

BID SOLICITATION



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
CAPITOL HILL
PROVIDENCE RI 02908

BID NUMBER: B04299
TITLE: TREE TRIMMING & PRUNING SVCS
BID OPENING DATE AND TIME:
10/15/2004 10:30 AM

BUYER: ALMA MILLER
PHONE #: (401) 222 - 2142 ext. 124

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O** COMMUNITY COLLEGE OF RHODE ISLAND
CCRI CONTROLLER'S OFFICE
ACCOUNTS PAYABLE
400 EAST AVENUE
WARWICK RI 02886

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O** COMMUNITY COLLEGE OF RHODE ISLAND
CCRI SPECIAL INSTRUCTIONS
SEE BELOW RI N/A

Requisition Number(s): R88A052646

Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>THERE WILL BE A PRE-BID CONFERENCE ON 10/4/04 AT 10:00 AM.</p> <p>LOCATION: CCRI PHYSICAL PLANT - DIRECTOR'S OFFICE 400 EAST AVENUE WARWICK, RI</p> <p>AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.</p>				

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

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RIVIP VENDOR ID#: _____

TERMS OF PAYMENT: _____

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	<p>NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD:</p> <ul style="list-style-type: none"> * PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - \$1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. * BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. * SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF \$5 MILLION. * ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - \$1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. * VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF \$1 MILLION. <p>CCRI - BILL MERCER/PHYSICAL PLANT 400 EAST AVE WARWICK, RI 02886</p>				

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Item	Class-Item	Quantity	Unit	Unit Price	Total
1.0	988-88 FURNISH ALL LABOR AND MATERIALS TO PROVIDE THE FOLLOWING SERVICES TO THE LANDSCAPE AROUND THE WINDMILL ON THE PRESIDENT'S ESTATE: 1. CLEAR AREA, APPROXIMATELY 2500' - 3000' SQ. FT. AROUND WINDMILL TOWER, OF ALL UNDERGROWTH, BRUSH, POISON IVY AND ETC. BY RIPPING OUT ALL OF THE ABOVE, INCLUDING ROOTS, IN PREPARATION FOR LOAMING AND SEEDING BY OTHERS. 2. REMOVE ALL POISON IVY AND VINES FROM TREES BEING TRIMMED AROUND WINDMILL TOWER. 3. THIN OUT AND REMOVE SELECTED BRANCHES AND DEAD WOOD FROM APPROXIMATELY 12 TREES TO ALLOW LIGHT/SUN TO PROTRUDE INTO THE WINDMILL TOWER. 4. ALL VEGETATION AND DEBRIS TO BE REMOVED FROM PROPERTY AND PROPERLY DISPOSED OF. 5. UPON ISSUANCE OF PURCHASE ORDER, VENDOR IS TO SCHEDULE WORK WITH THE PHYSICAL PLANT DIRECTOR. 6. UPON COMPLETION, WORK IS TO BE INSPECTED AND ACCEPTED BY THE PHYSICAL PLANT DIRECTOR AND/OR GROUNDS SUPERINTENDENT.	1.00	EA		

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	<p>THE SUCCESSFUL BIDDER MUST MEET THE FOLLOWING REQUIREMENTS.</p> <p>MUST BE A CURRENT REGISTERED ARBORIST IN THE STATE OF RHODE ISLAND (REQUIRED BY STATE OF R.I. REGULATIONS). SUBMIT ARBORIST LICENSE WITH THE BID.</p> <p>MUST HAVE VALID GENERAL LIABILITY INSURANCE FOR ARBORICULTURE.</p> <p>MUST HAVE VALID WORKER'S COMPENSATION INSURANCE FOR ARBORICULTURE (REQUIRED BY STATE OF R.I. REGULATIONS).</p> <p>MUST HAVE VALID INSURANCE COVERAGE ON ALL VEHICLES AND INSURANCE.</p> <p>CONTACT PERSON: RAYMOND V. DEANGELIS (401) 825-2444</p>				
				TOTAL:	_____

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