

CITY COUNCIL MINUTES

March 21, 2022

Standard Purchasing Resolution 2: Award to Sole Bidder Meeting Specifications – Mosquito Control Services

Resolution #2022-03-045-J-4d

RESOLVED, That Troy City Council hereby **AWARDS** a three (3) year contract to provide seasonal requirements for Mosquito Control to the sole bidder; *Vector Disease Control International of Little Rock, Arkansas*, for an estimated total annual cost of \$36,350 for 2022, \$37,475 for 2023, and \$38,600 for 2024; 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, 2024.

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.

BLANKET ORDER

No. 2022-00001175

DATE: 03/25/2022

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

COUNCIL RESOLUTION
2022-03-045-J-4d

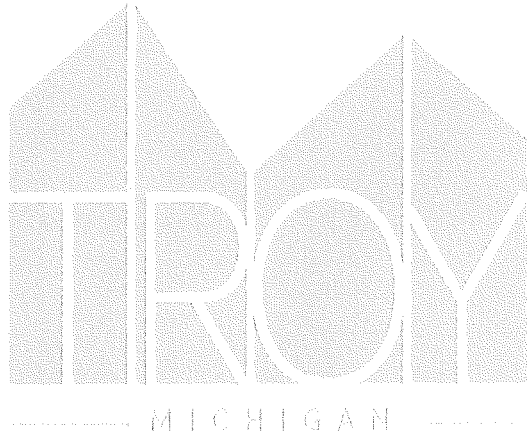
VENDOR NO. 176629

Vendor

VECTOR DISEASE CONTROL INTERNATIONAL, LLC
1320 BROOKWOOD DR, STE H
LITTLE ROCK, AR 72202

QUANTITIES ARE ESTIMATED AND WILL BE ORDERED AS NEEDED

| QUANTITY | UNIT | DESCRIPTION | UNIT COST | TOTAL COST |
|----------|------|---|------------|-------------|
| 5 | Each | Retention Pond Application - Proposal A Treatment frequency is once in May, June, July, August and September. Cemeteries only are to be treated 24 to 48 hours before Memorial Day and Labor Day only. | 630.0000 | \$3,150.00 |
| 5 | Each | Parks Application - Proposal B | 3,690.0000 | \$18,450.00 |
| 5 | Each | Municipal Sites Application - Proposal C | 495.0000 | \$2,475.00 |
| 2 | Each | Cemeteries Application - Proposal D | 200.0000 | \$400.00 |
| 5 | Each | Sylvan Glen Application - Proposal E | 1,550.0000 | \$7,750.00 |
| 5 | Each | Sanctuary Lake Application - Proposal F | 485.0000 | \$2,425.00 |
| 200 | Each | Larvicide Briquette for Park Catch Basins - Proposal G | 5.5000 | \$1,100.00 |



Entered By: Andrew Chambliss

\$35,750.00

Special Instructions:

Council Award Date: 3/21/2022 Standard Purchasing Resolution 2: Award to Sole Bidder Meeting Specifications – Mosquito Control Services

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.

Opening Date: 03/10/2022
Date Reviewed: 03/10/2022

CITY OF TROY
BID TABULATION
MOSQUITO CONTROL

ITB-COT 22-09
PAGE 1 OF 1

| | |
|---------------|---|
| VENDOR NAME: | Vector Disease Control International (VDCI) |
| CITY: | Little Rock, Arkansas |
| CHECK AMOUNT: | \$2,000.00 |
| CHECK #: | 1052369 |

Proposal: REQUIREMENTS FOR MOSQUITO CONTROL

| Proposal | Product Type | Estimated Acreages | Unit Pricing | | | | | |
|---|---------------------|--------------------|----------------------|------------|-------------|------------|-------------|------------|
| | | | Cost Per Application | | | | | |
| | | | 2022 | | 2023 | | 2024 | |
| | | | Labor | Product | Labor | Product | Labor | Product |
| Proposal A - Retention Ponds | Larvicide | 5.6 | \$150.00 | \$280.00 | \$150.00 | \$300.00 | \$150.00 | \$320.00 |
| | Adulticide | 10.2 | \$100.00 | \$100.00 | \$100.00 | \$110.00 | \$100.00 | \$120.00 |
| Est Annual Cost Proposal A | | | \$3,150.00 | | \$3,300.00 | | \$3,450.00 | |
| Proposal B - Parks | Larvicide | 38.3 | \$1,300.00 | \$1,780.00 | \$1,300.00 | \$1,850.00 | \$1,300.00 | \$1,920.00 |
| | Adulticide | 290.1 | \$450.00 | \$160.00 | \$450.00 | \$180.00 | \$450.00 | \$200.00 |
| Est Annual Cost Proposal B | | | \$18,450.00 | | \$18,900.00 | | \$19,350.00 | |
| Proposal C - Misc. Municipal Sites | Larvicide | 4 | \$85.00 | \$190.00 | \$85.00 | \$200.00 | \$85.00 | \$210.00 |
| | Adulticide | 65.7 | \$100.00 | \$120.00 | \$100.00 | \$125.00 | \$100.00 | \$130.00 |
| Est Annual Cost Proposal C | | | \$2,475.00 | | \$2,550.00 | | \$2,625.00 | |
| Proposal D - Cemeteries | Adulticide | 9.8 | \$100.00 | \$100.00 | \$100.00 | \$105.00 | \$100.00 | \$110.00 |
| Est Annual Cost Proposal D | | | \$1,000.00 | | \$1,025.00 | | \$1,050.00 | |
| Proposal E - Sylvan Glen Golf Course | Larvicide | 21.1 | \$330.00 | \$1,000.00 | \$330.00 | \$1,050.00 | \$330.00 | \$1,100.00 |
| | Adulticide | 23.5 | \$100.00 | \$120.00 | \$100.00 | \$125.00 | \$100.00 | \$130.00 |
| Est Annual Cost Proposal E | | | \$7,750.00 | | \$8,025.00 | | \$8,300.00 | |
| Proposal F - Sanctuary Lake Golf Course | Larvicide | 2.2 | \$50.00 | \$115.00 | \$50.00 | \$115.00 | \$50.00 | \$115.00 |
| | Adulticide | 26 | \$200.00 | \$120.00 | \$200.00 | \$130.00 | \$200.00 | \$140.00 |
| Est Annual Cost Proposal F | | | \$2,425.00 | | \$2,475.00 | | \$2,525.00 | |
| Est Annual Total Cost Proposals A - F | | | \$35,250.00 | | \$36,275.00 | | \$37,300.00 | |
| Proposal G - Park Catch Basins | Larvicide Briquette | 200 | \$400.00 | \$700.00 | \$450.00 | \$750.00 | \$500.00 | \$800.00 |
| Est Cost Per Application Proposal G | | | \$1,100.00 | | \$1,200.00 | | \$1,300.00 | |
| Estimated Annual Total: | | | \$36,350.00 | | \$37,475.00 | | \$38,600.00 | |
| Estimated Grand Total 3-Years | | | \$112,425.00 | | | | | |

| | | |
|--------------------------------|---------------------|--|
| Site Inspection | Y/N | Y |
| Contact Information: | Hours of Operation: | 24 hours |
| | 24 Hr. Phone No.: | 419-722-2607 |
| | Email Address: | tgreen@vdc.net |
| Can complete 100% work timely: | Y/N | Y |
| Completion Schedule Met: | Y/N | Y |
| Insurance Met: | Y/N | Y |
| References: | Y/N | Y |
| MSDS Sheet(s) attached: | Y/N | Y |
| Pesticide License: | Y/N | Y |
| Number of years' experience: | Y/N | 30 years |
| Payment Terms: | | Net 30 |
| Acknowledgement: | Y/N | Y |
| Exceptions: | Y/N | None |
| General Questionnaire: | Y/N | Y |

ATTEST:

(*Bid Opening conducted via a Zoom Meeting)

Scott Carruthers
Laura Campbell
Heather Chomiak
Andrew Chambliss
Jackie Ahlstrom

Emily Frontera
Purchasing Manager



**CITY OF TROY
BID PROPOSAL**

ITB-COT 22-09
Page 1 of 8

The undersigned proposes to furnish **THREE-YEAR REQUIREMENTS OF MOSQUITO CONTROL** in accordance with the specifications and maps attached hereto and to be considered an integral part hereof, at the following prices:

COMPANY NAME: VDCI

PROPOSAL:

The undersigned as bidder declares that he/she having examined the specifications with related documents and the sites of the proposed work, and being familiar with all of the conditions surrounding the application of the proposed work, including availability of materials and labor, hereby proposes to furnish all labor, tools, support equipment (trucks, trailers, sprayers, etc.), transportation and materials to complete the project in accordance with the contract documents, within the time set forth therein, and at the prices stated below. These prices are to cover all expenses incurred in performing the work required under the contract documents, of which this Proposal is part.

IMPORTANT:

Unit prices shall be quoted by the COST / UNIT OF MEASURE (acre, mile, and basin) / APPLICATION for each designated year of service, with the exception of the briquettes which shall be quoted on a per unit basis per year.

| Mosquito Control | | | | | | | | |
|--|---------------------|--------------------|-------------------------------|---------|---------|---------|---------|---------|
| Proposals | Product Type | Estimated Acreages | Unit Pricing | | | | | |
| | | | Cost Per Acre per Application | | | | | |
| | | | 2022 | | 2023 | | 2024 | |
| | | | Labor | Product | Labor | Product | Labor | Product |
| Proposal A- Retention Ponds | Larvicide | 5.6 | \$ 150 | \$ 280 | \$ 150 | \$ 300 | \$ 150 | \$ 320 |
| | Adulticide | 10.2 | \$ 100 | \$ 100 | \$ 100 | \$ 110 | \$ 100 | \$ 120 |
| Proposal B- Parks | Larvicide | 38.3 | \$ 1300 | \$ 1780 | \$ 1300 | \$ 1850 | \$ 1300 | \$ 1920 |
| | Adulticide | 290.1 | \$ 450 | \$ 160 | \$ 450 | \$ 180 | \$ 450 | \$ 200 |
| Proposal C- Misc. Municipal Sites | Larvicide | 4 | \$ 85 | \$ 190 | \$ 85 | \$ 200 | \$ 85 | \$ 210 |
| | Adulticide | 65.7 | \$ 100 | \$ 120 | \$ 100 | \$ 125 | \$ 100 | \$ 130 |
| Proposal D- Cemeteries | Adulticide | 9.8 | \$ 100 | \$ 100 | \$ 100 | \$ 105 | \$ 100 | \$ 110 |
| Proposal E- Sylvan Glen Golf Course | Larvicide | 21.1 | \$ 330 | \$ 1000 | \$ 330 | \$ 1050 | \$ 330 | \$ 1100 |
| | Adulticide | 23.5 | \$ 100 | \$ 120 | \$ 100 | \$ 125 | \$ 100 | \$ 130 |
| Proposal F- Sanctuary Lake Golf Course | Larvicide | 2.2 | \$ 50 | \$ 115 | \$ 50 | \$ 115 | \$ 50 | \$ 115 |
| | Adulticide | 26 | \$ 200 | \$ 120 | \$ 200 | \$ 130 | \$ 200 | \$ 140 |
| Proposal G- Park Catch Basins | Larvicide Briquette | # of basins 200 | \$ 400 | \$ 700 | \$ 450 | \$ 750 | \$ 500 | \$ 800 |

EXTENSIONS:

The City of Troy Purchasing Department will make the extensions to calculate the cost per application which equals (labor + product) x estimated number of acres/basins; the yearly totals and the entire contract total.

UNIT PRICES:

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

ESTIMATED QUANTITIES:

Quantities listed are estimated and not guaranteed, but are to be used for award purposes only. The City may add or delete acreage or number of catch basins at its option without invalidating the original contract.

INFORMATION:

Additional general information or questions about this project, please contact **Dennis Trantham** Facilities & Grounds Operations Manager at 248-524-3503 or at Dennis.Trantham@troymi.gov. Dennis is the City's designated representative for this project.

DESIGNATED CITY REPRESENTATIVE:

Dennis Trantham, Facilities & Grounds Operations Manager is the designated City representative for this project.

SITE INSPECTION:

Bidders should examine example 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 errors or omissions in his/her bid proposal. Contact **Dennis Trantham**, Facilities & 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.

(X) Our company visited the locations on March 1st, 2022

() Our company did not visit the sites.

DOWNPAYMENTS AND PREPAYMENTS:

Any bid submitted which requires a down payment or prepayment for services prior to performance and acceptance, as being in conformance with specifications will not be considered for award. No payments will be made until work/ service is performed to the satisfaction of the authorized City representative.

CONTACT INFORMATION:

Hours of Operations: 24 hours Email Address: tgreen@vdc.net

24 Hr. Phone No. 419-722-2607

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, 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 responsible bidder for each proposal or to combine proposals for all three years or for each year whatever is deemed to be in the City of Troy's best interest and reserves the right to reject low bids which have major deviations from specifications; to accept a higher bid which has only minor deviations.

COMPANY NAME: VDCI

Please state the amount of work that your company can certify to be completed within the time allowable:

- (x) 100% of the contract
() Partial Contract:
() PROPOSAL (A)
() PROPOSAL (B)
() PROPOSAL (C)
() PROPOSAL (D)
() PROPOSAL (E)
() PROPOSAL (F)
() PROPOSAL (G)

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.

LAWS:

All applicable State of Michigan and Federal laws, City and County ordinances, licenses and regulations of all agencies having jurisdiction shall apply to the award throughout and incorporated herein by reference.

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 or fair competition.

CONTRACT FORMS:

Bidders should complete the Agreement, 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. Sole Proprietors must include the Worker's compensation Release Form as well.

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)].

SUBCONTRACTORS:

The undersigned shall submit a list of proposed subcontractors, if applicable, for approval by the designated City representative. 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.

PURCHASE ORDER(S):

After the Troy City Council has approved the award recommendation and acceptable insurance is on file; the successful bidder will receive a purchase order issued from the City of Troy, which will create a bilateral contract between the City of Troy and the successful bidder. The purchase order shall commit the bidder to perform the contract in accordance with specifications. A contract document will not be issued.

COMPANY NAME: VDCI

INVOICES:

The contractor shall submit to the designated City representative detailed invoices that include minimally the purchase order number, type and cost of product applied, cost of labor to apply product, and location(s) of the application. The Designated City representative reserves the right to review a prototype of the invoice for completeness prior to award. Invoices that are incomplete will not be paid until all requested/required information is submitted. Payments will be made monthly on the basis of the value of the work completed to date that is within the parameters of the specifications.

COMPLETION SCHEDULE:

The designated City representative shall approve the work schedule prior to the start of the project. His/her decision as to acceptability shall be deemed in the City of Troy's best interest. The City of Troy is the only party to this contract that may authorize amendment of this schedule.

Areas are to be treated with a larvicide and an adulticide once in May, June, July, August, and September of 2022 and of each subsequent contract year. Additional pesticide applications on all or part of subject areas may be requested. Cost per acre per application will hold for additional applications.

(X) Our company can meet the completion schedule

() Our company cannot meet the completion schedule but offers: _____

REFERENCES:

The City of Troy requires that your company list at least three (3) clients who have recently had similar work performed by your company during the past three years. Please include the City of Troy as a reference, if the work was similar in nature to this project.

| | | | |
|----------|--|----------|-----------------------|
| COMPANY: | <u>Dow Chemical Industrial Park</u> | | |
| ADDRESS: | <u>693 Washington St. #627 Midland, MI 48640</u> | | |
| PHONE: | <u>989.638.6978</u> | CONTACT: | <u>Megan Raup</u> |
| EMAIL: | <u>mraup@dow.com</u> | | |
| | | | |
| COMPANY: | <u>The City of Chicago</u> | | |
| ADDRESS: | <u>2133 W. Lexington St. Chicago, IL 60612</u> | | |
| PHONE: | <u>312.746.9026</u> | CONTACT: | <u>Claudia Blanco</u> |
| EMAIL: | <u>Claudia.blanco@cityofchicago.org</u> | | |
| | | | |
| COMPANY: | <u>Glynn County, Georgia</u> | | |
| ADDRESS: | <u>4145 Norwich St. Brunswick, GA 31520</u> | | |
| PHONE: | <u>912.554.7701</u> | CONTACT: | <u>David Austin</u> |
| EMAIL: | _____ | | |

CONTRACT TERMINATION:

The City of Troy shall reserve the right to terminate the contract upon 30 days 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.

COMPANY NAME: Vector Disease Control International

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.

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.

COMPANY NAME: VDCI

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.

1. **MANDATORY REQUIREMENT:** THE SUCCESSFUL BIDDER(s) MUST PROVIDE ONE OF THE FOLLOWING ALTERNATIVES (either A or B or C)
- A. Environmental Impairment Liability Coverage: \$ 1,000,000 Limits; or
 - B. A letter from the general liability carrier indicating that environmental exposures are covered under the general liability coverage; or
 - C. A letter from the insurance company indicating that the work to be performed by their client is not considered an environmental liability exposure.

Our company will provide Alternate: **A or B or C** (Circle one)

2. **NON-MANDATORY REQUIREMENT:** PER PROJECT AGGREGATE LIMIT ENDORSEMENT

The City of Troy would prefer that a per project aggregate limit endorsement be included on the insurance certificate obtained by the successful bidder(s).

- (☒) Our company can obtain the coverage at an additional cost of \$ 0 for coverage explained below
- () Our company cannot obtain this coverage at any cost.

COMPANY NAME: VDCI

DEVIATION FROM SPECIFICATIONS SECTION

| | |
|---|--|
| <i>Proposed Product(s)</i> | Altosid XR 150 briquettes for the catch basins, Perm-X 30-30 for adulticiding |
| <input type="radio"/> See attached | |
| <input checked="" type="radio"/> <i>MSDS Sheet(s) attached to bid</i> | <input checked="" type="radio"/> Sample of label(s) attached to bid |
| <i>Reason for Proposed Alternative(s)</i> | |
| <input type="radio"/> See attached | |

APPROVED ALTERNATES:

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

COMPANY NAME: VDCI

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, 2022 whichever is later, and continue for three calendar years expiring December 31, 2024. 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

Ted Green

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: 27-4501078

COMPANY: Vector Disease Control International

ADDRESS: 1320 Brookwood Dr. CITY Little Rock STATE: AR ZIP: 72202

TELEPHONE NUMBER (866) 691-3987 FAX NUMBER (866) 839-8695

REPRESENTATIVE NAME: Theodore Green

(Print)

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE:

Ted Green

PAYMENT TERMS: Net 30

EMAIL: tgreen@vdc.net

DELIVERY: AS SPECIFIED

WARRANTY:

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

ACKNOWLEDGEMENT:

I, Theodore Green, certify that I have read the Instructions to Bidders (3 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

Ted Green

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

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.

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

**CITY OF TROY
BIDDER'S GENERAL QUESTIONNAIRE
MOSQUITO CONTROL**

Please provide the following information regarding your bid proposal.

1. State number of years' experience in this work: 30
2. List three (3) references that you have contracted with during the past year for this type of work. Include name of organization, contact person, telephone number, and email address:

| ORGANIZATION EMAIL | CONTACT PERSON | TELEPHONE NUMBER |
|-----------------------------|-----------------------|---------------------|
| <u>The City of Chicago</u> | <u>Claudia Blanco</u> | <u>312.746.9026</u> |
| <u>Dow Chemical-Midland</u> | <u>Megan Raup</u> | <u>989.638.6978</u> |
| <u>Glynn County, GA</u> | <u>David Austin</u> | <u>912.554.7701</u> |

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.
Vector Disease Control International, LLC
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.)
2021 Chevy Colorado (1), Model 9-10 London-Fogger ULV sprayer, Maruyama
backpack (granular larvicide application)
5. List of Personnel from the firm who would be assigned to this account along with a list of their certifications.
Theodore Green, Regional Director
6. Does your Company have a Pesticide Application License? Y X or N ____ (If your Company does, please include a copy 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 we do not use subcontractors.

COMPANY NAME: _____



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 DE for whom
Theodore Green, bearing the office title of Regional Director,
whose signature is affixed to this proposal, is duly authorized to execute contracts.

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

| | |
|-------|-------|
| _____ | _____ |
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~~AN INDIVIDUAL, WHOSE SIGNATURE IS AFFIXED TO THE PROPOSAL:~~

| | |
|-------|-------|
| _____ | _____ |
|-------|-------|



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

The undersigned, the owner or authorized officer of VDCE (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 VDCE and any member of the City of Troy City Council or City of Troy management.

List any Familial Relationships:



BIDDER: VDCE

By: JAMES LARONDE

Its: Regional Sales Manager

STATE OF MICHIGAN)

)ss.

COUNTY OF Isabella)

Kierstin Graham
Notary Public, State of Michigan
Montcalm County
Expires July 22, 2027
Acting in the County of Isabella

This instrument was acknowledged before me on the 8th day of March, 2022, by

James Laronde



CITY OF TROY
OAKLAND COUNTY, MICHIGAN
NON-COLLUSION AFFIDAVIT

TO WHOM IT MAY CONCERN:

JAMES LAROUERS, being duly sworn deposed, says that he/she
(Print Full Name)

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

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

[Signature]
SIGNATURE OF PERSON SUBMITTING BID

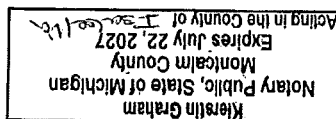
[Signature]
NOTARY'S SIGNATURE

Subscribed and sworn to before me this 9th day of March, 2024 and for

Isabella County.

My commission expires:

July 22, 2027





**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.

VDCI
Name of Agency/Company/Firm (Please Print)

JAMES LARDUERE REGIONAL SALES MANAGER
Name and title of authorized representative (Please Print)

[Signature] 3/9/22
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 | Vector Disease Control International, LLC |
| Street Address | 1320 Brookwood Drive, Suite H |
| City | Little Rock, |
| State, Zip | Arakansas 72202 |
| Corporate I.D. Number/State | 27-4501078 |
| Taxpayer I.D. # | 27-4501078 |

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: Theodore Green

Printed Name of Vendor's Authorized Agent: Theodore Green

Witness Signature: James Larouere

Printed Name of Witness: James Larouere



Altosid[®] XR

EXTENDED RESIDUAL BRIQUETS



A SUSTAINED RELEASE PRODUCT TO PREVENT ADULT MOSQUITO EMERGENCE
(INCLUDING THOSE WHICH MAY TRANSMIT WEST NILE VIRUS)

SPECIMEN LABEL

ACTIVE INGREDIENT:

(S)-Methoprene (CAS #65733-16-6) 2.1%

(Dry Weight Basis): 97.9%

OTHER INGREDIENTS: 97.9%

Total. 100.0%

EPA Reg. No. 2724-421

EPA Est. No. 2724-TX-1

KEEP OUT OF REACH OF CHILDREN

CAUTION

SEE ADDITIONAL PRECAUTIONARY STATEMENTS

INTRODUCTION

ALTOSID[®] XR BRIQUETS are designed to release effective levels of (S)-Methoprene insect growth regulator over a period up to 150 days in mosquito breeding sites. Release of (S)-Methoprene insect growth regulator occurs by dissolution of the briquet. Soft mud and loose sediment can cover the briquets and inhibit normal dispersion of the active ingredient. The product may not be effective in those situations where the briquet can be removed from the site by flushing action.

ALTOSID[®] XR BRIQUETS prevent the emergence of adult mosquitoes including: *Anopheles*, *Culex*, *Culiseta*, *Coquillettidia*, and *Mansonia* spp., as well as those of the floodwater mosquito complex (*Aedes*, *Ochlerotatus*, and *Psorophora* spp.) from treated water. Treated larvae continue to develop normally to the pupal stage where they die.

NOTE: (S)-Methoprene insect growth regulator has no effect on mosquitoes which have reached the pupal or adult stage prior to treatment.

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS - CAUTION

Causes moderate eye irritation. Harmful if absorbed through skin. Avoid contact with skin, eyes, or clothing. Wash thoroughly with soap and water after handling.

FIRST AID

Call a poison control center or doctor for treatment advice.

If in 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.

If on skin or clothing

- Take off contaminated clothing.
- Rinse skin immediately with plenty of water for 15-20 minutes.

Have the product container or label with you when calling a poison control center or doctor, or going for treatment. You may also contact 1-800-248-7763 for emergency medical treatment information.

ENVIRONMENTAL HAZARDS

Do not contaminate water when disposing of unused product.

DIRECTIONS FOR USE

It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

APPLICATION TIME

Place **ALTOSID® XR BRIQUETS** at or before the beginning of the mosquito season. Apply **ALTOSID® XR BRIQUETS** prior to flooding when sites are dry, or on snow and ice in breeding sites prior to spring thaw. Under normal conditions, one application will last the entire mosquito season, or up to 150 days, whichever is shorter. Alternate wetting and drying will not reduce their effectiveness.

APPLICATION RATES

Aedes, Ochlerotatus, and Psorophora spp.: For control in non-(or low-) flow shallow depressions (≤ 2 feet in depth), treat on the basis of surface area, placing one **ALTOSID® XR BRIQUET** per 200 ft². Place briquets in the lowest areas of mosquito breeding sites to maintain continuous control as the site alternately floods and dries up.

Culex, Culiseta and Anopheles spp.: Place one **ALTOSID® XR BRIQUET** per 100 ft².

Coquillettidia and Mansonia spp.: For application to cattail marshes and water hyacinth beds. For control of these mosquitoes, place one **ALTOSID® XR BRIQUET** per 100 ft².

Culex sp. in storm water drainage areas, sewers, and catch basins: For catch basins, place one **ALTOSID® XR BRIQUET** into each basin. In cases of large catch basins, follow the chart below to determine the number of briquets to use. For storm water drainage areas, place one briquet per 100 ft² of surface area up to two ft deep. In areas that are deeper than two feet, use one additional briquet per two feet of water depth.

Water flow pressure increases the potential dissolution of the briquet. Conduct regular inspections (visual or biological) in areas of water flow to determine if the briquet is still present. Adjust the retreatment interval based on the results of an inspection.

ALTOSID® XR BRIQUETS Application Chart

| Number of Briquets | Catch Basin Size (Gallons) | Surface Area/ Water Depth (ft) |
|--------------------|----------------------------|-----------------------------------|
| 1 | 0 – 1500 | 0 – 2 |
| 2 | 1500 – 3000 | 2 – 4 |
| 3 | 3000 – 4500 | 4 – 6 |
| 4 | 4500 – 6000 | 6 – 8 |

APPLICATION SITES

ALTOSID® XR BRIQUETS are designed to control mosquitoes in treated areas. Examples of application sites are: storm drains, catch basins, roadside ditches, fish ponds, ornamental ponds and fountains, other artificial water-holding containers, animal watering troughs, cesspools and septic tanks, waste treatment and settling ponds, flooded crypts, transformer vaults, abandoned swimming pools, tires, construction and other manmade depressions, cattail marshes, water hyacinth beds, vegetation-choked phosphate pits, pastures, meadows, rice fields, freshwater swamps and marshes, salt and tidal marshes, treeholes, woodland pools, floodplains, and dredging spoil sites. For application sites connected by a water system, i.e., storm drains or catch basins, treat all of the water-holding sites in the system to maximize the efficiency of the treatment program.

STORAGE AND DISPOSAL

Do not contaminate water, food, or feed by storage or disposal.

STORAGE: Store in a cool place. Do not reuse empty container.

PESTICIDE DISPOSAL: Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility.

CONTAINER DISPOSAL: Nonrefillable container. Do not reuse or refill this container. Completely empty bag into application equipment. Then offer for recycling, if available, or dispose of empty container in a sanitary landfill or by incineration, or if allowed by state and local authorities, by burning. If burned, stay out of smoke.

WARRANTY AND CONDITIONS OF SALE

Seller makes no warranty, expressed or implied, concerning the use and handling of this product other than indicated on the label. To the extent permitted by law, Buyer assumes all risks of use and handling of this material when such use and handling are contrary to label instructions.

For information, or in case of an emergency, call 1-800-248-7763.

www.altosid.com

Wellmark International
1501 East Woodfield Road 200W
Schaumburg, Illinois 60173



ALTOSID, ZOECON and the ZOECON logo are registered trademarks of Wellmark International.
©2005-2010 WELLMARK INTERNATIONAL
Made in USA

May, 2010
Schaumburg, IL

SECTION 1: Identification

1.1. Identification

Product form : Mixture
Trade name : Altosid XR Briquets
Synonyms : PCP #: 27694, 23660A

1.2. Recommended use and restrictions on use

Recommended use : Insect growth regulator.
Restrictions on use : Keep out of reach of children and domestic animals. Avoid contact with eyes, skin or clothing.

1.3. Supplier

Wellmark International
100 Stone Road West, Suite 111
Guelph ON N1G 5L3 - Canada

1.4. Emergency telephone number

Emergency number : 1-800-688-7378
1-800-424-9300 - CHEMTREC
1-703-527-3887 - CHEMTREC - Outside North America - Collect Calls Accepted

SECTION 2: Hazard(s) Identification

2.1. Classification of the substance or mixture

GHS US classification

Serious eye damage/eye irritation Category 2B Causes eye irritation
Carcinogenicity Category 1A May cause cancer

2.2. GHS Label elements, including precautionary statements

GHS US labeling

Hazard pictograms (GHS US) :



GHS08

Signal word (GHS US) : Danger
Hazard statements (GHS US) : Causes eye irritation
May cause cancer

Precautionary statements (GHS US) : Obtain special instructions before use.
Do not handle until all safety precautions have been read and understood.
Wash hands, forearms and face thoroughly after handling.
Wear protective gloves/protective clothing/eye protection/face protection.
IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
If eye irritation persists: Get medical advice/attention.
If exposed or concerned: Get medical advice/attention.
Store locked up.
Dispose of contents/container in accordance with local/regional/national/international regulations.

2.3. Other hazards which do not result in classification

Other hazards which do not result in classification : The finished product is not considered carcinogenic because of the product's physical form. The Hazard Statement "May Cause Cancer" is presented because a component of this product contains naturally occurring crystalline silica (quartz) which is classified as carcinogenic to humans if inhaled. Respiratory exposure to silica dust from the finished product is not expected to occur under normal conditions of use due to the manner in which the constituents are bound. The crystalline silica in the finished product is unlikely to pose personal exposure via inhalation in light of studies conducted that indicate there is minimal liberation of particulates from the product during extreme handling or transport.

Altosid XR Briquets

Safety Data Sheet

2.4. Unknown acute toxicity (GHS US)

Not applicable

SECTION 3: Composition/Information on Ingredients

3.1. Substances

Not applicable

3.2. Mixtures

| Name | Product identifier | % |
|--|----------------------|---------|
| (s)-Methoprene Technical | (CAS-No.) 65733-16-6 | 2.1 |
| Plaster of paris | (CAS-No.) 26499-65-0 | > 80.88 |
| Silica, crystalline - quartz | (CAS-No.) 14808-60-7 | < 0.82 |
| Non-hazardous and/or does not meet criteria for classification | (CAS-No.) N/A | Balance |

SECTION 4: First-aid measures

4.1. Description of first aid measures

- First-aid measures after inhalation : IF INHALED: Remove person to fresh air and keep comfortable for breathing. Call a POISON CENTER or doctor/physician if you feel unwell.
- First-aid measures after skin contact : IF ON SKIN: Wash with plenty of soap and water. If skin irritation or rash occurs: Get medical advice/attention.
- First-aid measures after eye contact : IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice and attention.
- First-aid measures after ingestion : IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell. Rinse mouth. Do NOT induce vomiting unless directed to do so by medical personnel.

4.2. Most important symptoms and effects (acute and delayed)

- Symptoms/effects after eye contact : Causes mild eye irritation.

4.3. Immediate medical attention and special treatment, if necessary

Treat symptomatically.

SECTION 5: Fire-fighting measures

5.1. Suitable (and unsuitable) extinguishing media

- Suitable extinguishing media : Water spray. Dry chemical. Foam. Carbon dioxide.
- Unsuitable extinguishing media : Avoid heavy hose streams.

5.2. Specific hazards arising from the chemical

- Reactivity : The product is non-reactive under normal conditions of use, storage and transport.

5.3. Special protective equipment and precautions for fire-fighters

- Protection during firefighting : Do not attempt to take action without suitable protective equipment. Self-contained breathing apparatus. Complete protective clothing.

SECTION 6: Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

6.1.1. For non-emergency personnel

- Emergency procedures : Wear appropriate personal protective equipment, avoid direct contact.

6.1.2. For emergency responders

- Protective equipment : Do not attempt to take action without suitable protective equipment. For further information refer to section 8: Exposure controls/personal protection.
- Emergency procedures : Ventilate area. Do NOT wash away into sewer. Avoid release to the environment. Stay upwind. Wear appropriate personal protective equipment, avoid direct contact.

6.2. Environmental precautions

Avoid release to the environment.

6.3. Methods and material for containment and cleaning up

- Methods for cleaning up : Use appropriate PPE. Sweep or scoop spills, dispose of any unusable material in approved landfill.

Altosid XR Briquets

Safety Data Sheet

SECTION 7: Handling and storage

7.1. Precautions for safe handling

- Precautions for safe handling : Ensure good ventilation of the work station. Do not handle until all safety precautions have been read and understood. Take all necessary technical measures to avoid or minimize the release of the product on the workplace. Provide local exhaust or general room ventilation. Wear personal protective equipment. Avoid contact with skin and eyes.
- Hygiene measures : Wash contaminated clothing before reuse. Do not eat, drink or smoke when using this product. Always wash hands after handling the product.

7.2. Conditions for safe storage, including any incompatibilities

- Storage conditions : Store locked up. Store in a cool dry place. Protect from sunlight. Store in a well-ventilated place.

SECTION 8: Exposure controls/personal protection

8.1. Control parameters

| Plaster of paris (26499-65-0) | | |
|---|------------------|--|
| OSHA | OSHA PEL TWA [1] | 15 mg/m ³ (total dust) 5 mg/m ³ (respirable fraction) |
| NIOSH | NIOSH REL TWA | 10 mg/m ³ (total dust) 5 mg/m ³ (respirable dust) |
| Silica, crystalline - quartz (14808-60-7) | | |
| ACGIH | ACGIH OEL TWA | 0.025 mg/m ³ : (respirable particulate matter) |
| OSHA | OSHA PEL TWA [1] | 50 µg/m ³ |
| IDLH | IDLH | 50 mg/m ³ : (respirable dust) |
| NIOSH | NIOSH REL TWA | 0.05 mg/m ³ : (respirable dust) |

8.2. Appropriate engineering controls

- Appropriate engineering controls : Adequate ventilation systems as needed to control concentrations of airborne contaminants below applicable threshold limit values.
- Environmental exposure controls : Avoid release to the environment.

8.3. Individual protection measures/Personal protective equipment

Hand protection:

Protective gloves

Eye protection:

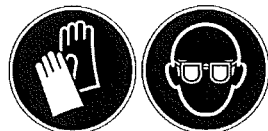
Safety glasses

Skin and body protection:

Wear suitable protective clothing

Respiratory protection:

In case of insufficient ventilation, use NIOSH approved respiratory protection.



SECTION 9: Physical and chemical properties

9.1. Information on basic physical and chemical properties

- Physical state : Solid
- Appearance : White to gray briquet
- Color : White to gray
- Odor : Slight hydrocarbon

Altosid XR Briquets

Safety Data Sheet

| | |
|---|---------------------------|
| Odor threshold | : No data available |
| pH | : No data available |
| Melting point | : No data available |
| Freezing point | : Not applicable |
| Boiling point | : No data available |
| Flash point | : Not applicable |
| Relative evaporation rate (butyl acetate=1) | : No data available |
| Flammability (solid, gas) | : Non-flammable |
| Vapor pressure | : No data available |
| Relative vapor density at 20 °C | : No data available |
| Relative density | : 1.04 g/cc (64.9 lb/ft3) |
| Solubility | : No data available |
| Partition coefficient n-octanol/water (Log Pow) | : No data available |
| Auto-ignition temperature | : Not applicable |
| Decomposition temperature | : No data available |
| Viscosity, kinematic | : Not applicable |
| Viscosity, dynamic | : Not applicable |
| Explosion limits | : Not applicable |
| Explosive properties | : Not explosive |
| Oxidizing properties | : Not applicable |

9.2. Other information

No additional information available

SECTION 10: Stability and reactivity

10.1. Reactivity

The product is non-reactive under normal conditions of use, storage and transport.

10.2. Chemical stability

Stable under normal conditions.

10.3. Possibility of hazardous reactions

No dangerous reactions known under normal conditions of use. Hazardous polymerization will not occur.

10.4. Conditions to avoid

Avoid direct sunlight.

10.5. Incompatible materials

No additional information available

10.6. Hazardous decomposition products

Under normal conditions of storage and use, hazardous decomposition products should not be produced.

SECTION 11: Toxicological information

11.1. Information on toxicological effects

| Altosid XR Briquets | |
|---------------------|--------------|
| LD50 oral rat | > 5100 mg/kg |
| LD50 dermal rabbit | > 2100 mg/kg |

| Silica, crystalline - quartz (14808-60-7) | |
|---|----------------------------|
| Listed on IARC (International Agency for Research on Cancer), Listed as carcinogen on NTP (National Toxicology Program) | |
| IARC group | 1 - Carcinogenic to humans |
| National Toxicity Program (NTP) Status | Known Human Carcinogens |
| In OSHA Hazard Communication Carcinogen list? | Yes |

| GHS-US Properties | Classification |
|-----------------------------|----------------|
| Acute toxicity (oral) | Not classified |
| Acute toxicity (dermal) | Not classified |
| Acute toxicity (inhalation) | Not classified |
| Skin corrosion/irritation | Not classified |

Altosid XR Briquets

Safety Data Sheet

| | |
|--|------------------------|
| Serious eye damage/irritation | Causes eye irritation. |
| Respiratory or skin sensitization | Not classified |
| Germ cell mutagenicity | Not classified |
| Carcinogenicity | May cause cancer. |
| Reproductive toxicity | Not classified |
| Specific target organ toxicity (single exposure) | Not classified |
| Specific target organ toxicity (repeated exposure) | Not classified |
| Aspiration hazard | Not classified |

Potential health effects

Inhalation

- Acute : Under normal conditions of use, no health effects are expected.
- Chronic : Exposure to respirable crystalline silica is not expected during normal use of this product. However, prolonged overexposure to respirable crystalline silica may cause lung disease (silicosis).

Skin

- Acute : May cause mild mechanical irritation.

Eye

- Acute : Causes mild eye irritation.

Ingestion

- Acute : Under normal conditions of use, no health effects are expected.

- Mutagenicity** : (s)-Methoprene has been tested and found negative for mutagenicity potential.

- Carcinogenicity** : (s)-Methoprene is not classified as a carcinogen by NTP, IARC or OSHA. Exposure to respirable crystalline silica dust from the finished product is not expected to occur due to the manner in which the constituents are bound, thus the finished product is not considered carcinogenic under conditions of normal use.

- Reproductive Effects** : (s)-Methoprene is not a reproductive toxin and does not cause birth defects.

SECTION 12: Ecological information

12.1. Toxicity

| (s)-Methoprene Technical (65733-16-6) | |
|---------------------------------------|--|
| LC50 Acute fish 1 | 0.76 mg/l (Exposure time: 96h - Rainbow trout) |
| LC50 Acute fish 2 | > 0.37 mg/l (Exposure time: 96h - Blue gill) |
| LC50 Acute crustacea 1 | 0.11 mg/l (Exposure time: 96h - Mysid shrimp) |
| LC50 Acute crustacea 2 | 0.36 mg/l (Exposure time: 48h - Daphnia magna) |
| NOEC Chronic fish 1 | 0.048 mg/l (Fathead minnow) |
| NOEC Chronic crustacea 1 | 0.014 mg/l (Mysid shrimp) |

12.2. Persistence and degradability

| (s)-Methoprene Technical (65733-16-6) | |
|---------------------------------------|--|
| Persistence and degradability | (s)-Methoprene degrades rapidly in sunlight, both in water and on inert surfaces. The pesticide also is metabolized rapidly in soil and does not leach. Thus, it should not persist in soil or contaminate ground water. |

12.3. Bioaccumulative potential

No data available

12.4. Mobility in soil

| (s)-Methoprene Technical (65733-16-6) | |
|---------------------------------------|---|
| Mobility in soil | Rapidly metabolized in soil under both aerobic and anaerobic conditions (half-life 10-14 days). |

12.5. Other adverse effects

No data available

SECTION 13: Disposal considerations

13.1. Disposal methods

- Product/Packaging disposal recommendations : Dispose of content and/or container in accordance with local, regional, national, and/or international regulations.

Altosid XR Briquets

Safety Data Sheet

SECTION 14: Transport information

| | UN number | Proper Shipping Name | Transport hazard class(es) | Packing group | Environmental hazards |
|------|---------------|----------------------|----------------------------|---------------|-----------------------|
| DOT | Not regulated | Not regulated | Not regulated | Not regulated | Not applicable |
| IMDG | Not regulated | Not regulated | Not regulated | Not regulated | Not applicable |
| IATA | Not regulated | Not regulated | Not regulated | Not regulated | Not applicable |

SECTION 15: Regulatory information

15.1. US Federal regulations

| | |
|---|--|
| Silica, crystalline - quartz (14808-60-7) | |
| Listed on the United States TSCA (Toxic Substances Control Act) inventory | |
| EPA Labelling | |
| EPA Registration Number | PCP #: 27694 |
| PMRA INFORMATION: This chemical is a pesticide registered by the Pest Management Regulatory Agency and is subject to certain labeling requirements under the Pest Control Products Act. | |
| FIFRA Hazard statements | Caution |
| FIFRA Precautionary statements | KEEP OUT OF REACH OF CHILDREN. |
| FIFRA Hazards to Humans and Domestic Animals | May irritate eyes. Avoid breathing dust. Avoid contact with skin, eyes or clothing. Wear chemical resistant gloves when handling and/or applying product. Do not use on food crops or in water which may be used for immediate human or livestock drinking purposes. This product contains a petroleum distillate which is toxic to aquatic organisms. Avoid contamination of aquatic systems other than the target areas during the application of this product. Do not contaminate these non-target aquatic systems through direct application, disposal of waste or cleaning equipment. |
| FIFRA First aid | IF SWALLOWED: Call a poison control center or doctor immediately for treatment advice. Do not induce vomiting unless told to do so by a poison control center or doctor. Do not give ANY liquid to the person. Do not give anything by mouth to an unconscious person. IF IN 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. IF ON SKIN OR CLOTHING: 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. IF INHALED: Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth to mouth if possible. Call poison control center or doctor for treatment advice. Take the container label or product name and Pest Control Product Registration Number with you when seeking medical attention. |
| FIFRA Environmental hazards | |

15.2. US State regulations

No additional information available

SECTION 16: Other information

Issue date : 10 February 2016
Revision date : 09 July 2021

SDS US (GHS HazCom 2012) - CGP

The information and statements herein are believed to be reliable but are not to be construed as a warranty or representation for which we assume legal responsibility. Users should undertake sufficient verification and testing to determine the suitability for their own particular purpose of any information or products referred to herein. NO WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE IS MADE.

SECTION 1: Identification

1.1. Identification

Product form : Mixture
Trade name : Perm-X UL 30-30
Synonyms : 100208981; 100208982; 100208983; 100208984; 100510353; EPA Reg. No.: 89459-44

1.2. Recommended use and restrictions on use

Recommended use : Insecticide.
Restrictions on use : Avoid contact with eyes, skin and clothing. Avoid inhalation of vapors or fumes. Do NOT take internally. Keep out of reach of children.

1.3. Supplier

Central Garden & Pet Company
1501 E. Woodfield Road, Suite 200W
Schaumburg, IL 60173 - United States

www.centralmosquitocontrol.com

1.4. Emergency telephone number

Emergency number : 1-800-248-7763
1-800-424-9300 - CHEMTREC
1-703-527-3887 - CHEMTREC - Outside North America - Collect Calls Accepted

SECTION 2: Hazard(s) identification

2.1. Classification of the substance or mixture

GHS US classification

| | |
|---|--|
| Acute toxicity (oral) Category 4 | Harmful if swallowed |
| Acute toxicity (inhalation) Category 4 | Harmful if inhaled |
| Skin sensitization, Category 1 | May cause an allergic skin reaction |
| Specific target organ toxicity (single exposure) Category 1 | Causes damage to organs |
| Aspiration hazard Category 1 | May be fatal if swallowed and enters airways |

2.2. GHS Label elements, including precautionary statements

GHS US labeling

Hazard pictograms (GHS US)



Signal word (GHS US)

: Danger

Hazard statements (GHS US)

: Harmful if swallowed or if inhaled
May be fatal if swallowed and enters airways
May cause an allergic skin reaction
Causes damage to organs (nervous system)

Precautionary statements (GHS US)

: Do not breathe dust/fume/gas/mist/vapours/spray.
Wash hands, forearms and face thoroughly after handling.
Do not eat, drink or smoke when using this product.
Use only outdoors or in a well-ventilated area.
Contaminated work clothing must not be allowed out of the workplace.
Wear protective gloves/protective clothing/eye protection/face protection.
If swallowed: Immediately call a poison center or doctor.
If on skin: Wash with plenty of water.
If inhaled: Remove person to fresh air and keep comfortable for breathing.
If exposed: Call a poison center/doctor.
Call a poison center or doctor if you feel unwell.
Rinse mouth.
Do NOT induce vomiting.
If skin irritation or rash occurs: Get medical advice/attention.

Perm-X UL 30-30

Safety Data Sheet

Wash contaminated clothing before reuse.
Store locked up.
Dispose of contents/container to in accordance with local/regional/national/international regulations.

2.3. Other hazards which do not result in classification

Other hazards not contributing to the classification : This product is extremely toxic to aquatic organisms, including fish and invertebrates. This product is highly toxic to bees exposed to direct treatment on blooming crops or weeds. Under United States Regulations (29 CFR 1910.1200 - Hazard Communication Standard), this product is considered hazardous.

2.4. Unknown acute toxicity (GHS US)

Not applicable

SECTION 3: Composition/Information on ingredients

3.1. Substances

Not applicable

3.2. Mixtures

| Name | Product identifier | % |
|--|-------------------------------------|---------|
| Permethrin | (CAS-No.) 52645-53-1 | 30 |
| Piperonyl butoxide | (CAS-No.) 51-03-6 | 30 |
| Petroleum distillates, hydrotreated (mild) heavy paraffinic and hydrotreated (mild) light paraffinic | (CAS-No.) 64742-54-7 and 64742-55-8 | 38.81 |
| Non-hazardous and/or does not meet criteria for classification | (CAS-No.) N/A | Balance |

SECTION 4: First-aid measures

4.1. Description of first aid measures

First-aid measures general : Call a physician immediately.

First-aid measures after inhalation : IF INHALED: Remove person to fresh air and keep comfortable for breathing. Call a poison center/doctor/physician if you feel unwell.

First-aid measures after skin contact : IF ON SKIN: Wash with plenty of soap and water. Take off contaminated clothing. If skin irritation or rash occurs: Get medical advice/attention.

First-aid measures after eye contact : IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice and attention.

First-aid measures after ingestion : IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell. Call a physician immediately. Rinse mouth. Do NOT induce vomiting unless directed to do so by medical personnel.

4.2. Most important symptoms and effects (acute and delayed)

Symptoms/effects after inhalation : Harmful if inhaled. Permethrin affects nervous system. Symptoms of overexposure to permethrin include diarrhea, salivation, tremors, convulsions, hyperactivity and hypersensitivity.

Symptoms/effects after skin contact : May cause an allergic reaction in individuals with a sensitivity to Piperonyl butoxide.

Symptoms/effects after ingestion : Harmful if swallowed. Permethrin affects the nervous system. Aspiration Hazard - may be fatal if swallowed and enters airways.

4.3. Immediate medical attention and special treatment, if necessary

Treat symptomatically.

SECTION 5: Fire-fighting measures

5.1. Suitable (and unsuitable) extinguishing media

Suitable extinguishing media : Water spray. Dry powder. Foam. Carbon dioxide.

Unsuitable extinguishing media : Avoid heavy hose streams.

5.2. Specific hazards arising from the chemical

Reactivity : The product is non-reactive under normal conditions of use, storage and transport.

5.3. Special protective equipment and precautions for fire-fighters

Firefighting instructions : Do not allow fire fighting water to escape into waterways or sewers. Evacuate area. Move containers away from the fire area if this can be done without risk. Ventilate closed spaces before entering. Do not breathe gas/fumes/vapor/spray.

Protection during firefighting : Do not attempt to take action without suitable protective equipment. Self-contained breathing apparatus. Complete protective clothing.

Perm-X UL 30-30

Safety Data Sheet

SECTION 6: Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

6.1.1. For non-emergency personnel

Emergency procedures : Ventilate spillage area. Do not breathe dust/fume/gas/mist/vapours/spray. Avoid contact with skin and eyes.

6.1.2. For emergency responders

Protective equipment : Do not attempt to take action without suitable protective equipment. For further information refer to section 8: Exposure controls/personal protection.

Emergency procedures : Do NOT wash away into sewer. Avoid release to the environment. Evacuate unnecessary personnel. Stop leak if safe to do so. Ventilate area. Wear appropriate personal protective equipment, avoid direct contact.

6.2. Environmental precautions

Avoid release to the environment.

6.3. Methods and material for containment and cleaning up

Methods for cleaning up : Absorb spills with an inert material, clay granules or other inert absorbent material and put in container for disposal. Do not flush to sewer or allow to enter waterways. Wear appropriate personal protective equipment, avoid direct contact.

SECTION 7: Handling and storage

7.1. Precautions for safe handling

Precautions for safe handling : Do not breathe dust/fume/gas/mist/vapours/spray. Use only outdoors or in a well-ventilated area. Avoid contact with skin and eyes. Wear personal protective equipment.

Hygiene measures : Contaminated work clothing should not be allowed out of the workplace. Wash contaminated clothing before reuse. Do not eat, drink or smoke when using this product. Always wash hands after handling the product.

7.2. Conditions for safe storage, including any incompatibilities

Storage conditions : Store locked up. Store in a well-ventilated place. Keep cool. Avoid excess heat. Keep container tightly closed. Keep only in original container. Avoid extreme temperatures. Do not store near heat or open flame.

SECTION 8: Exposure controls/personal protection

8.1. Control parameters

| Petroleum distillates, hydrotreated (mild) heavy paraffinic and hydrotreated (mild) light paraffinic (64742-54-7 and 64742-55-8) | | |
|--|--------------------|----------|
| ACGIH | ACGIH TWA (mg/m³) | 5 mg/m³ |
| ACGIH | ACGIH STEL (mg/m³) | 10 mg/m³ |

8.2. Appropriate engineering controls

Appropriate engineering controls : Adequate ventilation systems as needed to control concentrations of airborne contaminants below applicable threshold limit values.

Environmental exposure controls : Avoid release to the environment.

8.3. Individual protection measures/Personal protective equipment

Personal protective equipment:

See product label for specific PPE instructions.

Hand protection:

Wear chemical resistant gloves. Barrier laminate, nitrile rubber, neoprene rubber or Viton are recommended.

Eye protection:

Safety glasses

Skin and body protection:

Wear long-sleeved shirt and long pants, and shoes plus socks.

Respiratory protection:

Perm-X UL 30-30

Safety Data Sheet

In case of insufficient ventilation, use NIOSH approved respiratory protection. Mixers and loaders supporting aerial applications to forests must wear at least a NIOSH-approved respirator with: A dust/mist filter with MSHA/NIOSH approval number prefix TC-21C, or any R, P, or HE filter.



SECTION 9: Physical and chemical properties

9.1. Information on basic physical and chemical properties

| | |
|---|------------------------------------|
| Physical state | : Liquid |
| Appearance | : Clear amber liquid |
| Color | : Amber |
| Odor | : Slight solvent and licorice |
| Odor threshold | : No data available |
| pH | : No data available |
| Melting point | : Not applicable |
| Freezing point | : No data available |
| Boiling point | : No data available |
| Flash point | : 127 °C (260 °F) |
| Relative evaporation rate (butyl acetate=1) | : No data available |
| Flammability (solid, gas) | : Not applicable |
| Vapor pressure | : < 1 mmHg (torr) @ 3.9 °C (39 °F) |
| Relative vapor density at 20 °C | : No data available |
| Relative density | : 1.0012 |
| Solubility | : Insoluble |
| Partition coefficient n-octanol/water (Log Pow) | : No data available |
| Auto-ignition temperature | : No data available |
| Decomposition temperature | : No data available |
| Viscosity, kinematic | : No data available |
| Viscosity, dynamic | : 18.5 cP @ 40 °C (104 °F) |
| Explosion limits | : No data available |
| Explosive properties | : Not explosive |
| Oxidizing properties | : Not applicable |

9.2. Other information

No additional information available

SECTION 10: Stability and reactivity

10.1. Reactivity

The product is non-reactive under normal conditions of use, storage and transport.

10.2. Chemical stability

Stable under normal conditions.

10.3. Possibility of hazardous reactions

No dangerous reactions known under normal conditions of use. Hazardous polymerization will not occur.

10.4. Conditions to avoid

Avoid extreme temperatures. Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.

10.5. Incompatible materials

No additional information available

10.6. Hazardous decomposition products

Under normal conditions of storage and use, hazardous decomposition products should not be produced. Decomposes upon heating to produce toxic vapors/gases which may include oxides of carbon and nitrogen, hydrogen chloride and/or aldehydes.

Perm-X UL 30-30

Safety Data Sheet

SECTION 11: Toxicological information

11.1. Information on toxicological effects

| Permethrin (52645-53-1) | |
|------------------------------|--------------|
| LD50 oral rat | 500 mg/kg |
| LD50 dermal rabbit | > 2000 mg/kg |
| LC50 inhalation rat (mg/l) | 2.65 mg/l/4h |
| Piperonyl butoxide (51-03-6) | |
| LD50 oral rat | 4300 mg/kg |
| LD50 dermal rat | > 2000 mg/kg |
| LC50 inhalation rat (mg/l) | > 5 mg/l/4h |

| GHS-US Properties | Classification |
|--|---|
| Acute toxicity (oral) | Harmful if swallowed. |
| Acute toxicity (dermal) | Not classified |
| Acute toxicity (inhalation) | Harmful if inhaled. |
| Skin corrosion/irritation | Not classified |
| Serious eye damage/irritation | Not classified |
| Respiratory or skin sensitization | May cause an allergic skin reaction. |
| Germ cell mutagenicity | Not classified |
| Carcinogenicity | Not classified |
| Reproductive toxicity | Not classified |
| Specific target organ toxicity (single exposure) | Causes damage to organs. |
| Specific target organ toxicity (repeated exposure) | Not classified |
| Aspiration hazard | May be fatal if swallowed and enters airways. |

Potential health effects

Inhalation

Acute : Harmful if inhaled. Permethrin affects nervous system. Symptoms of overexposure to permethrin include diarrhea, salivation, tremors, convulsions, hyperactivity and hypersensitivity.

Skin

Acute : May cause an allergic skin reaction in individuals with a sensitivity to piperonyl butoxide.

Eye

Acute : Under normal conditions of use, no health effects are expected.

Ingestion

Acute : Aspiration hazard - small amounts of liquid aspirated into the lungs during ingestion or from vomiting may cause chemical pneumonitis or pulmonary edema. Harmful if ingested. Permethrin affects nervous system. Symptoms of overexposure to permethrin include diarrhea, salivation, tremors, convulsions, hyperactivity and hypersensitivity.

Mutagenicity : Permethrin was not mutagenic in a battery of in vitro and in vivo tests. Piperonyl butoxide was not mutagenic in a battery of tests.

Carcinogenicity : Permethrin is not classified as carcinogen by NTP, IARC and OSHA. Piperonyl butoxide is not classified as carcinogen by NTP, IARC and OSHA.

Reproductive Effects : Permethrin does not cause birth defects or adverse effects on reproduction. Piperonyl butoxide did not produce any birth defects or adverse effects on reproductive parameters in tests with rats and rabbits.

SECTION 12: Ecological information

12.1. Toxicity

| Permethrin (52645-53-1) | |
|-------------------------|--|
| LC50 Acute fish 1 | 0.00079 mg/l (Exposure time: 96h - Blue gill) |
| LC50 Acute fish 2 | 0.0022 mg/l (Exposure time: 96h - Atlantic silverside) |
| LC50 Acute crustacea 1 | 0.000019 mg/l (Exposure time: 96h - Mysid shrimp) |
| LC50 Acute crustacea 2 | 0.0001 mg/l (Hexagenia bilineata) |
| EC50 Daphnia 1 | 0.00043 mg/l (48 h, Daphnia magna, Literature study) |
| NOEC Chronic fish 1 | 0.0003 mg/l (Fathead minnow) |
| NOEC Chronic fish 2 | 0.00083 mg/l (Sheepshead minnow) |

Perm-X UL 30-30

Safety Data Sheet

| | |
|-------------------------------------|---|
| Permethrin (52645-53-1) | |
| NOEC Chronic crustacea 1 | 0.000039 mg/l (Daphnia magna) |
| NOEC Chronic crustacea 2 | 0.000011 mg/l (Mysid shrimp) |
| Piperonyl butoxide (51-03-6) | |
| LC50 Acute fish 1 | 1.9 mg/l (Rainbow trout) |
| LC50 Acute fish 2 | 3.94 mg/l (Sheepshead minnow) |
| LC50 Acute crustacea 1 | 0.49 mg/l (Mysid shrimp) |
| LC50 Acute crustacea 2 | 0.51 mg/l (Gammarus fasciatus (amphipod)) |
| NOEC Chronic fish 1 | 0.04 mg/l (Fathead minnow) |
| NOEC Chronic crustacea 1 | 0.03 mg/l (Daphnia magna) |

12.2. Persistence and degradability

| | |
|--------------------------------|--|
| Permethrin (52645-53-1) | |
| Persistence and degradability | Permethrin: not rapidly biodegradable. |

12.3. Bioaccumulative potential

| | |
|--------------------------------|--|
| Permethrin (52645-53-1) | |
| Bioaccumulative potential | Permethrin: Bioconcentration factor (BCF) 300; Does not bioaccumulate. |

12.4. Mobility in soil

| | |
|--------------------------------|------------------------------|
| Permethrin (52645-53-1) | |
| Mobility in soil | Permethrin: Immobile in soil |

12.5. Other adverse effects

| | |
|------------------------|--|
| Perm-X UL 30-30 | |
| Ecological Fate | This product is extremely toxic to aquatic organisms, including fish and invertebrates. This product is highly toxic to bees exposed to direct treatment on blooming crops or weeds. |

SECTION 13: Disposal considerations

13.1. Disposal methods

Product/Packaging disposal recommendations : Dispose of content and/or container in accordance with local, regional, national, and/or international regulations.

SECTION 14: Transport information

| | UN number | Proper Shipping Name | Transport hazard class(es) | Packing group | Environmental hazards |
|------|---------------|---|----------------------------|---------------|------------------------|
| DOT | Not regulated | Not regulated | Not regulated | Not regulated | Not applicable |
| IMDG | UN3082 | Packaging greater than 5 L: Environmentally hazardous substance, liquid, n.o.s (Permethrin and Piperonyl butoxide) | 9 | III | Marine pollutant |
| IATA | UN3082 | Packaging greater than 5 L: Environmentally hazardous substance, liquid, n.o.s (Permethrin and Piperonyl butoxide) | 9 | III | Acute aquatic toxicity |

SECTION 15: Regulatory information

15.1. US Federal regulations

| | |
|--|-----|
| Permethrin (52645-53-1) | |
| Not listed on the United States TSCA (Toxic Substances Control Act) inventory Subject to reporting requirements of United States SARA Section 313 | |
| SARA Section 313 - Emission Reporting | 1 % |

Perm-X UL 30-30

Safety Data Sheet

| | |
|--|--|
| Piperonyl butoxide (51-03-6) | |
| Listed on the United States TSCA (Toxic Substances Control Act) inventory Subject to reporting requirements of United States SARA Section 313 | |
| SARA Section 313 - Emission Reporting | 1 % |
| Petroleum distillates, hydrotreated (mild) heavy paraffinic and hydrotreated (mild) light paraffinic (64742-54-7 and 64742-55-8) | |
| Listed on the United States TSCA (Toxic Substances Control Act) inventory | |
| FIFRA Labelling | |
| EPA Registration Number | 89459-44 |
| This chemical is a pesticide product registered by the United States Environmental Protection Agency and is subject to certain labeling requirements under federal pesticide law. These requirements differ from the classification criteria and hazard information required for safety data sheets (SDS), and for workplace labels of non-pesticide chemicals. The hazard information required on the pesticide label is reproduced below. The pesticide label also includes other important information, including directions for use. | |
| FIFRA Signal word | Caution |
| FIFRA Precautionary Statement | KEEP OUT OF REACH OF CHILDREN. |
| FIFRA Hazards to Humans and Domestic Animals | Harmful if swallowed. Harmful if absorbed through skin. Avoid contact with skin, eyes or clothing. Causes moderate eye irritation. |
| FIFRA First Aid | IF SWALLOWED: Immediately call a poison control center or doctor. Do not induce vomiting unless told to do so by the poison control center or doctor. Do not give any liquid to the person. Do not give anything by mouth to an unconscious person. IF ON SKIN OR CLOTHING: 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. IF IN 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. IF INHALED: Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth-to-mouth if possible. Call a poison control center or doctor for treatment advice. Note to Physician: Contains petroleum distillate - vomiting may cause aspiration pneumonia. |
| FIFRA Environmental Hazards | This pesticide is extremely toxic to aquatic organisms, including fish and invertebrates. Runoff from treated areas or deposition of spray droplets into a body of water may be hazardous to fish and aquatic invertebrates. Before making the first application in a season, it is advisable to consult with the state or tribal agency with primary responsibility for pesticide regulation to determine if other regulatory requirements exist. This pesticide is highly toxic to bees exposed to direct treatment on blooming crops or weeds. Do not apply this product or allow it to drift to blooming crops or weeds while bees are actively visiting the treatment area. Do not apply over bodies of water (lakes, rivers, permanent streams, natural ponds, commercial fish ponds, swamps, marshes or estuaries), except when necessary to target areas where adult mosquitoes are present, and weather conditions will facilitate movement of applied material away from the water in order to minimize incidental deposition into the water body. Do not contaminate bodies of water when disposing of equipment rinsate or washwaters. |
| FIFRA Physical Hazard | Do not use, pour, spill, or store near heat or open flame |

15.2. US State regulations

No additional information available

SECTION 16: Other information

Date of issue : 14 December 2015
Revision date : 24 March 2020

Indication of changes:

Revised Sec. 1: Added material number(s).

SDS US (GHS HazCom 2012) - CGP

The information and statements herein are believed to be reliable but are not to be construed as a warranty or representation for which we assume legal responsibility. Users should undertake sufficient verification and testing to determine the suitability for their own particular purpose of any information or products referred to herein. NO WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE IS MADE.

Perm-X™ UL 30-30

For use only by federal, state, tribal or local government officials responsible for public health or vector control, or by persons certified in the appropriate category or otherwise authorized by the state or tribal lead pesticide regulatory agency to perform adult mosquito control applications, or by persons under their direct supervision.

CONTROLS: Adult Mosquitoes, Biting and Non-biting Midges, Black Flies and other outdoor flying insects as listed on this label.

FOR USE AS A: ULV thermal or non-thermal aerosol using ground or aerial equipment in areas including: residential, recreational areas, parks, campsites, woodlands, athletic fields, golf courses, municipalities, playgrounds, and non-crop waste areas and over listed growing crops and range grasses prior to harvest for the control of adult mosquitoes and biting flies within or adjacent to these areas. Refer to label for additional use sites.

SPECIMEN LABEL

ACTIVE INGREDIENTS:

Permethrin 30%

Piperonyl Butoxide 30%

OTHER INGREDIENTS*: 40%

TOTAL: 100%

* (butyl carbityl) (6-propylpiperonyl) ether and related compounds.

** Contains Petroleum Distillate

Contains 2.51 lbs a.i. Permethrin/gallon and 2.51 lbs a.i. Piperonyl Butoxide/gallon

KEEP OUT OF REACH OF CHILDREN CAUTION

PRECAUCION AL USUARIO: Si usted no lee ingles, no use este producto hasta que la etiqueta haya sido explicado ampliamente.
(**TO THE USER:** If you cannot read English, do not use this product until the label has been fully explained to you.)

See inside label booklet for additional Precautionary Statements.

EPA Reg.No. 89459-44

EPA Est. No. 2724-TX-1

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

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

FIRST AID

| | |
|-------------------------------|---|
| If swallowed | <ul style="list-style-type: none">• Immediately call a poison control center or doctor.• Do not induce vomiting unless told to by a poison control center or doctor.• Do not give any liquid to the person.• Do not give anything by mouth to an unconscious person. |
| If on skin or clothing | <ul style="list-style-type: none">• 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. |

(continued)

| | |
|-------------------|---|
| If in eyes | <ul style="list-style-type: none">• 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. |
| If inhaled | <ul style="list-style-type: none">• Move person to fresh air.• If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth-to-mouth, if possible.• Call a poison control center or doctor for treatment advice. |

HOT LINE NUMBER: Have the product container or label with you when calling a poison control center or doctor, or when going for treatment. You may contact 1-800-248-7763 for emergency medical treatment information. You may also contact 1-800-248-7763 for information including health concerns, medical emergencies or pesticide incidents.

(continued)

NOTE TO PHYSICIAN: Contains Petroleum Distillates - vomiting may cause aspiration pneumonia.

PERSONAL PROTECTIVE EQUIPMENT (PPE):

Some materials that are chemical-resistant to this product are listed below. Mixers, loaders, applicators and other handlers including during mixing/loading, repair and cleaning of equipment and disposal of pesticide must wear the following:

- Long-sleeved shirt and long pants
- Shoes plus socks
- Chemical-resistant gloves such as barrier laminate, viton, neoprene rubber or nitrile rubber
- Chemical-resistant apron for mixers/loaders, persons cleaning equipment and persons exposed to the concentrate

In addition to the above PPE, mixers and loaders supporting aerial applications to forests must wear at least a NIOSH-approved respirator with:

- A dust/mist filter with MSHA/NIOSH approval number prefix TC-21C, or any R, P, or HE filter.

See Engineering Controls for additional requirements.

USER SAFETY REQUIREMENTS

Follow manufacturer's instructions for cleaning/maintaining PPE. If there are no such instructions for washables, use detergent and hot water. Keep and wash PPE separately from other laundry. Discard clothing and other absorbent materials that have been drenched or heavily contaminated with this product's concentrate. Do not reuse them.

ENGINEERING CONTROLS

Pilots must use an enclosed cockpit that meets the requirements listed in the Worker Protection Standard (WPS) for agricultural pesticides [40 CFR 170.240(d)(6)]. Human flagging is prohibited. Flagging to support aerial application is limited to use of the Global Positioning System (GPS) or mechanical flaggers.

USER SAFETY RECOMMENDATIONS

- Users should wash hands before eating, drinking, chewing gum, using tobacco or using the toilet.
- Users should remove clothing/PPE immediately if pesticide gets inside. Then wash thoroughly and put on clean clothing.
- Users should remove PPE immediately after handling this product. Wash the outside of gloves before removing. As soon as possible, wash thoroughly and change into clean clothing.

ENVIRONMENTAL HAZARDS

This pesticide is extremely toxic to aquatic organisms, including fish and invertebrates. Runoff from treated areas or deposition of spray droplets into a body of water may be hazardous to fish and aquatic invertebrates.

Before making the first application in a season, it is advisable to consult with the state or tribal agency with primary responsibility for pesticide regulation to determine if other regulatory requirements exist.

This pesticide is highly toxic to bees exposed to direct treatment on blooming crops or weeds. Do not apply this product or allow it to drift to blooming crops or weeds while bees are actively visiting the treatment area.

Do not apply over bodies of water (lakes, rivers, permanent streams, natural ponds, commercial fish ponds, swamps, marshes or estuaries), except when necessary to target areas where adult mosquitoes are present, and weather conditions will facilitate movement of applied material away from the water in order to minimize incidental deposition into the water body. Do not contaminate bodies of water when disposing of equipment rinsate or washwaters.

PHYSICAL OR CHEMICAL HAZARDS

Do not use, pour, spill or store near heat or open flame.

DIRECTIONS FOR USE

It is a violation of Federal law to use this product in a manner inconsistent with its labeling.

For use only by federal, state, tribal or local government officials responsible for public health or vector control, or by persons certified in the appropriate category or otherwise authorized by the state or tribal lead pesticide regulatory agency to perform adult mosquito control application or by persons under their direct supervision.

Precautions and Use Restrictions

- Apply this product only as specified on this label.
- Apply this product at temperatures greater than 50° F and when wind speed equals or exceeds 1 mph.
- Not for use in metered release systems.
- Not for use in outdoor residential misting systems.
- Do not spray this product on or allow it to drift onto cropland (other than crops listed) or potable water supplies.
- In the treatment of corrals, feedlots, animal confinements/houses, swine lots, poultry ranges and zoos, cover any exposed drinking water, drinking fountains and animal feed before application.
- For hand carried and/or lawn mower foggers: Do not fog wet foliage. Do not fog when wind conditions exceed 10 mph. Only use a clean, well maintained and properly calibrated fogger known to give excellent performance. Fog down wind.
- Do not apply by fixed wing aircraft at a height less than 100 feet or by helicopter at a height less than 75 feet unless specifically approved by the state or tribe based on public health needs.
- Apply when wind speed is greater than 1 mph.
- Do not make applications during rain.

Do not retreat site more than once in 3 days. Do not exceed 25 applications at 0.007 lbs permethrin per acre per application or 0.007 lbs PBO per acre per application or 0.18 lbs of permethrin per acre per season or 0.18 lbs PBO per acre per year. More frequent treatments may be made to prevent or control a threat to public and/or animal health determined by a state, tribal or local health or vector control agency on the basis of documented evidence of disease causing agents in vector mosquitoes or the occurrence of mosquito-borne disease in animal or human populations, or if specifically approved by the state or tribe during a natural disaster recovery effort.

HOW TO APPLY

For proper ground application, mount the fog applicator so that the nozzle is at least 4 ½ feet above ground level and directed out the back of the vehicle. May be applied at speeds of 5 mph up to 20 mph. Failure to follow these label directions may result in reduced effectiveness. For "Aerial Application", refer to the Aerial Application section on this label. PERM-X™ UL 30-30 may be used as is, or diluted with a suitable solvent, i.e., a 60 to 100 second viscosity mineral oil and applied at a rate not to exceed 0.9636 fl oz of PERM-X™ UL 30-30 per acre. Both aerial and ground applications should be made when the wind is less than 10 mph. For exact rates, see the "UNDILUTED" or the "DILUTION" Rates charts on this label. PERM-X™ UL 30-30 is approved for application as an Ultra Low Volume (ULV) Thermal or Non-thermal aerosol (cold fog) to control adult mosquitoes, and other insects as listed on this label, in residential and recreational areas where these insect pests become a problem, such as parks, campsites, woodlands, athletic fields, golf courses, residential area, municipalities, gardens, play grounds, and non-crop waste areas. Treat when mosquitoes or insects are most active and weather conditions are conducive to keeping the fog close to the ground, e.g., cool

temperatures and wind speeds not greater than 10 mph. Applications during the cool hours of night or early morning are usually preferable. Repeat treatment when recommended by Public Health officials, or Mosquito Abatement Districts.

Spray Droplet Size Determination

Ground-Based Application: Spray equipment must be adjusted so that the volume median diameter is less than 30 microns ($D_{v0.5} < 30 \mu\text{m}$) and that 90% of the spray is contained in droplets smaller than 50 microns ($D_{v0.9} < 50 \mu\text{m}$). Directions from the equipment manufacturer or vendor, pesticide registrant or a test facility using laser-based equipment must be used to adjust equipment to produce acceptable droplet size spectra. Application equipment must be tested at least annually to confirm that pressure at the nozzle and nozzle flow rate(s) are properly calibrated.

Aerial Application made at ≤ 200 feet above ground elevation: Spray equipment must be adjusted so that the volume median diameter produced is less than 60 microns ($D_{v0.5} < 60 \mu\text{m}$) and that 90% of the spray is contained in droplets smaller than 100 microns ($D_{v0.9} < 100 \mu\text{m}$). The effects of flight speed and, for non-rotary nozzles, nozzle angle on the droplet size spectrum must be considered. Directions from the equipment manufacturer or vendor, pesticide registrant or a test facility using a wind tunnel and laser-based measurement instrument must be used to adjust equipment to produce acceptable droplet size spectra. Application equipment must be tested at least annually to confirm that pressure at the nozzle and nozzle flow rate(s) are properly calibrated.

Aerial Application made at > 200 feet above ground elevation: Spray equipment must be adjusted so that the volume median diameter produced is less than 70 microns ($D_{v0.5} < 70 \mu\text{m}$) and that 90% of the spray is contained in droplets smaller than 145 microns ($D_{v0.9} < 145 \mu\text{m}$). The effects of flight speed and, for non-rotary nozzles, nozzle angle on the droplet size spectrum must be considered. Directions from the equipment manufacturer or vendor, pesticide registrant or a test facility using a wind tunnel and laser-based measurement instrument must be used to adjust equipment to produce acceptable droplet size spectra. Application equipment must be tested at least annually to confirm that pressure at the nozzle and nozzle flow rate(s) are properly calibrated.

ULV NON-THERMAL AEROSOL (COLD FOG)

To control adult mosquitoes, flies, and gnats (black flies) apply PERM-X™ UL 30-30 using truck-mounted ground ULV (cold fog) equipment with a swath width of 300 feet in areas such as residential, recreational, industrial areas. For best results, apply when insects are most active and conditions are conducive to keeping the fog close to the ground. Apply the undiluted product at flow rates of 0.5472 to 2.1816 fluid ounce per minute at a truck speed of 10 mph. These rates are equivalent to 0.00175 to 0.007 pounds of permethrin a.i. and 0.00175 to 0.007 pounds of piperonyl butoxide a.i. per acre. If a different vehicle speed is used, adjust the flow rate accordingly. An accurate flow control system must be used to ensure proper flow rate. Use the maximum flow rates and application rates listed on this label to treat heavy vegetation or when target insect populations are high. Do not exceed the highest flow rates specified by the manufacturer. PERM-X™ UL 30-30 may also be applied by diluting with 60-100 second mineral oil or another suitable solvent, applied so as not to exceed 0.007 lb a.i. per acre using a swath width of 300 feet for calculation. Refer to the rates chart for suggested rates for diluted use. PERM-X™ UL 30-30 may be used to treat outdoor aggregation and harborage sites including storm drains, underground drainage pipes, and pipe chases.

THERMAL AEROSOL FOGGING

Refer to the DILUTION RATES tables for fogging applications. Droplet size of thermal "fog" will be very small usually in the 0.5 to 1.0 micron range.

TRUCK-MOUNTED - Apply PERM-X™ UL 30-30 diluted or undiluted with suitable thermal fogging equipment. If diluted, use a 60 to 100 second viscosity mineral oil or another suitable non-phytotoxic diluent, to reduce oil requirement and sludge buildup in equipment. Do not exceed the maximum 0.007 lb a.i. permethrin per acre rate. May be applied at speeds of 5 mph up to 20 mph. For use with HAND CARRIED and/or LAWN MOWER FOGGERS, use the same rates of a.i. per acre with a 50 foot swath width at a walking speed of 2 mph. Apply PERM-X™ UL 30-30 at 0.00175 lb to 0.007 lb of a.i. permethrin/a.i. piperonyl butoxide per acre.

USE AS AN INSECT BARRIER AS AN INSECT BARRIER – USE A "BACKPACK" FOG-TYPE MIST BLOWER

For use in Non-Thermal ULV, motorized, portable, backpack, fog-type mist blower equipment, apply PERM-X™ UL 30-30 with equipment adjusted to deliver ULV particles of 50 to 100 volume median diameter. PERM-X™ UL 30-30 may be applied undiluted or diluted (see Application Rates tables section). If diluted, use a 30 to 100 second viscosity mineral oil, or another, (if recommended by Public Health Officials), suitable non-phytotoxic diluent. Use 0.00175 to 0.007 pound permethrin a.i. per acre at a 50 ft (15.2 m) swath width, while walking at a speed of 2 mph (3.2 kph). Whether applied undiluted or diluted or at a different speed, make sure that the same amount of permethrin a.i. – PBO a.i. is applied/acre.

DIRECTIONS FOR AERIAL APPLICATION

Use aircraft specially equipped and capable of applying Ultra-Low Volumes of PERM-X™ UL 30-30 according to the rate chart on this label. Applications can be made diluted or undiluted but cannot exceed the specified rates of 0.007 lbs permethrin per acre and 0.007 lbs PBO per acre, equivalent to 0.3646 fl oz of undiluted PERM-X™ UL 30-30 per acre. Applications should be made at an altitude of 100 to 300 feet. Apply at airspeed sufficient to deliver the appropriate amount of active ingredient per acre. A forward speed of 150 mph achieving a swath width of 500 feet is recommended. The minimum height (from the ground) for aerial application of this product is 100 feet. Treat when insects are most active and meteorological conditions are conducive to keeping the spray cloud close to the ground. In order to compensate for windy conditions and ensure drift onto the target area, aerial application with aircraft equipped with Global Positioning Systems (GPS) is recommended.

PROHIBITION ON AERIAL USE IN FLORIDA: Not for aerial use in Florida UNLESS specifically authorized by the Bureau of Entomology and Pest Control, Florida Department of Agriculture and Consumer Services. This product can be applied over specific growing crops prior to harvest and range grasses for the control of adult mosquitoes and biting flies within or adjacent to these areas. Application can only be made where the following crops are present:

Alfalfa, Almonds, Apples, Artichokes, Asparagus, Avocados, Broccoli, Brussel sprouts, Cabbages, Cantaloupes, Cauliflower, Celery, Cherries, Corn (field and pop), Corn (sweet), Eggplants, Filberts (Hazelnuts), Garlic, Horseradish, Lettuce, Onions (dry bulb only), Papayas (FL only), Peaches/ Nectarines, Pears, Bell peppers, Pistachios, Potatoes, Soybeans, Spinach, Tomatoes, and Walnuts.

Cucurbit vegetables, including Chayote (fruit), Chinese wax gourd (Chinese preserving melon), Citron melon, Cuban pumpkin, Cucumber, Gherkin, Gourd (edible, includes hyotan, cucuzza, hechima, Chinese okra), *Momordica* spp. (includes balsam apple, balsam pear, bitter melon, Chinese cucumber), Muskmelon (hybrids and/or cultivars of *Cucumis melo* including true cantaloupe, cantaloupe, casaba, Crenshaw melon, golden pershaw melon, honeydew melon, honey balls, mango melon, Persian melon, pineapple melon, Santa Claus melon, snake melon and winter melon), Pumpkin,

Squash (includes summer squash types such as: butternut squash, calabaza, crookneck squash, Hubbard squash, scallop squash, straightneck squash, vegetable marrow and zucchini, and winter squash types such as: acorn squash and spaghetti squash), Watermelon (includes hybrids and/or varieties of *Citrullus lanatus*).

Leafy Vegetables, including Leafy vegetables (except *brassica*) (Amaranth (leafy amaranth, Chinese spinach, tampala), Arugula (roquette), Chervil, Chrysanthemum (edible leaved and garland), Corn salad, Cress (garden), Cress (upland, yellow rocket, winter cress), Dandelion, Dock (sorrel), Endive (escarole), Lettuce (head and leaf), Orach, Parsley, Purslane (garden and winter), Radicchio (red chicory), Spinach (including New Zealand and vine (Malabar spinach, Indian spinach)).

| Conditions and Rates To Use Perm-X™ UL 30-30 Undiluted | | | | | | |
|--|---------|--------------------------------|--------|--------|--------|---|
| Pounds A.I. Per Acre | | Application Rates | | | | Fluid Ounces of Perm-X™ UL 30-30 per Acre |
| | | Fluid Ounces per Minute at MPH | | | | |
| Permethrin | PBO | 5 mph | 10 mph | 15 mph | 20 mph | |
| 0.00700 | 0.00700 | 1.0938 | 2.1876 | 3.2814 | 4.3752 | 0.3646 |
| 0.00350 | 0.00350 | 0.5468 | 1.0938 | 1.6507 | 2.1876 | 0.1823 |
| 0.00175 | 0.00175 | 0.2736 | 0.5472 | 0.8208 | 1.0944 | 0.0912 |

DILUTION RATES FOR PERM-X™ UL 30-30 FOR A 1:4 DILUTION

| Mix 1 part PERM-X™ UL 30-30 with 4 parts Suitable Mineral Oil: Apply as follows: | | | | | | |
|--|---------|---|---------|---------|---------|--|
| Pounds of A.I. Per Acre | | Application Rates FI Oz Per Minute At Vehicle Speeds | | | | FI Oz Finished Spray Per Acre |
| Permethrin | PBO | 5 mph | 10 mph | 15 mph | 20 mph | |
| 0.00700 | 0.00700 | 5.3847 | 10.7694 | 16.1541 | 21.5388 | 1.7949 |
| 0.00350 | 0.00350 | 2.6925 | 5.3850 | 8.0775 | 10.7700 | 0.8975 |
| 0.00175 | 0.00175 | 1.3464 | 2.6928 | 4.0932 | 5.3856 | 0.4488 |

DILUTION RATES FOR PERM-X™ UL 30-30 FOR A 1:8 DILUTION

| Mix 1 part PERM-X™ UL 30-30 with 8 parts Suitable Mineral Oil: Apply as follows: | | | | | | |
|--|---------|---|---------|---------|---------|--|
| Pounds of A.I. Per Acre | | Application Rates FI Oz Per Minute At Vehicle Speeds | | | | FI Oz Finished Spray Per Acre |
| Permethrin | PBO | 5 mph | 10 mph | 15 mph | 20 mph | |
| 0.00700 | 0.00700 | 9.5457 | 19.0914 | 28.6371 | 38.1828 | 3.1819 |
| 0.00350 | 0.00350 | 4.7727 | 9.5454 | 14.3181 | 19.0908 | 1.5909 |
| 0.00175 | 0.00175 | 2.3862 | 4.7730 | 7.1595 | 9.5460 | 0.7955 |

DILUTION RATES FOR PERM-X™ UL 30-30 FOR A 1:2 DILUTION

| Mix 1 part PERM-X™ UL 30-30 with 2 parts Suitable Mineral Oil: Apply as follows: | | | | | | |
|--|---------|------------------------------------|--------|--------|---------|--|
| Pounds of A.I. Per Acre | | Application Rates | | | | FI Oz Finished Spray Per Acre |
| | | FI Oz Per Minute At Vehicle Speeds | | | | |
| Permethrin | PBO | 5 mph | 10 mph | 15 mph | 20 mph | |
| 0.00700 | 0.00700 | 3.2814 | 6.5628 | 9.8442 | 13.1256 | 1.0938 |
| 0.00350 | 0.00350 | 1.6407 | 3.2814 | 4.9221 | 6.5628 | 0.5469 |
| 0.00175 | 0.00175 | 0.8205 | 1.6410 | 2.4615 | 3.2820 | 0.2735 |

STORAGE AND DISPOSAL

Do not contaminate water, food, or feed by storage or disposal.

PESTICIDE STORAGE AND SPILL PROCEDURES: Store upright at room temperatures. Do not expose to extreme temperatures. In case of spill or leakage, ventilate the area, wear chemical resistant gloves, and footwear. Retrieve and filter the liquid in some manner and use as directed on this label, or "soak-up" the liquid with absorbent material such as sawdust, soil, fuller's earth, etc. and dispose of the resulting chemical waste as follows.

PESTICIDE DISPOSAL: Wastes resulting from a spill or use of this product may be disposed of on site or at an approved waste disposal facility.

CONTAINER DISPOSAL: Non-refillable container. Do not reuse or refill this container. Clean container promptly after emptying. **Containers 5 gallons or less – Triple rinse as follows:** Empty the remaining contents into application equipment or a mix tank and drain for 10 seconds after the flow begins to drip. Fill the container ¼ full with mineral oil (or other solvent used when diluting the product) and recap. Shake for 10 seconds. Pour rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Drain for 10 seconds after the flow begins to drip. Repeat this procedure two more times. Then offer for recycling if available, reconditioning if appropriate or puncture and dispose of in a sanitary landfill or by other procedures approved by state and local authorities. **Containers larger than 5 gallons – Triple rinse as follows:** Empty the remaining contents into application equipment or a mix tank. Fill the container ¼ full with mineral oil (or other solvent used when diluting the product). Replace and tighten closures. Tip container on its side and roll it back and forth, ensuring at least one complete revolution, for 30 seconds. Stand the container on its end and tip it back and forth several times. Turn the container over onto its other end and tip it back and forth several times. Empty the rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Repeat this procedure two more times. Then, offer for recycling if available or reconditioning if appropriate or puncture and dispose of in a sanitary landfill or by other procedures approved state and local authorities. **Refillable 275 Gallon Stainless Steel Tote:** Refillable container. Refill this container with pesticide only. Do not reuse this container for any other purpose. Cleaning the container before final disposal is the responsibility of the person disposing of the container. Cleaning before refilling is the responsibility of the refiller. To clean the container before final disposal, empty the remaining contents from this container into application equipment or a mix tank. Fill the container about 10% full of mineral oil or other suitable oil diluents. Agitate vigorously or recirculate mineral oil with pump for two minutes. Pour or pump rinsate into application equipment or rinsate collection system. Repeat this rinsing procedure two more times. Once triple rinsed, recycle if available, or puncture and dispose of in a sanitary landfill, or by other procedures approved by state and local authorities.

Central Garden & Pet Company, 1501 East Woodfield Road, 200W, Schaumburg, Illinois 60173

NOTE: This specimen label is for informational purposes only. All uses may not be approved in all states. See product labeling for use directions.

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VEC 20-009



500 West Big Beaver
Troy, MI 48084
troymi.gov

CITY COUNCIL AGENDA ITEM

Date: March 21, 2022

To: Mark F. Miller, City Manager

From: Robert J. Bruner, Assistant City Manager
Lisa Burnham, Controller
Kurt Bovensiep, Public Works Director
Dennis Trantham, Facilities and Grounds Operations Manager
Emily Frontera, Purchasing Manager

Subject: Standard Purchasing Resolution 2: Award to Sole Bidder Meeting Specifications – Mosquito Control Services

History

- The Grounds Division is responsible for the maintenance of all municipal property including the control of pests.
- Park patrons, golf course participants, and property owners abutting some City of Troy maintained retention ponds have become accustomed to using these facilities with limited nuisances like mosquitoes.
- The objective of mosquito control is not to eradicate all mosquitoes but to limit the population to a tolerable threshold.
- The control targets both mosquito larva and adult mosquitoes.
- Although Oakland County Department of Health and Human Services recommends the best form of protection from mosquitoes is personal protection products, the mosquito control products used by professionals will decrease the mosquito population at some of our facilities.

Purchasing

- On March 10, 2022, 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 three (3) year requirements of mosquito control services.
- The bid was posted on Bidnet Direct/MITN website; www.bidnetdirect.com/mitn/city-of-troy-mi.
- One hundred and forty-five (145) vendors were notified via the Bidnet Direct/MITN website. One (1) bid response was received.
- Below is a detailed summary of potential vendors for the bid opportunity:

| | |
|---|-----|
| Companies notified via MITN | 145 |
| Troy Companies notified via MITN | 3 |
| Troy Companies notified Active email Notification | 3 |
| Troy Companies - Active Free | 0 |
| Companies that viewed the bid | 7 |
| 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
troymt.gov

CITY COUNCIL AGENDA ITEM

Financial

Funds are budgeted and available in the following accounts: 101.447.23.514.7802.160 - Streets and Drains Retention Ponds, 101.751.30.770.7802.160 - Parks Maintenance, 101.751.30.756.7802.070 - Civic Center Maintenance and 101.751.30.757.7802.050 - Cemetery Maintenance for the 2022 fiscal year and the subsequent fiscal years for the duration of the contract.

Also, note that the City of Troy has been eligible to seek annual reimbursement of up to \$11,418 from the Oakland County Department of Health and Human Services Program for the control of mosquito larva only.

Recommendation

City Management recommends awarding a three (3) year contract to the sole bidder, *Vector Disease Control International of Little Rock, Arkansas* at unit prices as contained in the attached bid tabulation opened on March 10, 2022, for an estimated annual cost of \$36,350 for 2022, \$37,475 for 2023, and \$38,600 for 2024, with the recognition that this estimate may change but will not 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.

Opening Date: 03/10/2022
Date Reviewed: 03/10/2022

CITY OF TROY
BID TABULATION
MOSQUITO CONTROL

ITB-COT 22-09
PAGE 1 OF 1

| | |
|---------------|---|
| VENDOR NAME: | Vector Disease Control International (VDCI) |
| CITY: | Little Rock, Arkansas |
| CHECK AMOUNT: | \$2,000.00 |
| CHECK #: | 1052369 |

| Proposal: REQUIREMENTS FOR MOSQUITO CONTROL | | | | | | | | |
|---|---------------------|---------------------|----------------------|------------|-------------|------------|-------------|------------|
| Proposal | Product Type | Estimated Acreages | Unit Pricing | | | | | |
| | | | Cost Per Application | | | | | |
| | | | 2022 | | 2023 | | 2024 | |
| | | | Labor | Product | Labor | Product | Labor | Product |
| Proposal A - Retention Ponds | Larvicide | 5.6 | \$150.00 | \$280.00 | \$150.00 | \$300.00 | \$150.00 | \$320.00 |
| | Adulticide | 10.2 | \$100.00 | \$100.00 | \$100.00 | \$110.00 | \$100.00 | \$120.00 |
| Est Annual Cost Proposal A | | | \$3,150.00 | | \$3,300.00 | | \$3,450.00 | |
| Proposal B - Parks | Larvicide | 38.3 | \$1,300.00 | \$1,780.00 | \$1,300.00 | \$1,850.00 | \$1,300.00 | \$1,920.00 |
| | Adulticide | 290.1 | \$450.00 | \$160.00 | \$450.00 | \$180.00 | \$450.00 | \$200.00 |
| Est Annual Cost Proposal B | | | \$18,450.00 | | \$18,900.00 | | \$19,350.00 | |
| Proposal C - Misc. Municipal Sites | Larvicide | 4 | \$85.00 | \$190.00 | \$85.00 | \$200.00 | \$85.00 | \$210.00 |
| | Adulticide | 65.7 | \$100.00 | \$120.00 | \$100.00 | \$125.00 | \$100.00 | \$130.00 |
| Est Annual Cost Proposal C | | | \$2,475.00 | | \$2,550.00 | | \$2,625.00 | |
| Proposal D - Cemeteries | Adulticide | 9.8 | \$100.00 | \$100.00 | \$100.00 | \$105.00 | \$100.00 | \$110.00 |
| Est Annual Cost Proposal D | | | \$1,000.00 | | \$1,025.00 | | \$1,050.00 | |
| Proposal E - Sylvan Glen Golf Course | Larvicide | 21.1 | \$330.00 | \$1,000.00 | \$330.00 | \$1,050.00 | \$330.00 | \$1,100.00 |
| | Adulticide | 23.5 | \$100.00 | \$120.00 | \$100.00 | \$125.00 | \$100.00 | \$130.00 |
| Est Annual Cost Proposal E | | | \$7,750.00 | | \$8,025.00 | | \$8,300.00 | |
| Proposal F - Sanctuary Lake Golf Course | Larvicide | 2.2 | \$50.00 | \$115.00 | \$50.00 | \$115.00 | \$50.00 | \$115.00 |
| | Adulticide | 26 | \$200.00 | \$120.00 | \$200.00 | \$130.00 | \$200.00 | \$140.00 |
| Est Annual Cost Proposal F | | | \$2,425.00 | | \$2,475.00 | | \$2,525.00 | |
| Est Annual Total Cost Proposals A - F | | | \$35,250.00 | | \$36,275.00 | | \$37,300.00 | |
| Proposal G - Park Catch Basins | Larvicide Briquette | 200 | \$400.00 | \$700.00 | \$450.00 | \$750.00 | \$500.00 | \$800.00 |
| Est Cost Per Application Proposal G | | | \$1,100.00 | | \$1,200.00 | | \$1,300.00 | |
| Estimated Annual Total: | | | \$36,350.00 | | \$37,475.00 | | \$38,600.00 | |
| Estimated Grand Total 3-Years | | | \$112,425.00 | | | | | |
| Site Inspection | | Y/N | Y | | | | | |
| Contact Information: | | Hours of Operation: | 24 hours | | | | | |
| | | 24 Hr. Phone No.: | 419-722-2607 | | | | | |
| | | Email Address: | tgreen@vdc.net | | | | | |
| Can complete 100% work timely: | | Y/N | Y | | | | | |
| Completion Schedule Met: | | Y/N | Y | | | | | |
| Insurance Met: | | Y/N | Y | | | | | |
| References: | | Y/N | Y | | | | | |
| MSDS Sheet(s) attached: | | Y/N | Y | | | | | |
| Pesticide License: | | Y/N | Y | | | | | |
| Number of years' experience: | | Y/N | 30 years | | | | | |
| Payment Terms: | | | Net 30 | | | | | |
| Acknowledgement: | | Y/N | Y | | | | | |
| Exceptions: | | Y/N | None | | | | | |
| General Questionnaire: | | Y/N | Y | | | | | |

ATTEST:

(*Bid Opening conducted via a Zoom Meeting)
Scott Carruthers
Laura Campbell
Heather Chomiak
Andrew Chambliss
Jackie Ahlstrom

Emily Frontera
Purchasing Manager



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/17/2021

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 Edgewood Partners Insurance Center 200 Glenridge Point Parkway Suite 400 Atlanta GA 30342 | | CONTACT NAME: Certificate Unit PHONE (A/C, No, Ext): 404-439-8000 E-MAIL ADDRESS: certificate@epicbrokers.com FAX (A/C, No): | |
| INSURED Vector Disease Control International, LLC. Rentokil North America, Inc. (REN455) 1320 Brookwood Drive, Suite H Little Rock AR 72202-4412 | | INSURER(S) AFFORDING COVERAGE INSURER A : ACE American Insurance Company INSURER B : ACE Property & Casualty Insurance Company INSURER C : Arch Insurance Company INSURER D : Arch Indemnity Insurance Company INSURER E : Interstate Fire & Casualty Company INSURER F : National Union Fire Insurance Company of Pittsburg | |
| | | NAIC # 22667 20699 11150 30830 22829 19445 | |

COVERAGES

CERTIFICATE NUMBER: 783399058

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 checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER: | | | OGLG27240331 | 10/1/2021 | 10/1/2022 | EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000 \$ |
| C | 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 | | | 31CAB1044401 31CAB1044501 | 10/1/2021 10/1/2021 | 10/1/2022 10/1/2022 | COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B | UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | XOOG27239420 | 10/1/2021 | 10/1/2022 | EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N N | N/A | 31WC11044201 34WC11044301 | 10/1/2021 10/1/2021 | 10/1/2022 10/1/2022 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000 |
| E | CPL (Excluding Aerial Ops) Aviation Liability/Chemical Drift | N | N | USL01372121 AV 035823154-12 | 10/1/2021 10/1/2021 | 10/1/2022 10/1/2022 | Ea Incident/Aggregate \$5,000,000 Each Occurrence \$10M/\$1M (\$4M-Agg) |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
CPL = Contractor's Pollution Liability

CERTIFICATE HOLDER**CANCELLATION**

| | |
|-----------------------|--|
| Evidence of Insurance | 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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