PURCHASING DEPARTMENT

TOWN OF ARLINGTON

730 Massachusetts Avenue Arlington, MA 02476 Telephone 781.316.3003 Fax 781.316.3019

February 5, 2024

Invitation for Bids #24-01 Landscape Maintenance - Mt Pleasant Cemetery

ADDENDUM NO. 1

The attention of Bidders submitting bids for the above-referenced project is called to the following Addendum to the Invitation for Bids. The purpose of this Addendum is to clarify Title V, Article 12, Sec 3.D of the Town of Arlington by-laws, which restricts the use of gas-powered leaf blowers, and how it applies to the work of this contract and to answer questions from plan holders.

1. Clarification of Title V, Article 12, Sec 3.D of the Town of Arlington By-laws

a) Potential Change in Effective Date of Gas-powered Leaf Blower Prohibition
In the spring of 2024, Arlington Town Meeting will consider a proposal to extend the
effective date of the prohibition of gas-powered leaf blowers from March 2025 to March
2026.

Due to this potential change, Bidders shall be required, for Year 2 and for Year 3, to provide a price based on the current phase out date and a price based on the potential extension of that date. **Bidders must use the attached revised Bid Form.**

b) Gas-powered Back-pack Leaf Blowers

During Year 1 of this contract (and during Year 2, if the effective date of the prohibition is extended to March 2026), gas powered back-pack leaf blowers may be operated only during the periods March 15 to May 31 and September 15 to December 30, Monday through Friday, 7:30 am to 5:30 pm.

During Years 2 and 3 of this contract (or Year 3 only if the effective date of the prohibition is extended to March 2026), gas-powered back-pack leaf blowers shall be prohibited at all times.

Per Sec 3.D(5) of the by-law, the sound emitted from any leaf blower shall be no greater than 74 db(A) at 50 feet at full throttle.

c) Gas-powered Wheeled Leaf Blowers

Per the exemption described in Sec.3.D(2)(b)(i), which applies to municipal properties of an acre or more, gas-powered wheeled leaf blowers shall be permitted year-round, Monday through Friday, 7:30 am to 5:30 pm, during Years 1, 2, and 3 of this contract.

2. Questions from Plan Holders

a) Question:

For the purposes of the bid deposit, is the value of the total bid the price for one year or for all three years?

Answer: For the purposes of the bid deposit, the value of the total bid is the Bidder's Total Year 1 Price.

All other terms and conditions of the bid documents remain unchanged.

ADDENDUM MUST BE ACKNOWLEDGED ON THE BID FORM. FAILURE TO ACKNOWLEDGE ANY OR ALL ADDENDA COULD RESULT IN REJECTION OF YOUR BID AS NON-RESPONSIVE.

James Feeney Town Manager Town of Arlington IFB #24-01

BID FORM

To the Awarding Authority:

A. The undersigned proposes to furnish all labor and materials required for

Landscape Maintenance - Mt. Pleasant Cemetery

in accordance with accompanying specifications, subject to additions and deductions according to

the terms of the specifications.	ations, subject to additions and deductions according to
B. This bid includes addenda numbered:	,,
Town reserves the right to renew the Contract the bid prices submitted for those years.	Year 1 bid price (April 2024 – December 2024). The act, at its sole discretion, for a second and a third year For Years 2 and 3, Bidders must provide a price s-powered leaf blowers (March 2025) and a price ase out date to March 2026.
BID I	PRICE by YEAR
Year 1	dollars \$
Year 2(Assuming Gas Powered	dollars \$ Leaf Blower Ban Begins March 2025)
Year 2(Assuming Gas Powered	dollars \$ Leaf Blower Ban Begins March 2026)
Year 3(Assuming Gas Powered	dollars \$ Leaf Blower Ban Begins March 2025)
Year 3(Assuming Gas Powered	dollars \$ Leaf Blower Ban Begins March 2026)
Date	Company Name
Authorized Signature	Business Street Address
Printed Name/Title of Signatory	City, State, Zip Code

Business Telephone/Email

YEAR 1: April 2024 – December 2024

1.	Spring Clean-up		dollars	\$
2.	Mowing/Trimming		dollars	\$
3.	Fall Clean-up		dollars	\$
4.	Pruning		dollars	\$
	Total Year 1 Price			dollars
		\$	_	
		YEAR 2: April 2025 – December 2025 (Assuming Gas Powered Leaf Blower Ban Begins March 2025)		
1.	Spring Clean-up		dollars	\$
2.	Mowing/Trimming		dollars	\$
3.	Fall Clean-up		dollars	\$
4.	Pruning		dollars	\$
	Total Year 2 Price			dollars
		\$	_	
		YEAR 2: April 2025 – December 2025 (Assuming Gas Powered Leaf Blower Ban Begins March 2026)		
1.	Spring Clean-up		dollars	\$
2.	Mowing/Trimming		dollars	\$
3.	Fall Clean-up		dollars	\$
4.	Pruning		dollars	\$
	Total Year 2 Price			dollars
		\$	_	
BID	DER'S NAME:			

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YEAR 3: April 2026 – December 2026 (Assuming Gas Powered Leaf Blower Ban Begins March 2025)

1.	Spring Clean-up		dollars	\$
2.	Mowing/Trimming		dollars	\$
3.	Fall Clean-up		dollars	\$
4.	Pruning		dollars	\$
	Total Year 3 Price			
	10101 1001 011100	\$		dollard
			_	
		YEAR 3: April 2026 – December 2026 (Assuming Gas Powered Leaf Blower Ban Begins March 2026)		
1.	Spring Clean-up		dollars	\$
2.	Mowing/Trimming		dollars	\$
3.	Fall Clean-up		dollars	\$
4.	Pruning		dollars	\$
	Total Year 3 Price			dollars
		\$		
			_	
BID	DER'S NAME:			

CERTIFICATE OF NON-COLLUSION

(submit as attachment to completed bid form)

The undersigned certifies under the 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, club, or other organization, entity, or group of individuals.

Name of Individual Authorized to Sign (Print or Type)		
Authorized Signature		
Legal Name of Business Entity		

Town of Arlington IFB #24-01

TAX COMPLIANCE SHEET

(submit as attachment to completed bid form)

Name of Bidder			
Address _			
_			
Telephone No _			
Signature of Respons	sible Officer	 	
Title of Responsible (Officer		
Date			
knowledge and belief	f, I am in compliand	rtify under the penalties of perjury that, to my be with all laws of the Commonwealth relating ctors, and withholding and remitting child support	j to
Social Security Numb Federal Identification		Signature of Individual or Corporate Name	
		Corporate Office (if applicable)	

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QUALIFICATIONS AND REFERENCE FORM

(submit as attachment to completed bid form)

Please type or print legibly. **All blanks must be filled in**. If necessary, attach additional sheets. This information will be utilized by the Town of Arlington for purposes of determining bidder responsiveness and responsibility with regard to the requirements and specifications of this contract. This form must be attached by the bidder to her/his completed bid form.

Bidder:			
IFB Title:	Landscape Maintenance -	Mt Pleasant Cemetery	
	and all citations and/or violation ngainst bidder from a court of la		gencies and/or
-	and all assessed penalties or lied. Type N/A if none .	quidated damages, and tl	ne project in which
3. List any a	nd all contract terminations. T	ype N/A if none.	
4. List the to project.	otal number of supervisors and	workers intended to be a	assigned to this
<u>Phase</u>		# of Supervisors	# of Workers
a) Sp	oring Clean-up		
b) M	owing and Trimming		
c) Fa	all Clean-up		
d) Pr	uning of Shrubs & Bushes		
5. Indicate n	number of years bidder has be act.	en engaged in work simila	ar in nature to the work
completed vis similar in similar in seferences fand scope to necessary.	es On the following sheet(s), work, one of which must be for size and scope to the work defor all contracts performed with the the work specified in the bid	a contract completed in t scribed in the bid docume in the past two years that	he past five years that ents, and include t are similar in size
BIDDER'S N	NAME:		

Town of Arlington IFB #24-01

QUALIFICATIONS AND REFERENCE FORM, continued

Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
BIDDER'S NAME:

Town of Arlington IFB #24-01

QUALIFICATIONS AND REFERENCE FORM, continued

Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
Owner Name:
Owner Address:
Contact Name:
Phone:
Email:
Description and date(s) of supplies and/or services provided:
BIDDER'S NAME: