

March 10, 2021

### **NOTICE TO CONTRACTORS**

Sealed bids will be received by the South Dakota Department of Transportation until **1:30 pm, Wednesday, March 31, 2021** at which time they will be opened for the following project(s):

Project Number	PCN	County	Type of Work	Area Engineer
000P-191, 000N-191	i6f0 i6f1	Beadle	Weed Spraying	Brad Letcher (605-353-7140)
000P-192, 000N-192	i6f2 i6f3	Buffalo, Hand, Hughes, Hyde		
000P-191, 000N-191	i6f4 i6f5	Clark		
000P-191, 000N-191	i6f6 i6f7	Kingsbury		
000P-192, 000N-192, 000P-151, 000N-151	i6f8 i6f9 i6fa i6fc	Spink		

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](mailto:Scott.Schneider@state.sd.us) and [Michael.Welch@state.sd.us](mailto: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>
<b>Mark Peterson, Region Engineer Department of Transportation 2735 West Highway 12 Aberdeen, SD 57401</b>	<b>Mark Peterson, Region Engineer Department of Transportation P.O. Box 1767 Aberdeen, SD 57402-1767</b>

All bid items must have a unit price entered on the DOT-123 Contract Proposal form. Failure to enter a unit price or a unit price of zero will be considered a Mathematically Unbalanced Bid. The Department will consider a bid proposal Irregular and may reject the bid proposal if the Department determines, in its sole discretion, that any of the unit bid prices are significantly unbalanced to the potential detriment of the Department.

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

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Mark Peterson  
Aberdeen Region Engineer

cc:  
T. Ondricek  
[B. Letcher](#)  
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						
M		000P		192		i6f2	2305		
M		000N		192		i6f3	2305		

**CITY AND/OR COUNTY:** Buffalo, Hand, Hughes, & Hyde Counties

**BUDGET SOURCE:** FY21 Contract Maintenance

**REGION MATERIALS CERTIFICATION REQUIRED:**

☐ YES ☒ NO

**WIP #:** \_\_\_\_\_

**CERTIFIED INSPECTORS/TESTERS REQUIRED:**

☐ YES ☒ NO

**TO BE INSTALLED ON CM&P:**

☒ YES ☐ NO

**TYPE, PURPOSE AND LOCATION OF WORK:**

Control growth of noxious weeds in the state highway right-of-way in Buffalo, Hand,

Hughes & Hyde Counties

**ESTIMATE OF QUANTITIES AND COST**

BID ITEM NUMBER	ITEM	QUANTITY	UNIT	UNIT PRICE	AMOUNT
910E0003	24D	60000	oz		
910E0007	Tordon	1500	oz		
910E0021	Sahara	125	lb		
910E0050	Plateau	180	oz		
910E0160	Glyphosate	2500	oz		
910E0165	Metholated Seed Oil	2500	oz		
910E0195	Surfactant	2000	oz		
910E0082	Perspective	175	oz		
910E0085	Milestone	2000	oz		
910E0100	Escort	150	oz		
910E1040	Pickup/Sprayer	600	hr		
910E1060	Labor	600	hr		
<b>TOTAL</b>					

**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**

April 15, 2021

**FIELD WORK COMPLETION DATE**

November 1, 2021

**SIGNATURE** \_\_\_\_\_

**SUBSCRIBED AND SWORN TO BEFORE ME THE**

**PRINTED NAME** \_\_\_\_\_

**DAY OF** \_\_\_\_\_, 20\_\_

**COMPANY** \_\_\_\_\_

**NOTARY** \_\_\_\_\_

**STR. ADDRESS** \_\_\_\_\_

**My Commission Expires:**

**CITY, STATE, ZIP** \_\_\_\_\_

**PHONE NUMBER** \_\_\_\_\_

**DATE** \_\_\_\_\_

**(SEAL)**

**FEDERAL TAX ID NUMBER** \_\_\_\_\_

**SOUTH DAKOTA DEPARTMENT OF TRANSPORTATION  
CONTRACT PROPOSAL**

DOT-123  
February 2021  
2 of 2

CODE	PROJECT			MAINT UNIT	CONTROL REFERENCE	AFE	FUNCTION	BEGIN MRM	END MRM
	PRE	ROUTE	AGR						
M		000P		192		i6f2	2305		
M		000N		192		i6f3	2305		

**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

**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 manufacturer. 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 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) 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

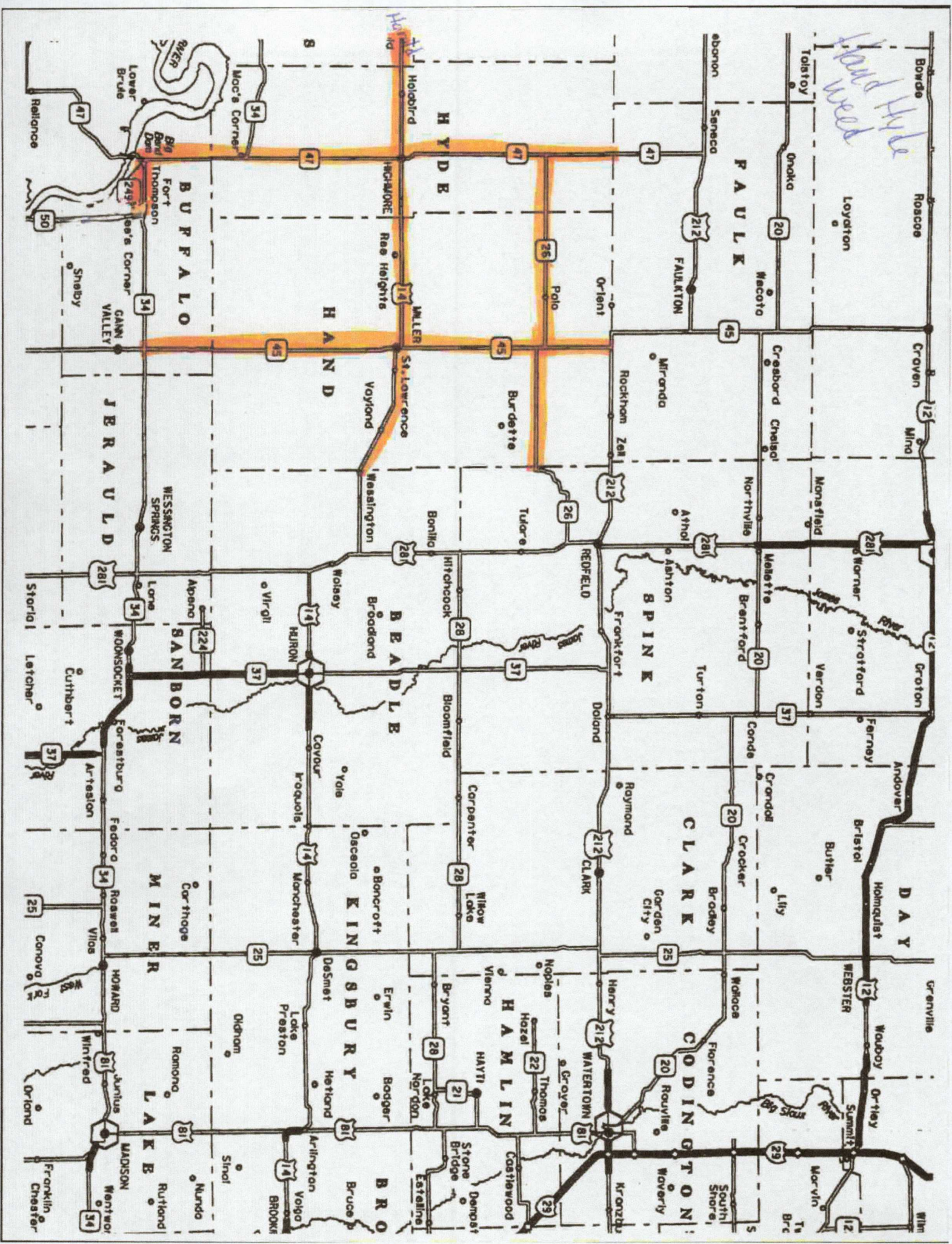
The following locations shall be treated for growth suppression:

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.







"Contract" Daily Pesticide Application Record

Date: \_\_\_\_\_ Contact No: \_\_\_\_\_

Customer: \_\_\_\_\_

Contractor: \_\_\_\_\_

SPRAYING ON THIS DATE WAS ACCOMPLISHED ON:      INDICATE WHICH DITCH

Highway No: \_\_\_\_\_ From MRM \_\_\_\_\_ To MRM \_\_\_\_\_ N S E W OR MEDIAN

Highway No: \_\_\_\_\_ From MRM \_\_\_\_\_ To MRM \_\_\_\_\_ N S E W OR MEDIAN

Highway No: \_\_\_\_\_ From MRM \_\_\_\_\_ To MRM \_\_\_\_\_ N S E W OR MEDIAN

Highway No.	Type of Pesticide	Amount Used	Cost/Unit	Cost
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____

Highway No.	Employee Name	Hours Worked	Rate	Cost
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____

Highway No.	Equipment	Miles or Hours Worked	Rate	Cost
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____
_____	_____	X	_____	= _____
			Total Cost	= _____

\_\_\_\_\_  
Sprayer Operator Signature

D.O.A. License Number: \_\_\_\_\_

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.