



## MINUTES

### Building and Property

September 8, 2015  
Land Information Conference Room  
First Floor, Courthouse

**MEMBERS PRESENT:** Supervisors Mike Behnke, Russ Bousley, Mike Cassidy, Ken Mattison, and Vilas Schroeder

**MEMBERS EXCUSED:**

**OTHERS PRESENT:** Deputy County Clerk BobbieJean Borkowski, Facilities Director James Swanson, Shawn Hennessee, Eagle Herald and Peshtigo Times

#### 1. Call to order

Chair Behnke called the meeting to order at 10:00 a.m.

#### 2. Agenda

Motion (Mattison/Cassidy) to approve agenda. Motion carried.

#### 3. Public Comment

None

#### 4. Minutes

Motion (Schroeder/Cassidy) to approve minutes of August 11, 2015. Motion carried.

#### 5. Disposal of Surplus Items

Motion (Schroeder/Cassidy) to approve posting surplus items on Wisconsin Surplus website. Motion carried. Exhibit A

#### 6. Agreement with Macco's Commercial Interiors for Courtroom Carpet Replacement

Motion (Schroeder/Cassidy) to recommend County Board approve agreement with Macco's Commercial Interiors of Green Bay, WI for courtroom carpet replacement at a cost of 17,966. Motion carried. Exhibit B

#### 7. OHM (Orchard, Hiltz & McCliment, Inc.) - UW Fieldhouse Assessment

Motion (Behnke/Mattison) to approve agreement with OHM (Orchard, Hiltz & McCliment, Inc.) to perform UW-Marquette Fieldhouse Assessment for \$7,000, subject to Corporation Counsel's approval. Motion carried. Exhibit C

#### 8. OHM Niagara Senior Center Assessment

Motion (Cassidy/Behnke) to approve agreement with OHM to perform Niagara Senior Center Assessment for \$3,000, subject to Corporation Counsel's approval. Motion carried. Exhibit D

**9. Purchase of 2016 F-250 4x4 Extended Cab**

Motion (Mattison/Cassidy) to recommend County Board approve purchase of 2016 4x4 extended cab from Witt Ford for \$25,927.88. Motion carried. Exhibit E

**10. Revised 2016 Maintenance and Motor Pool Budgets and User Fees**

Motion (Cassidy/Mattison) to recommend County Board approve revised 2016 Maintenance and Motor Pool Budgets and User Fees. Motion carried. Exhibit F

**11. Pending RFP's**

**12. Facilities Director's Report**

- UW Marinette roof project is complete
- UW elevator project is complete
- Library rooftop controls are installed
- Preparing to install IS server room AC
- Cedarville Tower has been removed
- Training Room functional as of August 24<sup>th</sup>

**13. Future Agenda Items**

Update on assessments

**14. Adjournment**

Motion (Cassidy/Mattison) to adjourn at 10:35 a.m. Motion carried.

Next meeting date: October 13, 2015 at 10:00 a.m.

BobbieJean Borkowski, Deputy County Clerk

Date approved/corrected:

<b>Consigning Agency Information</b>	<b>Location of Surplus Asset</b>
Agency: Marinette County Maintenance Department Address: 1926 Hall Ave., Marinette, WI 54143 Payment Address: 1926 Hall Ave., Marinette, WI 54143 Check Payable to: Marinette County Contact Person: James Swanson Phone: 715-732-7500 Email: jswanson@marinettecounty.com	Address: 930 State St., Marinette, WI 54143 Inspection Times: By appointment only Inspection Dates: By appointment only Contact Person: Ron Brendemihl Phone: 715-732-7505   715-923-0941 Email: rbrendemihl@marinettecounty.com
Pick up hours Monday thru Friday 7AM - 3PM	

Pic#	Item#	Main Description	Additional Description	Condition	Amount	Dept.	No Pays
		This form's intended use is for small/lower value misc. lots requiring only 1 or 2 line descriptions. You can list all the lots on this one form.					
	1	Craftsman Edger	Sears Edger/trimmer Model 796597 (Broken guard)	As is			
	2	Toro Lawnmower 7.0	Recycler, has manuals, 2 extra blades, bagger. (Self propelled won't release)	As is			
	3	Steel Shelf's	50 shelf's - 9" x 36"	As is			
	4	Steel Shelf's	50 shelf's - 9" x 36"	As is			
	5	Steel Shelf's	50 shelf's - 9" x 36"	As is			
	6	Steel Shelf's	50 shelf's - 9" x 36"	As is			
	7	Steel Shelf's	36 shelf's - 12" x 36", 14 Shelf's 9" x 36"	As is			
	8	Light fixtures	4 - Underwater lights, max depth 2 ft, 120V, 200 watt max	As is			
	9	Steel suggestion Box	has keys	New			
	10	Scrub & strip pads	sanding screens, buffer attachments	As is			
	11	Exit light fixture	in box	As is			
	12	Assorted chairs	10 - wood with red Leather, 2 on rollers	Poor/as is			
	13	Dewalt drill	1/2", 18V, DC759 (Broken Chuck)	As is			
	14	Drill Cases	Empty cases for dewalt	As is			
	15	Laptops (Hard Drives Removed)	Panasonic Toughbook CF-30, HP Elitebook 2530P, Toshiba 2800-S202	As is		IT	
	16	Banners Red-White-Blue	36" x 7 2 rolls	As is			
	17	T8 ballast	5 - 2 lamp ballasts 120 - 277V (QTP 2X59T81 UNV ISN-SC)	As is			
	18	Planters	2 - Deco Cement, 2 Plastic	As is			
	19	Desk upper cabinets	4 cabinet's, 2 light fixtures	As is			
	20	Assorted lumber	disassembled old cabinet's +	As is			
	21	Artificial tree/Plant	6 1/2 ft tall	As is			
	22	Butt Cans		Poor			
	23	Wooden Ladder	12 foot ladder	Poor			
	24	Assorted lamps		As is			
	25	Desk		As is			
	26	Cabinet's		As is			
	27	Sink with fixtures		As is			
	28	Stainless sink	with mirror & shelf	As is			
	29	TV 27" Orion	Model STV2763, has remote & wall mount	As is			
	30	Snowblower Cab	John Deer	As is			
	31	Micro Fisce	3 - Bell & Howel	As is			
	32	Track Lights		As is			
	33	Office chairs	Assorted chairs	As is			
	34	Office chairs	Assorted chairs	As is			
	35	Paper Cutter	Triumph, rusty	As is			
	36	Huffy bike	18 speed, flat tires, rusty chain	As is			
	37	Roadmaster Bike MT sport	Back tire flat, rusty chain	As is			
	38	Huffy bike Howler	flat tires, rusty	As is			
	39	Schwinn bike Worldsport	flat tires, rusty	As is			
	40	Freesprit bike	flat tires, rusty, shifter broken, no kickstand	As is			
	41	Cabinet's/countertops	Removed from old kitchen				
	42	Assorted Paints & stains					
	43	Lawn Maint supplies	Hoses, sprayers, edging +				
	44	Cabinets W 27" TV	ilo Model 1WF 2706, has remote and manual				
	45	Desk upper cabinets	6 cabinet's, assorted sizes				
	46	Shelf's	Metal				
	47	File cabinet's	3 cabinet's				
	48	Paint Sprayer					
	49	Fire suppression system	Removed from old kitchen				
	50	Drill Milwaukee 14.4V	with case, extra battery, no charger				
	51	Delta Sharpening system					
	52	Miller welder	225 V				
	53	Miller welder	225 V				
	54	light bulbs 130v DC	JD 130V DC, 75W CL new	As is			
	55	Window Latches		new			
	56	Lamp reflectors					
	57	Paper Shredders'					
	58	Light Fixtures					
	59	Microwaves			2		
	60	Dorm Frig					
	61	Desks & cabinet's					
	62	Pictures/framed art					
	63	Hinges	Double spring				
	64	Kit monitor ASL					
	65	Assorted filters					
	66	Student desks					

REQUEST FOR PROPOSAL - BID TABULATION SHEET		
RFP#15-046-34 COURTROOM FURNITURE & CARPET		
BIDS DUE: 7/29/15 AT 11:00 A.M. CST		
<b>COMPANY:</b>	Ratigan - Schottler Manufacturing	
<b>STREET ADDRESS:</b>	201 S 2nd Street	
<b>CITY/STATE/ZIP:</b>	Beatrice+B47 NE 68310	
<b>CONTACT:</b>	Ryan Ratigan	
<b>EMAIL CONTACT:</b>	<a href="mailto:ryanrs@ratiganschottler.com">ryanrs@ratiganschottler.com</a>	
<b>PHONE:</b>	(402) 616-9137	
<b>ALTERNATE PHONE:</b>	(402) 223-3220	
<b>FAX:</b>	(402) 223-2020	
<b>Courtroom Furniture:</b>	\$36,165.04	
Delivery & installation of 42 Attorney Chairs and 8 Conference Tables		
<b>COMPANY:</b>	H J Martin and Son	Macco's Commercial Interiors Inc.
<b>STREET ADDRESS:</b>	320 S Military Ave	2325 Hutson Rd
<b>CITY/STATE/ZIP:</b>	Green Bay WI 54303	Green Bay WI 54303
<b>CONTACT:</b>	Gary Vandenlagenberg, Vice President	Paul Deguaine
<b>EMAIL CONTACT:</b>	<a href="mailto:garyv@hmartin.com">garyv@hmartin.com</a>	<a href="mailto:pauld@maccos.com">pauld@maccos.com</a>
<b>PHONE:</b>	(920) 490-3150	(920) 499-7988
<b>ALTERNATE PHONE:</b>		
<b>FAX:</b>	(920) 494-4177	(920) 499-7998
<b>Carpet Replacement OnlyL:</b>	\$18,065.00	\$17,966.00

## MARINETTE COUNTY AGREEMENT

THIS AGREEMENT is made by and between Marinette County, a municipality, hereinafter referred to as COUNTY, and Macco's Commercial Interiors, hereinafter referred to as VENDOR, for the purpose of the Courtroom Carpeting RFP.

The parties agree as follows:

1. Contact Persons and Contract Administrators:

COUNTY's agent and contact person is: Jim Swanson  
Whose principal business address is: Maintenance Department  
1926 Hall Avenue  
Marinette, WI 54143

VENDOR agent and contact person is:

Name: Paul Dequaine  
Title: Project Manager/Estimator  
Company: Macco's Commercial Interiors  
Address: 2325 Hutson Road  
City, State: Green Bay, WI 54303  
Telephone: 920.499.7988

2. VENDOR agrees the following services, as set forth in the response, dated 7/22/2015 to the Request for Proposal will be provided to Marinette County, included and incorporated by reference as attachment A.
3. VENDOR agrees to present manufacturer's literature regarding materials & warranty.
4. Start/Completion dates to be determined.
5. COUNTY agrees to the following:
  - Payment Terms – COUNTY will pay the VENDOR within 30 days of receipt of an invoice.
6. Both parties agree that the relationship between the parties shall be that of an independent VENDOR and shall not be construed to be an Employer-Employee relationship; specifically the parties agree that:
  - VENDOR will be responsible to pay all Federal, State and social security taxes on any income received under this Agreement.

- COUNTY will pay no fringe benefits or other compensation to VENDOR.

7. VENDOR will provide and maintain certificates of insurance with minimum limits as follows:

General liability, each occurrence	\$1,000,000
Auto liability, each occurrence	\$ 300,000
Workers Compensation	Statutory Requirements

Certificates of insurance indicating COUNTY as additional insured must be presented to COUNTY's agent with a signed copy of this agreement prior to commencing work. Additionally, all policies shall contain endorsements by respective insurance companies waiving all rights of subrogation, if any, against COUNTY and shall further provide that policies are not cancelable except upon thirty days written notice to COUNTY.

8. VENDOR hereby agrees to release, indemnify, defend and hold harmless Marinette County, its officials, officers, employees and agents from and against all judgments, damages, penalties, losses, costs, claims, expenses, suits, demands, debts, actions and/or causes of action of any type or nature whatsoever, including actual and reasonable attorney fees, which may be sustained or to which they may be exposed, directly or indirectly, by reason of personal injury, death, property damage, or other liability, alleged or proven, resulting from or arising out of the performance under this agreement by vendor, its officers, officials, employees, agent or assigns. Marinette County does not waive, and specifically reserves, its right to assert any and all affirmative defenses and limitations of liability as specifically set forth in Wisconsin Statutes, Chapter 893 and related statutes.
9. This contract may be amended in writing by mutual agreement of both parties at any time.
10. This agreement shall be governed by the laws of the State of Wisconsin.
11. COUNTY may terminate this agreement in the event VENDOR breaches any of the terms of the agreement or for unsatisfactory performance by VENDOR. Termination shall be immediate upon written notification by the COUNTY.

*Maceo's Commercial*  
*James Maceo, B Intervis, Inc*  
 \_\_\_\_\_  
 VENDOR

*9/2/15*  
 \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Kathy Brandt, County Clerk

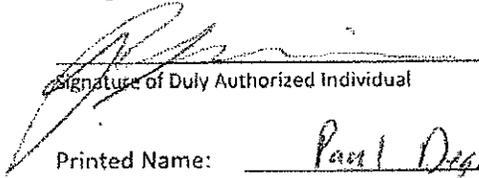
\_\_\_\_\_  
 Date

ATTACHMENT A  
RFP#15-046-34  
MARINETTE COUNTY COURTROOM FURNITURE & CARPET  
TABULATION SHEET

Marinette County Courtroom Furniture & Carpet <sup>only</sup>  
Per Specifications

\$ 17,966.00

I have full authority to make such statements and to submit this proposal as the duly recognized representative of the Proposer.

  
Signature of Duly Authorized Individual

7-22-15  
Date

Printed Name: Paul Depina  
Title: Project Manager/Estimator  
Address: 2325 Hutson Rd Coeur d'Alene, WI 54303  
Phone Number: 920-499-7988  
Email Address: pauld@marcos.com

ATTACHMENT B  
RFP#15-046-34  
MARINETTE COUNTY COURTROOM FURNITURE & CARPET  
STATEMENT OF UNDERSTANDING OF PROPOSAL

Maccos Commercial Interiors  
Vendor name

2325 Hutson Rd  
Vendor's address

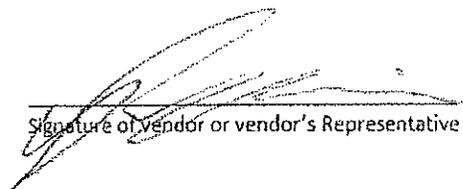
Green Bay WI 54303  
City State Zip code

Paul DeLuca, Project Manager/Estimator  
Contact person's name & position

920-449-7488 Vendor's Phone number      920-449-7488 Vendor's Fax Number

We have read the County's Request for Proposals (RFP) #15-046-34 – Marinette County Courtroom Furniture & Carpet and fully understand its intent. We certify that we have adequate personnel, equipment, and license to perform said services. We understand our ability and fitness to perform shall be judged solely by Marinette County. In addition, we certify that:

- (a) Our proposal is not made in the interest or on behalf of any person not named therein;
- (b) We have not directly or indirectly induced or solicited any person to submit a false or misleading proposal or to refrain from proposing;
- (c) We have not in any manner sought by collusion to secure an advantage over any other vendor;
- (d) We have thoroughly examined the RFP requirements, and our proposed fees cover all costs for service/equipment we have proposed; and
- (e) We acknowledge and accept all the terms and conditions included in the RFP

  
Signature of vendor or vendor's Representative

7-22-15  
Date

**ATTACHMENT C**  
**RFP#15-046-34**  
**MARINETTE COUNTY COURTROOM FURNITURE & CARPET**  
**ADDENDUM SHEET**

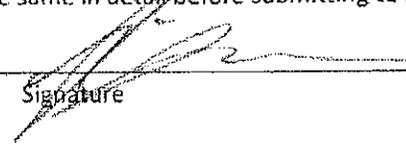
*(If Addendums exist for this project, please sign, date, and submit with Proposal.)*

The undersigned acknowledges receipt of the following addenda:

Addendum #1	<u>          N/A          </u>	Initials	<u>          N/A          </u>
Addendum #2	<u>          /          </u>	Initials	<u>          /          </u>
Addendum #3	<u>          /          </u>	Initials	<u>          /          </u>
Addendum #4	<u>          /          </u>	Initials	<u>          /          </u>
Addendum #5	<u>          /          </u>	Initials	<u>          /          </u>

The undersigned agrees with the following statement:

I have examined and carefully prepared the response to proposal from the plans and specifications and have checked the same in detail before submitting to Marinette County.

Name Paul Deguano  
  
Signature

Date 7-22-15

All vendors are responsible to check for addenda, posted on the county website at [www.marinettecounty.com](http://www.marinettecounty.com), for this project prior to the due date. No notification will be sent if addenda are posted unless there is an addendum within three (3) business days of RFP due date.

All vendors receiving initial notification of project will be notified by Marinette County of all addenda issued within three (3) business days prior to due date. If a RFP has already been submitted, vendor is required to acknowledge receipt of addendum via fax or e-mail prior to due date. A new RFP response must be submitted by vendor if addendum affects costs.

Vendors that do not have internet access are responsible to contact Marinette County at 715-732-7419 to ensure receipt of addenda issued. RFPs that do not acknowledge addendums may be rejected.

All RFPs submitted shall be sealed. Envelopes are to be clearly marked with required information. Sealed RFPs that are opened by mistake due to inadequate markings on the outside may be rejected and returned to the vendor.



2035 LARSEN ROAD • GREEN BAY, WI 54303  
(920) 489-7988

Remittance Address:  
Macco's Commercial Interiors, Inc.  
2035 Larsen Road  
Green Bay, WI 54303

ES480848

**QUOTE**

Sold To	Ship To
MARINETTE COUNTY COURT HOUSE 1926 HALL AVE MARINETTE, WI 54143	MARINETTE COUNTY COURT HOUSE 1926 HALL AVE #15-046-34 COURTS RM CARPET MARINETTE, WI 54143

Quote Date	Tele #1	PO Number	Quote Number
07/20/15	715-732-7500	15-046-34- CARPET COUR	ES480848

Inventory	Style/Item	Color/Description	Quantity	Units	Price	Extension
1	JUDGE MIRON-A205	CARPET TILE AND VINYL BASE	1.00	EA	7,137.00	7,137.00
	REMOVE EXISTING CARPET AND BASE, MOVING OF FURNITURE, SUPPLY AND INSTALL COLLINS AND AIKMAN CARPET TILE TO MATCH EXISTING AREAS.					
1	JUDGE MORRISON A206	CARPET TILE AND VINYL BASE	1.00	EA	7,137.00	7,137.00
	REMOVE EXISTING CARPET AND BASE, MOVING OF FURNITURE, SUPPLY AND INSTALL COLLINS AND AIKMAN CARPET TILE TO MATCH EXISTING AREAS.					
1	JUDGE BOYLE- A207	CARPET TILE AND VINYL BASE	1.00	EA	3,692.00	3,692.00
	REMOVE EXISTING CARPET AND BASE, MOVING OF FURNITURE, SUPPLY AND INSTALL COLLINS AND AIKMAN CARPET TILE TO MATCH EXISTING AREAS.					
	MISC CHARGE		1.00	EA	0.00	0.00
	WEEKEND FOR WEEKDAY NIGHT TIME HOURS STARTING AT 5PM MON-THUR-NO WEEKENDS FLOOR PREP LIMITED TO SAW CUTS. PER WALK THRU 7-20-15					

07/20/15  
Sales Representative(s):  
DEQUAINE, PAUL

	11:01AM
Material:	17,966.00
Service:	0.00
Misc. Charges:	0.00
Sales Tax:	0.00
Misc. Tax:	0.00
<b>QUOTE TOTAL:</b>	<b>\$17,966.00</b>

50% down payment; balance due to installer upon completion.

Authorized Signature:   
Macco's Commercial Interiors, Inc.

**ACCEPTANCE OF PROPOSAL:**

The above proposal includes all Terms and Conditions on the reverse side and is hereby accepted.

Signature \_\_\_\_\_  
Date \_\_\_\_\_



**MARINETTE COUNTY AGREEMENT**

THIS AGREEMENT is made by and between Marinette County, a municipality, hereinafter referred to as COUNTY, and OHM Advisors, hereinafter referred to as VENDOR, for the purpose of the UW-Marquette Fieldhouse Facility Assessment.

The parties agree as follows:

1. Contact Persons and Contract Administrators:

COUNTY's agent and contact person is: Jim Swanson  
Whose principal business address is: Maintenance Department  
1926 Hall Avenue  
Marinette, WI 54143

VENDOR agent and contact person is:

Name: Tracie Williams  
Title: Director  
Company: OHM Advisors  
Address: 424 Hancock Street  
City, State: Hancock, MI 49930  
Telephone: 906.482.0435

2. VENDOR agrees the following services, as set forth in the response, dated 7/6/2015, to the Request for Proposal will be provided to Marinette County, included and incorporated by reference as attachment A.
3. VENDOR agrees to present manufacturer's literature regarding materials & warranty.
4. Start/Completion dates to be determined.
5. COUNTY agrees to the following:
  - Payment Terms – COUNTY will pay the VENDOR within 30 days of receipt of an invoice.
6. Both parties agree that the relationship between the parties shall be that of an independent VENDOR and shall not be construed to be an Employer-Employee relationship; specifically the parties agree that:
  - VENDOR will be responsible to pay all Federal, State and social security taxes on any income received under this Agreement.

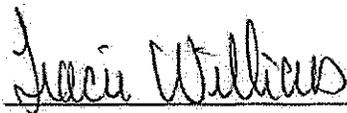
- COUNTY will pay no fringe benefits or other compensation to VENDOR.

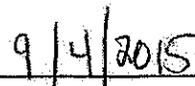
7. VENDOR will provide and maintain certificates of insurance with minimum limits as follows:

General liability, each occurrence	\$1,000,000
Auto liability, each occurrence	\$ 300,000
Workers Compensation	Statutory Requirements

Certificates of insurance indicating COUNTY as additional insured must be presented to COUNTY's agent with a signed copy of this agreement prior to commencing work. Additionally, all policies shall contain endorsements by respective insurance companies waiving all rights of subrogation, if any, against COUNTY and shall further provide that policies are not cancelable except upon thirty days written notice to COUNTY.

8. VENDOR hereby agrees to release, indemnify, defend and hold harmless Marinette County, its officials, officers, employees and agents from and against all judgments, damages, penalties, losses, costs, claims, expenses, suits, demands, debts, actions and/or causes of action of any type or nature whatsoever, including actual and reasonable attorney fees, which may be sustained or to which they may be exposed, directly or indirectly, by reason of personal injury, death, property damage, or other liability, alleged or proven, resulting from or arising out of the performance under this agreement by vendor, its officers, officials, employees, agent or assigns. Marinette County does not waive, and specifically reserves, its right to assert any and all affirmative defenses and limitations of liability as specifically set forth in Wisconsin Statutes, Chapter 893 and related statutes.
9. This contract may be amended in writing by mutual agreement of both parties at any time.
10. This agreement shall be governed by the laws of the State of Wisconsin.
11. COUNTY may terminate this agreement in the event VENDOR breaches any of the terms of the agreement or for unsatisfactory performance by VENDOR. Termination shall be immediate upon written notification by the COUNTY.

  
\_\_\_\_\_  
VENDOR

  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Kathy Brandt, County Clerk

\_\_\_\_\_  
Date

**ATTACHMENT A**  
**RFP#15-045-34**  
**UW MARINETTE FIELD HOUSE FACILITY ASSESSMENT**  
**TABULATION SHEET**

**UW Marinette Field House Facility Assessment**  
**Per Specifications**

\$ 7,000.00

I have full authority to make such statements and to submit this proposal as the duly recognized representative of the Proposer.

Tracie Williams  
Signature of Duly Authorized Individual

07/06/2015

Date

Printed Name: Tracie Williams, PE, LEED AP  
Title: Director  
Address: 424 Hancock St, Hancock, MI 49930  
Phone Number: (906) 482-0535  
Email Address: Tracie.Williams@ohm-advisors.com

**ATTACHMENT B**  
**RFP#15-045-34**  
**UW MARINETTE FIELD HOUSE FACILITY ASSESSMENT**  
**STATEMENT OF UNDERSTANDING OF PROPOSAL**

OHM Advisors

Vendor name

424 Hancock Street

Vendor's address

Hancock MI 49930

City State Zip code

Tracie Williams, Director

Contact person's name & position

906.482.0535

906.482.6453

Vendor's Phone number

Vendor's Fax Number

We have read the County's Request for Proposals (RFP) #15-045-34 – UW Marinette Field House Facility Assessment and fully understand its intent. We certify that we have adequate personnel, equipment, and license to perform said services. We understand our ability and fitness to perform shall be judged solely by Marinette County. In addition, we certify that:

- (a) Our proposal is not made in the interest or on behalf of any person not named therein;
- (b) We have not directly or indirectly induced or solicited any person to submit a false or misleading proposal or to refrain from proposing;
- (c) We have not in any manner sought by collusion to secure an advantage over any other vendor;
- (d) We have thoroughly examined the RFP requirements, and our proposed fees cover all costs for service/equipment we have proposed; and
- (e) We acknowledge and accept all the terms and conditions included in the RFP

Travis Williams  
Signature of vendor or vendor's Representative

07/06/2015  
Date





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/2/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Professional Concepts Insurance Agency, Inc. 1127 South Old US Highway 23 Brighton MI 48114-9861		<b>CONTACT NAME:</b> certs@pciaonline.com <b>PHONE (A/C No. Ext):</b> (800) 969-4041 <b>FAX (A/C No.):</b> (800) 969-4081 <b>E-MAIL ADDRESS:</b> certs@pciaonline.com	
<b>INSURED</b> Orchard Hiltz & McCliment Inc. dba OHM Advisors 34000 Plymouth Road Livonia MI 48150		<b>INSURER(S) AFFORDING COVERAGE</b>	
		INSURER A: The Phoenix Insurance Co	NAIC #: 25623
		INSURER B: Travelers Prop Casualty of Ame	25674
		INSURER C: Travelers Indemnity Co	25658
		INSURER D: Travelers Indem. Co of America	25666
		INSURER E: XI Specialty Ins. Co.	37885
		INSURER F:	

COVERAGES CERTIFICATE NUMBER: 14-15 ALL REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURERS	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X	6601B48177ATIA14	12/1/2014	12/1/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> X,C,U					PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> Contractual Liability					GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					\$
B	AUTOMOBILE LIABILITY		BA1B28476114GRP	12/1/2014	12/1/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
						\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		CUP1B4909371447	12/1/2014	12/1/2015	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 5,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N <input checked="" type="checkbox"/>	KVMPJUB3824T09314	12/1/2014	12/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in Nj)					E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Professional Liability		DPR9718721	12/1/2014	12/1/2015	Per Claim \$ 3,000,000
						Aggregate \$ 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Project: UW Marinette Field House Facility Assessment.  
 County of Marinette are considered additional insured's with respects to general liability coverage as long as required within a written contract. 30 day written notice provided to certificate holder and additional insured's for cancellation of coverages listed. 10 day notice for nonpayment of listed policies.

<b>CERTIFICATE HOLDER</b> Marinette County Jim Swanson Maintenance Department 1926 Hall Avenue Marinette, WI 54143	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Mike Cosgrove/PAT <i>Michael Cosgrove</i>
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**MARINETTE COUNTY AGREEMENT**

THIS AGREEMENT is made by and between Marinette County, a municipality, hereinafter referred to as COUNTY, and OHM Advisors, hereinafter referred to as VENDOR, for the purpose of the Niagara Senior Center Facility Assessment.

The parties agree as follows:

1. Contact Persons and Contract Administrators:

COUNTY's agent and contact person is: Jim Swanson  
Whose principal business address is: Maintenance Department  
1926 Hall Avenue  
Marinette, WI 54143

VENDOR agent and contact person is:

Name: Tracie Williams  
Title: Director  
Company: OHM Advisors  
Address: 424 Hancock Street  
City, State: Hancock, MI 49930  
Telephone: 906.482.0435

2. VENDOR agrees the following services, as set forth in the response, dated 9/2/2015, to the Request for Proposal will be provided to Marinette County, included and incorporated by reference as attachment A.
3. VENDOR agrees to present manufacturer's literature regarding materials & warranty.
4. Start/Completion dates to be determined.
5. COUNTY agrees to the following:
  - Payment Terms – COUNTY will pay the VENDOR within 30 days of receipt of an invoice.
6. Both parties agree that the relationship between the parties shall be that of an independent VENDOR and shall not be construed to be an Employer-Employee relationship; specifically the parties agree that:
  - VENDOR will be responsible to pay all Federal, State and social security taxes on any income received under this Agreement.

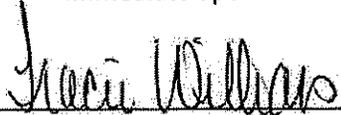
- COUNTY will pay no fringe benefits or other compensation to VENDOR.

7. VENDOR will provide and maintain certificates of insurance with minimum limits as follows:

General liability, each occurrence	\$1,000,000
Auto liability, each occurrence	\$ 300,000
Workers Compensation	Statutory Requirements

Certificates of insurance indicating COUNTY as additional insured must be presented to COUNTY's agent with a signed copy of this agreement prior to commencing work. Additionally, all policies shall contain endorsements by respective insurance companies waiving all rights of subrogation, if any, against COUNTY and shall further provide that policies are not cancelable except upon thirty days written notice to COUNTY.

8. VENDOR hereby agrees to release, indemnify, defend and hold harmless Marinette County, its officials, officers, employees and agents from and against all judgments, damages, penalties, losses, costs, claims, expenses, suits, demands, debts, actions and/or causes of action of any type or nature whatsoever, including actual and reasonable attorney fees, which may be sustained or to which they may be exposed, directly or indirectly, by reason of personal injury, death, property damage, or other liability, alleged or proven, resulting from or arising out of the performance under this agreement by vendor, its officers, officials, employees, agent or assigns. Marinette County does not waive, and specifically reserves, its right to assert any and all affirmative defenses and limitations of liability as specifically set forth in Wisconsin Statutes, Chapter 893 and related statutes.
9. This contract may be amended in writing by mutual agreement of both parties at any time.
10. This agreement shall be governed by the laws of the State of Wisconsin.
11. COUNTY may terminate this agreement in the event VENDOR breaches any of the terms of the agreement or for unsatisfactory performance by VENDOR. Termination shall be immediate upon written notification by the COUNTY.

  
\_\_\_\_\_  
VENDOR

9/4/2015  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Kathy Brandt, County Clerk

\_\_\_\_\_  
Date



ARCHITECTS. ENGINEERS. PLANNERS.

September 2, 2015

Mr. James Swanson  
Facilities Director  
Marinette County  
1925 Hall Avenue  
Marinette, WI 54143

RE: Professional Services Proposal  
Senior Center Assessment

Dear Mr. Swanson

We would like to thank you for the opportunity to submit a proposal for professional services for an assessment of the Niagara Senior Center facility. We have prepared the following scope of services based on our understanding of the project.

#### SCOPE OF SERVICES

Our scope of professional services includes the following tasks:

- ▼ Review existing condition at front entry canopy.
- ▼ Provide a permanent solution to the front beam and ceiling of entryway including an opinion of construction cost.
- ▼ Provide a front elevation drawing including recommendations to eliminate extra entry doors including an opinion of construction cost.
- ▼ Provide a review of accessibility within the facility.
- ▼ Perform a visual inspection of the mechanical and electrical systems in the building.
- ▼ It is assumed visual review and inspection will be completed in one site visit.
- ▼ Provide document identifying existing conditions and recommendations for improvements with opinions of construction costs and one exterior elevation.

#### COMPENSATION AND SCHEDULE

The above mentioned services would be performed on a lump sum basis in accordance with the attached Standard Terms & Conditions for a fee of *Three Thousand Dollars (\$3,000)*.

Upon approval from you, we are available to begin work on your project immediately.

Should you find this agreement acceptable, please execute both copies and return a copy to us for our files. This proposal will be valid for 60 days.

We look forward to working with you on a successful project.

Sincerely,

A handwritten signature in black ink that reads "Tracie Williams". The signature is written in a cursive style and is positioned above a horizontal line.

Tracie Williams, PE, LEED AP  
Principal/ Director

OHM Advisors  
424 HANCOCK STREET  
HANCOCK, MICHIGAN 49930

T 906.482.0535  
F 906.482.6453

OHM-Advisors.com



Enclosures: *Standard Terms and Conditions*  
Cc: File

**Professional Services**

Accepted By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## STANDARD TERMS and CONDITIONS

1. **THE AGREEMENT** – These Standard Terms and Conditions and the attached Proposal or Scope of Services, upon their acceptance by the Owner, shall constitute the entire Agreement between Orchard, Hiltz & McCliment, Inc. (OHM), a registered Michigan Corporation, and the Owner. The Agreement shall supersede all prior negotiations or agreements, whether written or oral, with respect to the subject matter herein. The Agreement may be amended only by mutual agreement between OHM and the Owner and said amendments must be in written form.
2. **SERVICES TO BE PROVIDED** – OHM will perform the services as set forth in the attached proposal or scope of services which is hereby made a part of the Agreement.
3. **SERVICES TO BE PROVIDED BY OWNER** – The Owner shall at no cost to OHM:
  - a) Provide OHM personnel with access to the work site to allow timely performance of the work required under this Agreement.
  - b) Provide to OHM within a reasonable time frame, any and all data and information in the Owners possession as may be required by OHM to perform the services under this Agreement.
  - c) Designate a person to act as Owners representative who shall have the authority to transmit instructions, receive information, and define Owner policies and decisions as they relate to services under this Agreement.
4. **PERIOD OF SERVICE** – The services called for in this Agreement shall be completed within the time frame stipulated in the Proposal or Scope of Services, or if not stipulated shall be completed within a time frame which may reasonably be required for completion of the work. OHM shall not be liable for any loss or damage due to failure or delay in rendering any service called for under this agreement resulting from any cause beyond OHM's reasonable control.
5. **COMPENSATION** – The Owner shall pay OHM for services performed in accordance with the method of payment as stated in the Proposal or Scope of Services. Method of compensation may be lump sum, hourly; based on a rate schedule, percentage of the construction cost, or cost plus a fixed fee. The Owner shall pay OHM for reimbursable expenses for subconsultant services, equipment rental or other special project related items at a rate of 1.15 times the invoice amount.
6. **TERMS OF PAYMENT** – Invoices shall be submitted to the Owner not more often than monthly for services performed during the preceding period. Owner shall pay the full amount of the invoice within thirty days of the invoice date. If payment is not made within thirty days, the amount due to OHM shall include a charge at the rate of one percent per month from said thirtieth day.
7. **LIMIT OF LIABILITY** – OHM shall perform professional services under this Agreement in a manner consistent with the degree of care and skill in accordance with applicable professional standards of services of this type of work. To the fullest extent permitted by law, and not withstanding any other provision of this Agreement, the total liability in the aggregate, of OHM and its Officers, Directors, Partners, employees, agents, and subconsultants, and any of them, to the Owner and anyone claiming by, through or under the Owner, for any and all claims, losses, costs or damages of any nature whatsoever arises out of, resulting from or in any way related to the project or the Agreement from any cause or causes, including but not limited to the negligence, professional errors or omissions, strict liability, breach of contract or warranty, express or implied, of OHM or OHM's Officers, Directors, employees, agents or subconsultants, or any of them shall not exceed the amount of \$25,000 or OHM's fee, whichever is greater.
8. **ASSIGNMENT** – Neither party to this Agreement shall transfer, sublet, or assign any duties, rights under or interest in this Agreement without the prior written consent of the other party.
9. **NO WAIVER** – Failure of either party to enforce, at anytime, the provisions of this Agreement shall not constitute a waiver of such provisions or the right of either party at any time to avail themselves of such remedies as either may have for any breach or breaches of such provisions.
10. **GOVERNING LAW** – The laws of the State of Michigan will govern the validity of this Agreement, its interpretation and performance.
11. **DOCUMENTS OF SERVICE** – The Owner acknowledges OHM's reports, plans and construction documents as instruments of professional services.

Nevertheless, the plans and specifications prepared under this Agreement shall become the property of the Owner upon completion of the work and payment in full of all monies due OHM, however, OHM shall have the unlimited right to use such drawings, specifications and reports and the intellectual property therein. The Owner shall not reuse or make any modifications to the plans and specifications without prior written authorization by OHM. In accepting and utilizing any drawings or other data on any electronic media provided by OHM, the Owner agrees that they will perform acceptance tests or procedures on the data within 30 days of receipt of the file. Any defects the Owner discovers during this period will be reported to OHM and will be corrected as part of OHM's basic Scope of Services.

12. TERMINATION – Either party may at any time terminate this Agreement upon giving the other party 7 calendar days prior written notice. The Owner shall within 45 days of termination, pay OHM for all services rendered and all costs incurred up to the date of termination in accordance with compensation provisions in this Agreement.

13. OHM'S RIGHT TO SUSPEND ITS SERVICES – In the event that the Owner fails to pay OHM the amount shown on any invoice within 60 days of the date of the invoice, OHM may, after giving 7 days notice to the Owner, suspend its services until payment in full for all services and expenses is received.

14. OPINIONS OF PROBABLE COST – OHM's preparation of Opinions of Probable Cost represent OHM's best judgment as a design professional familiar with the industry. The Owner must

recognize that OHM has no control over costs or the prices of labor, equipment or materials, or over the contractor's method of pricing. OHM makes no warranty, expressed or implied, as to the accuracy of such opinions as compared to bid or actual cost.

15. JOB SITE SAFETY – Neither the professional activities of OHM, nor the presence of OHM or our employees and subconsultants at a construction site shall relieve the General Contractor or any other entity of their obligations, duties, and responsibilities including, but not limited to, construction means, methods, sequences, techniques or procedures necessary for performing, superintending or coordinating all portions of the work of construction in accordance with the contract documents and the health or safety precautions required by any regulatory agency. OHM has no authority to exercise any control over any construction contractor or any other entity or their employees in connection with their work or any health or safety precautions. The Owner agrees that the General Contractor is solely responsible for jobsite safety, and warrants that this intent shall be made clear in the Owners agreement with the General Contractor. The Owner also agrees that OHM shall be indemnified and shall be made additional insureds under the General Contractors general liability insurance policy.

16. DISPUTE RESOLUTION – In an effort to resolve any conflicts that arise during the design or construction of the project or following the completion of the project, the Owner and OHM agree that all disputes between them arising out of or relating to this Agreement shall be submitted to non-binding mediation, unless the parties mutually agree otherwise.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/2/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Professional Concepts Insurance Agency, Inc. 1127 South Old US Highway 23 Brighton MI 48114-9861		<b>CONTACT NAME:</b> certs@pciaonline.com <b>PHONE (A/C No. Ext):</b> (800) 969-4041 <b>FAX (A/C No.):</b> (800) 969-4081 <b>E-MAIL ADDRESS:</b> certs@pciaonline.com	
<b>INSURED</b> Orchard Hiltz & McCliment Inc. dba OHM Advisors 34000 Plymouth Road Livonia MI 48150		<b>INSURER(S) AFFORDING COVERAGE</b>	
		INSURER A: The Phoenix Insurance Co	NAIC #: 25623
		INSURER B: Travelers Prop Casualty of Ame	25674
		INSURER C: Travelers Indemnity Co	25658
		INSURER D: Travelers Indem. Co of America	25666
		INSURER E: XL Specialty Ins. Co.	37885
		INSURER F:	

**COVERAGES**

CERTIFICATE NUMBER: 14-15 ALL

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDE INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			6801B48177ATTA14	12/1/2014	12/1/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		<input checked="" type="checkbox"/>				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> X, C, U						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> Contractual Liability						GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJ <input type="checkbox"/> LOC						\$
B	AUTOMOBILE LIABILITY			BA1B29476114GRP	12/1/2014	12/1/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS		<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
							\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB		<input checked="" type="checkbox"/> OCCUR	CUP1B4909371447	12/1/2014	12/1/2015	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 5,000,000
	DED <input checked="" type="checkbox"/>	RETENTION \$ 10,000					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			KVMPJUB3824T09314	12/1/2014	12/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input checked="" type="checkbox"/>	N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Professional Liability			DPR9719721	12/1/2014	12/1/2015	Per Claim \$ 3,000,000
							Aggregate \$ 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Project: Senior Center Assessment

County of Marinette County of Marinette are considered additional insured's with respects to general liability coverage as long as required within a written contract. 30 day written notice provided to certificate holder and additional insured's for cancellation of coverages listed. 10 day notice for nonpayment of listed policies.

**CERTIFICATE HOLDER****CANCELLATION**

Marinette County Jim Swanson Maintenance Department 1926 Hall Avenue Marinette, WI 54143	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  Mike Cosgrove/PAT <i>Michael Cosgrove</i>

ACORD 25 (2010/05)

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INS025 (201005) 01

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## REQUEST FOR PROPOSAL - BID TABULATION SHEET

## MOTORPOOL VEHICLES

POSTED: 6/10/15/ QUESTIONS DUE: 6/24/15/ QUESTIONS ANSWERED: 06/25/15 / BIDS DUE: 07/6/15 2:00 P.M.

COMPANY:		WITT FORD	PALMEN MOTORS	EWALD'S HARTFORD FORD, LLC
STREET ADDRESS:		10 US HWY 141 N	5431 75TH STREET	36866 E. WISCONSIN AVE
CITY/STATE/ZIP:		CRIVITZ, WI 54114	KENOSHA, WI 53142	OCONOMOWOC, WI 53066
CONTACT:		ROBIN HANSON	MARK JENSEN	CHRISSY GENSCH
EMAIL CONTACT:		RHANSON@WITTFORD.COM	MARKJ@PALMEN.COM	CGENSCH@EWALDAUTO.COM
PHONE:		800-261-9488	262-697-3100	262-567-5555
ALTERNATE PHONE:		715-854-7404	888-745-5334	-
FAX:		715-854-2890	262-697-3604	262-560-1303
ATTACHMENT C:				
3/4 TON 4 WD PICKUP TRUCK	2016 FORD F250 4X4 XL		\$25,857.38	
	TRANSFER PLATES		\$70.50	
	2016 DODGE RAM 2500 CREW			\$27,100.00
	CAB TRADESMAN PKG			
	2015 CHEVY SILVERADO 2500			\$28,021.00
	WARRANTY FOR A CREDIT OF \$150/EA			(\$150.00)
	2016 FORD F250 XL			\$25,642.00
	TRANSFER PLATES			\$70.50
NOTES:				FINAL ORDER DATE FOR 2015
				CHEVY SILVERADO 2500 IS
				7/23/2015 - REGISTRATION FEES
				NOT INCLUDED.

**Marinette County 2016 User Fees**

**MAINTENANCE DEPARTMENT**

<i>Fee Description</i>	<i>Fee Amount</i>	<i>Fee Determination</i>	<i>Projected Revenue</i>	<i>Collection Method</i>
Services Provided to Motor Pool	Percentage of Hours	Estimated Hours	\$ 18,500.00	Monthly Journal Entries
Library Building Maint/Supplies/Labor	Percentage	Past Year Usage	\$ 70,345.00	Monthly Journal Entries
Highway Custodial Services	\$320.00	Estimated Hours	\$ 3,840.00	Monthly Journal Entries
Health & Human Services Building Maintenance, Space Rental Labor & Supplies	Percentage	Past Year Usage	\$ 307,138.00	Monthly Journal Entries
Building Space Rental				
Cellcom	\$1,520.51	Usage	\$ 18,246.00	Monthly Payment
Forward Services	\$1,900.00	Usage	\$ 22,800.00	Monthly Payment
SNB&T Parking	\$3,000.00	Usage	\$ 3,000.00	Annual Fee
Family Services - Ella Court	\$475.00	Usage	\$ 5,700.00	Monthly Payment
Additional or Replacement Key Card	\$12.00 each	Cost	\$ -	Time of Purchase
Additional or Replacement Key fob	\$15.00 each	Cost	\$ -	Time of Purchase
Print Jobs	Varies	Franklin Catalogue	\$ 50,000	Monthly Invoices