| | | AGENDA I | гем Е | XECU | TIVE S | UMMAI | RY | |
|---|---|---|-------------|---------|---------|-----------|-------------|---|
| | Title: | itle: Recommendation Waive the Formal Bid Procedure and | | | | | | |
| | Award Contracts for Tree Pruning and Remova | | | | 1 | | | |
| Services to DeMar T | | | Tree | Service | e and S | kyline Tr | ree | |
| ST. CHARLES | | Service | | | | | | |
| 8 1 N C E 1 8 3 4 | Presenter: | AJ Reineking | | | | | | |
| Please check approp | riate box: | | | | | | | |
| Government | Operations | X Government Services 04.27.15 | | | | | | |
| Planning & D | Development | City Council | | | | | | |
| Public Hearin | ıg | | | | | | | |
| | 245 000 00 | | D 1 | 4 1 | MEG | 37 | NO | 1 |
| | \$245,000.00 | | Budg | etea: | YES | X | NO | |
| If NO, please explain | | be funded: | | | | | | |
| Executive Summar | | | | | | | | |
| Tree trimming is a very important component to proper management of the City's urban forest as well as to the City's electric reliability efforts. The City solicited proposals for tree pruning and removal services and received six acceptable competitive bids from local vendors. Given the volume and scope of work to be completed, as well as the need for sufficient on-call emergency responders with specialized equipment, we recommend awarding the contract to the two most responsive and responsible proposers. | | | | | | | | |
| The City has used Do proposed prices that create a diverse oper | the two compan | ies submitted wer | re very | close, | and hav | ing two | contractors | |
| Attachments: (pleas | se list) | | | | | | | |
| Price Proposal Tabul Tree Pruning & Rem Tree Pruning & Rem | noval RFP/Contr noval RFP/Contr | ract with Skyline | Tree Se | | | | | |
| Recommendation / | Suggested Acti | on (briefly explai | n) : | | | | | |
| Recommendation to an amount not to exc Urban Forestry Main | ceed \$145,000 ar | nd Skyline Tree S | ervice | for an | amount | | | |

For office use only: Agenda Item Number: 5.j

REQUEST FOR WAIVING BID PROCEDURE

We request the City Council to waive the bid procedure and accept the quotation (requiring two-thirds City Council vote) submitted by:

DeMar Tree & Landscaping Service Skyline Tree Service 6N112 N. Rt. 31 P.O. Box 3058 St. Charles, IL 60175 St. Charles, IL 60174

For the purchase of: Pruning and Removal of Parkway Trees and Trees Encroaching on Power Lines

At a combined total cost not to exceed: \$245,000

Reason for the request to waive the bid procedure: Tree trimming is a very important component to proper management of the City's urban forest as well as to the City's electric reliability efforts. The City solicited proposals for tree pruning and removal services to ensure that proper equipment was available and that all staff was certified to work around live power lines. Given the volume and scope of work to be completed, as well as the need for sufficient on-call emergency responders with specialized equipment, we recommend awarding the contract to the two most responsive and responsible proposers.

The City has used DeMar and Skyline in previous forestry programs with excellent results. The proposed prices that the two companies submitted were very close, and having two contractors will create a diverse operational advantage for the Electric Utility and Public Services operations.

| Other Quotations Received: <u>Four</u> |
|--|
| Date: <u>04/27/2015</u> |
| Requested by: |
| Department Director: |
| Purchasing Manager: |
| Committee Chairman |

THIS REQUEST FORM MUST BE SIGNED BY ALL PARTIES PRIOR TO REQUESTING COMMITTEE APPROVAL FOR WAIVING OF THE BID PROCEDURE. REQUESTS FORWARDED DIRECTLY TO THE CITY COUNCIL (AND BYPASSING COMMITTEE) MUST BE SIGNED BY ALL PARTIES PRIOR TO REQUESTING CITY COUNCIL APPROVAL. SUCH REQUESTS ARE TO BE OF AN EMERGENCY NATURE WHERE TIME IS OF THE ESSENCE.

Forestry (Trimming, Removal, Stump Grinding) Proposals 2-Apr-15

FY15/16 Rates

| | | | | | | Total / Hour | Total / Hour |
|--------------------------|------------|--------------|---------------|----------|---------------|-----------------|--------------|
| | 3-Man Crew | Bucket Truck | Chipper/Truck | Pickup | Stump Grinder | (Trimming) | (Removal) |
| DeMar Tree Service St. | \$ 93.60 | \$ 7.00 | \$ 6.00 | \$ - | \$ 4.35 | \$ 106.60 | \$ 110.95 |
| Charles, IL | Ş 93.00 | 7.00 | \$ 0.00 | , - | ۶ 4.55 | 3 100.00 | \$ 110.55 |
| Skyline Tree Service St. | \$ 120.00 | \$ 10.00 | \$ 10.00 | \$ - | \$ 15.00 | \$ 140.00 | \$ 155.00 |
| Charles, IL | \$ 120.00 | \$ 10.00 | \$ 10.00 | \$ - | \$ 15.00 | \$ 140.00 | \$ 155.00 |
| Asplund Tree Expert Co. | \$ 122.73 | \$ 20.75 | \$ 14.00 | No Bid | No Bid | \$ 157.48 | No Bid |
| Streamwood, IL | \$ 122.73 | \$ 20.75 | 3 14.00 | INO BIO | INO BIO | 3 157.48 | NO DIO |
| Davey Tree Expert Co. | \$ 180.00 | \$ 20.75 | \$ 27.50 | \$ 8.50 | ć 10.F0 | \$ 228.25 | \$ 255.25 |
| West Chicago, IL | \$ 180.00 | \$ 20.75 | \$ 27.50 | \$ 8.50 | \$ 18.50 | \$ 228.25 | \$ 255.25 |
| Kramer Tree Specialists | \$ 232.00 | \$ 38.00 | \$ 36.00 | \$ 15.00 | ¢ 50.00 | \$ 306.00 | ć 271.00 |
| West Chicago, IL | \$ 232.00 | \$ 38.00 | \$ 30.00 | \$ 15.00 | \$ 50.00 | \$ 306.00 | \$ 371.00 |
| Savatree | ć 150.00 | ¢ 50.00 | ¢ 80.00 | ć 25.00 | ć 150.00 | ć 200.00 | ć 455.00 |
| Warrenville, IL | \$ 150.00 | \$ 50.00 | \$ 80.00 | \$ 25.00 | \$ 150.00 | \$ 280.00 | \$ 455.00 |



BID CERTIFICATION

| TO: | City of St Charles 2 E. Main St. St Charles, IL 60174 ATTN: AJ Reineking, Public Works Manager |
|--|--|
| FROM: | Organization: Da Mar + You + Landscape Sarvice INC Address: 6NII a 12 12 31 12 60175 City, State, Zip Code: S+ Charler 12 60175 Contact Person: Richard Orman Telephone Number: 620-311-1400 CIFE 630 142-7400 Facsimile Number: 620 584-7400 |
| | ED NEGOTIATORS: |
| Nam Nam | e: Richard No Mich Plione #: 630-377-7400 Phone #: 630-742-7400 |
| Adde | F ADDENDA: The receipt of the following addenda is hereby acknowledged: ndum No, Dated ndum No, Dated |
| in submitting any or all F Proposal. | this proposal, it is understood that the City of St Charles reserves the right to reject proposals, to accept an alternate Proposal, and to waive any informalities in any |
| In addition to herein. | this document, Offerors shall furnish, with the proposal, all submittals as required |
| BUSINESS (| DRGANIZATION: |
| | Sole Proprietor: An individual whose signature is affixed. Partnership: State full names, titles and addresses of all responsible principals and/or partners on attached sheet. Gerporation: State of incorporation: LLD NOS |
| | FEIN # 36-2614422 |

Please provide your Foderal Employer identification Number (F.E.L.N.):



Seal (affix seal below if applicable)

President Vice-President

e-President Secretary Treasurer

Tance Under hill

LANCE NUGELHIL

(List_\Name,of Offic

Attest:

24



DISQUALIFICATION OF CERTAIN PROPOSER

PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or subcontract, for a stated period of time, from the date of conviction or entry of a plea or admission of guilt, if the person or business entity,

- (A) has been convicted of an act committed, within the State of Illinois or any state within the United States, of bribery or attempting to bribe an officer or employee in the State of Illinois, or any state in the United States in that officer's or employee's official capacity;
- (B) has been convicted of an act committed, within the State of Illinois or any state within the United States, of bid rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act 15 U.S.C.;
- (C) has been convicted of bid rigging or attempting to rig bids under the laws of the State of Illinois, or any state in the United States;
- (D) has been convicted of an act committed, within the State of Illinois or any state in the United States, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and Clayton Act 15 U.S.C. Sec. 1 et sig;
- (E) has been convicted of price-fixing or attempting to fix prices under the laws of the State of Illinois, or any state in the United States;
- (F) has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois or in any state in the United States;
- (G) has made an admission of guilt of such conduct as set forth in subsection (A) through (F) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to;
- (H) has entered a plea of <u>nolo contendere</u> to charges of bribery, price fixing, bid rigging, bid rotating, or fraud; as set forth in subparagraphs (A) through (F) above.

Business entity, as used herein, means a corporation, partnership, trust, association, unincorporated business or individually owned business.



CERTIFICATION OF COMPLIANCE

THE UNDERSIGNED HEREBY CERTIFIES AS FOLLOWS:

Title

| 1. | That the undersigned has authority to make this co | ertification on behalf of the proposal. |
|---|--|--|
| 200-200-200-200-200-200-200-200-200-200 | DeMar Fry & Lands | capp Service 1 |
| | Name of Company | , |
| 2. | That the undersigned has read the contents, in proposer, which are contained on the following pa | • |
| 3. | That the undersigned knows of his own knowledge from proposing under the aforesaid sections. | ge that the proposer is not disqualified |
| | | Rich Pallar |
| | Authorized Signature | • |
| | Type or Print Name | Richard A Dollar |
| | ,, | 0. 0. |

SEAL

<u>Instructions</u>: This is to be completely filled out and executed by the chief officer or the proposer authorized to submit the certification.



CITY OF ST CHARLES, ILLINOIS TAX COMPLIANCE AFFIDAVIT

| Reduct) H WWW , being first duly sworn, |
|--|
| denoses and save: that he is Procide N |
| of Consultant) (Partner, Officer, Owner, Etc.) (Consultant) (Consultant) |
| The individual or entity making the foregoing proposal or bid certifies that he is not barred from contracting with the City of St Charles because of any delinquency in the payment of any tax administered by the Department of Revenue unless the individual or entity is contesting, in accordance with the procedures established by the appropriate revenue act, or entity making the proposal or bid understands that making a false statement regarding delinquency in taxes is a Class A Misdemeanor and, in addition, voids the contract and allows the municipality to recover all amounts paid to the individual or entity under the contract in civil action. |
| (Name of Bidder if the Bidder is an Individual) (Name of Partner if the Bidder is a Partnership) (Name of Officer if the Bidder is a Corporation) |
| The above statements must be subscribed a sworn to before a notary public. |
| Subscribed and Sworn to this 2016 day of 19ach, 2015 |
| "OFFICIAL SEAL" STEVE BUTSCHER MOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES MARCH 31, 2015 SEAI |

Failure to complete and return this form may be considered sufficient reason for rejection of the bid



CITY OF ST CHARLES, ILLINOIS ANTI-COLLUSION AFFIDAVIT AND CERTIFICATION

| Rillan Dollan | being first duly sworn, |
|---|---|
| deposes and says: that he is | - |
| (Partner, Officer, Owner, Etc.) of (Consultant) | |
| The party making the foregoing proposal or bid, certifies that such bicollusive, or sham; that said bidder has not colluded, conspired, conniver indirectly, with any bidder or person, to put in a sham bid or to refrain from any manner, directly or indirectly, sought by agreement or collusion conference with any person; to fix the bid price element of said bid, or bidder, or to secure any advantage against any other bidder or any perpoposed contract. | d or agreed, directly or in bidding, and has not or communication or or of that of any other |
| The undersigned certifies that he is not barred from bidding on this co conviction for the violation of State laws prohibiting bid-rigging or bid-rotat | |
| (Name of Bidder if the Bidder is an Individual) (Name of Partner if the Bidder is a Partnership) (Name of Officer if the Bidder is a Corporation) | |
| The above statements must be subscribed and sworn to before a | notary public. |
| Subscribed and Sworn to this 25th day of March, 2015 | • |
| "OFFICIAL SEAL" STEVE BUTSCHER NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES MARCH 31, 2015 | ary Public |

Failure to complete and return this form may be considered sufficient reason for rejection of the bid





REFERENCES

CITY OF ST CHARLES

General Information, list below current business references for whom you have performed work similar to that required by this proposal.

| Facility: City of Genera - Electric Dept Address: |
|--|
| City, State, Zip Code: Jenera W 60134 |
| Telephone Number: |
| Contact Person: ED RUDY 630 742 2307 |
| Dates of Service: CVTPN |
| Facility: Fermy Lab Address: City, State, Zip Code: Glowlyd W 60134 Telephone Number: Contact Person: Bill New comb 630 840 2437 Dates of Service: 2013 |
| Facility: City St CHarler Electric Dept Address: City, State, Zip Code: St CHarler L 60174 Telephone Number: 630 377-4474 Contact Person: Gary Sittler Dates of Service: CVITE N. + |
| Sales of Scivice, |



COMPLIANCE STATEMENT

Complete this form and submit it with Form of Proposal.

| NeMan Offeror's N | tree + Landecast Service 1/K Rieles A MMM |
|----------------------|---|
| TO: | City of St Charles 2 E. Main St. St Charles, IL 60174 |
| | Organization: No Mah They & Landscape Roma Mc |
| FROM: | Organization: No Man they from Scapp king MC Address: 6N12 Rt 3 |
| | City, State, Zip Code: St CHqHar 12 60175 |
| | Contact Person: Richard A Dallor |
| | Telephone Number: 630 377-7400 630742-7400 |
| | Facsimile Number: 630 584 7400 |

In compliance with this Request for Proposal, and subject to all conditions thereof, the undersigned offers and agrees, if this proposal is accepted, to furnish the services as outlined herein, for the City of St Charles in the amount indicated, subject to modification through negotiations which may be conducted pursuant to conditions set forth in the Request for Proposals.



CERTIFICATE OF NON-DISQUALIFICATION UNDER ILLINOIS COMPILED STATUTES, CH. 720, SEC. 33E-11

| The undersigned, upon being first duly sworn, hereby certifies to the City of St. Charles, |
|---|
| Kane and DuPage Counties, Illinois, that (bidder) not |
| barred from contracting with any unit of State or local government, as a result of a |
| violation of Ch. 720, Sec. 33E-11 of the Illinois Compiled Statutes. |
| Name of Bidder By: |
| State of Dilinois |
| County of Kane |
| Subscribed and sworn to before me this 2015 day of Mand 2015 |
| Notary Public "OFFICIAL SEAL" STEVE BUTSCHER NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES MARCH 31, 2015 |

NOTE TO BIDDER: Anyone who makes a false statement, material to this Certification, commits a Class 3 Felony under Illinois Compiled Statutes, Ch. 720, Sec. 33 E-11 (b).



CERTIFICATE OF COMPLIANCE WITH SAFETY STANDARDS

| The undersigned, upon being first duly sworn, hereby certifies to the City of St. Charles, Kane |
|---|
| and DuPage Counties, Illinois, that Richard A Damer (bidder) |
| shall comply with all local, state and federal safety standards. |
| Demar he & Landscape Service INC |
| Name of Bidder By: |
| State of |
| ss |
| County of Kane |
| Subscribed and sworn to before me this 2015 day of Mard 2015 |
| St. 34 |
| Notary Public |
| "OFFICIAL SEAL" STEVE BUTSCHER |

NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES MARCH 31, 2015



CERTIFICATE OF COMPLIANCE WITH PUBLIC ACT 87-1257 OF THE ILLINOIS HUMAN RIGHTS ACT

| The undersigned, upon being first duly sworn, hereby certifies to the City of St. Charles, Kane |
|--|
| and DuPage Counties, Illinois, that |
| complies with the Illinois Human Rights Act as amended by Section 2-105, Public Act 87-1257 |
| in relation to employment and human rights. |
| Domar trep & Landscape Sarvice IN Name of Bidder By: Richal April 1 |
| State of <u>Tillioi</u> |
| County of Kane |
| Subscribed and sworn to before me this day of day |
| Notary Public |
| "OFFICIAL SEAL" STEVE BUTSCHER NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES MARCH 31, 2015 |



AGREEMENT SIGNATURE SHEET

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day first mentioned above.

CITY OF ST CHARLES

| Ву: | |
|---|---------------|
| Ray Rogina, Mayor | |
| Attest: | |
| City Clerk | |
| CONTRACTOR: | |
| By: | |
| Print Name and Title:(If Corporate: Chairman, President or Vice President) | |
| Attest | |
| Print Name and Title (If Corporate: Secretary, Assistant Secretary) Chief Financial Officer or Assistant Treasu | ary, urer) |



BID CERTIFICATION TO: City of St Charles 2 E. Main St. St Charles, IL 60174 ATTN: AJ Reineking, Public Works Manager Skyline Tree Service + landscaping, In. Organization: FROM: Address: City, State, Zip Code: St. Charles, Contact Person: Ted Ranney usa lous Telephone Number: 630, 584 -Facsimile Number: 630.584 **AUTHORIZED NEGOTIATORS:** Name: Ted Ranney Phone #: 630.584.2221 Phone #: Name: RECEIPT OF ADDENDA: The receipt of the following addenda is hereby acknowledged: Addendum No. ______, Dated_ Addendum No. , Dated In submitting this proposal, it is understood that the City of St Charles reserves the right to reject any or all Proposals, to accept an alternate Proposal, and to waive any informalities in any Proposal. In addition to this document, Offerors shall furnish, with the proposal, all submittals as required herein. **BUSINESS ORGANIZATION:** Sole Proprietor: An individual whose signature is affixed. Partnership: State full names, titles and addresses of all responsible principals and/or partners on attached sheet. Illinois Corporation: State of Incorporation:

Please provide your Federal Employer Identification Number (F.E.I.N.):



| | | ~~~~ |
|---------------------------|-----------------------|-------------------------|
| Seal (affix seal below if | applicable) | |
| | | (List Name of Officers) |
| | President | Ted RAnney |
| | Vice-President | 11 |
| | Secretary | |
| | Treasurer | 6 5 |
| Attest: | | |
| | Theo Bolanny Signatur | e of Secretary |
| | | |



DISQUALIFICATION OF CERTAIN PROPOSER

PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or subcontract, for a stated period of time, from the date of conviction or entry of a plea or admission of guilt, if the person or business entity,

- (A) has been convicted of an act committed, within the State of Illinois or any state within the United States, of bribery or attempting to bribe an officer or employee in the State of Illinois, or any state in the United States in that officer's or employee's official capacity;
- (B) has been convicted of an act committed, within the State of Illinois or any state within the United States, of bid rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act 15 U.S.C.;
- (C) has been convicted of bid rigging or attempting to rig bids under the laws of the State of Illinois, or any state in the United States;
- (D) has been convicted of an act committed, within the State of Illinois or any state in the United States, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and Clayton Act 15 U.S.C. Sec. 1 et sig.;
- has been convicted of price-fixing or attempting to fix prices under the laws of the State of Illinois, or any state in the United States;
- (F) has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois or in any state in the United States;
- (G) has made an admission of guilt of such conduct as set forth in subsection (A) through (F) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to;
- (H) has entered a plea of <u>nolo contendere</u> to charges of bribery, price fixing, bid rigging, bid rotating, or fraud; as set forth in subparagraphs (A) through (F) above.

Business entity, as used herein, means a corporation, partnership, trust, association, unincorporated business or individually owned business.



CERTIFICATION OF COMPLIANCE

THE UNDERSIGNED HEREBY CERTIFIES AS FOLLOWS:

Title

| 1. | That the undersigned | has authority to ma | ake this certification o | n behalf of the proposal. |
|----|----------------------|---------------------|--------------------------|---------------------------|
|----|----------------------|---------------------|--------------------------|---------------------------|

| Sk | cyline Tree Service & Land | Iscaping, Inc. |
|----|---|----------------|
| | Name of Com | npany |
| 2. | That the undersigned has read the conter proposer, which are contained on the following | • • |
| 3. | That the undersigned knows of his own kno from proposing under the aforesaid sections. | |
| | Authorized Signature | - cod/Ranney |
| | | Ted Ranney |
| | Type or Print Name | Q |
| | | |

President

SEAL

<u>Instructions</u>: This is to be completely filled out and executed by the chief officer or the proposer authorized to submit the certification.



CITY OF ST CHARLES, ILLINOIS TAX COMPLIANCE AFFIDAVIT

| theodore Ranney | , being first duly sworn, |
|------------------------------|---------------------------|
| deposes and says: that he is | to Ranney |
| (Partner, Officer, Ow | ner, Etc.) |
| (Consultant) | |

The individual or entity making the foregoing proposal or bid certifies that he is not barred from contracting with the City of St Charles because of any delinquency in the payment of any tax administered by the Department of Revenue unless the individual or entity is contesting, in accordance with the procedures established by the appropriate revenue act, or entity making the proposal or bid understands that making a false statement regarding delinquency in taxes is a Class A Misdemeanor and, in addition, voids the contract and allows the municipality to recover all amounts paid to the individual or entity under the contract in civil action.

(Name of Bidder if the Bidder is an Individual)

(Name of Partner if the Bidder is a Partnership)

(Name of Bidder if the Bidder is at Individual)
(Name of Partner if the Bidder is a Partnership)
(Name of Officer if the Bidder is a Corporation)

The above statements must be subscribed a sworn to before a notary public.

Subscribed and Sworn to this 21d day of April , 20/5

"OFFICIAL SEAL"
ERIC M FRANCK
Notary Public, State of Illinois
My Commission Expires \$2/24/2017

Failure to complete and return this form may be considered sufficient reason for rejection of the bid



CITY OF ST CHARLES, ILLINOIS ANTI-COLLUSION AFFIDAVIT AND CERTIFICATION

| Theodore Ranney, being first duly sworn, |
|--|
| deposes and says: that he is |
| of Sulvi Tree Service. (Consultant) |
| The party making the foregoing proposal or bid, certifies that such bid is genuine and not collusive, or sham; that said bidder has not colluded, conspired, connived or agreed, 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 element of said bid, or of that of any other bidder, or to secure any advantage against any other bidder or any person interested in the proposed contract. |
| The undersigned certifies that he is not barred from bidding on this contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid-rotating. |
| (Name of Bidder if the Bidder is an Individual) (Name of Partner if the Bidder is a Partnership) (Name of Officer if the Bidder is a Corporation) |
| The above statements must be subscribed and sworn to before a notary public. Subscribed and Sworn to this 7th day of 7th |
| ERIC M. FRANCK Notary Public State Settled at the Notary Public |

Notary Public. State of Illinois
My Commission Expires 09/24/2017

Failure to complete and return this form may be considered sufficient reason for rejection of the bid



REFERENCES

CITY OF ST CHARLES

General Information, list below current business references for whom you have performed work similar to that required by this proposal.

| Facility: City of Saut Charles - Public Works |
|---|
| Address: 2 East Main St. |
| City, State, Zip Code: St. Charles J. 60174 |
| Telephone Number: 630. 584 - 4462 |
| Contact Person: Tany Bella flore |
| Dates of Service: 20 - 2015 |
| |
| Facility: <u>City of Geneva - Public Works</u> Address: 1800 South St. |
| Address: 1800 South St. |
| City, State, Zip Code: acueva. IL 60134 |
| City, State, Zip Code: <u>Geneva</u> <u>TL</u> 60134 Telephone Number: <u>630.232</u> . (501 |
| Contact Person: Turk Kohorst |
| Dates of Service: 20 - 2015 |
| |
| |
| Facility: City of Batavia - Public Works |
| Address: 100 n. d Sloved ave. |
| City, State, Zip Code: Batavia, IL 60510 |
| Telephone Number: 630. 454. 2000 |
| Contact Person: Scott Haires |
| Dates of Service: 20 |



COMPLIANCE STATEMENT

Complete this form and submit it with Form of Proposal.

| Offeror's Na | me: Ted Ranney Signature: Ted Kamey |
|--------------|---|
| | |
| TO: | City of St Charles 2 E. Main St. St Charles, IL 60174 ATTN: AJ Reineking, Public Works Manager |
| FROM: | Organization: Skyline Tree Survice & Laudscaping, Inc. Address: P.O. Box 3058 |
| | City, State, Zip Code: Saint Charles, IL 60174 |
| | Contact Person: Teal Kanney |
| | Telephone Number: 630, 584, 2221 |
| | Facsimile Number: (030 584 - 2902 |

In compliance with this Request for Proposal, and subject to all conditions thereof, the undersigned offers and agrees, if this proposal is accepted, to furnish the services as outlined herein, for the City of St Charles in the amount indicated, subject to modification through negotiations which may be conducted pursuant to conditions set forth in the Request for Proposals.



CERTIFICATE OF NON-DISQUALIFICATION UNDER ILLINOIS COMPILED STATUTES, CH. 720, SEC. 33E-11

| The undersigned, upon being fir | rst duly sworn, hereby certifies to the City of St. Charles, |
|--|---|
| Kane and DuPage Counties, Illino | ois, that Skyline True Survice (bidder) not |
| barred from contracting with any | unit of State or local government, as a result of a |
| violation of Ch. 720, Sec. 33E-11 | of the Illinois Compiled Statutes. Skyline Tree Service Name of Bidder |
| | By: Theokonny |
| State of <u>Thinok</u> | |
| County of Kale | ss |
| Subscribed and sworn to before this day of Notary Public | "OFFICIAL SEAL" ERIC M FRANCK Notary Public. State of Illinois My Commission Expires 09/24/2017 |

NOTE TO BIDDER: Anyone who makes a false statement, material to this Certification, commits a Class 3 Felony under Illinois Compiled Statutes, Ch. 720, Sec. 33 E-11 (b).



CERTIFICATE OF COMPLIANCE WITH SAFETY STANDARDS

| The undersigned, upon being first duly sworn, hereby Kane | y certifi | ies to the City of St. Charle | s, |
|---|--------------------------|---|----------|
| and DuPage Counties, Illinois, that Skyline | Tree | Service | (bidder) |
| shall comply with all local, state and federal safety sta | andard | ls. | |
| | | yline Tree Sein of Bidder Thea Mann | nel |
| State of Illnot | | / | |
| County of Kane | | | |
| Subscribed and sworn to before me this day of day "OFFICE ERIC M. Notary Public. My Commission My Commission. | F¤AN State ≳spires | ICK of Illinois 09/24/2017 | |



CERTIFICATE OF COMPLIANCE WITH PUBLIC ACT 87-1257 OF THE ILLINOIS HUMAN RIGHTS ACT

| The undersigned, upon being first duly sworn, hereby certification. | fies to the City of St. Charles, |
|---|----------------------------------|
| and DuPage Counties, Illinois, that Skyline Tree | Suvice (bidder) |
| complies with the Illinois Human Rights Act as amended by 87-1257 | y Section 2-105, Public Act |
| in relation to employment and human rights. | |
| | |
| _Sk | yline Tree Service |
| Name | of Bidder |
| Ву: | Theo Ranney |
| State of <u>tllinois</u> | |
|) ss | |
| County of <u>Farre</u> | |
| Subscribed and sworn to before me this day of | |
| Notary Public "OFFICIAL SEAL" ERIC M FRANCK | linaia |
| Notary Public, State of II My Commission Expires 09/2 | 4/2017 🐉 |
| | **** |



AGREEMENT SIGNATURE SHEET

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day first mentioned above. CITY OF ST CHARLES By: Ray Rogina, Mayor Attest: City Clerk CONTRACTOR: By: Print Name and Title: _ (If Corporate: Chairman, President or Vice President) Attest

Print Name and Title

(If Corporate: Secretary, Assistant Secretary, Chief Financial Officer or Assistant Treasurer)

21

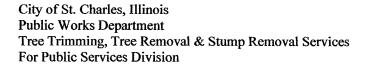


Appendix I - Insurance Requirements

City of St. Charles Certificate of Insurance Requirements

Contractor shall carry all insurance coverage required by law. In addition, the Contractor shall carry, at its own expense, at least the following insurance coverage with a duly licensed and registered insurance company in the State of Illinois having a minimum A.M. Best rating of A-VI:

- (a) Workers' Compensation & Occupational Diseases Insurance Statutory amount for Illinois
- (b) General Liability Insurance:
 - 1) Bodily injury, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - Property damage, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - 3) Contractual insurance broad form, with limits of not less than \$1,000,000 each occurrence/\$2,000,000 aggregate.
- (c) Automotive Liability Insurance:
 - Bodily injury, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - Proper damage, with limits of not less than \$1,000,000 each occurrence/
 \$2,000,000 aggregate. Property damage insurance coverage shall include non-owned, hired, leased, or rented vehicles, as well as owned vehicles.
- (d) Umbrella or excess liability coverage of \$5,000,000.
- (e) Contractor's insurance policy shall name City as an additional insured on the General Liability, Automotive Liability and Excess Liability insurance policies. The insurance coverage shall be written with insurance companies acceptable to City. All insurance premiums shall be paid without cost to City. The Contractor shall furnish to City a Certificate of





Insurance attesting to the respective insurance coverage for the full contract term. Contractor shall submit satisfactory proof of insurance simultaneously with the execution of the contract.

(f) All insurance policies shall provide that the City shall receive written notice of cancellation of reduction in coverage of any insurance policy thirty (30) days prior to the effective date of cancellation.



CERTIFICATE OF LIABILITY INSURANCE

SKYLTRE-01 **RFORTMAN**

DATE (MM/DD/YYYY)

3/26/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

| PRO | DDUCER | | | CONTACT NAME: | | | ····· | |
|--------------|---|------------------------|---|--|--|---|---|----------------------|
| 303 | seph M. Wiedemann & Sons Inc. East Main Street nt Charles, IL 60174 | | | PHONE (A/C, No, Ext): (630) 3 | 77-0500 | FAX (A/C, No): | (847) | 228-8505 |
| Juli | J | | | ADDRESS: | LIDEDIC AFFOR | NOW COVERNO | | NAIC # |
| | | | | INSURER A : Secura | | IDING COVERAGE | | NAIC# 22543 |
| INSI | URED | | | | | | | ££343 |
| | UNCO | | | INSURER B : Ameris | aie | | | |
| | Skyline Tree Service & Land | Iscapi | ng, Inc. | INSURER C: | | | | |
| | P. O. Box 3058 St. Charles, IL 60174 | | | INSURER D : | | | | |
| | St. Charles, IL 00174 | | | INSURER E : | | , . | | |
| | | | | INSURER F: | | | | |
| | | | ATE NUMBER: | | | REVISION NUMBER: | | 101/ 050100 |
| IN C E | THIS IS TO CERTIFY THAT THE POLICIINDICATED. NOTWITHSTANDING ANY FOR THE POLICIES OF MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH | EQUIF PERT POLIC | REMENT, TERM OR CONDITION FAIN, THE INSURANCE AFFOR RIES. LIMITS SHOWN MAY HAVE | N OF ANY CONTRA DED BY THE POLIC BEEN REDUCED BY | CT OR OTHER IES DESCRIB PAID CLAIMS. | R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT TO | CT TO | WHICH THIS |
| NSR LTR | TYPE OF INSURANCE | ADDL: | SUBR WVD POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | s | |
| Α | X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR | х | CP3220013 | | 03/31/2016 | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ \$ | 1,000,000 200,000 |
| | on the second | | | | · | MED EXP (Any one person) | \$ | 10,000 |
| | | | | | | PERSONAL & ADV INJURY | . <u>. </u> | 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | 1 | | GENERAL AGGREGATE | \$ | 2,000,000 |
| | POLICY X PRO- JECT LOC | | | | | | \$ | 2,000,000 |
| | | | | | , | PRODUCTS - COMPTOP AGG | \$ | 2,000,000 |
| | OTHER: AUTOMOBILE LIABILITY | | | | | COMBINED SINGLE LIMIT | <u>\$</u> | 1,000,000 |
| Α | | | A3220014 | 03/31/2016 | 03/31/2016 | (Ea accident) BODILY INJURY (Per person) | \$ | 1,000,000 |
| _ | ANY AUTO ALL OWNED X SCHEDULED | | A3220014 | 03/3//2015 | 03/31/2010 | · · · · · · · · · · · · · · · · · · · | * \$ | |
| | Y NON-OWNED | | | | | PROPERTY DAMAGE | \$ \$ | |
| | A HIRED AUTOS AUTOS | | | | | (Per accident) | \$ | |
| | X UMBRELLA LIAB X OCCUR | \vdash | | | | | | 5,000,000 |
| | | | C11222004E | 02/24/2045 | 02/24/2046 | EACH OCCURRENCE | \$ | |
| Α | EXCESS LIAB CLAIMS-MADE | 1 1 | CU3220015 | 03/31/2015 | 03/31/2016 | AGGREGATE | \$ | 5,000,000 |
| | DED RETENTION \$ WORKERS COMPENSATION | | | | | V PER V OTH- | \$ | |
| _ | AND EMPLOYERS' LIABILITY Y/N | | | 00/04/004= | 00/04/0040 | X PER STATUTE X OTH- | | 4 000 000 |
| В | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | N/A | AVWCIL2283352014 | 03/31/2015 | 3/31/2015 03/31/2016 | E.L. EACH ACCIDENT | \$ | 1,000,000 |
| | (Mandatory in NH) If yes, describe under | | | | | E.L. DISEASE - EA EMPLOYEE | \$ | 1,000,000 |
| | DESCRIPTION OF OPERATIONS below | | | | | E.L. DISEASE - POLICY LIMIT | \$ | 1,000,000 |
| | | | | | | | | |
| | | | | | | | | |
| | <u> </u> | | | | <u> </u> | | | |
| | SCRIPTION OF OPERATIONS / LOCATIONS / VEHIC | LES (A | CORD 101, Additional Remarks Schedu | ile, may be attached if mo | re space is requi | red) | | |
| пе | odore Ranney - Officer - Excluded | | | | | | | |
| he | City of St. Charles is listed as additiona | al insu | red with respects to the Gener | ral Liability when req | uired by writ | ten or verbal contract | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| CE | RTIFICATE HOLDER | | | CANCELLATION | | | | · |
| | | | | | | | | |
| | | | | I SHOULD ANY OF | THE ABOVE D | ESCRIBED POLICIES BE CA | ANCELI | LED BEFORE |

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THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

City of St. Charles Attn: Cecile Benson 2 E Main St.

Saint Charles, IL 60174

AUTHORIZED REPRESENTATIVE