

PROPOSER SUMMARY SHEET

RFP #24-042

2024-2026 Sanitary Sewer Cleaning & Televising Program

Business Name: Pipe View, LLC DBA Pipe View America

Street Address: 13190 Farm to Market Rd 730 S

City, State, Zip: Azle, TX, 76020

Contact Name: Tony Barger

Title: Director of Estimating

Phone: 970-404-5182 Fax: 815-600-8247

E-Mail address: tonyb@pipeviewamerica.com

Price Proposal

2024 Total Price	\$ <u>219,905.40</u>
2025 Total Price	\$ <u>200,723.60</u>
2026 Total Price	\$ <u>258,380.50</u>
GRAND TOTAL PROPOSAL PRICE	\$ <u>679,009.50</u>

AUTHORIZATION & SIGNATURE

Name of Authorized Signee: Tony Barger

Signature of Authorized Signee: 

Title: Director of Estimating Date: 4/18/2024

 ORLAND PARK
CERTIFICATE OF COMPLIANCE

Proposals shall complete this Certificate of Compliance. Failure to comply with all submission requirements may result in a determination that the Proposals is not responsible.

The undersigned Tony Barger,
(Enter Name of Person Making Certification)

as Director of Estimating
(Enter Title of Person Making Certification)

and on behalf of Pipe View, LLC,
(Enter Name of Business Organization)

certifies that Proposers is:

1) **A BUSINESS ORGANIZATION:** Yes ☒ No ☐

Federal Employer I.D. #: 88-3946886
(or Social Security # if a sole proprietor or individual)

The form of business organization of the Proposer is (*check one*):

☐ Sole Proprietor
☐ Independent Contractor (*Individual*)
☐ Partnership
☒ LLC
☐ Corporation Delaware 2/23/2021
(State of Incorporation) (Date of Incorporation)

2) **STATUS OF OWNERSHIP**

Illinois Public Act 102-0265, approved August 2021, requires the Village of Orland Park to collect "Status of Ownership" information. This information is collected for reporting purposes only. Please check the following that applies to the ownership of your business and include any certifications for the categories checked with the proposal. Business ownership categories are as defined in the Business Enterprise for Minorities, Women, and Persons with Disabilities Act, 30 ILCS 575/0.01 *et seq.*

Minority-Owned ☐	Small Business ☐ (SBA standards)
Women-Owned ☐	Prefer not to disclose ☐
Veteran-Owned ☐	Not Applicable ☒
Disabled-Owned ☐	

How are you certifying? Certificates Attached ☐ Self-Certifying ☐

STATUS OF OWNERSHIP FOR SUBCONTRACTORS

This information is collected for reporting purposes only. Please check the following that applies to the ownership of subcontractors.

Minority-Owned []	Small Business [] (SBA standards)
Women-Owned []	Prefer not to disclose []
Veteran-Owned []	Not Applicable [☒]
Disabled-Owned []	

3) AUTHORIZED TO DO BUSINESS IN ILLINOIS: Yes [☒] No []

The Proposer is authorized to do business in the State of Illinois.

4) ELIGIBLE TO ENTER INTO PUBLIC CONTRACTS: Yes [☒] No []

The Proposer is eligible to enter into public contracts, and is not barred from contracting with any unit of state or local government as a result of a violation of either Section 33E-3, or 33E-4 of the Illinois Criminal Code, or of any similar offense of "bid-rigging" or "bid-rotating" of any state or of the United States.

5) SEXUAL HARASSMENT POLICY COMPLIANT: Yes [☒] No []

Please be advised that Public Act 87-1257, effective July 1, 1993, 775 ILCS 5/2-105 (A) has been amended to provide that every party to a public contract must have a written sexual harassment policy in place in full compliance with 775 ILCS 5/2-105 (A) (4) and includes, at a minimum, the following information:

(I) the illegality of sexual harassment; (II) the definition of sexual harassment under State law; (III) a description of sexual harassment, utilizing examples; (IV) the vendor's internal complaint process including penalties; (V) the legal recourse, investigative and complaint process available through the Department of Human Rights (the "Department") and the Human Rights Commission (the "Commission"); (VI) directions on how to contact the Department and Commission; and (VII) protection against retaliation as provided by Section 6-101 of the Act. (Illinois Human Rights Act). (emphasis added). Pursuant to 775 ILCS 5/1-103 (M) (2002), a "public contract" includes "...every contract to which the State, any of its political subdivisions or any municipal corporation is a party."

6) EQUAL EMPLOYMENT OPPORTUNITY COMPLIANT: Yes [☒] No []

During the performance of this Project, Proposer agrees to comply with the "Illinois Human Rights Act", 775 ILCS Title 5 and the Rules and Regulations of the Illinois Department of Human Rights published at 44 Illinois Administrative Code Section 750, et seq.

The Proposer shall:

(I) not discriminate against any employee or applicant for employment because of race, color,

religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (II) examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any such underutilization; (III) ensure all solicitations or advertisements for employees placed by it or on its behalf, it will state that all applicants will be afforded equal opportunity without discrimination because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (IV) send to each labor organization or representative of workers with which it has or is bound by a collective bargaining or other agreement or understanding, a notice advising such labor organization or representative of the Vendor's obligations under the Illinois Human Rights Act and Department's Rules and Regulations for Public Contract; (V) submit reports as required by the Department's Rules and Regulations for Public Contracts, furnish all relevant information as may from time to time be requested by the Department or the contracting agency, and in all respects comply with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; (VI) permit access to all relevant books, records, accounts and work sites by personnel of the contracting agency and Department for purposes of investigation to ascertain compliance with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; and (VII) include verbatim or by reference the provisions of this Equal Employment Opportunity Clause in every subcontract it awards under which any portion of this Agreement obligations are undertaken or assumed, so that such provisions will be binding upon such subcontractor.

In the same manner as the other provisions of this Agreement, the Proposer will be liable for compliance with applicable provisions of this clause by such subcontractors; and further it will promptly notify the contracting agency and the Department in the event any subcontractor fails or refuses to comply therewith. In addition, the Proposer will not utilize any subcontractor declared by the Illinois Human Rights Department to be ineligible for contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations.

"Subcontract" means any agreement, arrangement or understanding, written or otherwise, between the Proposer and any person under which any portion of the Proposer's obligations under one or more public contracts is performed, undertaken or assumed; the term "subcontract", however, shall not include any agreement, arrangement or understanding in which the parties stand in the relationship of an employer and an employee, or between a Proposer or other organization and its customers.

In the event of the Proposer's noncompliance with any provision of this Equal Employment Opportunity Clause, the Illinois Human Right Act, or the Rules and Regulations for Public Contracts of the Department of Human Rights the Proposer may be declared non-responsible and therefore ineligible for future contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations, and this agreement may be canceled or avoided in whole or in part, and such other sanctions or penalties may be imposed or remedies involved as provided by statute or regulation.

7) PREVAILING WAGE COMPLIANCE: Yes ☒ No ☐

In the manner and to the extent required by law, this RFP is subject to the Illinois Prevailing Wage Act and to all laws governing the payment of wages to laborers, workers and mechanics of a Proposer or any subcontractor of a Proposer bound to this agreement who is performing services covered by this contract. If awarded the Contract, per 820 ILCS 130 et seq. as

amended, Proposer shall pay not less than the prevailing hourly rate of wages, the generally prevailing rate of hourly wages for legal holiday and overtime work, and the prevailing hourly rate for welfare and other benefits as determined by the Illinois Department of Labor or the Village and as set forth in the schedule of prevailing wages for this contract to all laborers, workers and mechanics performing work under this contract (available at <https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/Rates.aspx>).

The undersigned Proposer further stipulates and certifies that it has maintained a satisfactory record of Prevailing Wage Act compliance with no significant Prevailing Wage Act violations for the past three (3) years.

Certified Payroll. The Illinois Prevailing Wage Act requires any contractor and each subcontractor who participates in public works to file with the Illinois Department of Labor (IDOL) certified payroll for those calendar months during which work on a public works project has occurred. The Act requires certified payroll to be filed with IDOL no later than the 15th day of each calendar month for the immediately preceding month through the Illinois Prevailing Wage Portal—an electronic database IDOL has established for collecting and retaining certified payroll. The Portal may be accessed using this link: <https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/certifiedtranscriptofpayroll.aspx>. The Village reserves the right to withhold payment due to Contractor until Contractor and its subcontractors display compliance with this provision of the Act.

8) PARTICIPATION IN APPRENTICESHIP AND TRAINING PROGRAM: Yes ☒ No ☐

Proposer participates in apprenticeship and training programs applicable to the work to be performed on the project, which are approved by and registered with the United States Department of Labor's Office of Apprenticeship.

Name of A&T Program: Labors Union A&T Program

Brief Description of Program: Pipe View America employs Union Laborers that are
involved with the Union A&T Program.

9) TAX COMPLIANT: Yes ☒ No ☐

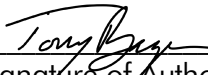
Proposer is current in the payment of any tax administered by the Illinois Department of Revenue, or if it is not: (a) it is contesting its liability for the tax or the amount of tax in accordance with procedures established by the appropriate Revenue Act; or (b) it has entered into an agreement with the Department of Revenue for payment of all taxes due and is currently in compliance with that agreement.

AUTHORIZATION & SIGNATURE:

I certify that I am authorized to execute this Certificate of Compliance on behalf of the Proposer set forth on the Proposer Summary Sheet, that I have personal knowledge of all the information set forth herein and that all statements, representations, that the proposal is genuine and not collusive, and information provided in or with this Certificate are true and accurate.

The undersigned, having become familiar with the Project specified in this RFP, proposes to provide and furnish all of the labor, materials, necessary tools, expendable equipment and all utility and transportation services necessary to perform and complete in a workmanlike manner all of the work required for the Project.

ACKNOWLEDGED AND AGREED TO:



Signature of Authorized Officer

Tony Barger

Name of Authorized Officer

Director of Estimating

Title

4/18/2024

Date

REFERENCES

Provide three (3) references for which your organization has performed similar work.

Proposer's Name: Pipe View America
(Enter Name of Business Organization)

- | | |
|-----------------|---|
| 1. ORGANIZATION | <u>Village of Mount Prospect</u> |
| ADDRESS | <u>1700 W Central Rd, Mount Prospect IL</u> |
| PHONE NUMBER | <u>847-870-5640</u> |
| CONTACT PERSON | <u>Scott Moe</u> |
| YEAR OF PROJECT | <u>2014-Current</u> |
| | |
| 2. ORGANIZATION | <u>Village of Round Lake</u> |
| ADDRESS | <u>751 W Townline Road, Round Lake, IL</u> |
| PHONE NUMBER | <u>847-546-0962</u> |
| CONTACT PERSON | <u>Adam Wedoff</u> |
| YEAR OF PROJECT | <u>2016-2022</u> |
| | |
| 3. ORGANIZATION | <u>Village of Lake Zurich</u> |
| ADDRESS | <u>505 Telser Road, Lake Zurich IL</u> |
| PHONE NUMBER | <u>847-540-1696</u> |
| CONTACT PERSON | <u>Kevin Lill, PE</u> |
| YEAR OF PROJECT | <u>2023- Current</u> |



ORLAND PARK

Unit Price Sheet

RFP 24-042

2024-2026 Sanitary Sewer Cleaning & Televising Program

The undersigned, having become familiar with the Documents, Inspection Exhibits, and Specifications as designated in RFP #24-042 hereby proposes to provide and furnish all of the labor, materials, necessary tools, expendable equipment and all utility and transportation services necessary to perform and complete in a workmanlike manner all of the work required for and the work described in the following schedule in connection with the inspection and maintenance.

NO	ITEM/DESCRIPTION	UNIT	2024 QTY	2024 UNIT PRICE	2024 EXTENDED PRICE	2025 QTY	2025 UNIT PRICE	2025 EXTENDED PRICE	2026 QTY	2026 UNIT PRICE	2026 EXTENDED PRICE
1	Video Inspection with Lt Cleaning (6"-8")	LF	55,510	\$2.26	\$ 125,452.60	63,230	\$2.41	\$ 152,384.30	73,150	\$2.64	\$ 193,116.00
2	Video Inspection with Lt Cleaning (10"-12")	LF	7,340	\$2.93	\$ 21,506.20	9,500	\$2.94	\$ 27,930.00	4,300	\$3.12	\$ 13,416.00
3	Video Inspection with Lt Cleaning (15"-18")	LF	8,950	\$4.19	\$ 37,500.50	110	\$11.13	\$ 1,224.30	4,650	\$4.49	\$ 20,878.50
4	Video Inspection with Lt Cleaning (20"-27")	LF	2,190	\$7.69	\$ 16,841.10	0	\$0.00	\$ -	1,300	\$7.60	\$ 9,880.00
5	Heavy Cleaning (6"-8")	LF	3,000	\$1.00	\$ 3,000.00	3,000	\$1.00	\$ 3,000.00	3,600	\$1.00	\$ 3,600.00
6	Heavy Cleaning (10"-12")	LF	400	\$2.00	\$ 800.00	450	\$2.00	\$ 900.00	500	\$2.00	\$ 1,000.00
7	Heavy Cleaning (15"-18")	LF	500	\$2.00	\$ 1,000.00	550	\$2.00	\$ 1,100.00	600	\$2.00	\$ 1,200.00
8	Heavy Cleaning (21"-27")	LF	110	\$3.00	\$ 330.00	120	\$3.00	\$ 360.00	130	\$3.00	\$ 390.00
9	Root Cutting (6"-8")	LF	2,000	\$1.00	\$ 2,000.00	2,000	\$1.00	\$ 2,000.00	2,000	\$1.00	\$ 2,000.00
10	Root Cutting (10"-12")	LF	300	\$2.00	\$ 600.00	300	\$2.00	\$ 600.00	300	\$2.00	\$ 600.00
11	Root Cutting (15"-18")	LF	300	\$3.00	\$ 900.00	300	\$3.00	\$ 900.00	300	\$3.00	\$ 900.00
12	Root Cutting (21"-27")	LF	100	\$3.00	\$ 300.00	100	\$3.00	\$ 300.00	100	\$3.00	\$ 300.00
13	Manhole Root Cutting	EA	3	\$500.00	\$ 1,500.00	3	\$500.00	\$ 1,500.00	3	\$500.00	\$ 1,500.00
14	Cut Protruding Taps	EA	10	\$250.00	\$ 2,500.00	10	\$250.00	\$ 2,500.00	10	\$250.00	\$ 2,500.00
15	Easement Access - Additional Cost	LF	1,900	\$0.25	\$ 475.00	3,300	\$0.25	\$ 825.00	7,600	\$0.25	\$ 1,900.00
16	On-Call Crew Labor Hours (TV Truck and VAC Truck)	HR	10	\$395.00	\$ 3,950.00	10	\$395.00	\$ 3,950.00	10	\$395.00	\$ 3,950.00
17	Locate and Mark Pipe Defect	EA	2	\$125.00	\$ 250.00	2	\$125.00	\$ 250.00	2	\$125.00	\$ 250.00
18	Locate Buried Manhole	EA	2	\$250.00	\$ 500.00	2	\$250.00	\$ 500.00	2	\$250.00	\$ 500.00
19	Service Inspection Notification	EA	10	\$50.00	\$ 500.00	10	\$50.00	\$ 500.00	10	\$50.00	\$ 500.00
			*2024 TOTAL COST		\$ 219,905.40	*2025 TOTAL COST		\$ 200,723.60	*2026 TOTAL COST		\$ 258,380.50

GRAND TOTAL BID PRICE

\$

679,009.50

*Please enter Total Cost on Bidder Summary Sheet

Company Name: Pipe View, LLC DBA Pipe View America

Signed:

Title: Director of Estimating

Dated: 4/18/2024



ORLAND PARK

INSURANCE REQUIREMENTS

Please provide a policy Specimen Certificate of Insurance showing current coverage's along with this form

WORKERS' COMPENSATION & EMPLOYER LIABILITY

Full Statutory Limits - Employers Liability
\$500,000 – Each Accident \$500,000 – Each Employee
\$500,000 – Policy Limit
Waiver of Subrogation in favor of the Village of Orland Park

AUTOMOBILE LIABILITY (ISO Form CA 0001)

\$1,000,000 – Combined Single Limit Per Occurrence
Bodily Injury & Property Damage

GENERAL LIABILITY (Occurrence basis) (ISO Form CG 0001)

\$1,000,000 – Combined Single Limit Per Occurrence
Bodily Injury & Property Damage
\$2,000,000 – General Aggregate Limit
\$1,000,000 – Personal & Advertising Injury
\$2,000,000 – Products/Completed Operations Aggregate
Additional Insured Endorsements: *(not applicable for Goods Only)*
ISO CG 20 10 or CG 20 26
and
CG 20 01 Primary & Non-Contributory
Blanket Waiver of Subrogation in favor of the Village of Orland Park

☐ CG 20 37 Additional Insured – Completed Operations (provide if box is checked)

In addition to the above, please provide the following coverage, if box is checked.

☐ LIABILITY UMBRELLA (Follow Form Policy)

- ☐ \$1,000,000 – Each Occurrence \$1,000,000 – Aggregate
☐ \$2,000,000 – Each Occurrence \$2,000,000 – Aggregate
☐ Other: _____

EXCESS MUST COVER: General Liability, Automobile Liability, Employers' Liability

☐ PROFESSIONAL LIABILITY

- ☐ \$1,000,000 Limit – Claims Made Form, Indicate Retroactive Date
☐ \$2,000,000 Limit – Claims Made Form, Indicate Retroactive Date
☐ Other: _____
Deductible not-to-exceed \$50,000 without prior written approval

☐ BUILDERS RISK

Completed Property Full Replacement Cost Limits – Structures under construction

☐ ENVIRONMENTAL IMPAIRMENT/POLLUTION LIABILITY

\$1,000,000 Limit for bodily injury, property damage and remediation costs resulting from a pollution incident at, on or mitigating beyond the job site

☐ CYBER LIABILITY

\$1,000,000 Limit per Data Breach for liability, notification, response, credit monitoring service costs, and software/property damage

Any insurance policies providing the coverages required of the Consultant, excluding Professional Liability, shall be specifically endorsed to identify **"The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents as Additional Insureds on a primary/non-contributory basis with respect to all claims arising out of operations by or on behalf of the named insured."** The required

9/9/22

Additional Insured coverage shall be provided on the Insurance Service Office (ISO) CG 20 10 or CG 20 26 endorsements or an endorsement at least as broad as the above noted endorsements as determined by the Village of Orland Park. Any Village of Orland Park insurance coverage shall be deemed to be on an excess or contingent basis as confirmed by the required (ISO) CG 20 01 Additional Insured Primary & Non-Contributory Endorsement. The policies shall also contain a Waiver of Subrogation in favor of the Additional Insureds in regard to General Liability and Workers' Compensation coverage. The certificate of insurance shall also state this information on its face. Any insurance company providing coverage must hold an A-, VII rating according to Best's Key Rating Guide. Each insurance policy required shall have the Village of Orland Park expressly endorsed onto the policy as a Cancellation Notice Recipient. Should any of the policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Permitting the contractor, or any subcontractor, to proceed with any work prior to our receipt of the foregoing certificate and endorsements shall not be a waiver of the contractor's obligation to provide all the above insurance.

Consultant agrees that prior to any commencement of work to furnish evidence of Insurance coverage providing for at minimum the coverages, endorsements and limits described above directly to the Village of Orland Park, 14700 S. Ravinia Avenue, Orland Park, IL 60462. Failure to provide this evidence in the time frame specified and prior to beginning of work may result in the termination of the Village's relationship with the contractor.

ACCEPTED & AGREED THIS ____ DAY OF _____, 20__


Signature

Authorized to execute agreements for:

Printed Name & Title

Name of Company

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

SAMPLE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
SAMPLE
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A.** In the performance of your ongoing operations; or
- B.** In connection with your premises owned by or rented to you.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Section II – Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured.

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render,

any professional architectural, engineering or surveying services, including:

- a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.

2. "Bodily injury" or "property damage" occurring after:

- a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in

performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance**: The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement you have entered into with the additional insured; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

SAMPLE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and

- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

SAMPLE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location And Description Of Completed Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".



PIPEVIE-01

TDIMOND

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/15/2024

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 have ADDITIONAL INSURED provisions or 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 Beyer Insurance Agency 70 E Lake St Suite 1015 Chicago, IL 60601	CONTACT NAME: Trey Dimond PHONE (A/C, No, Ext): (312) 922-5300 E-MAIL ADDRESS: trey@beyerinsurance.com FAX (A/C, No):														
INSURED Pipe View, LLC 900 National Pkwy Ste 260 Schaumburg, IL 60173	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : The Phoenix Insurance Company</td><td>25623</td></tr><tr><td>INSURER B : The Travelers Indemnity Company</td><td>25658</td></tr><tr><td>INSURER C : Travelers Property Casualty Company of America</td><td>25674</td></tr><tr><td>INSURER D : The Travelers Indemnity Company of America</td><td>25666</td></tr><tr><td>INSURER E : Midvale Indemnity Company</td><td>27138</td></tr><tr><td>INSURER F :</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : The Phoenix Insurance Company	25623	INSURER B : The Travelers Indemnity Company	25658	INSURER C : Travelers Property Casualty Company of America	25674	INSURER D : The Travelers Indemnity Company of America	25666	INSURER E : Midvale Indemnity Company	27138	INSURER F :	
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INSURER F :															

COVERAGES

CERTIFICATE NUMBER:

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC OTHER:	X	X	DT-CO-3W234072-PHX-24	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	☐ AUTOMOBILE LIABILITY ☒ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY	X	X	810-3W242084-24-26-G	1/1/2024	1/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	☒ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 10,000	X	X	CUP-3W251265-24-26	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
D	☐ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y / N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	X	UB-3W238777-24-26-G	1/1/2024	1/1/2025	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Directors & Officers			BCP01877700	4/24/2023	4/24/2024	Limit 3,000,000
B	Professional Liabili			ZCO-31N71773	1/1/2024	1/1/2025	1M 5,000,000

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

CERTIFICATE HOLDER

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

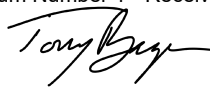
Steve Foster

Questions & Answers - 1

Solicitation 24-042 - 2024-2026 Sanitary Sewer Cleaning & Televising Program
Buying Organization Village of Orland Park

No	Question/Answer	Question Date
Q1	Question: Prevailing Wage Can you please confirm that this project does not require Prevailing Wage? Answer: This project DOES require Prevailing Wage.	04/08/2024

Addendum Number 1 - Received 4/9/24



Village of Orland Park
Orlan Park, IL
4/22/2024

RFP24-042 2024-2026 Sanitary Sewer Cleaning and Televising Program

Pipe View America is submitting a bid for this project based on the RFP and the experience gained while executing projects for municipalites and utility owners since 2006.

Submitted via BidNet Direct Submittal are:

1. Cover Letter – This document
2. Reference List
3. Qualifications
4. Example COI
5. Insurance Requirements
6. Required Forms
7. Rate Sheet (Excel/Signed PDF)
8. Addendum Number 1
9. Bid Bond

Since 2006 Pipe View has provided pipeline inspections based on engineering principals with real time communication. Over the last 18 seasons Pipe View America has been successfully completing sewer inspections and documentation for municipalites and utility owners across the country. We have offices in Chicago, IL, Azle TX, Greely, CO, and Columbia, MO. Our teams utilize NASSCO Certified operators and the most current equipment for our mainline, lateral launch, push camera, hydro-excavation, sewer repair, sewer cleaning, and live gas main inspection operations.

We provide our clients with GIS output that is customizable to directly upload into their system. This has also provided daily progress updates to inspectors and managers. Inspectors also have direct access to completed videos and reports online, typically within 48 hours.

We look forward to the opportunity to work with the Village of Orland Park and begin a successful relationship.

Respectfully,



Tony Barger
Director of Estimating

Pipe View America Providing Pipeline Inspection based on Engineering Principles with Real Time Communication Since 2006.

Reference List

Village of Mount Prospect

1700 West Central Road
Mount Prospect, IL 60056
Scott Moe
847-870-5640
Storm Sewer Cleaning & Televising

Electric Conduit Construction

816 Hicks Dr
Elburn, IL 60119
Melissa Bauer
224-806-0160
Sewer Main Locating, Inspections, Cleaning,
Sewer Lateral Locating

NPL Construction

382 W Lincoln Highway Cortland, IL 60112
Adam Wilinski
815-758-6004
Sewer Main Locating, Inspections, Cleaning,
Sewer Lateral Locating

Village of Round Lake

751 W Townline Road
Round Lake IL 60073
Adam Wedoff
847-546-0962
Sanitary and Storm Sewer Main Cleaning and TV

Village of Franklin Park

9300 W Belmont Ave Franklin Park, IL 60131
Nick Weber
847-671-8299
Storm Sewer Main Cleaning & TV

Prairie Path Water Company

PO BOX 10
McHenry, IL 60050
Seth Ricker
708-723-9071
Sanitary Sewer Main Cleaning and TV

City of Steamboat Springs

850 Critter Court
Steamboat Springs, CO, 80477
Brian Morse
979-879-2020
Sanitary Sewer Main Cleaning & Televising

Atmos Energy

1800 Three Lincoln Centre
Dallas, Texas 75240
Buddy Powell
469-261-2296
Sewer Main Locating, Inspections, Cleaning, Sewer
Lateral Locating

Village of Broadview

2350 S 25th Ave
Broadview, IL 60155
Chris Baker/ Hancock Engineering
708-865-0300
Sewer Main Locating, Inspections, Cleaning,

Cross Utilities

5525 Egg Farm Rd, Suite 2800
Fort Worth, TX 75133
817-305-3777
Tyrone Tasby
Sewer Main Locating, Inspections, Cleaning, Sewer
Lateral Locating

Village of Lake Zurich

505 Telser Road
Lake Zurich, IL 60047
847-540-1696
Storm and Sanitary Cleaning and TV

Statement of Qualifications

Pipe View America strives to be the best sewer inspection company in the country. Our truck leads are NASSCO Certified, run the latest equipment, and hold firm to Pipe View Americas first core value, Promote Safety. We work close with all our clients to make sure all required safety training is in place before crews even begin the projects, from Confined Space Entry, to Traffic Control, to Operator Qualifications. All employees have company photo identification with a QR code that can be scanned by any smart phone, to confirm safety training compliance in the field.

Our current list of local, NASSCO Certified teammates that may be on this project is below.

Patrick Barnaby Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: U-0720-70309857
Original Certification Date: 7/10/2020
Expiration Date: 7/10/2026

Jackie Borst Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0044616-102023
Original Certification Date: 10/27/2023
Expiration Date: 10/27/2026

Sean Jesberger Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0043335-072023
Original Certification Date: 7/20/2023
Expiration Date: 7/20/2026

JaQuetta Brown Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0044474-102023
Original Certification Date: 10/20/2023
Expiration Date: 10/20/2026

Dominic Guardino Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0045662-012024
Original Certification Date: 1/17/2024
Expiration Date: 1/21/2027

Terri Biddle Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0044475-102023
Original Certification Date: 10/20/2023
Expiration Date: 10/20/2026

Alex Mitchell Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0045658-012024
Original Certification Date: 1/17/2024
Expiration Date: 1/21/2027

David Zickus Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0045657-012024
Original Certification Date: 1/17/2024
Expiration Date: 1/21/2027

S.J. Zriny II Pipe View America
Certification Type: PACP | LACP | MACP
Certification Number: P0045661-012024
Original Certification Date: 1/17/2024
Expiration Date: 1/21/2027

Equipment to be used on this project include Camel Max 1200 Series Vac trucks to clean the sewer mains. Once mains are cleaned we will use our Aries Industries Sewer Inspection Trucks, with a Pathfinder steerable tractor and pan, tilt, zoom camera to complete our NASSCO Inspections onto our on board computers with software to match the client needs. All videos and files are saved to our cloud storage system and go through a 100% Quality Control review before submitting to the client. Project status can be monitored real time through our GIS system that our clients can access via computers or mobile devices.

A typical mainline inspection crew will include one camera truck with operator and one jet vac truck with operator. Pipe View can match client need based on size of projects and urgency.

AIA® Document A310™ – 2010

Bid Bond

CONTRACTOR:*(Name, legal status and address)***Pipe View, LLC dba Pipe View America****13190 Farm to Market Rd 730 S.****Azle, TX 76020****OWNER:***(Name, legal status and address)***Village of Orland Park****14700 South Ravinia Avenue****Orland Park, IL 60462****BOND AMOUNT: *** TEN PERCENT OF AMOUNT BID *******SURETY:***(Name, legal status and principal place of business)***Hudson Insurance Company****100 William Street, 5th Floor****New York, NY 10038**

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

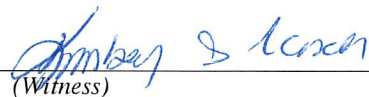
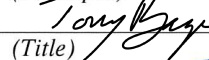
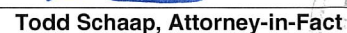
PROJECT:*(Name, location or address, and Project number, if any)***2024-2026 Sanitary Sewer Cleaning & Televising Program**

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this **22nd** day of **April**, **2024**
Pipe View, LLC dba Pipe View America

(Witness)
*(Witness)**(Principal)**(Title)**(Seal)*
Tony Barger, Director of Estimating**Hudson Insurance Company***(Surety)**(Title)*
Todd Schaap, Attorney-in-Fact*(Seal)*

Init.

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051110



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That HUDSON INSURANCE COMPANY, a corporation of the State of Delaware, with offices at 100 William Street, New York, New York, 10038, has made, constituted and appointed, and by these presents, does make, constitute and appoint

Thomas O. Chambers and Todd Schaap
of the State of Wisconsin

its true and lawful Attorney(s)-in-Fact, at New York, New York, each of them alone to have full power to act without the other or others, to make, execute and deliver on its behalf, as Surety, bonds and undertakings given for any and all purposes, also to execute and deliver on its behalf as aforesaid renewals, extensions, agreements, waivers, consents or stipulations relating to such bonds or undertakings provided, however, that no single bond or undertaking shall obligate said Company for any portion of the penal sum thereof in excess of the sum of **Twenty Five Million Dollars (\$25,000,000.00)**.

Such bonds and undertakings when duly executed by said Attorney(s)-in-Fact, shall be binding upon said Company as fully and to the same extent as if signed by the President of said Company under its corporate seal attested by its Secretary.

In Witness Whereof, HUDSON INSURANCE COMPANY has caused these presents to be of its Senior Vice President thereunto duly authorized, on this 3rd day of June, 2022 at New York, New York.



Attest
Dina Daskalakis
Corporate Secretary

HUDSON INSURANCE COMPANY

By
Michael P. Cifone
Senior Vice President

STATE OF NEW YORK
COUNTY OF NEW YORK. SS.

On the 3rd day of June, 2022 before me personally came Michael P. Cifone to me known, who being by me duly sworn did depose and say that he is a Senior Vice President of HUDSON INSURANCE COMPANY, the corporation described herein and which executed the above instrument, that he knows the seal of said Corporation, that the seal affixed to said instrument is such corporate seal, that it was so affixed by order of the Board of Directors of said Corporation, and that he signed his name thereto by like order.

(Notarial Seal)



ANN MURPHY
Notary Public, State of New York
No. 01MU6067553
Qualified in Nassau County
Commission Expires December 10, 2025

CERTIFICATION

STATE OF NEW YORK
COUNTY OF NEW YORK. SS.

The undersigned **Dina Daskalakis** hereby certifies:

That the original resolution, of which the following is a true and correct copy, was duly adopted by unanimous written consent of the Board of Directors of Hudson Insurance Company dated July 27th, 2007, and has not since been revoked, amended or modified:

"RESOLVED, that the President, the Executive Vice Presidents, the Senior Vice Presidents and the Vice Presidents shall have the authority and discretion, to appoint such agent or agents, or attorney or attorneys-in-fact, for the purpose of carrying on this Company's surety business, and to empower such agent or agents, or attorney or attorneys-in-fact, to execute and deliver, under this Company's seal or otherwise, bonds obligations, and recognizances, whether made by this Company as surety thereon or otherwise, indemnity contracts, contracts and certificates, and any and all other contracts and undertakings made in the course of this Company's surety business, and renewals, extensions, agreements, waivers, consents or stipulations regarding undertakings so made; and

FURTHER RESOLVED, that the signature of any such Officer of the Company and the Company's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seal when so used whether heretofore or hereafter, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed."

THAT the above and foregoing is a full, true and correct copy of Power of Attorney issued by said Company, and of the whole of the original and that the said Power of Attorney is still in full force and effect and has not been revoked, and furthermore that the Resolution of the Board of Directors, set forth in the said Power of Attorney is now in force.

Witness the hand of the undersigned and the seal of said Corporation this 22nd day of April, 2024.



By
Dina Daskalakis
Corporate Secretary

STATE OF WISCONSIN)

COUNTY OF **Milwaukee**)

ON THIS 22nd day of April, 2024,
before me, a notary public, within and for said County and State, personally appeared ____
Todd Schaap to me personally known, who being duly sworn,
upon oath did say that he is the Attorney-in-Fact of and for the _____
Hudson Insurance Company, a corporation
of Delaware, created, organized and existing under and
by virtue of the laws of the State of Delaware; that the corporate seal
affixed to the foregoing within instrument is the seal of the said Company; that the seal
was affixed and the said instrument was executed by authority of its Board of Directors;
and the said Todd Schaap did acknowledge that he/she
executed the said instrument as the free act and deed of said Company.


Rosa Hernandez
Notary Public, **Milwaukee** County, Wisconsin
My Commission Expires **1/22/2027**

