

Bid Proposal Sheet

The prices stated in this bid are guaranteed for 90 days from the date of hereof and if awarded within that period, we agree to complete the work covered by this Bid at said prices.

Division 1 \$ General Requirements

Division 2 \$ Site Construction

Division 11 \$ Equipment

\$ 12,000.00 Overhead & Profit

\$ 2,850.00 Bonds & Insurance (Bid Bond: Y, N, Performance Bond: Y, N)

Total Bid \$ 145,650.00

REFERENCES

UNITED CITY OF YORKVILLE

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

Business: PEOPLE'S GAS NORTH SHOP

Address: 4025 PETERSON AVE

City, State, Zip Code: CHICAGO, IL

Telephone Number: 773-444-1520

Contact Person: ELIBE ELIBE

Dates of Service: 1/18/18 COMPLETE

Business: DUPAGE COUNTY-EMERGENCY MANAGEMENT BUILDING

Address: 130-136 N COUNTY FARM ROAD

City, State, Zip Code: WHEATON, IL

Telephone Number: 630-407-6184

Contact Person: DEBRA THOMPSON

Dates of Service: 7/8/17 COMPLETE

Business: COOK COUNTY HOSPITAL-FANTUS CLINIC

Address: 621 S WINCHESTER STREET

City, State, Zip Code: CHICAGO, IL

Telephone Number: 815-978-3647

Contact Person: KYLE FRENCH

Dates of Service: 5/11/18 COMPLETE

If additional sheets are needed, please make copies.

SUBCONTRACTORS

UNITED CITY OF YORKVILLE

Provide the name, contact information, and value of work for each and every subcontractor which will be employed on this project.

Subcontractor No. 1: BRICK INDUSTRIAL SERVICES
Address: 2210 OAK LEAF STREET
City, State, Zip Code: JOLIET ILLINOIS
Telephone Number: 815-773-2272
Value of Work Subcontracted: \$ 27,500
Nature of Work Subcontracted: ASBESTOS ABATEMENT

Subcontractor No. 2: TBD PLUMBER
Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Value of Work Subcontracted: _____
Nature of Work Subcontracted: _____

Subcontractor No. 3: _____
Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Value of Work Subcontracted: _____
Nature of Work Subcontracted: _____

Bid Proposal Sheet

The undersigned understands that there may be changes, omissions, or modification in the work, and that appropriate adjustments will be made to the Contract price in accordance with the Contract Documents. The undersigned understands that the City reserves the right to accept or reject any or all bids, and to waive all formalities, any irregularities, and accept the Bid deemed to be in the Owner's best interest.

I hereby certify that the item(s) proposed is/are in accordance with the specifications as noted and that the prices quoted are not subject to change; and that the Person submitting the bid is not barred by law from submitting a bid to the City for the project contemplated herein because of a conviction for prior violations of either Illinois Compiled Statutes, 720 ILCS 5/33E-3 (Proposal Rigging) or b720 ILCS 5/33-4 (Proposal Rotating); and that

The Person submitting the bid is not delinquent in payment of any taxes to the Illinois Department of Revenue in accordance with 65 ILCS 5/11-42.1; and that

The Person submitting the bid provides a drug free workplace pursuant to 30 ILCS 580/1, *et seq.*, and that

The Person submitting the bid certifies they have a substance-abuse program and provide drug testing in accordance with 820 ILCS 130/11G, Public Act 095-0635; and that

The Person submitting the bid is in compliance with the Illinois Human Rights Act 775 ILCS 5/1.101 *et seq.* including establishment and maintenance of sexual harassment policies and program.

ALPINE DEMOLITION SERVICES, LLC
Firm Name

3515 STERN AVENUE
Street Address

ST. CHARLES IL 60174
City State Zip

630-761-0700
Phone Number

7/17/18
Date


PRESIDENT
Signed Name and Title

KELLI PAWLIK-PRESIDENT
Print Name and Title

kelli@knockitdown.com
E-mail Address

630-761-0777
Fax Number

**UNITED CITY OF YORKVILLE
800 Game Farm Road
YORKVILLE, ILLINOIS 60560**

CONTRACT

THIS CONTRACT made this _____ day of _____, 2018, by and between the United City of Yorkville, an Illinois municipal corporation hereinafter called the "*Owner*" and ALPINE DEMOLITION SERVICES, LLC located at 3515 STERN AVE. ST. CHARLES, IL 60174 hereinafter called the "*Contractor*".

WITNESSETH:

WHEREAS, the Owner has heretofore solicited Bids for all labor and materials necessary to complete the work specified in this bid package;

WHEREAS, the Owner has found that the Contractor is the lowest responsible person submitting the bid for said work and has awarded the Contractor this contract for said work.

NOW, THEREFORE, for and in consideration of their mutual promises and agreements, the parties hereto do hereby agree as follows:

1. The Contractor agrees to furnish all materials, supplies, tools, equipment, labor and other services necessary to commence and complete the demolition of the building at 111 W. Madison Street and the subsequent site restoration, in accordance with the conditions and prices stated in the Request for Bid, Instructions to Persons submitting bids – General Conditions, Special Conditions, Insurance Requirements, Specifications and Plans, Bid, and Detail Exception Sheet all of which are made a part hereof and herein called the "*Contract Documents*".
2. The Owner will pay the Contractor in the amounts, manner and at times as set forth in the Contract Documents.

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Contract as of the day and year first above written:

UNITED CITY OF YORKVILLE

By: _____

CONTRACTOR:

By:  _____

Signature

KELLI PAWLIK-PRESIDENT

Print Name and Title

Exhibit A

UNITED CITY OF YORKVILLE, ILLINOIS INSURANCE REQUIREMENTS

Contractor shall procure and maintain, for the duration of the contract, insurance against claims for injuries to persons or damages to property, which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees, or subcontractors.

1. **MINIMUM SCOPE OF INSURANCE** Coverage shall be at least as broad as:

- A. Insurance Services Office Commercial General Liability Occurrence Form CG 0001 with the City named as additional insured; on a form at least as broad as the endorsement in paragraph 10 including ISO Additional Insured Endorsement CG 2026, CG 2010.
- B. Owners and Contractors Protective Liability (OCP) policy is required with the City as insured (for contracts with subcontractors and projects that are inherently dangerous).
- C. Insurance Service Office Business Auto Liability Coverage Form Number CA 0001, Symbol 01 "Any Auto."
- D. Workers' Compensation as required by the Worker's Compensation Act of the State of Illinois and Employers' Liability insurance.
- E. Builder Risk Property Coverage with City as loss payee.

2. **MINIMUM LIMITS OF INSURANCE** Contractor shall maintain limits no less than if required under above scope:

- A. Commercial General Liability: \$1,000,000 combined single limit per occurrence for bodily injury, personal injury, and property damage. The general aggregate shall be twice the required occurrence limit. Minimum General Aggregate shall be no less than \$2,000,000 or a project/contract specific aggregate of \$1,000,000.
- B. Owners and Contractors Protective Liability (OCP): \$1,000,000 combined single limit per occurrence for bodily injury and property damage.
- C. Businesses Automobile Liability: \$1,000,000 combined single limit per accident for bodily injury and property damage.
- D. Workers' Compensation and Employers' Liability: Workers' Compensation coverage with statutory limits and Employers' Liability limits of \$1,000,000 per accident.
- E. Builder's Risk shall insure against "All Risk" of physical damage, including water damage (flood and hydrostatic pressure not excluded), on a completed value, replacement cost basis. (Protection against loss of materials during construction, renovation, or repair of a structure.)
- F. Umbrella Excess Insurance: \$3,000,000. "Following form" of the underlying and excess policies including listing the City as an additional insured.

3. **DEDUCTIBLES AND SELF-INSURED RETENTIONS**

Any deductibles or self-insured retentions must be declared to and approved by the City. At the option of the City, either: the insurer shall reduce or eliminate such deductibles or self-insured retentions as respects the City, its officials, agents, employees, and volunteers; or the Contractor shall procure a bond guaranteeing payment of losses and related investigation, claim administration, and defense expenses.

4. **OTHER INSURANCE PROVISIONS**

The policies are to contain, or be endorsed to contain, the following provisions:

A. **General Liability and Automobile Liability Coverages**

- 1. The City, its officials, agents, employees, and volunteers are to be covered as additional insured's as respects: liability arising out of the Contractor's work, including activities performed by or on behalf of the Contractor; products and completed operations of the Contractor; premises owned, leased, or used by the Contractor; or automobiles owned, leased, hired, or borrowed by the Contractor. The coverage shall contain no special limitations on the scope of protection afforded to the City, its officials, agents, employees, and volunteers.
- 2. The Contractor's insurance coverage shall be primary as respects the City, its officials, agents, employees, and volunteers. Any insurance or self-insurance maintained by the City, its officials, agents, employees, and volunteers shall be excess of Contractor's insurance and shall not contribute with it.

United City of Yorkville
ADDENDUM TO RFP DOCUMENTS

**REQUEST FOR PROPOSAL: Building Demolition and Site Restoration at 111 W. Madison Street
Yorkville, IL**

ADDENDUM No. 1

DATE: 7/9/18

To All Potential Bidders:

This addendum is issued to modify the previously issued bid documents and/or given for informational purposes, and is hereby made a part of the bid documents. Please attach a signed/dated copy of this addendum to the documents in your possession.

Comprehensive Asbestos Report, Lead-Based Paint Inspection, and Extension of Bid Due Date & Bid Opening

1. **Comprehensive Asbestos Survey, Dated July 6, 2018, from Midwest Environmental Consulting Services, Inc.**
2. **Lead-Based Paint Inspection, Dated July 6, 2018, from Midwest Environmental Consulting Services, Inc.**
3. **The United City of Yorkville will be extending the bid due date and the public bid opening until Tuesday July 17, 2018 at 10:00am at Yorkville City Hall. This decision was made to allow time for each contractor to provide an accurate cost for the abatement of such items in their total proposal amount.**



8/17/18

Selective Insurance Company of America
40 Wantage Avenue
Branchville, New Jersey 07890
973-948-3000

**AIA Document A310
BID BOND**

KNOW ALL MEN BY THESE PRESENTS, that we
Alpine Demolition Services, LLC

3515 Stern Avenue St. Charles, IL 60174

(Here insert full name and address or legal title of contractor)

as Principal, hereinafter called the Principal, and Selective Insurance Company of America

a corporation duly organized under the laws of the State of New Jersey
as Surety, hereinafter called the Surety, are held and firmly bound unto
United City of Yorkville

800 Game Farm Road Yorkville, IL 60560

(Here insert full name and address or legal title of owner)

as Oblige, hereinafter called the Oblige, in the sum of

10 % Percent of the Total Bid

(\$ 10 % Percent)

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors,
administrators, successors and assigns, jointly and severally, firmly by these presents.

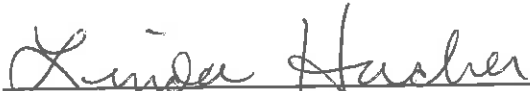
WHEREAS, the Principal has submitted a bid for

Demolition & Site Restoration at 111 W. Madison Street, Yorkville, IL 60560

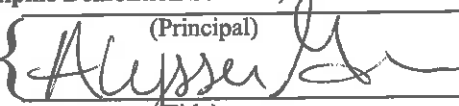
(Here insert full name and address and description of project)

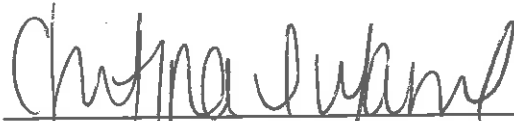
NOW, THEREFORE, if the Oblige shall accept the bid of the Principal and the Principal shall enter into a Contract with the Oblige in
accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good
and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the
prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall
pay to the Oblige the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for
which the Oblige may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null
and void, otherwise to remain in full force and effect.

Signed and Sealed this **12th** day of **July** **2018**




(Witness)

Alpine Demolition Services, LLC
{  _____ (Seal)
(Principal)
(Title)



(Witness)

SELECTIVE INSURANCE COMPANY OF AMERICA
{  _____ (Seal)
(Surety)
(Title) Attorney-in-Fact
Sherry Bacskai

"Printed in cooperation with the American Institute of Architects (AIA) by the Selective Insurance Company of America. The language in this document conforms exactly to the language used in AIA Document A310, February 1970 edition."



Selective Insurance Company of America
 40 Wantage Avenue
 Branchville, New Jersey 07890
 973-948-3000

BondNo.B 1203592

POWER OF ATTORNEY

Public Bid

SELECTIVE INSURANCE COMPANY OF AMERICA, a New Jersey corporation having its principal office at 40 Wantage Avenue, in Branchville, State of New Jersey ("SICA"), pursuant to Article VII, Section 1 of its By-Laws, which state in pertinent part:


The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

does hereby appoint **Sherry Baeska**

, its true and lawful attorney(s)-in-fact, full authority to execute on SICA's behalf fidelity and surety bonds or undertakings and other documents of a similar character issued by SICA in the course of its business, and to bind SICA thereby as fully as if such instruments had been duly executed by SICA's regularly elected officers at its principal office, in amounts or penalties not exceeding the sum of: **\$8,000,000.00**

Signed this 12th day of July, 2018

SELECTIVE INSURANCE COMPANY OF AMERICA

By: 
 Brian C. Sarisky
 Its SVP, Strategic Business Units, Commercial Lines

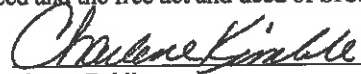


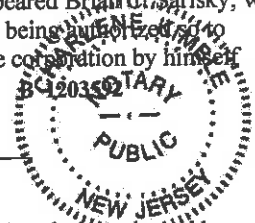
CERTIFIED COPY

STATE OF NEW JERSEY :
 :ss. Branchville
 COUNTY OF SUSSEX :

On this 12th day of July, 2018 before me, the undersigned officer, personally appeared Brian C. Sarisky, who acknowledged himself to be the Sr. Vice President of SICA, and that he, as such Sr. Vice President, being duly authorized to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself as Sr. Vice President and that the same was his free act and deed and the free act and deed of SICA.

Charlene Kimble
 Notary Public of New Jersey
 My Commission Expires 6/2/2021


 Notary Public



The power of attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of SICA at a meeting duly called and held on the 6th of February 1987, to wit:

"RESOLVED, the Board of Directors of Selective Insurance Company of America authorizes and approves the use of a facsimile corporate seal, facsimile signatures of corporate officers and notarial acknowledgements thereof on powers of attorney for the execution of bonds, recognizances, contracts of indemnity and other writing obligatory in the nature of a bond, recognizance or conditional undertaking."

CERTIFICATION

I do hereby certify as SICA's Corporate Secretary that the foregoing extract of SICA's By-Laws and Resolutions are in full force and effect and this Power of Attorney issued pursuant to and in accordance with the By-Laws is valid.

Signed this 12th day of July, 2018.


 Michael H. Lanza, SICA Corporate Secretary



Important Notice: If the bond number embedded within the Notary Seal does not match the number in the upper right-hand corner of this Power of Attorney, contact us at 973-948-3000.



Selective Insurance Company of America
 40 Wantage Avenue
 Branchville, New Jersey 07890
 973-948-3000

BondNo.B 1203592

STATEMENT OF FINANCIAL CONDITION

Public Bid

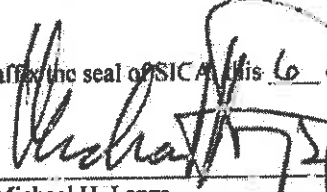
I hereby certify that the following information is contained in the Annual Statement of Selective Insurance Company of America ("SICA") to the New Jersey Department of Banking and Insurance as of December 31, 2017:

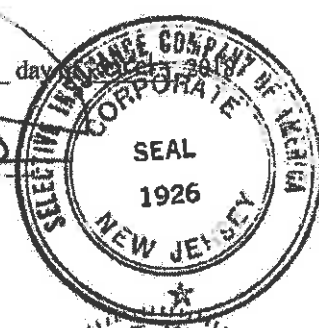
<u>ADMITTED ASSETS (in thousands)</u>		<u>LIABILITIES AND SURPLUS (in thousands)</u>	
Bonds	\$1,583,550	Reserve for losses and loss expenses	\$1,013,590
Preferred stocks at convention value	3,960	Reserve for unearned premiums	382,768
Common stocks at convention values	117,189	Provision for unauthorized reinsurance	852
Subsidiary common stock at convention values	0	Commissions payable and contingent commissions	27,889
Short-term investments	92,023	Other accrued expenses	27,120
Mortgage loans on real estate (including collateral loans)	33,443	Other liabilities	<u>373,022</u>
Other invested assets	84,495	Total liabilities	1,825,241
Interest and dividends due or accrued	14,699		
Premiums receivable	359,686	Surplus as regards policyholders	<u>609,666</u>
Other admitted assets	<u>145,862</u>		
Total admitted assets	<u>2,434,907</u>	Total liabilities and surplus as regards policyholders	<u>2,434,907</u>

I further certify that the following is a true and exact excerpt from Article VII, Section 1 of the By-Laws of SICA, which is still valid and existing.

The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

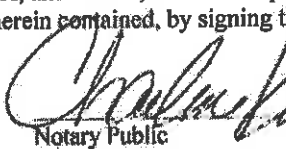
IN WITNESS WHEREOF, I hereunto subscribe my name and affix the seal of SICA this 6 day of March 2018


 Michael H. Lanza
 SICA Corporate Secretary



STATE OF NEW JERSEY :
 :ss. Branchville
 COUNTY OF SUSSEX :

On this 6 day of March 2018, before me, the undersigned officer, personally appeared Michael H. Lanza, who acknowledged himself to be the Corporate Secretary of SICA, and that he, as such Corporate Secretary, being authorized to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself as Corporate Secretary.


 Notary Public
 My Commission Expires: _____
 Charlene Kimble
 Notary Public of New Jersey
 My Commission Expires 6/2/2021

