

**SERVICE CONTRACT BETWEEN
THE CITY OF COLUMBUS
AND
THE CITY OF GAHANNA
FOR SNOW AND ICE REMOVAL SERVICES
FOR THE 2020-2021 SEASON**

This Contract for snow and ice removal services is entered into by and between the City of Columbus, Department of Public Service (herein referred to as the "City"), and the City of Gahanna (herein referred to as the "Contractor").

WITNESSETH:

WHEREAS, the City has a need for snow and ice removal services; and

WHEREAS, the Contractor has the necessary experience and expertise to provide said service; and

NOW, THEREFORE, in consideration of the mutual promises as hereinafter set forth, the parties agree as follows:

ENTIRE AGREEMENT

This Contract sets forth the entire agreement between the parties with respect to the subject matter hereof. Understandings, agreements, representations, or warranties not contained in this Contract, or as written amendment hereto, shall not be binding on either party. Except as provided herein, no alteration of any terms, conditions, delivery, price, quality, or specifications of this Contract shall be binding on either party without the written consent of both parties.

1. Contract Term

The term of this Contract shall be from October 15, 2020 to April 15, 2021. This Contract shall not automatically renew.

2. Maximum Obligation

The amount to be paid under the purchase order associated with this Contract shall be **\$7,774.80** unless additional funds are appropriated and authorized.

3. Pricing and Scope of Services

The Contractor agrees to perform and invoice the Scope of Services as set forth **ON ATTACHED EXHIBIT A*** and as contained in the bid specifications, which are expressly incorporated herein.

*Contract is NOT valid if the Scope of Services is NOT attached.

No other costs, rates, or fees shall be payable to the Contractor for services performed hereunder. The terms and conditions specified in this Contract constitute the entire contract governing the purchase of services by the City from the Contractor, and shall supersede any terms and conditions which may accompany the Contractor's invoice/bid/estimate. Any and all verbal representations are superseded by this Contract. The terms of this Contract shall prevail over any conflicting or deficient terms or conditions listed in any attachments from the Contractor.

4. **Equal Opportunity Clause**

The Contractor agrees to abide by all of the terms, conditions and requirements set forth in Columbus City Code Section 3906.02, Equal Opportunity Clause. Failure or refusal of a Contractor or a Subcontractor to comply with the provisions of Title 39 may result in cancellation of this Contract.

5. **City's Contract Administrator/Contract Administration**

Tierra Palmer, of the Department of Public Service, will manage the Contract on behalf of the City and will be the principal point of contact for the City concerning the Contractor's performance under this Contract.

Any notice or demand or other communication required or permitted to be given under this Contract or applicable law shall only be effective if it is in writing, properly addressed, and either delivered in person, or by a recognized courier service, or deposited with the United States Postal Services as first-class certified mail, postage prepaid and return receipt requested, to the parties at the following addresses:

CITY

Tierra Palmer
Contract Manager
Department of Public Service
Office of Support Services
111 N. Front Street, 4th Floor
Columbus, Ohio 43215
(614) 645-7348
tlpalmer@columbus.gov

CONTRACTOR

Grant Crawford
Director – Public Service & Engineering
City of Gahanna
Service Department
200 S. Hamilton Road
Gahanna, Ohio 43230
(614) 342-4005
grant.crawford@gahanna.gov

6. **Applicable Law, Remedies**

This Contract shall be governed in accordance with the laws of the State of Ohio. All claims, counterclaims, disputes, and other matters in question between the City, its agents and employees, and the Contractor arising out of or relating to this Contract or its breach will be decided in a court of competent jurisdiction within the County of Franklin, State of Ohio.

7. **Payment/Invoice Submittal**

Fees shall be paid for services rendered following: (1) the City's receipt of a correct invoice, which designates the specific applicable charges including lane miles serviced and rate per lane mile (as described in Exhibit A) and (2) issuance of a certified purchase order. The City will not be subject to any late payment charges. Rates shall be firm during the term of this Contract. The City will process correctly documented invoices for payment and the Contractor should receive payment for such invoice within thirty (30) days from receipt and approval by the City.

The Contractor shall invoice the City after the service period and between April 15, 2021, and May 15, 2021.

Invoices: All invoices shall be submitted to:

Melvin Slusher
Department of Public Service
Office of Support Services
111 N. Front Street, 4th Floor
Columbus, Ohio 43215

8. Modifications

No modification, amendment, alteration, addition or waiver of any section or condition of this Contract shall be effective or binding unless it is in writing and signed by an authorized representative of the City and the Contractor and approved by the appropriate City authorities.

9. Contract Termination

If either the City or the Contractor violates any material term or condition of this Contract or fails to fulfill in a timely and proper manner its obligations under this Contract, then the aggrieved party shall give the other party (the "responsible party") written notice of such failure or violation. The responsible party will correct the violation or failure within thirty (30) calendar days or as otherwise mutually agreed. If the failure or violation is not corrected, this Contract may be terminated immediately by written notice from the aggrieved party. The option to terminate shall be at the sole discretion of the aggrieved party.

When it is in the best interest of the City, the City may terminate this Contract, in whole or in part by providing seven (7) calendar days written notice to the Contractor prior to the effective date of termination. If this Contract is so terminated, the City is liable only for payments required by the terms of this Contract for services received and accepted by the City.

10. Nonexclusive Remedies

The remedies provided for in this Contract shall not be exclusive but are in addition to all other remedies available under the law.

11. Survivorship

All services executed pursuant to the authority of this Contract shall be bound by all of the terms, conditions, prices discounts and rates set forth herein, notwithstanding the expiration of the initial term of this Contract, or any extension thereof. Further, the terms, conditions, and warranties contained in this Contract that by their sense in context are intended to survive this completion of the performance, cancellation or termination of this Contract, shall so survive.

12. Save Harmless

The Contractor shall protect, indemnify and save the City harmless from and against any damage, cost, or liability, including reasonable attorneys' fees, resulting from claims for any or all injuries to persons or damage to property arising from intentional, willful or negligent acts or omissions of the Contractor, its officers, employees, agents, or Subcontractors, to the extent permitted by Ohio law.

13. **Severability**

If any term or condition of this Contract or the application thereof to any person(s) or circumstances is held invalid, such invalidity shall not affect other terms, conditions, or applications which can be given effect without the invalid term, condition, or application; to this end the terms and conditions for the Contract are declared severable.

14. **Assignment**

This Contract may not be assigned, subcontracted, or otherwise transferred to others by the Contractor without the prior written consent of the City. If this Contract is so assigned, it shall inure to the benefit of and be binding upon any respective successors and assigns (including successive, as well as immediate, successors and assignees) of the Contractor.

15. **Authority to Bind**

The signatories to this Contract represent that they have the authority to bind themselves and their respective organizations to this Contract.

16. **Workers' Compensation**

The Contractor shall comply with all Workers' Compensation laws of the State of Ohio, if applicable. **Proof of coverage shall be attached to this Contract as EXHIBIT B.**

17. **Insurance**

The Contractor shall carry at least the minimum amounts listed below of Commercial Liability Insurance (Bodily Injury and Property Damage) and Comprehensive Automobile Liability Insurance naming the City as an additional insured. **The Contractor must attach a copy of the Certificate of Insurance to this Contract as EXHIBIT C:**

Bodily Injury Liability:

Each Person \$ 500,000
Each Accident \$1,000,000

Property Damage Liability:

Each Accident \$ 500,000
All Accidents \$1,000,000

Automobile Liability:

Each Accident \$1,000,000

18. **Attachments**

18.1 Exhibit A – Scope of Services

18.2 Exhibit B – Workers' Compensation Certificate

18.3 Exhibit C – Certificate of Liability Insurance Certificate or Affidavit of Self-Insurance

[Remainder of Page Intentionally Left Blank]

IN WITNESS WHEREOF, the parties have executed this Contract as of the day and year written below.

CITY OF COLUMBUS

APPROVED AS TO FORM:

Jennifer Gallagher
Director of Public Service

Zachary M. Klein
City Attorney

Date

CONTRACTOR

Laurie A. Jadwin
Mayor

Date

EXHIBIT A – SCOPE OF SERVICES

SECTION 1: CONTACTS

City of Columbus, Department of Public Service
 Division of Infrastructure Management
 111 N. Front Street, 5th Floor
 Columbus, Ohio 43215

Contact: Rodney Sparks
 Work: (614) 645-6325
 Cell: (614) 774-0811
 Email: RWSparks@columbus.gov

City of Gahanna
 200 S. Hamilton Road
 Gahanna, Ohio 43230

Contact: Joe Peterson
 Work: (614) 342-4425
 Cell: (614) 266-3819
 Email: Joe.Peterson@gahanna.gov

SECTION 2: SCOPE

2.1 RESPONSIBILITIES

City of Gahanna shall provide all personnel, insurance, equipment, fuel, and materials necessary to perform the appropriate snow and ice control services. These services will be equal in quality to those services provided within the municipalities' own areas of responsibility, and will be provided at the same time as, or immediately after the completion of the municipalities own routes. Both parties agree to maintain an open line of communication between each of the parties, particularly in reference to the commencement and completion of snow and ice control services. It is agreed that each party shall do its best to provide prompt, efficient, and courteous service to our citizens.

2.2 LIMITS

City of Gahanna shall remove snow and treat ice at the following locations:

<u>Area of Responsibility</u>	<u>Limit From</u>	<u>To Limit</u>	<u>Lane Miles</u>
Morrison Road	S. Gahanna Corp	Olde Morrison Road	0.52
Olde Morrison Road	Exit Ramp from I-270	Westbourne Avenue	0.52
Westbourne Avenue	Olde Morrison Road	Taylor Station Road	1.25
Taylor Station Road	Westbourne Avenue	S. Gahanna Corp	1.15
S. Hamilton Road	S. Gahanna Corp	N. Whitehall Corp	3.37
Wendler Boulevard	Hines Road (N. Gahanna Corp)	N. Stygler Road	1.59
N. Stygler Road	N. Gahanna Corp	Morse Road	1.83
TOTAL LANE MILES			10.23

A 'lane mile' is equal to the number of miles from one point to the other, multiplied by the number of lanes. A map depicting the aforementioned lane miles is attached hereto.

2.3 COST

Cost Per Lane Mile: \$760.00 Per Lane Mile Per Season

Total Cost: 10.23 Lane Miles x \$760.00 = \$7,774.80

ATTACH WORKERS' COMPENSATION CERTIFICATE



CERTIFICATE OF EMPLOYER'S RIGHT TO PAY COMPENSATION DIRECTLY

To be posted in employer's place or places of employment in compliance with Section 4123.83 of the Ohio Revised Code. Any employer requiring more than one copy of this certificate, may reproduce as many copies (without any alterations or changes) as required.

Policy Number and Employer Name 20005698 CITY OF GAHANNA HR DEPT 200 S HAMILTON RD GAHANNA, OH 43230-2919	Period Specified Below March 1, 2020 to March 1, 2021
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BWCLF0114A00200530200

This certifies that on date hereof the above named employer having met the requirements provided in Section 4123.35 of the Ohio Revised Code has been granted authority by the administrator to pay compensation directly to its injured or dependents of killed employees as provided in said Section for the period above set forth.

Sincerely,

Stephanie McCloud

Stephanie McCloud
Administrator/CEO

ATTACH CERTIFICATE OF LIABILITY INSURANCE

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

7/17/2020

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER License # 954553 AssuredPartners of Ohio, LLC 3900 Kinross Lakes Parkway #300 Richfield, OH 44286	CONTACT NAME: Amy Ballachino	
	PHONE (A/C, No, Ext): (440) 895-6536	FAX (A/C, No): (440) 356-2126
E-MAIL ADDRESS: amy.ballachino@AssuredPartners.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Ohio Municipal Joint Self-Insurance Pool		
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Cov C=Claims Made GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		OML001395305.20	4/1/2020	4/1/2021	EACH OCCURRENCE	\$ 5,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 5,000,000
							GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OP AGG	\$
								\$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			OML001395305.20	4/1/2020	4/1/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 5,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

O.M.J.S.I.P.=Ohio Municipal Joint Self-Insurance Pool

City of Columbus, Department of Public Service, is named as additional insured in regards to snow and ice removal contracting services per the 2020-2021 service agreement with the City of Gahanna.

CERTIFICATE HOLDER

City of Columbus Department of Public Service
 111 N. Front St.
 Columbus, OH 43215

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Amy J. Ballachino