CITY OF WALTHAM

REQUEST FOR PROPOSALS FOR DEMOLITION OF BUILDING AND APPURTENANCES AT 476-486 MAIN STREET WALTHAM, MASSACHUSETTS

I. INTRODUCTION

The City of Waltham acquired multiple parcels- 476 and 486 Main Street and 9 Newton Street, Waltham, MA for the purpose of creating more parking for the existing senior center at 488 Main Street, Waltham, MA.

The site at 476 Main Street contains a former repair/gas station building. The sites at 486 Main Street and 9 Newton Street are vacant. (See attached Exhibit A and B)

The City is seeking to demolish the building at 476 Main Street, remove some ancillary fixtures and signs on the site and adjacent sites and remove the fence between 486 and 488 Main Street.

Environmental studies were undertaken by the prior owner and the City of Waltham. The prior owner performed remediation and filings with regard to the gas station site. Information regarding said studies and abatement are available in the Purchasing Department of the City of Waltham, 610 Main Street, Waltham, MA. (Woodard & Curran, Phase I Environmental Site Assessment Report, 9 Newton Street and Rear 486 Main Street, Waltham, MA, December 2014; Woodard & Curran, Phase I and II Environmental Site Assessment Report 9 Newton Street and Rear 486 Main Street, Waltham, MA, December 2013; and Cooperstown Environmental, Phase I Environmental Site Assessment 476-486 Main Street, Waltham, MA, February 2016).

II. SCOPE OF SERVICES

- A. The successful bidder will be required, at its sole cost and expense, to:
 - 1. Obtain any and all permits to demolish the building, fence and any ancillary fixtures.
 - 2. Obtain any and all approvals from utility companies to disconnect any utilities to or from the building.
 - 3. Do any and all filings, if required by any local, state or federal authorities.

- 4. Secure the site in a safe manner.
- 5. Pre-bait the site for rodents prior to the demolition and/or excavation.
- 6. Perform any environmental abatement, if necessary, to take down the building, fence, ancillary fixtures, etc.
- 7. Remove and properly dispose of any and all construction debris and pavement.
- 8. Leave the site in a clean condition.
- 9. Construction access to the site will only be from 9 Newton Street. There will be no access from Main Street due to the new sidewalks.
- 10. All functions related to the demolition of the building will be the responsibility of the successful bidder.

III. QUALIFICATIONS

Licensed building contractor, proof of demonstrated experience with building demolition and abatement.

IV. REQUIRED SUBMISSION

- 1. General Liability insurance in the amount of \$ 3,000,000.00 , worker's comp and automobile insurance.
- 2. Name, address and contact information of all MA governmental units to which the Proposer has provided similar projects.
- 3. The name, address, contact person's name and telephone number of all private sector clients to which the proposer has provided similar demolition consulting services and a brief synopsis of the services provided, including contract dates.
- 4. Resumes of key personnel who will be interacting with the City including a statement of professional experience, qualifications and education together with a report of specific experience related to the scope of services.
- 5. A Plan of Services detailing specifically how the proposer will complete the Scope of Work.
- 6. A completed Certificate of Non-Collusion.
- 7. A complete Certificate of Tax Compliance.
- 8. Corporation Vote Authorization, Corporation Identification and Non-Collusion Certificate.

- 9. The project shall be **completed 90 days** from the date of the Notice-to-Proceed.
- VI. A pre-bid meeting and site inspection will be held at 11.30 am September 15, 2016
 Two (2) copies of the Demolition Services Proposals shall be submitted in sealed envelopes with Proposer's name and clearly labeled "Demolition Services Proposals for Building located at 476-486 Main Street, fence and ancillary fixtures".

The Proposals will be evaluated based upon price. Draft contract attached.

All proposals must comply with Chapter 30B of Massachusetts General Laws. All proposals are subject to funding. The City reserves the right to accept or reject any or all proposals and to make awards as it determines to be in the best interest of the City.

Any questions pertaining to this Request for Proposal are to be directed to Joseph Pedulla, MCPPO, CPM, Purchasing Agent, City of Waltham, City Hall, 610 Main Street, Waltham, MA 02452, Tel. 781-314-3244, Email: jpedulla@city.waltham.ma.us.

VII. PREVAILING WAGES.

The Contractor is required to pay the prevailing wages as determined under the provisions of Chapter 149, Sections 26 and 27D of the Massachusetts General Laws, including the submission of weekly payrolls to the awarding authority. The prevailing wage schedule is too large to attach here. It can be found in the City of waltham web site at www.city.waltham.ma.us/open-bids

Request for Demolition Services Demolition of Building Located at 476 Main Street, fence and ancillary fixtures

COST EVALUATION FORM

Scope of Work	# of Hours	Task Cost
Task 1 – Obtain Permits, approvals from utility companies, pre-bait site, secure site, perform environmental abatement, if any, filings, if any		
Task 2 – Demolition, Proper Disposal of all construction debris and pavement, etc., Clean Site, obtain final inspections		
	Project Total:	
Prepared for the City of Waltham		
Зу:	Date:	

AGREEMENT

CITY OF WALTHAM

	This agreement, mad			
		arty of the firs	t part, hereinafter call	ed the
CITY, by its MAYO	R, and			
Hereinafter called the	he CONTRACTOR.			

ARTICLE 2. Witnesseth, that the parties to this agreement, each in consideration of the agreement on the part of the others herein contained, do hereby agree, the CITY OF WALTHAM for itself, and said contractor for his heirs, executors, administrators and assigns as follows:

To furnish all equipment, machinery, tools and labor, to furnish and deliver all materials required to be furnished (except as otherwise specified) and deliver in and about the project and to do and perform all work in strict conformity with the provisions of this Contract and of the Notice to Bidders, Bid, Project Manual, and Drawings hereto annexed. The said Notice to Bidders, Bid, Project Manual, documents submitted in response to the bid and Drawings are hereby made a part of this contract as fully and to the same effect as if the same had been set forth at length and incorporated in the contracts.

ARTICLE 3. In consideration of the foregoing premises the CITY agrees to pay and the CONTRACTOR agrees to receive as full compensation for everything furnished and done by the CONTRACTOR under this contract, including all work required but not included in the items herein mentioned, and also for all loss or damage arising out of the nature of the work aforesaid, or form the action of the elements, or from any unforeseen obstruction or difficulty encountered in the prosecution of the work, and for all expenses incurred by or in consequence of the suspension or discontinuance of the work specified, and for well and faithfully completing the work, and the whole hereof, as herein provided, such prices as are set forth in the accompanying bid.

This Agreement entered into as of the day and year first written above.

CITY OF WALTHAM, MASSACHUSETTS

ARE AVAILABLE FOR THIS CONTRACT

FOR THE CITY	FOR THE COMPANY
Jeannette A. McCarthy, MAYOR,	CONTRACTOR (Signature),
City of Waltham	Date:
Date:	Company
	Address
John B. Cervone, City Solicitor Date:	
APPROVED AS TO FORM ONLY	
Joseph Pedulla, Purchasing Agent	
Date:	
Paul Centofanti, Auditor	
Date:	
CERTIFY THAT SUFFICIENT FUNDS	

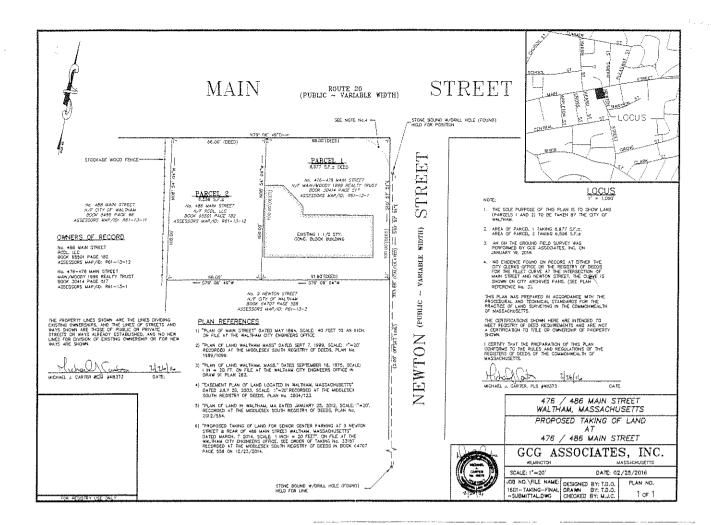
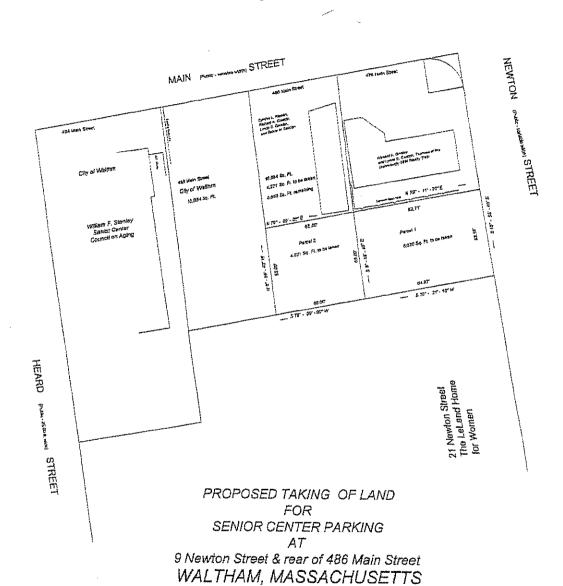


EXHIBIT A

ExhibitA



SCALE: 1 INCH = 20 FEET Stephen A. Casazza, P.E.



October 17, 2012 City Engineer

COMPLIANCE FORMS (PLEASE COMPLETE AND SUBMIT THESE FORMS WITH YOUR RESPONSE)

NON-COLLUSION FORM AND TAX COMPLIANCE FORM

CERTIFICATE OF NON-COLLUSION

The undersigned certifies under penalties of perjury that this bid or proposal has been made and	submitted
in good faith and without collusion or fraud with any other person. As used in this certification,	the word
"person" shall mean any natural person, business, partnership, corporation, union, committee, cl	ub, or other
organization, entity or group of individuals. The undersigned certifies that no representations m	ade by any
City officials, employees, entity, or group of individuals other than the Purchasing Agent of the	City of
Waltham was relied upon in the making of this bid	
(Signature of person signing bid or proposal)Date	
(Name of business)	
TAX COMPLIANCE CERTIFICATION	

Pursuant to M.G.L. c. 62C, & 49A,I certify under t knowledge and belief, I am in compliance with all l of employees and contractors, and withholding and	ws of the Commonwe	ealth relating to taxes, reporting
Signature of person submitting bid or proposal	Date	
Name of business		
NOTE		
Failure to submit any of the required documents, in package may cause the disqualification of your prop		s, with your bid response

CERTIFICATE OF VOTE AUTHORIZATION

Date:		
Ī	, Clerk of	hereby certify
that at a meeting o	of the Board of Directors of said Corporation duly hel	d on the day of
	at which time a quorum was present and voting	throughout, the
following vote was	duly passed and is now in full force and effect:	
VOTED: That	(<i>name</i>) is hereby, authorized, d	irected and empowered
	on behalf of this Corporation to sign, seal with the co	•
-	deliver all contracts and other obligations of this Corp	
	ct to be valid and binding upon this Corporation for a	
	ain in full force and effect unless and until the same	
	ed by a subsequent vote of such directors and a certink of this Corporation.	ificate of such later vote
•	·	
I further certify tha	t is duly elected/appointed _	
	of said Corporation whose signature appear	rs below as an officer
	Signature of Officer	
SIGNED:		
	(Cornor:	ate Seal)
Clerk of the Corpor		ate sealy
Print Name:		
	COMMONWEALTH OF MASSACHUSETTS	
County of	Date:	
Then personally ap	peared the above named and acknowledged the for	egoing instrument to be
	d deed before me, and provided to me through satis	
whose name is sign	h were ned on the preceding or attached document in my pr	resence.
Notary Public;		
•		
My Commission ex	pires:	

CORPORATION IDENTIFICATION

The bidder for the information of the Awarding Authority furnishes the following information. If a Corporation: Incorporated in what state _____ President _____ Treasurer _____ Secretary _____ Federal ID Number If a foreign (out of State) Corporation – Are you registered to do business in Massachusetts? Yes _____, No _____ If you are selected for this work you are required under M.G.L.ch. 30S, 39L to obtain from the Secretary of State, Foreign Corp. Section, State House, Boston, a certificate stating that you Corporation is registered, and furnish said certificate to the Awarding Authority prior to the award. If a Partnership: (Name all partners) Name of partner _____ Residence _____ Name of partner _____ Residence _____ If an Individual: Name _____ Residence If an Individual doing business under a firm's name: Name of Firm _____ Name of Individual _____ Business Address _____ Date Name of Bidder Signature _____ Business Address (POST OFFICE BOX NUMBER NOT ACCEPTABLE) Telephone Number Today's Date City State

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM

Company's Name:		Address	s:							Phone	No.:			Payroll N	lo.:		TUSET?	I EM
																	TOURSEN	3 STATE
Employer's Signature:		Title:								Contra	act No:	Tax Payer II	D Number	Work We	ek Ending:			
Awarding Authority's Name:		Public \	Works I	Project	Name:					Public	Works F	roject Loc	ation:	Min. Wag	ge Rate She	et Number		
General / Prime Contractor's	Name:	Subcon	ntractor	's Nam	e:							"Employer"	Hourly Fring	ge Benefit C	ontributions			
															(B+C+D+E)	(A x F)		
Employee Name & Complete	Work	Employee is OSHA 10	Appr. Rate		ı	Ho	ours Wo	rked	I		Project Hours (A)	Hourly Base Wage	Health & Welfare Insurance	ERISA Pension Plan	Supp. Unemp.	Total Hourly Prev. Wage	Project Gross Wages	Check No.
Address	Classification:	certified (?)	(%)	Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.	Hours	(B)	(C)	(D)	(E)	(F)	Total Gross Wages	(H)
Are all apprentice employee	es identified abo	ve curre	ntly re	gistere	d with	the MA	A DLS's	Divisi	on of A	Appren	tice Stan	dards?		YES		NO		
For all apprentices performing by the Massachusetts Department	artment of Labor	Standa	rds / Di	ivision	of App	rentice	Stand	ards.							apprentices			
NOTE: Pursuant to MGL c. authority by first-class mail																		

Date Received by Awarding Authority

commencement of a criminal action or the issuance of a civil citation.

Page _____

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

In accordance with Massachusetts General Law c. 149, §27B, a true and accurate record must be kept of all persons employed on the public works project for which the enclosed rates have been provided. A Payroll Form is available from the Department of Labor Standards (DLS) at www.mass.gov/dols/pw and includes all the information required to be kept by law. Every contractor or subcontractor is required to keep these records and preserve them for a period of three years from the date of completion of the contract.

On a weekly basis, every contractor and subcontractor is required to submit a certified copy of their weekly payroll records to the awarding authority; this includes the payroll forms and the Statement of Compliance form. The certified payroll records must be submitted either by regular mail or by e-mail to the awarding authority. Once collected, the awarding authority is required to preserve those records for three years from the date of completion of the project.

Each such contractor and subcontractor shall furnish weekly **and** within 15 days after completion of its portion of the work, to the awarding authority directly by first-class mail or e-mail, a statement, executed by the contractor, subcontractor or by any authorized officer thereof who supervised the payment of wages, this form, accompanied by their payroll:

STATEME	NT OF COMPLIANCE
	, 20
Ι,	,
(Name of signatory party)	(Title)
do hereby state:	
That I pay or supervise the pay	yment of the persons employed by
	on the
(Contractor, subcontractor or public body)	(Building or project)
and that all mechanics and apprentices	s, teamsters, chauffeurs and laborers employed on
said project have been paid in accorda	ince with wages determined under the provisions of
sections twenty-six and twenty-seven	of chapter one hundred and forty nine of the
General Laws.	•
Sign	nature
~ -B	e

DEBARMENT CERTIFICATION

In connection with this bid and all procurement transactions, by signature thereon, the respondent certifies that neither the company nor its principals are suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from the award of contracts, procurement or non procurement programs from the Commonwealth of Massachusetts, the US Federal Government and /or the City of Waltham. "Principals" means officers, directors, owners, partners and persons having primary interest, management or supervisory responsibilities with the business entity. Vendors shall provide immediate written notification to the Purchasing Agent of the City of Waltham at any time during the period of the contract of prior to the contract award if the vendor learns of any changed condition with regards to the debarment of the company or its officers. This certification is a material representation of fact upon which reliance will be placed when making the business award. If at any time it is determined that the vendor knowingly misrepresented this certification, in addition to other legal remedies available to the City of Waltham, the contract will be cancelled and the award revoked.

Company Name			
Address			
		, Zip Code	
Phone Number ()			
E-Mail Address			
Signed by Authorized Com	npany Representative:		
	Print na	nme. Date	

10 HOURS OSHA TRAINING CONFIRMATION

Chapter 306 of the Acts of 2004 CONSTRUCTION PROJECTS AN ACT RELATIVE TO THE HEALTH AND SAFETY ON PUBLIC

The undersigned hereby certifies that all employees to be employed at a worksite for construction, reconstruction, alteration, remodeling, repair, installation, demolition, maintenance or repair of any public work or any public building estimated to cost more than \$10,000.00 have successfully completed a course in construction safety and health approved by the United States Occupational Safety and Health Administration that is at least 10 hours in duration at the time the employee begins work and who shall furnish documentation of successful completion of said course with the first payroll report for each employee and will comply with all laws and regulations applicable to awards of subcontracts subject to section 44F.

Company Name:
Address:
Signature:
Title:
Print Name
Date
See following Chapter 306 of the Acts of 2004

NOTE

Failure to submit any of the required documents, in this or in other sections, with your bid response package will be cause for the disqualification of your company.

Fill Out T Section

Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return)			
Je 2.	Business name/disregarded entity name, if different from above			
s on page	Check appropriate box for federal tax classification: Individual/sole proprietor C Corporation S Corporation Partnership	Trust/esta	ate	
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partne	ership) 🕨 _		Exempt payee
2	Other (see instructions) ▶			
See Specific Instructions on	Address (number, street, and apt. or suite no.)	Chief Pr	ster's name and address (option rocurement Officer sing Department, City of Wa	
See S	City, state, and ZIP code	610 Ma	ain Street am, MA 02452	
	List account number(s) here (optional)			
	Taxpayer Identification Number (TIN)			
avo side titie	your TIN in the appropriate box. The TIN provided must match the name given on the "Nam id backup withholding. For individuals, this is your social security number (SSN). However, that alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For others, it is your employer identification number (EIN). If you do not have a number, see How to g	tor a er	Social security number	Fill out this either SS o
	n page 3. If the account is in more than one name, see the chart on page 4 for guidelines on whose		Employer identification nu	ımber

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign & Date

Signature of Here U.S. person ▶

Date >

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Sign

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.