

15-372

EXHIBIT "A"

SPECIFICATIONS FOR SNOW REMOVAL SERVICES
COUNTY OF SUMMIT OFFICE LOCATIONS

Bidder is to specify the cost of snow removal (plowing) for each snowfall over two (2) inches for the following areas. Additionally, we request the cost of salting (removal of ice) for each of the areas to be applied by prior approval only.

AREA 1

Jail Facility – 205 E. Crosier Street, Akron, Ohio – 5 lots

Juvenile Court – 650 Dan Street, Akron, Ohio

Tallmadge Avenue Facility – 1030-1050 E. Tallmadge Avenue- Lot surrounding the entire building

The Jail Facility and Juvenile Court are seven (7) day operations and are to be serviced accordingly. Tallmadge Ave is (6) day operation...no Sunday or Holiday hours unless requested.

AREA 2

Medical Examiners – 85 N. Summit Street, Akron, Ohio

Animal Control Facility – 250 Opportunity Parkway, Akron, Ohio

The Medical Examiners and Animal Control lots will only need to be plowed and/or salted on weekends and holidays. Weekends are after 4:00 p.m. on Friday through 12:00 midnight on Sunday. The holidays would be Thanksgiving, the day after Thanksgiving, Christmas Eve, Christmas Day, New Year's Day, Martin Luther King Day and President's Day.

There will be a mandatory meeting on _____ to drive through each site to familiarize bidders with each location that is to be serviced. The meeting will begin promptly at _____ at the Tallmadge Avenue Facility, 1030 E. Tallmadge Ave. in front of the Summit County Title Bureau and proceed to each location. This meeting is mandatory and must be attended by all bidders.

All lots must be cleared prior to 7:00 a.m. when the snow accumulates two or more inches overnight and at other times when contacted by the authorized Physical Plants Department Representative.

The remaining lots require authorization before plowing on weekends or holidays.

Authorization is required from a Physical Plants Representative prior to the use of salt in any area. Invoices for salting without the required authorization will not be honored.

Billing to be bi-monthly and specify the individual locations, dates of service and service performed (plowing/salting).

Each physical site visit shall constitute one (1) occurrence. Return visits shall constitute an additional occurrence. If you feel additional salting or plowing is needed at a site, prior authorization must be obtained from the authorized County representative.

Performance of the service must be to the satisfaction of the County, which reserves the right to terminate the contract with a ten (10) day letter of notification.

This is a "Not to Exceed" \$35,000.00 contract.

The company(s) awarded the contract(s) will be required to submit the following within two (2) weeks of notification of award.

1. Certification of Insurance with the County of Summit, Ohio listed as additionally insured. Proof of General Liability Insurance in an amount of not less than \$500,000.00
2. A copy of their Workers Compensation Certificate
3. A signed Declaration of Personal Property Tax Delinquency Form
4. A signed Affirmative Action Certificate for E.E.O.
5. A signed Anti-Discrimination Certificate
6. A signed agreement for snow removal service which will be provided by the County.

QUOTE SHEET FOR SNOW REMOVAL

Bidder; (Company Name) _____
Address _____
City _____ Zip _____ Phone (_____) _____

Snow Removal Services for the County of Summit Locations

<u>AREA 1</u>	<u>PLOWING</u> <u>EACH OCCURRENCE</u>	<u>SALTING</u> <u>EACH OCCURRENCE</u>
Jail Facility	\$ _____	\$ _____
Juvenile Court	\$ _____	\$ _____
Tallmadge Avenue	\$ _____	\$ _____
Total Cost Each Occurrence	\$ _____	\$ _____

<u>AREA 2</u> (Weekends & Holidays)	<u>PLOWING</u> <u>EACH OCCURRENCE</u>	<u>SALTING</u> <u>EACH OCCURRENCE</u>
Medical Examiner	\$ _____	\$ _____
Animal Control	\$ _____	\$ _____
Total Cost Each Occurrence	\$ _____	\$ _____