

City of Evansville – Vanderburgh County



Request for Quotes

RFQ-007-01-25

Fencing

for Central Dispatch

Sealed quotes will be received by the Central Dispatch Board for iron fencing at 1331 Harmony Way. The quotes will be publicly opened and read aloud at 8:30 AM CST on Thursday, **August 28, 2025**, at the Central Dispatch Board's meeting at 1331 Harmony Way 47720. Quotes received after this time will not be considered for award.

Quotes submitted prior to the scheduled opening shall be submitted to the Purchasing Department, Room 323, Civic Center Complex, 1 NW MLK Jr Blvd, Evansville, Indiana 47708. Quotes submitted to the Purchasing Department shall be submitted no later than 3:30PM CST the day before the scheduled opening on Thursday, **August 28, 2025**. Any quote brought directly to the meeting shall be given to the Board secretary by 8:30 AM CST.

Quotes shall be delivered in a sealed envelope, bearing the name and address of the Vendor, and clearly marked:

SEALED QUOTE ENCLOSED

Company Name

RFQ-007-01-25

Fencing

*Opening: Thursday, **August 28, 2025**.*

Fencing will be done in areas as noted on the list according to the specifications below. For more information, please contact: Carrie James, Director, cjames@evansvillegov.org

SITE INSPECTION:

The site is accessible to the public. Access should be made during business hours, 7 a.m. to 3 p.m. Monday through Friday.

SPECIFICATIONS:

The contractor will provide material, equipment and labor to:

Project area is approximately 600 sq ft.

We need to approximately 600 sq ft of fencing. The fencing will need to match the existing steel fencing located on the north side of the lot so as to be aesthetically pleasing to the neighbors.

ATTACHMENTS:

Please refer to the attached document, where the fencing location is outlined in red.

There are two green X's marked along the red lines.

- The **small green X**, positioned to the left of the building, indicates a pedestrian entry gate. This gate must remain locked and should be accessible via an intercom system and a button at the Administrative Assistant desk that allows remote access to this gate so public can gain access to the building.
- The **large green X**, located at the entrance to the parking lot, designates a secure vehicle gate. This gate should be positioned far enough from the street to allow a car-length clearance for stopping at the key fob access unit. Additionally, it must include a secure entry stand equipped with a fob scanner to grant access exclusively to employees. As a backup if the fob scanner should malfunction, this gate should be able to be opened from a button at the Administrative Assistant desk.

SCHEDULE:

The Department of Central Dispatch anticipates that contract with successful contractor would be executed at the August 28, 2025 Central Dispatch Board meeting. This project will be started in **September and completed by October 31, 2025.**

Lowest total by a qualified contractor will be awarded contract to perform work. Contract will be the typical City of Evansville construction agreement including insurance, and e-verify requirements. If you would like to see a blank agreement prior to submitting your quote contact Carrie James at cjames@evansvillegov.org

CONTRACTOR'S INSURANCE

The Contractor shall not commence any Work under this Contract until he has obtained insurance of the types and in the amounts required by this Section, nor shall the Contractor allow any Subcontractor(s) to commence any Work on his Subcontract until all insurance required of the Subcontractor(s) has been obtained. The Contractor shall be responsible for verifying the acquisition and maintenance of said insurance by any Subcontractor(s) hired by the Contractor. The Contractor shall name the City of Evansville as an additional insured to all insurance contracts procured by the Contractor in accordance with this Section. All insurance procured by the Contractor is to be placed with insurers whom maintain a Best's rating of no less than A:VII. The Contractor shall be solely responsible for the payment of all premiums associated with any insurance required by Owner, and the Contractor shall be solely responsible for the payment of all deductibles to which such policies are subject, whether or not the Owner is an insured under the policy. The Contractor shall advise all Subcontractor(s) of the requirements set forth above.

Commercial General Liability Insurance: The Contractor shall furnish and maintain, at the Contractor's expense during the life of the Contract, such Commercial General Liability Insurance as shall protect him, the Owner, as an additional insured, and any Subcontractor(s) performing Work under this Contract, from claims for damage for personal injury, occupational sickness or disease, including accidental death, as well as the claims for property damage, which may arise

from operations under this Contract, whether such operations be by himself or by any Subcontractor(s), or by any one directly or indirectly employed by either of them. The amounts of such insurance shall be as required by law. The Owner shall have the right to reject the insurance carrier selected by the Contractor. No Work shall commence prior to the Owner receiving a certificate of insurance verifying the coverages to be provided as defined herein. In the absence of regulations, the amounts of coverage shall be as follows:

General Aggregate:	Not Less Than \$2,000,000
Products & Completed Operations Aggregate:	Not Less Than \$2,000,000
Personal & Advertising Injury:	Not Less Than \$1,000,000
Each Occurrence:	Not Less Than \$750,000
Fire Damage (Any one fire):	Not less Than \$50,000
Medical Expense (Any one person):	Not Less Than \$5,000

Worker's Compensation Insurance: The Contractor shall furnish certificates from the Worker's Compensation Board of Indiana, or its successor, that he is fully covered by Worker's Compensation and Occupational Diseases insurance, on all Employees on the Project. The Contractor shall maintain said coverage for the life of the Contract. The same requirements pertain to any Subcontractor(s). The Contractor shall be responsible for verifying that all Subcontractor(s) have Workmen's Compensation and Occupational Insurance Coverage. No Work shall commence prior to the Owner receiving a certificate of insurance verifying the coverages provided herein.

Automobile Liability: The Contractor shall furnish and maintain, at his expense during the life of the Contract, automobile liability insurance, covering claims for damages because of bodily injury, death or property damage arising from the use of all motor vehicles engaged in operating within the terms of this Contract. The amounts of such combined single limit coverage shall be not less than (\$ 1,000,000) for any one occurrence, including hired and non-owned vehicles. All Subcontractor(s) of the Contractor shall have similar automobile liability insurance. The Contractor shall be responsible for verifying that all Subcontractor(s) have said automobile liability insurance. Coverage 1 shall apply. No Work shall commence prior to the Owner receiving a certificate of insurance verifying the coverage provided herein.

Special Hazards: Special Hazards, as determined by the Owner, shall be covered by rider or riders in amounts to be agreed upon, to the Liability Insurance policy or policies required to be furnished by the Contractor, and all Subcontractor(s) employed by the Contractor, or by separate policies of insurance in the amounts as defined in the Special Conditions of the Contract Documents. All such special Hazards insurance coverage shall have the Owner as an additional insured. No Work requiring special hazard coverage shall commence until the Owner has received a certificate of insurance verifying the coverage required herein.

Builder's Risk Insurance: The Contractor, and all Subcontractor(s) employed by the Contractor, shall maintain Builder's Risk Insurance, "all risk" coverage, on the Project for the benefit of the Owner. The Contractor shall be responsible for verifying that all Subcontractor(s) have the required Builder's Risk Insurance coverage. However, this provision shall not release the Contractor from his obligation to complete the Project, and the Contractor and his Surety shall be obligated to full performance of the Contract.

Subcontractor(s) Insurance: The Contractor shall require all Subcontractor(s) to secure and maintain in force during the term of this Contract, all such insurance coverages defined above. The Contractor shall verify the existence of all said insurance policies and coverages. No Work

by a Subcontractor(s) shall commence prior to the Owner receiving a certificate of insurance verifying the coverage required herein.

Other Provisions: Any failure to comply with reporting provisions of the policies shall not affect coverage provided to the Owner, its officers, officials, employees and volunteers by the Contractor and Subcontractor(s). The Contractor's and Subcontractor's insurance shall apply separately to each insured against whom claim is made or suit is brought except with respect to the limits of the insurer's liability. The insurer shall agree to waive all rights of subrogation against the Owner, its officers, officials, employees and volunteers for losses arising from Work performed by the Contractor for the Owner. The Contractor shall be responsible for notifying all insurance carriers of this contract provision and shall be liable to the Owner for any failure to so notify and advise any insurance carrier of this provision.

PROOF OF INSURANCE

The Contractor shall furnish the Owner with satisfactory proof of coverage of the insurance required, in a reliable company or companies to be approved by the Owner, licensed to do business in the State of Indiana, before commencing any Work. Such proof shall consist of certificates executed by the respective insurance companies, filed with the Owner. The certificates of insurance shall show the name and address of the Company, expiration date or dates, and the policy number or numbers. The Owner reserves the right to require complete, certified copies of all required insurance policies at any time.

Proof of insurance shall be maintained up to date, and failure to maintain adequate coverage and proof shall be deemed sufficient reason for cancellation of the Contract. All insurance shall provide that the policy shall not be canceled, terminated or modified unless thirty (30) days prior to such cancellation, termination or modification written notice is given to the Owner. No policy may be modified, terminated or canceled by the Contractor without the prior written approval of the Owner.

RIGHT OF REJECTION

Central Dispatch Board reserve the right to reject any one or all quotes, or any part of any quote, to waive any informality in any quote, and to award the purchase in the best interest of the City. Furthermore, the City reserves the right to hold the quote of the three (3) lowest Vendors for a period of sixty (60) calendar days from and after the time of the quote opening.

INDEMNIFICATION

1. The successful vendor shall indemnify and hold harmless the City/County and their agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the performance of the work; and caused in whole or in part by any negligent act or omission of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable.
2. In any and all claims against the City/County, or any of their agents or employees by any employee of the successful vendor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation under this paragraph shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefits payable by or for the successful vendor or any subcontractor under Workmen's Compensation Acts, Disability Benefit Acts or other Employee Benefit Acts.

MINORITY & WOMEN BUSINESS ENTERPRISE UTILIZATION

The City of Evansville and Vanderburgh County is committed to achieving significant utilization of Minority and Women Business Enterprises (M/WBE) in the community's purchasing efforts. Goals have been established to provide an atmosphere of equal opportunity for all vendors to participate

in procurement opportunities including the purchasing of products, services and public works contracts. (See Board of Public Safety/City of Evansville Municipal Code 3.90.110-180)

EQUAL EMPLOYMENT OPPORTUNITY

The Equal Employment Opportunity Statement included herein is a condition of the quote. The contract must be signed by the successful Vendor and the City; and the successful Vendor must comply with the equal employment opportunity condition in the execution of the contract.

CONFLICT OF INTEREST DISCLOSURE

The Conflict of Interest Disclosure Statement included herein is a condition of the quote. This form shall be filled out by the vendor even if no conflicts exist and returned with quote.

E-VERIFY

Pursuant to IC 22-5-1.7 all public contracts for services entered into or renewed after June 30, 2011 must contain E-Verify provisions. Any Contractor entering into a service agreement with the City or County shall submit an affidavit of compliance that provides vendor acknowledgment of and commitment to the E-Verify Program.

LAWS

Vendors shall comply with all applicable Federal, State, City and County laws, ordinances and regulations applicable to the bidding and performance of the contract(s).

EVANSVILLE MUNICIPAL CODE 3.95.020

3.95.020 Random drug testing program required.

(A) No board, commission or other agency of the City shall award a contract for a public works project to a contractor unless the contractor and every subcontractor doing construction work on the project has in place at the time of submission of his quote or bid a random drug testing program which shall at a minimum meet the following qualifications and criteria:

- (1) The contractor shall maintain a random drug testing program, and the program shall be reduced to writing;
- (2) The drug testing program shall contain at least a five-drug panel that tests for the following drugs: amphetamines, cocaine, opiates (92,000 ng/mL), PCP and THC;
- (3) All the employees of the contractor are subject to at least annual testing, and at least one-twelfth of 25 percent of the employer's total workforce shall be selected randomly each month for testing; and
- (4) The random drug testing program operated by the contractor shall contain a progressive discipline component for employees who fail the drug test that meets at least the following minimum steps:
 - (a) The first positive test shall result in a 30-day period of ineligibility for work, and upon returning to work, one year of unannounced follow-up testing;
 - (b) A second positive test shall result in a 90-day period of ineligibility for work, and upon returning to work, one year of unannounced follow-up testing;
 - (c) A third positive test shall result in a one-year period of ineligibility for work, and upon returning to work, one year of unannounced follow-up testing; and
 - (d) Any subsequent positive test shall be treated the same as a third positive test.

At the discretion of the employer, the discipline issued above may include more severe discipline, including, but not limited to, dismissal of the employee.

(B) Failure to provide evidence of the contractor's random drug testing policy or program shall result in a rejection of the bid. Submitting false information concerning compliance with the

requirements of this chapter shall result in the rejection of the bid or cancellation of the contract if an award has been made prior to determining the information is false by the board, commission or agency. In such event, the contractor shall be paid only for the work done prior to cancellation of the contract.

(C) This section shall be applicable only to construction contracts where the cost of the contract is more than \$10,000. [Ord. G-2004-16, passed 10-20-04. 1983 Code § 5.60.02.]

QUOTE TABULATION FORM
(Make first sheet of your submission)

COMPANY NAME: _____

\$ _____
Numerical

Written Amount

AUTHORIZED SIGNATURE

DATE

NAME & TITLE (PLEASE PRINT)

TELEPHONE

COMPANY NAME

FAX NUMBER

ADDRESS (STREET)

EMAIL ADDRESS

CITY, STATE, ZIP CODE

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EQUAL EMPLOYMENT OPPORTUNITY

During the performance of the contract, the contract, the Vendor agrees as follows:

1. The Vendor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, political affiliation or belief, age, or disability. The Vendor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to race, color, religion, sex, national origin, political affiliation or belief, age, or disability. Such action shall include but not be limited to the following: employment, upgrading, demotion, or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. The Vendor agrees to post in conspicuous places, available to employees and applicants for employment, notice setting forth the provisions of the nondiscrimination clause.

2. The Vendor agrees that all services, facilities, activities, and programs provided as part of this contract will meet the requirements of the Americans with Disabilities Act and the rules and regulations promulgated there under.

3. The Vendor will, in all solicitations or advertisements for employees placed by or on behalf of the Vendor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, political affiliation or belief, age or disability.

4. The Vendor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding, a notice, to be provided, advertising, the labor union or workers' representative of the Vendor's commitments under the Equal Employment Opportunity Section of this contract and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

5. In the event of the Vendor's noncompliance with the nondiscrimination clauses of this contract or with any of such rules, regulations, or orders, this contract may be canceled, terminated, or suspended in whole or in part and the Vendor may be declared ineligible for further City contracts.

Vendor Representative (please print)

Signed

Vendor Name

Telephone

Vendor Address

Date

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NON-COLLUSION AFFIDAVIT

STATE OF INDIANA)
) ss:
_____COUNTY)

The undersigned Vendor or agent, being duly sworn on oath, says that he has not, nor has any other member, representative, or agent of the firm, company, corporation or partnership represented by Vendor, entered into any combination, collusion or agreement with any person relative to the price to be bid by anyone at such letting nor to prevent any person from bidding nor to induce anyone to refrain from bidding, and that this bid is made without reference to any other bid and without any agreement, understanding or combination with any other person in reference to such bidding.

Vendor further says that no person or persons, firms, or corporation has, have, or will receive directly or indirectly, any rebate, fee, gift, commission, or thing of value on account of such sale.

Vendor (Firm)

Signature of Vendor or Agent

Subscribed and sworn to before me this _____ day of _____, 20__

My Commission Expires: _____

County of Residence: _____

ACCEPTANCE

There now being sufficient unobligated appropriated funds available, the contracting authority of _____
_____ (Governmental Unit) hereby accepts the terms of the attached bid for classes or
items numbered _____ and promises to pay the undersigned Vendor upon delivery the price quoted
for the materials/equipment stipulated in said bid.

Contracting Authority Members:

Date: _____

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CONFLICT OF INTEREST / FAMILIAL DISCLOSURE FORM

Project: _____

ALL Vendors must complete this Conflict-of-Interest Familial Disclosure Form and must attach the completed form to the proposal.

I affirm that no principal, representative, agent, employee, Vendor or potential subcontractors, or other acting on behalf of or legally capable of acting on the behalf of the Vendor (a "Vendor Party"), is currently an employee of the City of Evansville ("City"), any City department or a member of any City Board or Council; nor will any such person connected to the Vendor be privy to any City information which may constitute a conflict of interest; or, if such a conflict or relationship does exist, I have disclosed the nature of the relationship or conflict below.

By the attached sworn and notarized statement, we are disclosing the following familial relationship(s) that exists between a Vendor Party and any employee or member of any City Department or board.

As the Vendor, I understand that completing this form and self-disclosing potential conflicts of interest does not necessarily disqualify a Vendor, but aids in identifying conflicts of interests which must be addressed pursuant to I.C. 35-44.1-1 et al. Further, the City will ensure that any individuals identified with a potential conflict will not be allowed to participate in the scoring or evaluation of the proposal packages, to insure the integrity of the process.

The following is a list of individuals who may pose a potential conflict of interest as described above. Please provide the name, relationship with the City and the nature of the potential conflict, or if applicable: "NONE":

Signature(s): _____

Title: _____

Vendor/Bidder: _____

STATE OF _____)
) SS:
COUNTY OF _____)

BEFORE ME, a Notary Public in and for said County and State, personally appeared _____, _____ of _____, who having been duly sworn, acknowledged and affirmed that they did sign said instrument as such officer or authorized agent for and on behalf of _____, and by authority granted by such entity, that the same is their free act and deed and the free act and deed of said entity.

WITNESS my hand and notarial seal this ____ day of _____, 20_____.
My commission expires: _____ Notary Public

My County of residence is: _____
_____ County, State of _____ Name of Notary Public

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