



Request for Proposals

ANNUAL MAINTENANCE
Of
EMERGENCY GENERATORS

**Town of North Castle
Water & Sewer Department
15 Business Park Drive
Armonk, NY 10504**

Sal Misiti
914-273-1882—ext. 55
Fax 914-273-3075
smisiti@northcastleny.com

Deadline for Submittal:
July 26, 2018

Date of Distribution -
June 29, 2018



1.0 BACKGROUND

The Town of North Castle operates five (5) separate special Water Districts and five (5) separate special Sewer Districts at various locations within the Town of North Castle. Each of the special districts has its own operating budget and operational requirements.

2.0 INTRODUCTION

The Town of North Castle Water and Sewer Department is Requesting Proposals from Contractors for Annual Routine Emergency Generator Maintenance. Accordingly, the Town of North Castle Water and Sewer Department is inviting Contractors to respond to this RFP. Included in this RFP are a scope of services and tasks required to satisfy the annual emergency generator and transfer switch maintenance needs.

There will be a voluntary walk through of all generator sites on *Thursday, July 19, 2018 at 1:00 pm*, please call to confirm your attendance. All questions pertaining to this RFP shall be directed to Sal Misiti, Director of Water and Sewer at 914-273-1882—ext.55. The due date and time for this RFP to be submitted is **Thursday, July 26, 2018, no later than 2:00 p.m., please see Section 6.**

3.0 OBJECTIVE

The intent of these specifications is to obtain Generator Maintenance and Service for the equipment outlined in this document. The agreement resulting from these specifications shall cover the period from date of award August 10, 2018 through August 1, 2019. ***The agreement for this service may be extended for one additional year at the same cost based upon the agreement of both parties.*** The objective of this RFP is to obtain a Lump Sum Cost from contractors for the annual prescribed maintenance of fifteen (15) emergency generators and transfer switches as described herein. Service requirements are described within the scope of services.

Also, the Town would like to ascertain the contractor's hourly rates both standard and premium for additional or emergency work that would not be part of the routine maintenance described in the Scope of Services. Please provide these rates in **Appendix B**, the rates should include travel time and fuel surcharges etc.

4.0 SCOPE OF SERVICES

The work to be performed by the Contractor consists of furnishing all material, labor, supervision, tools, supplies, and equipment necessary to provide maintenance services, including all inspections, adjustments, tests, parts replacement, to keep the Generators covered under this agreement available when needed at their established capacities and efficiencies. The upgrading of equipment is not within the scope of this specification. Any changes or alterations will require authorization by the Town of North Castle Water and Sewer Department.



The annual service and inspection per unit shall include all items listed in the **Annual Generator Service Requirements** to ensure reliable operation; this routine service shall include inspection and maintenance of transfer switches.

The proposed price shall include all prevailing labor rates, test equipment, labor and adjustments, filters, fluids, fuel surcharges, travel time, necessary to perform maintenance on each specific generator as outlined in the service requirements. Any and all work performed on equipment within this agreement will be performed during normal daily work hours, Monday thru Friday. Any non-routine service needs other than those listed herein shall be outlined to the Town as maintenance recommendations, which shall be covered as necessary out of the scope of this agreement.

All work shall be performed in a professional manner, consistent with trade standards. The Town shall be the sole judge in determining acceptability of all work performed under this agreement. Work sites shall be left clean after all maintenance is completed. Failure to maintain an acceptable level of quality and responsive service shall be grounds for termination of the maintenance agreement. All permits and licenses if necessary for execution of work shall be secured by Contractor. All work performed and equipment used shall comply with all pertinent O.S.H.A., Federal, State, and Local regulations.

ANNUAL GENERATOR SERVICE REQUIREMENTS

- a) Inspect battery charger (adjust if necessary) Inspect Starting battery, clean connections, service battery, apply corrosion protection.
- b) Check instruments.
- c) Check warning lights & gauges for proper operation.
- d) Inspect cooling system-- Belts, Hoses, Radiator & Radiator Cap, add fluid as required.
- e) Check engine block heater & thermostat.
- f) Perform Antifreeze Analysis- Test for freeze point, nitrate levels & corrosion inhibitor levels using visual color test procedure.
- g) Check fan and governor belts for wear and proper tension.
- h) Check fuel lines and hoses for pliability and leaks.
- i) Change fuel filter and fuel separator (if necessary) No bleeder type filters to be used.
- j) Inspect air intake system including hoses - Replace Air Filter & Crankcase Breather.
- k) Inspect ignition system- Replace, Spark Plugs, Points (if necessary), Distributor Cap, Rotor (Liquid Propane/Natural Gas units only).
- l) Inspect Lubrication System- Change engine oil & filter use 15W 40 oil on all units.
- m) Perform Generator End performance measurement and analysis.
- n) Perform Generator, Generator End, ATS & Component Safety Check.
- o) Perform Electrical Frequency Analysis and Adjustment (as needed).
- p) Run Under Load when possible (authorization required).



AUTOMATIC TRANSFER SWITCH MAINTENANCE

- **INTERIOR WIRING AND COMPONENTS**

- a) Perform visual inspection of all wiring and connections for signs of tracking, overheating and visual deterioration.
- b) Check and tighten, where necessary, all control circuit wire terminals.
- c) Check manual switches for free movement and contact continuity.
- d) Check all time delay settings and adjust to required proper settings.
- e) Check clean and adjust, where necessary, relay finger contacts.
- f) Check condition of main and arching contacts and auxiliary contacts.
- g) Check lug connections and mounting insulator bolts.
- h) Check for proper transfer operation and sequencing of time control relays.
- i) Lubricate all necessary mechanical parts.
- j) Clean enclosure interior, remove accumulated dust or dirt.

Note: Three of the transfer switches listed do not require service, they are new and recently installed.

- **MISCELLANEOUS**

- a) Provide report of inspection findings.
- b) Report recommendations for replacement of components, which may inhibit emergency operations.
- c) Report unsafe conditions.



5.0 GENERATOR & TRANSFER SWITCH LISTING

	DIST.	LOCATION	MAKE	KW	FUEL	GEN. MOD#	ATS. MOD#	
1	S2	NEW RT. 22	KOHLER	30	PROPANE	30RZG	ASCO-300 G -150	
2	S2	OLD RT. 22	KOHLER	30	PROPANE	30RZG	ASCO-300 G -150	
3	S2	WAMPUS PARK	KOHLER	15	PROPANE	15RYG	KOHLER –KSS- ACTC-0150S	
4	S2	RT. 128	KOHLER	15	PROPANE	15RYG	ASCO-300 G -100	
5	S2	WOODHOLLOW	ONAN	20	NATURAL GAS	20GGDB	ONAN LTB5669951	
6	S3	NEW KING ST	KOHLER	40	PROPANE	40 REZG	K168343-225	
7	S3	COONEY HILL RD	KOHLER	40	PROPANE	40 REZG	K168343-225	
8	S3	KING ST. RT 120	KOHLER	60	PROPANE	60 REZG	KOHLER –KSS- ACTC-0150S	
9	S4	QUARRY HEIGHTS	ONAN	80	PROPANE	80ENAD	ONAN OT-150	
10	W2	WINDMILL PH	ONAN	125	DIESEL	125DGEA	ASCO 940	Indoors
11	W2	WINDMILL WELLS	DAYTON	40	PROPANE	4LM43	ZENITH GTS MX100	
12	W4	IBM - PH	ONAN	100	PROPANE	100GGHD	ASCO 940	Indoors
13	W4	SCHOOL ST -PH	GENERAC	45	PROPANE	91A01684-S	GENERAC GTS (WN) TYPE	Indoors
14	W4	WHIPP. HILLS -PH	KOHLER	100	PROPANE	100RZ	KOHLER S-340	Indoors
15	W1	980 NO. BROADWAY, NWP	GENERAC	150	NATURAL GAS	SG150	ASCO 3ATS J 600	



6.0 RFP SUBMITTAL AND REQUESTED INFORMATION

Submittals should include:

- (a) Introduction: provide a brief letter of introduction on the contractor's letterhead transmitting all RFP information;
- (b) Experience/Qualifications: provide a profile of experience that demonstrates the contractor has been engaged in this type of work for a minimum of 10 years, including the contractor's experience with similar projects; all technicians shall be factory trained and certified by at least one of the generator manufactures.
- (c) References: Upon request; provide information and references on similar work;
- (d) Proof of insurance: as outlined in **APPENDIX A**- only items unstricken will be required; additionally, the *Indemnification and Hold Harmless Agreement* must be provided.
- (e) Proposal Form: To be completed in **APPENDIX B**;
- (f) Please forward all required documentation to:

Sal Misiti
Town of North Castle
Water & Sewer Department
15 Business Park Drive
Armonk, NY 10504
Phone: 914-273-1882—ext. 55
Fax: 914-273-3075

Deadline for Submittal:

Thursday, July 26, 2018 ~ no later than 2:00 p.m.

7.0 PRINCIPALS AND REJECTION STATEMENT

Contractors are advised that the Town of North Castle will only deal with the principals or their designated agents with regard to this RFP. Furthermore, it is to be understood by the principals and their agents that the Town is not obligated to accept any proposal nor negotiate any proposal, and the Town reserves the right to accept the proposal, which in its sole opinion, will best serve the public interest.



8.0 OWNERSHIP OF SUBMITTED MATERIALS

All statements of qualifications and related materials received by the Town become its property and may be returned only at the Town's option.

9.0 PAYMENTS

A purchase order will be issued for the entire amount of all Generators and Transfer Switch units named in this document. It is expected that the annual service will take place during the fall of this year. The purchase order from the Town will serve as the execution of this agreement. Payments for annual service will be made upon completion of services as listed above.

Please direct any requests for information or clarification to:

**Sal Misiti
Town of North Castle
Water & Sewer Department
15 Business Park Drive
Armonk, NY 10504
Phone: 914-273-1882—ext. 55
Fax: 914-273-3075**



APPENDIX "A"

INSURANCE REQUIREMENTS

Prior to commencement of any work under this Contract and until completion and final acceptance of the work, the Contractor/Provider shall, at its sole expense, maintain the following insurance on its own behalf, and furnish to the Town of North Castle certificates of insurance evidencing same and reflecting the effective date of such coverage as follows:

The term "Contractor/Provider" as used in this indemnification agreement shall mean and include Subcontractors of every tier.

- 1) Worker's Compensation and Employers Liability Policy, covering operations in New York State. Where applicable, U.S. Longshore and Harbor Workers Compensation Act Endorsement and Maritime Coverage Endorsement shall be attached to the policy. Evidence must be provided on a C-105.2. Waiver of Subrogation to be included
- 2) ~~N.Y.S. Disability, covering all employees. DB 120.1 must be provided.~~
- 3) Commercial General Liability Policy, with limits of no less than \$1,000,000 Each Occurrence/\$2,000,000 Aggregate limits for Bodily Injury and Property Damage, and shall include coverage for:
 - A. Premises & Operations
 - B. Products/Completed Operations;
 - C. Independent Contractors;
 - D. Personal & Advertising Injury
 - E. Blanket Contractual Liability
 - F. XCU
 - G. Town of North Castle and their assigns, officers, employees, representatives and agents should be named as an "Additional Insured" on the policy using ISO Additional Insured Endorsement CG 20 10 11/85 or an endorsement providing equivalent or broader coverage and shall apply on a primary and noncontributory basis, including any self-insured retentions. The Certificate of Insurance should show this applies to the General Liability coverage on the certificate, and Additional Insured Endorsement shall be attached.
 - H. To the extent permitted by New York law, the Contractor/Provider waives all rights of subrogation or similar rights against Town of North Castle, assigns, officers, employees, representatives and agents.
 - I. General Aggregate shall apply separately to each project (must be on an occurrence form).
 - J. Cross Liability coverage (Commercial General Liability and Business Automobile Liability policies only).
 - K. Coverage for athletic participants must be included if renter is an athletic team or league.
- 4) Comprehensive Automobile Policy, with limits no less than \$1,000,000 Bodily Injury and Property Damage liability including coverage for owned, non-owned, and hire private passenger and commercial vehicles.
 - A. Town of North Castle and their assigns, officers, employees, representatives and agents should be named as an "Additional Insured" on the policy. The Certificate of Insurance should show this applies to the Automobile Liability coverage on the certificate, and Additional Insured Endorsement shall be attached.



- B. To the extent permitted by New York law, the Contractor/Provider waives all rights of subrogation or similar rights against Town of North Castle, assigns, officers, employees, representatives and agents.
- C. If applicable, policy should be specifically endorsed to cover snow plow operations.
- 5) Umbrella Liability, with limits of no less than \$3,000,000 Each Occurrence/\$3,000,000 Aggregate, including coverage for General Liability, Automobile, Workers Compensation and Professional Liability (if applicable).
- 6) Professional Liability (if applicable), with limits no less than \$1,000,000. Per Claim.
- 7) Owners & Contractors Protective Liability Policy, with limits no less than \$1,000,000 Per Occurrence/\$2,000,000 Aggregate shall be taken out with the Town of North Castle as the Named Insured, and maintained during the life of this contract which will protect the Town of North Castle from claims for damages for personal injury, liability, accidental or wrongful death, as well as property damage which may arise from operations under this contract whether such operations be by himself or by any subcontractor or by anyone directly or indirectly employed by either party.
- 8) Bid, Performance and Labor & Material Bonds, if required in the specifications, these bonds shall be provided by a New York State admitted Surety Company, in good standing.
- 9) Property Insurance, the Contractor shall cover materials being installed onsite, in transit, and/or at any other location.
- 10) Asbestos/Lead Abatement and Environmental Clean Up, if applicable. Coverage for the removal of asbestos and/or lead and related pollution events, including coverage for third party liability claims for bodily injury, property damage and clean up costs: \$1,000,000 per occurrence/\$2,000,000 aggregate including Products and Completed Operations. If a retroactive date is used, it must pre-date the inception of the contract
- 11) Certificates shall provide that thirty (30) days written notice prior to cancellation or expiration be given to the Town of North Castle. Policies that lapse and/or expire during term of work shall be recertified and received by the Town of North Castle no less than thirty (30) days prior to expiration or cancellation.
- 12) If applicant is applying for an Alcohol permit from the Town Clerk, the certificate of Insurance must also include Liquor Liability coverage as follows: If a fee is not being charged to those attending the applicant's event, "Host Liquor Liability" coverage must be provided at the same limits indicated in 1) above or, if a fee is being charged to those attending the applicant's event, "Liquor Law Liability" coverage must be provided at the same limits as indicated in 1) above.



The Contractor/Provider shall furnish to Town of North Castle Certificates of Insurance as evidence of coverage prior to commencement of work and naming Town of North Castle as an Additional Insured **by endorsement**. The Contractor/Provider acknowledges that failure to obtain such insurance on behalf of the Town of North Castle Constitutes a material breach of contract and subjects it to liability for damages, indemnification and all other legal remedies available to the Town of North Castle. The failure of the Town of North Castle to object to the contents of the certificate or absence of same shall not be deemed a waiver of any and all rights held by the Town of North Castle.

The cost of furnishing the above insurance shall be borne by the Contractor/Provider, there will be no direct payment for this work. Cost will be deemed to have been included in the price bid for all scheduled items.

All carriers listed in the certificates of insurance shall be A.M. Best Rated A VII or better and be licensed in the State of New York.



Indemnification and Hold Harmless Agreement

To the fullest extent permitted by law, Contractor/Provider shall indemnify, hold harmless and defend Town of North Castle, and agents and employees of any of them from and against all claims, damages, losses or expenses including but not limited to attorney's fees arising out of or resulting from the performance of the agreement, provided such claim, damage, loss or expense (a) is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property, including loss of use resulting there from, and (b) is caused in whole or in part by an act or omission or violation of statutory duty or regulation of the Contractor/Provider or anyone directly or indirectly employed by it or anyone for whose acts it may be liable pursuant to the performance of the agreement. Notwithstanding the foregoing, Contractor/Provider's obligation to indemnify Town of North Castle, and its agents and employees of any of them for any judgment, mediation or arbitration award shall exist to the extent caused in whole or in part by (a) negligent acts or omissions, or (b) violations of regulatory or statutory provisions of the New York State Labor Law, OSHA, or other governing rule or applicable law; by the Contractor/Provider anyone directly or indirectly employed by it or anyone for whose acts it may be liable in connection to such claim, damage, loss and expense. The obligation of the Contractor/Provider to indemnify any party under this paragraph shall not be limited in any manner by limitation of the amount of insurance coverage or benefits including worker's compensation or other employee benefit acts provided by the Contractor/Provider.

Company Title/Name: _____

Name: _____ Signature: _____

Date: _____

Nature/Scope of Work Being Performed: _____



APPENDIX "B"
PROPOSAL

I _____, _____
Individual Of Office Held

Company Name

Address

	DIST.	LOCATION	MAKE	KW	FUEL	GEN. MOD#	Generator Annual \$	ATS. MOD#	ATS Annual \$
1	S2	NEW RT. 22	KOHLER	30	PROPANE	30RZG		ASCO-300 G -150	N/A
2	S2	OLD RT. 22	KOHLER	30	PROPANE	30RZG		ASCO-300 G -150	N/A
3	S2	WAMPUS PARK	KOHLER	15	PROPANE	15RYG		KOHLER –KSS- ACTC-0150S	
4	S2	RT. 128	KOHLER	15	PROPANE	15RYG		ASCO-300 G -100	N/A
5	S2	WOODHOLLOW	ONAN	20	NATURAL GAS	20GGDB		ONAN LTB5669951	
6	S3	NEW KING ST	KOHLER	40	PROPANE	40REZG		K168343-225	
7	S3	COONEY HILL RD	KOHLER	40	PROPANE	40REZG		K168343-225	
8	S3	KING ST. RT 120	KOHLER	60	PROPANE	60REZG		KOHLER –KSS- ACTC-0150S	
9	S4	QUARRY HEIGHTS	ONAN	80	PROPANE	80ENAD		ONAN OT-150	
10	W2	WINDMILL PH	ONAN	125	DIESEL	125DGEA		ASCO 940	
11	W2	WINDMILL WELLS	DAYTON	40	PROPANE	4LM43		ZENITH GTS MX100	
12	W4	IBM - PH	ONAN	100	PROPANE	100GGHD		ASCO 940	
13	W4	SCHOOL ST -PH	GENERAC	45	PROPANE	91A01684-S		GENERAC GTS (WN) TYPE	
14	W4	WHIPP. HILLS - PH	KOHLER	100	PROPANE	100RZ		KOHLER S-340	
15	W1	980 North Broadway	GENERAC	150	Natural Gas	SG150		ASCO 3ATS J 600	
						Generator Total \$	\$	ATS TOTAL \$	\$
						GRAND TOTAL -GEN & ATS		\$	



Submit herewith the lump sum price of: _____
Dollars

(_____)
Written Dollars

SAID PRICE INCLUDES:

All Labor & Material, insurance, according to specifications as outlined above.

The price quoted above is valid for the period from: _____ to _____

By: _____ Date: _____

Secretary of Corporation

Corporate Seal

HOURLY RATES: *For items not within the service agreement-As described in Section 3*
OBJECTIVE

STANDARD HOURLY= _____

EMERGENCY HOURLY= _____