



Renewal No. 1 for Contract # 20200460

City of Springfield Blanket Contract Tracer Log

INSTRUCTIONS: Upon receipt, please initial and write in the date of receipt on this Tracer form. When your department has approved and signed the blanket contract, please initial and date in the forwarding section and deliver to the next department.

DEPARTMENT	DATE RECEIVED		DATE FORWARDED TO NEXT DEPT.	
	Initials	Date	Initials	Date
Office of Procurement			KV	03/02/2021
Housing	KB	3/15/2021	KB	3/15/2021
City Comptroller	MM	3/15/21	MM	3/15/21
Law	FF	3/16	FF	3/16
CAFO	MM	3/17/21	MM	3/18/21
Mayor	MM	3/18/21	MM	3/18/21
Office of Procurement	SD	3/19/21		

Vendor No.: 17616	Contract No. 20200460	Blanket Contract Date: 11/04/19
Renewal Amount: \$100,000.00		
Blanket Renewal Date: 08/01/2020		
Blanket Contract Expiration Date: 11/30/2022		
Req No.:	Act No.:	
Bid No.: 20-054		
Vendor Name: EMERALD INVESTMENTS LTD		
Blanket Contract Purpose: Renewal of Price Agreement for On-Call Service Contract for Lead Abatements Environmental Services		
Requesting Dept.: Housing		
TYPE OF DOCUMENT (Please select at least one):		
<input type="checkbox"/> New	<input type="checkbox"/> Amendment	<input type="checkbox"/> Extension
		<input checked="" type="checkbox"/> Renewal

NOTICE OF EXERCISE OF RENEWAL OPTION NO. 1; CITY CONTRACT NO. 20200460

ON-CALL SERVICE CONTRACT FOR LEAD ABATEMENT ENVIRONMENTAL SERVICES

WHEREAS, on or about November 4, 2020, the CITY OF SPRINGFIELD, a municipal corporation within the County of Hampden, Commonwealth of Massachusetts, with its principal offices at 36 Court Street, Springfield, Massachusetts 01103, acting by and through the Director of Housing and Neighborhood Services and Disaster Recovery and Compliance, (hereafter referred to as "HOUSING"), with the approval of the Mayor (collectively referred to herein as the "City"), and Emerald Lead Testing Inc., a Massachusetts Company, with a mailing address located at 41 Cleveland Street, Springfield, MA, 01104 (hereinafter the "Contractor"), entered into a contract for On-Call Lead Abatement Environmental Services, referred to as City Contract No. 20200460, (hereinafter the "Agreement"); and

WHEREAS, The City has ratified and executed Contract No. 20200460, a one year agreement, referring to Bid No. 20-054, which expires on November 3, 2020, and which contained Two (2) one-year in length renewal options, to be exercised at the sole discretion of the City of Springfield; and

WHEREAS, The Springfield HOUSING now seeks to exercise Renewal Option No. 1 to continue the services covered in the agreement, for the amount specified in the original agreement and unchanged by this renewal notice; and

NOW THEREFORE, the City and the Contractor agree to renew the Agreement under the following terms and conditions:

1. **Exercising of Renewal Option No.1**. The Springfield HOUSING hereby exercises Renewal Option No.1, a one-year in length renewal period, available under the underlying agreement. In doing so, the agreement now has an updated expiration date of **November 3, 2021**. Both parties accept that this is the first of two Renewal Options, available to the City, under the Agreement.
2. **Section (VII) Compensation**. The amount of the services for the first renewal period (One Year) is estimated not to exceed **One Hundred Thousand Dollars and 00/100 (\$100,000.00)** including all reimbursable fees and expenses.
3. Except as specifically stated by the provisions of this Renewal, all other terms, provisions, scope, requirements, and specifications contained in the Agreement shall remain the same and in full force and effect for the duration of the Renewal Period.

SIGNATURE PAGE TO FOLLOW

IN WITNESS WHEREOF, the CITY OF SPRINGFIELD, and Emerald Lead Testing Inc. has caused this Renewal Option No. 1 to be executed in duplicate under seal as of the date the document is executed by all parties listed on the signature page, or their lawful successors in office.

FOR THE CONTRACTOR,
Emerald Lead Testing Inc.

By: David A Burgess
Name: DAVID A Burgess
Title: President
Date: 2/17/21

FOR THE CITY OF SPRINGFIELD:

Approved:
[Signature]
Disaster & Recovery Compliance
Date signed: 3/15/21

Approved:
[Signature]
Executive Director of Housing
Date signed: 3/12/2021

Approved:
[Signature]
Office of Procurement
Date Signed 3/2/21

^{N/A}
Approved as to Appropriation:
[Signature]
City Comptroller
Date Signed 3-15-2021

Approved as to Form:
[Signature]
City Solicitor
Date Signed 3-15

Approved:
[Signature]
CAFO
Date Signed 3/18/21

Approved:
[Signature]
DOMENIC J. SARNO
MAYOR
Date Signed 3/18/21



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/17/2021

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 Webber & Grinnell 8 North King Street Northampton MA 01060		CONTACT NAME: Brenda Klaus PHONE (A/C, No, Ext): [REDACTED] FAX (A/C, No): [REDACTED] E-MAIL ADDRESS: [REDACTED]	
INSURED Emerald Lead Testing Co. Attn: David Burgess 41 Cleveland Street Springfield MA 01104		INSURER(S) AFFORDING COVERAGE INSURER A: XS Brokers Insurance Agency INSURER B: Safety Indemnity INSURER C: WCAR- Atlantic Charter INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: [REDACTED]

REVISION NUMBER:

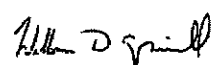
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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	ADD'L SUBR INSD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			EPK129584	12/31/2020	12/31/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			5912046	12/15/2020	12/15/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist (BI) \$ 100,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WCV01495000	05/11/2020	06/22/2020	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

City of Springfield is listed as additional insured with respect to liability as per the terms and conditions of the policies.

CERTIFICATE HOLDER**CANCELLATION**

City of Springfield Office of Procurement 38 Court St, Room 307 Springfield MA 01103	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 
---	--

TO BE INCLUDED IN ALL SPECIFICATIONS

COMPLIANCE WITH FEDERAL, COMMONWEALTH OF MASSACHUSETTS, AND CITY OF SPRINGFIELD TAX LAWS.

A. COMPLIANCE WITH TAX LAWS

The contractor must be in compliance at the time it submits its bid and afterwards if selected as the contractor, with all Federal, Commonwealth of Massachusetts and City of Springfield tax laws, the contractor will be disqualified from the bidding procedure.

B. TAX CERTIFICATION AFFIDAVIT.

The contractor must complete and return the Tax Certification Affidavit with the contractor's bid/proposal. Failure to complete and return the Tax Certification Affidavit will disqualify the contractor from the bidding procedure.

C. VERIFICATION OF COMPLIANCE WITH FEDERAL AND MASSACHUSETTS TAX LAWS.

If the City of Springfield discovers that the contractor is not in compliance with Federal or Massachusetts tax laws, the contractor shall be excluded from the bidding procedure.

D. COMPLIANCE WITH THE CITY OF SPRINGFIELD TAXES.

If the City of Springfield discovers that the contractor owes the City of Springfield any assessments, excise, property or other taxes, including any penalties and interest thereon, the contractor shall be excluded from the bidding procedure.

The contractor at all times during the term of an awarded contract shall observe and abide by all Federal, Commonwealth of Massachusetts and City of Springfield tax laws and remain in compliance with such laws, all as amended.

TAX CERTIFICATION AFFIDAVIT FOR CONTRACTS

Individual Social Security Number

State Identification Number

Federal Identification Number

Pursuant to M.G.L. Ch. 62C § 49A:

Company:

Emerald Lead Testing, Inc

P.O. Box (if any):

Street Address Only: 41 Cleveland St

City/State/Zip Code:

Springfield MA 01104

Telephone Number:

Fax Number: _____

List address(es) of all other property owned by company in Springfield: _____

Please identify if the bidder/proposer/contractor is a:

Corporation

Individual

Name of Individual: _____

Partnership

Names of all Partners: _____

Limited Liability Company

Names of all Managers: _____

Limited Liability Partnership

Names of all Partners: _____

Limited Partnership

Names of all General Partners: _____

You must complete the following certification and have the signature(s) notarized on the lines below.

TAX CERTIFICATION

Emerald Lead Testing, Inc

I, DAVID A BURGESS certify under the pains and penalties of perjury that _____, to my best
(Authorized Agent) (Bidder/Proposer/Contractor)

knowledge and belief, has/have complied with all United States Federal, Commonwealth of Massachusetts, and City of Springfield taxes required by law, as applicable.

Notary Public

STATE OF Massachusetts

2/17/21 2020

County of Hampden, ss.

Then personally appeared before me [name] David A. Burgess [title] President of [company name] Emerald Lead Testing, being duly sworn, and made oath that he/she has read the foregoing document, and knows the contents thereof, and that the facts stated therein are true of his/her own knowledge, and stated the foregoing to be his/her free act and deed and the free act and deed of [company name] Emerald Lead Testing.

Notary Public

EILEEN B. MANLEY
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
October 3, 2025

My commission expires: _____

YOU MUST FILL THIS FORM OUT COMPLETELY AND, SIGNATURES MUST BE NOTARIZED ON THIS FORM AND YOU MUST FILE THIS FORM WITH YOUR BID/CONTRACT. TAX AFFIDAVITS THAT ARE NOT SIGNED AND NOTARIZED WILL BE REJECTED.