# **NOTICE TO CONTRACTORS**

Sealed bids will be received by the South Dakota Department of Transportation until 1:30 pm, Wednesday, March 11, 2020 at which time they will be opened for the following project(s):

Project Number	PCN	County	Type of Work	Area Engineer
000P-191,	i5x1,	Beadle	Weed Spraying	Brad Letcher (605-353-7140)
000N-191	i5x2			
000P-192,	i5x3,	Buffalo,	Weed Spraying	Brad Letcher (605-353-7140)
000N-192	i5x4	Hand, Hughes, Hyde		
000P-191,	i5x5,	Clark	Weed Spraying	Brad Letcher (605-353-7140)
000N-191	i5x6			· ·
000P-191,	i5x7,	Kingsbury	Weed Spraying	Brad Letcher (605-353-7140)
000N-191	i5x8			· ·
000P-192,	i5x9,	Spink	Weed Spraying	Brad Letcher (605-353-7140)
000N-192,	i5xa,			· ·
000P-151,	i5xc,			
000N-151	i5xd			

Should you have questions you are encouraged to contact Area Engineer listed for the project.

### **AVAILABILITY OF PLANS AND PROPOSALS:**

Specifications and proposal forms are available at the Huron Area Office and at the following website: https://apps.sd.gov/hc65bidletting/RegionDefault.aspx

The DOT-123 form provided within the proposal document is for information only. Do not use for bidding purposes. Bids submitted on the enclosed DOT-123 form will be considered void and will not be accepted by the department. Please email the Aberdeen Area office for the DOT-123 form that can be used for bidding purposes to the following:

Scott.Schneider@state.sd.us and Michael.Welch@state.sd.us

The email request for the DOT-123 form shall include the following information, so that the SDDOT can maintain a list of prospective bidders for this project and to maintain a contact list for future region lettings:

Company Name Mailing Address Phone Number

Addendums, if any, will be made available on-line at the above website, no later than **48 hours** prior to opening bids. It will be the Contractor's responsibility to check for addendums prior to submitting bids.

## **CONTENT OF PROPOSALS:**

Returned Proposals shall include the following items all signed in ink:

1. A notarized Contract Proposal (DOT-123). Non-signature items shall be typed or completed in ink.

Bids shall be in sealed envelopes and clearly marked on the outside as to the content when delivered to the Regional Office by the time indicated for Opening. Proposals faxed to the office will not be accepted.

If hand delivering or using a package delivery service,	If using the US Postal Service,
address the envelope:	address the envelope:
Mark Peterson, Region Engineer	Mark Peterson, Region Engineer
Department of Transportation	Department of Transportation
2735 West Highway 12	P.O. Box 1767
Aberdeen, SD 57401	Aberdeen, SD 57402-1767

Bidders will be required to fill out the blank spaces in the proposal form correctly. The bidder must fill in a unit price for each bid item shown on the proposal form. Bidders will also be required to carry out extensions and determine the "Total or Gross Sum Bid" as indicated in the proposal. The total of any proposal, as determined by the bidder, will be used only for a comparison when bids are publicly opened and read, and any errors noted in extensions or totals will be corrected to determine the "Total or Gross Sum Bid" of any proposal.

Failure to properly carry out any of the above requirements is deemed as sufficient reason to reject any proposal.

# **MISCELLANEOUS:**

Any person engaged in highway construction work in the State of South Dakota must obtain a motor fuel highway contractor tax license.

The Department of Transportation in accordance with Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C. 2000d to 2000d-4 and Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office of the Secretary, Part 21, Nondiscrimination in Federally-assisted programs of the Department of Transportation issued pursuant to such Act, hereby notifies all bidders that it will affirmatively insure that in any contract entered into pursuant to this advertisement, minority business enterprises will be afforded full opportunity to submit bids in response to this invitation and will not be discriminated against on the grounds of race, color, religion, national origin, sex, age or disability in consideration for an award.

The Contractor, by signing and submitting a bid or proposal, agrees to provide services in compliance with the Americans with Disabilities Act of 1990.

The Department of Transportation reserves the right to reject any and all bids.

Sincerely,

DEPARTMENT OF TRANSPORTATION

Mark Peterson Aberdeen Region Engineer

CC.

T. Ondricek
B. Letcher

File

# SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION CONTRACT PROPOSAL

DOT-123
July 2018
1 of 2

								<u> </u>	
	F	PROJECT	•	MAINT	CONTROL			BEGIN	END
CODE	PRE	ROUTE	AGR	UNIT	REFERENCE	AFE	<b>FUNCTION</b>	MRM	MRM
	M	000P		192		i5x9	2305		
	M	000N		192		i5xa	2305		
	M	000P		151		і5хс	2305		

CITY AND/OR COUNTY: Spink Spink BUDGET SOURCE: FY20 Contract Maintenance

TYPE, PURPOSE AND LOCATION OF WORK: Control growth of noxious weeds in the state highway right-of-way in Spink County &

bare ground

BID ITEM NUMBER	ITEM	QUANTITY	UN	UNIT PRICE	AMOUNT
910E0007	Tordon 22K	6000	oz		
910E0003	24D Amine	11000	oz		
910E0020	Sahara	150	LB		
910E0100	Escort	200	oz		
910E0085	Milestone	600	ΟZ		
910E0160	Glyphosate	320	ΟZ		
910E0197	Surfactant	170	oz		
910E0190	Spreader 90	1500	ΟZ		
910E UO	Labor A A A A A A A A A A A A A A A A A A A	540	hr		
910E	o not use for		h		<u> </u>
910E1050	ATV/Sprayer	360	hr		

#### **CONTRACTOR'S PROPOSAL STATEMENT**

The undersigned agrees to offer the lateral in lateral in the part of the purpose, in the place, and in accordance with attached provisions. The contract r we provide combine ce with the Americans with Disabilities Act of 1990 and any amendments.

SUBSTANTIA	AL COMPLETION DATE		PROPOSED START DATE	
FIELD WORK	COMPLETION DATE	11/01/2020	SIGNATURE	
SUBSCRIBE	D AND SWORN TO BEFOR	E ME THE	PRINTED NAME	
	DAY OF	, 20	COMPANY	
NOTARY			STR. ADDRESS	
My Com	mission Expires:		CITY, STATE, ZIP	
DATE		(SEA	AL) FEDERAL TAX ID NUMBE	R
		· · · · · · · · · · · · · · · · · · ·		·

# SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION CONTRACT PROPOSAL

DOT-123 July 2018 2 of 2

	F	PROJECT	•	MAINT	CONTROL			BEGIN	END
CODE	PRE	ROUTE	AGR	UNIT	REFERENCE	AFE	<b>FUNCTION</b>	MRM	MRM
	М	000P		192		i5x9	2305		
	М	000N		192		i5xa	2305		
	М	000P		151_		i5xç	2305	-4	f
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TO BE FILLED OUT BY STATE PERSONNEL:

RECOMMENDED FOR APPROVAL:

CONSTRUCTION & MAINTENANCE ENGINEER

DATE

AREA / REGION / OPS ENGINEER

DATE

DATE

ACCEPTED BY SOU HOALO A LEGR ME T F REPORT THE DATE

NAME TITLE DATE

IF FEDERAL FUNDS WILL BE EXPENDED UNDER THIS AGREEMENT, ACCEPTANCE BY PROJECT DEVELOPMENT IS REQUIRED

PROJECT DEVELOPMENT ENGINEER

DATE

# Do not use for bidding

purposes.

# Weed Spraying Specifications

The contractor does hereby agree to furnish the necessary equipment, materials and labor to control the growth of declared noxious weeds within the right-of way of state routes.

# **Spraying**

The spraying shall consist of spot treatments and shall be accomplished by using the herbicides specified on the contract with applicable rates as recommended by the manufactured. If a herbicide is needed that is not on this contract, the type and price shall be negotiated and added by Change Order, prior to use of the herbicide.

The contractor agrees to indemnify, save, and hold harmless the Department and all its employees and agents, from any and all claims, demands, actions or cause of action of whatsoever nature or character arising out of, or by reason of, the execution of performance of the work provided for under the contract whether or not the Contractor itself is negligent or otherwise culpable. The Contractor further agrees to defend at its own sole cost and expense any action or proceeding commenced for the purpose of asserting any claim on whatsoever nature or character arising under this contract whether or not the Contractor is itself negligent or otherwise culpable. This section does not require the Contractor to be responsible for or defend against claims or damages arising solely from acts or omissions of the State, its officers or employees.

The spraying shall be accomplished by personnel properly licensed by the South Dakota Department of Agriculture.

The Contactor shall advise the local Maintenance Supervisor of his intent to spray, 48 hours prior to doing so

The Contractor shall complete the attached daily form (DOT 820) "Contract Daily Pesticide Application Record" (Exhibit B), furnished by the Department, after each day of spraying.

The Contractor shall provide the Maintenance Supervisor with a complete copy of the daily form (DOT 820) at the end of spraying.

The Contractor shall submit an invoice for payment to the Area Engineer or Maintenance Supervisor (as instructed). The invoice shall be accompanied by the completed original daily form(s) DOT 820. Separate invoices may be submitted for the spring and fall sprayings, if the Contractor desires to do so.

The herbicide selected for use will dictate frequency and timing of application. If Two applications are required per growing season, the first shall be made in the spring of the year while the second shall be made in the late summer or early fall as directed by the Maintenance Supervisor. For herbicides requiring a single application, the application shall be made in accordance with the label for the product being used.

Equipment used for spraying shall be equipped with a flashing amber light. The light shall be turned on and used at all times during spraying operation.

# **Growth Suppression**

The following locations shall be treated for growth suppression:

- 1. 6 foot radius around all sign and delineator posts.
- 2. Underneath and 3 foot behind guide rail.

Herbicides shall be applied uniformly with properly calibrated equipment using at least 10 gallons water as a carrier per acre.

Herbicides for growth suppression shall be applied in the spring of the year. Herbicides shall not be applied to vegetation that has exceeded 8" in height.

# Attachment A SPINK COUNTY (NORTH HALF)

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# Attachment A SPINK COUNTY (SOUTH HALF)

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DOT-820 Exhibit B

# "Contract" Daily Pesticide Application Record

Date:	Contact N	lo:						
Customer:								
Contractor:								
SPRAYING ON THIS	DATE WAS ACCOMPLISHED	ON: INDICATE WHICH	<u>DITCH</u>					
Highway No:	From MRM	To MRM	N	S	Ε	W	OR	MEDIAN
Highway No:	From MRM	To MRM	N	S	Е	W	OR	MEDIAN
Highway No:	From MRM	To MRM	N	S	Ε	W	OR	MEDIAN
Highway No.	Type of Pesticide	Amount Used	Co	st/Ur	nit			Cost
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		x				_ =		
		X				_ =		
Highway No.	Employee Name	Hours Worked	I	Rate				Cost
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THIS FORM WILL BE COMPLETED IN TRIPLICATE. ONE COPY WILL BE FORWARDED TO THE LOCAL MAINTENANCE UNIT FOREMAN, ONE TO BE RETAINED ON FILE BY THE COUNTY, AND ONE (ORIGINAL) TO ACCOMPANY THE COUNTY'S INVOICE TO THE STATE FOR PAYMENT.