

300 E. Locust Street, Ste. 100 Des Moines, Iowa 50309 515-244-0021

#### MEMORANDUM

**DATE**: June 12, 2020

**TO:** MWA Board Members

CC: MWA Staff

FROM: Michael McCoy, Executive Director

**RE:** Wednesday, June 17, 2020 Board Meeting

This month's board meeting is scheduled for Wednesday, June 17, 2020 at 5:45 pm in the Board Room at Central Office (300 East Locust Street, Ste. 100, Des Moines, Iowa). If you have questions about any items listed below, please call me at 323-6535 (w) or 707-3869 (c). I look forward to seeing you on Wednesday.

The following numbered items correspond with the number of the item on the agenda:

#### **Consent Agenda Items for Approval**

8. Resolution 06-20-03 – Approval of Roll Off Truck Purchase for Metro Waste Authority - Action for Approval

The primary use of the roll off truck is for collection of commodities such as cardboard, metal, and wood, collected through our recycling programs. Four bids were received from three vendors. The recommended vendor for purchase is Harrison Truck Centers. Staff recommends approval.

9. Resolution 06-20-04 – Approval of Fleet Vehicle Purchase for Metro Waste Authority - Action for Approval

The 2020 Chevrolet Traverse will replace the 2014 Jeep Cherokee and will be located at Central Office. Karl Chevrolet is the recommended vendor with State of lowa pricing in the amount of \$32,439.40. The vehicle is a budgeted item in the FY 19/20 budget. Staff recommends approval.

#### Regular Agenda Items for Approval

10. Resolution 06-20-05 – Approval of P-61 Cold Storage Building 1 Retrofit Request for Proposal – Action Item

Three bids were received for P-61 Cold Storage Building 1 Retrofit. Woodruff Construction is the recommended contractor with the lowest most responsive bid of \$827,300. The proposal is under budget, and funds are available in the Metro Park East Capital Expense Fund. Staff recommends approval.



Board of Directors 2020 Calendar Year

> Mark Holm Chair

Ron Pogge Vice-Chair

Dean O'Connor Altoona

> Mark Holm Ankeny

Wes Enos Bondurant

John Edwards Clive

Joe Gatto Des Moines

Steve Allen Elkhart

David Gisch Grimes

Tom Cope Johnston

Bill Roberts Mitchellville

> Ed Kuhl Norwalk

Dean Cooper Pleasant Hill

Rob Sarchet Polk City

Tom Hockensmith Polk County

> Gerald Lane Runnells

Ron Pogge Urbandale

Steve Gaer West Des Moines

Threase Harms Windsor Heights

Michael McCoy Executive Director

### Metro Waste Authority Board Meeting June 17, 2020

MWA Central Office 300 E. Locust Street, Ste. 100, Des Moines, Iowa 50309 5:45 pm

### **Agenda**

- 1. Call to Order, Roll Call
- 2. Approval of Regular Agenda
- 3. Public Forum

#### **CONSENT AGENDA**

The following are routine items enacted by one roll call vote without separate discussion unless someone, Board or Public, requests an item be removed for consideration:

- 4. Approval of Consent Agenda Items 4 through 9
- Consideration of Minutes May 20, 2020, Metro Waste Authority Board Meeting

   Action for Approval
- Resolution 06-20-01 Consideration of April 2020, Financial Statements Action to Receive and File
- Resolution 06-20-02 Consideration of May 2020, Monthly Expenditures Action for Approval
- 8. Resolution 06-20-03 Approval of Roll Off Truck Purchase for Metro Waste Authority Action for Approval
- 9. Resolution 06-20-04 Approval of Fleet Vehicle for Metro Waste Authority Action for Approval

#### **END CONSENT AGENDA**

#### Regular Agenda Items for Approval - Item 10

- Resolution 06-20-05 Approval of P-61 Cold Storage Building 1 Retrofit Request for Proposal – Action Item
- 11. Director's Report
- 12. Chair's Report
- 13. General Board Discussion and Other Business
- 14. Closed Session Meeting as provided in Iowa Code 21.5.1.j. To discuss the purchase or sale of particular real estate only where premature disclosure could be reasonably expected to increase the price the governmental body would have to pay for that property or reduce the price the governmental body would receive for that property. The minutes and the audio recording of a



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MWA Board Meeting June 17, 2020 session closed under this paragraph shall be available for public examination when the transaction discussed is completed.

- 15. Correspondence
- 16. Adjournment

**July Executive/Finance Meeting:** July 1, 2020, MWA Central Office, 300 E. Locust Street, Ste 100, Des Moines, Iowa 50309, 12:00 pm.

**July Board Meeting:** July 15, 2020, MWA Central Office, 300 E. Locust Street, Ste. 100, Des Moines, Iowa 50309, 5:45 pm.



300 E. Locust Street, Ste. 100 Des Moines, Iowa 50309 515-244-0021

#### May 20, 2020 Unofficial Metro Waste Authority Board Meeting Minutes

#### 1. Call to Order

The meeting was held at Metro Waste Authority's Central Office. Mark Holm, chair, called the May 20, 2020, Metro Waste Authority Board Meeting to order at 5:46 pm. A quorum was present. This meeting was primarily conducted electronically due to federal and state government recommendations in response to COVID-19 pandemic conditions, and Governor Reynold's Proclamation of Disaster Emergency dated March 19, 2020.

#### Roll Call – MWA Board Representatives/Alternates in Attendance

Mark Holm, Ankeny Wes Enos, Bondurant

John Edwards, Clive

Joe Gatto, Des Moines

David Gisch, Grimes

Tom Cope, Johnston

Bill Roberts, Mitchellville

Ed Kuhl, Norwalk

Dean Cooper, Pleasant Hill

Rob Sarchet, Polk City

Tom Hockensmith, Polk County

Gerald Lane. Runnells

Ron Pogge, Urbandale

Bret Hodne, West Des Moines

Threase Harms, Windsor Heights

#### 2. <u>Approval of Regular Agenda</u>

Moved by Clive, seconded by Polk County, to approve the May 20, 2020, board meeting agenda as presented. Motion carried unanimously by voice vote.

#### 3. Public Forum

There were no requests to address the Board.

#### **CONSENT AGENDA**

The following are routine items enacted by one roll call vote without separate discussion unless someone, Board or Public, requests that an item be removed for consideration:

#### 4. Approval of Consent Agenda – Items 4 through 11

Moved by Clive, seconded by Des Moines, to approve the Consent Agenda, items 4 through 11. Motion carried unanimously by voice vote.

- 5. Consideration of Minutes of April 15, 2020, Metro Waste Authority Board Meeting Action for Approval
- 6. Resolution 05-20-01 Consideration of March 2020, Financial Statements Action to Receive and File

- 7. Resolution 05-20-02 Consideration of April 2020, Monthly Expenditures Action for Approval
- 8. Resolution 05-20-03 Approval of Municipal Solid Waste Extension with Ankeny Sanitation, Inc. Action for Approval
- 9. Resolution 05-20-04 Approval of Municipal Solid Waste Extension with Waste Management Action for Approval
- 10. Resolution 05-20-05 Approval of Municipal Solid Waste Extension with Waste Connections Action for Approval
- 11. Resolution 05-20-06 Approval of Tire Collection Contract with Waste Connections Action for Approval

#### **END CONSENT AGENDA**

Regular Agenda Items for Approval - Items 12 through 15

12. Resolution 05-20-07 – Approval to Amend the Ankeny Sanitation, Inc. Municipal Solid Waste to Add the Cities of Clive, Grimes, Johnston, and Polk City to the Contract – Action Item

Moved by Clive, seconded by Bondurant, to approve Resolution 05-20-07. Motion carried unanimously by voice vote.

Leslie Irlbeck, deputy director, reported an amendment to the Ankeny Sanitation, Inc. Municipal Solid Waste Contract, which includes the addition of Clive, Grimes, Johnston, and Polk City to the contract. This is the first step in Metro Waste Authority's plan to bundle the collection of solid waste, recycling, and yard waste in the future.

13. Resolution 05-20-08 – Approval of Recommendation of Executive Director's FY

19/20 Performance Review and FY20/21 Salary Adjustment – Action Item

Moved by Polk County, seconded by Des Moines, to approve Resolution 05-20-08.

Motion carried unanimously by voice vote.

Mark Holm, chair, reported a review, using performance-based ratings, was conducted by the Board of Directors to evaluate performance of Executive Director Michael McCoy for FY19/20. Results overwhelmingly indicated that McCoy exceeded Board expectations, and a 4.5% salary increase for FY20/21 was recommended.

14. Resolution 05-20-09 – Approval of Amendment to Ground Lease and Operation Maintenance Agreement for Metropolitan Salt Storage Facility on Metro Waste Authority Property – Action Item

Moved by Clive, seconded by Des Moines, to approve Resolution 05-20-09. Motion carried unanimously by voice vote.

Michael McCoy, executive director, reported Des Moines Public Works (DMPW) is amending the agreement of the Metropolitan Salt Storage Facility on Metro Waste Authority (MWA) property. The original agreement states that if any party were to leave the site, they would have to restore it to its original state. This amendment allows DMPW to leave the building in place and transfer ownership back to MWA. MWA intends to use the building for storage and other programming.

## 15. Resolution 05-20-10 – Approval of P-60 Building Expansion Proposal at Metro Park East Landfill – Action Item

Moved by Clive, seconded by Bondurant, to approve Resolution 05-20-10. Motion carried unanimously by voice vote.

Judi Mendenhall, director of recycling & diversion, reported five bids were received for construction and expansion for the Metro Park East building 4 improvements and relocation of electrical panel. Accurate Commercial Construction is the recommended contractor with the lowest, most responsive total alternate bid of \$528,464.00. The bid is over budget by \$19,494.00; however, funds are available in the Capital Expense budget.

#### 16. Director's Report

Michael McCoy, executive director, reported the preliminary construction budget for the material recovery facility will be finalized this week.

Leslie Irlbeck, deputy director, reported over 1,000 people attended the Metro Park East Landfill self-guided driving tour on Saturday, May 16<sup>th</sup>.

The June executive finance meeting will be held on June 3, 2020, at Central Office (300 E. Locust St. Ste. 100, Des Moines, Iowa) at 12:00 pm.

The June board meeting will be held on June 17, 2020, at Central Office (300 E. Locust Street, Ste. 100, Des Moines, Iowa) at 5:45 pm.

## 17. Chair's Report

No Report.

#### 18. General Board Discussion and Other Business

Polk County shared appreciation for MWA's work with Polk County throughout the financing process of the material recovery facility.

West Des Moines shared appreciation for MWA providing the grounds to house the salt storage building for many metro communities.

19.	Adjournment Meeting adjourned at 6:12 pm.	
	Michael McCov. Executive Director	Mark E. Holm. Chair

# METRO WASTE AUTHORITY BILLS PAID IN May 2020

A TECH  ABC PEST  ABC PEST  ABC WIRE  ACCESS SYSTEMS  ACCESS SYSTEMS  AIR FILTER SALES  AIR MACH  A-LINE IRON  AMERICAN SECURITY  ANKENY AUTO ELECTRIC  ANKENY SANITATION  ARSENAULT  ARSENAULT  ARSENAULT  ASPEN WASTE  ASPEN WASTE  AUREON  BENJAMIN MORETZ  BOMGAARS  BOOT BARN  BRICK GENTRY  ARSENAUL  BRICK GENTRY  BRICK GENTRY  BRICK GENTRY  ARSENAULT  ABOUN  BRICK GENTRY  BRICK GENTRY  ARSENAULT  ARSENAULT  ACCESS SYSTEMS  ARSENAULT  ARS
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CENTRAL HAUTER
CENTRAL UNITED 274.49 Life insurance
CHAMPLIN TIRE RECYCLING 6,700.20 Tire processing
CHRISTENSEN DEVELOPMENT 10,000.00 Consulting fees
CITY GARDENS 6,783.75 Site maintenance
CITY OF BONDURANT 105.22 Utilities
CITY OF DES MOINES 50.00 False alarm fee
CITY OF DES MOINES 55,059.22 Lease/leachate hauling
CITY OF GRIMES 13,252.26 Utilities
CITY OF PERRY 5,409.06 Leachate processing
CLEAN HARBORS ENVIRONMENTAL SERVICE 9,712.62 Contract disposal
CONFERENCE TECHNOLOGIES 1,472.22 CO board room
CONSTRUCTION & AGGREGATE PRODUCTS 826.48 Leachate collection
CONTROLLED ACCESS 682.65 Site maintenance
COPY SYSTEMS 31.70 Office machine repairs
CP MANUFACTURING 150,000.00 Equipment
CPI 1,000.00 New phone system
CRYSTAL CLEAR 38.75 Office supplies
CSG FORTE 155.00 Computer supplies/maintenance
DATASHIELD CORP 350.46 Recycling expense
DES MOINES MOBILE WASH 1,785.00 Preventive maintenance

DES MOINES REGISTER	350.88	Advertising
DES MOINES SOLID WASTE	184,239.65	Yard waste collection
DES MOINES WATER WORKS	459.49	Utilities
DIAM PEST	534.00	Pest control
DULTMEIER SALES		Leachate well maintenance
ELLIOTT EQUIPMENT	226.28	Front loader truck
EMSL	506.00	Asbestos testing
ETC GRAPHICS	2,021.00	Signage
EXPRESS LAUNDRY	187.50	Floor mats
FASTENAL	449.96	Health/safety
FERRELLGAS	279.61	Utilities/equipment fuel
FINISHING TOUCHEZ	113.75	Site maintenance
FLUID COMPONENTS	2,286.60	Parts
FLYNN WRIGHT	22,273.09	Public information/promotion
FORMATION GROUP	7,742.50	Consultation/professional fees
GRAINGER	385.64	Parts/small tools/supplies
HARLAND ACE HARDWARE	26.95	Small tools/supplies
HARRISON COUNTY LANDFILL COMMISSION	306.72	Health/safety
HARRISON TRUCK	189.11	Preventive maintenance
HDR	18,492.01	Engineering services
HEALTHCARE MARKETING MAKEOVERS		Public information/promotion
HEARTLAND CO-OP		Equipment fuel
HEAVY HIGHWAY FRINGE BENEFIT		Medical insurance
HERRCO	400.00	Wind latches
HIEMSTRA TRUCKING	27,450.00	Leachate processing
HILLTOP TIRE		Equipment maintenance
HIRE QUALITY SOLUTIONS		Temporary labor
HOLM'S		Parts/labor
HOME DEPOT		Office supplies
HOUSBY HEAVY EQUIPMENT		Parts/labor/preventive maintenance
HOUSBY MACK		Parts/labor/preventive maintenance
IOWA DES MOINES SUPPLY		Janitorial supplies
IOWA FIRE EQUIPMENT		Parts/labor/preventive maintenance
IOWA LABORERS' DISTRICT COUNCIL		Parts/labor/preventive maintenance
IOWA LABORERS' EDUCATION		Parts/labor/preventive maintenance
IOWA METHODIST		DOTpx/workers' comp
IOWA PHYSICIANS		DOTpx/workers' comp
IOWA PUMP		Leachate collection
IPERS		Employer's share of IPERS
J A KING		Site maintenance/parts
		Mileage/expenses
JACQUELINE WILL		Health/safety
JANET BISHOP		
JD WELDING		Parts/labor
JETCO		Leachate maintenance/collection
JIM HAWK TRUCK		Equipment/parts/labor
JOHNSTONE SUPPLY		Site maintenance
KABEL BUSINESS SERVICES		Employee benefit expense
KABEL BUSINESS SERVICES		Service fees
KAL	1,847.27	Yard waste collection

KEY COOPERATIVE		Equipment fuel
KEYSTONE		Building services
KOCH BROTHERS		Office supplies
KYLE FISCHER	105.93	Dremel tool reimbursement
LARRY'S WINDOW	227.50	Building services
LINK HYDRAULIC	1,637.50	Parts
LUBE-TECH	4,898.76	Equipment fuel
MACQUEEN	606.76	Parts
MANAGEMENT PROFESSIONALS	3,528.78	Property management fee/site maintenance
MARSDEN	764.26	Janitorial services
MCMASTER-CARR	226.41	Leachate maintenance/collection
MENARDS	180.61	Supplies
MHC KENWORTH	11,642.33	Parts/labor/preventive maintenance
MID COUNTRY MACHINERY	136,843.00	Water truck
MIDAMERICA RECYCLING	62,963.64	Curbside processing expense
MIDAMERICAN ENERGY	14,081.90	Utilities
MIDLAND POWER COOPERATIVE	1,040.58	Utilities
MIDWEST FIRE EXTINGUISHER	87.30	Health/safety
MIDWEST OFFICE TECHNOLOGY		Office printing
MIDWEST WHEEL COMPANIES		Preventive maintenance
MMC CONTRACTORS	7,483.27	Bldg repairs/site maintenance
MOTOR PARTS		Parts/small tools/supplies
MURPHY TRACTOR		Preventive maintenance
NATIONAL ELEVATOR INSPECTION	2050	Elevator inspection
NATIONWIDE OFFICE CLEANERS		Janitorial services
ODORGON	813.95	
O'HALLORAN		Parts/labor/preventive maintenance
ORBIS		Curbside cart expense/repair
O'REILLY		Parts/small tools/supplies
OTIS		Elevator inspection
PABCO		Yard waste bags
PARTSMASTER		Shop tools/supplies
PER MAR		Security
PETERBILT		Parts/labor/preventive maintenance
PETERSON CONTRACTORS		Contracted fly ash hauler
POMP'S TIRE		Tire/track repairs
		12 15
POWERSOURGE TRANSPORTATION		Supplies  Equipment root
POWERSOURCE TRANSPORTATION		Equipment rent
PRAXAIR		Welding supplies
PREMIER ELECTRIC		Building services
PREMIER OFFICE		Office printing
PROSPERITY JANITORIAL	landar and a second	Janitorial services
PURCELL PRINTING		Printing
QED ENVIRONMENTAL SYSTEMS		Leachate maintenance/collection
QUICK FUEL		Equipment fuel
QUICK OIL		Equipment fuel
REG CO		Refund
REHRIG		Curbside cart expense/repair
RELIANCE STANDARD	3,084.31	Insurance premium

RSM US 2,283.44 Computer supplies/maintenance/fees RSM US LLP 18,986.80 Consulting/professional service/dues SAFETY-KLEEN 328.44 Supplies 920.00 Equipment rent SCHAEFER HAULING **SCHIMBERG** 650.70 Parts SCHRODER TRANSPORTATION 1,194.30 Equipment maintenance SCOTT NIKKEL TRUCKING 536.09 Site maintenance SCS FIELD SERVICES 404.00 Engineering services **SENECA TANK** 46,851.05 Parts 7,183.22 Yard bag storage/distribution SINK PAPER 31,375.12 Employer's share of FICA SOCIAL SECURITY ADMINISTRATION SOUTHEAST POLK COMM SCHOOL 5,865.86 Host fees **SPINUTECH** 145.00 Website/social media 322.50 Site maintenance STENSLAND SOD 1,370.04 Vehicle/maintenance STEW HANSEN STRAUSS SECURITY SOLUTIONS 64.42 Security 11.50 Mileage/expenses SUSAN NIELSEN SYN-TECH 182.25 Equipment fuel **TESTAMERICA** 3,637.70 Environmental monitoring THORPE WATER DEVELOPMENT 4,092.80 Site maintenance **TIFCO** 1,199.96 Parts/small tools/supplies **TOMPKINS** 27.62 Parts **TOTALFUNDS** 500.00 Postage TREASURER STATE OF IOWA 30,323.12 Sales tax **TRUENORTH** 2,500.00 Dues/subscription/fee 201.36 Mailing expense **UPS** URBANDALE PUBLIC WORKS 54,114.98 Yard waste collection US BANK LOAN PAYMENT 62,242.64 MNTS loan payment 1,293.60 Parts/labor/preventive maintenance **VAN WALL** 9,079.24 Employer's share deferred compensation VANTAGEPOINT TRANSFER AGENTS **VERIZON WIRELESS** 778.98 Computer supplies/maintenance 278.34 Parts **VERMEER** 131,439.49 Waste collection/tire process WASTE CONNECTIONS 610,634.74 Curbside/drop off/waste collection WASTE MANAGEMENT 640.00 Building services WASTE SOLUTIONS 37,709.17 Curbside cart expense/repair WASTEQUIP **WELLS FARGO** 8.54 Building services 5,239.37 Credit card payment for misc office and travel expenses **WEST BANK** 206.84 Fees **WEST BANK** 1,221.50 Fuel WEX 195.00 Site maintenance WIGES OUTDOOR 65.20 Utilities **XENIA** 22,055.71 Part/labor/preventive maintenance/subscription **ZIEGLER** 1,019.85 Dues/subscription/fee **ZONAR** 2,464,701.29 **Grand Total** 

The MWA Executive Director and the Director of Finance certify that the above MWA bills paid are properly due and have been made in accordance with the operating and expenditure processes established by MWA.

Michael McCoy, Executive Director

Joel Etienne, Finance Administrator

## Metro Waste Authority Board Monthly Board Meeting June 17, 2020

#### **CONSENT AGENDA ITEM 8**

#### ITEM:

Approval of Roll Off Truck Purchase for Metro Waste Authority.

#### SUMMARY:

Primary use of this truck is intended for the recycling program, which includes collection of commodities such as cardboard, metal, and wood.

Four bids were received from three vendors for a Roll Off Truck in March of 2020. The proposals were evaluated by MWA staff.

#### **DISCUSSION POINTS:**

The following vendors submitted bids:

NameManufacturerHarrison Truck CentersFreightlinerMHCKenworthHarrison Truck CentersWestern StarElliott Equipment Co.Freightliner

Staff used a scoring system that included the following criteria:

- Conformity to Bid Specifications
- Machine Job Performance
- Warranty Provided
- Bid Price
- Parts and Service Provided
- Previous Experience with Bidder
- Machine Delivery

Harrison Truck Centers (Freightliner) received the highest score. Although Elliott Equipment Co. provided lowest bid, the equipment did not meet the required specifications for the engine or transmission.

#### STAFF RECOMMENDATION:

Staff recommends approval of the proposal from Harrison Truck Centers-Freightliner to be awarded the contract for the Roll Off Truck.

#### **BUDGET REQUIREMENTS:**

The proposed pricing, including the extended warranty of \$183,963, is under the budgeted amount of \$188,785.

#### **ATTACHMENTS:**

Attachment A – Cost comparison Attachment B – Bid evaluation Attachment C – Freightliner Quote

#### **CONTACTS:**

Judi Mendenhall, Director of Recycling and Diversion, 515.333.4430

**Attachment A**Bid Evaluation

	Conformity To Bid Specification s	Machine Job Performance	Warranty Provided	Lowest Bid Price	Parts & Service Provided	Previous Experience with Bidder	Machine Delivery	TOTAL	AVERAGE
Maximum Points	60	60	10	30	10	10	30	210	
Harrison Trk Ctr. 114SD AC DS JM	54 50 55	54 50 57	8 8 10	27 25 28	10 8 10	10 10 10	28 20 28	191 171 198	187
MHC Kenworth AC DS JM	48 50 50	51 45 50	8 9 9	24 20 27	9 8 10	10 10 10	29 25 29	179 167 185	177
Harrison Trk Ctr WS 4700 AC DS JM	54 50 55	49 50 50	8 8 10	25 20 20	9 8 8	10 10 10	28 20 28	183 166 181	177
Elliott -Freightliner AC DS JM	24 30 25	39 30 25	8 7 8	28 20 30	7 8 5	7 6 5	30 20 30	143 121 128	131

# Attachment B Cost Comparison

Vendor	Truck Price	With Extended Warranty	
Elliott-Freightliner	\$154,655	\$168,692	
Harrison Truck Sales-Freightliner	\$171,082	\$183,357	
MHC-Kenworth	\$186,095	\$193,200	
Harrison Truck Sales-Western Star	\$182,133	\$195,014	

#### PART I - GENERAL

#### 1. INTENT

It is the intention of these specifications to cover the furnishing and delivery to the purchaser one (1) Roll off truck meeting the requirements set forth hereinafter. It shall be of such design and construction as to meet the general and special requirements. Any parts or units not specifically mentioned which are necessary to form a complete working unit shall be furnished by the successful supplier.

#### 2. USE

The Roll off truck will be operated by Metro Waste Authority (MWA) servicing containers located within the MWA service area. The truck will be operating on interstate and state and local highways.

#### PART II - DETAILED TECHNICAL PROVISIONS

#### 1. GENERAL DESCRIPTION

The unit shall be a new, current year manufacture, roll off hoist, and chassis. Each shall be the manufacturer's latest design and production, complete, installed, serviced, ready for work, and include all standard equipment. The complete unit must meet Federal and State of Iowa air quality, and OSHA safety regulations.

#### 2. HOIST SIZE

- a. Equipped per following specifications, hoist shall be compatible with Galbreath OR (over the rail) 60,000-75,000 lb. winch cable system or equivalent.
- b. Lift capacity shall be 60,000 lbs (min.), including the container.
- c. Hoist shall be compatible with containers used with in MWA service area and at Metro Park East Landfill.

#### 3. HOIST FRAME

- a. Accommodates 19' to 24' bodies or containers
- b. Cab to trunion requirement is 176" to 194" with 194" being the optimum CT.
- c. Clear frame requirement is 241".
- d. Hoist up alarm
- e. DOT locking strap system

#### 4. HOIST HYDRAULICS

- a. Hydraulic pump shall be of sufficient design as hoist manufacturers recommend. If optional, shall be provided with the largest capacity and rated performance available for the hoist.
- b. Shall have thirty (30) gallon (min.) hydraulic tank with replaceable filter and fill the screen.
- c. Hydraulic lines shall be properly secured and covered to provide maximum protection.
- d. Unit shall have double-acting independent—working cylinders with individual sheaves and heavy-duty double-acting lift cylinders.
- e. Dual controls shall be located inside and outside of the unit. Inside controls shall be air operated.
- f. Unit shall have a pressure gauge mounted at the control valve.

#### 5. CAB

- Shall be standard (or offset) conventional with tilt front engine access and shall be isolation mounted and sound insulated with lockable cab doors. Shall include all standard items.
- b. Standard trim insulating cab interior package, to include a headliner and armrests on doors.
- c. The cab shall be of all-weather construction with heater, air conditioner, defroster, and dome light.
- d. Driver seat shall be air-suspended High back Bostrom Talladega 915 all-vinyl and an all-vinyl passenger seat with three-point seat belts or equivalent.
- e. Floor mats shall cover entire floor in rubber or vinyl.

  Safety tinted windshield, side, and rear windows; rear view mirror, windshield wipers with washer (intermittent feature)

  Aero mirror, body colored, RH & LH Heated and motor w/integrated convex mirror.
- f. AM/FM radio with roof-mounted antenna.
- g. Provide for and install additional 12-volt two-way radio and antenna supplied by MWA.

#### 6. CHASSIS

- a. Chassis shall be a conventional tandem truck with 64,000# GVWR (min.).
- b. Frame rails shall be 11.81" x 4.13" x .437" 110,000 psi steel drop section, combined rating w/inside channel reinforcement Section Modulus 29.42 cu in/RBM 4,260,000 in lbs per rail.
- c. Shall include 1/4" steel channel, inside, frame reinforcement.
- d. Wheelbase and platform length shall be as required to fit the hoist as specified.
- e. Heavy-duty painted steel channel front bumper with the heavy-duty towing package.
- f. Front tow hooks attached to the frame.

#### 7. ENGINE

- a. Shall be diesel powered 450 peak horsepower (minimum) and 1650 ft-lb peak torque.
- b. The engine shall be equipped with light and audible tone safety warning devices for high temperature, low coolant level, and low oil pressure.
- c. Cold weather starting device shall be mounted on the unit for aid in starting during cold weather. The engine shall be equipped with an electric integral engine coolant heater for 110 A.C. and a fuel filter heater or fuel system heater.
- d. The engine shall be equipped with an air cleaner with precleaner and an hour service meter.
- e. Single vertical exhaust cab mounted w/turned end & heat shield.
- f. Equipped with an oil change system, quick service. Equipped with pressurized oil sample port to allow live oil sampling. (Compatible with Caterpillar part #8C3446, #8C3447, or #8C3451).
- g. Heavy duty rock guard skid plate made out of 3/8" steel to protect the oil pan

#### 8. TRANSMISSION

- a. The transmission shall be automatic transmission. Allowable model include Allison 4700 RDS.
- b. Shall include a deep reduction first and a two-speed reverse.
- c. Transmission and PTO protected by 3/8" plate steel "belly pans".

#### 9. STEERING

- Shall have integral power steering with the adjustable steering column.
- b. Unit shall be set up with the shortest turning radius available. Turning radius will be considered when evaluating this bid. Please supply turning radius information.

#### 10. AXLES

- a. 20,000# (minimum) front axle with heavy-duty multi-leaf suspension.
- b. 46,000# (minimum) rear axles with the heavy-duty airbag suspension system.
- c. Power divider with lockout with warning light or buzzer including in-cab manual air valve.
- d. Shall have an interaxle lock with **locking differential** on both axles.
- e. Axle gear ratio to be determined based on transmission manufacturer recommendations. (70 mph)

#### 11. BRAKES

- a. Disc brakes
- b. Heavy-duty dual air brake system.
- c. All components to be Bendix where possible.
- d. Heated AD-IS air dryer.
- e. Four air-tank reservoirs.
- f. Shall include all standard items and any optional upgrade features.
- g. Automatic slack adjusters.

#### 12. TIRES

- a. Front tires shall be 315/80R22.5 tubeless radials.
- b. Rear tires shall be 11R22.5 tubeless radials.
- c. Tread pattern shall be suitable for highway conditions. .
- d. Tires shall be 16 ply (min.).

#### 13. COOLING SYSTEM

- The radiator shall be a pressurized liquid cooling system with a minimum of 1400 square inch core with a maximum of 16 fins per inch.
- b. Radiator shall be filled with manufacturer's approved extended life anti-freeze solution that provides protection to at least -30 degrees Fahrenheit.
- c. Heavy duty air flow 2-speed is acceptable.
- d. Fan shall include available options to turn on during stationary and PTO operation.

#### 14. HYDRAULIC SYSTEM

- a. Hydraulic pump shall have sufficient pump capacity and provide oil cooling to allow the truck to be normally operated in an ambient temperature of 120 degrees Fahrenheit.
- b. The unit shall be equipped with a sight gauge for checking the hydraulic fluid level.

#### 15. ELECTRICAL

- a. The complete electrical system shall be twelve (12) volt with a one-hundred (100)- amp (min.) alternator and heavy duty batteries.
- b. Overload protection shall be by circuit breakers.
- c. Equipped with an emergency-start receptacle assembly (Caterpillar part #8S2633). Mounted near battery.
- d. Electrical connections shall be waterproof (sprayed with Glyptol, or equal.

#### 16. INSTRUMENTATION

- a. Unit shall be equipped with ALL standard and ALL optional gauges and warning devices; including at least: engine coolant temperature, engine oil pressure, fuel, electric voltage, air pressure, and electric hour meter.
- b. Unit shall be equipped with air-cleaner service indicator.

#### 17. TARPING SYSTEM

- Tarping system shall be an O'Brian Tarper System or equivalent. A system most compatible to truck and roll off containers.
- b. Operable from outside of cab of truck.

#### 18. PAINTING

- a. All portions of the Roll off truck that would normally be painted shall be painted in accordance with good commercial practice. The cab shall be painted white.
- b. Paint samples shall be provided by the vendor prior to painting.

#### 19. FIRE EXTINGUISHER SYSTEM

- a. The unit shall be provided with a twenty (20) pound dry chemical type fire extinguisher mounted in close proximity to the cab.
- b. The system shall be capable of being serviced locally.

#### 20. OPERATING LIGHTS

- The unit shall have LED headlights and at least two (2) rear LED lights mounted on top of the cab.
- b. Lights shall be an adequate size for night operation and provided with adequate protection against physical damage.
- c. Additional lights/signals as required by DOT.
- d. ALL lights shall be LED wherever available.

#### 21. PERIODIC MAINTENANCE CHART

Unit shall have permanently affixed charts/diagrams that describe the machine periodic maintenance locations and requirements.

#### 22. <u>ADDITIONAL MACHINE REQUIREMENTS</u>

Unit shall be equipped with all standard equipment and shall include: backup alarm, warning horns, and environmental fluid drains.

Shall have mud flap hangers w/mud flaps for the rear axle.

#### 23. BID SUBMITTAL

Submit the proposal on the furnished bid forms.

Bids will be received at the Metro Household Hazardous Waste Office of MWA up to, but no later than Thursday, March 12, 2020 in accordance with the specifications attached and the other terms and conditions set forth herein at the below address or by e-mail.

Metro Waste Authority
Attn: Judi Mendenhall-Director of Recycling and Diversion
1105 Prairie Dr. SW
Bondurant, IA 50035
jme@mwatoday.com

#### Gentlemen:

In response the request for bid, I/we hereby propose to sell one (1) Roll off truck to be delivered to Metro Northwest Transfer Station. The Roll off truck will meet or exceed specifications labeled "Roll off truck Specifications" in the attached literature, as follows:

### **OUTRIGHT PURCHASE PRICE PROPOSAL**

Item 1.	ONE FREIGHTLINER 114SD (Chassis Manufacturer's Model Name) Complete and Delivered	.\$ 114,240
Item 2.	ONE GALBREATH U5-0R-194 (Hoist Manufacturer's Model Name) Complete and Installed	\$ 56,236
Item 3.	Total Price (Item 1 PLUS Item 2)	\$ <u>170,476</u>
Item 4.	Standard Warranty	\$0
Item 5.	Delivery/ Training	\$
Item 6.	<b>Total Cost</b> (Items 3 + 4 + 5)	\$_170,476

Item 7.	Extended Coverage Contract\$\frac{12,881}{}
	TERMS: 84 Months and/or 150,000 Hours MILES
*TRANSI	MISSION AND TOWING COVERAGE 5 YEAR / UNLIMITED MILES
Item 8.	<b>Total Cost</b> (Item 6 + Item 7)\$\(\frac{183,357}{}\)
ltem 9.	The date of delivery of the Roll off truck shall be mutually agreed upon after the successful bidder is notified.
	Estimated delivery time upon notice to proceed (in days)
	120 - 180 Days *PENDING DATE OF ORDER APPROVAL*
Item 10.	Turning radius 46' (+/- 1.5')
Item 11.	Any exceptions to the specifications labeled "Roll off truck Specifications" are noted on Addendum A (Attach separate sheets as needed).
Item 12.	Manufacturers specification sheets and other pertinent information shall be attached.
Item 13.	The standard warranty and/or extended coverage contract, are as shown in the warranties and/or by separate letter(s) attached.
Item 14.	The above prices <b>DO NOT</b> include Federal, State or local sales taxes.
Item 15.	This proposal shall remain valid for sixty (60) days.

515.967.3500

Bidder's Phone Number

HARRISON TRUCK CENTERS

Bidder's Name

3601 ADVENTURELAND DR.

ALTOONA, IA 50009

Bidder's Address

By:\_\_JORDAN G. MILLER

(Authorized Representative)

TRUCK SALES

(Title)

03.10.2020

Date

# METRO WASTE AUTHORITY ADDENDUM "A" EXCEPTIONS TO SPECIFICATION

SPECIFICATION	NO EXCEPTIONS	EXCEPTIONS
GENERAL DESCRIPTION		
HOIST SIZE		
HOIST FRAME		
HOIST HYDRAULICS		
CHASSIS	**	BRIGHT FINISHED MIRRORS in lieu of BODY COLOR MIRRORS
ENGINE		
TRANSMISSION		
STEERING		5
AXLES		
BRAKES		
TIRES		

# METRO WASTE AUTHORITY ADDENDUM "A" EXCEPTIONS TO SPECIFICATION

COOLING SYSTEM		
HYDRAULIC SYSTEM		
ELECTRICAL		JUMP START POST NEXT TO STARTER
INSTRUMENTATION		
TARPING SYSTEM		
PAINTING		
FIRE EXTINGUSIHER SYSTEM		
OPERATING LIGHTS	•	HALOGEN HEADLIGHTS in lieu of LED HEADLIGHTS
OTHER		
	•	
	ú	

Attach additional sheets as necessary.

# Metro Waste Authority Board Monthly Board Meeting June 17, 2020

#### **CONSENT AGENDA ITEM 9**

#### ITEM:

Approval of 2020 Chevrolet Traverse Purchase from Karl Chevrolet for Metro Waste Authority.

#### **SUMMARY:**

The 2020 Chevrolet Traverse will replace the 2014 Jeep Cherokee and will be located at Central Office. Karl Chevrolet is the recommended vendor with State of Iowa pricing in the amount of \$32,439.40. A copy of the vehicle quote is included in the packet.

#### STAFF RECOMMENDATION:

Staff recommends approval of Traverse purchase from Karl Chevrolet for Metro Waste Authority.

#### **BUDGET REQUIREMENTS:**

The vehicle is a budgeted item in the FY 19/20 budget. The state bid price of \$32,439.40 is below the budgeted amount of \$37,703.00. The funds are available in the Capital Equipment Fund.

#### **ATTACHMENTS:**

Karl Chevrolet Quote

#### **CONTACT:**

Brian Krueger, Interim Disposal Operations Manager, 515.333.4447

Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather



KARL Chevrolet is proud to be your #1 Government Chevrolet Vehicle Dealer in Iowa for several years in a row. We are the only Chevrolet Dealer in Iowa to provide you a full time staff dedicated solely to government entities and their needs. We can assist you with all of your vehicle needs to include "turn-key" solutions and custom upfitting, saving you time and money with our own Karl Emergency Vehicles. Thank you for the opportunity to earn your business.



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather (✓ Complete)

#### **Quote Worksheet**

		MSRP
Base Price		\$41,100.00
Dest Charge		\$1,195.00
Total Options		\$40.00
	Subtotal	\$42,335.00
Govt and Karl Discount		(\$7,035.00)
	Subtotal Pre-Tax Adjustments	(\$7,035.00)
Less Customer Discount		(\$2,860.60)
	Subtotal Discount	(\$2,860.60)
Trade-In		\$0.00
Excluded from Sales Tax	Subtotal Trade-In	\$0.00
	Taxable Price	\$32,439.40
Sales Tax		\$0.00
	Subtotal Taxes	\$0.00
	Subtotal Post-Tax Adjustments	\$0.00
	Total Sales Price	\$32,439.40

#### Comments:

Government Agencies are allowed 20 days from date of delivery for balance to be paid in full. There will be a \$5.00 per calendar day after 20 days assessed to the account until payment received in full by Karl Chevrolet. By signing below you accept these terms as well as the quote in general.

Dealer Signature / Date	Customer Signature / Date

At the user's request, prices for this vehicle have been formulated on the basis of Initial Pricing for the vehicle, however GM cannot guarantee that Initial Pricing is available. This document contains information considered Confidential between GM and its Clients uniquely. The information provided is not intended for public disclosure. Prices, specifications, and availability are subject to change without notice, and do not include certain fees, taxes and charges that may be required by law or vary by manufacturer or region. Performance figures are guidelines only, and actual performance may vary. Photos may not represent actual vehicles or exact configurations. Content based on report preparer's input is subject to the accuracy of the input provided.

Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

#### Window Sticker

#### **SUMMARY**

[Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather

MSRP:\$41,100.00

Interior: Jet Black, Leather-appointed seat trim

Exterior 1:Summit White

Exterior 2:No color has been selected.

Engine, 3.6L V6, SIDI, VVT

Transmission, 9-speed automatic

OPTIONS
---------

CODE	MODEL	MSRP
1NW56	[Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather	\$41,100.00
	OPTIONS	
3LT	LT Leather Preferred Equipment Group	\$0.00
ABE	Seating, 7-passenger (2-2-3 seating configuration)	\$0.00
AR9	Seats, front bucket	\$0.00
FE9	Emissions, Federal requirements	\$0.00
GAZ	Summit White	\$0.00
H0Y	Jet Black, Leather-appointed seat trim	\$0.00
IOS	Audio system, Chevrolet Infotainment 3 Plus system	\$0.00
LFY	Engine, 3.6L V6, SIDI, VVT	\$0.00
M3V	Transmission, 9-speed automatic	\$0.00
PXJ	Wheels, 18" (45.7 cm) Bright Silver painted aluminum	\$0.00
QO5	Tires, P255/65R18 all-season blackwall	\$0.00
VK3	License plate front mounting package	\$40.00
	SUBTOTAL	\$41,140.00
	Adjustments Total	\$0.00
	Destination Charge	\$1,195.00
	TOTAL PRICE	\$42,335.00
THE ECONOMY		

#### **FUEL ECONOMY**

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Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

Est City:17 MPG

Est Highway:25 MPG

Est Highway Cruising Range:542.50 mi

At the user's request, prices for this vehicle have been formulated on the basis of Initial Pricing for the vehicle, however GM cannot guarantee that Initial Pricing is available. This document contains information considered Confidential between GM and its Clients uniquely. The information provided is not intended for public disclosure. Prices, specifications, and availability are subject to change without notice, and do not include certain fees, taxes and charges that may be required by law or vary by manufacturer or region. Performance figures are guidelines only, and actual performance may vary. Photos may not represent actual vehicles or exact configurations. Content based on report preparer's input is subject to the accuracy of the input provided.

Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

## **Standard Equipment**

Package	
	Convenience and Driver Confidence Package includes (IOS) Chevrolet Infotainment 3 Plus system with 8" diagonal HD color touchscreen, (UDD) multi-color Driver Information Center display, (KA1) heated front seats, (UG1) Universal Home Remote, (BTV) Remote Start, (TB5) rear power liftgate, (UKC) Lane Change Alert with Side Blind Zone Alert, (UFG) Rear Cross Traffic Alert and (UD7) Rear Park Assist ((IOS) Chevrolet Infotainment 3 Plus system with 8" diagonal HD color touchscreen replaced with (IOT) Chevrolet Infotainment 3 Premium system with connected Navigation and 8" diagonal HD color touchscreen when (CXH) LT Premium Package is ordered.)
	Base 3LT Leather Package (Not available with (CXH) LT Premium Package.)
Mechanical	
	Engine, 3.6L V6, SIDI, VVT (310 hp [232.0 kW] @ 6800 rpm, 266 lb-ft of torque [361 N-m] @ 2800 rpm) (STD)
	Transmission, 9-speed automatic (STD)
	E10 Fuel capable
	Engine control, stop-start system
	Traction Mode Select
	Axle, 3.49 final drive ratio
	Chassis, All-Wheel Drive System (Included and only available with AWD models.)
	Battery, heavy-duty 600 cold-cranking amps
	Alternator, 170 amps
	GVWR, 6160 lbs. (2800 kg)
	Suspension, Ride and Handling
	Steering, power
	Brakes, 4-wheel antilock, 4-wheel disc, 17" front and rear
	Electric Parking Brake
	Capless fuel fill
	Tool kit, road emergency
Exterior	
	Wheels, 18" (45.7 cm) Bright Silver painted aluminum (STD)
	Tires, P255/65R18 all-season blackwall (STD)
	Wheel, spare, 18" (45.7 cm) steel
	Tire, compact spare, T135/70R18, blackwall
	Roof rails, Black

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Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

Exterior	
	Fascia, front body-color
	Moldings, Black bodyside
	Moldings, rocker, Black
	Headlamps, high intensity discharge
	Headlamps, automatic on/off
	Fog lamps, front
	Taillamps, LED
	Mirror caps, body-color
	Mirrors, outside heated power-adjustable manual-folding, body-color, with turn signal indicators
	Glass, deep-tinted
	Wipers, front intermittent with washers
	Wiper, rear intermittent with washer
	Door handles, body-color
	Liftgate, rear power
Entertainment	
	Audio system, Chevrolet Infotainment 3 Plus system 8" diagonal HD color touchscreen, AM/FM stereo, Bluetooth audio streaming for 2 active devices, Apple CarPlay and Android Auto capable, voice recognition, invehicle apps, cloud connected personalization for select infotainment and vehicle settings. Subscription required for enhanced and connected services after trial period (STD)
	SiriusXM Radio
	SiriusXM with 360L Equipped with SiriusXM with 360L. Enjoy a trial subscription of the All Access package for the full 360L experience, with a greater variety of SiriusXM content, a more personalized experience and easier navigation. With the All Access package, you can also enjoy your favorites everywhere you go, with the SiriusXM app, online and at home on compatible connected devices. (IMPORTANT: The SiriusXM radio trial package is not provided on vehicles that are ordered for Fleet Daily Rental ("FDR") use. If you decide to continue service after your trial, the subscription plan you choose will automatically renew thereafter and you will be charged according to your chosen payment method at then-current rates. Fees and taxes apply. See the SiriusXM Customer Agreement at www.siriusxm.com for complete terms and how to cancel. All fees, content, features, and availability are subject to change. GM connected vehicle services vary by vehicle model and require active service plan, working electrical system, cell reception and GPS signal. See onstar.com for details and limitations.)
	4G LTE Wi-Fi Hotspot capable (Terms and limitations apply. See onstar.com or dealer for details.)
	Active Noise Cancellation
Interior	

the user's request, prices for this vehicle have been formulated on the basis of Initial Pricing for the vehicle, however GM cannot guarantee that Initial Pricing is available. This document contains information considered Confidential between GM and its Clients uniquely. The information provided is not intended for public disclosure. Prices, specifications, and availability are subject to change without notice, and do not include certain fees, taxes and charges that may be required by law or vary by manufacturer or region. Performance figures are guidelines only, and actual performance may vary. Photos may not represent actual vehicles or exact configurations. Content based on report preparer's input is subject to the accuracy of the input provided.

Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.

Seats, front bucket (STD)



Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

Interior	
	Seating, 7-passenger (2-2-3 seating configuration) (STD)
	Seat trim, leather-appointed
	Seat adjuster, driver 8-way power
	Seat adjuster, front passenger 6-way power
	Seat adjuster, power driver lumbar control
	Seat adjuster, power passenger lumbar control
	Seats, heated driver and front passenger
	Seats, third row 60/40 split-bench, manual-folding
	Head restraints, front, 2-way adjustable
	Head restraints, second and third row outboard, 2-way manual-folding
	Console, front center with 2 cup holders, covered storage bin with storage and removable tray
	Floor covering, color-keyed carpeting
	Floor mats, color-keyed all rows
	Steering wheel, leather-wrapped, 3-spoke
	Steering column, tilt
	Steering wheel controls, mounted controls for audio, phone and cruise
	Display, 4.2" driver instrument information, enhanced, multi-color
	Compass display, digital
	Windows, power with driver Express Up/Down and front passenger Express-Down
	Door locks, power programmable with lockout protection
	Keyless Open includes extended range Remote Keyless Entry with lock/unlock feature
	Remote Start
	Universal Home Remote includes garage door opener, programmable
	Cruise control, electronic with set and resume speed
	Remote panic alarm
	Theft-deterrent system, electrical, unauthorized entry
	USB ports
	Air conditioning, tri-zone automatic climate control with individual climate settings for driver, right front passenger and rear seat occupants
	Sensor, humidity and windshield temperature

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Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

Interior	
	Defogger, rear-window electric
	Heater ducts, 2nd row
	Cup holders, 10 total
	Umbrella holders, driver and front passenger doors
	Mirror, inside rearview manual day/night
	Visors, driver and passenger illuminated vanity mirrors, covered
	Lighting, interior with theater dimming, cargo compartment, reading lights for front seats, second row reading lamps integrated into dome light, door-and tailgate-activated switches and illuminated entry and exit feature
	Cargo storage, tray under rear floor
	Chevrolet Connected Access capable (Subject to terms. See onstar.com or dealer for details.)
Safety-Mechanical	
	StabiliTrak, stability control system with traction control
Safety-Exterior	
	Daytime Running Lamps, LED
Safety-Interior	
	Airbags, dual-stage frontal and side-impact for driver and front passenger, driver inboard seat-mounted side-impact and roof-rail side-impact for all rows in outboard seating positions (Always use seat belts and the correct child restraints. Children are safer when properly secured in a rear seat in the appropriate child restraint. See the Owner's Manual for more information.)
	Passenger Sensing System sensor indicator inflatable restraint, front passenger/child presence detector (Always use seat belts and the correct child restraints. Children are safer when properly secured in a rear seat in the appropriate child restraint. See the Owner's Manual for more information.)
	OnStar and Chevrolet connected services capable (Terms and limitations apply. See onstar.com or dealer for details.)
	Rear Vision Camera
	Rear Park Assist with audible warning
	Lane Change Alert with Side Blind Zone Alert
	Rear Cross Traffic Alert
	Door locks, rear child security
	Rear Seat Reminder
	LATCH system (Lower Anchors and Tethers for CHildren), for child restraint seats

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Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

**Safety-Interior** 

Teen Driver a configurable feature that lets you activate customizable vehicle settings associated with a key fob, to help encourage safe driving behavior. It can limit certain available vehicle features, and it prevents certain safety systems from being turned off. It includes the Buckle-to-Drive feature which prevents the driver from shifting from Park for up to 20 seconds if the driver's seat belt is not buckled. An in-vehicle report card gives you information on driving habits and helps you to continue to coach your new driver

Tire Pressure Monitor, includes Tire Fill Alert (Does not monitor spare.)

Horn, dual-note

WARRANTY

Warranty Note: <<< Preliminary 2020 Warranty Note >>>

Basic Years: 3 Basic Miles/km: 36,000 Drivetrain Years: 5

Drivetrain Miles/km: 60,000

Drivetrain Note: Qualified Fleet Purchases: 5 Years/100,000 Miles

Corrosion Years (Rust-Through): 6

Corrosion Years: 3

Corrosion Miles/km (Rust-Through): 100,000

Corrosion Miles/km: 36,000 Roadside Assistance Years: 5 Roadside Assistance Miles/km: 60,000

Roadside Assistance Note: Qualified Fleet Purchases: 5 Years/100,000 Miles

Maintenance Note: 1 Year/1 Visit

Selected Model and Options

**MODEL** 

CODE MODEL

1NW56 2020 Chevrolet Traverse AWD 4dr LT Leather

**COLORS** 

CODE DESCRIPTION

GAZ Summit White (Available with (WBL) Redline Edition.)

**EMISSIONS** 

CODE DESCRIPTION

FE9 Emissions, Federal requirements

**ENGINE** 

CODE DESCRIPTION

LFY Engine, 3.6L V6, SIDI, VVT (310 hp [232.0 kW] @ 6800 rpm, 266 lb-ft of torque [361 N-m] @ 2800 rpm) (STD)

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Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

#### **TRANSMISSION**

CODE DESCRIPTION

M3V Transmission, 9-speed automatic (STD)

#### PREFERRED EQUIPMENT GROUP

CODE DESCRIPTION

3LT LT Leather Preferred Equipment Group Includes Standard Equipment

#### **WHEELS**

CODE DESCRIPTION

PXJ Wheels, 18" (45.7 cm) Bright Silver painted aluminum (STD)

#### **TIRES**

CODE DESCRIPTION

QO5 Tires, P255/65R18 all-season blackwall (STD)

#### **SEATING ARRANGEMENT**

CODE DESCRIPTION

ABE Seating, 7-passenger (2-2-3 seating configuration) (STD)

#### **PAINT**

CODE DESCRIPTION

GAZ Summit White (Available with (WBL) Redline Edition.)

#### **SEAT TYPE**

CODE DESCRIPTION

AR9 Seats, front bucket (STD)

#### **SEAT TRIM**

CODE DESCRIPTION

HOY Jet Black, Leather-appointed seat trim (Required when RS (2LT) is ordered.)

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Data Version: 11153. Data Updated: Jun 7, 2020 10:21:00 PM PDT.



### Karl Chevrolet

Dennis Rudolph - Government Fleet Accounts | 515-299-4409 | d.rudolph@karlchevrolet.com

Vehicle: [Fleet] 2020 Chevrolet Traverse (1NW56) AWD 4dr LT Leather ( ✓ Complete )

**RADIO** 

### CODE DESCRIPTION

IOS

Audio system, Chevrolet Infotainment 3 Plus system 8" diagonal HD color touchscreen, AM/FM stereo, Bluetooth audio streaming for 2 active devices, Apple CarPlay and Android Auto capable, voice recognition, in-vehicle apps, cloud connected personalization for select infotainment and vehicle settings. Subscription required for enhanced and connected services after trial period (STD)

### **ADDITIONAL EQUIPMENT - EXTERIOR**

CODE	DESCRIPTION
VK3	License plate front mounting package (will be forced on orders with ship-to states that require a front license plate)

**Options Total** 

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Jun 10, 2020 Page 11

### Metro Waste Authority Board Monthly Board Meeting June 17, 2020

### **AGENDA ITEM 10**

### ITEM:

Approval of P-61 Cold Storage Building 1 Retrofit Request for Proposal

### **SUMMARY:**

Three (3) bids were received for the Retrofit of the P-61 Metro Park East Landfill C&D Cold Storage 1. Woodruff Construction is the recommended contractor with the lowest most responsive bid of \$827,300.

### **DISCUSSION POINTS:**

Proposals were received from the following three (3) contractors:

### Contractor/Total Cost

Accurate Commercial | \$930,200 K. Johnson Construction | \$996,021 Woodruff Construction | \$827,300

The Woodruff Construction bid was reviewed by The Formation Group. The Formation Group's review is provided in Attachment B. Woodruff Construction provided the lowest most responsive bid.

### The construction/retrofit generally includes:

Retrofitting existing building with improvements and associated site work Insulating/Heating of building
Concrete floor and footings
Electrical finishing and addition of services
Installation of exterior overhead doors
Office/Restroom

### **STAFF RECOMMENDATION:**

Staff recommends that the Board accept the proposal from Woodruff Construction for the Retrofit of Project P-61 Metro Park East Landfill C&D Cold Storage 1.

### **BUDGET REQUIREMENTS:**

The proposed Retrofit pricing of \$827,300 is under the budgeted amount of \$986,400 for construction/retrofit cost. The funds are available in the Metro Park East Capital Expense fund to accommodate the proposal.

### **ATTACHMENTS:**

Attachment A – Woodruff Construction Bid Proposal Attachment B – The Formation Group Bid Evaluation Letter

### **CONTACT:**

Judi Mendenhall, Director of Recycling & Diversion, 515.333.4430

### SECTION 00 41 00 BID FORM

### **METRO WASTE AUTHORITY**

### Cold Storage Building 1 - Retrofit

### 1 ARTICLE 1 – BID RECIPIENT

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2 1.01 This Bid is submitted to: 3 Metro Waste Authority 4 12181 NE University Ave 5 Mitchellville, Iowa 50169 6 1.02 The undersigned Bidder proposes and agrees, if this Bid is accepted, to enter into an Agreement with 7 Owner in the form included in the Bidding Documents to perform all Work as specified or indicated in the 8 Bidding Documents for the prices and within the times indicated in this Bid and in accordance with the 9 other terms and conditions of the Bidding Documents.

### ARTICLE 2 – BIDDER'S ACKNOWLEDGEMENTS

- 2.01 Bidder accepts all of the terms and conditions of the Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. This Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of Owner.
- BIDDER will sign and deliver the required number of counterparts of the AGREEMENT with the Bonds and other documents required by the Bidding Requirements within 15 days after the date of OWNER's Notice of Award.

### 18 ARTICLE 3 – BIDDER'S REPRESENTATIONS

- 19 3.01 In submitting this Bid, Bidder represents that:
  - A. Bidder has examined and carefully studied the Bidding Documents, and any data and reference items identified in the Bidding Documents, and hereby acknowledges receipt of the following Addenda:

Addendum No.	Addendum, Date
1	4-27-2020
2	5-1-2020
3	5-8-2020
4	5-12-2020

- B. Bidder has visited the Site, conducted a thorough, alert visual examination of the Site and adjacent areas, and become familiar with and satisfied itself as to the general, local, and Site conditions that may affect cost, progress, and performance of the Work.
  - C. Bidder is familiar with and has satisfied itself as to all Laws and Regulations that may affect cost, progress, and performance of the Work.
  - D. Bidder has carefully studied all: (1) reports of explorations and tests of subsurface conditions at or adjacent to the Site and all drawings of physical conditions relating to existing surface or subsurface structures at the Site that have been identified in the Supplementary Conditions, especially with respect to Technical Data in such reports and drawings, and (2) reports and drawings relating to

1 2			Hazardous Environmental Conditions, if any, at or adjacent to the Site that have been identified in the Supplementary Conditions, especially with respect to Technical Data in such reports and drawings.
3 4 5 6 7 8 9		E.	Bidder has considered the information known to Bidder itself; information commonly known to contractors doing business in the locality of the Site; information and observations obtained from visits to the Site; the Bidding Documents; and any Site-related reports and drawings identified in the Bidding Documents, with respect to the effect of such information, observations, and documents on (1) the cost, progress, and performance of the Work; (2) the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder; and (3) Bidder's safety precautions and programs.
10 11 12 13		F.	Bidder agrees, based on the information and observations referred to in the preceding paragraph, that no further examinations, investigations, explorations, tests, studies, or data are necessary for the determination of this Bid for performance of the Work at the price bid and within the times required, and in accordance with the other terms and conditions of the Bidding Documents.
14 15		G.	Bidder is aware of the general nature of work to be performed by Owner and others at the Site that relates to the Work as indicated in the Bidding Documents.
16 17 18		H.	Bidder has given Engineer written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and confirms that the written resolution thereof by Engineer is acceptable to Bidder.
19 20		I.	The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for the performance and furnishing of the Work.
21 22 23		J.	The submission of this Bid constitutes an incontrovertible representation by Bidder that Bidder has complied with every requirement of this Article, and that without exception the Bid and all prices in the Bid are premised upon performing and furnishing the Work required by the Bidding Documents.
24 25		K.	Bidder has examined and carefully prepared the proposal from the Bidding Documents and has checked the same in detail before submitting this Bid.
26 27		L.	Bidder will submit written evidence of its authority to do business in the state where the Project is located not later than the date of its execution of the Contract.
28 29 30		M.	Bidder agrees to waive any claim it has or may have against the Owner, the Engineer and the respective employees, arising out of or in connection with the administration, evaluation or recommendation of the Bid.
31	ARTIC	LE 4	4 – BIDDER'S CERTIFICATION
32	4.01	Bido	der certifies that:
33 34 35		A.	This Bid is genuine and not made in the interest of or on behalf of any undisclosed individual orentity and is not submitted in conformity with any collusive agreement or rules of any group, association, organization, or corporation;
36 37		B.	Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid;

- C. Bidder has not solicited or induced any individual or entity to refrain from bidding; and
- Bidder has not engaged in corrupt, fraudulent, collusive, or coercive practices in competing for the Contract. For the purposes of this Paragraph 4.01.D:
  - "corrupt practice" means the offering, giving, receiving, or soliciting of any thing of value likely to influence the action of a public official in the bidding process;
  - "fraudulent practice" means an intentional misrepresentation of facts made (a) to influence the bidding process to the detriment of Owner, (b) to establish bid prices at artificial competitive levels, or (c) to deprive Owner of the benefits of free and open competition;

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- "collusive practice" means a scheme or arrangement between two or more Bidders, with or without the knowledge of Owner, a purpose of which is to establish bid prices at artificial, noncompetitive levels; and
- "coercive practice" means harming or threatening to harm, directly or indirectly, persons or their property to influence their participation in the bidding process or affect the execution of the Contract.

### 7 ARTICLE 5 – BASIS OF BID

8 5.01 Bidder will complete the Work in accordance with the Contract Documents for the following price(s):

Item No.	Description	Estimated Quantity	Unit	Bid Unit Price	Bid Price
101	Mobilization, demobilization, and all work not included in Bid Item Nos. 102, 103, and 104. (General Cond.)	1	LS	164,300	164,300
102	Cold Storage 1 Concrete Foundations and Floor	1	LS	191,300	191,300
103	Roof, Siding, Insulation, and Doors	1	LS	317,530	317,530
104	Interior Construction and Specialties	1	LS	21,760	21,700
105	Mechanical, Electrical, and Plumbing	1	LS	132,470	132,470

Bidder acknowledges that (1) each Bid Unit Price includes an amount considered by Bidder to be adequate to cover Contractor's overhead and profit for each separately identified item, and (2) estimated quantities are not guaranteed, and are solely for the purpose of comparison of Bids, and final payment for all unit price Bid items will be based on actual quantities, determined as provided in the Contract Documents.

### Total of Lump Sum and Unit Price Bids and Allowance = Total Bid Price Server description (numeral description)

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5.02 Bidder agrees that the Work will be substantially complete and will be completed and ready for final payment in accordance with Paragraph 15.06 of the General Conditions on or before the dates or within the number of calendar days indicated in the Agreement.

17 5.03 Bidder accepts the provisions of the Agreement as to liquidated damages.

### ARTICLE 6 – ATTACHMENTS TO THIS BID

- 19 6.01 The following documents are submitted with and made a condition of this Bid:
  - Required Bid security;
  - B. List of Project References;
    - C. Evidence of authority to do business in the state of the Project; or a written covenant to obtain such license within the time for acceptance of Bids;

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1 D. Required Bidder Qualification Statement with supporting data. 2 **ARTICLE 7 - DEFINED TERMS** 3 The terms used in this Bid with initial capital letters have the meanings stated in the Instructions to Bidders, the General Conditions, and the Supplementary Conditions. 4 **ARTICLE 8 - BID SUBMITTAL** 5 BIDDER: [Indicate correct name of bidding entity] Woodruff Construct By: [Signature] Jason Rechkemmer, COO [Printed name] (If Bidder is a corporation, a limited liability company, a partnership, or a joint venture, attach evidence of authority to sign.) Attest: [Signature] Shana Streeter [Printed name] Project Assistant Title: 5/15/2020 Submittal Date: Address for giving notices: 1920 Philadelphia St Ste 102 Ames IA 50010 Telephone Number: 515-232-4535 Fax Number: 515-232-4538 Grant Reimers, Senior Project Manager Contact Name and e-mail address: grantr@woodruff.build State Contractor's License C097864 No.:

END OF BID FORM

(where applicable)

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6

1920 Philadelphia St, Ste 102 | Ames, IA 50010 Ph: (515) 232-4535 Fax: (515) 232-4538

building with the same specifications as laid out in the contract documents.

Deduct 10,000.

1920 Philadelphia St, Ste 102 | Ames, IA 50010 Ph: (515) 232-4535 Fax: (515) 232-4538

May 15, 2020

Re: Evidence of Authority to Sign for MWA Cold Storage Building 1 Retrofit

To Whom It May Concern:

Jason Rechkemmer, being Chief Operating Officer of Woodruff Construction LLC, has authority to sign any and all documents for Woodruff Construction LLC.

1920 Philadelphia St, Ste 102 | Ames, IA 50010 Ph: (515) 232-4535 Fax: (515) 232-4538

### **PROJECT REFERENCES**

Project: MWA P-51 Transfer Trailer Storage Facility Metro Waste Authority Michael McCoy, Executive Director (515) 323-6535

Project: Cedar Falls Water Reclamation Facility
City of Cedar Falls
Mike Nyman, Water Reclamation Division Manager
(319) 268-5561

Project: Pleasantville WWTP Improvements Snyder & Associates Jim Lund PE, BCEE, CDT (515) 964-2020

Project: Woodward WWTP Improvements Veenstra & Kimm Todd Penisten, PE (515) 225-8000

Project: Gilbert WWTP Improvements and Gilbert WTP Improvements FOX Engineering Steve Van Dyke, PE, BCEE (515) 233-0000

Project: WRA Ankeny Pump Station Improvements Des Moines Wastewater Reclamation Authority Aaron Johnson (515) 979-9901

Project: Fort Dodge Reverse Osmosis City of Fort Dodge Tony Trotter, City Engineer (515) 576-4551 x1239 McClure Engineering Austyn Wolfe, PE and Luke Hugghins (515) 576-7155



### CONTRACTOR REGISTRATION CERTIFICATE

### STATE OF IOWA DIVISION OF LABOR

150 Des Moines St, Des Moines, IA 50309 Phone: 515-242–5871 | FAX: 515-725-2427 www.iowacontractor.gov | contractor.registration@iwd.iowa.gov DATE ISSUED: **04/07/2020** 

DATE EXPIRES: **05/10/2021** 

REGISTRATION NUMBER: C097864

WOODRUFF CONSTRUCTION LLC 1890 KOUNTRY LN FORT DODGE, IA 50501

Rod A. Roberts, Labor Commissioner

### SECTION 00 45 10 QUALIFICATION STATEMENT

### **FOR**

### METRO WASTE AUTHORITY COLD STORAGE BUILDING 1 - RETROFIT

### THE INFORMATION SUPPLIED IN THIS DOCUMENT IS CONFIDENTIAL TO THE EXTENT PERMITTED BY LAWS AND REGULATIONS

1 2	Note: Contractors who do not complete the responsive".	following questionnaire are subject to being deemed "non
3	1. SUBMITTED BY:	
4	Official Name of Firm:	Woodruff Construction, LLC
5	Address:	1890 Kountry Lane
6		Fort Dodge, IA 50501
7		
8	2. SUBMITTED TO:	Metro Waste Authority
9	3. SUBMITTED FOR:	Cold Storage Building 1 - Retrofit
10	Owner:	Metro Waste Authority
11	Project Name:	Cold Storage Building 1 - Retrofit
12	7.0 <b>j</b> 000	
13		
	TYPE OF WORK:	HVAC, Plumbing, Electrical, and Compressed Air System
14	TYPE OF WORK:	TivAo, Flumbing, Electrical, and Compressed in Cyclem
15		
16		
17	4. CONTRACTOR'S CONTACT	TINFORMATION:
18	Contact Person:	Jason Rechkemmer
19	Title:	Central Region President
20	Phone:	515.232.4535

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jasonr@woodruff.build

Email:

21

1	5.	<b>AFFILIA</b>	TED COMPANIES:			
2		Name:		N/A		
3		Addres	ss:			
4						
5						
6	6.	CONTRA	CTOR INFORMATI	ON:		
7		All oth	ner names under which	Contractor has	operated in the past five (5) years.	
8		N/A				
9						
10						
11		Federa	al Employee Identificat	ion Number: _	76-0721180	
12 13	7.	TYPE OI	F ORGANIZATION (	Check one):		
14			SOLE PROPRIETOR	SHIP		
15			Name of Owner:			_
16			Doing Business As:			-
17			Date of Organization:	: .		_
18			PARTNERSHIP			
19			Date of Organization:	:		_
20			Type of Partnership:			
21			Name of General Par	tner(s):		
22				(5).		_
						-
23						-

1	CORPORATION	
2	State of Organization:	
3	Date of Organization:	
4	Executive Officers:	
5	- President:	
6	- Vice President(s):	
7		
8		
9	- Treasurer:	
10	- Secretary:	
11	X <u>LIMITED LIABILITY COMPAN</u>	<u>Y</u>
12	State of Organization:	lowa
13	Date of Organization:	2003
14	Members:	Don Woodruff, Jason Rechkemmer, Nick Ford
15		Chad Lennon, Dave Warren, Sara Orr, Kevin Larsen
16		Tony Herring
17		

1	☐ JOINT VENTURE	
2	Sate of Organization:	
3	Date of Organization:	
4	Form of Organization:	
5	Joint Venture Managing Partner	
6	- Name:	
7	- Address:	
8	_	
9	_	
10	Joint Venture Managing Partner	
11	- Name:	
12	- Address:	
13	_	
14	Joint Venture Managing Partner	
15	- Name:	
16	- Address:	
17	_	
18	8. REGISTRATION (Iowa Code Chapter 91	C)
19	Contractor Registration N	umber:
20 21	Full Names of Registratio Contractor Registration re	n Holders (as per Iowa Construction quirements): Woodruff Construction, LLC
22		
23		
24	Contractor Registration Ex	xpiration Date: 05-10-2021

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1	9. LICENSING:		
2		Jurisdiction:	lowa
3		Type of License:	Iowa Contractor Registration
4		License Number:	C097864
5		Jurisdiction:	
6		Type of License:	
7		License Number:	
8	10. CERTIFICATI	ONS:	CERTIFIED BY:
9		Disadvantage Business En	nterprise:
10		Minority Business Enterp	rise:
11		Woman Owned Enterpris	e:
12		Small Business Enterprise	e:
13		Other (	):
14	11. BONDINGINE	FORMATION:	
15		Bonding Company:	United Fire & Casualty
16		Address:	118 2nd Avenue SE
17			Cedar Rapids, IA 52401
18		Bonding Agent:	Holmes Murphy
19		Address:	2727 Grand Prairie Parkway
20			Waukee, IA 50263
21			
22		Contact Name:	Brian Deimerly
23		Phone:	515.223.6406
24		Aggregate Bonding Capa	acity: _\$60,000,000
25		Available Bonding Capac	city as of date of this submittal: \$20,000,000

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1	12. FINANCIAL INFORMATION:	
2	Financial Institution:	Schuman & Co.
3	Address:	118 S. 12th Street
4		Fort Dodge, IA 50501
5	Account Manager:	Jon Schuman
6	Phone:	515.955.4614
		ate total bonding capacity of Contractor:
7 8	maicate approxima	ate total boliding capacity of Contractor.
		0,000 -\$2,000,000
	(	000,000 -\$5,000,000 000,000 -\$10,000,000
9	\$3,0	000,000 - \$10,000,000
10	*INCLUDE AS AN	ATTACHMENT AN AUDITED
11	BALANCE SHEET	FOR EACH OF THE LAST 3 YEARS
12	13. SUSPENSION, REVOCATION, DEB	ARMENT:
13 14	a. Has Contractor's Registration jurisdiction?	on ever been suspended or revoked in any
15	□ Yes ≱No	
16 17	If Yes, provide information relevant documents.	egarding suspension/revocation and attach all
18 19	b. Within the past five (5) years, I state or local governmental entit	nas Contractor been debarred by any federal, ity from bidding on projects?
20	□ Yes ≱No	
21 22	If Yes, provide information r documents.	egarding debarment and attach all relevant
23	14. CONSTRUCTION EXPERIENCE:	
24 25 26 27		ellent attachment, provide details of projects of Contractor. (If joint venture, list participant's

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1 2	b.	On <u>Schedule B</u> or an equivalent attachment, identify the individuals Contractor intends to be Officer in Charge, Project Manager, Project
3		Superintendent, and any other key personnel on this Project. Include a
		resume and/or recent work history for each identified individual.
4		resume and/or recent work instory for each identified individual.
5		On Schedule C or an equivalent attachment, for work Contractor intends to
6	c.	self-perform on the Project, specify the level of training and experience each
7		of Contactor's employees have had. Further indicate whether any such
8		training has been in a United States Department of Labor ("DOL") certified
9		apprentice program. In the event Contractor intends to utilize apprentice
0		workers on the Project, Contractor must be able to provide, upon Owner's
1		request, documentation that each apprentice worker utilized on the Project is
2		properly registered as participating in a DOL certified apprentice program.
3		properly registered as participating in a DOL certified application program.
14	1	On Schedule D or an equivalent attachment, list Contractor's last five (5)
15	d.	completed projects and for each, the scheduled completion date and final
16		completed projects and for each, the scheduled completion date and inflat
17		completion date, noting any owner-approved extensions.
18	Maria II.	Has Contractor ever defaulted on a contract, or been disqualified, removed or
19	e.	otherwise prevented from bidding on, or completing any project?   Yes
20		•
21		No If yes, provide the year of the incident, name and address, phone number of
22		the owner of the project, the project name and location on an attachment.
2.3		the owner of the project, the project hame and location on an attachment.
23 24 25 26 27	£	Has Contractor ever failed to complete any work awarded to it? ☐ Yes
25	f.	No
20		If yes, provide the year of the incident, name and address, phone number of
27		the owner of the project, the project name and location on an attachment.
28		the owner of the project, the project name and rocation on an attachment.
29 30	œ	Has any corporate officer, partner, joint venture participant or proprietor of
	g.	Contractor ever failed to complete a construction contract awarded to him or
31 32		her in his or her own name or when acting as a principal of another
33		organization? □ Yes ⋈ No
34		If yes, provide the year of the incident, name and address, phone number of
		the owner of the project, the project name and location on an attachment.
35		the owner of the project, the project hame and location on an attachment.
36	h	In the last five (5) years, has Contractor ever failed to substantially complete
37	h.	a project in a timely manner? $\square$ Yes $\square$ No
38		If yes, provide the year of the incident, name and address, phone number of
39 40		the owner of the project, the project name and location on an attachment.
40 41		the owner of the project, the project hame and rocation on an attachment.
41		

1 2 2	i.	Does Contractor have projects not listed on <u>Schedule A</u> which commenced within the past four (4) years and have not reached final completion? □ Yes   No
3 4 5		If yes, provide the year of the incident, name and address, phone number of the owner of the project, the project name and location.
6 7	j.	Has Contractor ever been unable to obtain a bond or been denied a bond?
8	J.	□ Yes 🗷 No
9		If yes, provide all relevant details on an attachment.
10		
1	k.	On Schedule E, provide names of all surety/bonding companies Contractor
12		has utilized in the past five (5) years. Include agent's name, address and
13		phone number.
14		
15	1.	Has Contractor ever declared bankruptcy or been in receivership? ☐ Yes 🔻
16		No
17		If yes, provide all relevant details on an attachment.
18		• •
19	m.	Is Contractor currently being investigated for or previously been found to
20		have violated in the last five (5) years any of the following state or federal
21		laws: Iowa Minimum Wage Act, Iowa Non-English Speaking Employees
		Act, Iowa Child Labor Act, Iowa Labor Commissioner's Right to Inspect
22 23 24 25 26		Premises, Iowa Compensation Insurance Act, Employment Security Act,
24		Iowa Competition Act, Iowa Income, Corporate and Sales Tax Code, a
25		"willful" violation of the Iowa or Federal Occupational Safety and Health
26		Act, Iowa Employee Registration Requirements, Iowa Hazardous Chemical
27		Risks Act, Iowa Wage Payment Collection Act, Federal Income and
28		Corporate Tax Code, The National Insurance Security Act, The Fair Labor
29		Standards Act:
30		If yes, provide all relevant details on an attachment.
31		
32	n.	Are there any judgments, arbitration proceedings or suits pending or
33		outstanding against Contractor or its officers? □ Yes 🞽 No
34		If yes, provide all relevant details on an attachment.
35		TY G
36	0.	Has Contractor filed any lawsuit or demanded arbitration with regard to any construction contract within the past five (5) years?
37		construction contract within the past in a (c) just a
38		If yes, provide all relevant details on an attachment.
39		II C
40	p.	Has Contractor been found by a court or agency of competent jurisdiction to
41		be delinquent in meeting its obligations under local, state or federal tax laws
42		within the last five (5) years? For purposes of this Question, "delinquent"
43		shall include, but is not limited to, failure to file, failure to pay, or imposition of tax liens. $\Box$ Yes
44		of tax liens.   Yes No  If yes, provide all relevant details on an attachment.
45		if yes, provide an relevant details on an attachment.

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1		
2	q.	Contractor affirms that it will retain only subcontractors who can fully
3	4.	comply with the bid specifications.
4		ĭ Yes □ No
5		
6	r.	Contractor affirms that is will be responsible for ensuring that each
7	1.	subcontractor meets quality assurance specifications as presented in the bid
8		specifications. ≱ Yes □ No
		specifications. & Tes = 140
9		Contractor agrees to submit to Owner a list of all intended subcontractors at
10	S.	Contractor agrees to success to s
11		the time of bid. In the event Contractor wants to replace any originally-
12		designated subcontractor, such may occur only with the approval of Owner.
13		Such approval will not be unreasonably withheld. ⋈ Yes □ No
14		
15	t.	Contractor attests that it will comply with each of the following:
16		
17		Iowa Minimum Wage Law:
18		
19		Maintain workers' compensation insurance or be qualified as a self-insurer
20		and provide proof of insurance or ability to self-insure upon request: ⋈Yes
21		□No
22		
23		Properly license all Contractor employees with the appropriate licensing
24		authority:
25		ĭ Yes □ No
26		
27	u.	Contractor will make available to Owner or its representative, upon request,
28		documentation necessary to satisfy Owner, in its sole discretion, that
29		Contractor's workers utilized on this Project are actual employees, with
30		unemployment and worker's compensation coverage, and are not "leased
31		employees" or independent contractors.
32		× Yes □ No
33		Z 103 1110
34	**	Contractor will provide with this Statement of Bidder's Qualifications, the
	V.	name, address, phone number and name of a contact person for three (3)
35		
36		entities that will provide references for Contractor.
37	45 CAPET	SV DDOCD AM
38	15. SAFE I	TY PROGRAM:
39	a.	Contractor will only utilize on-site employees who have completed the
40	u.	Occupational Safety and Health Act (OSHA) 10 Hour Construction Industry
41		Training Program.
42		Yes □ No
72		₽ 1 C2 □ 140

1		
2	b.	State the general type(s) of work performed by Contractor with its own work
3		force.
4		Concrete, Steel Fabrication/Welding, Excavation and Demo
5		
6		
7		
8		
9		
10		
11		
12	c.	Describe Contractor's permanent safety program, and provide name(s) of
13		individual(s) responsible for safety procedures on this Project.
14		Safety Manual covering all topics, Think 12 Safety Program, Tool Box Talks,
15		Contractor adheres to all safety guidelines.
16		
17		
18		
19		
20		
21	d.	Name of Contractor's Safety Officer: Jim Wolter
22		
23	e.	Provide the following as attachments for (x) Contractor and (y) Contractor's
24		proposed subcontractors and suppliers furnishing or performing Work
25		having a value in excess of 10 percent of the total amount of the Bid:
26		300
27		i. OSHA No. 800-Log and Summary of Occupational Injuries &
28		Illnesses for the past five (5) years.
29		$\boxtimes$ See Attachment(s) $\square$ None
30		
31		ii. List of all OSHA Citations & Notifications of Penalty (monetary or
32		other) received within the last five (5) years (indicate disposition as
33		applicable).
34		X See Attachment(s) □ None
35		
36		iii. List of all safety citations or violations under any state all received
37		within the last five (5) years (indicate disposition as applicable)
38		
39		

1 2 3 4	f. Provide the following for (x) Contractor and (y) Contractor's proposed subcontractors and suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid:
5 6	<ul><li>i. Workers' compensation Experience Modification Rate ("EMR") for the last five (5) years:</li></ul>
	YEAR 2015       EMR .63         YEAR 2016       EMR .62         YEAR 2017       EMR .70         YEAR 2018       EMR .74         YEAR 2019       EMR .76
7 8	ii. Total Recordable Frequency Rate ("TRFR") for the last five (5) years:
	YEAR 2015       TRFR 4.85         YEAR 2016       TRFR 4.63         YEAR 2017       TRFR 1.89         YEAR 2018       TRFR 5.8         YEAR 2019       TRFR 2.4
9	iii. Total number of man-hours worked for the last five (5) Years:  YEAR 2015 TOTAL NUMBER OF MAN-HOURS 247206 YEAR 2016 TOTAL NUMBER OF MAN-HOURS 301773 YEAR 2017 TOTAL NUMBER OF MAN-HOURS 317858 YEAR 2018 TOTAL NUMBER OF MAN-HOURS 344855 YEAR 2019 TOTAL NUMBER OF MAN-HOURS 331011
10	
11 12 13 14	iv. Days Away From Work, Days of Restricted Work Activity or Job Transfer ("DART") incidence rate for the particular industry or type of Work to be performed by Contractor and each of Contractor's proposed Subcontractors and Suppliers) for the last five (5) years:
15	YEAR       2015       DART       3.23         YEAR       2016       DART       4.63         YEAR       2017       DART       1.89         YEAR       2018       DART       4.06         YEAR       2019       DART       1.8

1 2 3 4 5 6 7	I hereby certify that: (1) all the information submitted in this Qualifications Statement, including any attachments, is true to the best of my knowledge and belief; (2) I am authorized to sign this Qualifications Statement on behalf of the Contractor whose name appears in Question 1 above; and (3) if any of the information I have provided herein becomes inaccurate, prior to execution of any Project contract, I will immediately provide Owner with updated accurate information in writing.
8	NAME OF ORGANIZATION: Woodrum Construction, LLC
9	BY: Jason Kentrery mil
10	TITLE: Central Region President
11	DATED: May 15, 2020
12 13	NOTARY ATTEST: LAGA
14	SUBSCRIBED AND SWORN TO BEFORE ME
15 16 17	THIS 15th DAY OF May , 2020 SHANA STREETER Commission Number 786748 My Commission Expires October 29, 2020
18	NOTARY PUBLIC - STATE OF <u>lowa</u>
19	MY COMMISSION EXPIRES: 10-29-2020
20 21 22	REQUIRED ATTACHMENTS
23	1. Schedule A (Current Experience)
24	2. Schedule B (Contractor Key Personnel)
25	3. Schedule C (Contractor Employees – Level of Training and Experience)
26	4. Schedule D (Contractor's Last Five (5) Completed Projects)
27	5. Schedule E (Surety/Bonding Companies Contractor Utilized in Past Five (5) Years)
28	6. Audited balance sheet for each of the last 3 years for Contractor.
29 30	<ol><li>Evidence of authority for individuals in Section 7 to bind organization to an agreement.</li></ol>
31	8. Resumes of officers and key individuals (including Safety Officer) of Contractor.
32	9. Required safety program submittals listed in Section 15(e).
33	10. Additional items as pertinent.
34	END OF SECTION

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SCHEDULE A

CURRENT EXPERIENCE

		CURKENI EXPERIENCE				
Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
FORT DODGE RO SYSTEM Name: City of Fort Dodge Address: 3001 8th Ave. S, Fort Dodge, IA 5 Telephone: 515.955.6139	Name: City of Fort Dodge Address: 3001 8th Ave. S, Fort Dodge, IA 50501 Telephone: 515.955.6139	Name: Austyn Wolfe Company: McClure Engineering Telephone: 515.576.7155	December 2020	Reverse Osmosis System	In Progress	\$19,970,000
FD CSD Administration Building	Name: Fort Dodge CSD Address: 104 S. 17th Street Fort Dodge, IA 50501 Telephone: 515.576.1161	Name: Justin Steffl Company: ISG, Inc. Telephone: 507.387.6651	August 2020	Renovation	In Progress	\$2,594,700
Gilbert Water Treatment Plant	Name:City of Gilbert Address: 300 First Street Gilbert, IA 50105 Telephone: 515.232.0971	Name:Steve Van Dyke Company:Fox Engineering Telephone:515.233.0000	October 2020	WTP Improvements	In Progress	\$3,901,010
Des Moines Waste Water Pump Station	Name: City of Des Moines Address: 903 SE 22nd Street Des Moines, IA 50317 Telephone: 515.283.4950	Name: Craig Bouska Company: Des Moines City Engineer Telephone: 515.208.4580	April 2021	WWTP Improvements	In Progres\$	\$8,186,737
Delaware County Sheriff's Office	Name: Delaware Co. Sheriff Address: 304 E. Delaware Manchester, IA 52057 Telephone:	Name: John Hansen Company: Midwest Construction Consultants Telephone: 319.234.1515	March 2021	New Construction	In Progress	\$3,342,338
Waterloo WWTP Biosolids	Name: City of Waterloo Address: 625 Glenwood Street Waterloo, IA 50703 Telephone: 319.291.4455	Name: Sam Hocevar Company: Strand Associates Telephone: 608.251.4843	December 2021	WWTP Improvements	In Progres:	In Progress

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### SCHEDULE B CONTRACTOR KEY PERSONNEL

Title	Name
Officer in Charge	Jason Rechkemmer
Project Manager	Grant Reimers
Project Superintendent	Philip Tjelmeland

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# SCHEDULE C CONTRACTOR EMPLOYEES – LEVEL OF TRAINING AND EXPERIENCE

	<del></del>	 	 		
Experience	IED FOR THEIR LEVEL OF WORF ATION OR MORE. A MORE IEST IF WOODRUFF IS UNDER				
Level of Training	ALL WOODRUFF EMPLOYEES ARE APPROPRIATELY TRAINED FOR THEIR LEVEL OF WORK AND HAVE COMPLETED OSHA 10 HOUR SAFETY CERTIFICATION OR MORE. A MORE DETAILED LIST OF EMPLOYEES IS AVAILABLE UPON REQUEST IF WOODRUFF IS UNDER CONSIDERATION FOR AWARD OF THE CONTRACT.				
Employee Name	ALL WOODRUFF EMPLOYE AND HAVE COMPLETED OS DETAILED LIST OF EMPLO CONSIDERATION FOR AWA				

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SCHEDULE D
CONTRACTOR'S LAST FIVE (5) COMPLETED PROTECTS

Project Name	CONTRACTOR'S Owner's Contact Person	act Person   Project Location and Scheduled	Scheduled	Final	Owner-Approved
		Description	Completion Date	Completion Date	Extension?
ALLEN MITCHELL BUILDING	Name: David Black Address: 109 East Main Street Washington, IA 52353 Telephone: 319.591.8770	New PamPanm Building in Washington, Iowa	January 2020	January 2020	
WEST HANCOCK CSD	Name: Wayne Kronemann Address:510 9th Ave. SW Britt, IA 50423 Telephone:641.843.3833	West Hancock CSD Renovations Britt, Iowa	March 2020	March 2020	
FAIRMONT AT&T	Name: Jeff Meeker Address: 17300 W. 116th St. Lenexa, KS 66219 Telephone:913.553.9082	AT&T Entertainment Design - Fairmont Retail Fairmont, MN	January 2020	January 2020	
YSS MARSHALLTOWN	Name: David Hicks Address: 22 N Center Street Marshalltown, IA 50158 Telephone: 641.752.2300	YSS Renovation Marshalltown, Iowa	March 2020	March 2020	
GILBERT WWTP	Name: The City of Gilbert, IA Address;105 SE 2nd Street Gilbert, IA 50105 Telephone:	City of Gilbert Wastewater Treatment Improvements Gilbert, Iowa	June 2019	November 2019	yes
	Name: Address: Telephone:				

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SURETY/BONDING COMPANIES CONTRACTOR UTILIZED IN PAST 5 YEARS SCHEDULE E

ss, Phone srand e, IA	.6406				
Agent's Name, Address, Phone Number Holmes Murphy, 2727 Grand Prairie Parkway, Waukee, IA	ian Deimerly, 515.22;				
Name of Surety/Bonding A Company Ho	<u> </u>				

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### **REFERENCES:**

BEISSER LUMBER CONTACT: SCOTT OTTO 1920 CENTRAL AVENUE FORT DODGE, IA 50501 515-573-4166

RASCH CONSTRUCTION CONTACT: JOEL RASCH 1828 JOHNSON AVENUE FORT DODGE, IA 50501 515-576-4175

MANATTS
CONTACT: BRAD SCHWIEBURT
1776 OLD 6 ROAD
PO BOX 525
BROOKLYN, IA 52211
641-522-9206

Public

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Page

1 of 1

(1)

(2)

3

(4)

(5)

(6)

Page totals

0

206

Injury

Skin Disorder

Condition

Poisoning

Hearing Loss

All other illnesses

## OSHA's Form 300 (Rev. 01/2004)

Case No.

Employee's Name (B)

(C)
Job Tille (e.g., Welder)

0

Ê

Describe the case

injury or onset of Date of

> Loading dock north end) Where the event occurred (e.g.

iliness

Identify the person

You must record information about every work related myrry or ithess that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment reyard first and You must also record significant work-related injuries and illnesses that are disgnosed by a physician or it.emsed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria tisted in 29 CFR 1904 8 through 1904, 12. Feet free to use two lines for a single case if you need to. You must complete an injury and illness incorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the for occupational safety and health purposes. extent possible while the information is being used

Year 2019

Occupational Safety and Health Administration U.S. Department of Labor

Form approved OMB no. 1218-0176

Woodruff Construction

Establishment name

Fort Dodge

State

laceralion to left pinky finger from pinch in hois causing a fracture to lower back stepped out of skylrak and stipped on mud Describe injury or illness, parts of body affected. unloading lemna covers and fell from trailer pulling nails out with a hammer causing strain to made person ill (e.g. Second degree burns on and object/substance that directly injured or ight forearm from acetylene torch) CHECK ONLY ONE box for each case based on the most serious outcome for that case: Death Classify the case Days away from work (E or restriction Job transfer 3 Remained at work able cases Other record-3 Enter the number of days the injured or ill worker was (days) Work From Away 6 S On job transfer or restriction (days) 28 164 14 Check the "injury" column or choose one type of illness: (X 3 Injury Skin Disorder Respiratory (3) Condition Poisoning G Hearing Loss (6) All other illnesses

Canstruction Workd 5/14/19

Ogden Waste Water Treatment

Willis Dady exterior north side of

isting left knec

onstruction Work

Construction Work onstruction Worl

4/23/19 4/15/19

Roland Waste Water Treatme

ISH Garner Clinic

right forearm

# OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor Occupational Safety and Hankh Administration

Form approved OMB no 121A-0178

Year

2019

Using tha Log, court the individual antian you made for each category. Then write the tatals below, making sure you've edded the entires from every page of the log. If you had no cases write "Q." All aslabibiturents covoned by Part 1904 must remplete this Summary page, aven it no lightide or Illnessas occurred during the year. Remember to review the Log to verify that the entities are complete

(L)	(1)	Œ	(G)
CBSBB	restriction 2	away ironi work	0
other recordable	with job transfer or	cases with days	deaths
Total number of	Total number of cases	Total number of	Total number of
			Number of Cases

•	206		16
	Total number of days of job transfer or restriction		Total number of days away from
			Number of Days
(L)	(1)	Œ	(6)
CBSBB	restriction 2	away from work	0
Total number of other recordable	Total number of cases with job transfer or	Total number of cases with days	folal number of deaths

### (1) Injury(2) Skin Disorder(3) RespiratoryCondition (4) Poisoning (5) Hearing Loss (6) All Other Illnesses

Injury and illness Types

Total number of,

3

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

DATO

Public apposing burier for this collection of information is estimated to average 58 minutes per response, including time to notice the instruction, search and gather the data market, and complete and notice that collection of information. Persons are not lengthed to respond to the cellsclain of information unless it objects a currently well OHE could collect and information and programment and programment and the complete of the data cellsclain objects in displayes a currently well OHE could collect and programment of cellsclain objects. On the cellsclain objects are not responsible of the cellsclain objects of the cellsclain objects are not responsible to the cellsclain objects of the cellsclain objects.

	_
Establishment information	
Your establishment namn   Woodruif Construction, LLC	
Street 1890 Kaumity Leann	
City Fort Godge State State IA Zin 50501	
Initistry description (a.g., Manufactire of molor insek trailers) Constinction	
Sinnfard Industrial Classification (SIC), if known (e.g., SIC 3715)  OR North American Industrial Classification (VAICS), if known (e.g., 300212)  2 3 8 2 2 0	
Employment information	
Annual average number of employees 17?	
Total fours worked by all employees last 331,011	
Sign hore	
Knowingly faisifying this document may result in a fine.	
t centily that Used examined this posterioral and that to the bast of my knowledge the entries are true, incorrate, and complete.	
545-576-1118	

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Injury

Skin Disorder

Respiratory

Condition

Poisoning

Hearing Loss

All other illnesses

Page

1 of 1

3

(2)

(3)

4

(5)

6

### OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses

Case No.

8

office for help.

for occupational safety and health purposes. extent possible while the information is being used

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the

Year 2018

U.S. Department of Labor

Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical frealment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording chieria listed in 29 CFR 1904.8 through 1904.12. Feet free to use two lines for a single case if you need to. You must complete an injury and tiness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA Identify the person Employee's Name Job Title (e.g., ) Welder) Laborer Laborer Superintenden aborer aborer 6/1/2018 5/9/2018 11/19/2018 Mid-American 11/20/18 8/19/18 5/31/2018 5/3/2018 (D)
Date of injury or onset of illness New Sharon Waste Water Treat contusion to right ankle from wall piece falling Mid-American Job Trailer Hawkeye CC (E)
Where the event occurred (e.g. Loading dock north end) Rosedale Youth Shelter front entieft hand contusion from brick falling Ellsworth CC Math and Science McFarland Clinic Hall 305 Grantwood AEA, Marion Prestage Foods T 8 & 9 pad Twain Elementary School east e fracture to right hip and hand due to fall Describe the case fan blade Knee Sprain to the left knee from walking up Describe injury or illness, parts of body affected, and object/substance that directly injured or Left knee pain from repetitive kneeling binding up and klcking twisting finger trailer steps Laceration on nose due to falling piece of metal Laceration to upper left arm due to walking into made person ill (e.g. Second degree bums on right forearm from acetylene torch) Hernia due lo lifting countertops Strain to lower back from slip on ice racture to right third finger due to core drill Î Page totals CHECK ONLY ONE box for each case based on the most serious outcome for that case: Death Classify the case (G) Days away from work Œ or restriction Job transfer Establishment name Remained at work Other record-able cases Fort Dodge E Enter the number of days the injured or ill worker was: (days) Work From 23 On job transfer or restriction (days) 47 195 45 0 35 14 26 Woodruff Construction Check the "injury" column or choose one type 3 Injury 3 10 Skin Disorder Respiratory (3) of illness: Condition Poisoning Hearing Loss All other illnesses

## OSHA's Form 300A (Rev. 01/2004)

U.S. Department of Labor Occupational Salety and Health Administration Year 2018

FOR SOME AND CARREST COLOR

All establishments covered by Part 1904 must complete this Summary page, even if no injuines or Illnesses occurred during the year. Remember to review the Log to verify that the entries are complete Summary of Work-Related Injuries and Illnesses

Using the Log, count the individual entites you made for each category. Then write the totals below, making sum you've added the entites from every page of the log. If you had no casses with "0,"

Employees farmer employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1504-35, in OSHA's Recordisesping rule, for further details on the access provisions for these forms.

Total number of days away from	Number of Days	(G)	Total number of deaths	Number of Cases
		(H)	Total number of cases with days away from work 2	A
Total number of days of job transfer or restriction		(1)	Total number of cases with job transfer or restriction 5	MANAGEMENT AND PARTY
		S	Total number of other recordable cases	Control of the Control

(1) Injury(2) Skin Disorder(3) RespiratoryCondition Injury and Illness Types Total number of... 3 (4) Polsoning (5) Hearing Loss

(6) All Other Illnesses

38

195

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burdon for this code/clon of Information is definated to enverage 59 minutes user responses trobusing firms to review the independence of the control of t

 Establishment Information
 Your establishment ridme   Woodouth Construction, LLC
 Sines: 1890 Kounty Lane
 City Fell Dedge State UA Zip 50501
 Industry description (e.g., Manufacture of motor buck irahers) Construction
 Standard industrial Classification (SiO), if known (e.g., SiO 3715)
 OR North American industrial Classification (NAICS), if known (e.g., 339212)
Employment information
 Annual everage number of employees 179
 Total hours worked by all employees last
Sign here
Knowingly falaitying this document may result in a fine.
carrily that I have exemined this document and that to the bost of my knowledge the entries are true, eccurate, and complete.

### OSHA's Form 300 (Rev. 01/2004)

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Occupational Safety and Health Administration U.S. Department of Labor Year 2017

Woodruff Construction

Form approved OMB no. 1218-0176

Establishment name

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criterial isleed in 29 CFR 1904 8 through 1904 12. Feet free to use two lines for a single case if you need to. You must complete an unity and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA Case No number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do Persons are not required to respond to the collection of information unless it displays a currently valid OMB control to review the instruction, search and gather the data needed, and complete and review the collection of information not send the completed forms to this office Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time Identify the person Employee's Name (C) Job Title (e.g., Construction W 3/28/17 Construction W(3/28/17 Welder) 10/16/17 injury or onset of (mo./day) Date of illness 0 Where the event occurred (e.g. outside at Mechanico site Hallway at Indian Hills Loading dock north end) Frank Harding Building Œ Describe the case Describe injury or illness, parts of body affected, and object/substance that directly injured or made person il (e.g. Second degree burns on right shoulder strain from setting a CMU door employee tripped on a rafter falling on his left arm and straining his left shoulder low back strain from lying and lifting rebar forearm from acetylene torch) Be sure to transfer these totals to the Summary page (Form 300A) before you post it Ŧ Page totals CHECK ONLY ONE box for each case based on the most serious outcome for that case: Death Classify the case <u>(G</u> 0 Days away from work Î or restriction Job transfer Remained at work Other record-Fort Dodge able cases Page 3 Enter the number of days the injured or III worker was: 1 of 1 (days) Work From 3 restriction transfer or On job (days) 122 10 104 Check the "injury" column or choose one type of 3 3 Injury 3 Injury Skin Disorder (2) 2 Skin Disorder Respiratory Respiratory 3 3 Condition Condition Poisoning (4) Poisoning D G Hearing Loss (5) Hearing Loss All other illnesses (6) All other illnesses 6

## Summary of Work-Related Injuries and Illnesses OSHA's Form 300A (Rev. 01/2004)

U.S. Department of Labor Occupational Safety and Health Administration Year 2017

Form approved OMB no 1218-0176

All aslablishments covered by Part 1904 must complete this Summary page, even if no injunes or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the  $\log$ . If you had no cases write " $\Omega$ ."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirely. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904 35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### (1) Injury(2) Skin Disorder(3) RespiratoryCondition Injury and Illness Types deaths days away from Number of Days Number of Cases Total number of... Total number of Total number of (<u>S</u> (G) 0 30 away from work cases with days Total number of Total number of cases (6) All Other Illnesses (4) Poisoning(5) Hearing Loss restriction with job transfer or job transfer or restriction Total number of days of F 122 3 other recordable cases Total number of 0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is outlinated to preside 35 minuties per response, including time to reside with indiruction, search and such and the state nucleid, and complete and covere 30 sectionation of information in Passays are until required to respond to the collection of information infests it applies the state nucleid and collection of information infests it inscripts a ententing with OME continuation interest. If you have any convented stated these certificates or any seprency of this data addressed, ISS Department of Labor. Citi its Otion of Statistics. Room 14-364. (30 Consistering No. NW. Wardmotion, DC 20210. Do not send the completed forms to this office.

Establishment information	
Your establishment name Woodruif Construction, LLC	
Street 1890 Kountry Lane	
City Fort Dodge State IA Zip 50501	
Industry description (e.g., Manufacture of motor truck trailers)  Construction	
Standard Industrial Classification (SIC), if known (e.g., SIC 3715)	
OR North American Industrial Classification (NAICS), if known (e.g., 336212)	
2 3 6 2 2 0	
Employment information	
Annual average number of employees 164	
Total hours worked by all employees last year 317858	
Sinn here	
Knowingly falsifying this document may result in a fine.	
I cardly that Arrive examined this document and that to the best of my knowledge the entries are true, accurate, and	
Mr. Company oraculino	
115/18	

## OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses

to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Attention: This form contains information relating

U.S. Department of Labor Year 2016

Occupational Safety and Health Administration Form approved OMB no. 1218-0176

Establishment name

Woodruff Construction

You must record information about every work-related injury or illness that involves loss of consciousness, rostricted work activity or job transfer, days away from work, or medical freelment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 28 CFR 1904 8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA not send the completed forms to this office Case No. Identify the person Employee's Name (B) Welder Laborer Laborer Construction W 2/9/16 Job aborer Title Welder) (e.g 9/1/16 6/28/16 3/25/16 2/10/16 1/19/16 10/17/16 (D)
Date of injury or onset of (mo\_/day) iliness Where the event occurred (e.g. Loading dock north end) Uofi Children's Hospital Southern Point Apartments Altoona Elementary Fort Dodge Office Parking Lot Tiffin Warehouse Repetitive Use Country Maid Ē Describe the case beam dropped crushing right pinky finger slip on ice, fell on salt bucket, fracture to left rib Puncture to the left index finger from nail Carpel tunnel to both hands person ill (e.g. Second degree burns on right and object/substance that directly injured or made Describe injury or illness, parts of body affected. contusion from masonite falling on right leg twisted left knee while climbing down ladder laceration to right wrist by conduit bracket forearm from acetylene (orch) Be sure to transfer these totals to the Summary page (Form 300A) before you post it. Î Page totals the most serious outcome for that case: Classify the case Death CHECK ONLY ONE box for each case based on (G) 0 from work  $\Xi$ City or restriction Job transfer Remained at work able cases Other record-Fort Dodge Page 3 Enter the number of days the injured or ill worker was: 1 of 1 (days) From Away Work 33 3 transfer or restriction On job (days) 98 4 169 14 Check the "injury" State 3 ×3 Injury 3 Skin Disorder Skin Disorder (2) Respiratory Respiratory column or choose one type of 3 Condition iliness: Condition Poisoning Poisoning 0 (4) Z Hearing Loss 3 Hearing Loss 0 All other illnesses 6 (6) All other illnesses

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control. Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do number. If you have any comments about these estimates or any aspects of this data collection, contact: US

### OSHA's Form 300A (Rev. 01/2004)

# Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor Occupational Safety and Health Administration Form approved ONIB no. 1218-0177

Year 2016

All establishments covered by Part 1904 must complete this Summary page, even if no injunes or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete

Using the Log, count the individual entries you made for each category. Than write the totals below, making sure you've added the entries from every page of the log. If you had no cases write 'O.'

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.
SHA Form 300 in ee 29 CFR r (hese forms.

	MONTH STORY SOUTH		STATE OF THE PERSON NAMED IN COLUMN TWO
Total number of deaths	Total number of cases with days	Total number of cases with job transfer or	Total number of other recordable
0	away from work	restriction 6	cases 0
(G)	(H)	(1)	(J)
Number of Days			
Total number of days away from		Total number of days of job transfer or restriction	
33	,	169 (L)	•
injury and illness Types	Types		
Total number of (M)			
(1) injury	7	(4) Poisoning	0
<ul><li>(2) Skin Disorder</li><li>(3) Respiratory</li></ul>	0	(5) Hearing Loss	0
Condition	0	(6) All Other Illnesses	0

# Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting builden for this collection of information is estimated to avorage 58 minutes per response, including firme to testion the instruction, search and patter, the data needed, and complete and energy the objection of information. Persons as an one required to respond to the collection of information unless at displays a currently valid OHA control number of IV and have any commonities before sestimates or any aspects of this data collection, contact. USO popularized collection contact. The collection of Control of United Vision and Control of Unite

Learlify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete  5/5-2324585	Annual average number of employees 155  Tolal hours worked by all employees last year  year  Sign here	Standard industrial Classification (SIC), if known (e.g., SIC 3715)  OR North American Industrial Classification (NAICS), if known (e.g., 335212)  Employment information	Your establishment information  Your establishment name Woodnuff Construction, LLC  Street 1990 Kountry Lane  City Fort Dedge State IA 27p 50501  Industry description (e.g., Manufacture of motor truck trailiers)
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### OSHA's Form 300 (Rev. 01/2004)

## Log of Work-Related Injuries and Illnesses

Attention: This form contains information telating to emboyee health and must be used in a manner that projects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

U.S. Department of Labor Occupational Safety and Health Administration Year 2015

Form approved OMB no. 1218-0176

Public recording buttern for this collection of information is estimated to average 41 in nuture per recording under to review the manufactor, expects and patient the data meeted, and complete and review the proceedings of information. Pressors are not expursed to respond to the controlled of information includes all data apis a currently valid of AGE patient humber. If you make any comments about these satimations or any aspects of this data polycition contacts. US Department of Jahry Cystia, Orien of Stimuletes, Facern 44, 1544, 2011 Constitution Aver, NW, Washington, EC 20210, no not send the complete forms to this office. You must excord information about every work-veilabid injury or illness that involves loss of controllouriess, restricted vork-batiety or job featings along from work, or marked featings to beyond first about your resolution injuries and linesses that are disproved by a physician or lesses death care professional. You must also record work-related injuries and finances, that made any of the greatific recording criteria "says for Re 1984, if morph 1994, 12. Feet feet to say has feet a single case if you need it. You must consider a ningle case injuries and interest ended to some figure or injury or illness considered on the form. If you're not sure whether a case is recordable, call your lock CSHA office for help Case (A) Identify the person (B) Employee's Name Job Tife (e.g., Weider) Warchouse aborer Crane Open aborer 6/11/2015 Date of injury or onset of illness (ma./day) Ô Greene County Medical Cente Cedar Rapids Washington High Loading dock north end) Where the event occurred (e.g. Sawyer Elemenlary, Ames incoln Way, Ames, IA Lincoln Way, Ames, IA  $\widehat{\mathbb{D}}$ Describe the case Ames Describe injury or illness, parts of body affected, and object/substance that directly injured or made person it (e.g. Second degree burns on right forearm from acetylene forch) culting door frame in garbage container and one of the end cut him giving him a faceration to right inside forearm. Incrwing a piece of plaster into the dumpster and hit left elbow causing a laceration lolling card through door the cabinet caught and pushed back onto his finger causing a laceration that the laceration is the state of the st truck with trailer he was driving was rearended by a CIT bus, sustained back and neck pain/strain to his right index finger employse was unloading a concrete light pole when it rolled and tripped him and rolled over his truck with trailer he was a passenger in was rearended by a CIT bus, sustained back and Be sure to transfer these totals to the Summary page (Form 300A) before you post it. Ē Page totals CHECK ONLY ONE box for each case based on the most serious putcome for that case: Classify the case Death (G) Days away from work I Job transfer or restriction Establishment name Remained at work 3 Other record-able cases Fort Dodge Page Enter the number of days the injured or if 1 of 1 worker was: (days) From Work 3 On job transfer or restriction (days) 15 96 59 175 Woodruff Construction, LLC State Chack the "injury" column or choose one type 3 Injury 3 3 Injury Skin Disorder (2) Skin Disorder Respiratory 3 of illness. (3) Condition Condition E Poisoning (4) Poisoning D G Heaning Loss (5) Hearing Loss All other illnesses 6) All other illnesses

## OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Occupational Safety and Health Administration U.S. Department of Labor

Form approved OMB no 1218-0178

Year 2015

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write '0." All aslablishments covered by Part 1904 must complete this Surmnary page, even if no injunes or ilinesses occurred during the year. Remember to review the Log to verify that the entries are complete.

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	113		
	175		17
	job transfer or restriction		days away from
	Total number of days of		Total number of
	Ξ	3	(G) Number of Days
	3	1	0
cases	restriction	away from work	
other recordable	with job transfer or	cases with days	deaths
Total number of	Total number of cases	Total number of	Total number of

### 00 (4) Poisoning(5) Hearing Loss (6) All Other Illnesses

(1) Injury(2) Skin Disorder(3) RespiratoryCondition

Total number of...

Injury and Illness Types

# Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 59 minutes per response, including time to review the instruction search and gather the data needed, and complete and toxists the collection of information. The gates are not resulted to respond to the collection of information missast in detailed a currently acted OMB contribution further any conversel about linear a satisfiate as the analysis of collection collection, control USC personance. USC approximation of tabor, OSHA Clifica of Statistics, Floram N-36-44, 200 Constitution Ave. NW. Wastington, DC 20210. Do not send the controlled forms to this office of tabor, OSHA Clifica of Statistics, Floram N-36-44, 200 Constitution Ave. NW. Wastington, DC 20210. Do not send the controlled forms to this office.

Phone	Сотрапу ехасцііve	I certify that I have examined this document and that to the best of my knowledge the entities are true, accurate, and complete.	Knowingly falsifying this document may result in a fine.	Sign here	Talsi hours worked by all employees last 247,206	Annual average number of employees 132	Employment information	NAMES AND ADDRESS	OR North American Industrial Classification (NAICS), if known (e.g., 396212)	Standard industrial Classification (SIC), if known (e.g., SIC 3715)	Industry description (e.g., Manufacture of motor truck trailers)  Construction	City Fort Dodge State IA	Street 1890 Kountry Lane	Your establishment name Woodruff Construction, LLC	Establishment information
Date	Time	ue, accurate, and										Zip 50501			

2020

No citations

2019

Citation 1416799

Citation 1 – Asbestos Work was not conducted within regulated areas. The employer did not use engineering controls and work practices in all operations covered. Resilient flooring material including associated mastic and backing were not assumed to be asbestos containing. The employer did not inform employees who performed work under 1926.1101 of the location and quantity of asbestos containing material and/or presumed asbestos containing material present in the area. **Other-than-Serious** 

Corrective Action – work was stopped and completed according to regulations

Citation 2 – Labels were not affixed to all products containing asbestos and to all containers containing such products, including waste containers. **Other-than-Serious**Corrective Action – Waste containers were labeled and disposed of appropriately.

2018

Citation 1335522

Item 1 – Stated the employer did not instruct each employee in the recognition or avoidance of unsafe conditions. Woodruff only used certified crane operators and certified riggers for this operation. **Other-than-Serious**Corrective action - Retraining was done for rigging as well as additional employees were trained in rigging.

Item 2 – Structural stability was not maintained at all times. **Other-than-Serious**Corrective Action - Retraining was done for rigging as well as additional employees were trained.

2017

Citation 1228032

Citation 1 Item 1 – IAC 875 – Chapter 26 1926.501(b)(1): Each employee on walking/working surface with an unprotected side or edge which was 6 feet or more above lower level was not protected from falling by the use of guardrail systems, safety net systems or personal fall arrest systems: (a) Shower Building and Storm Shelter – The employer did not ensure adequate fall protection system was provided while employees were engaged in various activities such as, but not limited to, cement form work while on the upper level of block wall. This condition exposed employees to a possible fall hazard of approximately 8' to ground level below and was observed on or about 4/25/17. Other-than-Serious

Corrected by disciplinary action for those employees that were not using their fall arrest systems as directed by the Supervisor

2016

None

### WOODRUFF CONSTRUCTION, LLC BALANCE SHEET December 31, 2017

### **ASSETS**

Current Assets Cash	\$ 7,355,164
Contracts receivable, including retentions of \$ 3,045,060, net allowance for doubful accounts	18,463,213
\$197,000 Available for sale securities	1,331,994 224,219
Prepaid expenses  Excess costs and estimated earnings over billings on	
uncompleted projects  Total current assets	\$ 27,574,676
Property and equipment, net of accumulated	0.000.077
depreciation of \$4,732,151	2,089,077 90,313
Other investments	174,781
Other receivables, net allowance for doubtful account \$ 253,000	\$ 29,928,847
Total assets	<u> </u>
LIABILITIES AND MEMBERS' EQUITY	
Current Liabilities	
Accounts payable	\$ 14,124,741
Accrued expenses	212,347
Accounts payable-Affiliate	35,800
Excess billings over costs and estimated earnings	10,017,617
on uncompleted contracts  Current portion long-term debt	91,173
Total current liabilities	\$24,481,678
Total dallette liabilities	
Long-term Liabilities	284,440
Notes payable, net of current portion  Total liabilities	\$24,766,088
LOGII HADIIILIES	<del>+= .,, 00,000</del>
Member's equity	5,162,759
Total liabilities and members' equity	\$29,928,847

3

The accompanying notes are an integral part of these financial statements.

### Woodruff Construction, LLC Balance Sheets As of December 31, 2018 and 2017

2018 2017	\$ 5,101,962 \$ 7,355,164 12,179,330 18,463,213 57,990 -	718,351 200,086 257,806 224,219 18,315,439 26,242,682	4,374,9263,937,7212,266,2442,038,763620,152601,686243,058243,0587,504,3806,821,2285,260,0704,732,1512,244,3102,089,077	273,463 1,331,994 174,781 174,781 65,921 90,313 514,165 1,597,088
A scots	t assets sh and cash equivalents atracts receivables, net ner receivables	Costs and estimated earnings in excess of billings on uncompleted contracts  Prepaid expenses  Total current assets	Property and equipment  Machinery and equipment  Vehicles  Office equipment  Leasehold improvements  Total  Less accumulated depreciation  Net property and equipment	Other assets Investments Contract receivables - long-term, net Other investments Total other assets

### Woodruff Construction, LLC Balance Sheets As of December 31, 2019 and 2018

	2019	2018
Assets		
Current assets		
Cash and cash equivalents	\$ 2,719,855	\$ 5,101,962
Contracts receivables, net	12,622,557	12,179,330
Other receivables	57,990	57,990
Contract asset	494,328	718,351
Prepaid expenses	308,098	257,806
Total current assets	16,202,828	18,315,439
Property and equipment		1071006
Machinery and equipment	4,684,944	4,374,926
Vehicles	2,420,349	2,266,244
Office equipment	652,971	620,152
Leasehold improvements	243,058	243,058
Total	8,001,322	7,504,380
Less accumulated depreciation	5,837,537	5,260,070
Net property and equipment	2,163,785	2,244,310
Others	>	
Other assets	256 292	273,463
Investments	256,283 377,781	174,781
Contract receivables - long-term, net	84,540	65,921
Other investments	718,604	514,165
Total other assets	/18,004	314,103
Total assets	\$ 19,085,217	\$ 21,073,914
Liabilities and Members' Equity		
Current liabilities		
Current maturities of long-term debt	\$ 87,819	\$ 88,616
Accounts payable	11,198,080	13,476,120
A STATE OF THE STA	181,951	192,357
Accrued expenses Distribution payable	352,000	172,337
Contract liabilities	2,823,236	2,857,280
Total current liabilities	14,643,086	16,614,373
Total current machines	14,043,080	10,014,373
Long-term debt	107,998	195,812
Members' equity		
Members' equity	4,334,133	4,156,633
Accumulated other comprehensive income	-	107,096
Total members' equity	4,334,133	4,263,729
Total monitorio oquity	.,	
Total liabilities and members' equity	\$ 19,085,217	\$ 21,073,914
		2

See notes to the financial statements.

1920 Philadelphia St, Ste 102 | Ames, IA 50010 Ph: (515) 232-4535 Fax: (515) 232-4538

### PROPOSED SUBCONTRACTORS

Dans Overhand Doors
Color Inc.
Pleva Mechanical
Craiser Electric

### DAMAGES FORM



### **SECTION 00 43 50**

### **BID BOND**

Any singular reference to Bidder, Surety, Owner, or other party shall be considered plural where applicable.

BIDDER (Name and Address): Woodruff Construction, LLC 1890 Kountry Lane Fort Dodge, IA 50501
SURETY (Name, and Address of Principal Place of Business): United Fire & Casualty Company P.O. Box 73909 Cedar Rapids, IA 52407-3909
OWNER (Name and Address): Metro Waste Authority 300 East Locust Street, Suite 100 Des Moines, IA 50309
BID
Bid Due Date: May 15, 2020 Description (Project Name—Include Location): MWA Cold Storage Building 1 Retrofit, Mitchellville, Iowa
DOND
BOND Bond Number: Bid Bond
Date: April 29, 2020
Penal sum Five Percent of the Total Amount Bid \$ 5%
(Words) (Figures)
Surety and Bidder, intending to be legally bound hereby, subject to the terms set forth below, do each cause this Bid Bond to
be duly executed by an authorized officer, agent, or representative.
BIDDER SURETY
Woodruff Construction, LLC (Seal) United Fire & Casualty Company (Seal)  Bidder's Name and Corporate Seal Surety's Name and Corporate Seal
Sufery's Name and Corporate Sear
By: Inc. o Kalaku 1922 By:
Signature (Attach Power of Attorney)
Signature (Attach Fower of Attorney)
Jason Rechtemmer Anne Crowner
Print Name Print Name
Finit Name
COO Attorney-in-Fact
Title Title
Title 1
Attest: Attest: Attest:
Signature Signature
Project ASSISTANT Dione R. Young, Witness to Surety
Title Title
Note: Addresses are to be used for giving any required notice.
Provide execution by any additional parties, such as joint venture's, if necessary.
1 Tortae execution by any additional parties, such as folia venture s, if necessary.
FICDC® C-435. Bid Bond (Damages Form). Published 2013.
FICIAL CASS. DIG DODG HAMAPES FORMS, PUBLISHED 2015.

### DAMAGES FORM



- 1. Bidder and Surety, jointly and severally, bind themselves, their heirs, executors, administrators, successors, and assigns to pay to Owner upon default of Bidder any difference between the total amount of Bidder's Bid and the total amount of the Bid of the next lowest, responsible Bidder that submitted a responsive Bid as determined by Owner for the work required by the Contract Documents, provided that:
  - 1.1 If there is no such next Bidder, and Owner does not abandon the Project, then Bidder and Surety shall pay to Owner the penal sum set forth on the face of this Bond, and
  - 1.2 In no event shall Bidder's and Surety's obligation hereunder exceed the penal sum set forth on the face of this Bond.
  - 1.3 Recovery under the terms of this Bond shall be Owner's sole and exclusive remedy upon default of Bidder.
- 2. Default of Bidder shall occur upon the failure of Bidder to deliver within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents.
- 3. This obligation shall be null and void if:
  - 3.1 Owner accepts Bidder's Bid and Bidder delivers within the time required by the Bidding Documents (or any extension thereof agreed to in writing by Owner) the executed Agreement required by the Bidding Documents and any performance and payment bonds required by the Bidding Documents, or
  - 3.2 All Bids are rejected by Owner, or
  - 3.3 Owner fails to issue a Notice of Award to Bidder within the time specified in the Bidding Documents (or any extension thereof agreed to in writing by Bidder and, if applicable, consented to by Surety when required by Paragraph 5 hereof).
- 4. Payment under this Bond will be due and payable upon default of Bidder and within 30 calendar days after receipt by Bidder and Surety of written notice of default from Owner, which notice will be given with reasonable promptness, identifying this Bond and the Project and including a statement of the amount due.
- 5. Surety waives notice of any and all defenses based on or arising out of any time extension to issue Notice of Award agreed to in writing by Owner and Bidder, provided that the total time for issuing Notice of Award including extensions shall not in the aggregate exceed 120 days from Bid due date without Surety's written consent.
- 6. No suit or action shall be commenced under this Bond prior to 30 calendar days after the notice of default required in Paragraph 4 above is received by Bidder and Surety and in no case later than one year after the Bid due date.
- 7. Any suit or action under this Bond shall be commenced only in a court of competent jurisdiction located in the state in which the Project is located.
- 8. Notices required hereunder shall be in writing and sent to Bidder and Surety at their respective addresses shown on the face of this Bond. Such notices may be sent by personal delivery, commercial courier, or by United States Registered or Certified Mail, return receipt requested, postage pre-paid, and shall be deemed to be effective upon receipt by the party concerned.
- 9. Surety shall cause to be attached to this Bond a current and effective Power of Attorney evidencing the authority of the officer, agent, or representative who executed this Bond on behalf of Surety to execute, seal, and deliver such Bond and bind the Surety thereby.



### **DAMAGES FORM**

- 10. This Bond is intended to conform to all applicable statutory requirements. Any applicable requirement of any applicable statute that has been omitted from this Bond shall be deemed to be included herein as if set forth at length. If any provision of this Bond conflicts with any applicable statute, then the provision of said statute shall govern and the remainder of this Bond that is not in conflict therewith shall continue in full force and effect.
- 11. The term "Bid" as used herein includes a Bid, offer, or proposal as applicable.

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### UNITED FIRE & CASUALTY COMPANY, CEDAR RAPIDS, IA UNITED FIRE & INDEMNITY COMPANY, WEBSTER, TX FINANCIAL PACIFIC INSURANCE COMPANY, ROCKLIN, CA

**Inquiries: Surety Department** 118 Second Ave SE Cedar Rapids, IA 52401

### CERTIFIED COPY OF POWER OF ATTORNEY

(original on file at Home Office of Company – See Certification)

KNOW ALL PERSONS BY THESE PRESENTS, That UNITED FIRE & CASUALTY COMPANY, a corporation duly organized and existing under the laws of the State of Iowa; UNITED FIRE & INDEMNITY COMPANY, a corporation duly organized and existing under the laws of the State of Texas; and FINANCIAL PACIFIC INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of California (herein collectively called the Companies), and having their corporate headquarters in Cedar Rapids, State of Iowa, does make, constitute and appoint

CRAIG E. HANSEN, JAY D. FREIERMUTH, BRIAN M. DEIMERLY, CINDY BENNETT, ANNE CROWNER, TIM MCCULLOH, STACY VENN, SHIRLEY BARTENHAGEN, DIONE R. YOUNG, KEVIN J. KNUTSON, MICHELLE GRUIS, KATHLEEN BREWER, SETH D. ROOKER, SYDNEY BURNETT, EACH INDIVIDUALLY

their true and lawful Attorney(s)-in-Fact with power and authority hereby conferred to sign, seal and execute in its behalf all lawful bonds, undertakings and other obligatory instruments of similar nature provided that no single obligation shall exceed \$100,000,000.00 and to bind the Companies thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Companies and all of the acts of said Attorney, pursuant to the authority hereby given and hereby ratified and confirmed.

The Authority hereby granted is continuous and shall remain in full force and effect until revoked by UNITED FIRE & CASUALTY COMPANY, UNITED FIRE & INDEMNITY COMPANY, AND FINANCIAL PACIFIC INSURANCE COMPANY.

This Power of Attorney is made and executed pursuant to and by authority of the following bylaw duly adopted on May 15, 2013, by the Boards of Directors of UNITED FIRE & CASUALTY COMPANY, UNITED FIRE & INDEMNITY COMPANY, and FINANCIAL PACIFIC INSURANCE COMPANY. "Article VI - Surety Bonds and Undertakings"

Section 2, Appointment of Attorney-in-Fact. "The President or any Vice President, or any other officer of the Companies may, from time to time, appoint by written certificates attorneys-in-fact to act in behalf of the Companies in the execution of policies of insurance, bonds, undertakings and other obligatory instruments of like nature. The signature of any officer authorized hereby, and the Corporate seal, may be affixed by facsimile to any power of attorney or special power of attorney or certification of either authorized hereby; such signature and seal, when so used, being adopted by the Companies as the original signature of such officer and the original seal of the Companies, to be valid and binding upon the Companies with the same force and effect as though manually affixed. Such attorneys-in-fact, subject to the limitations set forth in their respective certificates of authority shall have full power to bind the Companies by their signature and execution of any such instruments and to attach the seal of the Companies thereto. The President or any Vice President, the Board of Directors or any other officer of the Companies may at any time revoke all power and authority previously given to any attorney-in-fact.

> IN WITNESS WHEREOF, the COMPANIES have each caused these presents to be signed by its vice president and its corporate seal to be hereto affixed this 15th day of January, 2014







UNITED FIRE & CASUALTY COMPANY UNITED FIRE & INDEMNITY COMPANY FINANCIAL PACIFIC INSURANCE COMPANY

By:

Vice President

State of Iowa, County of Linn, ss:

On 15th day of January, 2014, before me personally came Dennis J. Richmann

to me known, who being by me duly sworn, did depose and say; that he resides in Cedar Rapids, State of Iowa; that he is a Vice President of UNITED FIRE & CASUALTY COMPANY, a Vice President of UNITED FIRE & INDEMNITY COMPANY, and a Vice President of FINANCIAL PACIFIC INSURANCE COMPANY the corporations described in and which executed the above instrument; that he knows the seal of said corporations; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporations and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporations.



Judith A. Jones Iowa Notarial Sea Commission number 173041 My Commission Expires 04/23/2021

Notary Public

My commission expires: 04/23/2021

I, Mary A. Bertsch, Assistant Secretary of UNITED FIRE & CASUALTY COMPANY and Assistant Secretary of UNITED FIRE & INDEMNITY COMPANY, and Assistant Secretary of FINANCIAL PACIFIC INSURANCE COMPANY, do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the bylaws and resolutions of said Corporations as set forth in said Power of Attorney, with the ORIGINALS ON FILE IN THE HOME OFFICE OF SAID CORPORATIONS, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

In testimony whereof I have hereunto subscribed my name and affixed the corporate seal of the said Corporations 2020 .

29th April this day of

1986

Mary A Bertsch

Assistant Secretary, UF&C & UF&I & FPIC

MIIIIIIII SEAL





May 20, 2020

Judi Mendenhall
Director of Recycling and Diversion
Metro Waste Authority
1105 Prairie Dr. SW
Bondurant, Iowa 50035
jme@mwatoday.com

Judi,

Thank you for the opportunity to submit our recommendation to award for the Cold Storage MPE Conversion. We have attached the original budget presented in October 2019 with a summary of the contractor bids accepted on May 15, 2020 at the MWA office.

- i. Formation Group published the bid documents on April 20<sup>th</sup>, 2020. We also solicited interest from the following firms:
  - a. Henning Companies
  - b. Absolute Group
  - c. Buresh Buildings
  - d. Jensen Builders
  - e. Woodruff Construction
  - f. Estes Construction
- ii. Three sealed, competitive proposals were received at the MWA office on May 15, 2020 and opened in a public forum.
  - a. Those in attendance were:
    - i. Ben Hayes (Formation Group)
    - ii. Austin Broshar & Garrett Williams (HDR Engineering)
    - iii. Judi Mendenhall (MWA)
  - b. Those that submitted bids were:
    - i. Woodruff Construction
    - ii. Accurate Commercial
    - iii. K. Johnson Construction
- iii. The budget summary detailed one sequence of work and a two-mobilization sequence pending budget availability. It is our recommendation to complete the work in one sequence which is consistent with the bids received.
- iv. Formation Group recommends proceeding with Woodruff Construction for the total sum of \$827,300. Woodruff presented two (2) alternates for your consideration:
  - a. Omit Office & Bathroom: Deduct of \$29,700

b. Provide new building framing/structure in lieu of modifying existing framing/structure: Deduct of \$10,000.

Please let us know how the Board wishes to proceed.

Thank you.

Matt Brown, AIA

President

### **Cold Storage Building 1 MPE Conversion**

### **Construction Bid Summary May 15, 2020**

Category	Woodruff		Accurate		K Johnson	
Demo Costs						
Remodel and Repurpose Costs	\$ 827,300	\$	930,200	\$	996,021	
General Conditions	\$ 164,300	\$	406,300	\$	294,355	
Site Superintendant and PM	INC	INC		INC		
Concrete Foundation and Floor	\$ 191,300	\$	149,700	\$	177,600	
Roof, Siding, Insulation, Doors	\$ 317,530	\$	152,065	\$	325,279	
Interior Construction and Specialties	\$ 21,700	\$	91,800	\$	43,528	
Mechanical, Electrical, Plumbing	\$ 132,470	\$	130,335	\$	155,259	
Sub-TOTAL Project Construction	\$ 827,300	\$	930,200	\$	996,021	