



Town of Salisbury
Department of Public Works
39 Lafayette Road
Salisbury, MA 01952
978-465-1430

Request for Quotation – RFQ-01 Council on Aging Roof Replacement

1. GENERAL CONDITIONS

- a. The Town of Salisbury is requesting quotes to replace the existing roof of the Council on Aging building. The objective of this project is to strip the existing roof, repair water or rot damage and replace with a new roof that includes ice and water shields to stop current leaks. Quotations shall be based on the specifications provided. However, some deviations shall be accepted if it is in the best interest of the Town. All deviations should be called out in writing and explained in details with the specifications.
- b. Vendors should fully examine the roof and specifications before submitting the request for quotes. Failure to visit the site shall disqualify the contractor's quotation.
- c. Contractor shall submit at least three references from jobs that were similar in size and scope.
- d. All debris resulting from the work herein shall be removed from the roof and property and disposed of by the Contractor.
- e. Contractor must take all necessary precautions to protect the existing roof membrane from damages during repairs. All damages caused by the contractor or their employees shall be repaired at no cost to the Town.
- f. The Town of Salisbury reserves the right to reject any and all quotations if it is in the best interest of the Town.
- g. All questions must be submitted in writing to pubworks@salisburyma.gov or dropped off to the Department of Public Works by August 23rd, 2021.
- h. **MANDATORY** site visits will be held on August 17th, 2021 from 12:00pm until 3:00pm. For questions, please contact Liz Pettis at 978-462-2412.

2. INSURANCE REQUIREMENTS

The Contractor shall be responsible to the Town or any third party for any property damage or bodily injury caused by it, any of its subcontractors, employees or agents in the performance of, or as a result of, the work under this Agreement. The Contractor and any subcontractors used hereby certify that they are insured for workers' compensation, property damage, personal and product liability. The Contractor and any subcontractor it uses shall purchase, furnish copies of, and maintain in full force and effect insurance policies, listing the Town of Salisbury as an addition insured, in the amounts here indicated.

General Liability

Bodily Injury Liability:	\$1,000,000 per occurrence
Property Damage Liability	\$ 500,000 per occurrence
(or combined single limit)	\$3,000,000 per occurrence

Automobile Liability

Bodily Injury Liability:	\$1,000,000 per occurrence
Property Damage Liability	\$ 500,000 per occurrence
(or combined single limit)	\$1,000,000 per occurrence

Workers' Compensation Insurance

Coverage for all employees in accordance with Massachusetts General Laws

Professional Liability Insurance

Minimum Coverage	\$1,000,000 per occurrence
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July 16, 2021

Price Quote Solicitations

Senior Center Roof Replacement

RFQs due 8/30/2021 at 2:00 PM

Specifications

- Strip existing roof on the entire main building (not including the recent addition) down to the roof deck
- Install Architect 30 Year shingles (Color TBD) per manufacturer warranty and building code
- Install an 8-inch drip edge on all leading edges (rakes & fascia)
- Install 2 courses of ice and water shield on all leading edges and valleys
- Install new vent pipe flanges
- Check all exposed decking for mold penetration, rotted wood or other defects
- Replace any rotted or damaged decking or ledger board
- Install new ridge vent system

Additional Specifications

- Contractor is responsible for the removal of all debris from site and must note where they are being hauled to
- Contract must apply for building permit to complete work (fee waived by Town)
- All debris and other construction material must be covered or contained when not working on site

Conditions

Prevailing wage and OSHA certification apply to this project.

TOTAL COST: _____ INCLUDING ALL MATERIAL, EQUIPMENT,
AND LABOR

COMPLETION TIME: _____ DAYS AFTER NOTICE TO PROCEED (NOT TO EXCEED 60 DAYS)

CONTRACTOR'S LEGAL NAME

CONTACT PERSON:

PHONE: _____

E-MAIL: _____

SIGNATURE: _____ DATE: _____