

March 1, 2020

NOTICE TO CONTRACTORS

Sealed bids will be received by the South Dakota Department of Transportation until **1:30 pm, Wednesday, March 17, 2020** at which time they will be opened for the following project(s):

Project Number	PCN	County	Type of Work	Area Engineer
000N-151, 000N-152, 000P-151, 000P-152	i6D1, i6D2, i6D3 i6D4	Brown	Weed Spraying	Bruce Schroeder (605-626-7885)
000N-151, 000P-151	i6D5, i6D6	Day		
000N-152, 000P-152	i6D7, i6D8	Edmunds		
000N-152, 000P-152	i6D9, i6DA	Faulk		
000N-151	i6CX	Marshall		
000N-152, 000N-371	i6CY, i6D0	McPherson		

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 Aberdeen 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.

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

BONDING & INSURANCE:

A **bid bond** will not be required.

A **performance bond** will not be required.

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. Schroeder
File

**SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION
CONTRACT PROPOSAL**

DOT-123
February 2021
1 of 2

CODE	PROJECT			MAINT UNIT	CONTROL REFERENCE	AFE	FUNCTION	BEGIN MRM	END MRM
	PRE	ROUTE	AGR						
0000				52		6d7	305		
0000				5		6d8	20		

This document is for

CITY AND/OR COUNTY: Edmunds County

BUDGET SOURCE: FY 2021 Contract Maintenance

REGION MATERIALS CERTIFICATION REQUIRED: ☐ YES ☒ NO
 CERTIFIED INSPECTORS/TESTERS REQUIRED: ☐ YES ☒ NO
 TO BE INSTALLED ON CM&P: ☒ YES ☐ NO

WIP #: _____

TYPE, PURPOSE AND LOCATION OF WORK: Control the growth of declared noxious weeds, aquatic vegetation and growth suppression within the right-of-way all maintained highway routes as shown on Exhibit "A" of this contract.

information only.

ESTIMATE OF QUANTITIES AND COST

BID ITEM NUMBER	ITEM	QUANTITY	UNIT	UNIT PRICE	AMOUNT
910E0012	24D	12,800	Oz		
910E0007	Tordon 22K	5,120	Oz		
910E0022	Shara	1,600	Oz		
910E0197	Surfactant	1,500	Oz		
910E0085	Mile Stone	500	Oz		
910E0030	Round Up	1280	Oz		
910E0100	Escort	400	Oz		
910E1050	ATV/Sprayer	500	Hr		
910E1000	Labor	500	Hr		
TOTAL					

Do not use for bidding

CONTRACTOR'S PROPOSAL STATEMENT

The undersigned agrees to offer the labor and material in the quantities, at the unit price, for the purpose, in the place, and in accordance with attached provisions. The Contractor will provide services in compliance with the Americans with Disabilities Act of 1990 and any amendments.

SUBSTANTIAL COMPLETION DATE N/A PROPOSED START DATE May 3, 2021
 FIELD WORK COMPLETION DATE _____
 SUBSCRIBED AND SWORN TO BEFORE ME THE _____
 DAY OF _____, 20____
 NOTARY _____
 My Commission Expires: _____
 DATE _____ (SEAL) _____
 SIGNATURE _____
 PRINTED NAME _____
 COMPANY _____
 STR. ADDRESS _____
 CITY, STATE, ZIP _____
 PHONE NUMBER _____
 FEDERAL TAX ID NUMBER _____

purposes.

**SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION
CONTRACT PROPOSAL**

DOT-123
February 2021
2 of 2

CODE	PROJECT			MAINT	CONTROL	AFE	FUNCTION	BEGIN	END
	PRE	ROUTE	AGR	UNIT	REFERENCE			MRM	MRM
0000				52		607	305		
0000				52		608	200		

This document is for

TO BE FILLED OUT BY STATE PERSONNEL:

The parties agree that the Department of Transportation may execute this contract by electronic signature.

RECOMMENDED FOR APPROVAL:

CONSTRUCTION & MAINTENANCE ENGINEER

DATE

AREA / REGION / OPS ENGINEER

DATE

DIRECTOR OF OPERATIONS

DATE

INTERNAL SERVICES / AUDITS

DATE

ACCEPTED BY SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION

NAME

TITLE

DATE

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

PROJECT DEVELOPMENT ENGINEER

DATE

information only.

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 as shown on the attached map (Exhibit A).

Spraying

The spraying shall consist of spot treatments and shall be accomplished by using the herbicides specified on the contract (or equivalent) with applicable rates as recommended by the manufacturer. If 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 Contractor 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) within One week after completing the 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 an ATV capable of navigating the highway ditches to allow for identification and direct treatment of weeds. Support vehicles shall be equipped with flashing amber lights. The lights shall be turned on and used at all times when the vehicle is on the roadway.

Growth Suppression

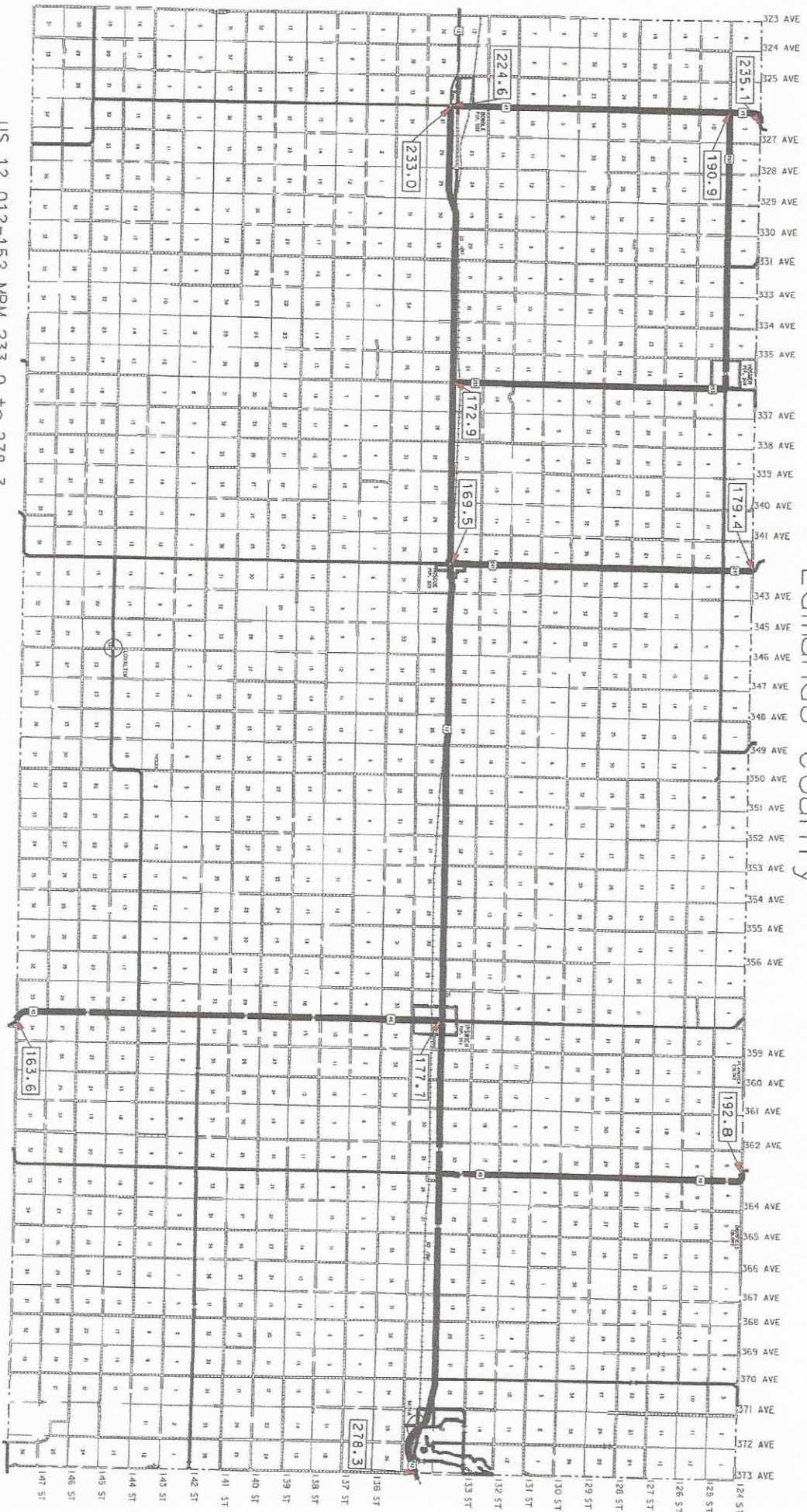
The following locations shall be treated for growth suppression:

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 manufacturers recommended rates and concentration.

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.

Edmunds County



US 12 012-152 MRM 233.0 to 278.3
SD 45 045-152 MRM 163.6 to 177.7 & 182.6 to 192.8
SD 47 047-152 MRM 224.6 to 235.1

SD 247 247-152 MRM 169.5 to 179.4
SD 253 253-152 MRM 172.9 to 190.9

SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION

EXHIBIT B

DOT 820 Modified - Aberdeen Area

Rev 03/15

PCN: _____

DATE: _____

WEATHER ☐ CLOUDY ☐ PARTLY CLOUDY ☐ MOSTLY SUNNY ☐ CLEAR

COUNTY ☐ MCPHERSON ☐ FAULK ☐ DAY
 ☐ EDMUNDS ☐ BROWN ☐ MARSHALL

TIME	START	END
TEMP °F		
WIND - Direction		
WIND - Speed		

COMMENTS: _____

APPLICATION

LOCATION

HWY#

DITCH

MRM START

MRM END

SPRAY

☐ CONTINUOUS

☐ SPOT

CHEMICAL

TYPE	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
BRAND	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
UNIT	<input style="height: 20px;" type="text" value="OZ"/>	<input style="height: 20px;" type="text" value="OZ"/>	<input style="height: 20px;" type="text" value="OZ"/>	<input style="height: 20px;" type="text" value="OZ"/>
QUANTITY	<input style="height: 40px;" type="text"/>	<input style="height: 40px;" type="text"/>	<input style="height: 40px;" type="text"/>	<input style="height: 40px;" type="text"/>

LABOR	NAME	START	STOP	HOURS
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>

LABOR
TOTAL
HOURS

EQUIP	TYPE	START	STOP	HOURS
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>
	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>	<input style="height: 20px;" type="text"/>

EQUIP
TOTAL
HOURS

Operator - Applicator _____ D.O.A. License # _____

Address _____

This form shall be completed in duplicate for each route after completion of your daily pesticide application. One copy is to be kept on file for a period of three (3) years, and the other copy is to be forwarded to the Area Engineer.