

SPECIFICATIONS AND PROPOSAL
FOR
2008
SODIUM CHLORIDE ROCK SALT
HENRY COUNTY, OHIO

Randolf L. Germann, County Engineer
Richard J. Bennett, County Commissioner
Richard C. Myers, County Commissioner
Thomas H. VonDeylen, County Commissioner

BID TO BE RECEIVED
Tuesday, September 9, 2008 at 10:00 A.M.

BID SUBMITTED BY:

Company: _____

Address: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____

LEGAL NOTICE

Notice is hereby given that sealed bids will be received at the Office of the Board of Commissioners of Henry County, Ohio until Tuesday, September 9, 2008 at 10:00 A.M., at which time and place said bids will be opened and read for the furnishing of Sodium Chloride Rock Salt (ODOT Specification 712.03) for the Henry County Engineer to be used by the Highway Department, according to the specifications for the same which are on file with the Clerk for the Commissioners, 1853 Oakwood Avenue, Napoleon, Ohio. A copy of the same may be obtained at said office between the hours of 8:30 A.M. and 4:30 P.M., Monday through Friday.

Bids must be submitted on the forms provided by the Engineer.

Bids may be hand delivered or mailed in a sealed envelope addressed to the Henry County Commissioners, 1853 Oakwood Avenue, Napoleon, OH 43545 and bearing the bidders name and address.

The contract will be awarded to the lowest and best bidder.

Each bidder is required to file with his bid a bid guarantee in the form of either:

1) A bond, executed by a surety company authorized to do business in the State of Ohio, for the full amount of the bid; or

2) A certified check, cashier's check or letter of credit pursuant to Chapter 1305 of the Ohio Revised Code, in the amount of five (5%) percent of the bid (based on furnishing 1,000 tons) to guarantee that, if the contract be awarded on such bid, the bidder will enter into a contract and the performance of it will be properly secured.

The successful bidder, if using a 5% bid guarantee, shall be required to provide a contract performance and payment bond, executed by a surety company authorized to do business in the State of Ohio, for the full amount of the bid.

The said Board reserves the right to reject any and all bids.

BY ORDER OF
THE BOARD OF COUNTY COMMISSIONERS
HENRY COUNTY, OHIO
By: Vicki R. Glick, Clerk

Please publish the above Legal Notice 2 times:

August 19, 2008

August 26, 2008

Henry County, Ohio
2008 Sodium Chloride Rock Salt

Bids will be accepted until 10:00 A.M., Thursday, September 9, 2008, at the Office of the Henry County Commissioners, 1853 Oakwood Avenue, Napoleon, Ohio, for the furnishing of Sodium Chloride (Rock Salt) suitable for highway de-icing maintenance to be used by the Henry County Highway Department and City of Napoleon during the 2008/2009 winter season, the product shall meet or exceed the following specifications.

SPECIFICATIONS: Sodium Chloride shall meet the State of Ohio, Department of Transportation Item 712.03 as follows:

“712.03 Sodium Chloride” ASTM D 632 Type I, Grade 1, with the following modification:
Four (4) total Chlorides (NaCl, CaCl₂ and MgCl₂ as NaCl based on dry weight) not less than 97 percent.

Bid price shall be the unit price per ton F.O.B. (legal haul loads) Henry County Garage, Bales Road, Napoleon, Ohio, or City of Napoleon Garage, 1775 Industrial Drive, Napoleon, Ohio and also for pick-up by County Trucks from Bidder’s stockpile. Bulk Sodium Chloride shall be shipped via legal weight dump truck loads (piler truck or stacking equipment not required).

Salt usage is estimated between 500 and 2500 tons dependent on weather conditions. The successful bidder shall furnish a written statement of availability to deliver upon request as needed up to 2500 tons of Sodium Chloride suitable for highway de-icing.

Should the successful bidder be unable to meet their delivery obligation, they shall provide the material from an alternate supply at the unit price bid.

All trucks and stockpiles, other than mine locations, shall be adequately covered to assure that Sodium Chloride will be delivered in a free flowing usable condition.

Salt containing free water, foreign matter or lumps will be rejected at the point of delivery.

Sufficient non-caking additive shall be incorporated in the delivery material in order to prevent caking under normal storage conditions.

Deliveries may be made during hours of 7:00 am to 3:30 pm, Monday through Friday.

Sodium Chloride rock salt shall meet the following gradation requirements:

<u>Sieve</u>	<u>Percent Passing</u>
½ inch	100
3/8 inch	95-100
No. 4	15-95
No.8	5-65
No. 30	0-15

Henry County, Ohio
2008 Sodium Chloride Rock Salt

PROOF OF INSURANCE: Vendors are required to furnish Henry County a certificate of insurance in the minimum of \$1,000,000.00 primary and \$1,000,000.00 umbrella coverage. Henry County, its elected office and employees shall be named as additional insureds with respect to all activities under any agreement resulting from this bidding. The certificate of insurance shall provide that such insurance shall not be cancelled without thirty (30) days prior written notice to Henry County. Contractors will replace certificate for any insurance expiring prior to the effective end date under any agreement resulting from this bidding.

WORKER’S COMPENSATION: Contractors shall maintain Worker’s Compensation coverage as required by Ohio law. A copy of a valid Workers Compensation certificate shall be submitted with the bid.

INDEMNIFICATION/HOLD HARMLESS: The Contractor shall indemnify and hold harmless Henry County, its agents and employees from any and all losses, claims, damages, lawsuits, costs, judgments, expenses or any other liabilities which they may incur as a result of bodily injury, sickness, disease or death, or injury to or destruction of tangible property including the loss of use resulting from, caused in whole or part by the negligent act or omission of the Contractor or any person directly or indirectly employed by any of them or any person for whose acts any of them may be liable.

PROPOSAL

Delivery shall be made in lots of approximately _____ tons.

Minimum pickup by County trucks from Bidder's stockpile is _____ tons.

Bidder's stockpile location: _____

	<u>Price/ton</u>
Dump Truck Delivery	\$ _____
Pickup from Bidder's Stockpile	\$ _____

Signature _____

Company _____

Address _____

Telephone No. _____

Fax No. _____

Email _____

Date _____

**AFFIDAVIT IN COMPLIANCE WITH SECTION 3517.13
OF THE OHIO REVISED CODE**

STATE OF OHIO

HENRY COUNTY

The undersigned personally appeared before me, as an individual or as a representative of

_____ for a contract for _____
(Name of Entity) (Type of Product or Service)

to be let by the County of Henry, who, being duly cautioned and sworn, makes the following statement with respect to prohibited activities constituting a conflict of interest or other violations under Ohio Revised Code Section 3517.13, and further states that the undersigned has the authority to make the following representation on behalf of himself or herself or of the business entity:

1. That none of ***the*** following has **individually** made since April 4, 2007 and that, if awarded a contract for the purchase of goods or services in excess of \$10,000, none of the following **individually** will make, beginning on the date the contract is awarded and extending until one year following the conclusion of the contract, as an individual, one or more campaign contributions totaling in excess of \$10,000, to any elected official of the County of Henry or their individual campaign committees:
 - a. Myself;
 - b. Any partner or owner or shareholder of the partnership (if applicable);
 - c. Any owner of more than 20% of the corporation or business trust (if applicable);
 - d. Each spouse of any person identified in (a) through (c) of this section;
 - e. Each child seven years of age to seventeen years of age of any person identified in divisions (a) through (c) of this section (only applicable to contributions made on or after April 4, 2007)

2. That none of the following have **collectively** made since April 4, 2007, and that, if awarded a contract for the purchase of goods or services in excess of \$10,000, none of the following **collectively** will make, beginning on the date the contract is awarded and extending until one year following the conclusion of the contract, one or more campaign contributions totaling in excess of \$10,000, to any elected official of the County of Henry or their individual campaign committees:
 - a. Myself;
 - b. Any partner or owner or shareholder of the partnership (if applicable);
 - c. Any owner of more than 20% of the corporation or business trust (if applicable);
 - d. Each spouse of any person identified in (a) through (c) of this section;
 - e. Each child seven years of age to seventeen years of age of any person identified in divisions (a) through (c) of this section (only applicable to contributions made on or after April 4, 2007)

Signature _____

Title _____

Sworn to before me and subscribed in my presence this _____ day of _____, 20 _____.

Notary Public _____

My Commission expires _____

VERIFICATION OF "NO FINDING FOR RECOVERY"

No political subdivision shall award a contract for goods, services, or construction to a person against whom a Finding for Recovery has been issued by the Auditor of State, if the Finding for Recovery is unresolved.

The undersigned, by their signature and title, document that no "Finding for Recovery" is outstanding for the bidder.

By:

Title

Prior to award of a contract, Henry County shall verify and report to the Engineer and the Bidder that the Bidder does not appear in the State Auditor's database for "Findings of Recovery".

***** FOR INSTRUCTIONAL USE ONLY *****

READ BEFORE COMPLETING YOUR DMA FORM

Forms not conforming to the specifications listed below or not submitted to the appropriate agency or office will not be processed.

- To complete this form, you will need a copy of the Terrorist Exclusion List for reference. The Terrorist Exclusion List can be found on the Ohio Homeland Security Web site at the following address:

<http://www.homelandsecurity.ohio.gov/dma.asp>

- Be sure you have the correct DMA form. If you are applying for a state issued license, permit, certification or registration, the "State Issued License" DMA form must be completed (HLS 0036). If you are applying for employment with a government entity, the "Public Employment" DMA form must be completed (HLS 0037). If you are obtaining a contract to conduct business with or receive funding from a government entity, the "Government Business and Funding Contracts" DMA form must be completed (HLS 0038). The Pre-certification form (HLS 0035) should only be completed if you are specifically instructed to do so by the agency or office requesting the form.
- Your DMA form is to be submitted to the issuing agency or entity. "Issuing agency or entity" means the government agency or office that has requested the form from you or the government agency or office to which you are applying for a license, employment or a business contract. For example, if you are seeking a business contract with the Ohio Department of Commerce's Division of Financial Institutions, then the form needs to be submitted to the Department of Commerce's Division of Financial Institutions. Do NOT send the form to the Ohio Department of Public Safety UNLESS you are seeking a license from or employment or business contract with one of its eight divisions listed below.
- Department of Public Safety Divisions:

Administration	Ohio Homeland Security*
Ohio Bureau of Motor Vehicles	Ohio Investigative Unit
Ohio Emergency Management Agency	Ohio Criminal Justice Services
Ohio Emergency Medical Services	Ohio State Highway Patrol
- * DO NOT SEND THE FORM TO OHIO HOMELAND SECURITY UNLESS OTHERWISE DIRECTED. FORMS SENT TO THE WRONG AGENCY OR ENTITY WILL NOT BE PROCESSED.

***** FOR INSTRUCTIONAL USE ONLY *****



GOVERNMENT BUSINESS AND FUNDING CONTRACTS
 In accordance with section 2909.33 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NO ASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division Web site for reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

COMPLETE THIS SECTION ONLY IF YOU ARE AN INDEPENDENT CONTRACTOR

LAST NAME		FIRST NAME		MI
HOME ADDRESS				
CITY	STATE	ZIP	COUNTY	
HOME PHONE		WORK PHONE		

COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION

LAST NAME		FIRST NAME		MI
BUSINESS/ORGANIZATION NAME			PHONE	
BUSINESS ADDRESS				
CITY	STATE	ZIP	COUNTY	

DECLARATION

In accordance with section 2909.32 (A)(2)(b) of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List? Yes No
2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List? Yes No
3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List? Yes No
4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List? Yes No
5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List? Yes No
6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism? Yes No

In the event of a denial of a government contract or government funding due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division Web site.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced on page 1 of this declaration.

X
APPLICANT SIGNATURE _____

DATE _____