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EDGECOMBE COUNTY FY 12 CDBG PROGRAM
REQUEST FOR PROPOSAL

ASBESTOS INSPECTION SERVICES

Edgecombe County has been awarded a Small Cities Community Development Block Grant (CDBG) from the North Carolina Department of Commerce (DOC) in the amount of $225,000 (100% of total program costs) to undertake a scattered site housing project. The grant includes demolition, clearance and replacement of two (2) dwellings.

Edgecombe County is now accepting proposals for a certified contractor to provide asbestos inspections for two (2) dwelling units. These dwellings are single story and are approximately 1000 and 1,800 square feet in size.

All inspectors and project designers must have current certifications from institutions that are approved in accordance with current state and federal requirements for asbestos inspection activities. Attached are copies of the specifications necessary to complete this proposal. Please review these specifications carefully. All proposals must be submitted to Brian Hassell, Director of Planning, Inspections and E-911, Edgecombe County, 201 St. Andrew Street, PO Box 10, Tarboro, NC 27886, phone (252) 641-7803 no later than **Monday, December 9, 2013 at 5:00 PM.** The successful contractor will be required to provide proof of insurance (Attachment A).

Edgecombe County is an equal opportunity employer and encourages proposals from small, minority, and female-owned businesses and does not discriminate on the basis of handicapped status.

Questions about this Request for Proposal should be referred to Brendan Nolan, The Wooten Company at (252) 757-1096.

Certified Contractor

Division of Purchase and Contract
NC Department of Administration
1336 Mail Service Center
Raleigh, NC 27699-1336

Date: November 25, 2013

Proposal Submission

Brian Hassell, Director of Planning
Inspections and E-911
201 St. Andrew Street
PO Box 10
Tarboro, NC 27886
(252) 641-7803

Asbestos Inspection Request for Proposal

The purpose of this Request for Proposal (RFP) is to provide Edgecombe County information to help them manage and control asbestos hazards efficiently and effectively during demolition and clearance activities. This RFP is a request for an Asbestos Inspection prior to demolition activities. Enclosed is the following information on the properties to be evaluated:

a. Proposal Sheet
b. Location Map

All work must be performed by contractors certified to perform asbestos inspections and by individuals certified and licensed to perform such inspections by the State of North Carolina Health Hazards Control Unit (HHCU). The inspections will be conducted in general accordance with standards for conducting asbestos inspection activities. The inspections shall be conducted by a State of North Carolina accredited asbestos inspector.

Edgecombe County reserves the right to restrict the assignment of any individual, for any reasonable cause, under the contract or any subcontracts.

Scope of Work

The Asbestos Inspector shall provide all necessary facilities, materials, supplies, equipment, supervision, and personnel and other items and services to perform the asbestos inspection services as defined in this RFP. These services must be in accordance with applicable work practice standards of the HHCU. When more than one regulatory provision applies to a condition or activity, the most stringent shall be used.

Proposals are being requested to provide asbestos inspection services for two (2) dwellings scheduled for demolition. The units are scheduled to be cleared with funds received by Edgecombe County from the Division of Community Assistance. Contractors interested in bidding are requested to include the following information:

- Lump sum fee per unit for inspection.
- Price for analyzing additional samples.
- Any other charges which may be incurred to complete the inspection.
- All work shall be performed by a NC accredited Asbestos Inspector in accordance with state and federal regulations.
- Approximate response time between contract award and delivery of the completed Asbestos Report.

Proposals should be submitted to Brian Hassell, Director of Planning, Inspections and E-911, Edgecombe County, 201 St. Andrew Street, PO Box 10, Tarboro, NC 27886, phone (252) 641-7803 and must be received no later than **Monday, December 9, 2013 at 5:00 PM.** Edgecombe County is an Equal Opportunity Employer and encourages bidding by small, minority, and female-owned contractors; does not discriminate on the basis of handicap status; and also encourages the use of available job training programs.

Questions should be referred to Brendan Nolan, The Wooten Company, (252) 757-1096.

https://maps.google.com/maps?hl=en

503 S 2nd St, Pinetops, NC -...

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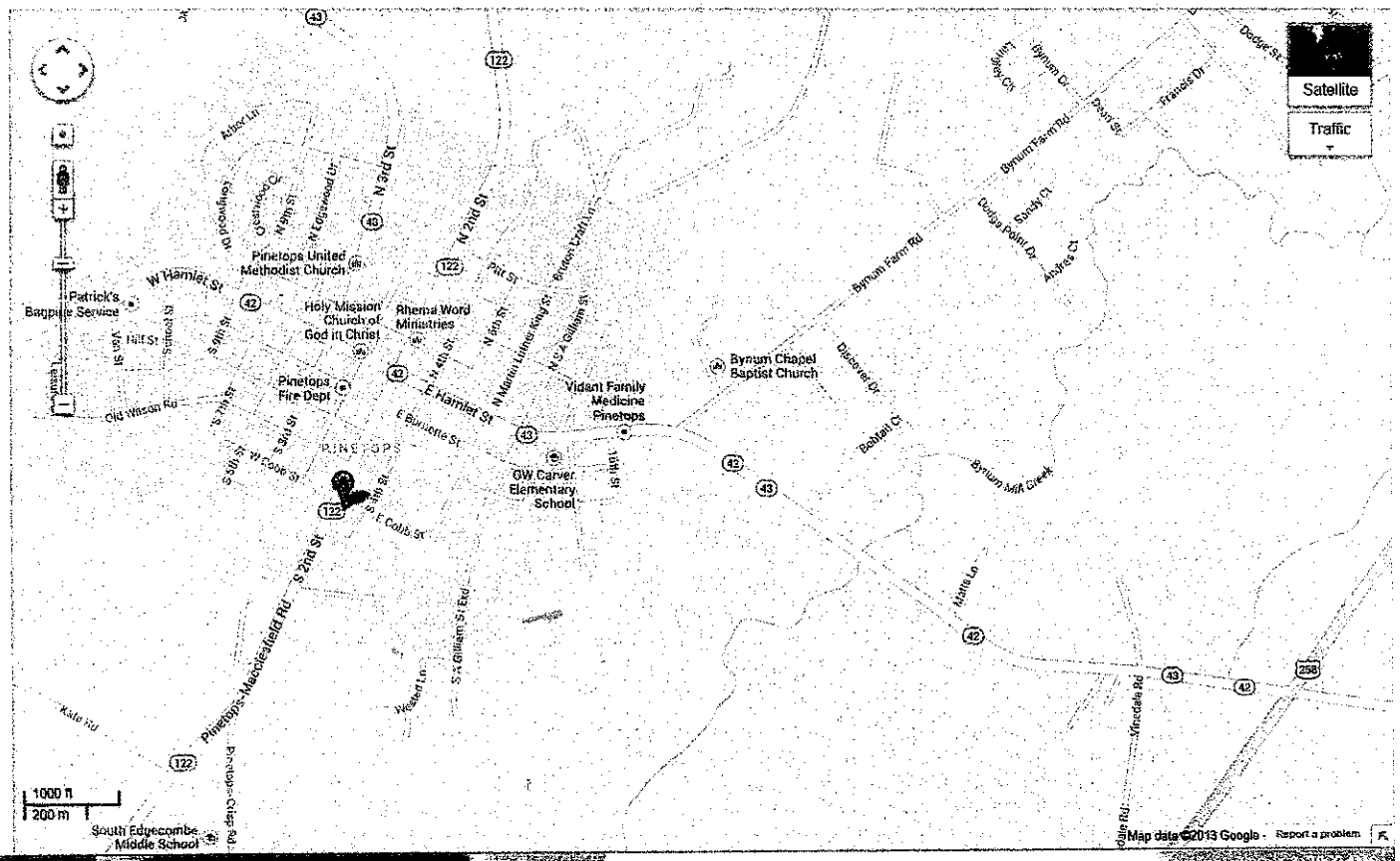

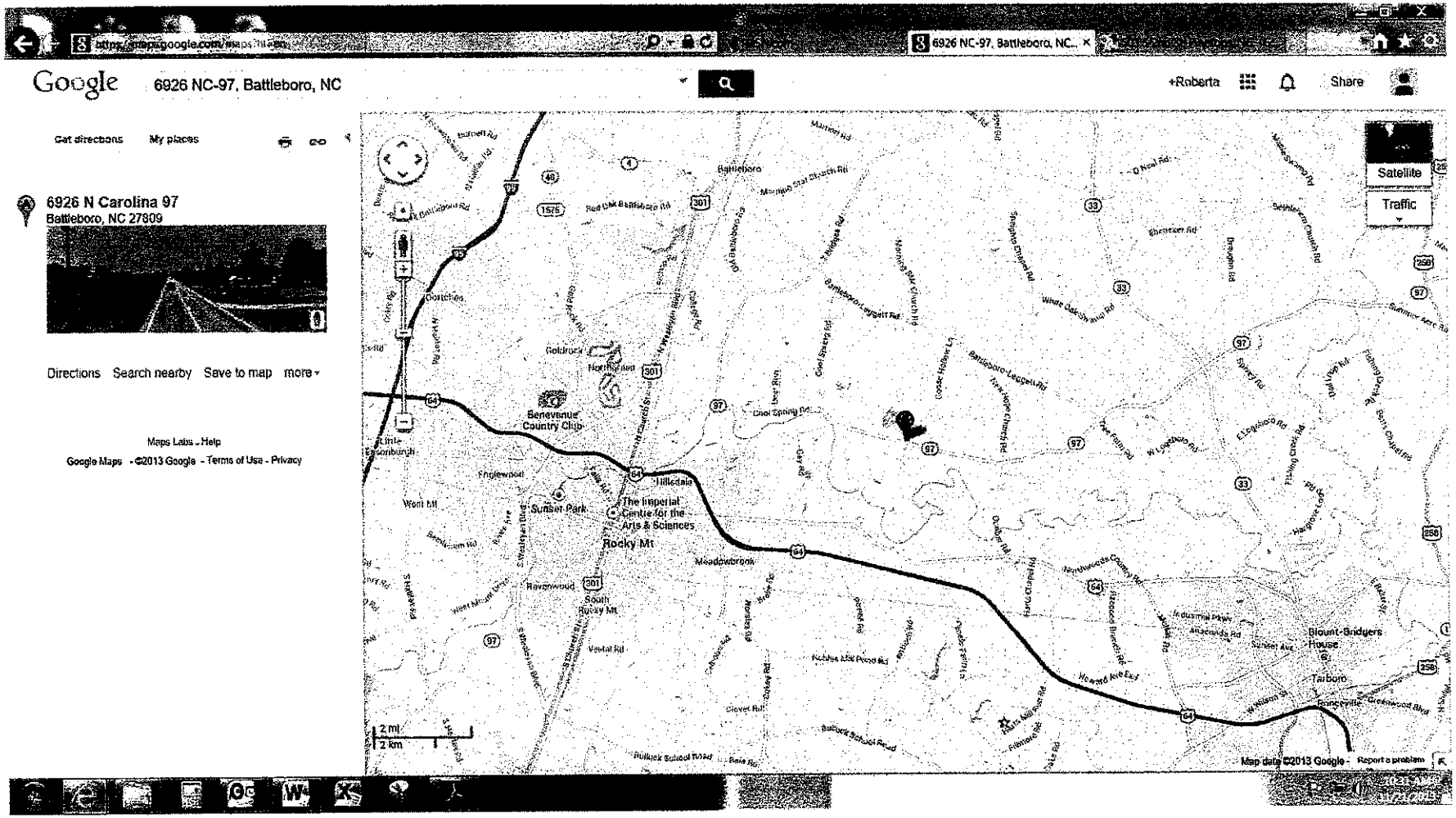

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Northwood
Benevenue Country Club
Little Easonburgh
Englewood
Hillsdale
Sunset Park
The Imperial Centre for the Arts & Sciences
Rocky Mt
Meadowbrook
Ravenwood
South Rocky Mt
Blount-Bridgers House
Tarboro
Ponceville
2 mi
2 km
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EDGECOMBE COUNTY FY 12 CDBG PROGRAM

ASBESTOS INSPECTION SERVICES PROPOSAL

PROPOSAL DUE DATE – MONDAY, DECEMBER 9, 2013 AT 5:00 PM

Brian Hassell, Director of Planning, Inspections and E-911
Edgecombe County
201 St. Andrew Street
PO Box 10
Tarboro, NC 27886

Unit	Address	Asbestos Inspection	Analyzing Additional Samples/ Unit	Other Misc. Charges/ Unit	Total
1	503 S. 2nd Street, Pinetops, NC	$	$	$	$
2	6926 NC 97 West, Battleboro, NC	$	$	$	$
				TOTAL	**$**

I, the undersigned contractor, have inspected the foregoing listed properties and understand the extent and character of the work to be completed. I propose to furnish all labor, material, and equipment necessary to accomplish the work for all units listed for the total sum of

_____ Dollars ($_____)

_____
Certified Asbestos Inspector

✓ _____
Signature Date

_____
Company

Mailing Address: _____

_____

_____
Telephone Number

_____

ATTACHMENT A

INSURANCE REQUIREMENTS

Note to Bidders: The successful contractor shall be required to submit completed Attachment A before beginning work.

The service provider shall not commence any work in connection with this Request for Proposal until it has obtained all of the following types of insurance and such insurance has been approved by Edgecombe County. Nor shall the Service Provider allow any subcontractor to commence work on its subcontract until all similar insurance required on the subcontractor has been obtained and approved. All insurance policies shall be with insurers qualified and doing business in North Carolina recognized by the Secretary of State and the Insurance Commissioner's Office. Edgecombe County shall be furnished proof of coverage of insurance by certificates of insurance accompanying the contract documents and shall name Edgecombe County as an additional named insured.

Edgecombe County shall be exempt from, and in no way liable for any sum of money, which may represent deductible in any insurance policy. The payment of such deductible shall be the sole responsibility of the service Provider and/or subcontractor providing such service.

Indemnity and Insurance: To the extent permitted by law, the Service Provider shall indemnify and save harmless, Edgecombe County, its officers, agents, employees and assigns, from and against all loss, cost damages, expense and liability caused by an accident of other occurrence, resulting in bodily injury, including death, sickness and disease to any person(s), or damage or destruction to property, real or personal; arising directly or indirectly from operations, products of services rendered or purchased under this contract.

The Service Provider further agrees to purchase and maintain insurance with an insurance company rated not less than A by A. M. Best, authorized to do business in the State of North Carolina, acceptable to Edgecombe County.

1. Automobile Liability - Bodily injury and property damage liability covering all owned, non-owned, and hired automobiles for limits of not less that $ 1,000,000 bodily injury each person, each accident and $1,000,000 property damage, or $ 1,000,000 single limit - bodily injury and property damage.

2. Comprehensive General Liability - Bodily injury and property damage liability as shall protect the Service Provider and any subcontractor performing work under this contract, from claims of bodily injury or property damage which arise form operation of this contract whether such operations are performed by the Service Provider, any subcontractor or anyone directly or indirectly employed by either. The amounts of such insurance shall be no less than $ 1,000,000 bodily injury, each occurrence/aggregate and $1,000,000 property damage combined limits each occurrence/aggregate. This insurance shall include coverage for products/completed operations, personal injury liability and contractual liability.

3. Workers' Compensation meeting the statutory requirements of the State of North Carolina and Employers Liability $100,000 per accident limit, $500,000 disease per policy limits, $100,000 disease each employee limit providing coverage for all employees and owners.

ATTACHMENT A

Certificate of such insurance and Bond will be furnished to Edgecombe County and shall contain the provision that Edgecombe County be given thirty (30) days written notice of any intent to amend or terminate by either the insured or the insuring company.

Should any or all of the required insurance coverage be self-funded/self-insured, a copy of the Certificate of Self-Insurance or other documentation from the North Carolina Department of Insurance shall be furnished.

The Service Provider is advised that if any part of the proposed work under this Request For Proposal is sublet, the subcontractor shall be required to meet all insurance requirements as listed above, However, this will in no way relieve the Service Provider form meeting all insurance requirements or otherwise being responsible for the subcontractor.

Proposing party and insurance agent statement:

We understand the insurance requirements of these specifications and the evidence of insurability shall be provided prior to contract execution. If our client is awarded this contract, we agree to provide Edgecombe County with a thirty (30) day written notice of any intent to amend, terminate, or non-renew coverage by the insuring company.

_____ _____
Contractor Insurance Agency

✓ _____
Signature of Contractor

Agent's Errors and Omission Policy:

✓ _____ _____
Signature of NC Resident Agent Amount of Coverage

_____ _____ _____
Number **Date** **Coverage**

_____
Name and Location of Agency

_____
Address of Agency

_____
(Area Code) Telephone Number