#### SERVICE PROVIDER AGREEMENT

This SERVICE PROVIDER AGREEMENT ("Agreement") is entered into	this da	ıy
of, 20 ("Effective Date"), by and between the CITY OF ALAMEDA	, a municip	al
corporation ("the City"), and ROJAS FLORES LANDSCAPE, INC., a California	a corporation	n,
whose address is 1096 Fleming Avenue, San Jose CA 95127 ("Provider"), in re-	ference to the	ıe
following facts and circumstances:		

#### RECITALS

- A. The City is a municipal corporation duly organized and validly existing under the laws of the State of California with the power to carry on its business as it is now being conducted under the statutes of the State of California and the Charter of the City.
- B. The City is in need of the following services: Landscape Maintenance Services, Various Locations PW 06-22-19. City staff issued a Request for Bid on October 27, 2022 and after a submittal period of 14 days received TWO (2) of timely submitted proposals. Staff reviewed the proposals, interviewed qualified firms and selected the service provider that best meets the City's needs
- C. Provider possesses the skill, experience, ability, background, certification and knowledge to provide the services described in this Agreement on the terms and conditions described herein.
- D. Whereas, the City Council authorized the City Manager to execute this agreement on
- E. The City and Provider desire to enter into an agreement for Landscape Maintenance Services, Various Locations PW 06-22-19, upon the terms and conditions herein.

#### **AGREEMENT**

NOW, THEREFORE, in consideration of the forgoing, which are incorporated herein by reference, and for good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, the City and Provider agree as follows:

#### 1. TERM:

The term of this Agreement shall commence on the <u>1</u> day of <u>January 2023</u>, and shall terminate on the <u>31</u> day of <u>December 2027</u>, unless terminated earlier as set forth herein.

#### 2. SERVICES TO BE PERFORMED:

Provider agrees to do all necessary work at its own cost and expense, to furnish all labor, tools, equipment, materials, except as otherwise specified, and to do all necessary work included in <a href="Exhibit A">Exhibit A</a> as requested. Provider acknowledges that the work plan included in <a href="Exhibit A">Exhibit A</a> is tentative and does not commit the City to request Provider to perform all tasks included therein.

#### 3. COMPENSATION TO PROVIDER:

- a. By the 7<sup>th</sup> day of each month, Provider shall submit to the City an invoice for the total amount of work done the previous month. Pricing and accounting of charges are to be according to the fee schedule as set forth in <u>Exhibit B</u> and incorporated herein by this reference. Extra work must be approved in writing by the City Manager or their designee prior to performance and shall be paid on a Time and Material basis as set forth in <u>Exhibit B</u>. Payment will be made in the same manner that claims of a like character are paid by the City, with checks drawn on the treasury of said City from CIP fund C17000.
- b. The total five-year compensation for this Agreement shall not exceed \$825,369. This amount includes the 10% contingency and with an annual 3% escalation.

FY 2023 total compensation shall not exceed \$97,185

FY 2024 total compensation shall not exceed \$200,201

FY 2025 total compensation shall not exceed \$206,207

FY 2026 total compensation shall not exceed \$212,393

FY 2027 total compensation shall not exceed \$109,383

Use of contingency shall be for items of work outside the original scope and requires prior written authorization by the City.

#### 4. <u>TIME IS OF THE ESSENCE</u>:

Provider and the City agree that time is of the essence regarding the performance of this Agreement.

#### 5. **STANDARD OF CARE:**

Provider agrees to perform all services hereunder in a manner commensurate with the prevailing standards of like professionals or service providers, as applicable, in the San Francisco Bay Area and agrees that all services shall be performed by qualified and experienced personnel who are not employed by the City.

#### 6. <u>INDEPENDENT PARTIES</u>:

Provider hereby declares that Provider is engaged as an independent business and Provider agrees to perform the services as an independent contractor. The manner and means of conducting the services and tasks are under the control of Provider except to the extent they are limited by statute, rule or regulation and the express terms of this Agreement. No civil service status or other right of employment will be acquired by virtue of Provider's services. None of the benefits provided by the City to its employees, including but not limited to unemployment insurance, workers' compensation plans, vacation and sick leave, are available from the City to Provider, its

employees or agents. Deductions shall not be made for any state or federal taxes, FICA payments, PERS payments, or other purposes normally associated with an employer-employee relationship from any compensation due to Provider. Payments of the above items, if required, are the responsibility of Provider.

#### 7. IMMIGRATION REFORM AND CONTROL ACT (IRCA):

Provider assumes any and all responsibility for verifying the identity and employment authorization of all of its employees performing work hereunder, pursuant to all applicable IRCA or other federal, or state rules and regulations. Provider shall indemnify, defend, and hold the City harmless from and against any loss, damage, liability, costs or expenses arising from any noncompliance of this provision by Provider.

#### 8. <u>NON-DISCRIMINATION</u>:

Consistent with the City's policy and state and federal law that harassment and discrimination are unacceptable conduct, Provider and its employees, contractors, and agents shall not harass or discriminate against any job applicant, City employee, or any other person on the basis of any kind of any statutorily (federal, state or local) protected class, including but not limited to: race, religious creed, color, national origin, ancestry, disability (both mental and physical) including HIV and AIDS, medical condition (e.g. cancer), genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, pregnancy, political affiliation, military and veteran status or legitimate union activities. Provider agrees that any violation of this provision shall constitute a material breach of this Agreement.

#### 9. HOLD HARMLESS:

- a. To the fullest extent permitted by law, Provider shall indemnify, defend (with counsel acceptable to the City) and hold harmless the City, its City Council, boards, commissions, officials, employees, agents and volunteers ("Indemnitees") from and against any and all loss, damages, liability, obligations, claims, suits, judgments, costs and expenses whatsoever, including reasonable attorney's fees and costs of litigation ("Claims"), arising from or in any manner connected to Provider's performance of its obligations under this Agreement or out of the operations conducted by Provider even if the City is found to have been negligent. If the Claims filed against Indemnitees allege negligence, recklessness or willful misconduct on the part of Provider, Provider shall have no right of reimbursement against Indemnitees for the costs of defense even if negligence, recklessness or willful misconduct is not found on the part of Provider. Provider shall not have any obligations to indemnify Indemnitees if the loss or damage is found to have resulted solely from the negligence or the willful misconduct of the City. The defense and indemnification obligations of this Agreement are undertaken in addition to, and shall not in any way be limited by, the insurance obligations contained in this Agreement.
- b. As to Claims for professional liability only, Provider's obligation to defend Indemnitees (as set forth above) is limited as provided in California Civil Code Section 2782.8.
- c. Provider's obligation to indemnify, defend and hold harmless Indemnities shall expressly survive the expiration or early termination of this Agreement.

#### 10. INSURANCE:

a. On or before the commencement of the terms of this Agreement, Provider shall furnish the City's Risk Manager with certificates showing the type, amount, class of operations covered, effective dates and dates of expiration of insurance coverage in compliance with Sections 10.b. (1) through (5) Such certificates, which do not limit Provider's indemnification, shall also contain substantially the following statement:

"Should any of the above insurance covered by this certificate be canceled or coverage reduced before the expiration date thereof, the insurer affording coverage shall provide thirty (30) days' advance written notice to the City of Alameda. Attention: Risk Manager."

Provider shall maintain in force at all times during the performance of this Agreement all appropriate coverage of insurance required by this Agreement with an insurance company licensed to offer insurance business in the State of California with a current A.M. Best's rating of no less than A:VII or Standard & Poor's Rating (if rated) of at least BBB unless otherwise acceptable to the City. Provider shall deliver updated insurance certificates to the City at the address described in Section 17.f. prior to the expiration of the existing insurance certificate for the duration of the term of Agreement. Endorsements naming the City, its City Council, boards, commissions, officials, employees, agents, and volunteers as additional insured shall be submitted with the insurance certificates.

Provider Initials

#### b. COVERAGE REQUIREMENTS:

Provider shall maintain insurance coverage and limits at least as broad as:

(1) Workers' Compensation:

Statutory coverage as required by the State of California.

(2) Liability:

Commercial general liability coverage in the following minimum limits:

Bodily Injury: \$1,000,000 each occurrence

\$2,000,000 aggregate - all other

Property Damage: \$1,000,000 each occurrence

\$2,000,000 aggregate

If submitted, combined single limit policy with per occurrence limits in the amounts of \$2,000,000 and aggregate limits in the amounts of \$4,000,000 will be considered equivalent to the required minimum limits shown above. Additional Insured Endorsement naming the City, its City Council, boards, commissions, officials, employees, agents, and volunteers is required.

#### (3) Automotive:

Comprehensive automobile liability coverage (any auto) in the following minimum limits:

Bodily injury: \$1,000,000 each occurrence Property Damage: \$1,000,000 each occurrence

or

Combined Single Limit: \$2,000,000 each occurrence

Additional Insured Endorsement naming the City, its City Council, boards, commissions, officials, employees, agents, and volunteers is required.

As to commercial general liability and automobile liability insurance, such insurance will provide that it constitutes primary insurance with respect to claims insured by such policy, and, except with respect to limits, that insurance applies separately to each insured against whom claim is made or suit is brought. Such insurance is not additional to or contributing with any other insurance carried by or for the benefit of the City.

#### c. SUBROGATION WAIVER:

Provider hereby agrees to waive rights of subrogation that any insurer of Provider may acquire from Provider by virtue of the payment of any loss. Provider agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether the City has received a waiver of subrogation endorsement from the insurer. The Workers' Compensation policy shall be endorsed with a waiver of subrogation in favor of the City for all work performed by Provider, its employees, agents and subcontractors.

#### d. FAILURE TO SECURE:

If Provider at any time during the term hereof should fail to secure or maintain the foregoing insurance, the City shall be permitted to obtain such insurance in Provider's name or as an agent of Provider and shall be compensated by Provider for the costs of the insurance premiums at the maximum rate permitted by law and computed from the date written notice is received that the premiums have not been paid.

#### e. ADDITIONAL INSUREDS:

The City, its City Council, boards, commissions, officials, employees, agents, and volunteers shall be named as additional insured(s) under all insurance coverages, except workers' compensation and professional liability insurance. The naming of an additional insured shall not affect any recovery to which such additional insured would be entitled under this policy if not named as such additional insured. An additional insured named herein shall not be held liable for any premium, deductible portion of any loss, or expense of any nature on this policy or any extension thereof. Any other insurance held by an additional insured shall not be required to contribute anything toward any loss or expense covered by the insurance provided by this policy. Additional Insured coverage under Provider's policy shall be primary and non-contributory and will not seek contribution from the City's insurance or self-insurance. Any available insurance proceeds broader than or in excess of the specified minimum insurance coverage requirements and/or limits shall be available to the additional insured(s).

#### E. SUFFICIENCY OF INSURANCE:

The insurance limits required by the City are not represented as being sufficient to protect Provider. Provider is advised to consult Provider's insurance broker to determine adequate coverage for Provider. The coverage and limits shall be (1) the minimum coverage and limits specified in this Agreement; or (2) the broader coverage and maximum limits of the coverage carried by or available to Provider; whichever is greater.

#### 11. <u>CONFLICT OF INTEREST</u>:

Provider warrants that it is not a conflict of interest for Provider to perform the services required by this Agreement. Provider may be required to fill out a conflict of interest form if the services provided under this Agreement require Provider to make certain governmental decisions or serve in a staff capacity as defined in Title 2, Division 6, Section 18700 of the California Code of Regulations.

#### 12. PROHIBITION AGAINST TRANSFERS:

- a. Provider shall not assign, sublease, hypothecate, or transfer this Agreement, or any interest therein, directly or indirectly, by operation of law or otherwise, without prior written consent of the City Manager. Provider shall submit a written request for consent to transfer to the City Manager at least thirty (30) days in advance of the desired transfer. The City Manager or their designee may consent or reject such request in their sole and absolute discretion. Any attempt to do so without said consent shall be null and void, and any assignee, sublessee, hypothecate or transferee shall acquire no right or interest by reason of such attempted assignment, hypothecation or transfer. However, claims for money against the City under this Agreement may be assigned by Provider to a bank, trust company or other financial institution without prior written consent.
- b. The sale, assignment, transfer or other disposition of any of the issued and outstanding capital stock, membership interest, partnership interest, or the equivalent, which shall result in changing the control of Provider, shall be construed as an assignment of this Agreement. Control means fifty percent or more of the voting power of Provider.

#### 13. APPROVAL OF SUB-PROVIDERS:

- a. Only those persons and/or businesses whose names and resumés are attached to this Agreement shall be used in the performance of this Agreement. However, if after the start of this Agreement, Provider wishes to use sub-providers, at no additional costs to the City, then Provider shall submit a written request for consent to add sub-providers including the names of the subproviders and the reasons for the request to the City Manager at least five (5) days in advance. The City Manager may consent or reject such requests in their sole and absolute discretion.
- b. Each sub-provider shall be required to furnish proof of workers' compensation insurance and shall also be required to carry general, automobile and professional liability insurance (as applicable) in reasonable conformity to the insurance carried by Provider.
- c. In addition, any tasks or services performed by sub-providers shall be subject to each provision of this Agreement. Provider shall include the following language in their agreement with any sub-provider: "Sub-providers hired by Provider agree to be bound to Provider and the City in the same manner and to the same extent as Provider is bound to the City."

d. The requirements in this Section 13 shall <u>not</u> apply to persons who are merely providing materials, supplies, data or information that Provider then analyzes and incorporates into its work product.

#### 14. PERMITS AND LICENSES:

Provider, at its sole expense, shall obtain and maintain during the term of this Agreement, all appropriate permits, certificates and licenses, including a City business license that may be required in connection with the performance of the services and tasks hereunder.

#### 15. REPORTS:

- a. Each and every report, draft, work product, map, record and other document produced, prepared or caused to be prepared by Provider pursuant to or in connection with this Agreement shall be the exclusive property of the City.
- b. No report, information or other data given to or prepared or assembled by Provider pursuant to this Agreement shall be made available to any individual or organization by Provider without prior approval of the City Manager or their designee.
- Provider shall, at such time and in such form as City Manager or their designee may require, furnish reports concerning the status of services and tasks required under this Agreement.

#### 16. RECORDS:

- a. Provider shall maintain complete and accurate records with respect to the services, tasks, work, documents and data in sufficient detail to permit an evaluation of Provider's performance under the Agreement, as well as maintain books and records related to sales, costs, expenses, receipts and other such information required by the City that relate to the performance of the services and tasks under this Agreement (collectively the "Records").
- b. All Records shall be maintained in accordance with generally accepted accounting principles and shall be clearly identified and readily accessible. Provider shall provide free access to the Records to the representatives of the City or its designees during regular business hours upon reasonable prior notice. The City has the right to examine and audit the Records, and to make copies or transcripts therefrom as necessary, and to allow inspection of all proceedings and activities related to this Agreement. Such Records, together with supporting documents, shall be kept separate from other documents and records and shall be maintained by Provider for a period of three (3) years after receipt of final payment.
- c. If supplemental examination or audit of the Records is necessary due to concerns raised by the City's preliminary examination or audit of records, and the City's supplemental examination or audit of the records discloses a failure to adhere to appropriate internal financial

controls, or other breach of this Agreement or failure to act in good faith, then Provider shall reimburse the City for all reasonable costs and expenses associated with the supplemental examination or audit.

#### 17. NOTICES:

- a. All notices shall be in writing and delivered: (i) by hand; or (ii) sent by registered, express, or certified mail, with return receipt requested or with delivery confirmation requested from the U.S. postal service; or (iii) sent by overnight or same day courier service at the party's respective address listed in this Section.
- b. Each notice shall be deemed to have been received on the earlier to occur of: (x) actual delivery or the date on which delivery is refused; or (y) three (3) days after notice is deposited in the U.S. mail or with a courier service in the manner described above (Sundays and City holidays excepted).
- c. Either party may, at any time, change its notice address (other than to a post office box address) by giving the other party three (3) days prior written notice of the new address.
- d. All notices, demands, requests, or approvals from Provider to the City shall be addressed to the City at:

City of Alameda Public Works Department 950 W. Mall Square, Suite 110 Alameda, CA 94501

ATTENTION: Jesse Barajas, Project Manager

Phone: (510) 747-7900 / Email: jbarajas@alamedaca.gov

e. All notices, demands, requests, or approvals from the City to Provider shall be addressed to Provider at:

Rojas Flores Landscape, Inc. 1096 Fleming Avenue

San Jose CA 95127

ATTENTION: Edgar H. Rojas

Phone: (408) 347-0952 / Email: edgar.h.rojas@rojasfloreslandscape.com

f. All updated insurance certificates from Provider to the City shall be addressed to the City at:

City of Alameda Public Works Department 950 W. Mall Square, Suite 110

Alameda, CA 94501

ATTENTION: Mirna Moreno, Senior Clerk

Phone: (510) 747-7900 / Email: mmoreno@alamedaca.gov

#### 18. SAFETY:

- a. Provider will be solely and completely responsible for conditions of all vehicles owned or operated by Provider, including the safety of all persons and property during performance of the services and tasks under this Agreement. This requirement will apply continuously and not be limited to normal working hours. In addition, Provider will comply with all safety provisions in conformance with U.S. Department of Labor Occupational Safety and Health Act, any equivalent state law, and all other applicable federal, state, county and local laws, ordinances, codes, and any regulations that may be detailed in other parts of the Agreement. Where any of these are in conflict, the more stringent requirements will be followed. Provider's failure to thoroughly familiarize itself with the aforementioned safety provisions will not relieve it from compliance with the obligations and penalties set forth herein.
- b. Provider will immediately notify the City within 24 hours of any incident of death, serious personal injury or substantial property damage that occurs in connection with the performance of this Agreement. Provider will promptly submit to the City a written report of all incidents that occur in connection with this Agreement. This report must include the following information: (i) name and address of injured or deceased person(s); (ii) name and address of Provider's employee(s) involved in the incident; (iii) name and address of Provider's liability insurance carrier; (iv) a detailed description of the incident; and (v) a police report.

#### 19. TERMINATION:

- a. In the event Provider fails or refuses to perform any of the provisions hereof at the time and in the manner required hereunder, Provider shall be deemed in default in the performance of this Agreement. If such default is not cured within two (2) business days after receipt by Provider from the City of written notice of default, specifying the nature of such default and the steps necessary to cure such default, the City may thereafter immediately terminate the Agreement forthwith by giving to Provider written notice thereof.
- b. The foregoing notwithstanding, the City shall have the option, at its sole discretion and without cause, of terminating this Agreement by giving seven (7) days' prior written notice to Provider as provided herein.
- c. Upon termination of this Agreement either for cause or for convenience, each party shall pay to the other party that portion of compensation specified in this Agreement that is earned and unpaid prior to the effective date of termination. The obligation of the parties under this Section 19.c. shall survive the expiration or early termination of this Agreement.

#### 20. ATTORNEYS' FEES AND COSTS:

In the event of any litigation, including administrative proceedings, relating to this Agreement, including but not limited to any action or suit by any party, assignee or beneficiary against any other party, beneficiary or assignee, to enforce, interpret or seek relief from any provision or obligation arising out of this Agreement, the parties and litigants shall bear their own attorney's fees and costs. No party of litigant shall be entitled to recover any attorneys' fees or costs from any other party or litigant, regardless of which party or litigant might prevail.

#### 21. HEALTH AND SAFETY REQUIREMENTS.

Provider acknowledges that the City shall have the right to impose, at the City's sole discretion, requirements that it deems are necessary to protect the health and safety of the City employees, residents, and visitors. Provider agrees to comply with all such requirements, including, but not limited to, mandatory vaccinations, the use of personal protective equipment (e.g. masks), physical distancing, and health screenings. Provider also agrees to make available to the City, at the City's request, records to demonstrate Provider's compliance with this Section. [See Certification of Compliance attached.]

#### 22. COMPLIANCE WITH ALL APPLICABLE LAWS:

During the term of this Agreement, Provider shall keep fully informed of all existing and future state and federal laws and all municipal ordinances and regulations of the City of Alameda which affect the manner in which the services or tasks are to be performed by Provider, as well as all such orders and decrees of bodies or tribunals having any jurisdiction or authority over the same. Provider shall comply with all applicable laws, state and federal and all ordinances, rules and regulations enacted or issued by the City.

#### 23. CONFLICT OF LAW:

This Agreement shall be interpreted under, and enforced by the laws of the State of California without regard to any choice of law rules which may direct the application of laws of another jurisdiction. The Agreement and obligations of the parties are subject to all valid laws, orders, rules, and regulations of the authorities having jurisdiction over this Agreement (or the successors of those authorities). Any suits brought pursuant to this Agreement shall be filed with the courts of the County of Alameda, State of California.

#### 24. WAIVER:

A waiver by the City of any breach of any term, covenant, or condition contained herein shall not be deemed to be a waiver of any subsequent breach of the same or any other term, covenant, or condition contained herein, whether of the same or a different character.

#### 25. <u>INTEGRATED CONTRACT</u>:

Subject to the language of Section 30, the Recitals and exhibits are a material part of this Agreement and are expressly incorporated herein. This Agreement represents the full and complete understanding of every kind or nature whatsoever between the parties hereto, and all preliminary negotiations and agreements of whatsoever kind or nature are merged herein. No verbal agreement or implied covenant shall be held to vary the provisions hereof. Any modification of this Agreement will be effective only by written execution signed by both the City and Provider.

#### 26. CAPTIONS:

The captions in this Agreement are for convenience only, are not a part of the Agreement and in no way affect, limit or amplify the terms or provisions of this Agreement.

#### 27. COUNTERPARTS:

This Agreement may be executed in any number of counterparts (including by fax, PDF, DocuSign, or other electronic means), each of which shall be deemed an original, but all of which shall constitute one and the same instrument.

#### 28. <u>SIGNATORY</u>:

By signing this Agreement, signatory warrants and represents that they executed this Agreement in their authorized capacity and that by their signature on this Agreement, they or the entity upon behalf of which they acted, executed this Agreement.

#### 29. CONTROLLING AGREEMENT:

In the event of a conflict between the terms and conditions of this Agreement (as amended, supplemented, restated or otherwise modified from time to time) and any other terms and conditions wherever contained, including, without limitation, terms and conditions included within exhibits, the terms and conditions of this Agreement shall control and be primary.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

IN WITNESS WHEREOF, the parties have each caused this Agreement to be duly executed on its behalf as of the Effective Date.

ROJAS FLORES LANDSCAPE, INC. a California corporation

Edgar H. Rojas
President/Treasurer

CITY OF ALAMEDA a municipal corporation

Erin Smith Interim City Manager

RECOMMENDED FOR APPROVAL

Docusigned by:

Robert Vance

DF640EE54EFC4CE...

Robert Vance Interim Public Works Director

APPROVED AS TO FORM: City Attorney

DocuSigned by:

Len Aslaman

765D25E39B18464...

Len Aslanian Assistant City Attorney

## Certification of Compliance With the City of Alameda's Vaccination Requirement

The City of Alameda ("City") requires all individuals who perform work for the City to be fully vaccinated against COVID-19. All service providers and contractors for the City must sign the following statement certifying compliance with this requirement.

By signing below, I certify that all of our personnel who are performing work for the City are fully vaccinated against COVID-19. I also acknowledge that the City reserves the right to review any relevant records to demonstrate our compliance with this requirement.

I declare under penalty of perjury that the foregoing is true and correct.

ROJAS FLORES LANDSCAPING, INC.	Date: 11/16/2022
Ed HO	
By: Edgar H. Rojas	
Its President/Treasurer	

<sup>&</sup>lt;sup>1</sup> For the purposes of this Certification of Compliance, an individual is considered to be fully vaccinated if two weeks have passed since their second dose in a 2-dose series (such as the Pfizer or Moderna vaccines) or if two weeks have passed since receiving their single-dose vaccine (such as Johnson & Johnson's Janssen vaccine).



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/30/2022

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.

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	77 Center Court Dr				E-MAIL	ss: certs@kyc	insurance con	(A/C, No):	(202)	12 1071
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	ROJAS FLORES LANDSCAPE INC	,			INSURE					
	1096 Fleming Ave				INSURE					
	1090 Fiching Ave				INSURE					
	San Jose			CA 95127	INSURE					
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	If yes, describe under DESCRIPTION OF OPERATIONS below								s	
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	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI						-	,	0.05.55	12
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POLICY NUMBER: U22AC148283-00

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# PRIMARY AND NONCONTRIBUTORY AND BLANKET WAIVER OF SUBROGATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

## A. PRIMARY AND NON-CONTRIBUTORY TO OTHER INSURANCE

With respect to any person or organization that is an additional insured under this Coverage Part, the following is added to paragraph 4. of SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS:

If you have agreed in writing in a contract or agreement that this insurance is primary and non-contributory relative to an additional insured's own insurance, then this insurance is primary and we will not seek contribution from that other insurance. For the purpose of this endorsement, the additional insured's own insurance means insurance on which the additional insured is a Named Insured.

When this endorsement is attached to the policy it supersedes all other insurance conditions within.

#### B. WAIVER OF SUBROGATION – BLANKET

Under SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS, The Transfer Of Rights Of Recovery Against Others To Us Condition is amended by the addition of the following:

We waive any right of recovery we may have against any person or organization because of payments we make for injury or damage arising out of:

- a. Your ongoing operations; or
- b. "Your work" included in the "productscompleted operations hazard".

However, this waiver applies only when you have agreed in writing to waive such rights of recovery in a contract or agreement, and only if the contract or agreement:

- a. Is in effect or becomes effective during the term of this policy; and
- b. Was executed prior to loss.

POLICY NUMBER: U22AC148283-00

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Any person or organization for whom you are performing operations during the policy period when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy.	
Information required to complete this Schedule, if not shown al	pove, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
  - 1. Your acts or omissions; or
  - The acts or omissions of those acting on your behalf:

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

POLICY NUMBER: U22AC148283-00

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – OWNERS, LESSEES OR **CONTRACTORS – COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **SCHEDULE**

iC

Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "productscompleted operations hazard".

CG 20 37 07 04



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/15/2022

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). CONTACT

	DUCER				NAME:	(400)0	04 4552	F	AX	(408)	261-2513
OR	LANDO NUNES INSURANCE AG	ENC	Y		(A/C, No.	Ext): (408)2	01-1000		A/C, No):	(400)	201 2010
124	6 Homestead Rd Suite 3				ADDRES		@sbcgloba				NAIC #
Sai	nta Clara, CA 95050					INSURER(S) AFFORDING COVERAGE NSURER A: FARMERS INSURANCE					NAUC W
					INSURE	RA: FARME	ERS INSUR	ANCE			
NSU	RED				INSURE	₹В:				-	
	ROJAS FLORES LANDS	CAP	EIN	C	INSURE	RC:					
					INSURE	RD:					
	1096 FLEMING AVE				INSURE	RE:					
	SAN JOSE, CA 95127				INSURE	RF:				-	
co	of D	TIFIC	ATE	NUMBER:				REVISION NUMB	BER:	UE DO	LICY DEDICE
TH	VERAGES  HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	QUIF	CEME	THE INSURANCE AFFOR	DED BY	THE POLICIE	S DESCRIBE PAID CLAIMS	D HEREIN IS SUB	RESPEC	CT TO	WHICH THIS THE TERMS,
NSR		ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)		LIMITS	3	
LTR	TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY	INSD	WVD	- DEIGT HOMBER				EACH OCCURRENCE		S	
								DAMAGE TO RENTER PREMISES (Ea occur	rence)	\$	
	CLAIMS-MADE OCCUR							MED EXP (Any one pe	erson)	\$	
								PERSONAL & ADV IN	JURY	s	
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	POLICY JECT LOC									\$	
	AUTOMOBILE LIABILITY							(Ea accident)	LIMIT	\$	
								BODILY INJURY (Per	person)	\$	
	OWNED SCHEDULED	х	х	606727368		1/16/2022	1/16/2023	BODILY INJURY (Per	accident)	S	1,000,000
Α	AUTOS ONLY AUTOS HIRED NON-OWNED	^	^	000121000				PROPERTY DAMAGE (Per accident)	E	\$	1,000,000
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	DED RETENTION \$ WORKERS COMPENSATION	-	-					PER STATUTE	OTH- ER		
	AND EMPLOYERS' LIABILITY Y / N							E.L. EACH ACCIDEN		s	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	NIA						E.L. DISEASE - EA E		s	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - POLI		\$	
	DESCRIPTION OF OPERATIONS below	-	+					E.E. DIGENGE 1 GE	O' LIMIT		
		1		B 404 A Jahlen - I Downster Coll	adula mar	be attached if me	ore space is requ	ired)			
	SCRIPTION OF OPERATIONS / LOCATIONS / VEHIC										- Aug
C	OMMERCIAL AUTO FOR LANDSO	APE	BU	SINESS. ALL CALIFO	ORNIA F	PROJECTS.	.ADDITION	AL INSURED(S	): CITY	ITS (	CITY
C	OUNCIL,BOARDS,COMMISSIONS	OF	FICIA	ALS.EMPLOYEES, AI	ND VOL	UNTEERS.					
-	OUNCIE, BOANDO, COMMISSIONS	,									
										-	
CI	ERTIFICATE HOLDER				CAN	CELLATION	1				
					QLI	OULD ANY OF	THE ABOVE	DESCRIBED POLICE	CIES BE	CANC	ELLED BEFORE
	CITY OF ALAMEDA				TH	F EXPIRATION	ON DATE T	HEREOF, NOTICE	WILL	BE	DELIVERED IN
	CITY OF ALAMEDA PUBLIC WORKS DEPA	DTA	IENT	r	AC	CORDANCE V	WITH THE POL	JCY PROVISIONS.	)		
							00.	-	_		
1	ALAMEDA POINT, BUI	LDIN	10		AUTH	ORIZED REPRES	PENTANIVE	16 /			

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950 WEST MALL SQUARE, ROOM 110

ALAMEDA, CA.94501-7558

POLICY NUMBER: 606727368

COMMERCIAL AUTO CA 20 48 02 99

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## **DESIGNATED INSURED**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM MOTOR CARRIER COVERAGE FORM TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" under the Who Is An Insured Provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective: 05/22/2020	Countersigned	By:
Named Insured: ROJAS FLORES LANDSCAPE INC	4	(Authorized Representative)
	SCHEDULE	
Name of Person(s) or Organization(s): CITY	OF ALAMEDA ITS CITY	COUNCIL, BOARDS & COM

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to the endorsement.)

Each person or organization shown in the Schedule is an "insured" for Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured Provision contained in Section II of the Coverage Form.

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.



E3153

#### CHANGES IN TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective: 05/22/2020	Counters	igned By:
Named Insured: ROJAS FLORES LANDSCAPE INC		(Authorized Representative)
SC	CHEDULE	
Name Of Person(s) Or Organization(s): CITY OF ALAMEDA ITS CITY COUNCIL ,BOARDS & COM		
Additional Pro	emium \$	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

The Transfer Of Rights Of Recovery Against Others To Us Condition does not apply to the person(s) or organization(s) shown in the Schedule. We will retain the additional premium shown above, regardless of any early termination of this endorsement or the policy.

This endorsement is part of your policy. It supersedes and controls anything to the contrary. It is otherwise subject to all the terms of the policy.



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/30/2022

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.

112111201			ZEITTII TOTTIE TIOEDETTI						
If SUBRO	ANT: If the certificate holder DGATION IS WAIVED, subject ficate does not confer rights t	t to the te	erms and conditions of the	he polic ich end	cy, certain p orsement(s)	olicies may			
PRODUCER				CONTAC NAME:	CT Automati	ic Data Proce	ssing Insurance Agency,	Inc.	
Automatic D	Oata Processing Insurance Ager		PHONE (A/C, No E-MAIL ADDRES	, Ext):	524-7024	FAX (A/C, No):			
1 Adp Boule	evard					SURER(S) AFFOR	RDING COVERAGE		NAIC#
Roseland			NJ 07068	INSURE		y Insurance Com			42376
INSURED	Rojas Flores Landscape (a Corp)	)		INSURE					
				INSURE	RC:				
	1096 Fleming Ave			INSURE	RD:				
				INSURE	RE:				
San Jose CA 95127 INSURER F:									
COVERAG	ES CER	TIFICAT	E NUMBER: 2654369				REVISION NUMBER:		
INDICATE CERTIFIC	D CERTIFY THAT THE POLICIES D. NOTWITHSTANDING ANY R ATE MAY BE ISSUED OR MAY INS AND CONDITIONS OF SUCH	EQUIREM PERTAIN, POLICIES	ENT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN	Y CONTRACT THE POLICIE REDUCED BY	T OR OTHER ES DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPECT	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SUBF			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
co	CLAIMS-MADE OCCUR						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)	\$ \$	
							PERSONAL & ADV INJURY	\$	
GENT A	GGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	s	
	LICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	s	
	HER:						TRODUCTO COMITOT AGG	\$	
	DBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
AN	Y AUTO						BODILY INJURY (Per person)	\$	
	NED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
HIR							PROPERTY DAMAGE	\$	

UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ EXCESS LIAB CLAIMS-MADE AGGREGATE \$ DED RETENTION \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY \$ 1,000,000 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT Υ TWC4144580 09/24/2022 09/24/2023 N/A N E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICA	TE HOLDER		CANCELLATION
	City of Alameda Public Works Dept 950 West Mall Square Suite 110		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	300 West Mail Square Suite 110		AUTHORIZED REPRESENTATIVE
	Alameda	CA 94501	Many M. Nemin

EXHIBIT "A"

### Exhibit D

## BIDDER'S PROPOSAL

The undersigned declared that they have carefully examined locations of the proposed work, scope of work and Standard Provisions and hereby proposed to furnish all labor, materials, machinery, tools and equipment required to perform the work, and to do all the said work in accordance with said Standard provisions for the unit prices set forth in the following schedule.

Location	- (No.4469	Items with Unit Prices Written in Words	Monthly Unit Price	Total Annual Price
			IP- MAINTENA	NCE
	@ S	ixtynine thousand six hundre Lump Sum	d \$ <u>5.800.00</u>	\$69,600,00
			IEDIAN- MAIN	FENANCE
	@T <u>I</u>	hirtyone thousand two hundre Lump Sum_	ed \$ <u>2.600.00</u>	\$31,200.00
	@ _	Thirtytwo Thousand four hundred Lump Sum	<u>\$ 2,700.00</u>	\$32,400.00
IRRIGATION RE	EPAIRS	i		
300 Heads Labor/Materials	@_	Forty Each Each Head	\$ <u>40.00</u>	\$_12,000.00
40 Irrigation Line Repairs	@_	One Hundred Each Each Repair	<u>\$_100.00</u>	\$ <u>4,000.00</u>
	WEEKLY-PATH As outlined in Prel  2/MONTH-BIOST Work as outlined in  Work as outlined in  IRRIGATION RE  300 Heads Labor/Materials	WEEKLY-PATHWAY/F As outlined in Preliminary  @ S  2/MONTH-BIOSWALES Work as outlined in Prelim  @T  CAT RAMP WEEKLY-F Work as outlined in Prelim  @ _  IRRIGATION REPAIRS  300 Heads Labor/Materials @_  40 Irrigation	WEEKLY-PATHWAY/PARKWAYS/PLANTER STR. As outlined in Preliminary Quantities  @ Sixtynine thousand six hundred Lump Sum  2/MONTH-BIOSWALES/SIDEWALK/CONCRETE Mayork as outlined in Preliminary Quantities  @Thirtyone thousand two hundred Lump Sum_  CAT RAMP WEEKLY-PATHWAY MAINTENANCE Work as outlined in Preliminary Quantities  @ Thirtytwo Thousand four hundred Lump Sum  IRRIGATION REPAIRS  300 Heads Labor/Materials  @ Forty Each Each Head  40 Irrigation Line Repairs  @ One Hundred Each	WEEKLY-PATHWAY/PARKWAYS/PLANTER STRIP- MAINTENAL As outlined in Preliminary Quantities  @ Sixtynine thousand six hundred Lump Sum  2/MONTH-BIOSWALES/SIDEWALK/CONCRETE MEDIAN- MAINT Work as outlined in Preliminary Quantities  @ Thirtyone thousand two hundred Lump Sum  CAT RAMP WEEKLY-PATHWAY MAINTENANCE Work as outlined in Preliminary Quantities  @ Thirtytwo Thousand four hundred Lump Sum  IRRIGATION REPAIRS  300 Heads Labor/Materials @ Forty Each \$ 40.00 Each Head  40 Irrigation Line Repairs @ One Hundred Each \$ 100.00

SIGNED: Agar H Rojas

Item No.	Approximate Quantity	Items with Unit Prices Written in Words	Uni Pri		Total Price						
3.	50 Irrigation Valve Repairs	@ One Hundred and Fifty Ea Each Valve	ach \$ <u>15</u>	0.00_	\$ <u>7,500.00</u>						
		SUBTOTAL BID:	\$ <u>156,700.0</u>	00							
		EXTRA WORK:	s <u>20,000.</u>	00	_						
		TOTAL BID:	\$ <u>176,700.0</u>	00							
TOTAL BID WRITTEN IN WORDS:											
One	One Hundred seventy six thousand and seven hundred Dollars										

#### EXHIBIT F

#### **Emergency Form**

During the course of the work and/or while the contractor has responsibility for the project, emergencies may arise where it is necessary to repair or replace safety devices, or install additional safety devices, or take preventative measures necessary for public safety. Such corrections as may be necessary are the contractor's responsibility and he, or his representative, will be called upon in such emergencies.

Please fill in the following information and submit it to the Public Works Project Manager.

CONTRACTOR'S NAME Rojas Flores Landscape Inc.
CONTRACTOR'S PHONE NUMBER 408-597-5995
PROJECT SUPERINTENDENT Edgar H Rojas
CONTACT IN THE EVENT OF EMERGENCY: Vice President
Name: Elva Flores
Phone Number: 408-592-7940

In cases where the contractor, or his representative, cannot be contacted or will not take the necessary actions, the City Public Works Department will be notified and the necessary repairs, corrections, or changes will be made. The contractor will be billed for such remedial action. Charges will include the cost of labor at applicable rates, the City's normal overhead factor, the rental of any equipment or safety devices placed during the emergency that are damaged or stolen, or otherwise not returned to the City, will be billed to the contractor.

Scheduled starting date	 	_
Scheduled completion date_	 	_
Job Name		_
		_

**EXHIBIT E** 

# CITY OF ALAMEDA INTEGRATED PEST MANAGEMENT POLICY

#### IPM CONTRACT SPECIFICATIONS

#### COMPLIANCE WITH THE CITY'S INTEGRATED PEST MANAGEMENT POLICY:

The Contractor shall follow the requirements of the City's Integrated Pest Management (IPM) Policy to ensure the City is in compliance with the most-current version of its Municipal Regional Stormwater NPDES Permit, issued by the San Francisco Bay Regional Water Quality Control Board.

- Contractor shall use the most current IPM technologies available to ensure the long-term prevention or suppression of pest problems and to minimize negative impacts on the environment, non-target organisms, and human health for the control or management of pests in and around City buildings and facilities, parks and golf courses, urban landscape areas, rights-of-way, and other City properties.
- Contractor will consider the City IPM Policy's hierarchy of options or alternatives listed below, in the following order before recommending the use of or applying any pesticide on City property: (1)
  - No controls (e.g. tolerating the pest infestation, use of resistant plant varieties or allowing normal life cycle of weeds);
  - 2. Physical or mechanical controls (e.g. hand labor, mowing, exclusion);
  - 3. Cultural controls (e.g. mulching, disking, alternative vegetation) and good housekeeping (e.g. cleaning desk area);
  - 4. Biological controls (e.g., natural enemies or predators); (5)
  - Reduced-risk chemical controls (e.g., soaps or oils);
  - 6. Other chemical controls.
- Prior to applying chemical controls the contractor shall complete a checklist (attached) for the City's pre-approval that explains why a chemical control is necessary. For annual contracts that may require regular application of chemical controls the contractor shall submit one checklist annually prior to the initiation of the project demonstrating that the hierarchy has been reviewed and no other options exist. Additionally, the contractor shall provide documentation to the City's project manager of the implementation of the IPM techniques hierarchy described in the City's IPM Policy.
- Contractor shall avoid the use of the following pesticides that threaten water quality, human health and the environment:
  - Acute Toxicity Category I chemicals as identified by the Environmental Protection Agency (EPA)
  - Organophosphorous pesticides (e.g., those containing Diazinon, chlorpyrifos or malathion)

- Pyrethroids (bifenthrin, cyfluthrin, beta-cyfluthrin, cypermethrin, deltamethrin, esfenvalerate, lambda-cyhalothrin, metofluthrin, permethrin, and tralomethrin), carbamates (e.g., carbaryl), and fipronil and its degradates
- 4. Diamides (chlorantraniliprole and cyantraniliprole), diuron, indoxacarb
- Copper-based pesticides unless their use is judicious, other approaches and techniques have been considered, and the threat of impact to water quality is prevented.

	Contractor shall sign the Contractor Verification Form (attached) indicating the in implement the City's IPM Policy, and return a signed copy to the City's project ma	
	Contractor shall provide to the City's project manager an annual Report of all pe	esticide
•	usage in support of City operations including pesticide name, active ingredient(s) pest(s), the total amounts used and the reasons for any increase in use of any pestic Contractor shall provide a copy of any current IPM certifications(s) to the City's manager prior to initiation of the service work.	ide.
with t	by of the City's IPM Policy may be obtained from the City's project manager and is also he City Clerk.  actor will consider the City IPM Policy's hierarchy of options or alternatives listed be	
the fo	Illowing order before recommending the use of or applying any pesticide on City pre provide a written explanation in each section below of why the specific pest manager is not appropriate:	operty.
	o controls (e.g. tolerating the pest infestation, use of resistant plant varieties or al al life cycle of weeds)	lowing
Comn	ment:	
(2) Ph	nysical or mechanical controls (e.g. hand labor, mowing, exclusion)	
Comn	ment:	
	ultural controls (e.g. mulching, disking, alternative vegetation), good housekeeping (ing desk area)	e.g.
Comn	nent:	

## City of Alameda Contractor Verification Form Implementation of City of Alameda Integrated Pest Management Policy

The City of Alameda (City) is mandated to:

- (a) Minimize its reliance on pesticides that threaten water quality, and
- (b) Require the effective use of Integrated Pest Management (IPM) in all municipal operations and on all municipal property.

To ensure compliance with this mandate, all City operations need to verifiably implement the practices and policies described in the City's IPM Policy adopted June 15, 2010. A copy of this IPM Policy is included with this form. The implementation of the IPM Policy is applicable to all municipal contractors that provide landscaping, structural pest control, or other pest management services in support of City operations and/or on municipal property.

The undersigning parties acknowledge that all elements of the City's IPM Policy will be implemented throughout the period of contractual services provided to City operations and on municipal property. Specific actions to document this performance shall include:

	Pest Management Contractor shall provide to City project manager for pre-approval the Pest Management Considerations Checklist.				
0	Pest Mana quality, hu O A A O O m O P es	agement Contractor suman health and the cute Toxicity Categ gency (EPA) rganophosphorous alathion) yrethroids (bifenthrafenvalerate, lambdarbamates (e.g., carbamates (e.g., c	shall avoid the use of the following pesticides that threaten water environment: gory I chemicals as identified by the Environmental Protection pesticides (e.g., those containing Diazinon, chlorpyrifos or rin, cyfluthrin, beta-cyfluthrin, cypermethrin, deltamethrin, la-cyhalothrin, metofluthrin, permethrin, and tralomethrin), paryl), and fipronil and its degradates		
			niliprole and cyantraniliprole), diuron, and indoxacarb		
			des unless their use is judicious, other approaches and techniques and the threat of impact to water quality is prevented.		
			shall provide to the City's project manager an annual Report of		
	all pestici	de usage in support	t of City operations including product name and manufacturer,		
			st(s), the total amounts used and reasons for any increase in use		
_	of any pes				
	If the Con	tractor's on-site per	sonnel are currently IPM certified through either the EcoWise or		
			th another program, the contractor shall provide written evidence		
	or any cer	tifications to the Cit	y's project manager.		
			Edgar H Rojas Contractor Representative		
City D	Departmenta	l Representative	Contractor Representative		
			Edgar H Rojas		
	Print	Name	Print Name		
			11/08/2022		
	Dat	e	Date		
			Rojas Flores Landscape Inc.		
	City Depa	rtment	City Contractor		

## Exhibit C -Experience Performing Similar Services Form

The Bidder is required to state what work of a similar character to that included in the proposed contract the Bidder has successfully performed and give reference which will enable the City to judge his responsibility, experience skill, and business standing. The Contractor shall have a minimum of three years' experience in maintaining municipal landscape of similar scope and size or greater to the City of Alameda.

The Bidder shall submit with the bid proposal this statement of the work of a similar size and character to

that included in the proposed contract which the Bidder has successfully performed.

Agency for Whom Work Was Done	Contact Name w/ Phone #	Project	Date	Contract Price
City Of Alameda		Alameda Medians & Special areas	07/01/2019	55,000.00
	Jesse Barajas (510) 846-5139	-		
City of Alameda	Jesse Barajas (510) 846-5139	Alameda City Medians & special areas and Marina Village & ligthing distric areas	04/01/2020	426,063.00
City of Alameda	Jesse Barajas (510) 846-5139	Alameda City Medians & special areas and Marina Village & ligthing distric areas	04/01/2021	434,584.26
City of Alameda	Jesse Barajas (510) 846-5139	Alameda City Medians & special areas and Marina Village & ligthing distric areas	04/01/2022	443,275.95

SIGNED: Agar H Rojas