Borough of Closter

295 Closter Dock Road, Closter, NJ 07624
201-784-0600 x 492
www.closternj.us

Request for Quote
For
EXCAVATION of BAMBOO
and
INSTALLATION of BARRIER

The Borough of Closter is seeking quotes for the excavation of bamboo (phyllostachys aureosulcata, "yellow groove"), and installation of high density polyethylene barriers to prevent future growth on property bordering near and on the MacBain Farm located at 203 Hickory Lane, Closter, NJ.

Scope of work includes the excavation of bamboo, installation of high density polyethylene barriers (HDPE 30x60 mil), disposal of debris and the regrading of properties raked flat and clean. Properties will be identified by the Borough of Closter. Guarantee of removal to include a follow up one year after initial removal, inspection and removal of any remaining sprouts, culms, and/or rhizomes.

The request for quote includes excavation, removal of bamboo, disposal of debris and installation of HDPE barrier at 42 McCain Ct., 32 McCain Ct., Closter, NJ and installation of high density polyethylene barrier at border property – Closter's MacBain Farm, 203 Hickory Lane, Closter, NJ.

Contractors must provide a written quote and include a NJ Business Registration Certificate, W-9, current Certificate of Insurance and Hold Harmless Agreement. (sample forms and HHA are attached)

Written Quotes must be sent to: Edward Hynes, Borough Administrator/Treasurer
Borough of Closter
295 Closter Dock Road
Closter, NJ 07624
Email: ehynes@closternj.us

Quotes are requested on or before July 21, 2021.

EH:lw
07 01 21

CONTRACTOR

<u>HOLD HARMLESS AGREEMENT</u>

Between the Borough of Closter

And

_____agrees that it will defend, indemnify
And save Harmless the Borough of Closter, Closter, New Jersey, its Officers,
Agents and Employees from any and all liability, suits, actions, and demands and
all Damages, costs or fees on account of injuries to persons or property, including
accidental Death, arising out of or in connection with the work, or by reason of the
operations under this Agreement.

Signed this _____day of _____, 20____ as the Binding Act in Deed.

_____

Company or Business Name

                                         _____

                                         Authorized Signature/Title

                                         _____

                                         Print Name of Signature listed above

_____

Witness

6/1/21

ACORD® CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/01/2020

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 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		
ABC INSURANCE COMPANY. ABC ADDRESS (SAMPLE) ABC CITY, STATE, ZIP CODE	**CONTACT NAME:** ABC PERSON	
	PHONE (A/C, No, Ext): XXX-XXX-XXXX	**FAX (A/C, No):** XXX-XXX-XXXX
	E-MAIL ADDRESS: ABCCOMPANY@........com	

	INSURER(S) AFFORDING COVERAGE	**NAIC #**
INSURER A :	Maxum Indemnity Company	26743
INSURER B :	Endurance American Specialty	436130
INSURER C :	Endurance American Specialty	436130
INSURER D :		
INSURER E :		
INSURER F :		

INSURED
ABC Corp.
ABC Avenue (SAMPLE)
Abc City, State, Zip Code

COVERAGES CERTIFICATE NUMBER: 363 REVISION NUMBER: 1

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	[X] COMMERCIAL GENERAL LIABILITY [X] CLAIMS-MADE [ ] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PROJECT [ ] LOC [ ] OTHER:	Y	Y	BDG-3015529-03	01/01/2021	12/31/2021	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
B	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [X] NON-OWNED AUTOS	Y	Y	BJE983265287	01/01/2021	12/31/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 3,000,000
							BODILY INJURY (Per person)	$ 500,000
							BODILY INJURY (Per accident)	$ 1,000,000
							PROPERTY DAMAGE (Per accident)	$ 100,000
								$
C	[X] UMBRELLA LIAB [ ] OCCUR [X] EXCESS LIAB [X] CLAIMS-MADE [ ] DED [ ] RETENTION $	Y	Y	ELD10006576635	01/01/2021	12/31/2021	EACH OCCURRENCE	$ 5,000,000
							AGGREGATE	$ 5,000,000
								$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED? [N] Y/N N/A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						[X] PER STATUTE [ ] OTHER	
							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)

The Borough of Closter NJ is named as additional insured per written contract. Coverage is primary and not contributory with any other insurance carried by the additional insured. Completed Operations and Blanket Additional Insured Endorsements to apply.

(SAMPLE)

CERTIFICATE HOLDER	CANCELLATION
Borough of Closter New Jersey 295 Closter Dock Road Closter, NJ 07624	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** John Q Agent

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