EXHIBIT "F"

County of Erie

MARK C. POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

STANDARD AGREEMENT

This AGREEMENT, made as of the 28th DAY OF FEBRUARY, 2014

by and between NGT – COVERALL SERVICE COMPANY

of 165 LAWRENCE BELL DRIVE, SUITE 122, WILLIAMSVILLE, NY 14221

herein after referred to as the Contractor, and the County of Erie, a municipal corporation of the State of New York, hereinafter referred to as the County:

WHEREAS, in accordance with public open competitive bidding, sealed proposals were received and publicly opened by the County of Erie, Division of Purchase

on FEBRUARY 24, 2014 at 2:00 PM

for: JANITORIAL SERVICES – VARIOUS LOCATIONS.

WHEREAS, the bid of the Contractor submitted in accordance therewith, the sum of

FIFTY-SEVEN THOUSAND, FIVE HUNDRED FOUR DOLLARS ($57,504.00),

was the lowest responsible bid submitted; and

WHEREAS, a contract is hereby awarded to the Contractor by the County, in accordance with the provisions therein contained; and

WHEREAS, the Notice to Bidders and Specifications make provisions for entering into a proper and suitable contract in connection therewith;

NOW, therefore, the Contractor does hereby for its heirs, executors, administrators and successors agree with the County of Erie that, the Contractor shall for the consideration mentioned, and in the manner set forth in Accepted Invitation to Bid No. 214053-002, Specifications and Provisions of Law annexed hereto and forming a part of this contract, furnish the equipment and materials and perform the work and services described in the Accepted Bid for the above sum.

_____ Paid monthly upon presentation of invoices.

XXX Upon delivery, completion and approval of the work, as per specifications.

Please refer to the Invitation to Bid (Page 1) and the Instructions to Bidders which are part of this agreement.

IN WITNESS THEREOF, the parties hereto have hereunto set their hands and seals the day and year first above written.

COUNTY OF ERIE

by _____
Director of Purchase

Date_____

CONTRACTOR: NGT – COVERALL SERVICE COMPANY

by _____

Title REGIONAL DIRECTOR

Date 3/6/14

APPROVED AS TO FORM

_____
Assistant County Attorney
County of Erie, New York

Date_____

COUNTY OF ERIE

MARK POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

INVITATION TO BID

Bids, as stated below, will be received and publicly opened by the Division of Purchase in accordance with the attached specifications. FAX bids are unacceptable. Bids must be submitted in a sealed envelope to:

County of Erie
Division of Purchase
Attention: James D. Kucewicz, BUYER (716) 858-6336
95 Franklin Street, Room 1254
Buffalo, New York 14202-3967

NOTE: Lower left hand corner of envelope MUST indicate the following:

BID NUMBER: 214053-002

OPENING DATE: FEBRUARY 6, 2014 TIME: 2:00 PM

FOR: JANITORIAL SERVICES – VARIOUS LOCATIONS

Coverall Service Co.
165 Lawrence Bell Drive, Suite 12
Williamsville, NY 14221

NAME OF BIDDER: _____

If you are submitting other Invitations to Bid, each bid must be enclosed in a separate envelope.

Following EXHIBITS are attached to and made a part of the bid specifications, and part of any agreement entered into pursuant to this Invitation to Bid:

X EXHIBIT "A" - Assignment of Public Contracts
X EXHIBIT "B" - Purchases by Other Local Governments or Special Districts
____ EXHIBIT "C" - Construction/Reconstruction Contracts
____ EXHIBIT "D" - Bid Bond (Formal Bid)
N/A EXHIBIT "E" - Bid Bond (Informal Bid)
X EXHIBIT "F" - Standard Agreement
X EXHIBIT "G" - Non-Collusive Bidding Certification
X EXHIBIT "H" - MBE/ WBE Commitment
X EXHIBIT "IC" - Insurance **CLASSIFICATION "A"**
____ EXHIBIT "P" & EXHIBIT "PBI" - Performance Bond
____ EXHIBIT "Q" - Confined Space Program Certification

(Rev. 1/00)

EXHIBIT "G"

County of Erie

DIVISION OF PURCHASE

NON-COLLUSIVE BIDDING CERTIFICATION

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of his knowledge and belief:

(1) the prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or any competitor;

(2) unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and

(3) no attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

NOTICE

(Penal Law, Section 210.45)

IT IS A CRIME, PUNISHABLE AS A CLASS A MISDEMEANOR UNDER THE LAWS OF THE STATE OF NEW YORK, FOR A PERSON, IN AND BY A WRITTEN INSTRUMENT, TO KNOWINGLY MAKE A FALSE STATEMENT, OR TO MAKE A FALSE STATEMENT, OR TO MAKE A STATEMENT WHICH SUCH PERSON DOES NOT BELIEVE TO BE TRUE.

BID NOT ACCEPTABLE WITHOUT FOLLOWING CERTIFICATION:

Affirmed under penalty of perjury this 21 day of February 20 14

TERMS _____ DELIVERY DATE AT DESTINATION _____

FIRM NAME nGT - Coverall Service Co.

ADDRESS 165 Lawrence Bell Drive Suite 120

Williamsville NY ZIP 14221

AUTHORIZED SIGNATURE [signature]

TYPED NAME OF AUTHORIZED SIGNATURE Sarah Decker

TITLE operations mng TELEPHONE NO. 716-635-0987

(Rev.1/2000)

ERIE COUNTY OFFICE BUILDING, 95 FRANKLIN STREET, BUFFALO, NEW YORK 14202 (716) 858-6395

County of Erie

DIVISION OF PURCHASE
BID SPECIFICATIONS

BID NO. 214053-002

Ship to:
Attention:

Ship Via:
Date Required at Destination:

			CATALOG NO./DESCRIPTION		
			Vendor to provide Janitorial Services at Medical Examiner's Office,		
			Toxicology Lab, Public Health Lab, Environmental Health Division		
			Offices and Erie County Health Mall per the accompanying		
			specifications.		
			Contract period will be from March 1, 2014 through February 28, 2015.		
			Successful bidder must have been in janitorial business for past five years		
			and have experience serving customer of size similar to location specified.		
			Three references must be included with bid.		
			THERE WILL BE A MANDATORY PRE-BID SITE		
			VISIT ON WEDNESDAY, JANUARY 29 AT THE		
			AT THE FOLLOWING TIMES:		
			11:00am - Erie County Health Mall, 1500 Broadway Street		
			1:00pm - other 4 locations (meet at Medical Examiner's		
			Office, 501 Kensington Avenue).		

NOTE: Bid results cannot be given over the phone. All requests for bid results should be submitted in writing or faxed to:

ERIE COUNTY DIVISION OF PURCHASE
Freedom of Information Officer
95 Franklin Street, Rm. 1254
Buffalo, NY 14202
FAX #: **716/858-6465**

NAME OF BIDDER NGT Overall Service Co.

(Rev. 9/95)

VENDOR TO PROVIDE JANITORIAL SERVICES AT THE FOLLOWING ERIE COUNTY FACILITIES:

PART I: ERIE COUNTY MEDICAL EXAMINER'S OFFICE

501 KENSINGTON AVENUE
BUFFALO, NEW YORK 14215
OFFICE NUMBER: 898-3191

PART II: ERIE COUNTY TOXICOLOGY LABORATORY

501 KENSINGTON AVENUE
BUFFALO, NEW YORK 14215
OFFICE NUMBER: 898-3821

PART III: ERIE COUNTY PUBLIC HEALTH LABORATORY

503 KENSINGTON AVENUE- BUILDING AA
BUFFALO, NEW YORK 14214
OFFICE NUMBER: 898-6114

PART IV: ERIE COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION OFFICES

503 KENSINGTON AVENUE- BUILDING BB
BUFFALO, NEW YORK 14214
OFFICE NUMBER: 898-6114

PART I. MEDICAL EXAMINER'S OFFICE

TOTAL AREA TO BE SERVICED IS APPROXIMATELY 8,800 SQUARE FEET

Main office
Rest rooms (4)
Locker rooms (2)
Conference rooms (2)
Offices (6)
X-ray room
Entrance and hallways (2)
Histology room
Cooler room
Main autopsy room
Second autopsy room
Technician room
Family room

NOTE: All materials (toilet paper, multi-fold towels, hard-wound paper towel for dispensers, soap, etc.), cleaning supplies (bleach, glass cleaner, polish, etc.), and equipment (brooms, mops, mop heads, vacuum cleaner, etc.) are to be provided by vendor.

WORK PERFORMED FIVE DAYS PER WEEK UNLESS OTHERWISE INDICATED – BETWEEN THE HOURS OF 11AM–4PM UNLESS OTHERWISE ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. **SINGLE CLEANING PERSON MUST "WORK" 4 HOURS PER DAY. MULTIPLE CLEANING PERSONS MUST "WORK" A *MINIMUM* OF 2 HOURS PER DAY.** THIS DOES NOT INCLUDE TIME TAKEN FOR LUNCH OR BREAKS.

*Vendor is responsible for removing existing dispensers (soap, towel, etc.) and providing appropriate dispensers if alternate products are to be provided. Removal/installation of alternate dispensers must not cosmetically or structurally damage mounting surfaces. Vendor is responsible for all cosmetic/structural repairs, including, but not limited to: resurfacing, drywall, painting.

WORK TO BE PERFORMED:

ALL OFFICE AREAS (INCLUDING FRONT AND INDIVIDUAL OFFICES), CONFERENCE ROOMS, FAMILY ROOM, HISTOLOGY ROOM, IDENTIFICATION ROOM AND X-RAY ROOM.

(THREE DAYS A WEEK)

1. Dust all office furniture, sills and ledges.
2. Clean and sanitize all telephones.
3. Wet mop all floors with 1:10 bleach solution.
4. Vacuum all carpeting and runners.
5. Empty waste containers and remove waste to designated areas.

ALL CORRIDORS AND PASSAGEWAYS

(THREE DAYS A WEEK)

1. Dust all office furniture, sills, and ledges.
2. Clean and sanitize drinking fountains.
3. Sweep and wet mop all floors with 1:10 bleach solution.
4. Vacuum all rugs and runners.
5. Empty waste containers and remove waste to designated areas.

ALL ENTRANCES

(THREE DAYS A WEEK)

1. Dust all office furniture, sills, and ledges.
2. Sweep and wet mop all floors with 1:10 bleach solution.
3. Vacuum all rugs and runners.
4. Empty waste containers and remove waste to designated areas.
5. Wash glass doors and vestibules.

AUTOPSY AND COOLER ROOMS

(DAILY – SPECIFIC TIMES TO BE DETERMINED)

1. Clean and sanitize sinks and counters with disinfectant.
2. Wet mop all floors with 1:10 bleach solution.
3. Clean and replenish all dispensers with antibacterial soap or towels as indicated.
4. Wipe all door knobs with disinfectant.
5. Polish all stainless steel surfaces (counters, sinks, walls, cooler doors) ***ONCE A WEEK***
6. Empty biohazard waste containers and remove waste to designated areas.
7. Empty dirty water from all mop buckets and refill with 1:10 bleach water solution at end of each cleaning day.

RESTROOMS

(DAILY)

1. Empty waste containers and remove waste to designated areas.
2. Clean and sanitize sink washbowls, urinals and commodes.
3. Polish sink fixtures.
4. Wet mop floors with 1:10 bleach solution.
5. Clean and replenish all dispensers with antibacterial soap, towels, toilet tissue, etc.

BREAKROOM/KITCHEN AREA

(DAILY)

1. Sweep and wet mops floors.
2. Clean and sanitize table, counters, microwave top, and stove top surface.
3. Empty waste containers.

ALL OFFICE AREAS, CONFERENCE ROOMS, HALLS AND LOUNGES

(QUARTERLY)

1. Vacuum and wash all vents.

(TWICE PER YEAR)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.
2. Wash all inside and outside windows.
3. Shampoo front office carpeting.

***Contractor to provide regular, on-site supervision of janitorial staff.*

****The Medical Examiner's Office provides a room to store equipment and supplies. This room must be kept in an orderly condition. No garbage or water pails or mildewed mops are to be left in this room at any time.* ***Facilities handle blood and other potentially infectious materials (OPIM); vendor must have an OSHA-compliant method of mopping floors, e.g. disposable mop heads or use of disinfecting cleaning solution.***

PART II. TOXICOLOGY LABORATORY

TOTAL AREA TO BE SERVICED IS APPROXIMATELY 8,000 SQUARE FEET

Side rooms (PTG-45A – E)
Wash room (PTG-45G)
Office (PTG-45H)
Main lab (PTG-45I)
Break room (PTG-45L)
Freezer room (PTG-45M)
Instrument area (PTG-46)
Storage area (PTG-46A)
Stairwells (2)

NOTE: All cleaning supplies (multi-fold towels, soap, etc.), cleaning supplies (bleach, glass cleaner, polish, etc.), and equipment (brooms, mops, mop heads, vacuum cleaner, etc.) are to be provided by vendor.

WORK PERFORMED THREE DAYS PER WEEK UNLESS OTHERWISE INDICATED – BETWEEN THE HOURS OF 11AM–4PM UNLESS OTHERWISE ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. **SINGLE CLEANING PERSON MUST "WORK" 4 HOURS PER DAY. MULTIPLE CLEANING PERSONS MUST "WORK" A *MINIMUM* OF 2 HOURS PER DAY.** THIS DOES NOT INCLUDE TIME TAKEN FOR LUNCH OR BREAKS.

**Vendor is responsible for removing exis ng dispensers (soap, towel, etc.) and providing appropriate dispensers if alternate products are to be provided. Removal/installa on of alternate dispensers must not cosme cally or structurally damage moun ng surfaces. Vendor is responsible for all cosme c/structural repairs, including, but not limited to: resurfacing, drywall, pain ng.*

WORK TO BE PERFORMED:

MAIN LABORATORY AREA

(DAILY)

1. Empty and clean waste containers and remove waste to designated area.
2. Dust all furniture, sills, ledges, etc.
3. Clean and sanitize all telephones.
4. Clean and sanitize drinking fountain.
5. Sweep and wet mop all floors with 1:10 bleach solution.
6. Wash all floor mats.

(TWICE A YEAR)

1. Recondition all resilient floors, **STRIPPING**, sealant application and wax.
2. Wash all windows, inside and out.

(QUARTERLY)

1. Vacuum and wash all vents.

CONFERENCE ROOMS AND OFFICES

(DAILY)

1. Empty and clean waste containers and remove waste to designated area.
2. Dust all furniture, sills, ledges, etc.
3. Vacuum all carpeting and runners.

(WEEKLY)

1. Spot clean doors, door frames, light switches and walls to remove dust, dirt and stains.
2. Dust air vents.

(ANNUALLY)

1. Steam clean/shampoo carpeting to remove stains.
2. Wash all ground-floor exterior windows.
3. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

STAIRWELLS

(WEEKLY)

1. Sweep/mop/vacuum.

***Contractor to provide regular, on-site supervision of janitorial staff.*

****** Facilities handle blood and other potentially infectious materials (OPIM); vendor must have an OSHA-compliant method of mopping floors, e.g. disposable mop heads or use of disinfecting cleaning solution.***

PART III. PUBLIC HEALTH LABORATORIES

TOTAL AREA TO BE SERVICED IS 17,500 SQUARE FEET

NOTE: All materials (toilet paper, towels, soap, etc.), cleaning supplies (bleach, glass cleaner, polish, etc.), and equipment (brooms, mops, mop heads, vacuum cleaner, etc.) are to be provided by vendor.

WORK PERFORMED THREE DAYS PER WEEK (MONDAY, WEDNESDAY, FRIDAY) UNLESS OTHERWISE INDICATED – BETWEEN THE HOURS OF 9AM–3PM UNLESS OTHERWISE ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. VENDOR MUST ADJUST SCHEDULE DURING WEEKS WITH HOLIDAYS, UNLESS OTHERWISE ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. **SINGLE CLEANING PERSON MUST "WORK" 4 HOURS PER DAY. MULTIPLE CLEANING PERSONS MUST "WORK" A *MINIMUM* OF 2 HOURS PER DAY**. THIS DOES NOT INCLUDE TIME TAKEN FOR LUNCH OR BREAKS.

**Vendor is responsible for removing exis ng dispensers (soap, towel, etc.) and providing appropriate dispensers if alternate products are to be provided. Removal/installa on of alternate dispensers must not cosme cally or structurally damage moun ng surfaces. Vendor is responsible for all cosme c/structural repairs, including, but not limited to: resurfacing, drywall, pain ng.*

WORK TO BE PERFORMED:

LABORATORY AREAS

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster. (Regulated Medical Waste will be handled by Erie County Public Health Laboratory staff)

(WEEKLY)

1. Spot clean doors, door frames, light switches and walls to remove dust, dirt and stains.
2. Dust air vents.
3. Wash door and window glass.
4. Damp mop floors with disinfecting cleaner or using disposable mop heads.

(QUARTERLY)

1. Buff all floors.

(ANNUALLY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

ADMINISTRATIVE AREAS (ALL OFFICE AREAS, CONFERENCE ROOMS AND LOUNGES*)

***includes Administrative Area-Main Office, Director's Office, Assistant Director's Office, Administrative Assistant Offices, Small Conference Room, Large Conference Room, Environmental Chemistry Supervisor's Office, Microbiology Supervisor's Office)**

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Vacuum all carpeting.
3. Straighten chairs in reception area and conference rooms. Clean conference room tables, as needed.

(WEEKLY)

1. Dust all office furniture, sills & ledges, cabinets and blinds.
2. Spot clean doors, door frames, light switches and walls to remove dust, dirt and stains.
3. Dust air vents.
4. Wash door and window glass.
5. Vacuum carpeting.

(ANNUALLY)

1. Steam clean/shampoo carpeting to remove stains.
2. Wash all ground-floor exterior windows.

ALL CORRIDORS AND PASSAGEWAYS

(DAILY)

1. Dust mop all floors.
2. Vacuum all rugs and runners.

(WEEKLY)

1. Wet mop all floors.

(QUARTERLY)

1. Buff all floors.

(ANNUALLY)

1. Recondition all resilient floors, STRIPPING, sealant application and waxing.

ALL ENTRANCES

(WEEKLY)

1. Dust and wet mop all floors.
2. Wash all door and window glass.

(QUARTERLY)

1. Buff all floors.

(ANNUALLY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.
2. Wash all ground-floor exterior windows.

RESTROOMS

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Clean and sanitize sink washbowls, urinals and commodes.
3. Polish sink fixtures.
4. Wet mop floors.
5. Clean and replenish all dispensers with antibacterial soap, towels and toilet tissue. All materials will be provided by vendor.

(QUARTERLY)

1. Buff all floors.

(ANNUALLY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

EMPLOYEE BREAKROOM

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Clean and sanitize sinks, fixtures and counters.
3. Wet mop floors.
4. Restock with paper towels and antibacterial soap. All materials will be provided by vendor.

(QUARTERLY)

1. Buff all floors.

(ANNUALLY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

STOREROOMS

(ANNUALLY)

1. Vacuum and damp mop all floors.

RECYCLING

(DAILY)

1. Collect all paper and cardboard recycling from designated receptacles throughout building.
2. Collect all paper from designated recycling containers throughout building and place in bulk recycling container for collection.
3. Remove and breakdown all clean cardboard from hallways and designated areas and place in bulk recycling containers for collection.
4. Maintain recycling storage area in neat and clean manner.

***Contractor to provide regular, on-site supervision of janitorial staff.*

****The Public Health Laboratory provides a room to store equipment and supplies. This room must be kept in an orderly condition. No garbage or water pails or mildewed mops are to be left in this room at any time.* ***The office deals with biological fluids which may come in contact with the mop used to clean the floor. Vendor must have an OSHA-compliant method of mopping floors, e.g. disposable mop heads or use of disinfecting cleaning solution.***

PART IV: ERIE COUNTY HEALTH DEPARTMENT - ENVIRONMENTAL HEALTH DIVISION OFFICES

*to include front entranceway and, when necessary, 25% of Building CC.

TOTAL AREA TO BE SERVICED IS 18,500 SQUARE FEET plus front entranceway and area of Building CC.

NOTE: All materials (toilet paper, towels, soap, etc.), cleaning supplies (bleach, glass cleaner, polish, etc.), and equipment (brooms, mops, mop heads, vacuum cleaner, etc.) are to be provided by vendor.

WORK PERFORMED THREE DAYS PER WEEK (MONDAY, WEDNESDAY, FRIDAY) UNLESS OTHERWISE INDICATED – BETWEEN THE HOURS OF 9AM–3PM UNLESS OTHERWISE INDICATED AND/OR ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. VENDOR MUST ADJUST SCHEDULE DURING WEEKS WITH HOLIDAYS, UNLESS OTHERWISE ARRANGED BETWEEN CONTRACTOR AND FACILITY SUPERVISOR. **SINGLE CLEANING PERSON MUST "WORK" 4 HOURS PER DAY. MULTIPLE CLEANING PERSONS MUST "WORK" A *MINIMUM* OF 2 HOURS PER DAY**. THIS DOES NOT INCLUDE TIME TAKEN FOR LUNCH OR BREAKS.

**Vendor is responsible for removing existing dispensers (soap, towel, etc.) and providing appropriate dispensers if alternate products are to be provided. Removal/installation of alternate dispensers must not cosmetically or structurally damage mounting surfaces. Vendor is responsible for all cosmetic/structural repairs, including, but not limited to: resurfacing, drywall, painting.*

WORK TO BE PERFORMED:

ALL OFFICES, FILE ROOMS AND CONFERENCE ROOMS

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Straighten chairs in reception area and conference rooms. Clean conference room tables, as needed.

(WEEKLY)

1. Dust all office furniture, sills & ledges, cabinets and blinds.
2. Spot clean doors, door frames, light switches and walls to remove dust, dirt and stains.
3. Vacuum all carpeting

(MONTHLY)

1. Dust air vents.

(QUARTERLY)

1. Wash windows both inside and outside at ground level.

(ANNUALLY)

1. Steam clean/shampoo carpeting to remove stains.
2. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

ALL CORRIDORS AND PASSAGEWAYS

(DAILY)

1. Dust mop and wet mop all floors.
2. Vacuum all rugs and runners.

(QUARTERLY)

1. Buff all floors.
2. Dust air vents.

(TWICE A YEAR)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

(ANNUALLY)

1. Steam clean/shampoo carpeting to remove stains.

ENTRANCE / LOBBY

(DAILY)

1. Sweep and wet mop all floors.
2. Wash glass doors and clean vestibule.

(TWICE A YEAR)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

RESTROOMS

(DAILY – between 1:00-3:00pm)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Clean and sanitize sink washbowls, urinals and commodes.
3. Clean, sanitize and polish sink fixtures and mirrors.
4. Wet mop floors.
5. Clean and replenish all dispensers with antibacterial soap, towels and toilet tissue. All materials will be provided by vendor.

(QUARTERLY)

1. Buff all floors.
2. Dust air vents.
3. Clean soiled areas of walls and partitions.

(ANNUALY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

KITCHEN / BREAKROOM

(DAILY)

1. Empty waste containers, remove waste and dispose of in dumpster.
2. Clean and sanitize sinks, fixtures and counters.
3. Wet mop floors.
4. Restock with paper towels and antibacterial soap. All materials will be provided by vendor.

(QUARTERLY)

1. Buff all floors.
2. Clean and sanitize refrigerators and microwave ovens. (One week before this work is to begin, vendor must notify staff to remove all food items from refrigerator. Any remaining items are to be thrown away before cleaning refrigerators.)
3. Clean soiled areas of walls.

(ANNUALY)

1. Recondition all resilient floors, **STRIPPING**, sealant application and waxing.

STOREROOMS

(TWICE A YEAR)

1. Sweep and wet mop floors.

RECYCLING

(DAILY)

1. Collect all paper and cardboard recycling from designated receptacles throughout building.
2. Collect all paper from designated recycling containers throughout building and place in bulk recycling container for collection.
3. Remove and breakdown all clean cardboard from hallways and designated areas and place in bulk recycling containers for collection.
4. Maintain recycling storage area in neat and clean manner.

***Contractor to provide regular, on-site supervision of janitorial staff.*

****The Health Department provides a room to store equipment and supplies. This room must be kept in an orderly condition. No garbage or water pails or mildewed mops are to be left in this room at any time. This room should be kept in an orderly condition.*

COUNTY OF ERIE

MARK C. POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

TO: ALL BIDDERS

FROM: James D. Kucewicz, Buyer
Erie County Division of Purchase

DATE: January 29, 2014

SUBJECT: **ADDENDUM NO. 1 . Erie County Bid #214053-002**
Janitorial Services – Various Locations

The attention of all bidders is directed to the following changes in the above bid:

****

1) The pre-bid walk-through has been re-scheduled for Tuesday, February 4, 2014 at the following times:

11:00am – Erie County Health Mall, 1500 Broadway Street
site contact: Ben Swanekamp (716-858-2928)

1:00pm – other four locations – meet at the Medical Examiner's Office, 501 Kensington Avenue
site contact: Janinne Blank (716-961-7525)

2) The bid opening date has been changed to Monday, February 10, 2014 at 2:00pm.

****

COUNTY OF ERIE

MARK C. POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

VALLIE M. FERRARACCIO
DIRECTOR

TO: ALL BIDDERS

FROM: James D. Kucewicz, Buyer

DATE: February 5, 2014

SUBJECT: **ADDENDUM NO. 2 Erie County Bid #214053-002**
Janitorial Services – Various Locations

****

The attention of all bidders is directed to the following changes in the above bid:

1) **In PART IV: ERIE COUNTY HEALTH DEPARTMENT – ENVIRONMENTAL HEALTH DIVISION**

WORK TO BE PERFORMED:

ALL CORRIDORS AND PASSAGEWAYS

(DAILY)

1. Machine clean all floors. (November 1 through March 31)
   (instead of "Dust mop and wet mop all floors")
2. Vacuum all rugs and runners.

(WEEKLY)

1. Machine clean all floors. (April 1 through October 31)
   (added)

ENTRANCE / LOBBY

(DAILY)

1. Machine clean all floors. (November 1 through March 31)
   (instead of "Sweep and wet mop all floors")
2. Wash glass doors and clean vestibule

(WEEKLY)

1. Machine clean all floors. (April 1 through October 31)
   (added)

*****ALL OTHER SPECIFICATIONS REMAIN THE SAME**

2) **Bid opening date has been changed to Wednesday, February 12, 2014 at 2:00pm.**

****

COUNTY OF ERIE

MARK C. POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

TO: ALL BIDDERS

FROM: James D. Kucewicz, Buyer
Erie County Division of Purchase

DATE: February 10, 2014

SUBJECT: **ADDENDUM NO. 3 Erie County Bid #214053-002**
Janitorial Services – Various Locations

The attention of all bidders is directed to the following change in the above bid:

****

1) The bid opening date has been changed to Monday, February 24, 2014 at 2:00pm.

****

COUNTY OF ERIE

MARK C. POLONCARZ
COUNTY EXECUTIVE

DIVISION OF PURCHASE

TO: ALL BIDDERS

FROM: James D. Kucewicz, Buyer
Erie County Division of Purchase

DATE: February 19, 2014

SUBJECT: **ADDENDUM NO. 4 Erie County Bid #214053-002**
Janitorial Services – Various Locations

OPENING ON FEBRUARY 24, 2014 AT 2:00 PM

The attention of all bidders is directed to the following changes in the above bid:

****

In Part I. Medical Examiner's Office, Part II. Toxicology Laboratory, Part III. Public Health Laboratories, Part IV. Erie County Health Department – Environmental Health Division Offices, materials such as paper towels and soap will no longer be part of the bid. The note at the top of these sections should read:

NOTE: All cleaning supplies (bleach, glass cleaner, polish, etc.), and equipment (brooms, mops, mop heads, vacuum cleaner, floor and carpet cleaning machines, etc.) are to be provided by vendor. All materials (toilet paper, multi-fold towels, hard-wound paper towel for dispensers, soap, etc. will be purchased by the County but maintained by the vendor. Vendor will coordinate with the County department to ensure adequate supply.

These materials are still part of Part V. Erie County Health Mall and should be included in pricing for Part V. Since the Health Mall is a new site, usage totals are unavailable. A floor plan of the site, however, is included in this addendum to assist in estimating these totals.

****

This is a New York State Prevailing Wage Job. Please refer to PRC# 2014900138

****

BID PRICING

PART I: MEDICAL EXAMINER'S OFFICE

PRICE PER MONTH: $ 11164.00

(x12) = ANNUAL PRICE $ 139168.00

PART II: TOXICOLOGY LABORATORY

PRICE PER MONTH $ 560.00

(x12) = ANNUAL PRICE $ 6720.00

PART III. PUBLIC HEALTH LABORATORY

PRICE PER MONTH $ 1100.00

(x12) = ANNUAL PRICE $ 13200.00

PART IV. ENVIRONMENTAL HEALTH DIVISION OFFICES

PRICE PER MONTH $ 1968.00

(x12) = ANNUAL PRICE $ 23616.00

PART V. HEALTH MALL

Item #1
PRICE PER MONTH $ X

(x12) = ANNUAL PRICE $ X

Item #2
ANNUAL PRICE $ X

NAME OF BIDDER MGT - Coverall Service Co.

County of Erie

DIVISION OF PURCHASE

To facilitate correct drawing and execution of contract, bidder shall supply full information concerning legal status:

FIRM NAME NGT- Cwerall Service Co

ADDRESS OF PRINCIPAL OFFICE STREET 165 Lawrence Bell Dr Suite 122

CITY Williamsville NY

AREA CODE 716 PHONE 635-0987 STATE NY ZIP 14221

Check one: CORPORATION X PARTNERSHIP____ INDIVIDUAL____

INCORPORATED UNDER THE LAWS OF THE STATE OF Maryland

If foreign corporation, state if authorized to do business in the State of New York:

YES X NO ____

TRADE NAMES: _____

ADDRESS OF LOCAL OFFICE STREET _____

CITY _____

AREA CODE ____ PHONE _____ STATE _____ ZIP _____

NAMES AND ADDRESSES OF PARTNERS:

_____ _____

_____ _____

_____ _____

_____ _____

EXHIBIT "A"

County of Erie

CHRIS COLLINS
COUNTY EXECUTIVE

DIVISION OF PURCHASE

ASSIGNMENT OF PUBLIC CONTRACTS

GENERAL MUNICIPAL LAW - Section 109:

1. A clause shall be inserted in all specifications of contracts hereafter made or awarded by an officer, board or agency of a political subdivision, or any district therein, prohibiting any contractor, to whom any contract shall be let, granted or awarded, as required by law, from assigning, transferring, conveying, subletting or otherwise disposing of the same, or of his right, title or interest therein, or his power to execute such contract, to any other person or corporation without the previous consent in writing of the officer, board or agency awarding the contract.

2. If any contractor, to whom any contract is let, granted, or awarded, as required by law, by any officer, board or agency of a political subdivision, or of any district therein, without the previous written consent specified in subdivision one (1) of this section, assign, transfer, convey, sublet or otherwise dispose of such contract, or his right, title or interest therein, or his power to execute such contract to any other person or corporation, the officer, board or agency which let, made, granted or awarded such contract shall revoke and annul such contract, and the political subdivision or district therein, as the case may be, and such officer, board or agency shall be relieved and discharged from all liability and obligations growing out of such contract to such contractor, and to the person or corporation to which such contract shall have been assigned, transferred, conveyed, sublet or otherwise disposed of, and such contractor, and his assignee, transferee or sublessee shall forfeit and lose all monies, theretofore earned under such contract, except so much as may be required to pay his employees. The provisions of this section shall not hinder, prevent or affect any assignment by any such contractor for the benefit of his creditors made pursuant to the laws of the State.

NO ASSIGNMENT OF ANY AGREEMENT pursuant to this bid shall be made without specific prior approval, in writing, by the Erie County Director of Purchase.

(Rev. 12/01/93)

EXHIBIT "B"

COUNTY OF ERIE

CHRIS COLLINS
COUNTY EXECUTIVE
DIVISION OF PURCHASE

PURCHASES BY OTHER LOCAL GOVERNMENTS OR SPECIAL DISTRICTS

The Erie County Legislature has adopted the following resolution for the purpose of allowing the following-named local governmental or school districts to make purchases through the County bidding procedures.

Under the following conditions, the Director of Purchase may make purchasing services available to the following 88 participants:

1. When in the opinion of the Director of Purchase it will not create any burden or hardship upon the County and the anticipated prices will not be adversely affected thereby, the Director is authorized when he deems appropriate and as may be requested by the participants to provide in any particular County bid specification that the participants in Erie County shall have the right to make purchases based upon the bids received by the County.

2. The County Purchase Director, within the limits of his time and manpower, shall disseminate relevant contract information to the participants.

3. The participants in County contracts will issue purchase orders directly to vendors within the specified contract period referencing the County contract involved and be liable for any payments due on such purchase orders.

Bidders shall take notice that as a condition of the award of a County contract pursuant to these specifications, the successful bidder agrees to accept the award of a similar contract with any of the participants in Erie County if called upon to do so. The County, however, will not be responsible for any debts incurred by participants pursuant to this or any other agreement.

Necessary deviations from the County's specifications in the award of a participant's contract, particularly as such deviations may relate to quantities or delivery point, shall be a matter to be resolved between the successful bidder and participants. All inquiries regarding prospective contracts shall be directed to the attention of:

AKRON CENTRAL SCHOOL DISTRICT, District Clerk, 47 Bloomingdale Ave., Akron, NY 14001
AKRON VILLAGE OF, Clerk-Treasurer, 21 Main St., Akron, NY 14001
ALDEN CENTRAL SCHOOL DISTRICT, District Clerk, 13190 Park St., Alden, NY 14004
ALDEN TOWN OF, Town Clerk, Town Hall, 11901 Broadway, Alden, NY 14004
ALDEN VILLAGE OF, Village Clerk, 13336 Broadway, Alden, NY 14004
AMHERST CENTRAL SCHOOL DISTRICT, Business Manager , 4301 Main St., Amherst, NY 14226
AMHERST TOWN OF, Highway Superintendent, Town Hall, 5583 Main St., Williamsville, NY 14221
AMHERST TOWN OF, Town Supervisor, Town Hall, 5583 Main St., Williamsville, NY 14221
ANGOLA VILLAGE OF, Clerk-Treasurer, 41 Commercial St., Angola, NY 14006
AURORA TOWN OF, Town Clerk, Town Hall, 5 S. Grove St., E. Aurora, NY 14052
BLASDELL VILLAGE OF, Clerk-Treasurer, 121 Miriam St., Blasdell, NY 14219
BOCES, ERIE #1, Clifford N Crooks Svc. Ctr., 355 Harlem Rd. West Seneca NY 14224-1892
BOCES, ERIE CATTARAUGUS #2, Assistant Superintendent, 3340 Baker Rd., Orchard Park, NY 14127
BOSTON TOWN OF, Town Clerk, Town Hall, 8500 Boston State Rd., Boston, NY 14025
BRANT TOWN OF, Town Clerk, Town Hall, Brant North Collins Rd., Brant, NY 14027
BUFFALO BOARD OF EDUCATION, Purchasing Agent, 408 City Hall, Buffalo, NY 14202
BUFFALO CITY OF, Division of Purchasing, 1901 City Hall, Buffalo, NY 14202
BUFFALO SEWER AUTHORITY, General Manager, 1038 City Hall, Buffalo, NY 14202-3378
CHEEKTOWAGA CENTRAL SCHOOL DISTRICT, 3600 Union Rd., Cheektowaga, NY 14225
CHEEKTOWAGA-MARYVALE UNION FREE SCHOOL DISTRICT, District Clerk, 1050 Maryvale Dr., Cheektowaga, NY 14225-2386
CHEEKTOWAGA-SLOAN UNION FREE SCHOOL DISTRICT, District Clerk, 166 Halstead Ave., Sloan, NY 14212-2295
CHEEKTOWAGA TOWN OF, Town Hall, Broadway & Union Rds., Cheektowaga, NY 14227
CLARENCE CENTRAL SCHOOL DISTRICT, Business Administrator, 9625 Main St., Clarence, NY 14031-2083
CLARENCE TOWN OF, Town Clerk, 1 Town Place, Clarence, NY 14031
CLEVELAND HILL FIRE DISTRICT NO. 6, Secretary, 440 Cleveland Dr., Cheektowaga, NY 14225
CLEVELAND HILL U.F.S.D. @ CHEEKTOWAGA, Business Manager,105 Mapleview Dr., Cheektowaga, NY 14225

COLDEN TOWN OF, Deputy Town Clerk, Town Hall, S-8812 State Rd., Colden, NY 14033
COLLINS TOWN OF, Supervisor, Town Hall, P.O. Box 420, Collins, NY 14035
CONCORD TOWN OF, Town Clerk, Town Hall, Springville, NY 14141-0187
DEPEW UNION FREE SCHOOL DISTRICT, District Clerk, 591 Terrace Blvd., Depew, NY 14043
DEPEW VILLAGE OF, Village Clerk, Municipal Building, 85 Manitou St., Depew, NY 14043
EAST AURORA VILLAGE OF, Village Clerk, Village Hall, 571 Main St., East Aurora, NY 14052
EDEN TOWN OF, Town Clerk, 2795 East Church St., Eden, NY 14057
EGGERTSVILLE FIRE DISTRICT, Secretary/Treasurer, 1880 Eggert Rd., Eggertsville, NY 14226-2233
ELLWOOD FIRE DISTRICT #1, Secretary, Town of Tonawanda, 1000 Englewood Ave., Kenmore, NY 14223
ELMA TOWN OF, Town Clerk, Town Hall, 1600 Bowen Rd., Elma, NY 14059
ERIE COUNTY WATER AUTHORITY, Central Processing, 3030 Union Rd., Buffalo, NY 14227
EVANS TOWN OF, Town Clerk, 42 N. Main St., Angola, NY 14006
FARNHAM VILLAGE OF, Village Clerk-Treasurer, 526 Commercial St., Farnham, NY 14061
FORKS FIRE DISTRICT #3, Commissioner, Town Cheektowaga, 3330 Broadway, Cheektowaga, NY 14227
GOWANDA VILLAGE OF, Clerk/Treasurer, 27 East Main St., Gowanda, NY 14070
GRAND ISLAND CENTRAL SCHOOL DISTRICT, District Clerk, 1100 Ransom Rd., Grand Island, NY 14072
GRAND ISLAND TOWN OF, Town Clerk, 2255 Baseline Rd., Grand Island, NY 14072
HAMBURG TOWN OF, Town Clerk, S-6100 S. Park Ave., Hamburg, NY 14075
HAMBURG VILLAGE OF, Village Clerk/Treasurer, 100 Main St., Hamburg, NY 14075
HOLLAND FIRE DISTRICT #1, Town of Holland, Holland, NY 14080
HOLLAND TOWN OF, Town Clerk, 47 Pearl St., Holland, NY 14080
HOPEVALE UNION FREE SCHOOL DISTRICT, District Clerk, 3780 Howard Rd., Hamburg, NY 14075
IROQUOIS CENTRAL SCHOOL DISTRICT, Girdle Rd., Elma, NY 14059
KENILWORTH FIRE DISTRICT #2, Commissioner, Tn. Tonawanda, 84 Hawthorne Ave., Buffalo, NY 14223
KENMORE-TN OF TONAWANDA UNION FREE SCHOOL DISTRICT, District Clerk, 1500 Colvin Blvd., Buffalo NY 14223
KENMORE VILLAGE OF, Village Clerk-Treasurer, Municipal Building, Kenmore, NY 14217
LACKAWANNA CITY OF, City Clerk, Lackawanna City Hall, 714 Ridge Rd., Lackawanna, NY 14218
LAKE VIEW FIRE DISTRICT, Fire Commissioner, Lakeview & Burke Roads, Lake View, NY 14085
LANCASTER TOWN OF, Town Clerk, 21 Central Avenue, Lancaster, NY 14086
LANCASTER VILLAGE OF, Clerk-Treasurer, Municipal Building, 5423 Broadway, Lancaster, NY 14086
MARILLA TOWN OF, Marilla Town Hall, 1740 Two Rod Rd., Marilla, NY 14102
NEWSTEAD TOWN OF, Town Clerk, Town Hall, P.O. Box 227, Akron, NY 14001
NIAGARA FRONTIER TRANSPORTATION AUTHORITY, 181 Ellicott St., Buffalo, NY 14205
NORTH COLLINS TOWN OF, Town Clerk 2015 Spruce St., North Collins, NY 14111
NORTH COLLINS VILLAGE OF, Village Clerk, 10543 Main St., North Collins, NY 14111
ORCHARD PARK CENTRAL SCHOOL DISTRICT, Asst. Supt. Bus. & Support Svcs. 3330 Baker Rd., Orchard Park, NY 14127
ORCHARD PARK TOWN OF, Town Clerk, Municipal Bldg., 4295 S. Buffalo St., Orchard Park, NY 14127
ORCHARD PARK VILLAGE OF, Clerk, Municipal Bldg., 4295 S. Buffalo St., Orchard Park, NY 14127
SARDINIA TOWN OF, Town Clerk, Town Hall, Savage Rd., Sardinia, NY 14134
SHERIDAN PARK FIRE DISTRICT NO. 4, Secretary, 738 Sheridan Dr., Tonawanda, NY 14150
SLOAN VILLAGE OF, Clerk Treasurer, 425 Reiman St., Sloan, NY 14212
SNYDER VOL. FIRE DEPT., Fire Commissioner, 4531 Main Street, Snyder, NY 14226
SOUTH LINE FIRE DISTRICT #10, Fire Commissioner, 1049 S. French Rd., S. Cheektowaga, NY 14227
SOUTH WALES FIRE DISTRICT #1, Secretary/Treasurer, P.O.Box 94, South Wales, NY 14139
SPRING BROOK FIRE DISTRICT #1, Secretary, P.O. Box 97, Spring Brook, NY 14140
SPRINGVILLE VILLAGE OF, Clerk Treasurer, Village Office, 5 W. Main St., Springville, NY 14141
SWEET HOME CENTRAL SCHOOL DISTRICT, Director Finance & Plant Svcs., 1901 Sweet Home Rd., Amherst, NY 14228
TONAWANDA CITY OF, Mayor, 200 Niagara St., Tonawanda, NY 14150
TONAWANDA CITY OF, Superintendent, 150 Fillmore Avenue,Tonawanda, NY 14150
TONAWANDA CITY SCHOOL DISTRICT, District Clerk, 100 Hinds St., Tonawanda, NY 14150-1815
TONAWANDA TOWN OF, Town Clerk, Municipal Building, Kenmore, NY 14217
U-CREST FIRE DISTRICT #4, Fire Commissioner, 255 Clover Place, Cheektowaga, NY 14225
UNION FREE SCHOOL DISTRICT, Dist. Clerk, Tn. Tonawanda, 1500 Colvin Blvd., Kenmore, NY 14223
WALDEN FIRE DISTRICT #2, Fire Commissioner, 20 Pine Ridge Road, Cheektowaga, NY 14211
WALES TOWN OF, Town Clerk, Big Tree Rd., Wales Center, NY 14169
WEST SENECA CENTRAL SCHOOL DISTRICT, District Treasurer, 1397 Orchard Park Rd., West Seneca, NY 14224-4098
WEST SENECA FIRE DISTRICT #4, Fire Commissioner, 100 Lein Rd., West Seneca, NY 14224
WEST SENECA FIRE DISTRICT #5, Fire Commissioner, 2801 Seneca St., West Seneca, NY 14224
WEST SENECA TOWN OF, Town Clerk, 1250 Union Road, West Seneca, NY 14224
WILLIAMSVILLE CENTRAL SCHOOL DISTRICT, District Clerk, 105 Casey Rd, PO Box 5000, East Amherst NY 14051
WILLIAMSVILLE VILLAGE OF, 5565 Main St., Williamsville, NY 14231-1557
WYOMING, COUNTY OF, Office of the Board of Supervisors, 143 N Main St., Warsaw, NY 14569

REV. 7/09

BID WILL NOT BE CONSIDERED IF THIS FORM IS NOT SUBMITTED WITH BID AS REQUIRED, REGARDLESS OF THE BID AMOUNT.

BID NO.: _____
BID DATE: _____

ERIE COUNTY MINORITY/ WOMEN BUSINESS ENTERPRISE UTILIZATION REPORT - PART A

COMPANY: NGT - Cowerul
AUTHORIZED REPRESENTATIVE:
ADDRESS: _____
TELEPHONE NUMBER: (__)_
BID NAME:

I. List actions taken to identify, solicit, and contact Minority Business Enterprises (MBE)/Women Business Enterprises (WBE) to bid on subcontracts for this project.

1.
2.
3.
4.
5.
6.

II. List all bona fide Minority/Women Business Enterprise subcontractors and suppliers solicited, contracted, or presently negotiating a contract in accordance with the minority business utilization goal set forth by the County of Erie. (Attach additional sheets if necessary.)

MBE/WBE OWNED FIRMS	SUPPLY/SERVICE	AMOUNT OF PROPOSAL	PRIOR CERTIFICATION	CONTRACT EXECUTED	REASON IF CONTRACT NOT AWARDED
Name: _____ Address: _____ _____ Telephone No. _____ IRS # _____				YES _____ NO _____	
Name: _____ Address: _____ _____ Telephone No. _____ IRS # _____				YES _____ NO _____	

WAIVER RECOMMENDATION

COMPANY: x Coverall Service Company

ADDRESS: x 135 Lawrence Bell Dr Suite 122 Williamsville 14221

TELEPHONE NUMBER: (x 716) 635-0987 BID NO _____

1. Vendor has made a good faith effort to subcontract on this bid for which minority/women's business enterprises bids could be solicited; and

2. The total percentage of the bid which could be subcontracted for which minority business enterprises bids could be solicited is less than 10% for MBEs and/or 2% WBEs.

A waiver as provided for by Erie County Local Law, is hereby requested on the grounds that there are no/insufficient (circle the appropriate term) minority/women's business enterprises in the market area of this bid.

1. _____ 6. _____

2. _____ 7. _____

3. _____ 8. _____

4. _____ 9. _____

5. _____ 10. _____

(Use additional sheets if necessary.)

If a partial waiver is granted, the Vendor will make a good faith effort to meet the reduced goal.

2-20-14

DATE

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE

Granted in Whole: _____

Granted in Part: _____

Comments:
NGT Coverall is a Franchise Company. While we (Coverall) do not qualify as MBE / WBE, many of our Franchise owners may, but cannot guarantee

DIRECTOR OF E.E.O.

DATE

(01/09)

NGTCO-4 OP ID: SK

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/24/14

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).

PRODUCER
Exchange Underwriters, Inc.
121 West Pike Street
Canonsburg, PA 15317
Susan L. Kernan
Phone: 724-745-1600
Fax: 724-745-0224

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Peerless Insurance Co.	24198
INSURER B : Wesco Insurance Company	25011
INSURER C : Liberty Mutual Ins. Company	23043
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Coverall Service Company
165 Lawrence Bell Dr., S#122
Williamsville, NY 14221

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Care, Custody or Control GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC	X	X	CBP9699801 LIMIT $1,000,000	02/01/14	02/01/15	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ $ $ $ $ $	1,000,000 300,000 15,000 1,000,000 2,000,000 2,000,000
A	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS	X		BA9692100	02/01/14	02/01/15	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $	1,000,000
A	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION $ 10000			CU9699101	02/01/14	02/01/15	EACH OCCURRENCE AGGREGATE	$ $	5,000,000 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	X	WWC3076449	12/31/13	12/31/14	X WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $	500,000 500,000 500,000
C	Third Party Bond			5021592	06/01/13	06/01/14	Limit		100,000

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

ORIGINAL
APR - 4 2014
IN LAW DEPARTMENT

CERTIFICATE HOLDER

County of Erie
95 Franklin Street
Buffalo, NY 14202

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
Susan L. Kernan

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NOTEPAD:

HOLDER CODE

INSURED'S NAME Coverall Service Company

NGTCO-4

OP ID: SK

DATE 03/24/14

Certificate holder is named as additional insured as respects to General Liability and Automobile Liability re: Coverall billed contracts only. Participating franchisees are covered for General Liability, Workers' Compensation and Bond. Insureds General Liability insurance is primary and non-contributory to additional insured's insurance. Waiver of subrogation in favor of certificate holder re: General Liability and Workers' Compensation where required by contract. Umbrella policy is follow form.

STATE OF NEW YORK
WORKER'S COMPENSATION BOARD

CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

1a. Legal Name and address of Insured (Use street address only) NGT Corp. 8965 Guilford Road Suite 100 Columbia, MD 21046 **DBA:** Coverall Service Co. Work Location of Insured *(Only required if coverage is specifically limited to certain location in New York State, i.e. a Wrap-Up Policy)*	**1b. Business Telephone Number of Insured** 410-964-1515 **1c. NYS Unemployment Insurance Employer Registration Number of Insured** 521663895 **1d. Federal Employer Indentification Number of Insured or Social Security Number** 521663895
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) County of Erie 95 Franklin Street Buffalo, NY 14202 ORIGINAL MAR 1 7 2014 IN LAW DEPARTMENT	**3a.Name of Insurance Carrier** Wesco Insurance Company **3b. Policy Number of entity listed in box "1a":** WWC3076449 **3c. Policy effective period:** 12/31/2013 to 12/31/2014 **3d. The Proprietor, Partners or Executive Officers are:** ☑ **included** (Only check box if all partners/officers included) ☐ **all excluded or certain partners/officers excluded**

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. (To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy). The Insurance Carrier or its licensed agent will send this Certification of Insurance to the entity listed above as the certificate holder in box "2".

The Insurance Carrier will also notify the above certificate holder within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.

Please Note: Upon the cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved By: Henry C. Sibley
(Print name of authorized representative or licensed agent of insurance carrier)

Approved By: Henry C Sibley 3/6/2014
(Signature) (Date)

Title: Underwriting Manager

Telephone Number of authorized representative or licensed agent of insurance carrier: CarrierPhone

Please Note: Only insurance carriers and their licensed agents are authorized to issue the C-105.2 form . Insurance brokers are NOT authorized to issue it.

C-105.2 (9-07)

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.

2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

C-105.2 (9-07) Reverse