low bidder meeting specifications; *Paragon Ready Mix of Utica, MI* as the primary supplier and *Superior Materials, LLC or Farmington Hills, MI* as the secondary supplier as per the unit prices listed in the bid tabulation opened March 8, 2018; to be ordered on as-needed basis; contracts expiring April 30, 2020.

BE IT FINALLY RESOLVED, That the awards are **CONTINGENT** upon the contractors' submission of properly executed bid documents, insurance certificates and all other specified requirements.

**BLANKET ORDER**

No. 2018-00001172  
 DATE: 05/01/2018  
 PAGE: 1 of 1  
 FOB DESTINATION

**Ship To**

CITY OF TROY  
 Streets  
 4693 ROCHESTER ROAD  
 TROY, MI 48085

**Bill To**

CITY OF TROY  
 Streets  
 4693 ROCHESTER ROAD  
 TROY, MI 48085

**EXPIRATION DATE**

04/30/2020

**COUNCIL RESOLUTION**

2018-03-041-J-4h

**VENDOR NO.** 163212**Vendor**

PARAGON READY MIX INC.  
 48000 HIXSON  
 UTICA, MI 48317

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
800	Yard	6 Sack Mix- Weekday Delivery	111.0000	\$88,800.00
700	Yard	7 Sack Mix (High Early)- Weekday Delivery	118.0000	\$82,600.00
200	Yard	12 Hour 300 PSI Mix Flexural Strength/7 Sack- Weekday Delivery	124.0000	\$24,800.00
20	Each	Split Load Charges- 2 Locations- Weekday Delivery	65.0000	\$1,300.00
5	Each	Split Load Charges- 3 Locations- Weekday Delivery	65.0000	\$325.00
30	Each	Split Load Charges- Below Minimum Load Charge- Weekday Delivery	65.0000	\$1,950.00
40	Yard	Split Load Charges- Cold Weather Protection- Weekday Delivery	8.0000	\$320.00
25	Yard	6 Sack Mix- Saturday Delivery	119.0000	\$2,975.00
100	Yard	7 Sack Mix (High Early)- Saturday Delivery	126.0000	\$12,600.00
100	Yard	12 Hour 300 PSI Mix Flexural Strength/7 Sack- Saturday Delivery	132.0000	\$13,200.00
5	Each	Split Load Charges- 2 Locations- Saturday Delivery	65.0000	\$325.00
2	Each	Split Load Charges- 3 Locations- Saturday Delivery	65.0000	\$130.00
10	Each	Split Load Charges- Below Minimum Load Charge- Saturday Delivery	65.0000	\$650.00
10	Yard	Split Load Charges- Cold Weather Protection- Saturday Delivery	8.0000	\$80.00
1	Each	Additional Information: To be ordered and delivered on an as needed basis as specified as per the City of Troy Public Works Inventory Control Assistant, Kaitlin Sackner	0.0000	\$0.00

Entered By: MaryBeth Murz

\$230,055.00

**Special Instructions:**

Insurance required to be on file- AS PRIMARY SUPPLIER. CONTRACT to furnish ONE (1) Year Requirements of Transit Mix Concrete with an option to renew for ONE (1) additional year in accordance with the specifications for ITB-COT 18-16 at the prices stated above. This PO is for Year one of a potential 2-Year Contract. CITY COUNCIL AWARD DATE 3/19/2018

**TERMS & CONDITIONS**

- Purchases of Municipalities are exempt from State Sales and Federal Excise Taxes.
- Prior to acceptance, vendor agrees to provide City with information under the Right-to-Know Law, P.A. 1986, No. 80, and fully comply with all terms and conditions of the Michigan Occupational Safety and Health Act, MCL 408.1001, et seq. including vendor shall provide City with an "MSDS". Vendor also agrees to be responsible for all required labeling.
- In cases of emergency/disaster, the City can purchase up to six(6) times the order amount for a period of six(6) months at the price contained in the contract.
- Purchase Orders are signed electronically based upon computer generated "on-line" authorized approvals. Authentic signatures are on file in the City of Troy Purchasing Department.

NOTICE: The City could put the vendor on notice that vendors will be held financially responsible for any claims or awards made against the City as a result of the vendor's action. If the City has to defend the initial lawsuit, the City will bring in the vendor as a co-defendant or sue the vendor, either as the result of settling a claim or the conclusion of the lawsuit.

I HEREBY CERTIFY THAT THIS ORDER IS PROPERLY AUTHORIZED AND APPROVED.

CITY OF TROY  
BID TABULATION  
TRANSIT MIXED CONCRETE

ITB-COT 18-16  
Page 1 of 1

VENDOR NAME: Paragon Ready Mix  
Utica, MI

**PROPOSAL: One-Year Requirements of Transit Mixed Concrete with an Option to Renew for one (1) additional year**

ITEM	QTY	DESCRIPTION	UNIT PRICE
<b>PROPOSAL A: WEEKDAY DELIVERY</b>			
1	800 YDS	6 SACK MIX	\$111.00
2	700 YDS	7 SACK MIX (High Early)	\$118.00
3	200 YDS	12 HR 300 PSI MIX	\$124.00
		Flexural Strength/ 7 sack	
		<b><u>SPLIT LOAD CHARGES</u></b>	
4a	20 TIMES	2 LOCATIONS	\$65.00
4b	5 TIMES	3 LOCATIONS	\$65.00
5	30 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00
6	40 YDS	COLD WEATHER PROTECTION	\$8.00
<b>ESTIMATED TOTAL PROPOSAL A:</b>			<b>\$200,095.00</b>
<b>PROPOSAL B: SATURDAY DELIVERY</b>			
1	25 YDS	6 SACK MIX	\$119.00
2	100 YDS	7 SACK MIX (High Early)	\$126.00
3	100 YDS	12 HR 300 PSI MIX	\$132.00
		Flexural Strength/ 7 sack	
		<b><u>SPLIT LOAD CHARGES</u></b>	
4a	5 TIMES	2 LOCATIONS	\$65.00
4b	2 TIMES	3 LOCATIONS	\$65.00
5	10 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00
6	10 YDS	COLD WEATHER PROTECTION	\$8.00
<b>ESTIMATED TOTAL PROPOSAL B:</b>			<b>\$29,960.00</b>
<b>ESTIMATED GRAND TOTAL:</b>			<b>\$230,055.00</b>
UNLOADING TIME/CU. YD.:			6 Minutes/ cy
MINIMUM LOAD:			1 cy
DELIVERY: After Verbal Request			48 Hr. Notice
HOURS OF OPERATION:			7AM-5PM
24 HRS PHONE NO.			586-484-6804
INSURANCE MET: Y or N			Y
WARRANTY: Y or N			N/A
PAYMENT TERMS:			NET 30
EXCEPTIONS: Y or N			N
ACKNOWLEDGEMENT: Y or N			Y
FORMS: Y or N			Y

**BLANKET ORDER**

No. 2018-00001212

DATE: 05/01/2018

PAGE: 1 of 1

FOB DESTINATION

Ship To

CITY OF TROY  
Streets  
4693 ROCHESTER ROAD  
TROY, MI 48085

Bill To

CITY OF TROY  
Streets  
4693 ROCHESTER ROAD  
TROY, MI 48085

EXPIRATION DATE

04/30/2020

COUNCIL RESOLUTION

2018-03-041-J-4h

VENDOR NO. 123132

Vendor

SUPERIOR MATERIALS, INC.  
30701 W. 10 MILE ROAD, SUITE 500  
FARMINGTON HILLS, MI 48333

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
800	Yard	6 Sack Mix- Weekday Delivery	115.0000	\$92,000.00
700	Yard	7 Sack Mix (High Early)- Weekday Delivery	121.0000	\$84,700.00
200	Yard	12 Hour 300 PSI Mix Flexural Strength/7 Sack- Weekday Delivery	127.0000	\$25,400.00
20	Each	Split Load Charges- 2 Locations- Weekday Delivery	0.0000	\$0.00
5	Each	Split Load Charges- 3 Locations- Weekday Delivery	0.0000	\$0.00
30	Each	Split Load Charges- Below Minimum Load Charge- Weekday Delivery	95.0000	\$2,850.00
40	Yard	Split Load Charges- Cold Weather Protection- Weekday Delivery	7.2500	\$290.00
25	Yard	6 Sack Mix- Saturday Delivery	122.0000	\$3,050.00
100	Yard	7 Sack Mix (High Early)- Saturday Delivery	128.0000	\$12,800.00
100	Yard	12 Hour 300 PSI Mix Flexural Strength/7 Sack- Saturday Delivery	134.0000	\$13,400.00
5	Each	Split Load Charges- 2 Locations- Saturday Delivery	0.0000	\$0.00
2	Each	Split Load Charges- 3 Locations- Saturday Delivery	0.0000	\$0.00
10	Each	Split Load Charges- Below Minimum Load Charge- Saturday Delivery	95.0000	\$950.00
10	Yard	Split Load Charges- Cold Weather Protection- Saturday Delivery	7.2500	\$72.50
1	Each	Additional Information: To be ordered and delivered on an as needed basis as specified as per the City of Troy Public Works Inventory Control Assistant, Kaitlin Sackner	0.0000	\$0.00

Entered By: Kristine Kaliek

\$235,512.50

## Special Instructions:

Insurance required to be on file- AS SECONDARY SUPPLIER. CONTRACT to furnish ONE (1) Year Requirements of Transit Mix Concrete with an option to renew for ONE (1) additional year in accordance with the specifications for ITB-COT 18-16 at the prices stated above. This PO is for Year one of a potential 2-Year Contract. CITY COUNCIL AWARD DATE 3/19/2018

## TERMS &amp; CONDITIONS

- Purchases of Municipalities are exempt from State Sales and Federal Excise Taxes.
- Prior to acceptance, vendor agrees to provide City with information under the Right-to-Know Law, P.A. 1986, No. 80, and fully comply with all terms and conditions of the Michigan Occupational Safety and Health Act, MCL 408.1001, et seq. including vendor shall provide City with an "MSDS". Vendor also agrees to be responsible for all required labeling.
- In cases of emergency/disaster, the City can purchase up to six(6) times the order amount for a period of six(6) months at the price contained in the contract.
- Purchase Orders are signed electronically based upon computer generated "on-line" authorized approvals. Authentic signatures are on file in the City of Troy Purchasing Department.

NOTICE: The City could put the vendor on notice that vendors will be held financially responsible for any claims or awards made against the City as a result of the vendor's action. If the City has to defend the initial lawsuit, the City will bring in the vendor as a co-defendant or sue the vendor, either as the result of settling a claim or the conclusion of the lawsuit.

I HEREBY CERTIFY THAT THIS ORDER IS PROPERLY AUTHORIZED AND APPROVED.

VENDOR NAME:	Superior Materials LLC
	Farmington Hills, MI

**PROPOSAL: One-Year Requirements of Transit Mixed Concrete with an Option to Renew for one (1) additional year**

ITEM	QTY	DESCRIPTION	UNIT PRICE
<b>PROPOSAL A: WEEKDAY DELIVERY</b>			
1	800 YDS	6 SACK MIX	\$115.00
2	700 YDS	7 SACK MIX (High Early)	\$121.00
3	200 YDS	12 HR 300 PSI MIX	\$127.00
		Flexural Strength/ 7 sack	
		<b><u>SPLIT LOAD CHARGES</u></b>	
4a	20 TIMES	2 LOCATIONS	\$0.00
4b	5 TIMES	3 LOCATIONS	\$0.00
5	30 TIMES	BELOW MINIMUM LOAD CHARGE	\$95.00
6	40 YDS	COLD WEATHER PROTECTION	\$7.25
<b>ESTIMATED TOTAL PROPOSAL A:</b>			<b>\$205,240.00</b>
<b>PROPOSAL B: SATURDAY DELIVERY</b>			
1	25 YDS	6 SACK MIX	\$122.00
2	100 YDS	7 SACK MIX (High Early)	\$128.00
3	100 YDS	12 HR 300 PSI MIX	\$134.00
		Flexural Strength/ 7 sack	
		<b><u>SPLIT LOAD CHARGES</u></b>	
4a	5 TIMES	2 LOCATIONS	\$0.00
4b	2 TIMES	3 LOCATIONS	\$0.00
5	10 TIMES	BELOW MINIMUM LOAD CHARGE	\$95.00
6	10 YDS	COLD WEATHER PROTECTION	\$7.25
<b>ESTIMATED TOTAL PROPOSAL B:</b>			<b>\$30,272.50</b>
<b>ESTIMATED GRAND TOTAL:</b>			<b>\$235,512.50</b>

UNLOADING TIME/CU. YD.:	6 Minutes
MINIMUM LOAD:	2 Yards
DELIVERY:	After Verbal Request
HOURS OF OPERATION:	7AM-5PM
24 HRS PHONE NO.	248-521-9948
INSURANCE MET:	Y or N
WARRANTY:	Y or N
PAYMENT TERMS:	NET 30
EXCEPTIONS:	Y or N
ACKNOWLEDGEMENT:	Y or N
FORMS:	Y or N

VENDOR NAME:	Paragon Ready Mix	Superior Materials LLC	McCoig Materials LLC
	Utica, MI	Farmington Hills, MI	Plymouth, MI

**PROPOSAL: One-Year Requirements of Transit Mixed Concrete with an Option to Renew for one (1) additional year**

ITEM	QTY	DESCRIPTION	UNIT PRICE	UNIT PRICE	UNIT PRICE
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**PROPOSAL A: WEEKDAY DELIVERY**

1	800 YDS	6 SACK MIX	\$111.00	\$115.00	\$130.00
2	700 YDS	7 SACK MIX (High Early)	\$118.00	\$121.00	\$136.00
3	200 YDS	12 HR 300 PSI MIX	\$124.00	\$127.00	\$139.00
		Flexural Strength/ 7 sack			
		<b>SPLIT LOAD CHARGES</b>			
4a	20 TIMES	2 LOCATIONS	\$65.00	\$0.00	\$60.00
4b	5 TIMES	3 LOCATIONS	\$65.00	\$0.00	\$60.00
5	30 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00	\$95.00	\$130.00
6	40 YDS	COLD WEATHER PROTECTION	\$8.00	\$7.25	\$6.50

<b>ESTIMATED TOTAL PROPOSAL A:</b>	<b>\$200,095.00</b>	<b>\$205,240.00</b>	<b>\$232,660.00</b>
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**PROPOSAL B: SATURDAY DELIVERY**

1	25 YDS	6 SACK MIX	\$119.00	\$122.00	\$135.75
2	100 YDS	7 SACK MIX (High Early)	\$126.00	\$128.00	\$141.75
3	100 YDS	12 HR 300 PSI MIX	\$132.00	\$134.00	\$144.75
		Flexural Strength/ 7 sack			
		<b>SPLIT LOAD CHARGES</b>			
4a	5 TIMES	2 LOCATIONS	\$65.00	\$0.00	\$60.00
4b	2 TIMES	3 LOCATIONS	\$65.00	\$0.00	\$60.00
5	10 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00	\$95.00	\$130.00
6	10 YDS	COLD WEATHER PROTECTION	\$8.00	\$7.25	\$6.50

<b>ESTIMATED TOTAL PROPOSAL B:</b>	<b>\$29,960.00</b>	<b>\$30,272.50</b>	<b>\$33,828.75</b>
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<b>ESTIMATED GRAND TOTAL:</b>	<b>\$230,055.00</b>	<b>\$235,512.50</b>	<b>\$266,488.75</b>
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UNLOADING TIME/CU. YD.:	6 Minutes/ cy	6 Minutes	6 Minutes/ yd
MINIMUM LOAD:	1 cy	2 Yards	2 Yards
DELIVERY: After Verbal Request	48 Hr Notice	7AM-5PM	
HOURS OF OPERATION:	7AM-5PM	7AM-5PM	6AM-6PM
24 HRS PHONE NO.	586-484-6804	248-521-9948	734-341-0798
INSURANCE MET:	Y or N	Y	Y
WARRANTY:	Y or N	N/A	NONE
PAYMENT TERMS:		NET 30	NET 30 DAYS
EXCEPTIONS:	Y or N	N	N
ACKNOWLEDGEMENT:	Y or N	Y	Y
FORMS:	Y or N	Y	Y

ATTEST:

Kaitlin Sackner

Kristine Kallek

Ann Lemke

MaryBeth Murz  
Purchasing Manager



**CITY OF TROY  
BID PROPOSAL**

ITB-COT 18-16  
Page 1 of 5

The undersigned proposes to furnish **ONE (1) YEAR REQUIREMENTS OF TRANSIT MIXED CONCRETE WITH AN OPTION TO RENEW FOR ONE (1) ADDITIONAL YEAR**, in accordance with the attached specifications to be considered an integral part of this proposal, at the following prices.

COMPANY NAME: \_\_\_\_\_

**PROPOSAL A – WEEK DAY DELIVERY**

Item	EST QTY (Yds)	Description	Unit Price
1.	800	6 Sack Mix	\$ 111.00 /cu yd
2.	700	7 Sack Mix (High Early)	\$ 118.00 /cu yd
3.	200	12 Hour 300 PSI Mix Flexural Strength/ 7 sack	\$ 124.00 /cu yd
<b>Split Load Charges</b>			
4a.	20 Times	2 Locations	\$ 65.00 ea
4b.	5 Times	3 Locations	\$ 65.00 ea
5.	30 Times	Below Minimum Load Charge	\$ 65.00 ea less than 6 cy
6.	40	Cold Weather Protection	\$ 8.00 /cu yd

**PROPOSAL B – SATURDAY DELIVERY**

Item	EST QTY (Yds)	Description	Unit Price
1.	25	6 Sack Mix	\$ 119.00 /cu yd
2.	100	7 Sack Mix (High Early)	\$ 126.00 /cu yd
3.	100	12 Hour 300 PSI Mix-Flexural Strength/ 7 sack	\$ 132.00 /cu yd
<b>Split Load Charges</b>			
4a.	5 Times	2 Locations	\$ 65.00 ea
4b.	2 Times	3 Locations	\$ 65.00 ea
5.	10 Times	Below Minimum Load Charge	\$ 65.00 ea less than 6 cy
6.	10	Cold Weather Protection	\$ 8.00 /cu yd

Unloading time per cubic yard: 6 minutes / cy  
Minimum load: 1 cy  
Hours of Operation: 7 am - 5 pm (7 am - 11 am Sat)  
24 Hr. Emergency Phone No. 586-484-6804

**PROPOSAL:** Contract is divided into two (2) proposals – Proposal A for week day delivery and Proposal B for Saturday delivery. Please ensure your company quotes accordingly.

**ESTIMATED QUANTITIES:** Quantities stated are estimated and not guaranteed. The quantities stated will be used for award purposes only. The City of Troy will not be penalized for ordering more or less than the stated quantities.

**INFORMATION:** For additional general information or questions about this project, please contact Kaitlin Sackner at (248) 524-3376 between the hours of 8:00 a.m. and 4:30 p.m.

**CURRENCY:** All figures are to be in U. S. Funds.

**DOWNPAYMENTS AND PREPAYMENTS:** Any bid submitted which requires a down payment or prepayment of any kind prior to delivery of material and acceptance, as being in conformance with specifications will not be considered for award.

**AWARD:** It is the intent of the City to qualify one Primary and one Secondary Supplier of Transit Mixed Concrete. In the event the Primary Supplier is unable to deliver material as specified, the Secondary Supplier will be contacted. Award will be made on a low total bid basis using estimated quantities FOR PROPOSAL A ONLY. A primary and secondary Source will be awarded for Proposal A and Proposal B.

The City of Troy reserves the right to award this bid to the lowest total responsible bidder(s) meeting specifications; to reject low bids that have major deviations from specifications, to accept a higher bid that has only minor deviations.

**CONTRACT FORMS:** Bidders should complete the Legal Status of Bidder, Non-Collusion Affidavit, Certification regarding Debarment and the Certification regarding "Iran Linked Business" forms and return with your bid proposal.

**DELIVERY:** The contractor will be notified as to the quantity needed before noon on the day prior to the desired delivery date. Delivery will be expected at the time requested as long as the minimum notification is given. The successful bidder(s) will provide continuous delivery until the order is complete.

**RECIPROCITY:** The City of Troy intends to use reciprocity between the Primary and Secondary Suppliers utilizing one or the other, in the event of a plant closing or inability to meet delivery times. **The suppliers will abide by bid pricing on all items of the contract.**

**APPROVED ALTERNATES:** The City of Troy's designated department representative or his/her designee will review all items submitted for consideration as approved alternates. Their decision as to acceptability will be deemed in the City of Troy's best interest and will be final.

**IMPORTANT:** All City of Troy purchases require a MATERIAL SAFETY DATA SHEET, where applicable, in compliance with the MIOSHA "Right to Know" Law. Please include a copy of any relevant MSDS at the time of bid submission.

**NOTE:** The City of Troy, at their discretion, may require the bidder to supply a Financial Report from an impartial Financial Credit Reporting Service before award of contract.

**REFERENCES:** The City of Troy requires that your company list at least three (3) clients who have recently had similar work performed by your company.

COMPANY: City of Sterling Heights  
ADDRESS: \_\_\_\_\_  
PHONE: 586-446-2424 CONTACT Andrea Bara  
EMAIL: \_\_\_\_\_

COMPANY: Cipparrone Contracting  
ADDRESS: \_\_\_\_\_  
PHONE: 248-424-3888 CONTACT Rob Hallerman  
EMAIL: \_\_\_\_\_

COMPANY: City of Troy  
ADDRESS: \_\_\_\_\_  
PHONE: 248-619-7609 CONTACT Kristine Kallek  
EMAIL: \_\_\_\_\_

COMPANY NAME: Paragon Ready Mix



**INSURANCE REQUIREMENTS:**

Insurance requirements shall be in accordance with the attached **SAMPLE INSURANCE CERTIFICATE** and **ENDORSEMENT**. The required Insurance Certificate and Endorsement must be submitted to the city within 5 days of the verbal/ electronic request after the bid award. The Insurance Certificate and Endorsement may be faxed to the Purchasing Office at (248) 619-7608, and is the only bid document accepted in this format.

The contractor, or any of their subcontractors, shall not commence work under this contract until they have obtained the insurance required, and shall keep such insurance in force during the entire life of this contract. All coverage shall be with insurance companies licensed and admitted to business in the State of Michigan and acceptable to the City of Troy. The requirements below should not be interpreted to limit the liability of the Contractor. All deductibles and self-insured retentions (SIR's) are the responsibility of the Contractor.

- ( ☒ ) We can meet the specified insurance requirements.
- ( ☐ ) We cannot meet the specified insurance requirements.
- ( ☐ ) We do not carry the specified limits but can obtain the additional insurance coverage of \$ \_\_\_\_\_, at the cost of \$ \_\_\_\_\_.  
**NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.
- ( ☐ ) Our proposal is reduced by \$ \_\_\_\_\_ if we lower the requirement to \$ \_\_\_\_\_.  
**NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.

**IMPORTANT:** A Certificate of Insurance on an ACORD Form showing present coverage as well as the required endorsements SHALL be attached to the proposal document at the time of submission of the proposal to the Office of the City Clerk.

**NOTE:** Failure on the part of any bidder to contact his/her insurance carrier to verify that the insurance carried by the bidder meets City of Troy specifications may result in this proposal being completed incorrectly.

**OTHER:** Sole proprietors must execute a certificate of exemption from Worker's Compensation requirements or provide proof of Worker's Compensation Insurance. All coverage shall be with insurance carriers licensed and admitted to do business in Michigan in accordance with all applicable statutes of the State of Michigan and acceptable to the City of Troy.

**INSURANCE VERIFICATION:**

A bidder shall complete the above portion, which details additional costs that may be incurred for specified coverage without purchasing the additional coverage prior to bid submission.

**WORKERS' COMPENSATION INSURANCE,** including Employers' Liability Coverage, in accordance with all applicable statutes of the State of Michigan.

**COMMERCIAL GENERAL LIABILITY INSURANCE** on an "Occurrence Basis" with limits of liability not less than \$1,000,000.00 per occurrence and aggregate. Coverage shall include the following extensions: (A) Contractual liability; (B) Products and Completed Operations; (C) Independent Contractors Coverage; (D) Broad Form General Liability Extensions or equivalent, if not already included; (E) Deletion of all Explosion, Collapse, and Underground (XCU) Exclusions, if applicable.

COMPANY NAME: Paragon Ready Mix

**AUTOMOBILE LIABILITY**, including Michigan No-Fault Coverages, with limits of liability not less than \$1,000,000.00 per occurrence combined single limit for Bodily Injury, and Property Damage. Coverage shall include all owned vehicles, all non-owned vehicles, and all hired vehicles.

**ADDITIONAL INSURED:**

Commercial General Liability and Automobile Liability, as described in the attached SAMPLE shall include an Additional Insured Endorsement stating the following shall be ***Additional Insureds***: The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof. It is understood and agreed by naming the City of Troy as additional insured, coverage afforded is considered to be primary and any other insurance the City of Troy may have in effect shall be considered secondary and/or excess.

**CANCELLATION NOTICE:**

All policies, as described above, shall include an endorsement stating that it is understood and agreed that Thirty (30) days, Ten (10) days for non-payment of premium, Advance Written Notice of Cancellation, Non-Renewal, Reduction, and/or Material Change shall be mailed to:

City of Troy  
Purchasing Manager  
500 West Big Beaver  
Troy, MI 48084

**PROOF OF INSURANCE COVERAGE:**

The Contractor shall provide the City of Troy, at the time that the contracts are returned by him/her for execution, a Certificate of Insurance as well as the required endorsements. In lieu of required endorsements, if applicable, a copy of the policy sections where coverage is provided for additional insured and cancellation notice would be acceptable. Copies or certified copies of all policies mentioned above all shall be furnished, if so requested. If any of the applicable coverages expire during the term of this contract, the Contractor shall deliver renewal certificates and endorsements to the City of Troy at least ten (10) days prior to the expiration date.

**LETTER VERIFICATION:**

The recommended bidder will be notified to submit a letter from the *insurance agent or carrier* that the insurance to be supplied will meet specifications. As an alternative, the recommended bidder may submit the certificate of insurance meeting specifications at this time at his/her option. **The City must receive this letter or certificate within 5 business days after verbal / electronic notification has been delivered to the recommended bidder or the bidder will be considered non-responsive and the bid un-awardable.** This process will occur before presentation of the award recommendation to the Troy City Council.

**FINAL INSURANCE CERTIFICATE SUBMISSION:**

After approval by Troy City Council, the City's Purchasing Manager will review the insurance certificates and endorsements to ensure all acceptable documents have been received and allow (5) business additional days after verbal / electronic notification to submit final insurance certificate(s) in accordance with specifications. The City of Troy reserves the right to WITHHOLD AND KEEP any bid surety for failure to comply. The company will be considered in default of contract and will be barred from doing business with the City of Troy for a minimum of three (3) years for failing to meet insurance requirements.

**LOCAL PREFERENCE:**

The City of Troy reserves the right to award a contract to a local business, one which pays City of Troy taxes (real and/or personal), if the bid of a local vendor is within 5% of the lowest responsive and responsible non-local bidder, then the local vendor is given one chance to match the low bid.

COMPANY NAME: Paragon Ready Mix

**SIGNATURE PAGE**

**PRICES:** Prices quoted shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices are to remain firm for the entire contract period.

The contract contains an option to renew for one additional year through mutual consent, within 90 days of contract termination under the same pricing structure, terms, and conditions. A request by City staff to determine a successful bidder's interest in renewing a contract in no way obligates the City.

**SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE:** Jason Piper

**NOTE:**

The undersigned has checked carefully the bid figures and understands that he/she shall be responsible for any error or omission in this bid offer and is in receipt of all addendum as issued.

COMPANY Paragon Ready Mix

ADDRESS 48000 Hixson Ave. CITY Utica STATE MI ZIP 48317

TELEPHONE NO. (586) 731-8000 FAX NO. (586) 731-5364

REPRESENTATIVE'S NAME Jason Piper

**SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE** Jason Piper (Print)

TERMS Net 30 Days WARRANTY N/A

E-MAIL jpiper@paragonreadymix.com DELIVERY TIME: 48 hr Notice

**EXCEPTIONS:**

Any exceptions, substitutions, deviations, etc. from the City specifications and this proposal must be stated below. The reason for the exception(s), deviation(s), or substitution(s) is an integral part of this bid offer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ACKNOWLEDGEMENT:**

I, Jason Piper, certify that I have read the **Instructions to Bidders** (2 Pages) and that the bid proposal documents contained herein were obtained directly from the City's Purchasing Department or MITN website, www.mitn.info and is an official copy of the Authorized Version.

**SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE** Jason Piper



## Legal Status of Bidder:

The Bidder shall fill out the appropriate form and strike out the other two:

A **corporation** duly organized and doing business under the laws of the State of Michigan for whom Ken Nothst, bearing the office title of President, whose signature is affixed to this proposal, is duly authorized to execute contracts.

A **partnership**, all members of which, with addresses, is:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

AN **INDIVIDUAL**, WHOSE SIGNATURE IS AFFIXED TO THE PROPOSAL:

_____	_____
-------	-------

*[Handwritten signature]*



CITY OF TROY  
OAKLAND COUNTY, MICHIGAN  
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

Ken Neihs, being duly sworn deposed, says that he/she  
(Print Full Name)

is President. The party making the foregoing proposal or bid,  
(State Official Capacity in Firm)

that such bid is genuine and not collusion or sham; that said bidder has not colluded, conspired, connived, or agree, directly or indirectly, with any bidder or person, to put in a sham bid or to refrain from bidding and has not in any manner directly or indirectly sought by agreement or collusion, or communication or conference, with any person to fix the bid price or affiant or any other bidder, or to fix any overhead, profit, or cost element of said bid price, or that of any other bidder, or to secure the advantage against the City of Troy or any person interested in the proposed contract; and that all statements contained in said proposal or bid are true.

  
SIGNATURE OF PERSON SUBMITTING BID

  
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 6 day of MARCH, 2018 in and for OAKLAND  
County.

My commission expires:

3-28-23

MITCH V KURKOWSKI  
Notary Public, State of Michigan  
County of Oakland  
My Commission Expires Mar. 28, 2023  
Acting in the County of MICHIGAN



**CERTIFICATION REGARDING  
DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

The prospective participant certifies, to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in transactions under any non-procurement programs by any federal, state or local agency.
2. Have not, within the three year period preceding, had one or more public transactions (federal, state, or local) terminated for cause or default; and
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) and have not, within the three year period preceding the proposal, been convicted of or had a civil judgment rendered against it:
  - a. For the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction (federal, state, or local), or a procurement contract under such a public transaction;
  - b. For the violation of federal, or state antitrust statutes, including those proscribing price fixing between competitors, the allocation of customers between competitors, or bid rigging; or
  - c. For the commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

I understand that a false statement on this certification may be grounds for the rejection of this proposal or the termination of the award. In addition, the general grant of this authority exists within the City's Charter, Chapter 12, Section 12.2- Contracts.

☒ ***I am able to certify to the above statements.***

Paragon Ready Mix

\_\_\_\_\_  
Name of Agency/Company/Firm *(Please Print)*

Ken Neihsl, President

\_\_\_\_\_  
Name and title of authorized representative *(Please Print)*

\_\_\_\_\_

Signature of authorized representative

3-7-18

\_\_\_\_\_  
Date

☐ ***I am unable to certify to the above statements. Attached is my explanation.***



**VENDOR CERTIFICATION  
THAT IT IS NOT AN  
"IRAN LINKED BUSINESS"**

Pursuant to Michigan law, (the Iran Economic Sanctions Act, 2012 PA 517, MCL 129.311 et seq.), before accepting any bid or proposal, or entering into any contract for goods or services with any prospective Vendor, the Vendor must first certify that it is not an "IRAN LINKED BUSINESS", as defined by law.

Vendor	
Legal Name	Paragon Ready Mix
Street Address	48000 Hixson Ave.
City	Utica
State, Zip	MI, 48317
Corporate I.D. Number/State	
Taxpayer I.D. #	27-1435657

The undersigned, with: 1.)full knowledge of all of Vendors business activities, 2.)full knowledge of the requirements and possible penalties under the law MCL 129.311 et seq. and 3.) the full and complete authority to make this certification on behalf of the Vendor, by his/her signature below, certifies that: the Vendor is NOT an "IRAN LINKED BUSINESS" as require by MCL 129.311 et seq., and as such that Vendor is legally eligible to submit a bid and be considered for a possible contract to supply goods and/or services to the City of Troy.

Signature of Vendor's Authorized Agent: \_\_\_\_\_

Printed Name of Vendor's Authorized Agent: Ken Neihs

Witness Signature: \_\_\_\_\_

Printed Name of Witness: \_\_\_\_\_

Mitch Kurkowski



**CITY OF TROY  
BID PROPOSAL**

ITB-COT 18-16  
Page 1 of 5

The undersigned proposes to furnish **ONE (1) YEAR REQUIREMENTS OF TRANSIT MIXED CONCRETE WITH AN OPTION TO RENEW FOR ONE (1) ADDITIONAL YEAR**, in accordance with the attached specifications to be considered an integral part of this proposal, at the following prices.

COMPANY NAME: SUPERIOR MATERIALS LLC

**PROPOSAL A – WEEK DAY DELIVERY**

Item	EST QTY (Yds)	Description	Unit Price
1.	800	6 Sack Mix	\$ 115 /cu yd
2.	700	7 Sack Mix (High Early)	\$ 121 /cu yd
3.	200	12 Hour 300 PSI Mix Flexural Strength/ 7 sack	\$ 127 /cu yd
<b><u>Split Load Charges</u></b>			
4a.	20 Times	2 Locations	\$ 0 ea
4b.	5 Times	3 Locations	\$ 0 ea
5.	30 Times	Below Minimum Load Charge	\$ 95 - ea
6.	40	Cold Weather Protection	\$ 7.25 /cu yd

**PROPOSAL B – SATURDAY DELIVERY**

Item	EST QTY (Yds)	Description	Unit Price
1.	25	6 Sack Mix	\$ 122 /cu yd
2.	100	7 Sack Mix (High Early)	\$ 128 /cu yd
3.	100	12 Hour 300 PSI Mix-Flexural Strength/ 7 sack	\$ 134 /cu yd
<b><u>Split Load Charges</u></b>			
4a.	5 Times	2 Locations	\$ 0 ea
4b.	2 Times	3 Locations	\$ 0 ea
5.	10 Times	Below Minimum Load Charge	\$ 95 ea
6.	10	Cold Weather Protection	\$ 7.25 /cu yd

Unloading time per cubic yard:

Minimum load:

Hours of Operation:

24 Hr. Emergency Phone No.

6 min  
2 YARDS  
7 am - 5 pm

PAT JOYCE 248-521-9948 JIMMY DAMIAN 248-640-0029

**PROPOSAL:** Contract is divided into two (2) proposals – Proposal A for week day delivery and Proposal B for Saturday delivery. Please ensure your company quotes accordingly.

**ESTIMATED QUANTITIES:** Quantities stated are estimated and not guaranteed. The quantities stated will be used for award purposes only. The City of Troy will not be penalized for ordering more or less than the stated quantities.

**INFORMATION:** For additional general information or questions about this project, please contact Kaitlin Sackner at (248) 524-3376 between the hours of 8:00 a.m. and 4:30 p.m.

**CURRENCY:** All figures are to be in U. S. Funds.

**DOWNPAYMENTS AND PREPAYMENTS:** Any bid submitted which requires a down payment or prepayment of any kind prior to delivery of material and acceptance, as being in conformance with specifications will not be considered for award.



**AWARD:** It is the intent of the City to qualify one Primary and one Secondary Supplier of Transit Mixed Concrete. In the event the Primary Supplier is unable to deliver material as specified, the Secondary Supplier will be contacted. Award will be made on a low total bid basis using estimated quantities FOR PROPOSAL A ONLY. A primary and secondary Source will be awarded for Proposal A and Proposal B.

The City of Troy reserves the right to award this bid to the lowest total responsible bidder(s) meeting specifications; to reject low bids that have major deviations from specifications, to accept a higher bid that has only minor deviations.

**CONTRACT FORMS:** Bidders should complete the Legal Status of Bidder, Non-Collusion Affidavit, Certification regarding Debarment and the Certification regarding "Iran Linked Business" forms and return with your bid proposal.

**DELIVERY:** The contractor will be notified as to the quantity needed before noon on the day prior to the desired delivery date. Delivery will be expected at the time requested as long as the minimum notification is given. The successful bidder(s) will provide continuous delivery until the order is complete.

**RECIPROCITY:** The City of Troy intends to use reciprocity between the Primary and Secondary Suppliers utilizing one or the other, in the event of a plant closing or inability to meet delivery times. The suppliers will abide by bid pricing on all items of the contract.

**APPROVED ALTERNATES:** The City of Troy's designated department representative or his/her designee will review all items submitted for consideration as approved alternates. Their decision as to acceptability will be deemed in the City of Troy's best interest and will be final.

**IMPORTANT:** All City of Troy purchases require a MATERIAL SAFETY DATA SHEET, where applicable, in compliance with the MIOSHA "Right to Know" Law. Please include a copy of any relevant MSDS at the time of bid submission.

**NOTE:** The City of Troy, at their discretion, may require the bidder to supply a Financial Report from an impartial Financial Credit Reporting Service before award of contract.

**REFERENCES:** The City of Troy requires that your company list at least three (3) clients who have recently had similar work performed by your company.

COMPANY: Malcolm County Road Commission  
ADDRESS: Clinton Service Ctr  
PHONE: 586-791-5081 CONTACT: SHAW  
EMAIL: \_\_\_\_\_

COMPANY: CITY OF ROCHESTER HILL / DPW  
ADDRESS: 511 AUBURN RD  
PHONE: 248-877-3222 CONTACT: BOB LAMON  
EMAIL: \_\_\_\_\_

COMPANY: CITY OF STARKING HILLS / DPW  
ADDRESS: \_\_\_\_\_  
PHONE: 586-446-2489 CONTACT: MARK CARUCCI  
EMAIL: \_\_\_\_\_

COMPANY NAME: Superior MATERIALS LLC

**INSURANCE REQUIREMENTS:**

Insurance requirements shall be in accordance with the attached **SAMPLE INSURANCE CERTIFICATE** and **ENDORSEMENT**. The required Insurance Certificate and Endorsement must be submitted to the city within 5 days of the verbal/ electronic request after the bid award. The Insurance Certificate and Endorsement may be faxed to the Purchasing Office at (248) 619-7608, and is the only bid document accepted in this format.

The contractor, or any of their subcontractors, shall not commence work under this contract until they have obtained the insurance required, and shall keep such insurance in force during the entire life of this contract. All coverage shall be with insurance companies licensed and admitted to business in the State of Michigan and acceptable to the City of Troy. The requirements below should not be interpreted to limit the liability of the Contractor. All deductibles and self-insured retentions (SIR's) are the responsibility of the Contractor.

- ☒ We can meet the specified insurance requirements.
- ☐ We cannot meet the specified insurance requirements.
- ☐ We do not carry the specified limits but can obtain the additional insurance coverage of \$ \_\_\_\_\_, at the cost of \$ \_\_\_\_\_.  
**NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.
- ☐ Our proposal is reduced by \$ \_\_\_\_\_ if we lower the requirement to \$ \_\_\_\_\_.  
**NOTE:** Please note the amendments on a sample insurance certificate and attach it to your bid proposal.

**IMPORTANT:** A Certificate of Insurance on an ACORD Form showing present coverage as well as the required endorsements SHALL be attached to the proposal document at the time of submission of the proposal to the Office of the City Clerk.

**NOTE:** Failure on the part of any bidder to contact his/her insurance carrier to verify that the insurance carried by the bidder meets City of Troy specifications may result in this proposal being completed incorrectly.

**OTHER:** Sole proprietors must execute a certificate of exemption from Worker's Compensation requirements or provide proof of Worker's Compensation Insurance. All coverage shall be with insurance carriers licensed and admitted to do business in Michigan in accordance with all applicable statutes of the State of Michigan and acceptable to the City of Troy.

**INSURANCE VERIFICATION:**

A bidder shall complete the above portion, which details additional costs that may be incurred for specified coverage without purchasing the additional coverage prior to bid submission.

**WORKERS' COMPENSATION INSURANCE,** including Employers' Liability Coverage, in accordance with all applicable statutes of the State of Michigan.

**COMMERCIAL GENERAL LIABILITY INSURANCE** on an "Occurrence Basis" with limits of liability not less than \$1,000,000.00 per occurrence and aggregate. Coverage shall include the following extensions: (A) Contractual liability; (B) Products and Completed Operations; (C) Independent Contractors Coverage; (D) Broad Form General Liability Extensions or equivalent, if not already included; (E) Deletion of all Explosion, Collapse, and Underground (XCU) Exclusions, if applicable.

COMPANY NAME: Superior MATERIALS LLC



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
02/27/2018

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 Aon Risk Services, Inc. of Florida 13901 Sutton Park Drive South Suite 360 - Building C Jacksonville FL 32224 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (904) 724-2001	FAX (A/C. No.): (904) 223-0797
INSURED Superior Materials, LLC 30701 W. 10 Mile Suite 500 Farmington Hills MI 48333 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Liberty Mutual Fire Ins Co	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

## COVERAGES

CERTIFICATE NUMBER: 570070306813

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			TB2651291674057	12/01/2017	12/01/2018	EACH OCCURRENCE	\$2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
							MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$2,000,000
							GENERAL AGGREGATE	\$4,000,000
							PRODUCTS - COMP/OP AGG	\$4,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2651291674037	12/01/2017	12/01/2018	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB						EACH OCCURRENCE	
	EXCESS LIAB						AGGREGATE	
	DED							
	RETENTION							
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WA265D291674067	12/01/2017	12/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE-EA EMPLOYEE	\$1,000,000
							E.L. DISEASE-POLICY LIMIT	\$1,000,000

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

## CERTIFICATE HOLDER

## CANCELLATION

Evidence of Insurance Superior Materials, LLC 30701 W. 10 Mile Suite 500 Farmington Hills MI 48333 USA	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  <i>Aon Risk Services Inc. of Florida</i>

Holder Identifier :

Certificate No : 570070306813

**AUTOMOBILE LIABILITY**, including Michigan No-Fault Coverages, with limits of liability not less than \$1,000,000.00 per occurrence combined single limit for Bodily Injury, and Property Damage. Coverage shall include all owned vehicles, all non-owned vehicles, and all hired vehicles.

**ADDITIONAL INSURED:**

Commercial General Liability and Automobile Liability, as described in the attached SAMPLE shall include an Additional Insured Endorsement stating the following shall be ***Additional Insureds***: The City of Troy including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof. It is understood and agreed by naming the City of Troy as additional insured, coverage afforded is considered to be primary and any other insurance the City of Troy may have in effect shall be considered secondary and/or excess.

**CANCELLATION NOTICE:**

All policies, as described above, shall include an endorsement stating that it is understood and agreed that Thirty (30) days, Ten (10) days for non-payment of premium, Advance Written Notice of Cancellation, Non-Renewal, Reduction, and/or Material Change shall be mailed to:

City of Troy  
Purchasing Manager  
500 West Big Beaver  
Troy, MI 48084

**PROOF OF INSURANCE COVERAGE:**

The Contractor shall provide the City of Troy, at the time that the contracts are returned by him/her for execution, a Certificate of Insurance as well as the required endorsements. In lieu of required endorsements, if applicable, a copy of the policy sections where coverage is provided for additional insured and cancellation notice would be acceptable. Copies or certified copies of all policies mentioned above all shall be furnished, if so requested. If any of the applicable coverages expire during the term of this contract, the Contractor shall deliver renewal certificates and endorsements to the City of Troy at least ten (10) days prior to the expiration date.

**LETTER VERIFICATION:**

The recommended bidder will be notified to submit a letter from the *insurance agent or carrier* that the insurance to be supplied will meet specifications. As an alternative, the recommended bidder may submit the certificate of insurance meeting specifications at this time at his/her option. **The City must receive this letter or certificate within 5 business days after verbal / electronic notification has been delivered to the recommended bidder or the bidder will be considered non-responsive and the bid un-awardable.** This process will occur before presentation of the award recommendation to the Troy City Council.


**FINAL INSURANCE CERTIFICATE SUBMISSION:**

After approval by Troy City Council, the City's Purchasing Manager will review the insurance certificates and endorsements to ensure all acceptable documents have been received and allow (5) business additional days after verbal / electronic notification to submit final insurance certificate(s) in accordance with specifications. The City of Troy reserves the right to WITHHOLD AND KEEP any bid surety for failure to comply. The company will be considered in default of contract and will be barred from doing business with the City of Troy for a minimum of three (3) years for failing to meet insurance requirements.

**LOCAL PREFERENCE:**

The City of Troy reserves the right to award a contract to a local business, one which pays City of Troy taxes (real and/or personal), if the bid of a local vendor is within 5% of the lowest responsive and responsible non-local bidder, then the local vendor is given one chance to match the low bid.

COMPANY NAME: \_\_\_\_\_

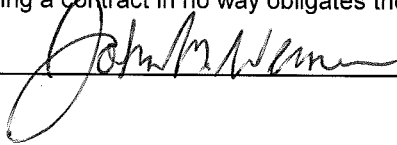
 Superior Materials LLC

### SIGNATURE PAGE

**PRICES:** Prices quoted shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices are to remain firm for the entire contract period.

The contract contains an option to renew for one additional year through mutual consent, within 90 days of contract termination under the same pricing structure, terms, and conditions. A request by City staff to determine a successful bidder's interest in renewing a contract in no way obligates the City.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: \_\_\_\_\_



**NOTE:**

The undersigned has checked carefully the bid figures and understands that he/she shall be responsible for any error or omission in this bid offer and is in receipt of all addendum as issued.

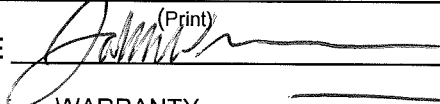
COMPANY Superior Materials LLC

ADDRESS 30701 W 10 Mile CITY FARMINGTON HILL STATE MI ZIP 48333

TELEPHONE NO. (313) 215-1873 FAX NO. (313) 592-9130

REPRESENTATIVE'S NAME JOHN M. WARREN

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE \_\_\_\_\_



TERMS NET 30 WARRANTY \_\_\_\_\_

E-MAIL john.warren@superiormaterials.com DELIVERY TIME: 7am - 5pm  
MT

**EXCEPTIONS:**

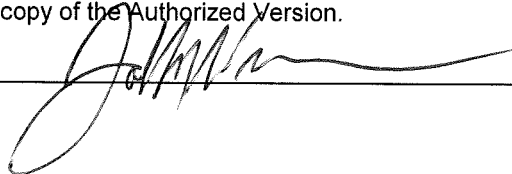
Any exceptions, substitutions, deviations, etc. from the City specifications and this proposal must be stated below. The reason for the exception(s), deviation(s), or substitution(s) is an integral part of this bid offer:

\_\_\_\_\_  
NONE  
\_\_\_\_\_

**ACKNOWLEDGEMENT:**

I, JOHN M. WARREN, certify that I have read the **Instructions to Bidders** (2 Pages) and that the bid proposal documents contained herein were obtained directly from the City's Purchasing Department or MITN website, www.mitn.info and is an official copy of the Authorized Version.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE \_\_\_\_\_





## Legal Status of Bidder:

The Bidder shall fill out the appropriate form and strike out the other two:

A **corporation** duly organized and doing business under the laws of the State of MICH for whom JOHN M. WILSON, bearing the office title of GENERAL MANAGER, whose signature is affixed to this proposal, is duly authorized to execute contracts.

A **partnership**, all members of which, with addresses, is:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

AN **INDIVIDUAL**, WHOSE SIGNATURE IS AFFIXED TO THE PROPOSAL:

_____	_____
-------	-------



CITY OF TROY  
OAKLAND COUNTY, MICHIGAN  
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

JOHN M. WFRANTA, being duly sworn deposed, says that he/she  
(Print Full Name)

is General Manager. The party making the foregoing proposal or bid,  
(State Official Capacity in Firm)

that such bid is genuine and not collusion or sham; that said bidder has not colluded, conspired, connived, or agree, directly or indirectly, with any bidder or person, to put in a sham bid or to refrain from bidding and has not in any manner directly or indirectly sought by agreement or collusion, or communication or conference, with any person to fix the bid price or affiant or any other bidder, or to fix any overhead, profit, or cost element of said bid price, or that of any other bidder, or to secure the advantage against the City of Troy or any person interested in the proposed contract; and that all statements contained in said proposal or bid are true.

John M. Wfranta  
SIGNATURE OF PERSON SUBMITTING BID

X Theresa M. Russell  
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 28 day of FEBRUARY, 2018 in and for OAKLAND  
County.

My commission expires:

2/10/20

THERESA M. RUSSELL  
NOTARY PUBLIC, STATE OF MI  
COUNTY OF OAKLAND  
MY COMMISSION EXPIRES Feb 10, 2020  
ACTING IN COUNTY OF OAKLAND



**CERTIFICATION REGARDING  
DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

The prospective participant certifies, to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in transactions under any non-procurement programs by any federal, state or local agency.
2. Have not, within the three year period preceding, had one or more public transactions (federal, state, or local) terminated for cause or default; and
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) and have not, within the three year period preceding the proposal, been convicted of or had a civil judgment rendered against it:
  - a. For the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction (federal, state, or local), or a procurement contract under such a public transaction;
  - b. For the violation of federal, or state antitrust statutes, including those proscribing price fixing between competitors, the allocation of customers between competitors, or bid rigging; or
  - c. For the commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

I understand that a false statement on this certification may be grounds for the rejection of this proposal or the termination of the award. In addition, the general grant of this authority exists within the City's Charter, Chapter 12, Section 12.2- Contracts.

☒ **I am able to certify to the above statements.**

Superior MATERIALS LLC  
Name of Agency/Company/Firm (Please Print)

John M. Warner GM  
Name and title of authorized representative (Please Print)

[Signature]  
Signature of authorized representative

Date

☐ **I am unable to certify to the above statements. Attached is my explanation.**





**VENDOR CERTIFICATION  
THAT IT IS NOT AN  
"IRAN LINKED BUSINESS"**

Pursuant to Michigan law, (the Iran Economic Sanctions Act, 2012 PA 517, MCL 129.311 et seq.), before accepting any bid or proposal, or entering into any contract for goods or services with any prospective Vendor, the Vendor must first certify that it is not an "IRAN LINKED BUSINESS", as defined by law.

Vendor	
Legal Name	Superior MATERIALS LLC
Street Address	30701 W 10 MIKE STE # 500
City	FARMINGTON HILLS
State, Zip	MI 48333
Corporate I.D. Number/State	ME 016434
Taxpayer I.D. #	59-3838910

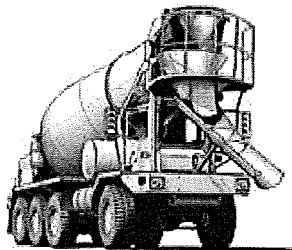
The undersigned, with: 1.) full knowledge of all of Vendors business activities, 2.) full knowledge of the requirements and possible penalties under the law MCL 129.311 et seq. and 3.) the full and complete authority to make this certification on behalf of the Vendor, by his/her signature below, certifies that: the Vendor is NOT an "IRAN LINKED BUSINESS" as require by MCL 129.311 et seq., and as such that Vendor is legally eligible to submit a bid and be considered for a possible contract to supply goods and/or services to the City of Troy.

Signature of Vendor's Authorized Agent: \_\_\_\_\_

Printed Name of Vendor's Authorized Agent: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Printed Name of Witness: \_\_\_\_\_



## Concrete Order Desk

Toll Free 888-988-4400

*SERVING ALL OF SOUTHEASTERN  
MICHIGAN*



## CITY OF TROY READY MIX CONCRETE 2018

### READY MIXED CONCRETE

#### Price List 2018

#### Mix Design Strength (Based on 4" Slump)

MDOT PI 6.0 Sack	\$ 115.00 /cyd
MDOT HE 7.0 Sack	\$ 121.00 /cyd
MDOT 12hr/300 flex 7.0 Sack	\$ 127.00 /cyd

### MINIMUM LOAD CHARGES

1 - 2.75 Cubic Yards	\$ 95.00	5 - 5.75 Cubic Yards	\$ 95.00
3 - 3.75 Cubic Yards	\$ 95.00	6 - 6.75 Cubic Yards	\$ 95.00
1 - 2.75 Cubic Yards	\$ 95.00		

*For deliveries during the period of Frost Law Enforcement, Minimum load cartage charges will apply.*

### ADDITIONAL SERVICE CHARGES

Monday through Friday — loads before 7:00 AM & After 5:00 PM	ADD \$ 7.25 per cubic yard, plus \$2,000.00 Plant opening charge
Saturday — loads between 7:00 AM — 12 Noon	ADD \$ 7.25 per cubic yard, plus \$2,000.00 Plant opening charge if necessary*
Saturday — loads Before 7:00 AM & after 12 Noon	ADD \$ 7.25 per cubic yard, plus \$2,000.00 plant opening charge
* Opening plants for Saturday deliveries is volume dependent with a minimum plant target production level. In the event the minimum target yardage is not obtained the plant opening charge will apply.	
Sunday or Holiday Delivery — all loads	ADD \$ 18.00 per cubic yard, plus \$3,000.00 plant opening charge
Unloading time allowance is 6 minutes per cubic yard	
Unloading time in excess of 6 minutes per cubic yard:	\$ 120.00 / hour (\$ 2.00 per minute)
Split Load (Per extra stop)	\$ 125.00
Extra Load Charge (Applies if customer required 2 loads for orders of 9 yards or under)	Min-Load charges apply
Pump Prime Grout	\$ 209.00
Washout charge — color purchased from Superior Materials	\$ 125.00 / truck
Washout charge — color not purchased from Superior Materials	\$ 200.00 / truck
Fuel Surcharge	Variable rate

### SEALERS, CURING COMPOUNDS, SURFACE TREATMENTS \*\*

**\*\*Properly curing and sealing exterior flatwork is essential for long lasting / durable concrete. Superior Materials will accept no liability for any concrete that has not been properly cured at time of placement. \*\***

*Please contact us for all other Concrete Product Needs*



## CLEAR PLASTIC VISQUEEN

10' x 100' (6 Mil)	\$ 65.00 Each
20' x 100' (6 Mil)	\$ 110.00 Each
24' x 100' (6 Mil)	\$ 130.00 Each

## REINFORCEMENT PRODUCTS

3/8" x 20' (#3) Rebar	\$ 7.50 Each
1/2" x 10' (#4) Rebar	\$ 7.50 Each
1/2" x 20' (#4) Rebar	\$ 13.50 Each
5/8" x 20' (#5) Rebar	\$ 25.00 Each
Commercial Poly Fiber 1.5#	\$ 9.50 /yd
Residential Poly Fiber 1.0#	\$ 9.50 /yd
Steel Fibers	Quoted upon request

## ADMIXTURES

1% Calcium Chloride	\$ 2.55 /yd
2% Calcium Chloride	\$ 5.10 /yd
1% Non-Calcium Chloride Accel.	\$ 7.25 /yd
Mid-Range Water Reducer	\$ 4.75 /yd
Superplasticizer	Quoted Upon Request
Retarder	\$ 5.75 /yd

## EXPANSION JOINT

3" x 1/2" x 5' Fiber	\$ 1.90 Each	8" x 1/2" x 5' Fiber	\$ 4.50 Each
4" x 1/2" x 5' Fiber	\$ 2.60 Each	8" x 1" x 5' Fiber	\$ 9.30 Each
6" x 1/2" x 5' Fiber	\$ 3.75 Each		
6" x 1" x 5' Fiber	\$ 7.60 Each	Zip Strip 1" x 10'	\$ 4.00 Each

## WINTER SERVICE CHARGES

November 1<sup>st</sup> through April 15<sup>th</sup>

Under 6 yards ADD \$ 7.00 per yard plus minimum load charge  
6 yards or more ADD \$ 7.00 per yard

Heated Sand: \$ 6.75 /cyd  
Type III Cement : \$ 9.00 /cyd

*For deliveries during the period of Frost Law Enforcement, Minimum Load Cartage charges will apply.*

## DECORATIVE CONCRETE MATERIALS

*We carry the full line of decorative concrete products. Call for details!*

**SALES TAX:** All sales subject to Michigan Sales Tax unless exemption certificate provided.

**TERMS:** Net 30 days.

A finance charge of 1.5% per month (18% per annum) will be charged on past due accounts.

**THE ABOVE PRICES SHALL APPLY TO ALL JOBS UNLESS SPECIFICALLY QUOTED OTHERWISE.**

**SUPERIOR MATERIALS SHALL NOT BE RESPONSIBLE FOR ANY LOSS OR DAMAGE DUE TO STRIKES, RAW MATERIAL SHORTAGES, FIRE, LOCKOUTS, ACCIDENTS OR ANY OTHER CAUSES BEYOND OUR CONTROL.**

**ALL PRICES SUBJECT TO CHANGE WITHOUT NOTICE.**



500 West Big Beaver  
Troy, MI 48084  
troyml.gov

## CITY COUNCIL AGENDA ITEM

Date: March 12, 2018

To: Mark F. Miller, Acting City Manager

From: MaryBeth Murz, Purchasing Manager *MBM*  
Kurt Bovensiepe, Public Works Director *KB*  
Scott Carruthers, Interim Streets & Drains Operations Manager *SC*

RE: Standard Purchasing Resolution 2: Award to Low Bidders meeting Specifications – Transit Mixed Concrete

### History

- Transit mix concrete is concrete mixed at a plant and brought to a job site by a concrete truck. The Department of Public Works uses transit mixed concrete throughout the year for repairs to the City's infrastructure, which includes sidewalks, curbs, and roads.
- The City of Troy uses the most current mix design to ensure Alkali Silica Reactivity (ASR) is avoided in all new concrete placed.
- Transit mixed concrete is purchased on an as needed basis throughout the year.
- The current contract expires April 30, 2018.

### Purchasing

On March 8, 2018, a bid opening was conducted as required by City Charter and Code for Transit Mixed Concrete. The bid was posted on the Michigan Inter-governmental Trade Network (MITN) website; [www.mitn.info](http://www.mitn.info) and was sent to the Troy Chamber of Commerce. One Hundred and Seventy Two (172) vendors were notified of the bid opportunity via the MITN website. Three (3) bid proposals were received. Below is a detailed summary of potential vendors for both bid opportunities.

Companies notified via MITN	172
Troy Companies notified via MITN	1
Troy Companies notified Active email Notification	1
Troy Companies Active Free	0
Companies that viewed the bid	9
Troy Companies that viewed the bid	0

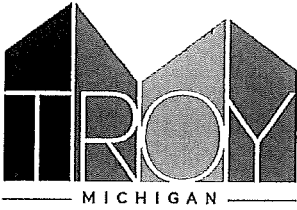
*MITN provides a resourceful online platform to streamline the procurement process, reduce costs, and make it easier and more transparent for vendors to do business with the City of Troy.*

**Active MITN** members with a current membership and paying annual dues receive automatic electronic notification which allows instant access to Bids, RFPS and Quote opportunities with the City.

**Active MITN non-paying members** are responsible to monitor and check the MITN website for opportunities to do business with the City.

**Inactive MITN member** status can occur when a company does not renew their account upon expiration. Inactive members cannot be notified of solicitations or access any bid information.

- The award will include a primary and secondary supplier. In the event the primary supplier is unable to provide materials as specified, the secondary supplier will be contacted.
- The award is contingent upon contractors' submission of properly executed bid documents, insurance certificates, and all other specified documents.



500 West Big Beaver  
Troy, MI 48084  
troymi.gov

## CITY COUNCIL AGENDA ITEM

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### **Financial**

Funds for these materials are available through the Public Works operating budgets.

### **Recommendation**

City management recommends awarding a one (1) year contract to provide Transit Mixed Concrete with an option to renew for one (1) additional year to the low bidder *Paragon Ready Mix of Utica, MI* as the primary supplier and *Superior Materials, LLC or Farmington Hills, MI* as the secondary supplier as per the unit prices listed in the bid tabulation opened March 8, 2018; to be ordered on as needed basis; contracts expiring April 30, 2020.

VENDOR NAME:	Paragon Ready Mix	Superior Materials LLC	McCoig Materials LLC
	Utica, MI	Farmington Hills, MI	Plymouth, MI

PROPOSAL: One-Year Requirements of Transit Mixed Concrete with an Option to Renew for one (1) additional year			
ITEM	QTY	DESCRIPTION	UNIT PRICE
PROPOSAL A: WEEKDAY DELIVERY			
1	800 YDS	6 SACK MIX	\$111.00
2	700 YDS	7 SACK MIX (High Early)	\$118.00
3	200 YDS	12 HR 300 PSI MIX	\$124.00
		Flexural Strength/ 7 sack	
		<b>SPLIT LOAD CHARGES</b>	
4a	20 TIMES	2 LOCATIONS	\$65.00
4b	5 TIMES	3 LOCATIONS	\$65.00
5	30 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00
6	40 YDS	COLD WEATHER PROTECTION	\$8.00
<b>ESTIMATED TOTAL PROPOSAL A:</b>			<b>\$200,095.00</b>
PROPOSAL B: SATURDAY DELIVERY			
1	25 YDS	6 SACK MIX	\$119.00
2	100 YDS	7 SACK MIX (High Early)	\$126.00
3	100 YDS	12 HR 300 PSI MIX	\$132.00
		Flexural Strength/ 7 sack	
		<b>SPLIT LOAD CHARGES</b>	
4a	5 TIMES	2 LOCATIONS	\$65.00
4b	2 TIMES	3 LOCATIONS	\$65.00
5	10 TIMES	BELOW MINIMUM LOAD CHARGE	\$65.00
6	10 YDS	COLD WEATHER PROTECTION	\$8.00
<b>ESTIMATED TOTAL PROPOSAL B:</b>			<b>\$29,960.00</b>
<b>ESTIMATED GRAND TOTAL:</b>			<b>\$230,055.00</b>
UNLOADING TIME/CU. YD.:			
MINIMUM LOAD:			
DELIVERY: After Verbal Request			
HOURS OF OPERATION:			
24 HRS PHONE NO.			
INSURANCE MET: Y or N			
WARRANTY: Y or N			
PAYMENT TERMS:			
EXCEPTIONS: Y or N			
ACKNOWLEDGEMENT: Y or N			
FORMS: Y or N			

ATTEST:

Kaitlin Sackner  
Kristine Kallek  
Ann Lemke



MaryBeth Murz  
Purchasing Manager

**STANDARD PURCHASING RESOLUTION 2 – Award to Low Bidders**  
**Meeting Specifications – Transit Mixed Concrete**

RESOLVED, That Troy City Council hereby awards a one (1) year contract to provide Transit Mixed Concrete with an option to renew for one (1) additional year to the low bidder meeting specifications; *Paragon Ready Mix of Utica, MI* as the primary supplier and *Superior Materials, LLC or Farmington Hills, MI* as the *secondary supplier* as per the unit prices listed in the bid tabulation opened March 8, 2018; to be ordered on as needed basis; contracts expiring April 30, 2020.

BE IT FINALLY RESOLVED, That the awards are contingent upon the contractors' submission of properly executed bid documents, insurance certificates and all other specified requirements.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
3/29/2018

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).

PRODUCER: VTC Insurance Group Troy Office 1175 W. Long Lake Ste. 200 Troy MI 48098-4960	CONTACT NAME: Anne Hallahan PHONE (A/C, No, Ext): (248) 828-3377 E-MAIL: ahallahan@vtcins.com ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Acuity A Mutual Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	FAX (A/C, No): (248) 828-3741 NAIC #: 14184
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## COVERAGES

CERTIFICATE NUMBER: WC cert 4-2018

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	z35177	4/1/2018	4/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
All operations of the named insured.

## CERTIFICATE HOLDER

City of Troy  
500 W. Big Beaver Rd.  
Troy, MI 48084

## 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

Alan Chandler/AHALLA

*Alan P. Chandler*

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AGENCY CUSTOMER ID: 262-068-0

LOC #:



## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY FEDERATED MUTUAL INSURANCE COMPANY		NAMED INSURED PARAGON READY MIX INC 48000 HIXSON AVE SHELBY TOWNSHIP, MI 48317-2731
POLICY NUMBER SEE CERTIFICATE # 28.0		
CARRIER SEE CERTIFICATE # 28.0	NAIC CODE	EFFECTIVE DATE: SEE CERTIFICATE # 28.0

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

THE CITY OF TROY INCLUDING ALL ELECTED AND APPOINTED OFFICIALS , ALL EMPLOYEES AND VOLUNTEERS , ALL BOARDS, COMMISSIONS , AND/OR AUTHORITIES AND COUNCIL MEMBERS, INCLUDING EMPLOYEES AND VOLUNTEERS THEREOF . IT IS UNDERSTOOD AND AGREED BY NAMING THE CITY OF TROY AS ADDITIONAL INSURED  
INSURANCE PROVIDED BY THE GENERAL LIABILITY COVERAGE IS PRIMARY AND NONCONTRIBUTORY OVER OTHER INSURANCE.  
INSURANCE PROVIDED BY THE BUSINESS AUTO LIABILITY IS PRIMARY AND NONCONTRIBUTORY OVER OTHER INSURANCE.  
"FOR REASONS OTHER THAN NON-PAYMENT OF PREMIUM, 30 DAYS NOTICE WILL BE PROVIDED TO THE CERTIFICATEHOLDER IN THE EVENT THAT THE ISSUING COMPANY CANCELS THE POLICY BEFORE THE EXPIRATION DATE OF THE POLICY."

"FOR NON-PAYMENT OF PREMIUM, 10 DAYS NOTICE WILL BE PROVIDED TO THE CERTIFICATEHOLDER."

POLICY NUMBER: 0758759

COMMERCIAL GENERAL LIABILITY  
CG 20 26 04 13

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED - DESIGNATED  
PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

Name Of Additional Person(s) Or Organization(s):	DESCRIPTION OF INTEREST IF APPLICABLE:
CITY OF TROY PURCHASING MANAGER 500 W BIG BEAVER RD TROY MI 48064	ANY COVERAGE PROVIDED BY THIS ENDORSEMENT APPLIES ONLY TO DELIVERY OF CONCRETE TO CITY OF TROY, MI
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

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

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

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

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

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

1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

PARAGON READY MIX INC  
48000 HIXSON AVE  
SHELBY TOWNSHIP MI 48317

FEDERATED INSURANCE COMPANIES

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED ENDORSEMENT**

This endorsement modifies Insurance provided under the following:

**BUSINESS AUTO COVERAGE PART**

**INSURED:**

PARAGON READY MIX INC  
48000 HIXSON AVE  
SHELBY TOWNSHIP MI 48317

1. WHO IS AN INSURED for "bodily injury" and "property damage" liability is amended to include the Additional Insured specified below but only with respect to liability arising out of your operations or premises owned by or rented to you.
2. The Insurance does not apply to "bodily injury" or "property damage" liability arising out of the sole negligence of the Additional Insured named below.
3. We agree to notify the Additional Insured named below at the address stated below of any cancellation of, or material change to, this policy.

Relationship of the Additional Insured to the Insured:

ANY COVERAGE PROVIDED BY THIS ENDORSEMENT APPLIES  
ONLY TO DELIVERY OF CONCRETE TO CITY OF TROY, MI

Additional Insured Name and Address:

CITY OF TROY  
PURCHASING MANAGER  
500 W BIG BEAVER RD  
TROY MI 48064

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CA-F-75 (10-13)

Policy Number: 0758759

Transaction Effective Date: 05-23-2017



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
11/27/2017

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 Aon Risk Services, Inc. of Florida 13901 Sutton Park Drive South Suite 360 - Building C Jacksonville FL 32224 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (904) 724-2001	FAX (A/C. No.): (904) 223-0797
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Superior Materials, LLC 30701 W. 10 Mile Suite 500 Farmington Hills MI 48333 USA	INSURER A: Liberty Mutual Fire Ins Co	23035
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

## COVERAGES

CERTIFICATE NUMBER: 570069299733

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			TB2651291674057	12/01/2017	12/01/2018	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2651291674037	12/01/2017	12/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WA265D291674067	12/01/2017	12/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000

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

City of Troy including Architects and Engineers, all elected and appointed officials, all employees and volunteers, boards, commissions and/or authorities and their board members, employees, and volunteers are included as Additional Insureds in accordance with the policy provisions of the General Liability and Automobile policies. General Liability and Automobile evidenced herein is Primary to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. General Liability and Automobile evidenced herein is Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. A waiver of Subrogation is granted in favor of additional insureds in accordance with the policy provisions of the General Liability, Automobile and Workers Compensation policies. 30

## CERTIFICATE HOLDER

## CANCELLATION

City of Troy 4693 Rochester Road Troy, MI 48085 USA	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  <i>Aon Risk Services Inc. of Florida</i>

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ACORD 25 (2016/03)

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Holder Identifier :

Certificate No : 570069299733

**ADDITIONAL REMARKS SCHEDULE**

Page \_ of \_

AGENCY Aon Risk Services, Inc. of Florida		NAMED INSURED Superior Materials, LLC	
POLICY NUMBER See Certificate Number: 570069299733			
CARRIER See Certificate Number: 570069299733	NAIC CODE	EFFECTIVE DATE:	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Description of Operations / Locations / Vehicles:

days notice of cancellation except 10 days for non-payment of premium.



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
11/27/2017

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).

<b>PRODUCER</b> Aon Risk Services, Inc. of Florida 13901 Sutton Park Drive South Suite 360 - Building C Jacksonville FL 32224 USA		<b>CONTACT</b> NAME: PHONE (A/C. No. Ext.): (904) 724-2001 FAX (A/C. No.): (904) 223-0797 E-MAIL ADDRESS:	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Superior Materials, LLC 30701 W. 10 Mile Suite 500 Farmington Hills MI 48333 USA		<b>NAIC #</b>	
		INSURER A: Liberty Mutual Fire Ins Co 23035	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

**COVERAGES**

CERTIFICATE NUMBER: 570069299734

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			T82651291674057	12/01/2017	12/01/2018	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			A52651291674037	12/01/2017	12/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in MI) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WA265D291674067	12/01/2017	12/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000

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

Certificate Holder including all elected and appointed officials, all employees and volunteers, all boards, commissions, and/or authorities and council members, including employees and volunteers thereof are included as Additional Insured in accordance with the policy provisions of the general liability and automobile liability policies. General liability and automobile liability evidenced herein is Primary to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. General liability and automobile liability evidenced herein is Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

**CERTIFICATE HOLDER****CANCELLATION**

City of Troy ATTN: Kristine Kallel 500 W. Big Beaver Road Troy MI 48084 USA	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  <i>Aon Risk Services Inc. of Florida</i>

Holder Identifier :

Certificate No : 570069299734

**ADDITIONAL REMARKS SCHEDULE**

Page \_ of \_

AGENCY Aon Risk Services, Inc. of Florida		NAMED INSURED Superior Materials, LLC	
POLICY NUMBER See Certificate Number: 570069299734			
CARRIER See Certificate Number: 570069299734	NAIC CODE	EFFECTIVE DATE:	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Description of Operations / Locations / Vehicles:

30 days notice of cancellation except 10 days for non-payment of premium.