

City of Saratoga Springs
OFFICE OF COMMISSIONER OF ACCOUNTS
474 Broadway - City Hall
Saratoga Springs, New York 12866

JOHN P. FRANCK
COMMISSIONER

SHARON J. KELLNER-BYRNES
DEPUTY COMMISSIONER

Telephone 518-587-3550
Fax 518-587-6512

Award/Extension of Bid Sign-Off Form

Award of Bid

Prior to an award of bid being placed on Commissioner Franck's agenda for a City Council meeting, this form **must** be completed and the following **must** occur:

- A memo from your department's commissioner/mayor requesting the award of bid be placed on Commissioner Franck's agenda; and
- A copy of the bid tabulation sheet with all vendors names, addresses, and contact person; and
- the Assistant Purchasing Agent **must** review that the purchasing policy was followed in the selection of the vendor and indicate such by signing below; and
- the Director of Risk and Safety **must** be provided a copy of the vendor's certificate of insurance (if applicable) for review and indicate by signing below that the vendor meets all insurance requirements for the City of Saratoga Springs; and
- approved certification of funds by the Finance Department (if applicable) **must** be obtained and a copy **must** be attached to request an award of bid; and
- budget line item **must** be identified and indicated below.

Extension of Bid

Prior to an extension of bid being placed on Commissioner Franck's agenda for a City Council meeting, this form **must** be completed and the following **must** occur:

- A memo from your department's commissioner/mayor requesting the extension of bid be placed on Commissioner Franck's agenda; and
- A copy of the page from the previous year's bid showing the bid can be extended; and
- the Assistant Purchasing Agent **must** review that the purchasing policy was followed in the selection of the vendor and indicate such by signing below; and
- the Director of Risk and Safety **must** be provided a copy of the vendor's certificate of insurance (if applicable) for review and indicate by signing below that the vendor continues to meet all insurance requirements for the City of Saratoga Springs; and
- approved certification of funds by the Finance Department (if applicable) **must** be obtained and a copy **must** be attached to request an extension of bid; and
- budget line item **must** be identified and indicated below.

Department That Owns Award/Extension of Bid: Public Safety

Project or Item Being Awarded: Lake Ave Fire Station Window Replacement Bid #2015-39

Item Being Extended:

Vendor Who Won the Bid: Hoosick Valley Contractors

Budget Line Item: H-31-4-6952 / 52000 / 1203

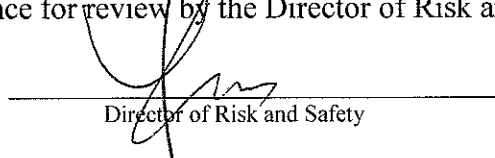
Budget Line Item: H-31-4-6952 / 52000 / 1186

Assistant Purchasing Agent: Purchasing policy has / has not been followed in the selection of the winner of the bid or bid extension.


Assistant Purchasing Agent

10/29/15
Date

Director of Risk and Safety: Vendor being awarded the bid or the bid being extended has / has not met all insurance requirements of the City of Saratoga Springs and has provided a copy of their certificate of insurance for review by the Director of Risk and Safety.


Director of Risk and Safety

10/30/15
Date

****An award/extension of bid will not be placed on the Commissioner's agenda if any of the above is missing. The request to place the item on the agenda will be returned to the appropriate department.**

City of Saratoga Springs
Department of Public Safety
474 Broadway
Saratoga Springs, NY 12866
(518) 587-3550 x 2632

Memorandum

To: Commissioner Franck
From: Commissioner Mathiesen *CM*
Date: October 29, 2015
Re: Award of Bid 2015-39

DPS would like to award bid#2015-39 Lake Ave Fire Station Window Replacement to Hoosick Valley Contractors as they were the lowest bidder. Please put this on your agenda for the City Council meeting on 11-2-15

Thank you.

Lake Avenue Fire Station Window Replacement 2015-39 Bid Results

Zerodraft of CNY Inc.

Travis Boylan
 2824 LeMoynre Ave.
 Syracuse, NY 13211
Tboylan@zerodraft.com

Purchasing

Risk and Safety

Approved

View-Tech, Inc.
 Sean Smith
 5010 Campuswood Drive, Suite 105
 East Syracuse, NY 13057
seansmith@view-tech.net

Approved

BR Johnson, Inc.
 Anthony Minieri
 6960 Fly Road
 East Syracuse, NY 13057
aminieri@brjohnson.com

Approved

Puro Construction Company
 Salvatore Daniello
 382 Lepper Road
 Fort Johnson, NY 12070
sldaniello@puroconstruction.com
jhills@puroconstruction.com

Approved

Lump Sum	\$122,309.00	
"Add" unit	\$27.50	
"Deduct" unit	\$27.50	
Bid Alternate	\$12,174.00	
Total Lump Sum + Alternate	\$134,483.00	
Lump Sum	\$129,880.00	
"Add" unit	\$55.00	
"Deduct" unit	\$55.00	
Bid Alternate	\$8,580.00	
Total Lump Sum + Alternate	\$138,460.00	
Lump Sum	\$138,490.00	
"Add" unit	\$900.00	
"Deduct" unit	\$900.00	
Bid Alternate	\$14,880.00	
Total Lump Sum + Alternate	\$153,370.00	
Lump Sum	\$154,238.00	
"Add" unit	\$4.90	
"Deduct" unit	\$2.52	
Bid Alternate	\$15,009.00	
Total Lump Sum + Alternate	\$169,247.00	

Mid-State Industries

Michael Lucey
1105 Catalyn Street
Schenectady, NY 12303
peggie@midstateid.com

Lump Sum \$150,000.00
"Add" unit \$87.50
"Deduct" unit \$76.80
Bid Alternate \$14,390.00
Total Lump Sum + Alternate \$164,390.00

Approved

M. A. Schafer Construction, Inc.

Mark Schafer
4928 Western Tpk.
Altamont, NY 12009
maschaf@chomes@nycarrr.com

Lump Sum \$189,900.00
"Add" unit \$7.00
"Deduct" unit \$0.00
Bid Alternate \$12,500.00
Total Lump Sum + Alternate \$202,400.00

Incomplete bid
No copy, no code of
conduct, no waiver of
immunity

Stephen Miller General Contractors, Inc.

Stephen Miller General Contractors, Inc.
PO Box 291
Mayfield, NY 12117
michelle@smgc-inc.com

Lump Sum \$165,825.00
"Add" unit \$6.25
"Deduct" unit \$5.20
Bid Alternate \$9,960.00
Total Lump Sum + Alternate \$175,785.00

Approved

A. J. Arpey

Anthony Arpey
112 Columbia Avenue
Ballston Spa, NY 12020
a.jarpey@gmail.com

Lump Sum \$185,900.00
"Add" unit \$403.20
"Deduct" unit \$348.00
Bid Alternate \$19,750.00
Total Lump Sum + Alternate \$205,650.00

Approved

Gallo Construction Corp.

Michael Gallo
50 Lincoln Avenue
Watervliet, NY 12189
bid@gallopc.com

Lump Sum \$138,000.00
"Add" unit \$12.00
"Deduct" unit \$6.38
Bid Alternate \$7,300.00
Total Lump Sum + Alternate \$146,200.00

Incomplete bid
No copy

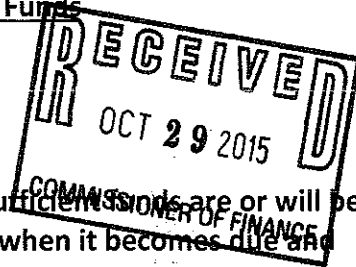
Hoosick Valley Contractors

Scott Willey
52 Melrose Valley Falls Rd.
Melrose, NY 12121
swiley@hoosickvalley.com

Lump Sum	\$107,000.00
"Add" unit	\$37.00
"Deduct" unit	\$37.00
Bid Alternate	\$9,500.00
Total Lump Sum + Alternate	\$116,500.00

Approved

Request for Certification of Sufficient Funds



Submittal Date: 10-29-15

The Department of Public Safety requests certification that sufficient funds are or will be available to cover the claim to meet the following obligation when it becomes due and payable.

Obligation to be incurred, detailing vendor name, project description, Council approval, etc. (attach supporting documentation):

Award of Bid 2015-39 Lake Ave Fire Station Windows to Hoosick Valley Contractors at City Council meeting 11-3-15

\$ 116,500.00

Appropriation – Current Budget Expense Org/Object/Proj(s): H-31-4-6952 / 52000 / 1203 ✓

H 3146952 / 52000 / 1186 ✓

Amount Requested for Approval: \$ 33,040.00 + 83,460.00

Current Amount Available: \$ 33,040.00 + 185,238.35

cgb.

} per Lisa N. 10/29/15

Transfer/Amendment Pending: \$

Transfer/Amendment Date:

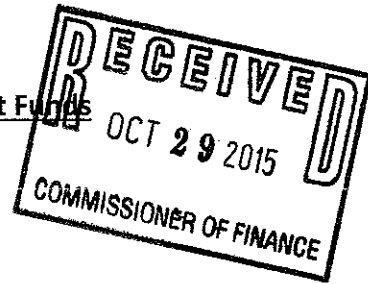
Eileen Linn 10/29/15
Department Head Signature Date

Certification of Sufficient Funds

The Commissioner of Finance hereby certifies that funds are or will be available to cover the claim to meet the above described obligation when it becomes due and payable.

Michelle Clark-Madigan 10/29/15
Commissioner of Finance Approval Date

Request for Certification of Sufficient Funds



Submittal Date: 10-29-15

The Department of Public Safety requests certification that sufficient funds are or will be available to cover the claim to meet the following obligation when it becomes due and payable.

Obligation to be incurred, detailing vendor name, project description, Council approval, etc. (attach supporting documentation):

Award of Bid 2015-39 Lake Ave Fire Station Windows to Hoosick Valley Contractors at City Council meeting 11-~~3~~²-15

Appropriation – Current Budget Expense Org/Object/Proj(s): H-31-4-6952 / 52000 / ~~1203~~¹¹⁸⁶

Amount Requested for Approval: \$ 83,460.00

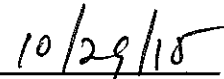
Current Amount Available: \$ 185,238.35

Transfer/Amendment Pending: \$

Transfer/Amendment Date:



Department Head Signature



Date

Certification of Sufficient Funds

The Commissioner of Finance hereby certifies that funds are or will be available to cover the claim to meet the above described obligation when it becomes due and payable.

Commissioner of Finance

Approval Date

Lake Avenue Fire Station Window Replacement 2015-39 Bid Results

Zerodraft of CNY Inc.

Travis Boylan
2824 LeMoynne Ave.
Syracuse, NY 13211

Tboylan@setzerdraft.com

Lump Sum \$122,309.00
"Add" unit \$27.50
"Deduct" unit \$27.50
Bid Alternate \$12,174.00
Total Lump Sum + Alternate \$134,483.00

Purchasing

Risk and Safety

Approved

View-Tech, Inc.

Sean Smith
5010 Campuswood Drive, Suite 105
East Syracuse, NY 13057

seansmith@view-tech.net

Lump Sum \$129,880.00
"Add" unit \$55.00
"Deduct" unit \$55.00
Bid Alternate \$8,580.00
Total Lump Sum + Alternate \$138,460.00

Approved

BR Johnson, Inc.

Anthony Minieri
6960 Fly Road
East Syracuse, NY 13057

aminiერი@brjohnson.com

Lump Sum \$138,490.00
"Add" unit \$900.00
"Deduct" unit \$900.00
Bid Alternate \$14,880.00
Total Lump Sum + Alternate \$153,370.00

Approved

Puro Construction Company

Salvatore Daniello
382 Lepper Road
Fort Johnson, NY 12070

sldaniello@puroconstruction.com

Lump Sum \$154,238.00
"Add" unit \$4.90
"Deduct" unit \$2.52
Bid Alternate \$15,009.00
Total Lump Sum + Alternate \$169,247.00

Approved

jhillis@puroconstruction.com

Mid-State Industries

Michael Lucey
1105 Catalyn Street
Schenectady, NY 12303
peegle@midstateid.com

Lump Sum \$150,000.00
"Add" unit \$87.50
"Deduct" unit \$76.80
Bid Alternate \$14,390.00
Total Lump Sum + Alternate \$164,390.00

Approved

M. A. Schafer Construction, Inc.

Mark Schafer
4928 Western Tpk
Altamont, NY 12009
maschaferhomes@nycaid.org

Lump Sum \$189,900.00
"Add" unit \$7.00
"Deduct" unit \$0.00
Bid Alternate \$12,500.00
Total Lump Sum + Alternate \$202,400.00

Incomplete bid
No copy, no code of
conduct, no waiver of
immunity

Stephen Miller General Contractors, Inc.

Stephen Miller General Contractors, Inc.
PO Box 291
Mayfield, NY 12117
michelle@smgc-inc.com

Lump Sum \$165,825.00
"Add" unit \$6.25
"Deduct" unit \$5.20
Bid Alternate \$9,960.00
Total Lump Sum + Alternate \$175,785.00

Approved

A. J. Arpey

Anthony Arpey
112 Columbia Avenue
Ballston Spa, NY 12020
a.jarpey@email.com

Lump Sum \$185,900.00
"Add" unit \$403.20
"Deduct" unit \$348.00
Bid Alternate \$19,750.00
Total Lump Sum + Alternate \$205,650.00

Approved

Gallo Construction Corp.

Michael Gallo
50 Lincoln Avenue
Watervliet, NY 12189
bid@gallobc.com

Lump Sum \$138,000.00
"Add" unit \$12.00
"Deduct" unit \$6.38
Bid Alternate \$7,300.00
Total Lump Sum + Alternate \$145,200.00

Incomplete bid
No copy

Hoosick Valley Contractors

Scott Wiley

52 Melrose Valley Falls Rd.

Melrose, NY 12121

swiley@hoosickvalley.com

Lump Sum	\$107,000.00
"Add" unit	\$37.00
"Deduct" unit	\$37.00
Bid Alternate	\$9,500.00
Total Lump Sum + Alternate	\$116,500.00

Approved



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/30/2015

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).

PRODUCER Arthur J. Gallagher Risk Management Services, Inc. 677 Broadway 4th Floor Albany NY 12207	CONTACT NAME: Wendy Bentley	
	PHONE (A/C, No., Ext): 518-869-3535 FAX (A/C, No.): 518-869-3580 E-MAIL ADDRESS: WENDY_BENTLEY@AJG.COM	
INSURED Hoosick Valley Contractors Inc 52 Melrose-Valley Falls Road Melrose NY 12121	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Cincinnati Insurance Company	10677
	INSURER B: Technology Insurance Company, Inc	42376
	INSURER C: Wesco Insurance Company	25011
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: 1799021439 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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	CPP3652394	6/1/2015	6/1/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		EBA0190781	6/1/2015	6/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10,000		CPP3652394	6/1/2015	6/1/2016	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
B	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 <input checked="" type="checkbox"/> N N/A	TWC3473994	4/1/2015	4/1/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$100,000
C A	NYS DBL LEASED/RENTED EQUIPMENT BUILDERS RISK		89100175805 CPP3652394	1/1/2015 6/1/2015	1/1/2016 6/1/2016	Statutory Limits LIMIT 175,000 LIMIT 1,076,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

BLANKET AI GL GA233 INC WOS PRIM/NC
BLANKET AI AUTO AA101 BLANKET WOS AA4172 PRIM/NC AA4174
UMB FOLLOWS GL PRIM NC UA 4096

The City of Saratoga Springs, NY, Ryan Biggs Clark Davis Engineering & Surveying, P.C. and Butler Rowland Mays Architects, LLP and their employees and agents are listed as additional insureds on a primary and non-contributory basis with regard to the Lake Avenue Fire Station Window Replacement Project at 60 Lake Avenue Saratoga Springs, NY 12866 for the duration of the project.

CERTIFICATE HOLDER City of Saratoga Springs, NY 474 Broadway Saratoga Springs NY 12866	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

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City of Saratoga Springs, NY: Risk and Safety Agreement

City Project Number: 2015-39 City Project Name: Lake Ave Fire House Window Replacement
 City Department: Public Safety Department Contact Person: Chief Williams City Ext. 3012
 Company Name: Horsick Valley Contractors, Inc
 Company Address: 59 Melrose Valley Falls Road, Melrose, NY 12121
 Company Telephone No.: 518-235-7108 Company Fax No.: 518-235-7484
 Contractor Primary Contact for This Project: Scott Wiley Title: Vice-President

The City of Saratoga Springs herein requires the following terms and conditions regarding the agreement for the provision of professional services as outlined above:

The Contractor shall procure and maintain during the term of this contract, at the Contractor's expense, the insurance policies listed with limits equal to or greater than the enumerated limits. The Contractor shall be solely responsible for any self-insured retention or deductible losses under each of the required policies. Every required policy, including any required endorsements and any umbrella or excess policy, shall be primary insurance. Insurance carried by the City of Saratoga Springs, its officers, or its employees, if any, shall be excess and not contributory insurance to that provided by the Contractor. Every required coverage type shall be "occurrence basis" with the exception of Professional Errors and Omissions Coverage which may be "claims made" coverage. The Contractor may utilize umbrella/excess liability coverage to achieve the limits required hereunder; such coverage must be at least as broad as the primary coverage (follow form). The Office of Risk & Safety Management must approve all insurance certificates. The City of Saratoga Springs reserves its right to request certified copies of any policy or endorsement thereto. All insurance shall be provided by insurance carriers licensed & admitted to do business in the State of New York and must be rated "A-VII" or better by A.M. Best (Current Rate Guide). If the Contractor fails to procure and maintain the required coverage(s) and minimum limits such failure shall constitute a material breach of contract, whereupon the City of Saratoga Springs may exercise any rights it has in law or equity, including but not limited to the following: (1) immediate termination of the contract; (2) withholding any/all payment(s) due under this contract or any other contract it has with the vendor (common law set-off); OR (3) procuring or renewing any required coverage(s) or any extended reporting period thereto and paying any premiums in connection therewith. All monies so paid by the City of Saratoga Springs shall be repaid upon demand, or at the City's option, may be offset against any monies due to the Contractor.

The City of Saratoga Springs requires the Contractor name the City as a Certificate Holder for the following coverage for the work covered by this Agreement:

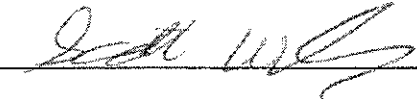
- Commercial General Liability including Completed Products and Operations and Personal Liability Insurance: One Million Dollars per Occurrence with Two Million Dollars Aggregate (City is also an Additional Insured on a Primary and Non-contributory Basis for this coverage);
- Commercial Automobile Insurance: One Million Dollars Combined Single Limit for Owned, Hired and Non-owned Vehicles
- Excess Liability Insurance: Three Million Dollars per Occurrence Aggregate
- NYS Statutory Workers Compensation, Employer's Liability and Disability Insurance

It shall be an affirmative obligation of the Contractor to advise City's Office of Risk and Safety via mail to Office of Risk and Safety, City of Saratoga Springs, 474 Broadway, Saratoga Springs, NY 12866, within two days of the cancellation or substantive change of any insurance policy set out herein, and failure to do so shall be construed to be a breach of this Agreement. The Contractor acknowledges that failure to obtain such insurance on behalf of the municipality constitutes a material breach of contract and subjects it to liability for damages, indemnification and all other legal remedies available to the City. The Contractor is to provide the City with a Certificate of Insurance naming the City as **Additional Insured on a primary and non-contributory basis prior** to the commencement of any work or use of City facilities. The failure to object to the contents of the Certificate of Insurance or the absence of same shall not be deemed a waiver of any and all rights held by the municipality. In the event the Contractor utilizes a Subcontractor for any portion of the services outlined within the scope of its activities, the Subcontractor shall provide insurance of the same type or types and to the same extent of coverage as that provided by the Contractor. All insurance required of the Subcontractor shall name the City of Saratoga Springs as an **Additional Insured on a primary and non-contributory** basis for the same coverage for all those activities performed within its contracted activities for the contact as executed.

The Contractor, to the fullest extent provided by law, shall defend, indemnify and save harmless the City of Saratoga Springs, its Agents and Employees (hereinafter referred to as "City"), from and against all claims, damages, losses and expense (including, but not limited to, attorneys' fees), arising out of or resulting from the performance of the work or purchase of the services, sustained by any person or persons, provided that any such claim, damage, loss or expense is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of property caused by the tortious act or negligent act or omission of Contractor or its employees or anyone for whom the Contractor is legally liable or Subcontractors. Without limiting the generality of the preceding paragraphs, the following shall be included in the indemnity hereunder: any and all such claims, etc., relating to personal injury, death, damage to property, or any actual or alleged violation of any applicable statute, ordinance, administrative order, executive order, rule or regulation, or decree of any court of competent jurisdiction in connection with, or arising directly or indirectly from, errors and/or negligent acts by the Contractor, as aforesaid.

Contractor shall comply with NYS OSHA laws as of July 18, 2008 requiring all workers on New York State public projects be certified as having completed an OSHA 10-hour construction safety course. Proof of this certification is required at the time of the execution of this Agreement. The City of Saratoga Springs specifically reserves the right to suspend or terminate all work under this contract whenever Contractor and/or Contractor's employees or subcontractors are proceeding in a manner that threatens the life, health or safety of any of Contractor's employees, subcontractor's employees, City employees or member(s) of the general public on City property. This reservation of rights by the City of Saratoga Springs in no way obligates the City of Saratoga Springs to inspect the safety practices of the Contractor. If the City of Saratoga Springs exercises its rights pursuant to this part, the Contractor shall be given three days to cure the defect, unless the City of Saratoga Springs, in its sole and absolute discretion, determines that the service cannot be suspended for three days due to the City of Saratoga Springs' legal obligation to continuously provide Contractor's service to the public or the City of Saratoga Springs' immediate need for completion of the Contractor's work. In such case, Contractor shall immediately cure the defect. If the Contractor fails to cure the identified defect(s), the City of Saratoga Springs shall have the right to immediately terminate this contract. In the event that the City of Saratoga Springs terminates this contract, any payments for work completed by the Contractor shall be reduced by the costs incurred by the City of Saratoga Springs in re-bidding the work and/or by the increase in cost that results from using a different vendor.

Contractor, having agreed to the terms and the recitals set forth herein, and in relying thereon, herein signs this Agreement.

Contractor Signature:  Date: 10/30/15