REQUEST FOR PROPOSAL MADISON COUNTY BOARD OF SUPERVISORS

GROUNDS MAINTENANCE FOR COUNTY FACILITIES

Attention:

Danny Lee, Director

Madison County Building and Grounds P.O. Box 608, Canton, MS 39046-0608

or Email to danny.lee@madison-co.com

SCOPE OF WORK:

The Madison County Board of Supervisors (Owner) is requesting proposals from a qualified grounds maintenance contractor (Contractor) to provide grounds maintenance to specific locations shown in attached Exhibits and as described in this document. The services include turf mowing, edging, blowing, pruning and hand/mechanical weed control. Sidewalks and parking areas will have clippings and debris removed once cutting has been completed.

Weather permitting, all work should be performed Monday through Friday. No work will be performed on Sundays or holidays recognized by Madison County.

The contract may be modified for the purpose of adjusting the scope of work to add to or subtract from task due to construction, acquisition of properties, removal of properties/ facilities, or as otherwise determined by the Owner.

CONTRACT TERM:

The initial contract shall be in effect for an initial term of forty-eight (48) months with the option to renew the contract for one (1) additional year and continue to renew each anniversary, provided there is no change with the terms, conditions and specification. If the Owner or Contractor wish to terminate the contract, the requesting party shall provide a written Notice of Termination allowing a ninety (90) day notice.

Prices, as submitted within the proposal, shall remain firm for the initial four (4) year term of the agreement. Any price adjustments requested after the initial four (4) year term must be submitted in writing.

CONTRACT AWARD:

The Owner reserves the right to award proposal in whole or in part, whichever is determined to be in the best interest of the Owner.

GROUNDS MAINTENANCE SERVICE CONTRACT BETWEEN MADISON COUNTY BOARD OF SUPERVISORS AND EXCELL LAWN SERVICE

The Grounds Maintenance Service Contract is made and entered into on this the <u>01 day</u> of June 2020 by and between the Madison County Board of Supervisors (hereinafter called the "County"), and EXCELL LAWN SERVICE (hereinafter called the "Contractor").

In consideration of the following mutual agreements and covenants, the parties agree as follows:

- 1. The Contractor agrees to perform Grounds Maintenance as detailed in the attached Proposal identified as Exhibit A.
- 2. The Contractor will provide all personnel and equipment to complete the services as identified in Exhibit A.
- 3. Any services, not covered under this contract, will need County approval prior to service being provided.
- 4. The specified Grounds Maintenance services will be performed Monday-Friday, unless directed otherwise. No work will be performed on Sunday or Legal Holidays.
- 5. This contract shall be for a period of four years and shall automatically renew each year on the contract anniversary date unless one party provides the other party with a 90-day written notice of its decision not to renew said contract.
- 6. This contract shall begin on the 2nd day of June 2020.
- 7. The County agrees to pay the Contractor an annual fee of \$\\\\$43,036.00 \\\\$, with said annual fee to be paid in 12 monthly payments of \$3,586.30 for performing the Grounds

 Maintenance services provide under this contract.
- 8. Contractor shall submit invoices at the end of each month for County approval.
- 9. <u>Liability Insurance Requirements</u> The Bidder shall provide proof of Liability Insurance totaling no less than \$1,000,000.00.

			presentatives hereby ex	cecute this
contract on this day	the <u>Zrth</u> day of	IVIAY 2020.		
MADISON COUNTY BO	DARD OF SUPERVISO	RS	EXCELL LAWN SERVICE	
			113 Bridge Park Circle,	Canton, MS
			1	
By:			By: Kalat	Winn
Gerald Steen,	President		Robert Winn, 0	Owner
Attest:				A Pales of the second of the s

Ronnie Lott, Chancery Clerk

COUNTY FACILITY GROUNDS MAINTENANCE SERVICE

Required Services:

- 1 cutting per week between March and September (35 total)
- Turf mowing, edging, blowing
- Hand or Mechanical removal of weeds
- Debris pick up to include trash, limbs, clippings etc. (Proper disposal required)
- Sidewalks and parking areas will have clippings and debris removed once cutting has been completed.

Location:			Cut Cost per Location (1 Cut)	Required Yearly Service (35 Cuts)		
	1.	Administration Build.	\$105.00	\$2445.00		
	2.	Circuit Court	\$203.60	\$4497.60		
	3.	Citizens Service	\$100.00	\$2724.00		
	4.	Depart. of Human Service	Depart. of Human Services \$134.00			
	5.	Health Depart./ Election	Comm. \$54.25	\$1224.00		
	6.	Historic Courthouse (Sq	uare) \$170.00	\$4924.40		
	7.	Justice Court	\$168.00	\$4169.25		
	8.	Youth Service	\$74.00	\$1664.75		
	9.	Emergency Managemen	at \$441.00	\$7498.00		
	10.	South Annex (Madison)	\$181.00	\$5190.00		
			(1 Cut)	(6 Cuts)		
	11.	Emergency Managemen	t (Tractor) \$910.00	\$5500.00		
	тот	AL		\$43,036.00		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/16/2020 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 Liberty Mutual Insur	ance	CONTACT NAME;				
PO Box 188065 Fairfield, OH 45018		PHONE (A/C. No. Ext):	800-962-7132	FAX (A/C, No):	800-845-3666	
raillield, OFI 45016		E-MAIL ADDRESS: BusinessService@LibertyMutual.com				
			NAIC#			
		INSURER A:	24082			
INSURED		INSURER B:				
Winn Management LLC 113 Bridge Ark Circle		INSURER C:				
Canton MS 39046		INSURER D:				
		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 55092982		REVISION I	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	NSR TYPE OF INSURANCE		ADDL SUBR POLICY NUMBER (MM/DD/YY		POLICY EFF	POLICY EXP	LIMITS		
Α	✓	COMMERCIAL GENERAL LIABILITY			BLS61283521	4/14/2020	4/14/2021	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
								MED EXP (Any one person)	\$ 15,000
				ļ				PERSONAL & ADV INJURY	\$1,000,000
	GEN	L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	✓	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
	AU1	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	s
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY	1					BODILY INJURY (Per accident)	\$
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	s
		DED RETENTION \$							\$
	WOF AND	KERS COMPENSATION EMPLOYERS' LIABILITY Y/N						PER OTH- STATUTE ER	
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A					E.L. EACH ACCIDENT	s	
l i	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$
<u> </u>	DES	CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									
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CERTIFICATE HOLDER	CANCELLATION
Winn Management LLC 113 Bridge Ark Circle Canton MS 39045	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
i	Connie Birch

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