



20130836
Blanket Contract

City of Springfield Blanket Contract Tracer Document

The purpose of this document is to provide continuous responsibility for the custody of BLANKET CONTRACTS during the processing period.

INSTRUCTIONS: Upon receipt, please initial and write in the date of receipt. When your department has approved and signed the blanket contract, please initial and date in the forwarding section and deliver to the next department.

DEPARTMENT	DATE RECEIVED		DATE FORWARDED TO NEXT DEPT.	
	Initials	Date	Initials	Date
Office of Procurement			YMM	2/27/15
Public Works, Dept.	CC	3/5/2015	3/5/2015	3/5/2015
City Comptroller	lu	3/6/15	lu	3/6/15
Law	PF	3-9-15	PP	3-9-15
CAFO	JS	3/9/15	JS	3/10/15
Mayor	BB	3-10-15	OB	3-11-15
Office of Procurement				

Vendor No.: 7352 Blanket Contract No.: 20130836 Blanket Contract Date: 1/29/13

Blanket Contract Amt.: \$500,000.00 Issue Date: 1/25/13 Renewal Date:

Appropriation Code1:
 Appropriation Code2:
 Appropriation Code3:
 Appropriation Code4:

Description of Funding Source:

Bid No.: 13-056 Requisition No.: PO No.:

Vendor Name: WESTON & SAMPSON ENGINEERS, INC.

Blanket Contract Type: RENEWAL

Blanket Contract Purpose: ON-CALL ENGINEERING SERVICES

Originating Dept.: DPW

Expiration Date: 3/27/2016 Amendment Date: Extension Date:

TYPE OF DOCUMENT (Please select at least one):
 New Renewal Amendment Extension



January 31, 2015

Weston & Sampson Engineers, Inc.
Five Centennial Drive
Peabody, MA 01960-7985

ATTENTION: Christopher B. Wester:

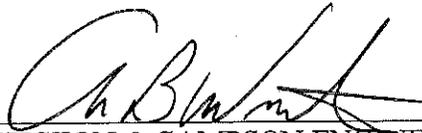
SUBJECT: Renewal of BC# 20130836- Services: Professional On-Call Engineering Services for the City of Springfield- DPW - \$500,000.00.

The City of Springfield – Office of Procurement, on behalf of the DPW is hereby exercising its option to renew the third and final year of a three year agreement for the above referenced contract for the period of March 27, 2015- March 26, 2016.

Please sign all copies of this renewal letter and return to the Office of Procurement along with the enclosed Tax Affidavit Certificate. **An Updated Certificate of Insurance.** Copies of all documents will be forwarded to you after securing all the required signatures.

Sincerely,

Lauren Stabilo
Chief Procurement Officer



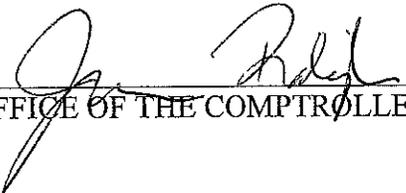
WESTON & SAMPSON ENGINEERS, INC.

REVIEWED BY:



LAW DEPARTMENT

^{W/A}
APPROVED AS TO APPROPRIATION:



3/6/15

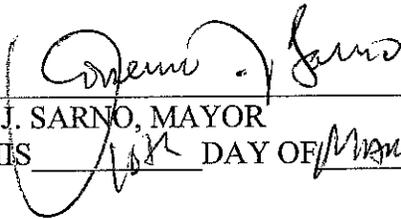
OFFICE OF THE COMPTROLLER

APPROVED BY:



DPW -DIRECTOR

APPROVED BY:



DOMENIC J. SARNO, MAYOR
SIGNED THIS 10th DAY OF March 2015

REVIEWED BY:



CAFO

TAX CERTIFICATION AFFIDAVIT FOR CONTRACTS

04.2601194

Individual Social Security Number, State Identification Number, Federal Identification Number, Company: WESTON & SAMPSON ENGINEERS, INC., P.O. Box (if any):, Street Address Only: 5 CENTENNIAL DRIVE, City/State/Zip Code: PERBODY, MA 01960-7985, Telephone Number: 978-532-1900, Fax Number: 978-972-7499, List address(es) of all other property owned by company in Springfield: N/A, Please Identify if the bidder/proposer is a: Corporation [X], Individual, Partnership, Limited Liability Company, Limited Liability Partnership, Limited Partnership.

You must complete the following certifications and have the signature(s) notarized on the lines below. Any certification that does not apply to you, write N/A in the blanks provided.

FEDERAL TAX CERTIFICATION

I, CHRISTOPHER WESTER certify under the pains and penalties of perjury that WESTON & SAMPSON ENGINEERS, INC. to my best knowledge and belief, has/have complied with all United States Federal taxes required by law. Bidder/Proposer/Contracting Entity: WESTON & SAMPSON ENGINEERS, INC. Authorized Person's Signature: [Signature] Date: 2-25-15

CITY OF SPRINGFIELD TAX CERTIFICATION

I, CHRISTOPHER WESTER certify under the pains and penalties of perjury that WESTON & SAMPSON ENGINEERS, INC. to my best knowledge and belief, has/have complied with all City of Springfield taxes required by law (has/have entered into a Payment Agreement with the City). Bidder/Proposer/Contracting Entity: WESTON & SAMPSON ENGINEERS, INC. Authorized Person's Signature: [Signature] Date: 2-25-15

COMMONWEALTH OF MASSACHUSETTS TAX CERTIFICATION

Pursuant to M.G.L. c. 62C §49A, I, CHRISTOPHER WESTER certify under the pains and penalties of perjury that WESTON & SAMPSON ENGINEERS, INC. to my best knowledge and belief, has/have complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support. Bidder/Proposer/Contracting Entity: WESTON & SAMPSON ENGINEERS, INC. Authorized Person's Signature: [Signature] Date: 2-25-15

Notary Public

STATE OF Connecticut, February 25, 2015, County of Hartford, ss.

Then personally appeared before me [name] Christopher Wester, [title] Vice President of [company] Weston & Sampson, being duly sworn, and made oath that he/she has read the foregoing document, and knows the contents thereof, and that the facts stated therein are true of his/her own knowledge, and stated the foregoing to be his/her free act and deed and the free act and deed of [company name] Weston & Sampson.

[Signature] Notary Public

My commission expires: 8-31-2016

YOU MUST FILL THIS FORM OUT COMPLETELY AND, SIGNATURES MUST BE NOTARIZED ON THIS FORM AND YOU MUST FILE THIS FORM WITH YOUR BID/CONTRACT. TAX AFFIDAVITS THAT ARE NOT SIGNED AND NOTARIZED WILL BE REJECTED.

TO BE INCLUDED IN ALL SPECIFICATIONS

COMPLIANCE WITH FEDERAL, COMMONWEALTH OF MASSACHUSETTS, AND CITY OF SPRINGFIELD TAX LAWS.

A. COMPLIANCE WITH TAX LAWS

The contractor must be in compliance at the time it submits its bid and afterwards if selected as the contractor, with all Federal, Commonwealth of Massachusetts and City of Springfield tax laws, the contractor will be disqualified from the bidding procedure.

B. TAX CERTIFICATION AFFIDAVIT.

The contractor **must** complete and return the Tax Certification Affidavit with the contractor's bid/proposal. Failure to complete and return the Tax Certification Affidavit will disqualify the contractor from the bidding procedure.

C. VERIFICATION OF COMPLIANCE WITH FEDERAL AND MASSACHUSETTS TAX LAWS.

If the City of Springfield discovers that the contractor is not in compliance with Federal or Massachusetts tax laws, the contractor shall be excluded from the bidding procedure.

D. COMPLIANCE WITH THE CITY OF SPRINGFIELD TAXES.

If the City of Springfield discovers that the contractor owes the City of Springfield any assessments, excise, property or other taxes, including any penalties and interest thereon, the contractor shall be excluded from the bidding procedure.

The contractor at all times during the term of an awarded contract shall observe and abide by all Federal, Commonwealth of Massachusetts and City of Springfield tax laws and remain in compliance with such laws, all as amended.

FAILURE TO SUBMIT THE FOLLOWING FORM IS CAUSE FOR IMMEDIATE REJECTION.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/30/2014

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).

PRODUCER Eastern Insurance Group LLC 233 West Central Street Natick MA 01760	CONTACT NAME: Construction	
	PHONE (A/C No. Ext): (508) 651-7700 FAX (A/C No.):	
INSURED Weston & Sampson Engineers, Inc. Five Centennial Drive Peabody MA 01960	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Great Divide Insurance Co	25224
	INSURER B: Starr Indemnity & Liability Co.	38318
	INSURER C: Zurich American Insurance Co.	16535
	INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER MASTER 2015 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	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liability coverage per policy form GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			GLP200736212	1/1/2015	1/1/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		MAA2007361-12 MA BAP2007360-12 AOS	1/1/2015 1/1/2015	1/1/2016 1/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB EXCESS LIAB DED RETENTION \$		<input checked="" type="checkbox"/> OCCUR CLAIMS-MADE	1000021472	1/1/2015	1/1/2016	EACH OCCURRENCE \$ 7,000,000 AGGREGATE \$ 7,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N	WCA200735912 Coverage applies in MA, CT, FL, GA, NH, NY, RI, SC VT and WI	1/1/2015	1/1/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	PROFESSIONAL/POLLUTION LIABILITY			ROC9671257-06	7/3/2014	7/3/2015	PER CLAIM \$3,000,000 ANNUAL AGGREGATE \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: RENEWAL OF BC#20130836-SERVICES; PROFESSIONAL ON-CALL ENGINEERING SERVICES FOR THE CITY OF SPRINGFIELD-DPW

CERTIFICATE HOLDER CITY OF SPRINGFIELD CHIEF PROCUREMENT OFFICER ATTN: LAUREN STABILO 36 COURT STREET ROOM 307 SPRINGFIELD, MA 01103	CANCELLATION 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 John Koegel/PMA



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12/30/2014

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