

b) **Standard Purchasing Resolution 2: Award to Low Bidder Meeting Specifications – Fertilizer/Herbicide Application Services**

Resolution #2019-02-022-J-4b

RESOLVED, That Troy City Council hereby **AWARDS** a three (3) year contract for Fertilizer/Herbicide Application Services to the low bidder meeting specifications, *Green Meadows Lawnscape of Rochester Hills, MI*, for an estimated annual cost of \$24,402.40, not to exceed budgetary limitations at the unit prices contained in the bid tabulation; a copy of which shall be **ATTACHED** to the original Minutes of this meeting, with the contract expiring December 31, 2021.

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

BLANKET ORDER

No. 2019-00001116

DATE: 03/18/2019

PAGE: 1 of 1

FOB DESTINATION

Ship To

CITY OF TROY
Building Operations
4693 ROCHESTER ROAD
TROY, MI 48085

Bill To

CITY OF TROY
Building Operations
4693 ROCHESTER ROAD
TROY, MI 48085

VENDOR NO. 163038

Vendor

GREEN MEADOWS LAWNSCAPE INC
2359 AVON INDUSTRIAL DRIVE
ROCHESTER HILLS, MI 48309

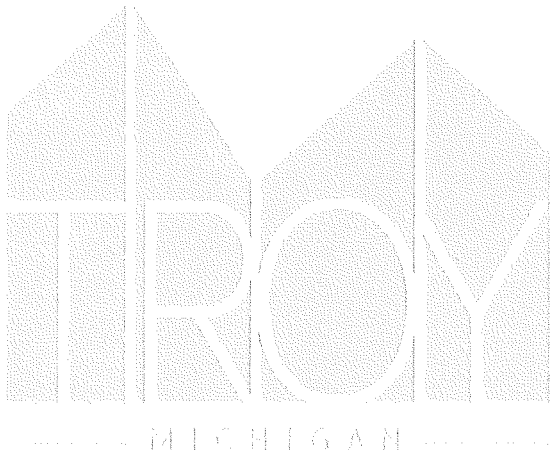
EXPIRATION DATE

12/31/2019

COUNCIL RESOLUTION

2019-02-022-J-4b

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
2	Each	Proposal A - Spring/Fall Application	5,321.8000	\$10,643.60
4	Each	Proposal B - Athletic Field Applications	3,439.7000	\$13,758.80
				

Entered By: MaryBeth Murz

\$24,402.40

Special Instructions:

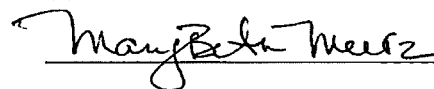
CITY COUNCIL AWARD DATE: 2/25/2019. Furnish Year ONE of THREE Contract to provide Fertilizer /Herbicide Application services in accordance with the Bid Specifications for ITB-COT 19-01 as per all bid specifications and bid pricing. CERTIFICATE OF INSURANCE and ENDORSEMENT shall be on file for duration of 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.



**CITY OF TROY
BID TABULATION
FERTILIZER/HERBICIDE APPLICATION SERVICES**

VENDOR NAME:			Green Meadows Lawnscape	Custom Lawn care
			Rochester Hills, MI	Flint, MI
CHECK #:			#30895150	#1698022
			CHECK AMOUNT:	\$1,500.00
PROPOSAL: FURNISH THREE (3)YEAR REQUIREMENTS OF FERTILIZER/HERBICIDE APPLICATION SERVICES IN ACCORDANCE WITH THE SPECIFICATIONS.				
PROPOSAL A:			Cost per Acre per Application	
90.2 Acres	2019	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
90.2 Acres	2020	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
90.2 Acres	2021	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
ESTIMATED THREE (3) YEAR PROPOSAL A TOTAL:			\$31,930.80	\$34,090.19
PROPOSAL B:			Cost per Acre per Application	
58.3 Acres	2019	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
58.3 Acres	2020	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
58.3 Acres	2021	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
ESTIMATED THREE (3) YEAR PROPOSAL B TOTAL:			\$41,276.40	\$44,067.80
ESTIMATED ANNUAL ONE (1) YEAR GRAND TOTAL PROPOSAL A & B:			\$24,402.40	\$26,052.66
ESTIMATED GRAND TOTAL 3-YEARS PROPOSALS A & B:			\$73,207.20	\$78,157.99
INSURANCE:			Yes	Yes
PROPOSED Pre-emergent Herbicide(s)				
MSDS Sheets: Y or N			Yes	Yes
PROPOSED Broadleaf Herbicide(s)				
MSDS Sheets Y or N			Yes	Yes
SITE INSPECTION:				
Y/N			Yes	Yes
DATE			Several Times	Mar-13
CONTACT INFORMATION:				
Hours of Operation			7AM-6PM	8am-7pm
24HR Contact #			586.707.1499	810.730.9150
PROGRESS PAYMENTS:			Blank	Net 30
PAYMENT TERMS:			30 Days	Net 30
EXCEPTIONS:			None	None
MICHIGAN BUSINESS PESTICIDE LICENSE#:			#630375	#250008
BIDDER'S GENERAL QUESTIONNAIRE:			Yes	Yes
REFERENCES:			Yes	Yes
ACKNOWLEDGEMENT:			Yes	Yes

ATTEST:
Susan Reisterer
Kristine Kallek

MaryBeth Murz,
Purchasing Manager

**CITY OF TROY
BID TABULATION
FERTILIZER/HERBICIDE APPLICATION SERVICES**

ITB-COT 19-01

Pg 2 of 2

VENDOR NAME:	Owen Tree Service	United Lawnscape, LLC
	Attica, MI	Washington, MI
CHECK #:	#1849922	#1144370240
CHECK AMOUNT:	\$1,500.00	\$1,500.00

PROPOSAL: FURNISH THREE (3) YEAR REQUIREMENTS OF FERTILIZER/HERBICIDE APPLICATION SERVICES IN ACCORDANCE WITH THE SPECIFICATIONS.

PROPOSAL A:			Cost per Acre per Application	
90.2 Acres	2019	Spring Application Liquid Weed & Feed	\$99.00	\$115.00
		Fall Application Liquid Weed & Feed	\$99.00	\$115.00
90.2 Acres	2020	Spring Application Liquid Weed & Feed	\$100.48	\$125.00
		Fall Application Liquid Weed & Feed	\$100.48	\$125.00
90.2 Acres	2021	Spring Application Liquid Weed & Feed	\$101.99	\$140.00
		Fall Application Liquid Weed & Feed	\$101.99	\$140.00
ESTIMATED THREE (3) YEAR PROPOSAL A TOTAL:			\$54,385.19	\$68,552.00

PROPOSAL B:			Cost per Acre per Application	
58.3 Acres	2019	Early Spring Application Fertilizer & Pre-Emergent	\$111.10	\$115.00
		Spring Application Liquid Weed & Feed	\$111.10	\$115.00
		Summer Application Fertilizer & Grub Control	\$111.10	\$115.00
		Fall Application Liquid Weed & Feed	\$111.10	\$115.00
58.3 Acres	2020	Early Spring Application Fertilizer & Pre-Emergent	\$112.77	\$125.00
		Spring Application Liquid Weed & Feed	\$112.77	\$125.00
		Summer Application Fertilizer & Grub Control	\$112.77	\$125.00
		Fall Application Liquid Weed & Feed	\$112.77	\$125.00
58.3 Acres	2021	Early Spring Application Fertilizer & Pre-Emergent	\$114.46	\$140.00
		Spring Application Liquid Weed & Feed	\$114.46	\$140.00
		Summer Application Fertilizer & Grub Control	\$114.46	\$140.00
		Fall Application Liquid Weed & Feed	\$114.46	\$140.00
ESTIMATED THREE (3) YEAR PROPOSAL B TOTAL:			\$78,898.56	\$88,616.00
ESTIMATED ANNUAL ONE (1) YEAR GRAND TOTAL PROPOSAL A & B:			\$43,768.12	\$47,564.00
ESTIMATED GRAND TOTAL 3-YEARS PROPOSALS A & B:			\$133,283.74	\$157,168.00

INSURANCE:	Yes	Yes
PROPOSED Pre-emergent Herbicide(s)		
MSDS Sheets: Y or N	Yes	Yes
PROPOSED Broadleaf Herbicide(s)		
MSDS Sheets Y or N	Yes	Yes
SITE INSPECTION:		
Y/N	No	Yes
DATE		Multiple Occassions
CONTACT INFORMATION:		
Hours of Operation	7AM-5PM	9AM-5PM
24HR Contact #	810-614-1063	586-651-2239
PROGRESS PAYMENTS:		
PAYMENT TERMS:	Net 30	Net30
EXCEPTIONS:	None	None
MICHIGAN BUSINESS PESTICIDE LICENSE#:	440003	500104
BIDDER'S GENERAL QUESTIONNAIRE:	Yes	Yes
REFERENCES:	Yes	Yes
ACKNOWLEDGEMENT:	Yes	Yes

Low Bidder meeting Specifications.



**CITY OF TROY
BID PROPOSAL**

ITB-COT 19-01
Page 1 of 7

The undersigned proposes to furnish **THREE YEAR REQUIREMENTS OF FERTILIZER / HERBICIDE APPLICATION SERVICES** in accordance with the attached specifications, which are to be considered an integral part of this proposal at the following prices.

COMPANY NAME: GREEN MEADOWS LAWNSCAPE

Proposals		Description	Pricing	Pricing	Pricing
Estimated Quantity		In accordance with the attached specifications	Cost per acre per application	Cost per acre per application	Cost per acre per application
			2019	2020	2021
A	90.2 acres	Spring Application Liquid Weed and Feed	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>
		Fall Application Liquid Weed and Feed	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>
B	58.3 acres	Early Spring Application Fertilizer and Pre-Emergent	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>
		Spring Application Liquid Weed and Feed	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>
		Summer Application Fertilizer and Grub Control	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>
		Fall Application Liquid Weed and Feed	\$ <u>59.00</u>	\$ <u>59.00</u>	\$ <u>59.00</u>

Note: The number of applications may be increased depending upon weather conditions.

UNIT PRICES:

Unit prices (cost per acre) shall prevail. The City of Troy Purchasing Department will correct all extension errors.

ACREAGE:

The City of Troy reserves the right to add or delete acreage depending upon need. Even though the acreage figures are reasonably accurate, the totals may vary and are therefore estimated. It is important that each bidder verify the sites.

INFORMATION:

For general information or questions about the specifications, please contact **Dennis Trantham**, Facilities and Grounds Operations Manager at 248-524-3503 or Dennis.Trantham@troymi.gov between the hours of 8:00 a.m. to 4:00 p.m., Monday through Friday.

COMPANY NAME: GREEN MEADOWS LAWNSCAPE

ESTIMATED QUANTITIES:

Quantities stated are estimated and good faith estimates of the amount of work required. The City will not be penalized for requiring more or less than the stated quantities. The City will pay the quoted price for all work completed during the entire contract period if additional areas and or applications are required. The quantities stated will be used for award purposes only. The quantity of fertilizer/herbicide used will be in accordance with the specifications and meet all parameters of the specifications.

APPLICATION SERVICES:

Application of product shall be in accordance with manufacturer's instructions and all local, state, and/or federal regulations. The city designee will assist the Contractor to develop the application schedules for the respective locations with the successful bidder(s).

SITE INSPECTION:

Bidders should examine the sites to determine the amount of work to be done in accordance with the specifications. If a bidder does not make a site inspection, that bidder accepts full responsibility and risk for any omissions in his/her bid proposal. Contact **Dennis Trantham** at **(248) 524-3503** to arrange a site visit at the various locations or request additional information between the hours of 8:00 am-4:00 pm, Monday through Friday.

- (☒) Our company visited the sites on SEVERAL TIMES.
- (☐) Our company did not visit the sites.

BIDDER'S GENERAL QUESTIONNAIRE:

All bidders shall fill out completely the attached general questionnaire and submit it with the bid proposal.

AWARD:

The evaluation and award of this bid shall be a combination of factors including, but not limited to: bid price, professional competence, references, submission of SDS sheets, equipment, and the correlation of the proposal submitted to meeting the needs of the City of Troy. The City of Troy reserves the right to award this bid to the lowest total responsible bidder(s) meeting specifications for all three years or for each year or by proposal, whatever is deemed to be in the City's best interest; to reject low bids which have major deviations from specifications; to accept a higher bid which has only minor deviations.

PURCHASE ORDER: Once acceptable bonds and insurance are received, the successful bidder(s) will receive a purchase order issued from the City of Troy, which will create a bilateral contract issued between the City of Troy and the successful bidder. The purchase order shall commit the bidder(s) to perform the contract in accordance with specifications. A contract document will not be issued.

CONTACT INFORMATION:

Hours of operation: 7AM-6PM 24 Hr. Contact Phone No. 586-707-1499

LICENSE:

State of Michigan Business Pesticide Application License #: 630375

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.

BID DEPOSIT AND FORFEITURE: The bid deposit of the lowest bidder shall be forfeit if, after bid opening, a change in the bid price or other provision of the bid is required by the bidder that is prejudicial to the interest of the City of Troy of fair competition.

COMPANY NAME: GREEN MEADOWS LAWNSCAPE

PI-079 (07/03)

Michigan Department of Agriculture & Rural Development
Pesticide and Plant Pest Management Division
Pesticide Application Business License

License No: 630375
Issue Date: 12/17/2018
Expiration: 12/31/2019

Issued To:

GREEN MEADOWS LAWNSCAPE, INC.

2359 AVON INDUSTRIAL DRIVE

ROCHESTER HILLS, MI 48309-

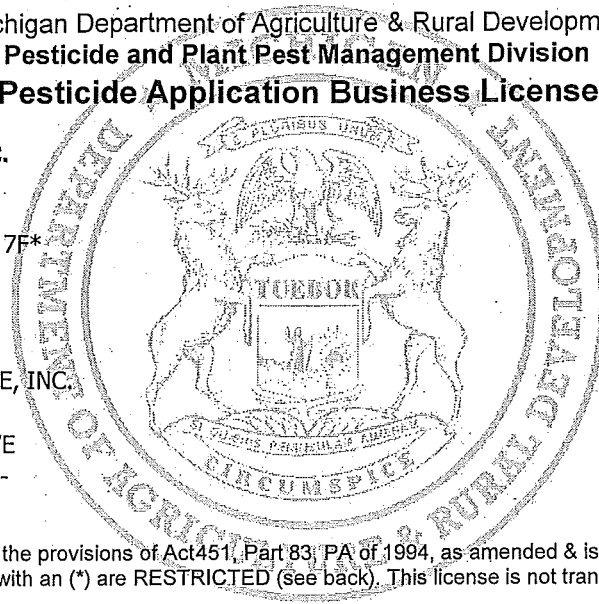
Category(ies): 3A, 3B, 6, 7A*, 7F*

Mailing Address:

GREEN MEADOWS LAWNSCAPE, INC.

2359 AVON INDUSTRIAL DRIVE

ROCHESTER HILLS, MI 48309-



PAB

GORDON WENK

Director of Agriculture
& Rural Development

This license is issued in accordance with the provisions of Act 451, Part 83, PA of 1994, as amended & is only valid for the establishment, address, and categories listed above. Categories with an (*) are RESTRICTED (see back). This license is not transferable.

CONTRACT FORMS:

Bidders should complete the Legal Status of Bidder, Non-Collusion Affidavit, Certification regarding Debarment, the Certification regarding "Iran Linked Business" and the Familial Disclosure Forms and return with your bid proposal.

PUBLIC ACT 57:

Public Act 57 requires contractors to provide certain notices to governmental entities concerning improvements on real property; to allow for modifications of contracts for improvement of real property; to provide for remedies; and to repeal acts and parts of acts. This contract shall comply with all applicable provisions of Public Act 57 [a copy of the act is attached for reference (2 pages)].

CONTRACT TERMINATION:

The City of Troy shall reserve the right to terminate the contract upon written notice due to poor performance. The City of Troy designated representative will be solely responsible for determining acceptable performance levels. His/her decision will be deemed in the City of Troy's best interest and will be final. The City of Troy reserves the right to re-award the contract to the next low bidder or re-bid the contract.

TERMINATION FOR CONVENIENCE:

The City may cancel the contract for its convenience, in whole or in part, by giving the contractor written notice 30 days prior to the date of cancellation. If the City chooses to cancel this contract in part, the charges payable under this contract shall be equitably adjusted to reflect those services that are cancelled.

BOND SUBMITTAL:

Subsequently, upon notice of award to the successful bidder(s), the Contractor(s) shall qualify for, sign, and deliver to the City of Troy an executed Performance Bond, and a executed Labor and Materials Payment Bond that is secured by a surety company, acceptable to the City of Troy by being licensed to do business in Michigan, and be included on the U.S. Treasury Department Surety List and/or have a rating of A- or better by A.M. Best, and/or Standard and Poors, on standard AIA forms, **each in the amount of one hundred (100%) of the total contract sum.** Attorneys-in-fact, who sign Performance Bonds must file a certified copy of their power of attorney to sign such bonds. The Contractor(s) shall pay the cost of all bond premiums.

PROGRESS PAYMENTS:

The City of Troy will consider a progress payment schedule for work as completed in accordance with specifications. The Superintendent of Parks, Streets, and Drains or designated City Representative will have final approval of the schedule as presented. No payments for work will be made until the designated City representative approves the work as complete in accordance with specifications. Prior to release of the final payment, consent of surety document (A1A Document G707) will be required and signed by the surety Company. The City of Troy reserves the right to reject the payment schedule if deemed necessary, and determine the final schedule.

Proposed Payment Schedule: _____

SUBCONTRACTORS:

The undersigned agrees to submit a list of proposed subcontractors, if applicable, for approval by the designated City representative within 72 hours after notification of being the low qualified bidder. It will be understood that this may occur prior to bid award, but the bidder's status will not be final until approved by the Troy City Council.

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

IMPORTANT: All City of Troy purchases require a SAFETY DATA SHEET, where applicable, in compliance with the MIOSHA "Right to Know" Law.

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

COMPANY NAME: GREEN MEADOWS LAWNSCAPE

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.

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.

COMPANY NAME: GREEN MEADOWS LAWNSCAPE

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: GREEN MEADOWS LAWNSCAPE

Following information must be submitted with bid.

Proposed Pre-emergent Herbicide(s)

DIMENSION

☒ See attached

☒ SDS Sheet(s) attached to bid

☐ Sample of label(s) attached to bid

Proposed Broadleaf Herbicide(s)

THREE WAY

☐ See attached

☒ SDS Sheet(s) attached to bid

☐ Sample of label(s) attached to bid

Note that this list does not lock you into these herbicides. The City acknowledges that annual conditions could require the use of alternate or additional herbicides. Use of herbicides other than those listed will require written City approval before application. Use of approved alternatives and additional herbicides will be at no additional cost to the City. (See General Specifications, page 1 of 6, item #4)

COMPANY NAME:

GREEN MEADOWS LAWNSCAPE



MATERIAL SAFETY DATA SHEET #4030

Page 1 of 4

1301 East 9th Street, Suite 1300, Cleveland, OH 44114-1849
EMERGENCY PHONE: LESCO: (800) 321-5325
CHEMTREC: (800) 424-9300

DATE ISSUED: 2/6/04
SUPERSEDES: 11/15/00

I. PRODUCT IDENTIFICATION

PRODUCT NAME: LESCO Three-Way Ester II Selective Herbicide
Chemical Family: Mixture
Chemical Name/Synonyms: MCPA, Triclopyr, Dicamba

II. COMPOSITION/INFORMATION ON INGREDIENTS

CHEMICAL NAME	%(by/wt.)	CAS #	PEL/TLV
Isoctyl (2-ethylhexyl) Ester of 2-Methyl-4-Chlorophenoxyacetic Acid	56.1	26544-20-7	NA
Butoxyethanol Ester of 3,5,6-Trichloro-2-Pyridinyloxyacetic Acid	5	57213-69-1	NA
(3,6-Dichloro-o-anisic Acid)	3.6	1918-00-9	NA
Esters of Fatty Acids (Inerts)* *contains Petroleum Distillates	35.3	NA	NA

III. HAZARDS IDENTIFICATION

EMERGENCY OVERVIEW: Primary Route(s) of Entry: Eyes, Skin, Inhalation, Ingestion

POTENTIAL HEALTH EFFECTS:

Acute: Causes moderate eye irritation. Harmful if swallowed or absorbed through skin. Avoid contact with skin, eyes or clothing.

Chronic: Chronic overexposure to Dicamba may cause liver changes or a decrease in body weight. The EPA's Science Advisory Panel has given Dicamba a class D classification (not classifiable as to human carcinogenicity). Animal tests with Dicamba have not shown carcinogenic, teratogenic or other reproductive effects with the exception of slightly reduced fetal body weights and post implantation losses reported at the Maximum Tolerated Dose level. The available evidence on MCPA and triclopyr indicate that they do not pose a carcinogenic or mutagenic risk. Triclopyr is not considered a teratogen, but no conclusions can be drawn about the teratogenic risk of MCPA.

EYE: May cause transient eye irritation

SKIN: May cause skin irritation. Harmful if absorbed through the skin. Prolonged or repeated dermal exposure may cause effects similar to those caused by ingestion.

INHALATION: May irritate the respiratory tract or cause dizziness. Avoid inhaling vapors or mist.

INGESTION: Moderate to low oral toxicity. May cause muscle weakness, nausea, diarrhea, abdominal pain, fall in blood pressure or convulsions under extreme exposure conditions.

MEDICAL CONDITIONS AGGRAVATED: Skin exposure may aggravate existing skin conditions. Exposure to mist may aggravate existing respiratory conditions.

POTENTIAL ENVIRONMENTAL HAZARDS:

Drift or runoff may adversely affect nontarget plants. Do not apply directly to water, or to areas where surface water is present or to intertidal areas below the mean high water mark. Do not contaminate water when disposing of equipment washwaters or rinsate nor pour washwater on the ground; spray or drain over a large area away from wells and other water sources. Do not apply this product through any type of irrigation system. Do not contaminate water used for irrigation or domestic purposes. Most cases of groundwater contamination involving phenoxy herbicides such as MCPA have been associated with mixing/loading and disposal sites. Caution should be exercised when handling these phenoxy pesticides at such sites to prevent contamination of groundwater supplies. Use of closed systems for mixing and transferring this pesticide will reduce the probability of spills. Placement of the mixing/loading equipment on an impervious pad to contain spills will help prevent groundwater contamination.

IV. FIRST AID MEASURES

EYES: Hold eye open and rinse slowly and gently with water for 15 – 20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. Call a poison control center or doctor for treatment advice.

SKIN: Take off contaminated clothing. Rinse skin immediately with plenty of water for 15 – 20 minutes. Call a poison control center or doctor for treatment advice.

INHALATION: Remove person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible. Call a poison control center or doctor for further treatment advice.

INGESTION: Call a poison control center or doctor immediately for treatment advice. Have person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by a poison control center or doctor. Do not give anything by mouth to an unconscious person.

NOTES TO MEDICAL DOCTOR: May pose an aspiration pneumonia hazard.

V. FIRE FIGHTING MEASURES

Flash Point (Method Used): > 200F TCC

Lower Explosion Limits: ND

NFPA/HMIS Rating: Health: 2

EXTINGUISHING MEDIA: ☒ Foam

☐ Water Spray

Auto Ignition Temperature: ND

Upper Explosion Limits: ND

Fire: 2 **Reactivity:** 1

☐ Alcohol Foam

☐ Other

☒ Dry Chemical

☒ CO₂

EXPLOSION HAZARDS: When heated above the flash point, this material emits flammable vapors which, when mixed with air, can burn or be explosive. Fine mist or spray may be flammable at temperatures below the flash point.

FIRE FIGHTING PROCEDURES: May produce toxic and noxious fumes under extreme fire conditions. Use positive pressure self-contained breathing apparatus and acid resistant protective clothing. Any water used to extinguish the fire should be contained by diking to prevent contamination of public water system.

HAZARDOUS COMBUSTION PRODUCTS: May include, but are not limited to, hydrogen chloride and nitrogen oxides.

VI. ACCIDENTAL RELEASE MEASURES

RELEASE NOTES: When cleaning large spills, wear suggested safety equipment. Surround with impervious material such as dirt to prevent run-off. Absorb product with an inert absorbent such as clay granules or wood shavings. Contain all affected material in a closed, labeled container for proper disposal. Treat contaminated area with detergent and water.

VII. HANDLING AND STORAGE

GENERAL PROCEDURES: Always use original container to store pesticides in a secured warehouse or storage building. Do not store near open containers of fertilizer, seed, or other pesticides. Containers should be opened in a well-ventilated area. Keep container tightly sealed when not in use. Do not stack cardboard cases more than two pallets high.

OTHER PRECAUTIONS: Do not contaminate water, food, or feed by storage or disposal. Keep out of reach of children. Wash thoroughly with soap and water after handling.

VIII. EXPOSURE CONTROLS/PERSONAL PROTECTION

ENGINEERING CONTROLS: Open ventilation. Reduce all mist with local exhaust.

PERSONAL PROTECTION EQUIPMENT:

EYES AND FACE: Chemical splash goggles

RESPIRATORY: Wear a NIOSH/MSHA approved pesticide respirator when exposed to mist.

GLOVES: Chemical-resistant gloves

PROTECTIVE CLOTHING: Long sleeved shirt, long pants, shoes plus socks. A neoprene protective apron is recommended.

WORK HYGENIC PRACTICES: Avoid contact with eyes, skin, or clothing. Wash thoroughly with soap and water after handling.



MATERIAL SAFETY DATA SHEET #4030

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COMMENTS: Practice good care and good safety precautions when handling this product.

IX. PHYSICAL AND CHEMICAL PROPERTIES

BOILING POINT: ND	SPECIFIC GRAVITY: (H ₂ O = 1) 1.025
MELTING POINT: Liquid	EVAPORATION RATE: ND
VAPOR DENSITY (air = 1): ND	VAPOR PRESSURE: ND
ODOR: Aromatic solvent odor	SOLUBILITY IN WATER: 100% emulsifiable
APPEARANCE: Amber liquid	PERCENT VOLATILE: ND
pH: ND	BULK DENSITY (lbs./gal): 8.54

X. STABILITY AND REACTIVITY

CONDITIONS TO AVOID: ND
STABILITY: Stable
POLYMERIZATION: Will not occur
INCOMPATIBLE MATERIALS: Strong oxidizers such as hydrogen peroxide, bromine, and chromic acid
HAZARDOUS DECOMPOSITION PRODUCTS: Carbon monoxide and carbon dioxide from burning

XI. TOXICOLOGICAL INFORMATION

EYE EFFECTS: (Rabbit) Irritation clearing in 7 days or less
SKIN EFFECTS: (Rabbit) Moderate irritation
DERMAL LC₅₀: (Rat) Male – 1.231 g/kg; Female – 1.0 g/kg
ORAL LD₅₀: (Rabbit) Male – 3.969 g/kg; Female – 3.535 g/kg
INHALATION LC₅₀: (Rabbit) No mortality at > 3.59 mg/l, the maximum concentration
SENSITIZATION: (Guinea pig) Not a sensitizer
ACUTE EFFECTS FROM OVEREXPOSURE:
Nonspecific: muscle weakness, lethargy, loss of appetite, abdominal pains, headache, or shortness of breath.
May cause transient eye irritation.
May cause skin irritation. Harmful if absorbed through skin. Prolonged or repeated dermal exposure may cause effects similar to those caused by ingestion.
May cause muscle weakness, nausea, diarrhea, abdominal pain, fall in blood pressure or convulsions under extreme exposure conditions.
CHRONIC EFFECTS FROM OVEREXPOSURE: Chronic overexposure to Dicamba may cause liver changes or a decrease in body weight. The EPA's Science Advisory Panel has given Dicamba a class D classification (not classifiable as to human carcinogenicity). Animal tests with Dicamba have not shown carcinogenic, teratogenic or other reproductive effects with the exception of slightly reduced fetal body weights and post implantation losses reported at the Maximum Tolerated Dose level. The available evidence on MCPA and triclopyr indicate that they do not pose a carcinogenic or mutagenic risk. Triclopyr is not considered a teratogen, but no conclusions can be drawn about the teratogenic risk of MCPA.
CARCINOGENICITY:
IARC: Not listed
NTP: Not listed
OSHA: Not listed
OTHER: Not listed

XII. ECOLOGICAL INFORMATION

ENVIRONMENTAL DATA: MCPA, Dicamba, and Triclopyr each have a relatively short field half-life of, on average, 20 – 60 days, 1 – 4 weeks, and 46 days, respectively. Each of the active ingredients in this product is biodegraded by soil microbes and aquatic microorganisms.
ECOTOXICOLOGICAL INFORMATION: Do not apply this product directly to water. The active ingredients may be harmful to waterfowl or fish. The active ingredients are non toxic to bees.

XIII. DISPOSAL CONSIDERATIONS



MATERIAL SAFETY DATA SHEET #4030

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DISPOSAL METHODS:

Product: If container is damaged or if pesticide has leaked, contain all spillage. Absorb and clean up all spilled material with granules or sand. Place in a closed, labeled container for proper disposal. Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility.

Container: Triple rinse (or equivalent). Then offer for recycling or reconditioning or puncture and dispose of in a sanitary landfill, or by other procedures approved by state and local authorities. Plastic containers are also disposable by incineration, or if allowed by state and local authorities, by burning. If burned, stay out of smoke.

XIV. TRANSPORTATION INFORMATION:

DOT Transportation:

Not regulated – only 220 gal or 260 gal or larger containers are regulated.

Proper Shipping Name:

Compounds, tree or weed killing (Herbicides), NOI, other than poison

Hazard Class:

None

U.S. Surface Freight Class:

20

Marine Pollution #1:

NA

HM 181 Shipping Name:

Not regulated

ID NO.:

None

Reportable Quantity (RQ):

XV. REGULATORY INFORMATION – UNITED STATES

SARA TITLE III (SUPERFUND AMENDMENTS AND REAUTHORIZATION ACT):

SEC 311/312:

Y Immediate (Acute Health)

Y Delayed (Chronic Health)

N Fire

N Sudden Release of Pressure

N Reactivity

SEC 302 (Extremely Hazardous Substance): NA

SEC 304 (Emergency Release Notification): NA

SEC 313 (Toxic Chemicals):

Dicamba (1918-00-9; Triclopyr triethylammonium salt (57213-69-1)

CERCLA RQ: 1,000 lbs of Dicamba acid equivalent or approximately 3226 gallons of this product. For releases greater than the RQ, contact the National Response Center at (800)_ 424-8802.

CAA RQ: NA

EPA Registration No.: 228-317-10404

NOTE: NA=Not Applicable; ND=Not Determined; NE=Not Established

Preparation and distribution of this Material Safety Data Sheet is done for LESCO, Inc., pursuant to the OSHA Hazard Communication Standard (29 CFR 1910.1200).

The information contained herein is based on available data. However, no warranty is expressed or implied regarding the accuracy of this data or the results to be obtained from the use thereof; and you should make your investigation to determine safety for the use you contemplate. LESCO makes no warranty of merchantability of fitness for a particular use, nor is there any other express or implied warranty except as may be specifically provided otherwise on product.

LESCO, Inc. assumes no responsibility or liability for any incidental or consequential damages whether related to personal injury or property damage, to vendees, users or third parties, caused by the material and LESCO's responsibility is limited to replacement of, or repayment of, the purchase price for the material(s) with respect to which any damages are claimed. All vendees or users assume all risk associated with the use of the material(s).

For further information, contact: LESCO, Inc. • 1301 East 9th Street, Suite 1300, Cleveland, OH 44114-1849 or (800) 321-5325.



MATERIAL SAFETY DATA SHEET #4307

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1301 East 9th Street, Suite 1300, Cleveland, OH 44115-1849
EMERGENCY PHONE: LESCO: (800) 321-5325
CHEMTREC: (800) 424-9300

DATE ISSUED: 12/1/06
SUPERSEDES: 1/13/03

I. PRODUCT IDENTIFICATION

PRODUCT NAME:

LESCO® Professional Control Product Dimension (0.07%, 0.10%, 0.15%, 0.21%) plus Fertilizer;
LESCO® Scenic Green™ Crabgrass Pre-emergent + Lawn Fertilizer; LESCO Dimension (0.21%) Plus
Fertilizer, Treeland Dimension 0.10% Plus Fertilizer

Chemical Family: Fertilizer with Herbicide

Chemical Name/Synonyms: Dithiopyr; Dimension

II. COMPOSITION/INFORMATION ON INGREDIENTS

CHEMICAL NAME	%(by/wt.)	CAS #	PEL/TLV
Dithiopyr, 3,5-pyridinedicarbothioic acid, 2-(difluoromethyl)-4-(2-methylpropyl)- 6(trifluoromethyl)-S,S-dimethyl ester	0.07 – 0.21	97886-45-8	Not Established

Formulated with one or more of the following ingredients. Check specific product label.

Urea	0 – 95	57-13-6	10 mg/M ³ (dust) 5 mg/M ³ (resp)
Potassium Sulfate	0 – 95	7778-80-5	10 mg/M ³
Calcium Carbonate	0 – 95	1317-65-3	15 mg/M ³ (dust)
Aminoureaformaldehyde	0 – 60	229157-37-3	5 mg/M ³ (resp)
Methylene Urea	0 – 60	9011-05-6	5 mg/M ³ (dust)
Monoammonium Phosphate	0 – 60	7722-76-1	15 mg/M ³ (dust) 5 mg/M ³ TLV
Diammonium Phosphate	0 – 50	7783-28-0	15 mg/M ³ (dust) 5 mg/M ³ (resp)
Sodium bentonite	0 – 50	1302-78-9	15 mg/M ³ (dust)
Potassium Chloride	0 – 20	7447-40-7	10 mg/M ³ (dust)
Ammonium Sulfate	0 – 20	7783-20-2	15 mg/M ³ (dust)
Iron (Ferrous) Sulfate	0 – 20	7720-78-7	15 mg/M ³ (dust)
Manganese Oxide	0 – 20	1317-35-7	15 mg/M ³ (dust)
Magnesium Oxide	0 – 20	1309-48-4	15 mg/M ³ (dust)
Potassium Nitrate	0 – 20	7757-79-1	Not Established
Iron (Ferric) Oxide	0 – 10	1309-37-1	15 mg/M ³ (dust)
Iron (Ferrous) Oxide	0 – 10	8047-67-4	Not Applicable
Magnesium Sulfate	0 – 10	7478-88-9	15 mg/M ³ (dust)
Sulfate of Potash-Magnesia	0 – 10	14977-37-8	Not Established
Magnesium Carbonate	0 – 10	39409-82-0	15 mg/M ³ (dust)
Sulfur	0 – 5	7704-34-9	5 ppm (SO ₂)
Manganese Compounds	0 – 5	7439-96-5	.5 mg/M ³ (dust)
Sodium Chloride	0 – 5	7647-14-5	10 mg/M ³ (dust)

III. HAZARDS IDENTIFICATION

EMERGENCY OVERVIEW: Primary Route(s) of Entry: Eyes, Skin, Inhalation, Ingestion

POTENTIAL HEALTH EFFECTS: Inhalation of dust may be harmful. Direct contact causes slight eye irritation. Prolonged or repeated contact may cause mild skin irritation. Ingestion of large amount may cause gastrointestinal disorder, nausea, vomiting and/or diarrhea. Prolonged or repeated overexposure to the active ingredient in this material could cause kidney, liver, and blood effects, thyroid damage, adrenal effects.

EYE: Causes eye irritation.

SKIN: May cause skin irritation.

INHALATION: Overexposure to dusts may cause mucous membrane and upper respiratory irritation and possible lung changes.

INGESTION: Ingestion of large quantities may cause gastrointestinal discomfort, vomiting, weakness or other medically related problems.

MEDICAL CONDITIONS AGGRAVATED: Skin sensitization in susceptible individuals.

POTENTIAL ENVIRONMENTAL HAZARDS: This product is toxic to fish and highly toxic to other aquatic organisms, including oysters and shrimp. Drift or runoff from treated turf may adversely affect aquatic organisms in adjacent aquatic sites. Do not apply directly to water, or to areas where surface water is present, or to intertidal areas below the mean high water mark. Do not contaminate water when disposing of equipment washwaters.

IV. FIRST AID MEASURES

EYES: Flush with large amounts of water. Eyelids should be held away from the eyeball to ensure thorough rinsing. Get medical attention if irritation persists.

SKIN: Remove and wash contaminated clothing thoroughly. Wash affected area thoroughly with soap and water. Get medical attention if irritation persists. Do not take clothing home to be laundered.

INHALATION: If symptoms develop, remove person from source of exposure to fresh air. If respiratory symptoms persist, get medical attention.

INGESTION: If large amount is ingested, give 2 – 3 glasses of water. Do not give anything by mouth to an unconscious person. Get medical attention.

NOTES TO MEDICAL DOCTOR: Treatment based on the sound judgement of the physician and the individual reactions of the patient.

V. FIRE FIGHTING MEASURES

Flash Point (Method Used): Not Applicable

Lower Explosion Limits: No Data

NFPA/HMIS Rating: Health: 2

EXTINGUISHING MEDIA: ☒ Foam
☒ Water Spray

Auto Ignition Temperature: No Data

Upper Explosion Limits: No Data

Fire: 1

Reactivity: 0

☐ Alcohol Foam

☒ Dry Chemical

☐ Other

☒ CO₂

EXPLOSION HAZARDS: Dusts may form explosive mixtures with air.

FIRE FIGHTING PROCEDURES: Wear NIOSH approved self-contained, positive pressure breathing apparatus. Do not breathe fumes. Remove from area of fire at first opportunity. Prevent water run-off from entering drains, sewers, or water sources. If water enters a drainage system, advise the authorities downstream. Fertilizer will become slippery when wet. Guard against falls. Decontaminate emergency personnel with soap and water before leaving the fire area. Avoid breathing dusts, vapors and fumes from burning materials.

HAZARDOUS COMBUSTION PRODUCTS: If heated to decomposition, will give off toxic fumes of ammonia and formaldehyde. Under fire conditions, urea may decompose to cyanuric acid, biuret hydrogen cyanide and ammonia. Ammonium carbamate may also be formed.

VI. ACCIDENTAL RELEASE MEASURES

RELEASE NOTES: If material is spilled and dry, sweep or shovel into a container for reuse per label instructions or disposal. If liquid, contain spill and absorb with inert material and place in container for disposal. Prevent from entering drains, sewers or water sources. Avoid contact with eyes, skin and clothing.

VII. HANDLING AND STORAGE

GENERAL PROCEDURES: Store this product only in its original container in a dry, cool, secure storage area. Do not contaminate water, foodstuffs, feed or seed by storage or disposal. Keep away from drains, sewers, and water sources. Wash thoroughly with soap and water after handling.

OTHER PRECAUTIONS: Keep away from fire, sparks, or other ignition sources

VIII. EXPOSURE CONTROLS/PERSONAL PROTECTION

ENGINEERING CONTROLS: Local exhaust to reduce all dusts.

PERSONAL PROTECTION EQUIPMENT:

EYES AND FACE: Goggles or safety glasses

RESPIRATORY: Use NIOSH approved respirator in confined areas.

GLOVES: Impervious gloves

PROTECTIVE CLOTHING: Long sleeved shirt and long pants; shoes and socks

WORK HYGENIC PRACTICES: After using product, remove clothing and launder separate before reuse. Promptly and thoroughly wash hands and exposed skin with soap and water. Wash hands before eating, drinking, chewing gum, using tobacco, or using the toilet.

COMMENTS: Facilities storing or utilizing this material should be equipped with an eyewash facility and safety shower.

IX. PHYSICAL AND CHEMICAL PROPERTIES

BOILING POINT: Not Applicable

MELTING POINT: 133°C (urea)

VAPOR DENSITY (air = 1): Not Applicable

ODOR: Slight ammonia/sulfur odor

APPEARANCE: Yellow, white, brown, gray granules

pH: Not Applicable

SPECIFIC GRAVITY: Not Applicable

EVAPORATION RATE: Not Applicable

VAPOR PRESSURE: Not Applicable

SOLUBILITY IN WATER: Disperses

PERCENT VOLATILE: Not Applicable

BULK DENSITY (lbs./cu ft): 45 – 65

X. STABILITY AND REACTIVITY

CONDITIONS TO AVOID: Extremely high temperatures; ignition sources

STABILITY: Stable

POLYMERIZATION: Will not occur

INCOMPATIBLE MATERIALS: Strong oxidizers or strong alkalies

HAZARDOUS DECOMPOSITION PRODUCTS: Oxides of carbon, nitrogen and sulfur. Urea also decomposes to biuret and cyanuric acid. Urea reacts with sodium or calcium hypochlorite to form explosive nitrogen trichloride.

XI. TOXICOLOGICAL INFORMATION

EYE EFFECTS: No Data

SKIN EFFECTS: No Data

DERMAL LC₅₀: No Data

ORAL LD₅₀: No Data

INHALATION LC₅₀: No Data

SENSITIZATION: Not a sensitizer

ACUTE EFFECTS FROM OVEREXPOSURE: Causes eye irritation. May cause skin irritation.

CHRONIC EFFECTS FROM OVEREXPOSURE: Prolonged or repeated overexposure to the active ingredient could cause kidney, liver, blood effect, thyroid damage, adrenal effects.

CARCINOGENICITY:

IARC: Not Listed

NTP: Not Listed

OSHA: Not Listed

OTHER: Not Listed

XII. ECOLOGICAL INFORMATION

ENVIRONMENTAL DATA: This product is toxic to fish and highly toxic to other aquatic organisms, including oysters and shrimp. Drift or runoff from treated turf may adversely affect aquatic organisms in adjacent aquatic sites. Do not apply directly to water, or to areas where surface water is present, or to intertidal areas below the mean high water mark. Do not contaminate water when disposing of equipment washwaters. Do not apply when weather conditions favor drift from treated areas.

ECOTOXICOLOGICAL INFORMATION: This product is toxic to fish and highly toxic to other aquatic organisms, including oysters and shrimp.

XIII. DISPOSAL CONSIDERATIONS

SIGNATURE PAGE

PRICES: Prices shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices shall remain firm for the entire contract period. The contract shall commence on the date of award, or April 1, 2019 whichever is later and expire December 31, 2021. The City of Troy may terminate this contract for convenience if in its best interest with written notice at least thirty (30) days in advance.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: Dan D. DeClerck

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 # 20-8756998

COMPANY GREEN MEADOWS LAWNSCAPE

ADDRESS 2359 Awn Industrial Dr. CITY ROCHESTER HILLS STATE MI ZIP 48309

TELEPHONE NUMBER (586) 254-7775 FAX NUMBER (586) 254-7785

REPRESENTATIVE'S NAME DAN DECLERCK
(Print)

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: Dan D. DeClerck

PAYMENT TERMS 30 days WARRANTY _____

E-MAIL greenmeadowslawnscape@yahoo.com CHECK # 30895150

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

ACKNOWLEDGEMENT:

I, DAN DECLERCK, 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: Dan D. DeClerck

U.S. FUNDS: All prices quoted are to be in U.S. Currency.

CITY OF TROY

BIDDER'S GENERAL QUESTIONNAIRE

Please give the following information regarding your proposal for this bid.

- 1) Number of years experience in this type of work 39 years.
- 2) List three (3) references with whom you have contracted during the past three (3) years for this type of work. Include name of organization, address, contact person, telephone number and email address:
CITY OF STERLING HEIGHTS - JOSE COLE 586-446-2444
AVISTA Mgmt. DONNA PUENTE 248-855-5665
CITY OF WARREN - HENRY BOWMAN/OR DINO 586-268-8400
- 3) State formal name and legal status of bidder, whether corporation, partnership or individual. A corporation bidder shall give the state in which incorporated; a partnership bidder shall give all the names of the partners.
GREEN MEADOWS LAWNSCAPE, INC.
- 4) List all equipment owned by your firm that would be used for this contract - include quantity, make, model number and year. (List attached and marked _____ for identification.)
3 - ZMAX ZSPRAYS 1 - KUBOTA W/SPRAY FERTILIZING TANK
3 - ZMAX Intermediate 2 Sprays 1 - Z spray JUNIOR
- 5) List of Personnel of the firm who would be assigned to this account along with a list of their certifications.
DAN DECLERCK 3A 3B 5.6.7A.7B.7F JOSHUA BRUMLEY 3A 3B 6
TOM DECLERCK 3A 3B 5.6.7A.7B.7F PATRICK O'REGAN 3A 3B 6 7A.7B.7F.5
BRAD MILKE 3A 3B 5.6.7A.7B.7F DEREK JOHNSON 3A 3B.7A.6
- 6) Does your Company have a Pesticide Application License? Y ☒ or N ☐ (If your Company does, please supply us with a copy of it and attach it to the bid proposal at the time of submission.)
- 7) Does your company propose to use subcontractors? If so, state their name and the work to be performed.
NO

THE FOREGOING QUESTIONNAIRE IS A TRUE STATEMENT OF FACTS:

Signature of Authorized Company Representative:

Company:

Address:

Phone Number:

Representative's Name:

Date:

Dan Declerck

GREEN MEADOWS LAWNSCAPE

2359 AVON INDUSTRIAL DRIVE

ROCHESTER HILLS, MI 48309

586-254-7775

DAN DECLERCK
(print)

1-31-19



**Michigan Department of Agriculture
and Rural Development**

P.O. Box 30017
Lansing, Michigan 48909

COMMERCIAL PESTICIDE APPLICATOR

This certificate issued in accordance with Act 451,
Public Acts of 1994, Part 83 as amended.

DANIEL D DECLERCK

Categories: 3A 3B 5 6 7A 7B 7F FUM

C007100362
Certification
Number

12/31/2019
Expires



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 MI
for whom DAN DECLERCK, bearing the office title of VICE PRESIDENT,
whose signature is affixed to this proposal, is duly authorized to execute contracts.

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

<div style="border: 1px solid black; width: 350px; height: 150px; position: relative;"><div style="position: absolute; top: 0; left: 0; right: 0; bottom: 0; border-left: 2px solid black; border-right: 2px solid black; transform: rotate(45deg); transform-origin: center;"></div></div>	<div style="border: 1px solid black; width: 300px; height: 150px;"></div>
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AN **INDIVIDUAL**, WHOSE SIGNATURE IS AFFIXED TO THE PROPOSAL:

Dan D. DeCluck 1-31-19



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.**

GREEN MEADOWS LAWNSCAPE

Name of Agency/Company/Firm (Please Print)

DAN DECLERCK VICE PRESIDENT

Name and title of authorized representative (Please Print)

Dan D. Declerck

Signature of authorized representative

Date

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



CITY OF TROY
OAKLAND COUNTY, MICHIGAN
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

Sharon DeClerck, being duly sworn deposed, says that he/she
(Print Full Name)

is Secretary/Treasurer 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.

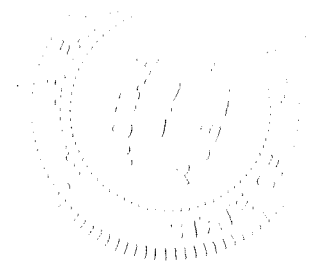
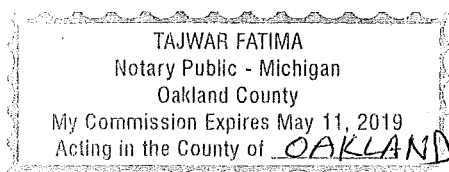
Sharon DeClerck
SIGNATURE OF PERSON SUBMITTING BID

Tajwar Fatima
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 30th day of JAN, 2019
in and for OAKLAND County.

My commission expires:

5-11-2019





Proposer's Sworn and Notarized Familial Disclosure
(to be provided by the Proposer)

The undersigned, the owner or authorized officer of Green Meadows Lawns (the "Proposer"), pursuant to the familial disclosure requirement provided in the Request for Proposal, hereby represent and warrant, except as provided below, that no familial relationships exist between the owner(s) or any employees of Green Meadows Lawnscape, Inc and any member of the City of Troy City Council or City of Troy management.

List any Familial Relationships:

BIDDER:

Green Meadows Lawnscape, Inc

By: Sharon DeClerck

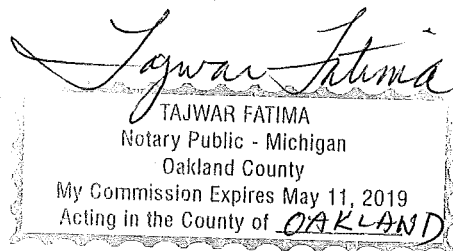
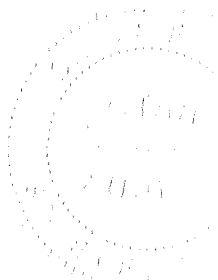
Its: Secretary/Treasurer

STATE OF MICHIGAN)

)ss.

COUNTY OF OAKLAND)

This instrument was acknowledged before me on the 30th day of JAN, 2019, by
SHARON DECLERCK





**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	GREEN MEADOWS LANDSCAPE
Street Address	2359 AVON INDUSTRIAL DRIVE
City	ROCHESTER HILLS
State, Zip	MI 48309
Corporate I.D. Number/State	00717T
Taxpayer I.D. #	20-8756998

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: Dan D. DeClerck

Printed Name of Vendor's Authorized Agent: DAN DECLERCK

Witness Signature: Thomas P. DeClerck

Printed Name of Witness: Thomas P. DeClerck



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Date: February 13, 2019

To: Mark F. Miller, City Manager

From: MaryBeth Murz, Purchasing Manager
Kurt Bovensiepe, Public Works Director
Dennis Trantham, Facilities and Grounds Operations Manager

Subject: Standard Purchasing Resolution 2: Award to Low Bidder meeting Specifications –
Fertilizer/Herbicide Application Services

History

- The Grounds Division is responsible for the maintenance of all municipal property including turf.
- In an effort to minimize weed growth and promote good turf the Parks Division contracts the application of fertilizer and herbicide to municipal property including medians, municipal buildings, parks, and athletic fields.
- Because the athletic fields are irrigated, these locations receive four annual applications and the remaining locations receive two applications.
- In the response to citizen concern additional weed control was added to Big Beaver from Rochester Rd. to Dequindre.

Purchasing

- On January 31, 2019; a bid opening was conducted as required by City Charter/Code and bid proposals were received at the City's request from firms interested in providing requirements of fertilizer/ herbicide application services
- Companies were notified via the Michigan Intergovernmental Trade Network (MITN); www.mitn.info. 288 vendors were notified via the MITN website.
- Four (4) bid responses were received. Below is a detailed summary of the vendor responses.

Companies notified via MITN	288
Troy Companies notified via MITN	8
Troy Companies notified Active email Notification	7
Troy Companies - Active Free	1
Companies that viewed the bid	17
Troy Companies that viewed the bid	2

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.



500 West Big Beaver
Troy, MI 48084
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CITY COUNCIL AGENDA ITEM

Financial

Funds are budgeted and available in the following accounts: 101.336.344.7802.050 – Fire, 101.751.30.770.7802.050 – Parks Maintenance, 101.751.30.780.7802.070 – Streets Island Maintenance, 101.804.807.7802.070 – Historic Village, 234.285.7802.050 – Transit Center 661.549.551.7802.050 – Motor Pool, and 101.751.30.759.7802.070 – Athletic Fields for 2019 fiscal year and the subsequent fiscal years for the duration of the contract.

Recommendation

City management recommends awarding a three (3) year contract to provide Fertilizer/Herbicide Application Services to the low bidder meeting specifications; *Green Meadows Lawnscape of Rochester Hills, MI* at unit prices contained in the attached bid tabulation for an estimated total annual cost of \$24,402, not to exceed budgetary limitations. The award is contingent upon the contractor's submission of properly executed bid documents including insurance certificates and all other specified requirements.

**CITY OF TROY
BID TABULATION
FERTILIZER/HERBICIDE APPLICATION SERVICES**

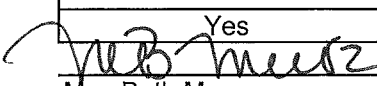
VENDOR NAME:	Green Meadows Lawnscape	Custom Lawn care
	Rochester Hills, MI	Flint, MI
CHECK #:	#30895150	#1698022
CHECK AMOUNT:	\$1,500.00	\$1,500.00

PROPOSAL: FURNISH THREE (3) YEAR REQUIREMENTS OF FERTILIZER/HERBICIDE APPLICATION SERVICES IN ACCORDANCE WITH THE SPECIFICATIONS.

PROPOSAL A:			Cost per Acre per Application	
90.2 Acres	2019	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
90.2 Acres	2020	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
90.2 Acres	2021	Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
ESTIMATED THREE (3) YEAR PROPOSAL A TOTAL:			\$31,930.80	\$34,090.19
PROPOSAL B:			Cost per Acre per Application	
58.3 Acres	2019	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
58.3 Acres	2020	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
58.3 Acres	2021	Early Spring Application Fertilizer & Pre-Emergent	\$59.00	\$62.99
		Spring Application Liquid Weed & Feed	\$59.00	\$62.99
		Summer Application Fertilizer & Grub Control	\$59.00	\$62.99
		Fall Application Liquid Weed & Feed	\$59.00	\$62.99
ESTIMATED THREE (3) YEAR PROPOSAL B TOTAL:			\$41,276.40	\$44,067.80
ESTIMATED ANNUAL ONE (1) YEAR GRAND TOTAL PROPOSAL A & B:			\$24,402.40	\$26,052.66
ESTIMATED GRAND TOTAL 3-YEARS PROPOSALS A & B:			\$73,207.20	\$78,157.99

INSURANCE:	Yes	Yes
PROPOSED Pre-emergent Herbicide(s)		
MSDS Sheets: Y or N	Yes	Yes
PROPOSED Broadleaf Herbicide(s)		
MSDS Sheets Y or N	Yes	Yes
SITE INSPECTION:		
Y/N	Yes	Yes
DATE	Several Times	Mar-13
CONTACT INFORMATION:		
Hours of Operation	7AM-6PM	8am-7pm
24HR Contact #	586.707.1499	810.730.9150
PROGRESS PAYMENTS:	Blank	Net 30
PAYMENT TERMS:	30 Days	Net 30
EXCEPTIONS:	None	None
MICHIGAN BUSINESS PESTICIDE LICENSE#:	#630375	#250008
BIDDER'S GENERAL QUESTIONNAIRE:	Yes	Yes
REFERENCES:	Yes	Yes
ACKNOWLEDGEMENT:	Yes	Yes

ATTEST:
Susan Reisterer
Kristine Kallek


MaryBeth Murz,
Purchasing Manager

**CITY OF TROY
BID TABULATION
FERTILIZER/HERBICIDE APPLICATION SERVICES**

ITB-COT 19-01
Pg 2 of 2

VENDOR NAME:	Owen Tree Service	United Lawnscape, LLC
	Attica, MI	Washington, MI
CHECK #:	#1849922	#1144370240
CHECK AMOUNT:	\$1,500.00	\$1,500.00

PROPOSAL: FURNISH THREE (3) YEAR REQUIREMENTS OF FERTILIZER/HERBICIDE APPLICATION SERVICES IN ACCORDANCE WITH THE SPECIFICATIONS.

PROPOSAL A:			Cost per Acre per Application	
90.2 Acres	2019	Spring Application Liquid Weed & Feed	\$99.00	\$115.00
		Fall Application Liquid Weed & Feed	\$99.00	\$115.00
90.2 Acres	2020	Spring Application Liquid Weed & Feed	\$100.48	\$125.00
		Fall Application Liquid Weed & Feed	\$100.48	\$125.00
90.2 Acres	2021	Spring Application Liquid Weed & Feed	\$101.99	\$140.00
		Fall Application Liquid Weed & Feed	\$101.99	\$140.00
ESTIMATED THREE (3) YEAR PROPOSAL A TOTAL:			\$54,385.19	\$68,552.00
PROPOSAL B:			Cost per Acre per Application	
58.3 Acres	2019	Early Spring Application Fertilizer & Pre-Emergent	\$111.10	\$115.00
		Spring Application Liquid Weed & Feed	\$111.10	\$115.00
		Summer Application Fertilizer & Grub Control	\$111.10	\$115.00
		Fall Application Liquid Weed & Feed	\$111.10	\$115.00
58.3 Acres	2020	Early Spring Application Fertilizer & Pre-Emergent	\$112.77	\$125.00
		Spring Application Liquid Weed & Feed	\$112.77	\$125.00
		Summer Application Fertilizer & Grub Control	\$112.77	\$125.00
		Fall Application Liquid Weed & Feed	\$112.77	\$125.00
58.3 Acres	2021	Early Spring Application Fertilizer & Pre-Emergent	\$114.46	\$140.00
		Spring Application Liquid Weed & Feed	\$114.46	\$140.00
		Summer Application Fertilizer & Grub Control	\$114.46	\$140.00
		Fall Application Liquid Weed & Feed	\$114.46	\$140.00
ESTIMATED THREE (3) YEAR PROPOSAL B TOTAL:			\$78,898.56	\$88,616.00
ESTIMATED ANNUAL ONE (1) YEAR GRAND TOTAL PROPOSAL A & B:			\$43,768.12	\$47,564.00
ESTIMATED GRAND TOTAL 3-YEARS PROPOSALS A & B:			\$133,283.74	\$157,168.00
INSURANCE:			Yes	Yes
PROPOSED Pre-emergent Herbicide(s)				
MSDS Sheets: Y or N			Yes	Yes
PROPOSED Broadleaf Herbicide(s)				
MSDS Sheets Y or N			Yes	Yes
SITE INSPECTION:				
Y/N			No	Yes
DATE				Multiple Occassions
CONTACT INFORMATION:				
Hours of Operation			7AM-5PM	9AM-5PM
24HR Contact #			810-614-1063	586-651-2239
PROGRESS PAYMENTS:				
PAYMENT TERMS:			Net 30	Net30
EXCEPTIONS:			None	None
MICHIGAN BUSINESS PESTICIDE LICENSE#:			440003	500104
BIDDER'S GENERAL QUESTIONNAIRE:			Yes	Yes
REFERENCES:			Yes	Yes
ACKNOWLEDGEMENT:			Yes	Yes

Low Bidder meeting Specifications.



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Funds are budgeted and available in the following accounts: 101.336.344.7802.050 – Fire, 101.751.30.770.7802.050 – Parks Maintenance, 101.751.30.780.7802.070 – Streets Island Maintenance, 101.804.807.7802.070 – Historic Village, 234.285.7802.050 – Transit Center 661.549.551.7802.050 – Motor Pool, and 101.751.30.759.7802.070 – Athletic Fields for 2019 fiscal year and the subsequent fiscal years for the duration of the contract.

Recommendation

City management recommends awarding a three (3) year contract to provide Fertilizer/Herbicide Application Services to the low bidder meeting specifications; *Green Meadows Lawnscape of Rochester Hills, MI* at unit prices contained in the attached bid tabulation for an estimated total annual cost of \$24,402, not to exceed budgetary limitations. The award is contingent upon the contractor's submission of properly executed bid documents including insurance certificates and all other specified requirements.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/09/2018

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 Action Insurance Service, Inc. 45445 Mound Rd. Suite 100 Utica MI 48317	CONTACT NAME: Rachelle Hall PHONE (A/C, No, Ext): (586) 739-9080 FAX (A/C, No): (586) 739-3530 E-MAIL ADDRESS: rhall@actionin.com
INSURED Green Meadows Lawnscape Inc. 2359 Avon Industrial Dr Rochester Hills MI 48309	INSURER(S) AFFORDING COVERAGE INSURER A: Frankenmuth INSURER B: Accident Fund National INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2018-2019

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:	Y		CPP6324926	08/11/2018	08/11/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 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 <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			BA6324926	08/11/2018	08/11/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Additional \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/> CLAIMS-MADE			CPP6324926	08/11/2018	08/11/2019	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
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 <input type="checkbox"/>	N/A	WCV6117098	09/30/2018	09/30/2019	<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)

The City of Troy, including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and board 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. 30 days notice of cancellation/10 day notice due to non-payment of premium.

CERTIFICATE HOLDER

CANCELLATION

City of Troy 500 W. 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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INSURER: FRANKENMUTH MUTUAL INSURANCE COMPANY

NAMED INSURED
GREEN MEADOWS LAWNSCAPEPOLICY NO.
CPP6324926POLICY TERM
08/11/2018 to 08/11/2019AGENT NO.
0210209

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**Additional Insured -- Owners, Lessees
Or Contractors -- Scheduled Person
Or Organization**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
CITY OF TROY 500 W BIG BEAVER RD TROY, MI 48084-5254	2359 AVON INDUSTRIAL DR ROCHESTER HILLS, MI OAKLAND COUNTY 48309-3622
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:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

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

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.



INSURER: FRANKENMUTH MUTUAL INSURANCE COMPANY

NAMED INSURED
GREEN MEADOWS LAWNSCAPE

POLICY NO.
CPP6324926

POLICY TERM
08/11/2018 to 08/11/2019

AGENT NO.
0210209

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**Additional Insured -- State Or
Governmental Agency Or Subdivision
Or Political Subdivision -- Permits
Or Authorizations**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:

CITY OF TROY
500 W BIG BEAVER RD
TROY, MI 48084-5254

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II -- Who Is An Insured is amended to include as an insured any state, or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.
2. This insurance does not apply to:
 - a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
 - b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".



INSURER: FRANKENMUTH MUTUAL INSURANCE COMPANY

NAMED INSURED
GREEN MEADOWS LAWNSCAPE

POLICY NO.
CPP6324926

POLICY TERM
08/11/2018 to 08/11/2019

AGENT NO.
0210209

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**Waiver Of Transfer Of Rights Of
Recovery Against Others To Us**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Person Or Organization:
CITY OF TROY

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of
Rights Of Recovery Against Others To Us of
Section IV -- Conditions:**

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/09/2018

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INSURED Green Meadows Lawnscap Inc. Prolific Enterprises Inc. 2359 Avon Industrial Dr Rochester Hills MI 48309		INSURER(S) AFFORDING COVERAGE INSURER A: Frankenmuth INSURER B: Accident Fund National INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 12305	

COVERAGES**CERTIFICATE NUMBER:** 2018-2019**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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPP6324926	08/11/2018	08/11/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 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	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			BA6324926	08/11/2018	08/11/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Additional \$ 1,000,000
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			CPP6324926	08/11/2018	08/11/2019	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
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		WCV6117098	09/30/2018	09/30/2019	<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)

The City of Troy including architects & engineers, all elected & appointed officials, all employees & volunteers are additional insured on ISO form B or boader when required by written contract. Per project aggregate applies.

CERTIFICATE HOLDER**CANCELLATION**

City of Troy 500 W. Big Beaver Troy MI 48064	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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