

a) **Standard Purchasing Resolution 2: Sole Bidder Meeting Specifications – Thermal Imaging Cameras for the Fire Department**

Resolution #2018-09-132-J-4a

RESOLVED, That Troy City Council hereby **AWARDS** a contract to the sole bidder meeting specifications; *Dinges Fire Company of Amboy, IL* to purchase (13) Bullard QXT Thermal Imaging Cameras for the Fire Department bid as specified and as needed over two fiscal years – (7) in 2019 and (6) in 2020 – for an estimated total cost of \$93,587.00; at the unit prices as contained in the bid tabulation opened August 16, 2018, a copy of which shall be **ATTACHED** to the original Minutes of this meeting, the cost of which shall not exceed annual budgetary limitations; with the contract expiring June 30, 2020.

BE IT FURTHER RESOLVED, That the award is **CONTINGENT** upon the contractor's submission of properly executed bid and proposal documents, including insurance certificates and all other specified requirements.

PURCHASE ORDER

Ship To

CITY OF TROY
Fire
500 W BIG BEAVER RD
TROY, MI 48084

Bill To

CITY OF TROY
Fire
500 W BIG BEAVER RD
TROY, MI 48084

No. 2019-00000401

DATE: 09/20/2018

PAGE: 1 of 1

FOB DESTINATION

VENDOR NO. 173022

Vendor

DINGES
243 EAST MAIN ST
AMBOY, IL 61310

EXPIRATION DATE

06/30/2019

COUNCIL RESOLUTION

2018-09-132-J-4A

INSTRUCTIONS

Return to Department

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
7	Each	THERMAL IMAGING CAMERAS FOR THE FIRE DEPARTMENT	7,199.0000	\$50,393.00
		Bullard QXT Thermal Imaging Cameras shall include truck mounted charger and retract strap for each Thermal Imaging Camera.		
7	Each	2018 TRADE-IN	(500.0000)	(\$3,500.00)
		2018 Less trade-in of (7) functioning cameras at \$500. each.		

Entered By: Tonya Braden

Special Instructions:

\$46,893.00

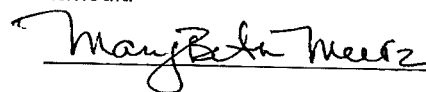
CITY COUNCIL AWARD DATE 9/10/18. CERTIFICATE OF INSURANCE AND ENDORSEMENT SHALL BE ON FILE FOR DURATION OF INSTALL. DELIVER as per all Bid Specifications in accordance with ITB-COT 18-39. This Purchase Order is for year one (1) of a potential two (2) year contract.

TERMS & CONDITIONS

1. Purchases of Municipalities are exempt from State Sales and Federal Excise Taxes.
2. 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.
3. 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.
4. 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.


MaryBeth Meers

Opening Date 08/16/2018
Reviewed Date: 08/16/2018

CITY OF TROY
BID TABULATION
NEW THERMAL IMAGING CAMERAS - FD

ITB-COT 18-39
Pg. 1 of 1

Vendor Name: Dinges Fire Company
Amboy, IL

PROPOSAL: FURNISH NEW THERMAL IMAGING CAMERAS FOR THE CITY OF TROY FIRE DEPARTMENT.

EST QTY	DESCRIPTION	UNIT COST	TOTAL COST
6	NEW Bullard QXT Thermal Imaging Cameras (2018-2019 Purchase)	\$7,199.00	\$43,194.00
6	NEW Bullard QXT Thermal Imaging Cameras (2019-2020 Purchase)	7,199.00	\$43,194.00
Estimated Grand Total:		<u>\$86,388.00</u>	

EST QTY	DESCRIPTION	Trade-In Unit Value	
6	TRADE-IN ISG K1000 Thermal Imaging Cameras with batteries (2018-2019 Purchase)	\$500 Functioning Non-Functioning	\$250
6	TRADE-IN ISG K1000 Thermal Imaging Cameras with batteries (2019-2020 Purchase)	\$500 Functioning Non-Functioning	\$250
Can provide onsite training:		Y	
Is an approved Bullard Distributor for MI		Y	
Contact Name:		Scott Spearin	
24 Hr. Phone #:		(815) 857-2000	
Hours of Operation:		blank	
References:		Y	
Insurance Met:		Yes or No	Y
Payment Terms:		Net 30	
Exceptions:		Yes or No	Y
Acknowledgement:		Yes or No	Y
Forms:		Yes or No	Y

ATTEST:

Peter Hullinger
Susan Riesterer
Tonya Braden
Kristine Kallek



MaryBeth Murz,
Purchasing Manager



**CITY OF TROY
BID PROPOSAL**

ITB-COT 18-39
Page 1 of 6

The undersigned proposes to furnish **NEW THERMAL IMAGING CAMERAS FOR THE CITY OF TROY FIRE DEPARTMENT**, in accordance with the bid specifications attached hereto, which are to be considered an integral part of this proposal, at the following prices:

COMPANY NAME: DINGES FIRE

PROPOSAL: FURNISH TWO (2) YEAR REQUIREMENTS FOR NEW THERMAL IMAGING CAMERAS FOR THE CITY OF TROY FIRE DEPARTMENT.

A. Bullard QXT Thermal Imaging Cameras shall include truck mounted charger and retract strap for each Thermal Imaging Camera. Pricing shall be for 2 years 2018 & 2019. Shall be an approved Bullard Distributor for Michigan. NO ALTERNATIVES ACCEPTED; BID AS SPECIFIED.

Qty.	Description	Unit Price	Extension
6	Bullard QXT Thermal Imaging Cameras (2018-2019 Purchase)	7199.00	43,194.00
6	Bullard QXT Thermal Imaging Cameras (2019-2020 Purchase)	7199.00	43,194.00
Grand Total			86,388.00

B. Trade in for ISG K1000 Thermal Imaging Cameras with batteries - State TRADE-IN VALUE at current market value for current department Thermal Imaging Cameras with batteries. Quantities are estimates and may vary.

Description	Trade-In Unit Value
ISG K1000 Thermal Imaging Cameras with batteries (2018-2019 Trade-In)	\$500 - Functioning \$250 - Non Functioning
ISG K1000 Thermal Imaging Cameras with batteries (2019-2020 Trade-In)	\$500 - Functioning \$250 - Non Functioning

NOTE: 1. City of Troy Fire Department shall purchase a minimum of 6 cameras and a maximum of 14 within 2 years. Number of cameras to be purchased per year will vary determined by the amount of Trade-In value.

NOTE: 2. City of Troy Fire Department Trade-In cameras will be a 1 for 1 Trade-In after each NEW camera is purchased directly from the awarded vendor. Stated Trade-In value shall be honored for the 2 year contract.

The undersigned, as bidder, declares that he/she has examined the specifications, including related documents. New Bullard QXT Thermal Imaging Cameras for the City of Troy Fire Department in accordance with the attached bid specifications. **NO SUBSTITUTES OR ALTERNATES WILL BE ACCEPTED.**

NOTE:

Include all delivery costs, handling and packaging in the unit cost (each) price.

COMPANY NAME: DINGES FIRE

DISTRIBUTOR:

Must be an approved Bullard Distributor for Michigan.

- ☒ Our company is an approved Bullard Distributor for Michigan.
() Our company is not an approved Bullard Distributor for Michigan.

UNIT PRICES:

Unit prices prevail. The City of Troy Purchasing Department will correct all mathematical errors.

ONSITE TRAINING:

The awarded bidder shall be required to provide onsite training of Thermal Imaging Cameras as specified and a Company Representative to attend meetings at each Fire Station for all 180 members of the Troy Fire Department. Onsite training shall be done Monday or Tuesday nights from 7-10 pm at the various six (6) stations.

- ☒ Our company is able to provide onsite training for the Thermal Imaging Cameras for the City of Troy.
() Our company is not able to provide onsite training for the Thermal Imaging Cameras for the City of Troy.

ESTIMATED QUANTITIES:

Quantities stated are estimated and not guaranteed, but will be used for award purposes. The City of Troy will not be penalized for ordering more or less than the stated quantities. It is the intent to purchase the minimum quantities stated or more.

ADDITIONAL INFORMATION:

For questions about the specifications, please contact Lieutenant Peter Hullinger at (248) 524-3417 between the hours of 8:00 AM and 4:00 PM, Tuesday through Friday.

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:

All items will be FOB delivered inside, freight paid to the Troy FIRE Department, 500 W. Big Beaver Rd., Troy, MI 48084, Attn: Lieutenant Peter Hullinger.

DOWN-PAYMENTS OR PREPAYMENTS:

Any bid proposal submitted which requires a down-payment or prepayment prior to delivery and full acceptance of the item(s) as being in conformance with specifications will not be considered for award.

AWARD:

The evaluation and award of this bid shall be a combination of factors, including but not limited to: cost, professional competence, warranties, and the correlation of the proposal submitted to the needs of the City of Troy.

The City of Troy reserves the right to award this bid to the lowest responsible bidder meeting specifications to reject low bids which have major deviations from the specifications; to accept a higher bid which has only minor deviations, in whatever manner is deemed to be in the City of Troy's best interest.

COMPANY NAME:

DINGES FIRE

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.

DOWN PAYMENTS AND PREPAYMENTS:

Any proposal submitted which requires a down payment or prepayment of any kind prior to delivery and acceptance of the items as being in conformance with specifications will not be considered for award.

ALTERNATES:

No substitutes or alternates will be accepted.

DESCRIPTIVE LITERATURE:

Please attach descriptive or pertinent literature specification or cut sheet(s) relevant to your company's bid proposal at the time of bid submission. It is attached and marked prod info for identification.

PURCHASE ORDER:

After approval of the successful bidder by the Troy City Council, the purchase order issued from the City of Troy will create a bilateral contract between the parties and commit the successful bidder to perform the contract in accordance with specifications. A contract document/ agreement will not be issued.

CONTACT INFORMATION:

Name(s): Scott Spearin 24 Hr. Phone No. _____
Email: SSpearin@dingesfire.com Phone No. 810-599-9035
Hours of operation: _____

REFERENCES

Please list at least three (3) FIRE departments that have had similar work completed by your company.

COMPANY: City of Clawson FD
ADDRESS: 425 N. Main St. Clawson, MI.
CONTACT: Rick Dylewski PHONE: 248-435-4500 x 11
EMAIL: rick.dylewski@clawsonfire.com

COMPANY: Livonia FD
ADDRESS: 14910 Farmington Rd. Livonia, MI.
CONTACT: Dave Bostater PHONE: 734-466-2356
EMAIL: bostaterboys@msn.com

COMPANY: Novi FD
ADDRESS: 45175 Ten Mile Rd. Novi MI. 48375
CONTACT: Joe Moranti PHONE: _____
EMAIL: Smoranti@cityofnovi.org

WARRANTY

State Warranty: 5 years

COMPANY NAME: DINGES FIRE

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. *★ - except product liabilities*
() We cannot meet the specified insurance requirements. *Call Nick Dinges to discuss 815-703-6140*
() 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: DINGES FIRE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/31/2018

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 Marsh USA Inc. Attn: Leslie A. Kress Six PPG Place, Suite 400 Pittsburgh, PA 15222-5499 (412) 552-5249 06441 Globe-CAS-18-19	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL: ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A : Travelers Property Casualty Co. Of America INSURER B : The Travelers Indemnity Company INSURER C : INSURER D : INSURER E : INSURER F : NAIC # 25674 25658
INSURED Globe Manufacturing Company, LLC Globe Holding Company, LLC 37 Loudon Road P.O. Box 128 Pittsfield, NH 03263	

COVERAGES **CERTIFICATE NUMBER:** CLE-006292268-01 **REVISION NUMBER:** 4

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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			660-8K206939	04/15/2018	04/15/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS HIRER AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			TC2J CAP 134D0846-18	05/01/2018	05/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DEF. RETENTIONS CLAIMS-MADE			EX-8K209014	04/15/2018	04/15/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B 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 <input checked="" type="checkbox"/> N	N/A	TC2K UB 134D0809-18 TRJ UB 134D0822-18 SIR: \$500,000	05/01/2018 05/01/2018	05/01/2019 05/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER

CANCELLATION

City of Cedar Rapids Attn: Luanno Carter, Purchasing Services 101 1st Street SE Cedar Rapids, IA 52401	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 of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i>
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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.

COMPANY NAME:

DINGES FIRE

SIGNATURE PAGE

PRICES:

Prices shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder whose prices shall remain firm for the entire contract period which shall commence on the date of award and expire June 30, 2020.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE:

Scott Spearin

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 addenda as issued.

TAX ID#: 75-3080331

COMPANY NAME: DINGES FIRE

ADDRESS 243 East Main St CITY AMBOY STATE FL ZIP 61310

PHONE NUMBER 815-857-2000 FAX NUMBER _____

REPRESENTATIVE'S NAME Scott Spearin

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE Scott Spearin (Print)

PAYMENT TERMS: Net 30 WARRANTY: 5 YEAR MANUFACTURERS WARRANTY

E-MAIL: SSpearin@dingesfire.com DELIVERY DATE: 9-15-18

EXCEPTIONS:

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

products liability insurance



Check this box if your bid is not to be broken up by item and based on an all or none award.

ACKNOWLEDGEMENT:

I, Scott Spearin, 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: Scott Spearin

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 at no cost to the City.

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

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



Legal Status of Bidder:

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

DINGES FIRE

A **corporation** duly organized and doing business under the laws of the State of IL for whom Scott Spearin, bearing the office title of Sales Representative 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:

_____	_____
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CITY OF TROY
OAKLAND COUNTY, MICHIGAN
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

Scott Spearin, being duly sworn deposed, says that he/she
(Print Full Name)
is DINGES FIRE SALES Representative. 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.

Scott Spearin
SIGNATURE OF PERSON SUBMITTING BID

Melissa M. Wood
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 15th day of
August, 2016 in and for
Washtenaw 2018
County.

My commission expires:

May 1, 2019

MELISSA M. WOOD
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF INGHAM
My Commission Expires May 1, 2019
Acting in the County of Washtenaw



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.

BINGES FIRE

Name of Agency/Company/Firm (Please Print)

Scott Sparin - Sales Rep.

Name and title of authorized representative (Please Print)

Scott Sparin

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	DINEGES FIRE
Street Address	243 EAST MAIN ST.
City	AMBOY
State, Zip	IL, 61310
Corporate I.D. Number/State	
Taxpayer I.D. #	75-3080331

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:

Scott Spearin

Printed Name of Vendor's Authorized Agent:

Scott Spearin

Witness Signature:

McLissa M. Wood

Printed Name of Witness:

McLissa M. Wood



QXT Thermal Imager Bid Specifications

I. Warranty

The manufacturer shall make standard a warranty for the thermal imager, all features and accessories installed in the thermal imager to be free of defects in material and workmanship, under normal use and service, for a period of five years. As part of this warranty, the manufacturer must provide free inbound and outbound shipping for transport within the continental United States for all repair service. The manufacturer must provide a warranty which covers all required battery replacements for a period of five years. In addition, the imager's housing shall carry a limited lifetime warranty.

II. Service

The manufacturer must be located in the U.S.A. and provide a full-service repair center in the U.S.A. to ensure timely and efficient processing of any service related issues concerning the imager. Warranty repairs must carry a guaranteed 48-hour turnaround (2 full business days from the time of receipt at the service center to the time that the manufacturer ships the imager). Non-warranty repairs must carry a guaranteed 48-hour (2 full business days) turnaround from the time the manufacturer receives purchase order authorization to complete the repairs to the time the manufacturer ships the imager.

III. Standards / Quality

The manufacturer must ensure quality design and manufacturing methods through third party certification to ISO 9001, or its equivalent. To ensure that the product is of the highest quality, documentation must be presented upon request illustrating a battery of tests that have been conducted to verify water resistance, heat resistance, and shock/impact resistance.

The imager must be suitable for use in Class I, Division 2, Groups C and D hazardous locations.

IV. Physical Configuration

The imager shall be a hand-held design with a total weight not exceeding 2.4 pounds (1.1 kg) with all standard features installed. The imager's physical dimensions shall not exceed 5.4 (137 mm) tall, 4.6 (117 mm) wide, and 8.2 (208 mm) long. The imager shall ship in a reusable delivery case.

V. Durability

The imager shall remain operational after being submerged under 3 feet of water for 30 minutes. The imager shall withstand a 2-meter drop in any orientation and sustain no operational damage. The imager shall be able to withstand an environment temperature of 350° F (177° C) for 15 minutes without operational impact or damage to the unit. The manufacturer must perform these tests in front of designated department representatives at a mutually determined time and location. Failure to perform these tests in front of designated department representatives shall constitute non-compliance with this portion of the specification.

VI. Technology

The imaging array shall utilize a 240x180 or 320x240 pixel uncooled vanadium oxide (VOx) focal plane array. The Noise Equivalent Temperature Difference (NETD) shall be less than 30 mK. The imager shall exhibit an ability to evade whiteout when pointed directly at flames. The detector shall operate with core temperature ranges of -40°F to 175°F (-40°C to 79°C). The dynamic range of the detector and associated electronics shall be nominally 1100°F (592°C). The detector spectral response shall be 7 to 14 microns. Mid-wave or short-wave infrared products that operate below this portion of the infrared spectrum (below 7.5 microns) are not acceptable due to unreliable performance in smoky conditions. The frame rate of the infrared engine shall be no less than 60 Hertz.

VII. Image Colorization

In order to provide a greater degree of safety, the imager shall utilize a tri-color automatic colorization mode. This colorization mode shall utilize a yellow/orange/red color scheme. The display will show yellow colorization at temperatures of 500°F (260°C) to 799°F (426°C), orange colorization at temperatures of 800°F (427°C) to 999°F (537°C), and red colorization at temperatures of 1000 °F (538°C) or hotter. Such colorization shall be graduated in nature so as to be able to discern scene details such as visible thermal flows through the color. The imager shall employ one single colorization scheme of yellow/orange/red which does not vary with ambient thermal energy. Color palettes which colorize objects that are below 500° F are not acceptable. This requirement does not apply to the Manual Colorization Mode (see Switches).



VIII. Outer Housing

The imager shall be ergonomically designed and the outer shell or housing must be manufactured from heat-resistant Ultem® thermoplastic. Due to the likelihood of rigorous use, the thermoplastic must be molded with color pigment throughout to mask small surface scratches. Outer shells or housings which are painted or otherwise lacking consistent color through their entire thickness are not acceptable.

IX. Colors

The imager shall be available in no fewer than eight scratch-resistant colors to allow for color-coding as needed by the department. All lower housings shall be presented in black, with the upper housing to include options for the following colors at minimum: Red (default configuration), Metallic Blue, Yellow, Black, White, Orange, Blue, and Lime-Yellow.

X. Monitor/Screen

The imager shall have a 3.5" (89 mm) diagonal LED backlit Liquid Crystal Display (LCD) screen. The display shall consist of no less than 76,800 pixels for high quality resolution. The screen must be visible in thick smoke to the operator while using it at arms-length. In addition, a clear polycarbonate cover must protect the display screen. This cover must be field-replaceable and watertight.

XI. Lens

The imager shall possess an f/1.3 lens fabricated of germanium and have no less than a 31° (V) x 40° (H) field of view. The lens shall be protected with a watertight, sealed 2 mm thick germanium cover window.

XII. Visual Indicators

The imager shall have a battery status indicator on the viewing display to reduce imager size. Battery indicators that are not located on the display, such as separate LED based indicators, are unacceptable as they increase imager size. The imager shall be capable to provide, on the viewing display, surface temperature measurement of objects. The imager must be able to provide simultaneous presentation of bar graph and numeric temperature indicators as well as separate presentation of either indicator. The imager shall provide on-screen indication when manual colorization mode is engaged and when the DVR is recording (if so equipped).

XIII. Switches, Features, and Modes of Operation

The imager shall use only one switch to activate the unit. The switch shall employ an electronic press-and-hold protection mechanism which prevents accidental shut-off. Additionally, the imager must utilize a pair of switches which enable the activation and adjustment of a manual colorization mode, an internally installed Digital Video Recorder (DVR), and/or digital zoom, as applicable to the imager's installed configuration.



XIII. Switches, Features, and Modes of Operation (cont.)

As an option or upgrade, the imager must be available with a manual colorization mode which helps the user identify the hottest objects in a scene irrespective of absolute heat levels. This colorization mode must be manually adjustable by the user and colorize the hottest objects in a scene with blue, using gradients of blue so as to discern scene details through the color. Thermal imagers which employ yellow, orange, or red to identify hot objects for a manual colorization mode are not acceptable as they can easily be confused with the automatic colorization modes which typically use such colors to designate fire and high heat conditions.

As an option or upgrade, the imager must be available with a digital zoom feature for better view of scene details. The zoom feature should offer 2X and 4X magnification options.

As an option or upgrade, the imager must be available with an internally housed Digital Video Recorder (DVR) which enables the recording of thermal imaging video to the internal memory of the thermal imager. The DVR must be manually operable by the user enabling activation and deactivation with a button press. The DVR must be capable of recording 5.5 hours of video in 720 x 480 resolution. Stored digital video shall download to the user's computer via USB connection. A time and date stamp shall be displayed at the beginning of recorded video for documentation purposes. Attachable DVRs are not acceptable as they increase total size and weight.

XIV. Strap Systems

To reduce bulk, the imager must not have an integral strap system; however, the imager shall accommodate an available self-retracting strap. This retractable strap shall be attachable to a D-ring at the base of the thermal imager, under the display, and must be capable of holding the unit to the firefighter's body with the full weight of the imager, with battery, hanging unsupported from the strap. All straps must be field replaceable.

XV. Power Supply

When fully charged, the imager shall provide a minimum of 6 hours of continuous use with the DVR recording.

XVI. Operation

The imager must be fully operational no more than four seconds after activating the power switch. The imager must not have a standby switch or mode.

XVII. Truck Mount

The manufacturer must offer a truck mounted charging system to mount the imager and internal charging system in a vehicle or fire apparatus or on the wall of a fire station. The system must be compliant to NFPA 1901 when properly mounted in a vehicle or fire apparatus. The truck mount must carry a one-year warranty.



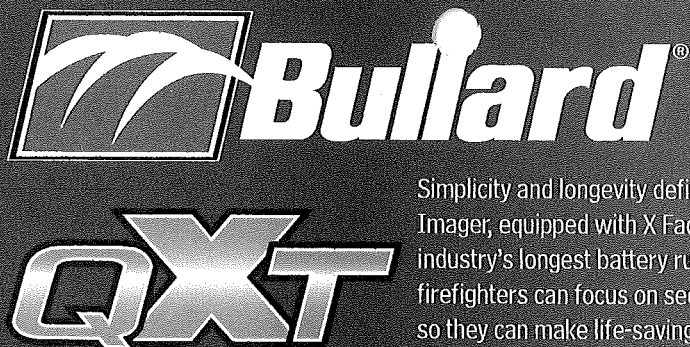
Americas:
Bullard
 1898 Safety Way
 Cynthiana, KY 41031-9303 • U.S.A.
 Toll-free within U.S.A.: 877-BULLARD (285-5273)
 Tel: +1-859-234-6616
 Fax: +1-859-234-8987

Europe:
Bullard GmbH
 Lilienthalstrasse 12
 53424 Remagen • Germany
 Tel: +49-2642 999980
 Fax: +49-2642 9999829

Asia-Pacific:
Bullard Asia Pacific Pte. Ltd.
 LHK Building
 701, Sims Drive, #04-03
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 Tel: +65-6745-0556
 Fax: +65-6745-5176



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 Ultem is a registered trademark of General Electric.



Simplicity and longevity define the Bullard QXT Thermal Imager, equipped with X Factor technology and the industry's longest battery run time. With the QXT, firefighters can focus on seeing the most critical details so they can make life-saving decisions while in the heat of the fire.



INNOVATIONS for the Fire Service

The Bullard QXT is designed not only for long-lasting service on the front line but also low total cost of ownership in the back office. It is purpose-built for today's fire service including the industry's:

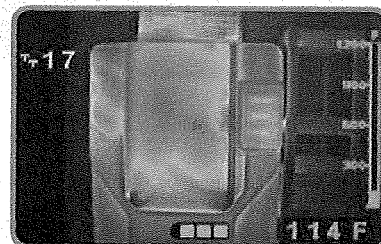
- Longest battery run time
- Best image quality
- Most desired form factor
- First wireless charging systems
- Proven durability
- Leading warranty

Unmatched PERFORMANCE

The image clarity you have come to expect from the X Factor Family is further refined in the QXT. Equipped with an ultra-high performance LCD display that greatly increases brightness and contrast, the QXT lets firefighters see more clearly in smoke and direct sunlight. Bullard's QXT can exceed eight hours of continuous run time for the ultimate performance in fire conditions.

ADVANCED Features

The Bullard QXT is loaded with advanced features including Super Red Hot colorization, intuitively highlighting high-heat scenes in brilliant shades of yellow, orange, and red, and temperature measurement in numeric and relative heat indicator formats. Optional features include Bullard's exclusive Electronic Thermal Throttle®, which enables firefighters to optimize scenes with the touch of a button, 2X/4X Digital Zoom that allows firefighters to get closer to the action, and Bullard's SceneCatcher Digital Video Recorder that allows firefighters to capture five hours of video and store hundreds of still images.



Electronic Thermal Throttle®

SIMPLE Operation

Like the popular LDX, Bullard's QXT is distinguishable from other thermal imagers by its uniquely focused compact ergonomics designed specifically for the fire service. The imager's power button design enables easy powering on and off with a gloved hand. Additionally, multiple colors are available for departmental identification. The wireless charging systems are compact, simple, and allow for easy continuous use.

Bullard TOUGH

The QXT is built Bullard Tough for the way firefighters work. The imager comes **standard** with a five-year, industry-leading warranty not only on the QXT but also on the battery.



SEE THE CLARITY.





Prod. INFO 4

Technical Specifications

Physical

Configuration	Small Handheld Thermal Imager
Weight (w/ battery)	2.4 lbs. (1.09 kg)
Dimensions	H 5.4" (137 mm), W 4.6 (117 mm), L 8.2" (208 mm)
Housing Material	Ultem® Thermoplastic
Upper Housing Colors	Red (standard), Metallic Blue, Blue, Yellow, Lime-Yellow, Orange, White, Black
Lower Housing Color	Black

Electrical

Power Source	Lithium-ion Rechargeable Battery
Battery Capacity	6400 mAh
Battery Cycles	> 800 @ 70% Capacity
Start-up Time	< 4 Seconds
Operating Time	>6 hours (with or without DVR operating); 7-8 hours in routine conditions
Recharge Time	5 hours from fully depleted

Infrared Detector

Detector Type	Microbolometer
Detector Sensing Material	Vanadium Oxide
Detector Resolution	320 x 240 or 240 x 180
Spectral Response	7-14 μ
Update Rate	60 Hz
NETD	< 30 mK
Dynamic Range	1100° F
Pixel Pitch	17 μ m
Video Polarity	White-Hot

Lens

Material	Germanium
Field of View	31° V x 40° H
Focus	1 m to ∞
Speed	f/1.3

Display

Type	Digital, Liquid Crystal Display (LCD)
Size	3.5" (89 mm) Diagonal TFT Active Matrix
Pixel Format	RGB
Brightness	500 cd/m2 (minimum)
Contrast Ratio	350:1 (typical)
Viewing Angle (Typical)	Top = 60°, Bottom = 40°, Left / Right = 60°

Standard Features

Temperature Measurement	Numeric and Bar Style
Super Red Hot Colorization	Engages automatically above 500°F

Optional Features and Accessories (if so equipped)

Electronic Thermal Throttle	Blue Hot Spot Colorization (Manually activated)
Digital Zoom	2X/4X
SceneCatcher	Digital Video Recorder (DVR)
Video Format	NTSC
Video File Type	AVI
Video Image Size	720 x 480
Video Record Time	5.5 hours
Connection	Micro USB
Retract Strap	
Hard Case	

Charging Systems

Wireless Desktop Charging System (standard)
Wireless Truck Mount Charger (optional)

Performance

500° F (260° C) Heat Resistance	5 minutes with no damage to electronics
300° F (150° C) Heat Resistance	15 minutes of continued operation with no damage
-4° F (-20° C) Cold Resistance	Continued operation
Water Resistance	IP67
Impact Resistance	2 meter drops on concrete with no damage
Hazardous Locations	NEC/CEC Class 1, Division 2 ANSI/ISA-12.12.01-2015 CSA-C22.2 No. 60079-0:15 IEC 60079-0:2011, MOD IP6X (ANSI/IEC 60529)
Encapsulation	FCC 47 CFR Part 15B EN 55022:2006
Radiated Emissions	IEC 61000-6-1:2005 EN 55024:2010
Electromagnetic Immunity	UN/DOT 38.3 IEC 62133 2nd edition
Internal Battery	

Warranty

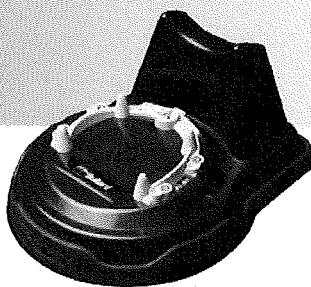
Five (5) years on both thermal imager and battery



Accessories



Wireless Truck Mount Charger



Wireless Desktop Charger (included as standard)



Retract Strap

Americas:
Bullard
1898 Safety Way
Cynthiana, KY 41031-9303 • USA
Toll-free within USA: 877-BULLARD (285-5273)
Tel: +1-859-234-6616
Fax: +1-859-234-8987

Europe:
Bullard GmbH
Lilienthalstrasse 12
53424 Remagen • Germany
Tel: +49-2642 999980
Fax: +49-2642 9999829

Asia-Pacific:
Bullard Asia Pacific Pte. Ltd.
LHK Building
701, Sims Drive, #04-03
Singapore 387383
Tel: +65-6745-0556
Fax: +65-6745-5176

www.bullard.com

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Electronic Thermal Throttle is a registered trademark of Bullard.
Ultem is a registered trademark of General Electric.
85574 (11/16)



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Date: August 22, 2018

To: Mark F. Miller, City Manager

From: MaryBeth Murz, Purchasing Manager *MBM*
David Roberts, Fire Chief
Peter Hullinger, Staff Lieutenant *PH*

Subject: Standard Purchasing Resolution 2 - Sole Bidder meeting Specifications – Thermal Imaging Cameras for the Fire Department

History

The Fire Department uses many different tools for firefighting operations. Thermal Imaging Cameras, in particular, have been invaluable tools that allow firefighters to “see” through smoke and dark environments in order to locate people and pets who may be unconscious and trapped, and concealed fires that may be burning inside of walls and floors. The Fire Department first bought thermal imaging cameras in the late 1990’s at a very high cost. In 2006, these cameras were upgraded to a newer, lighter version with better vision and resolution. Since then, however, camera technology within the industry has improved and become less expensive.

Over the last year, the Fire Department’s safety committee has been meeting with vendors and researching the latest available thermal imaging cameras. The committee developed a list of features and functions that they felt were best suited for our department. They narrowed the list down to two cameras that then were field tested on fire calls, and again by all six fire stations at seven separate live fire evolutions at OCC’s CREST facility. Once, these evolutions were completed, evaluations were tabulated. The Bullard QXT Thermal Imager was rated as the highest in all aspects.

One of the key points of the Bullard QXT is that it has a 5 year warranty on all parts as well as the battery which will have a much lower cost of ownership impact on the Fire Department. Not only are the batteries the most common maintenance issue and associated costs with the current cameras, but they also lack the latest technology and have now reached their end of life. The new thermal imagers will replace the current cameras which will be traded-in.

Purchasing

- On August 16, 2018 a bid opening was conducted as required by the City Charter/Code to furnish new thermal Imaging Cameras for the City of Troy Fire Department. The bid was posted on the Michigan Intergovernmental Trade Network (MITN); www.mitn.info. Eighty two (82) vendors were notified via the MITN website.
- One (1) bid was received. Dinges Fire Company of Amboy, IL is the sole bidder meeting specifications.
- Below is a detail summary of the vendor responses.



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Purchasing (continued)

Companies notified via MITN	82
Troy Companies notified via MITN	2
Troy Companies - Active email Notification	2
Troy Companies - Active Free	0
Companies that viewed the bid	22
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.

Financial

Funds to purchase Thermal Imaging Cameras are budgeted in Account #101.336.338.7740.115, Operating Supplies-Fire Equipment, for fiscal year 2019.

Recommendation

City staff recommends awarding a contract to the sole bidder meeting specifications, *Dinges Fire Company of Amboy, IL*, to purchase (13) Bullard QXT Thermal Imaging Cameras for the Fire Department bid as specified and as needed over two fiscal years – (7) in 2019 and (6) in 2020 – for an estimated total cost of **\$93,587.00**.

expiring June 30, 2020.

STANDARD PURCHASING RESOLUTION 2 – Award to Sole Bidder meeting Specifications – Thermal Imaging Cameras for the Fire Department

RESOLVED, That Troy City Council hereby **AWARDS** a contract to the sole bidder meeting specifications; *Dinges Fire Company of Amboy, IL* to purchase (13) Bullard QXT Thermal Imaging Cameras for the Fire Department bid as specified and as needed over two fiscal years – (7) in 2019 and (6) in 2020 – for an estimated total cost of **\$93,587.00**; at the unit prices as contained in the bid tabulation opened August 16, 2018, a copy of which shall be **ATTACHED** to the original Minutes of this meeting, the cost of which shall not exceed annual budgetary limitations; with the contract expiring June 30, 2020.

BE IT FURTHER RESOLVED, That the award is CONTINGENT upon the contractor's submission of properly executed bid and proposal documents, including insurance certificates and all other specified requirements.



EDBULLA-01

LDOCHARME

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/16/2018

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 License # 1780862 HUB International New England 300 Ballardvale Street Wilmington, MA 01887	CONTACT NAME:	
	PHONE (A/C, No, Ext): (978) 657-5100	FAX (A/C, No): (978) 988-0038
INSURED E.D. Bullard Company 1898 Safety Way Cynthiana, KY 41031-0160	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Admiral Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

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
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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CA00000579914	10/01/2017	10/01/2018	EACH OCCURRENCE \$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$ 2,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$
	DED <input type="checkbox"/> RETENTION \$						AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER

CANCELLATION

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

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/13/2018

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 PETERSON INSURANCE SERVICES, INC 117 W Main ST P O Box 377 Clinton IL 61727	CONTACT NAME: Michele Sanders, CISR PHONE (A/C, No, Ext): (217) 935-6605 FAX (A/C, No): (217) 935-3028 E-MAIL ADDRESS: michele@peterson.insurance																					
INSURED Dinges Partners Group LLC 243 E Main St. Amboy IL 61310	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Cincinnati Specialty Underwriters</td><td>13037</td></tr><tr><td>INSURER B:</td><td>Cincinnati Insurance Company</td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Cincinnati Specialty Underwriters	13037	INSURER B:	Cincinnati Insurance Company		INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER B:	Cincinnati Insurance Company																					
INSURER C:																						
INSURER D:																						
INSURER E:																						
INSURER F:																						

COVERAGES**CERTIFICATE NUMBER:** CL1881304664**REVISION NUMBER:**

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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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CSU0106526	10/30/2017	10/30/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ Excluded
B	<input checked="" type="checkbox"/> 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	Y		ENP0461772	10/30/2017	10/30/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						COMBINED SINGLE LIMIT EACH OCCURRENCE \$ AGGREGATE \$
B	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	EWC0461778	10/30/2017	10/30/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 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)

Certificate holder is listed as

ADDITIONAL INSURED/PRIMARY AND NON/CONTRIBUTORY in respects to General Liability. 30 day notice of cancellation applies.

CERTIFICATE HOLDER**CANCELLATION**City of Troy Purchasing Manager
500 West Big Beaver

Troy

MI 48084

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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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY

P.O. Box 145496, CINCINNATI, OH 45250-5496

POLICY CHANGE ENDORSEMENT

Attached to and forming part of POLICY NUMBER: CSU0106526

Policy Change Endorsement Number: 5

NAMED INSURED AND MAILING ADDRESS:

Dinges Partners Group, LLC

Refer to Named Insured Schedule CSIA 409

243 E MAIN ST

AMBOY IL 61310

PRODUCER - Your contact for matters pertaining to this policy:

Starkey Insurance Agency

12-119

117 W Main St

Clinton IL 61727-1696

Broker: 1897317

CSU Producer Resources, Inc.

6200 South Gilmore Road

Fairfield, OH 45014-5141

Scott Hintze

Effective Date of Policy Change: 08/17/2018

Signature of authorized representative or countersignature,
where applicable: IL20180107233

	ADDITIONAL PREMIUM	RETURN PREMIUM
Policy Change Premium	\$50.00	\$.00
Terrorism Risk Insurance Extension Act	\$.00	\$.00
Surplus lines taxes	\$2.00	\$.00
Stamping fee	\$.00	\$.00
Other taxes or fees	\$.00	\$.00
TOTAL DUE:	\$52.00	\$.00

NET TOTAL	\$52.00	\$.00
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TYPE OF CHANGE	COVERAGE	DESCRIPTION
Add	Additional Insured	City of Troy Purchasing Manager per CSIA405 Attached
Add	Forms	Earlier Notice of Cancellation per CSGA4094 Attached

The policy is changed as described in this endorsement. All other terms and conditions are unchanged.

CSIA 411 01 11

Page 1 of 1

EARLIER NOTICE OF CANCELLATION OR NONRENEWAL BY US TO A DESIGNATED ENTITY

This endorsement modifies insurance provided under the following:

**COMMERICAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS COVERAGE PART**

SCHEDULE

Designated Entity:
City of Troy Purchasing Manager

Mailing Address:
500 W. Big Beaver
Troy
MI
48084

Cancellation Notification - Number of Days: 30

The following notice of cancellation condition is added only for the person or organization designated in the Schedule above.

If we cancel or nonrenew this policy for any statutorily permitted reason other than nonpayment of premium we will mail notice to the person or organization shown in the Schedule above. We will mail such notice at least the number of days shown in the Schedule before the effective date of the cancellation or nonrenewal.

If we cancel this policy for nonpayment of premium, we will mail notice to the person or organization shown in the schedule above. We will mail such notice for nonpayment of premium at least 10 days before the effective date of cancellation.

When notice is mailed, proof of mailing to the mailing address shown in the Schedule will be sufficient proof of notice.

In no event will coverage extend beyond the actual expiration, termination or cancellation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
ADDITIONAL INSURED – YOUR OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERICAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization (Additional Insured):

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

- 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 to the extent that the liability for "bodily injury or "property damage" is caused solely by your negligent acts, errors or omissions in the performance of ongoing operations for additional insured shown in the schedule.

- B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury" or "property damage" to any employee of you or to any obligation of the additional insured to indemnify another because of damages arising out of such injury.
2. "Bodily injury" or "property damage" for which the Named Insured is afforded no coverage under this policy of insurance.

- C.** With respect to the insurance afforded to these additional insureds, **SECTION III - LIMITS OF INSURANCE** is amended to include:

The limits applicable to the additional insured are those specified in any written contract or agreement or in the Declarations of this Coverage Part, whichever is less. If no limits are specified in a written contract or agreement, the limits applicable to the additional insured are those specified in the Declarations of this Coverage Part. The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

- D.** With respect to the insurance afforded to these additional insureds, **SECTION IV - COMMERCIAL GENERAL LIABILITY CON-**

DITIONS, 4. Other Insurance is amended to include:

Any coverage provided herein will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless you have agreed in a written contract or written agreement executed prior to any loss that this insurance will be primary. This insurance will be noncontributory only if you have so agreed in a written contract or written agreement executed prior to any loss and this coverage is determined to be primary.

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**THE
CINNATI INSURANCE COMPANIES**

☒ THE CINNATI INSURANCE COMPANY ☐ THE CINNATI INDEMNITY COMPANY
☐ THE CINNATI CASUALTY COMPANY

Named Insured: DINGES PARTNERS GROUP LLC

Policy Number: ENP 046 17 72 / EBA 046 17 72

Policy Period: 10-30-2017 to 10-30-2020

Effective Date of Change: 08-17-2018

Endorsement Number: 11

**Agency Name: STARKEY INSURANCE AGENCY 12-119
CLINTON, IL**

RECEIVED

AUG 27 2018

PETERSON INSURANCE

Explanation of Billing

A change was recently made to your policy with The Cincinnati Insurance Companies. Attached to this summary is the endorsement that amends your policy.

The additional premium for this endorsement is \$ 25
This premium is for the time period of **08-17-2018 to 10-30-2018**. You will receive a statement based on the payment option you have selected.

Please contact your agency if you have any questions concerning your policy or statement:

**STARKEY INSURANCE AGENCY
P.O. BOX 377
CLINTON, IL 61727-0377**

217-935-2111

This is not a bill. No payment is necessary at this time.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GENERAL CHANGE ENDORSEMENT

Attached to and forming part of:

Auto / Garage

Policy Number EBA 046 17 72

All Other

Policy Number ENP 046 17 72

Effective Date

of Endorsement 08-17-2018

Issued to DINGES PARTNERS GROUP LLC

Agent STARKEY INSURANCE AGENCY 12-119

CLINTON, IL

Endorsement # 11

PREMIUM INFORMATION

Additional Premium Due at Endorsement Effective Date REFER TO IA4319

Subsequent Monthly Installments Increased by

\$ _____

Revised Monthly Installment Payment(s)

\$ _____

It is agreed that the policy is amended as indicated by ☒

☐ Policy Installment Premium Amended to:

☐ Annual

☐ Semi-Annual

☐ Quarterly

☐ Named Insured

☐ Mailing Address

☐ Form(s) Added

☐ Form(s) Deleted

All Other Reason for Change

Auto / Garage Reason for Change

AMENDING PER REVISED AA4183

ADDING AA4004

08-23-2018 09:38

IA 4329 12 09

Page 1 of 1

AUTOMOBILE SCHEDULE

ITEM THREE

Attached to and forming a part of Policy Number EBA 046 17 72, effective 08-17-2018

The insurance afforded for any automobile is only with respects to such and so many of the coverages as are indicated by specific premium charge or charges indicated.

POLICY LIMITS

State: IL

Bodily Injury: 1,000,000 CSL

Property Damage: INCLUDED

UM/UIM: 1,000,000

Med Pay 5,000

Veh.

No. Vehicle Information

1	2012 CHEVROLET SILVERADO S/N 1GC4K1C81CF168394	Class: 03199 Territory 134
	OTC-COMP DED: 250	Coll Ded: 500 T/L LIMIT 100
		COST NEW: 45,885 ZIP CODE: 61310
	BI PD MP OTC COLL UM	
	659 INCL 34 158 375 59	
	T/L	TOTAL
	20	1,305
2	2006 FOREST RIVER TRAILER S/N 5NEUEH6266N055314	Class: 68199 Territory 134
	OTC-COMP DED: 250	Coll Ded: 500
		COST NEW: 3,500 ZIP CODE: 61310
	BI PD MP OTC COLL UM	TOTAL
	51 INCL 3 15 15 INCL	84
3	2007 WELLS CARGO TRAILER S/N 1WC200E2071118456	Class: 68199 Territory 134
	OTC-COMP DED: 250	Coll Ded: 500 T/L LIMIT 100
		COST NEW: 8,000 ZIP CODE: 61310
	BI PD MP OTC COLL UM	
	44 INCL 3 25 30 INCL	
	T/L	TOTAL
	20	122
4	2003 CHEVROLET SUBURBAN S/N 1GNFK16Z53J161658	Class: 03199 Territory 134
	OTC-COMP DED: 250	Coll Ded: 500 T/L LIMIT 100
		COST NEW: 39,006 ZIP CODE: 61310
	BI PD MP OTC COLL UM	
	657 INCL 34 91 157 59	
	T/L	TOTAL
	20	1,018

AUTOMOBILE SCHEDULE

ITEM THREE (CONTINUED)

5	1999 CHEVROLET SILVERADO S/N 2GCEK19TXX1264991					Class: 03199 Territory 134
	OTC-COMP DED: 250					Coll Ded: 500 T/L LIMIT 100
						COST NEW: 19,600 ZIP CODE: 61310
	BI	PD	MP	OTC	COLL	UM
	545	INCL	34	71	107	59
	T/L					TOTAL
	20					836
6	2018 RAM PROMASTER 3500 S/N 3C7WRVLG9JE111373					Class: 03199 Territory 134
	OTC-COMP DED: 250					Coll Ded: 500 T/L LIMIT 100
						COST NEW: 38,681 ZIP CODE: 61310
	BI	PD	MP	OTC	COLL	UM
	748	INCL	34	171	392	59
	T/L					TOTAL
	20					1,424
7	2018 RAM PROMASTER 3500 S/N 3C7WRVLG5JE111371					Class: 03199 Territory 134
	OTC-COMP DED: 250					Coll Ded: 500 T/L LIMIT 100
						COST NEW: 38,681 ZIP CODE: 61310
	BI	PD	MP	OTC	COLL	UM
	748	INCL	34	171	392	59
	T/L					TOTAL
	20					1,424
	ADDITIONAL INTEREST - DESIGNATED PERSON OR ORGANIZATION					Class: Territory
	OTC-COMP DED: N/A					Coll Ded: N/A
	BI	PD	MP	OTC	COLL	UM
	50	INCL				
						TOTAL
						50
	HIRED AND NON-OWNED					Class: Territory
	OTC-COMP DED: N/A					Coll Ded: N/A
	BI	PD	MP	OTC	COLL	UM
	119	INCL	N/A			58
						TOTAL
						177
	HIRED AUTO PHYSICAL DAMAGE LIMIT: 25,000					Class: Territory
	OTC-COMP DED: 250					Coll Ded: 500
	BI	PD	MP	OTC	COLL	UM
				34	51	
						TOTAL
						85

AUTOMOBILE SCHEDULE

ITEM THREE (CONTINUED)

SYMBOLS:

BI	-- Bodily Injury	SPEC	-- Specified Perils
PD	-- Property Damage	COLL	-- Collision
MP	-- Medical Payments	UM	-- Uninsured Motorists
OTC	-- Other Than Collision (ACV Coverage applies unless Stated Amount Value is indicated)	UIM	-- Underinsured Motorists
CAC	-- Combined Additional Coverage	PIP	-- Personal Injury Protection
FT&S	-- Fire, Theft, and Supplemental	T&L	-- Towing and Labor Costs
		RR	-- Rental Reimbursement

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED
PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective: 08-17-2018	Policy Number: EBA 046 17 72
Named Insured: DINGES PARTNERS GROUP LLC	
Countersigned by:	

(Authorized Representative)

The person or organization named in the following schedule is an "insured" to the extent of their liability for the conduct of another "insured" as provided in **SECTION II - LIABILITY COVERAGE, A. Coverage, 1. Who is an Insured, Paragraph c.**

Schedule

Additional Insured

CITY OF TROY PURCHASING MANAGER

Address:

500 W BIG BEAVER RD
TROY, MI 48084-5254