INVITATION TO BID

Bid Invitation Number: #51-2014 Date of Issue: 03/10/2014

Sealed bids will be received in the office of the Division of Central Purchasing, 200 East Main Street, Lexington, Kentucky, until **2:00 PM**, prevailing local time on **03/24/2014**. Bids must be received by the above-mentioned date and time. Mailed bids should be sent to:

Division of Central Purchasing 200 East Main Street, Rm 338 Lexington, KY 40507, (859) 258-3320

The Lexington-Fayette Urban County Government assumes no responsibility for bids that are not addressed and delivered as indicated above. Bids that are not delivered to the Division of Central Purchasing by the stated time and date will be rejected.

All bids must have the company name and address, bid invitation number, and the commodity/service on the outside of the envelope.

outside of the envelope.					
Bids are to include all shipp	ing costs to the point of delivery located	at: 139-143 E Main St, Lexington, KY			
Bid Security Required:		Bond Required: Yes x No			
	Commodity/Service				
	Custodial Services – Downtown A	Arts Center			
	See specifications				
	Check One:	Proposed Delivery:			
Bid Specifications					
	Specifications. Exceptions shall ached to bid proposal submitted.	days after acceptance of bid.			
	Procurement Card Usag	<u>e</u>			
	on-Fayette Urban County Government wods and services and also to make payme	ill be using Procurement Cards to nts. Will you accept Procurement Cards?			
Submitted by:	Saffre Cleaver .	Sevice Ka Ols Du.			
	Address 4057/				
Bid must be signed:	City, State & Zip & Coffee world				
(original signature)	Signature of Authorized Company R	depresentative — Title			
	1 (17A 60 11 X30 b	6.17			
	Representative's Name (Typed or printed)				
	Area Code - Phone - Extension	Fax#			
	98 saf five clean in a St	(ana (com)			

The Affidavit in this bid must be completed before your firm can be considered for award of this contract.

E-Mail Address

I. GREEN PROCUREMENT

A. ENERGY

The Lexington-Fayette Urban County Government is committed to protecting our environment and being fiscally responsible to our citizens.

The Lexington-Fayette Urban County Government mandates the use of Energy Star compliant products if they are available in the marketplace (go to www.Energystar.gov). If these products are available, but not submitted in your pricing, your bid will be rejected as non-compliant.

ENERGY STAR is a government program that offers businesses and consumers energy-efficient solutions, making it easy to save money while protecting the environment for future generations.

Key Benefits

These products use 25 to 50% less energy
Reduced energy costs without compromising quality or performance
Reduced air pollution because fewer fossil fuels are burned
Significant return on investment
Extended product life and decreased maintenance

B. GREEN SEAL CERTIFIED PRODUCTS

The Lexington-Fayette Urban County Government is also committed to using other environmentally friendly products that do not negatively impact our environment. Green Seal is a non-profit organization devoted to environmental standard setting, product certification, and public education.

Go to <u>www.Greenseal.org</u> to find available certified products. These products will have a reduced impact on the environment and on human health. The products to be used must be preapproved by the LFUCG prior to commencement of any work in any LFUCG facility. If a Green Seal product is not available, the LFUCG must provide a signed waiver to use an alternate product. Please provide information on the Green Seal products being used with your bid response.

C. GREEN COMMUNITY

The Lexington-Fayette Urban County Government (LFUCG) serves as a principal, along with the University of Kentucky and Fayette County Public Schools, in the Bluegrass Partnership for a Green Community. The Purchasing Team component of the Partnership collaborates on economy of scale purchasing that promotes and enhances environmental initiatives. Specifically, when applicable, each principal is interested in obtaining best value products and/or services which promote environment initiatives via solicitations and awards from the other principals.

If your company is the successful bidder on this Invitation	n For Bid, do you agree to extend
the same product/service pricing to the other principals o	f the Bluegrass Partnership for a
Green Community (i.e. University of Kentucky and Fayett	te County Schools) if requested?

Yes	 No

received prior to termination shall be made by the LFUCG provided these goods or services were provided in a manner acceptable to the LFUCG. Payment for those goods and services shall not be unreasonably withheld.

- 13. Assignment of Contract: The selected bidder(s) shall not assign or subcontract any portion of the bid contract with LFUCG without the express written consent of LFUCG. Any purported assignment or subcontract in violation hereof shall be void. It is expressly acknowledged that LFUCG shall never be required or obligated to consent to any request for assignment or subcontract; and further that such refusal to consent can be for any or no reason, fully within the sole discretion of LFUCG.
- 14. No Waiver: No failure or delay by LFUCG in exercising any right, remedy, power or privilege hereunder, nor any single or partial exercise thereof, nor the exercise of any other right, remedy, power or privilege shall operate as a waiver hereof or thereof. No failure or delay by LFUCG in exercising any right, remedy, power or privilege under or in respect of this bid proposal or bid contract shall affect the rights, remedies, powers or privileges of LFUCG hereunder or shall operate as a waiver thereof.
- 15. Authority to do Business: Each bidder must be authorized to do business under the laws of the Commonwealth of Kentucky and must be in good standing and have full legal capacity to provide the goods or services specified in the bid proposal. Each bidder must have all necessary right and lawful authority to submit the bid response and enter into the bid contract for the full term hereof including any necessary corporate or other action authorizing the bidder to submit the bid response and enter into this bid contract. If requested, the bidder will provide LFUCG with a copy of a corporate resolution authorizing this action and/or a letter from an attorney confirming that the proposer is authorized to do business in the Commonwealth of Kentucky. All bid responses must be signed by a duly authorized officer, agent or employee of the bidder.
- 16. Governing Law: This bid request and bid contract shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. In the event of any proceedings regarding this matter, the bidder agrees that the venue shall be the Fayette County Circuit Court or the U.S. District Court for the Eastern District of Kentucky, Lexington Division and that the bidder expressly consents to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to these matters or any rights or obligations arising thereunder.
- 17. Ability to Meet Obligations: Bidder affirmatively states that there are no actions, suits or proceedings of any kind pending against bidder or, to the knowledge of the bidder, threatened against the bidder before or by any court, governmental body or agency or other tribunal or authority which would, if adversely determined, have a materially adverse effect on the authority or ability of bidder to perform its obligations under this bid response or bid contract, or which question the legality, validity or enforceability hereof or thereof.
- 18. Bidder understands and agrees that its employees, agents, or subcontractors are not employees of LFUCG for any purpose whatsoever. Bidder is an independent contractor at all times related to the bid response or bid contract.
- 19. If any term or provision of this bid contract shall be found to be illegal or unenforceable, the remainder of the contract shall remain in full force and such term or provision shall be deemed stricken.

Signature Signature

3-14.14 Date

EQUAL OPPORTUNITY AGREEMENT

The Law

- Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and sub-contractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
 - Section 503 of the Rehabilitation Act of 1973 states:

The Contractor will not discriminate against any employee or applicant for employment because of physical or mental handicap.

- Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal contracts.
- Section 206(A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment Opportunity, states:

The Secretary of Labor may investigate the employment practices of any Government contractor or sub-contractor to determine whether or not the contractual provisions specified in Section 202 of this order have been violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractors may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

Bidders

I/We agree to comply with the Civil Rights Laws listed above that govern employment rights of minorities, women, Vietnam veterans, handicapped and aged persons.

Signature

Name of Busines



Lexington-Payette Urban County Government DEPARTMENT OF FINANCE & ADMINISTRATION

Jim Gray Mayor

William O'Mara Commissioner

ADDENDUM #1

Bid Number: 51-2014

Date: March 17, 2014

Subject: Custodial Services - Downtown Arts Center

Please address inquiries to: Sondra Stone, Buyer (859) 258-3324

TO ALL PROSPECTIVE BIDDERS:

- 1) The mezzanine area will not be in contract. This will reduce total square footage cleaned to 11,660 and carpet square footage total to 6,783.
- 2) Cleaning hours Saturday and Sunday shall be as follows 1st cleaning between 9:00 AM and 12:00 PM: 2nd cleaning between 5:00 PM and 1:00 AM, unless theater schedule determines otherwise.
- 3) See attached floor plans.
- 4) Pre-bid sign-in sheet attached.

Todd Slatin, Director Division of Central Purchasing

All other terms and conditions of the Bid and specifications are unchanged.

This letter should be signed, attached to and become a part of your Bid.

COMPANY NAME: Suffer Clanuary Scottle had added to another terms and conditions of the Bid.

ADDRESS: 133 Charles and become a part of your Bid.

SIGNATURE OF BIDDER: SIGNAT



CERTIFICATE OF LIABILITY INSURANCE

OPID TDM1

DATE (MM/DD/YYYY)

03/20/14

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).

CCVERAGES COVERAGES		ne terms and conditions of the policy, certain pertificate holder in lieu of such endorsement(s		iorsement. A state	ment on this	certificate does not confe	r rights to the	
CYCCOCH & Stafford Ins Agcy Inc 210 Malabu Drive, Sutte 200 Lexington XY 40502-3252 Phonos: \$59-253-1371 Fax:859-233-9831 RISURERIO, April Phonos: \$1000000 RISURERIO, April Phonos: \$1000000000000000000000000000000000000	-incomzion		energiste ninka, sene dan manadikhis nam sanas ningentana N	CONTACT	sanamananininganah manus	niconya mpanya na manana mpanya m		
A X COMMENDA LIGHER FOR A SUSTED A SUST		•		NAME: PHONE	······································	FAX	**************************************	
TRODUCES SAFEY-I SAF			nc	(A/C, No. Ext):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Ā/Ċ, No):		
PRIORE SSP-253-1371 Pax: 859-233-9831 RISURER SAFFITI RISURER SAFFIT RE SAF				I BENEVICENTES				
HSURRA Liberty Nutual Insurance 23074 Saffire Cleaning Service LLC Elizabeth Bobbits				CUSTOMERID#: SA	FFI-1		***************************************	
Soffixe Cleaning Service LLC Elizabeth Bobist 133 Angel Falls prive BNURER E: INSURER E: INSURE EN INSURED EN INSURER E: INSURER E: INSURER E: INSURER E: INSURE EN INSURED EN INSURE E: INSURE		Phone: 859-253-1371 Fax: 859-	233-9831	IN	SURER(S) APFO	RDING COVERAGE	NAIC#	
Saffire Cleaning Service Elizabeth Bobbit Lexangton KY 40511 Bauern : Baue	INSL	URED		INSURERA: Lib	ertv Mut	ual Insurance	24074	
Lexington RY 40511 Lexington RY 40511 Baser : INSURER C: INSURCE CORDINATION INSURANCE INSURER C:		Saffire Cleaning Servic	e LLC	*************************************				
COVERAGES CERTIFICATE NUMBER: INSURER I: INSURER II INSUR INSU		133 Angel Falls Drive						
COVERAGES CERTIFICATE NUMBER: INSURER E: INSURER F: INSURED MANDED ABOUT EACH POLICY OF INSURANCE LISTID BELOW HAVE BEEN ISSUED TO THE INSURED MANDED ABOUT EACH POLICY PERIOD MICHAEL MONTH STANDING MAY PERIABLY. THE INSURANCE AFFORDED BY THE POLICYS DESCRIBED HERBIN ISSUBJECT TO WHICH THIS CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICYS DESCRIBED HERBIN ISSUBJECT TO WHICH THIS CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY DESCRIBED HERBIN ISSUBJECT TO WHICH THIS CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. WE THE OF INSURANCE MAY PERTAIN THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BY AND CLAMS. CERTIFICATE MAY BE ISSUED ON MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICY BE PERTAIN. CERTIFICATE MAY BE ISSUED ON MAY PE		Lexington KY 40511						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NOCKED AND VARIANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NOCKED AND VARIANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NAMED ABOVE TO ALL THE TERMS. ***CLUSION AND VARIANCE*** IN THE TERMS.** ***CRUSION AND VARIANCE**** IN THE TERMS.** ***CRUSION AND VARIANCE**** IN THE TERMS.				***************************************				
COVERAGES CERTIFICATE NUMBER: TWIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTOR BEING MAY BEEN ISSUED TO THE INSURED NAMED AND EXPORT THE POLICY PERIOD MINICATED. NOTWITHS TRANSMOKE AND PERIOD IN HER DISCUSSION			:					
THIS BY DICERTIFY THAY THE POLICIES OF INJURANCE LITTED BELOW HAVE BITCH SIZED TO THE MISSIBLE DATA MADE FOR THE POLICY PERIOD MISCRATED HOUTHING AND MADE AND YEAR CHARGE. CERT PROCESS AND CONDITIONS OF SUCH POLICIES LITTED BELOW HAVE BITCH BOOK DOWN THE POLICY PERIOD MISCRATE MAY BE ISSUED ON MAY PERIAN, THE INSUBANCE AFFORMS ON THE POLICY PERIOD CERT PROCESS AND CONDITIONS OF SUCH POLICIES LITTED BELOW HAVE BEEN PROJECTED ON THE POLICY PERIOD CERT PROCESS AND CONDITIONS OF SUCH POLICIES LITTED BELOW HAVE BEEN PROJECTED ON THE POLICY PERIOD OF TYPE OF INSURANCE MISS PROWN HAVE HOUSE BEEN PROJECTED ON THE POLICY PERIOD OF TYPE OF INSURANCE LITTED HOUSE LITTED BELOW HAVE BEEN PROJECTED ON THE POLICY PERIOD OF TYPE OF INSURANCE MISS PROWN HAVE HOUSE BY PAD CLARKS. SECREPAL LIABILITY OF TYPE OF INSURANCE LITTED HOUSE LITTED HOUSE BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROWN HAVE HAVE BEEN PROJECTED BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROWN HAVE HAVE BEEN PROJECTED BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROWN HAVE HAVE BEEN PROJECTED BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROVIDED BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROVIDED BY PAD CLARKS. OF TYPE OF INSURANCE MISS PROVIDED BY PAD CLARKS. OF TYPE OF INSURING PROVIDED BY PAD CLARKS. OF TYPE OF INSURING PROVIDED BY PAD CLARKS. OF TYPE OF INSURING PROVIDED BY PAGE BY PAG		VERAGES CERTIFICATI	C MINADED.	INSUREH F :		DEMONDAL MUMBER.		
INDICATED NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE WAY BE RISABLED OR MAY PERTAIN. THE INDIRANCE AFFORDED BY THE POLICIES DESCRIBED HERE IN SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAUMS. SEMERAL LIABILITY A X COMMERCIAL GENERAL LIABILITY CEREFAL LIABILITY CEREFAL LIABILITY CEREFAL LIABILITY CEREFAL AGGREGATE LIMIT APPLIES PER FOLICY FROM COMMERCIAL GENERAL LIABILITY FROM COMMERCIAL GENERAL COMPLOY AGG 2 2000000 PREDICTION OF PRODUCTS - COMPLOY AGG 2 2000000 PRODUCT				O THE INCHDED MANED				
CERTIFICATE MAY BE ISSUED OR MAY PERTYAIN, THE INSURANCE AFFORGED BY THE POLICIES DESCRIBED HERRINS ISSUED TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PADOL CLAMS. TYPE OF INSURANCE TYPE OF INSURANCE AND SUBBRAL LABILITY A X COMMENDATION OF SUCH POLICIES LIMITS AND								
TYPE OF INSURANCE ADDITIONS ADDITIONAL ADDITIONS ADDITIONS ADDITIONS ADDITIONS ADDITIONAL ADDITIONS ADDITIONS ADDITIONS ADDITIONAL ADDITIONAL ADDITIONAL ADDITIONS ADDITIONAL AD	CI	ERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURA	ANCE AFFORDED BY THE POLICIES	S DESCRIBED HEREIN IS				
GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CIAMS-MADE X OCCUR GENT AGGREGATE LIMIT APPLIES PER POLICY PRODUCTS - COMPINER S 1000000 GENT AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPINER S 1000000 GENT AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPINER S 1000000 GENT AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPINER SINGLE LIMIT S 1000000 AUTOMOBILE LIABILITY A X ALL OWNER DAITOS SCHEDULED AUTOS NOR OWNED AUTOS NOR OWNED AUTOS NOR OWNED AUTOS OPPORTUTION S BA4780178 BA4780178 BA4780178 O1/24/14 O1/24/15 GCMBRIED SINGLE LIMIT (Eas accident) S 1000000 BOOLLY INJURY (For accident) S 10000000 BOOLLY INJURY (For accident) S 10000000 BOOLLY INJURY (For accident) S 100000								
A X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR COMMERCIAL GENERAL CAGRECATE LIMIT APPLIES PER POLICY FEG. LOC PRODUCTS - COMPROR AGG S 2000000 BOOLY NUMBY (Par person) S COMPRINED SINGLE LIMIT (Ea excident) EACH OCCURRENCE S S PROPERTY DAMAGE PER AGGREGATE S COMPRINED SINGLE LIMIT (Ea excident) EXCESS LIAB CAMPORATION S S PROPERTY DAMAGE PER AGGREGATE S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) EXCESS LIAB CALL LIABILITY AND PROPERTY DAMAGE S S PROPERTY DAMAGE S S PROPERTY DAMAGE S S EACH OCCURRENCE S S AGGREGATE S S B WOORKERS SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) EXCESS LIAB CALL LIABILITY AND PROPERTY DAMAGE S S EACH OCCURRENCE S S B WOORKERS SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) BOOLY NUMBY (Par person) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) BOOLY NUMBY (Par person) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMIT (Ea excident) BOOLY NUMBY (Par person) S COMPRINED SINGLE LIMIT (Ea excident) S COMPRINED SINGLE LIMI	LTR	TYPE OF INSURANCE INSR W	D POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
CBP4/80181 CLAIMS-MADE X OCCUR CENT AGGREGATE LIMIT APPLIES PER POLICY FROM LOC AUTOMOBILE LIABILITY A X ANY AUTO AUTOMOBILE LIABILITY A X ANY AUTO NORI-OWNED AUTOS HIRED AUTOS H		GENERAL LIABILITY		The state of the s			1000000	
CLAIMS-MADE X OCCUR	A	X COMMERCIAL GENERAL LIABILITY	CBP4780181	01/24/14	01/24/15	DAMAGE TO RENTED PREMISES (Ea occurrence) \$	100000	
PERSONAL & ADVINUARY \$1000000		CLAIMS-MADE X OCCUR	- Walter	***************************************			//************************************	
GENE AGGREGATE LIMIT APPLIES PER POLOCY FRO. LOC SCHOOL PRODUCTS - COMPYOP AGG \$ 2000000 PRODUCTS -		<u> </u>	>	A. (10. ma. s.)				
GENL AGGREGATE LIMIT APPLIES PER POLICY FECT LOC AUTOMOBILE LIABILITY A ANY AUTO X ANY AUTO X ANY AUTO X ANY AUTO X ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS DESCRIPTION S DESCRIPTION OF OPERATIONS DElow DESCRIPTION OF OPERATIONS Delow DESCRIPTION OF OPERATIONS Delow DESCRIPTION OF OPERATIONS Delow DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) COMBINED SINGLE LIMIT (Ea ecodem) 5 10000000 (EL DISEASE - POLICY LIMIT) 5 1000000 DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)				A 8	2		***************************************	
POLICY PRO_ LOC		GEN'L AGGREGATE LIMIT APPLIES PER		ARRIVA TA PARA				
AUTOMOBILE LIABILITY X ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS BACKESS LIAB CLAIMS-MADE DEDUCTIBLE RETENTION S BY WORKERS COMPENSATION ANY PROPRIETOR/PRATINGRE/SECUTIVE ANY AND EMPLOYERS LIABILITY ANY PROPRIETOR/PRATINGRE/SECUTIVE (Mandatory in Nh) (Mys obscribe under your in Nh) (Mys obscribe under your in Nh) (Exercise Liable) DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) COMMINED SINGLE LIMIT (Ea accident) S 1000000 BODILY INJURY (Per recodent) S BODILY INJURY (Per rec								
A X ANY AUTO X ALL OWNED AUTOS SCHEDULED AUTOS HIREO AUTOS HIREO AUTOS NON-OWNED AUTOS UMBRELLA LIAB EXCESS LIAB CLAIMS-MADE DEDUCTIBLE RETENTION \$ WORKES COMPENSATION ANY EMPLOYERS LIABILITY ANY PROPRIETOR PRATIENCE CUTIVE (Mandatoy in NH) Hyes coscide under DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) ICA accident) S 1000000 BDLY INJURY (Per person) S BODILY INJURY			**************************************			COMBINED SINGLE LIMIT	······································	
X ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS HIRED AUTOS NON-OWNED AUTOS UMBRELLA LIAB OCCUR EXCESS LIAB CLAINS-MADE OEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS "LABULITY ANY PROPRIETORIPARTNER/EXECUTIVE" OFFICE/RIMEMEER EXCUEDED? (Mandatory in NH) Hyes, describe under DESCRIPTION OF OPERATIONS / Below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) SOULY INJURY (Per person) S BODILY INJURY (Per person) S BODIL	75.	***					1000000	
SCHEDILEO AUTOS HIRED AUTOS HIRED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS UMBRELLA LIAB OCCUR EXCESS LIAB OCCUR EXCESS LIAB OCCUR OCCURRENCE RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETORIPARTINER/EXECUTIVE (Mandatory in NH) If yes describe inder DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) BODILY INJURY (Per accident) S PROPERTY DAMAGE (Per accident) S EACH OCCURRENCE S AGGREGATE S AGGREGATE S S WC STATU TORY LIMITS ER EL EACH ACCIDENT TORY LIMITS ER EL EACH ACCIDENT S 1000000 EL DISEASE - POLICY LIMIT S 1000000 EL DISEASE - POLICY LIMIT S 1000000	A	ennes.	BA4/801/8	01/24/14	01/24/15	BODILY INJURY (Par person) \$	**************************************	
HIRED AUTOS NON-OWNED AUTOS UMBRELLA LIAB OCCUR EXCESS LIAB OCCUR OCCURRENCE OCCURRENCE S AGGREGATE S EACH OCCURRENCE S AGGREGATE S AGGRE		H		AAAAAAAAAAAAAA		BODILY INJURY (Per accident) \$	***************************************	
MARCHAUTOS S S		***************************************	With the second			PROPERTY DAMAGE	**************************************	
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS: LIABILITY ANY PROPRIETORIPARTNER/EXECUTIVE OFFICE/AMMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)		HIRED AUTOS	***************************************	00.0		(Per accident) *		
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PAOPRIECTOR/PARATINER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes describe under DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)		NON-OWNED AUTOS	W. Antonia de Contra de Co	•		\$		
EXCESS LIAB CLAIMS-MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETORY PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED D' (Mandalory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)						\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) AGBRECATE S AGR		UMBRELLA LIAB OCCUR				EACH OCCURRENCE \$		
B WORKERS COMPENSATION AND EMPLOYERS: LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)		EXCESS LIAB CLAIMS MADE				AGGREGATE \$	map(,,,,) (((())),,,,,,,,,,,,,,,,,,,	
B WORKERS COMPENSATION AND EMPLOYERS: LIABILITY ANY PAOPPIRETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)		DEDUCTIBLE				\$		
B WORKERS COMPENSATION AND EMPLOYERS: LIABILITY AND PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)		RETENTION S				\$		
ANY PROPRIETOR/PARTNER/EXECUTIVE N/A OFFICER/MEMBER EXCLUDED? (Mandatory in Nt) If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)	В	AND EMPLOYEDS: HADRITY	385507	04/03/13	04/03/14		# /	
OFFICER/MEMBER EXCLUDED? (Mandatory in NH) (If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)		ANY PROPRIETOR/PARTNER/EXECUTIVE 1/N	***************************************	Province			1000000	
If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT S 1000000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Bid #51-2014			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Bid #51-2014		If yes describe under				······································		
B10 #51-2014		SANGER OF STREET, STRE	***************************************			E.L. DISEASE - PULICY LIME: 5	TOOOOOO	
B10 #51-2014		remaine.	Production of the Control of the Con					
B10 #51-2014	OFS	CRIPTION OF OPERATIONS (LOCATIONS (VEHICLES (Attac	h ACODD 101 Additional Demarks	Cabadula ifmara anna	lm enouleest			
CERTIFICATE HOLDED	Bí	d #51-2014	ar Accade (et, Accaded no marks	s acriedule, il more space	is required)			
CERTIFICATE HOLDED								
CERTIFICATE HOLDED								
CERTIFICATE HALDED							······································	
CANCELLATION CANCELLATION	CEF	RTIFICATE HOLDER		CANCELLATION				
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN							EFORE	
ACCORDANCE WITH THE POLICY PROVISIONS.								
		40. 4 h 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4						
Division of Central Purchasing AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE			cnasing	AUTHORIZED REPRESE	NTATIVE		**CEPCACA-1	

© 1988-2009 ACORD CORPORATION. All rights reserved.

Creech & Stafford Insurance

Lexington KY

EVIDENCE OF INSURABILITY LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT PROJECT (Use separate form for such Agency of Brokerage agreeing to provide coverage)

Numes Insured Saffire Cleaning	aning Service, LLC	Nessian (Architecture pro- nessian bern-spiele Methodology (Pro- 10 s. — ph. magazi Artista engress) and essent	house a second	Employee ID:	To the state of th
Address: 133 Angel Falls		Problemina contrata de la Companio desparações de la Companio del Companio del Companio de la Co	nerg i	The state of the s	THE THE PROPERTY OF THE PROPER
Lexington, KY	de la construe de la	de		**************************************	teenemilek biddenineeen mingep k-p-pooprij kejddick in valm yê v ê 8
Project to be insured: [MAM]	hall son - M	on-Ost Centar &	Mat 51-204	, T	
Insurance and Risk Management of Part V (Special Conditions), including all requirements, and conditions:	tice at this time, the undersigned ago t V (Special Conditions), including	rees to provide the above Named in all requirements, and conditions:	wed with the minimum coverage b	sted below These	ene enlined in fig-
	Minimum Limits and Policy Requirements	Limis Provided To Insured	Name of Instru	A.M. Best's	38815
CCT.	\$1,000,000/per occ. \$2,000,000 aggregate	\$ 1,000,000,000	Ohio Casualty	00726	Section and Management and American
AUTO	\$1,000,000/per ucc	\$ 1,000,000	Onio Casualty	0076	A
A.A.C.	Substance Wendorsement for Employer's Liability for \$500,000/ per occ.	000,000,T	KEMI	WANTED STATE OF THE PARTY OF TH	
The Risk Management Provisions Insurance and Indemnification required provisions, statements regarding insurance requirements, and the undeparted agrees to ablide by all provisions for the coverage's checked above unless stated otherwise when submitting. Creech and Stafford Insurance Agency.	nce and Indemnification required p stated otherwise when submitting. I Insurance Avency.	mvisions, statements regarding insu The	rance requirements, and the underst	gned agrees to shid	le by all provisions
Agency or Buleries Drive Ste	200	а	Name of Authorized Rome Sanative	snjative X	4900metricula un obsessabilitation (Albanistical Light Landscope (Albanis (Albanis Light L
Lexington, KY 40502)2		Title	-	ТОЛІВАТІ ТОЛІВОТ ТОТОВІ В ВЕТЕТ В ВЕТЕ
City 859-253-1371	State Zip	месонод-и Романа да упинания шийда до до установа и под	Authorized signatura 179		www.yelemiren.usenen.usenen.ee.
Telephone Number	үссичүлдүйний Маййдин ирин үергений Мадалетан Майдалетан байдага бүйгий, фарасын араа	Harmanavaning-party-quipt H From Freedom and Johann	Date		PROPERTY OF A Facility Mathematic (Mathematical States)
NOTE: Authorized signatures may be the agent's if agent has placed insurance through an agency agreement with the insurer. If insurance is brokered, authorized signature must be that of authorized representative of insurer.	e agents if agent has placed insuran	ice through an agency agreement wi	in the losurer. If insurance is broke	red, authorized sign	calue must be that
CONTRACT MAY NOT BE AWARDED IF A COMPLETED AND SIGNED COPY OF THIS FORM FOR ALL COVERAGES LISTE) AD IF A COMPLETED AND S	WAOE SIHT EO KAOO GENED	ORALL COVERAGES LIST	ARAGIVON SI BYOKAL	Y PROVIDED.

WORKFORCE ANALYSIS FORM

Total:	Service/Maintenance	Skilled Craft	Office/Clerical	Para-Professionals	Protective Service	Technicians	Foremen	Supervisors	Superintendents	Professionals	Administrators		Categories	Name of Organization:
													Total	Saffire Clarery
7								Artematica				M	W	lannox
								or managements					White	Lown
			Agay.									X	Black	Acuie Me
									7			13)	ıck	
												N	Other	
								and the same of th		The second secon		Ħ	1eT	Date
<i>(</i> i												M	7	Date:
												133 3	Total	J1 12

Prepared by: __

Name & Title

CONTRACTOR'S CLEANING PRODUCTS

LFUCG requires the use of environmentally preferred products. (GREEN CLEANERS)

During each inspection the janitorial closets will be inspected for the correct environmental cleaning chemicals. Any chemicals that have not been approved for usage will be removed from the janitorial closet

Product Name	Intended Use	Using Product at Time of Inspection		Non-Green Product
		Yes	No	
Simple Coleen				
(Onalle)				
Van Can Steel				
Hamless Steel				

Contractor Experience & References

The Contractor is encouraged to submit the information requested below with their proposal. If the information is not provided with the bid and the Contractor has the low bid the LFUCG will contact the Contractor and give a 24 hour notification to provide the information. If the information is not received by the end of the 24 hour period the bid will be rejected. Please attach additional sheets as necessary.

1. Years the company has been in business as a custodial service.

	years
2. List jobs of comparable size to this contribute a contact person and a phone num	act which your company has held within the past 5 years. Please ber.
LFUCG Business Name	Jimus Ross (859)457-6532
CHES	Contact Information (Name & Phone) Theresa (\$59)271-2269
Business Name	Contact Information (Name & Phone)
Wortforce Development	21 <u>L₁8 ac</u> (859) 292 -6666 Contact Information (Name & Phone)
(Business Ivaine	Contact information (Name & Phone)
3. Please provide a list of current contracts and LFUCGE	(Jemmy Ross (859) 457-6532 3 hrs
Business Name	Contact Information (Name & Phone) No. of hours per day
CHES	Theresa Thomas (859) 271-2269 3hr
Business Name	Contact Information (Name & Phone) No. of hours per day
Work Force severment	Xisa (89) 292-666631-
Business Name	Contact Information (Name & Phone) No. of hours per day
Kett Internations	G Tiffany (856) 432-5224 (3-5
Business Name	Contact Information (Name & Phone) No. of hours per day
4. Annual volume of business by dollars and	square footage.
\$350,000	50,000 sq. ft.

AFFIDAVIT
Comes the Affiant, Saffire Cleaning Source and after being first duly sworn under penalty of perjury as follows:
under penanty of perjury as follows:
1. His/her name is E/cza bell Bobbel and he/she is the
individual submitting the bid or is the authorized representative of
Saffere Cleaning Struck have,
the entity submitting the bid (hereinafter referred to as "Bidder").
2. Bidder will pay all taxes and fees, which are owed to the Lexington-Fayette Urban
County Government at the time the bid is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3. Bidder will obtain a Lexington-Fayette Urban County Government business license,
if applicable, prior to award of the contract.
4. Bidder has authorized the Division of Central Purchasing to verify the above-
mentioned information with the Division of Revenue and to disclose to the Urban County Council that
taxes and/or fees are delinquent or that a business license has not been obtained.
5. Bidder has not knowingly violated any provision of the campaign finance laws of
the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Bidder will not violate any provision of the campaign finance laws of the Commonwealth.
6. Bidder has not knowingly violated any provision of Chapter 25 of the Lexington-
Fayette Urban County Government Code of Ordinances, known as "Ethics Act."
7. Bidder acknowledges that "knowingly" for purposes of this Affidavit means, with
respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a
person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.
8. Bidder at all times relevant to the performance of any services or work on behalf of the Lexington-Fayette Urban County Government, the Bidder has fully complied with, and will continue to
comply with the provisions of the Federal Fair Labor Standards Act (29 U.S.C. Chapter 8) and KRS
337.225, pertaining to the payment of minimum wages and as otherwise applicable to such services or
work performed.
Further, Affiant sayeth naught.
- Cly
STATE OF KU
COUNTY OF FOR HE
The foregoing instrument was subscribed, sworn to and acknowledged before me
by Elizabeth Bubbit on this the 24 day
of MN(Ch, 2014.
My Commission expires:
OFFICIAL SEAL
ANITA PATEL NOTARY PUBLIC - KENTUCKY
ANITA PATEL NOTARY PUBLIC - KENTUCKY STATE-AT-LARGE My Comm. Expires 05-20-2014 NOTARY PUBLIC - KENTUCKY STATE-AT-LARGE NOTARY PUBLIC - KENTUCKY STATE-AT-LA
COMM. #420306 NOTARY PUBLIC, STATE AT LARGE

Please refer to Section II. Bid Conditions, Item "U" prior to completing this form.

PRICING SHEET

The Contractor shall submit a daily cost to provide the specified services, which includes labor. equipment, and cleaning supplies.

Regular cleaning services will be required 6 days a week. One cleaning per day is required Tuesday-Friday and two cleanings per day are required Saturday-Sunday. It is possible that cleaning will be required on Mondays in the future. If Mondays are added, cleaning will be required once per day and will be paid at the same per day rate as Tuesday-Friday.

Cost for all specified cleaning services, Tuesday-Friday.

\$ <u>JO</u> Iper day \$ <u>JO</u> Iper day

Cost for all specified cleaning services, Saturday-Sunday.