

PROJECT APPROACH & SCHEDULE

SCOPE OF SERVICES

Basic Services

Consultant will perform the following phases of Basic Services in relation to the Site:

1. Phase I Environmental Site Assessment
2. Hazardous Building Material Assessment
3. Building Conditions Assessment
4. Project Reporting

The specific tasks Consultant will perform as part of the Basic Services in relation to the Site are as follows:

1. Phase I Environmental Site Assessment | \$5,000

Client has requested that Consultant conduct a Phase I ESA in conformance with the ASTM Designation E-1527-13 "Standard Practice for Environmental Site Assessment: Phase I Environmental Site Assessment Process."

As set forth more fully below, the ASTM E-1527-13 standard requires Client to complete certain tasks and inquiries and provides Client with the option to share that information with Consultant. These inquiries will be sent to Client in the form of a User Questionnaire. The Questionnaire should be completed by the person with the most detailed knowledge of the property. This Questionnaire should be completed and returned to the Consultant as soon as possible after the authorization to proceed in order that the Consultant may visit the property, perform the Site reconnaissance, and meet the Report due date. If Client does not share the information, Consultant may likely identify the absence of this information as a data gap. If such data gap is deemed significant, Consultant may suggest further action be taken (see Section 1.1, Data Gaps).

Consultant will seek to identify conditions indicative of releases and threatened releases of hazardous substances and petroleum products at, in, on or under the Site through gathering information of: (1) current and past property uses and occupancies; (2) current and past uses of hazardous substances and petroleum products; (3) waste management and disposal activities; (4) current and past corrective actions and response activities at the Site; (5) engineering controls at the Site; (6) institutional controls at the Site; and (7) properties adjoining or located nearby the Site. The goal of the process will be to identify recognized environmental conditions ("RECs"), historical recognized environmental conditions ("HRECs"), business environmental risks ("BERs"), and de minimis conditions.

Consultant will obtain this information through:

Interviews

1. It is imperative that the Key Site Manager(s), which may include the property owner, operators and occupants of the Site, is/are available during the Site visit for Consultant to interview. Consultant will work with the Site representative to identify this/these individuals prior to visiting the Site. In addition, Consultant will need to have access to this/these individuals during the interview process. The identity of this/these individuals will be discussed more fully with Client prior to the Site visit.

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2. Consultant is relying on Client to provide Consultant with contact information for the above individual(s). In the cost presented herein, Consultant has not allowed time to conduct detailed searches for these individuals or for information on them. If Client wishes Consultant to pursue these contacts, Consultant can complete this work on a time and material basis.

Review of Historical Sources of Information

1. The ASTM E-1527-13 standard requires an identification of all obvious uses of the Site from the present back to the first developed use or to 1940, whichever is earlier. Only those standard historical sources considered necessary and reasonably ascertainable will be reviewed.

Review of Federal, State, Tribal, and Local Government Records

1. Consultant will conduct a review of regulatory databases information using reasonably ascertainable environmental databases for the geographical area in question.

Site Reconnaissance/Visual Inspections of the Facility and Adjoining Properties

1. Consultant will conduct a reconnaissance of the Site to observe current conditions and obtain information indicating the likelihood of identifying RECs. During the Site visit, the accessible portions of the property and any Site building(s) will be traversed, including the accessible portions of the perimeter of the Site and a visual assessment will be made for the presence or evidence of releases or threatened releases of hazardous substances and petroleum products as well as areas where hazardous substances and petroleum products have been used, stored, treated, handled, or disposed. Consultant will document the current conditions of the Site with photographs.
 2. During the Site visit, Consultant will observe and evaluate adjacent properties and the local area, as deemed necessary, for their potential to environmentally impact the Site. Consultant will document the current condition of the adjacent properties and local area, as deemed necessary, with photographs. Consultant will not physically visit adjacent properties unless permission from the off-site property owner has been granted. Consultant will document any limitations to the Site reconnaissance. This will include areas at the Site that Consultant could not access or observe, and limitations associated with accessing/observing adjacent properties. These limitations may be determined to be data gaps.
- 1.1 **Data Gaps.** Consultant will identify any data gaps that were encountered while completing the Phase I ESA. The report will identify and comment on the significance of data gaps that affect Consultant's ability to identify conditions indicative of a release or threatened release of hazardous substances or petroleum products and will document the sources of information that were consulted to address the data gap.

Note: Collection of building materials or environmental media such as soil, sediment, ground water, surface water, etc. is not part of the Phase I Scope of Work as designated by ASTM E-1527-13 but can be completed as Additional Services. The Phase I ESA is not intended to identify materials that may be buried or materials that are not visible. In addition, the scope of work completed in accordance with the ASTM E-1527-13 does not include the completion of a Vapor Encroachment Screening in accordance with ASTM E-2600-10.

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2. Building Conditions Assessment.

2.1. Architectural Review | \$9,500

Consultant will review any reports or documents describing the building that may be available in preparation for field observations. Following review of available documents, Consultant will mobilize the architect and one engineer to visit the building to make visual observations of the building exterior, interior, and systems. Building observations will be non-invasive. No destructive testing will be undertaken. A report will be issued to summarize observations made. Observations will include:

Building Exterior: Consultant will review the building roof, windows, doors, and entrances to determine their condition and provide an opinion of remaining serviceable lifespan, and an opinion of the potential to bring to a current useful condition.

Building Interior: Consultant will visit all floors of the building including lower levels to determine the condition of building interiors. Extent and location of observations will be dependent upon access arranged by Client.

Building and Life Safety Code Improvements and General Accessibility: Scope outline will include major code improvements to bring the building to current code as its original use classification; however, a detailed code review and accessibility is not included in the scope of work.

Building Assessment Report: Based on the review with Client, the Consultant will prepare and issue the final report to outline observations regarding the condition of the building exterior, interior, and systems. The report will identify potential corrective work required for the building and its systems and will be supported by representative photographs and narratives.

2.2. Structural Review | \$7,300

The Consultant will visit the project Site to review the existing conditions of the building's structural components.

2.2.1 It is assumed that the Client will provide safe access to the buildings including roofs. This effort will not use any destructive investigative methods, so unobserved areas, concrete members and foundations will be evaluated based on engineering judgement.

2.2.2 Based on the gathered information, the Consultant will prepare a final report that will describe the existing building structures, identify any observed structural deficiencies or deteriorations, and provide any recommendations for repairs if necessary. This report will include our assessments and recommendations and will include photos of representative areas.

2.3. Mechanical, Electrical, Plumbing and Fire Protection Review | \$8,500

The Consultant will visit the project Site to review the existing conditions of the building's Mechanical, Electrical, Plumbing and Fire Protection components.

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Mechanical: Consultant will perform an evaluation of the HVAC equipment and systems and evaluation of distribution system. The intent is to review the adequacy, capacity and condition of the heating and cooling systems.

Electrical: Consultant will inspect the electrical systems survey of the main service equipment, an inspection of the general distribution panels, lighting, emergency lighting and exit signage. The main fire alarm system and equipment will be evaluated as a general assessment of placement of manual stations, audio/visual alarms and their conditions.

Plumbing: Consultant will inspect the condition of the water distribution systems, including cold and hot water systems and water heaters, drainage systems and fixtures.

Fire Protection: Consultant will evaluate the main fire protection service entrance, and riser systems, including back flow provisions, alarm and detection. A sample of branch distribution and head locations will be evaluated.

Report: Consultant will prepare a final report based on field observations, interviews and review of design drawings, as-built documents and other information provided by Client. The completed report will include an executive summary that will be used as a general introduction and summary of the report. The report will provide a general description of the property and improvements and comment generally on the conditions observed. Critical repairs and life safety issues will be identified and addressed.

3. Hazardous Building Materials Screening | \$5,000

This survey will include a non-destructive survey of the buildings located on the Site. This survey will be a screen of potential suspect materials and will not be performed in compliance with NESHAP regulations. A full NESHAP survey will be required prior to any renovation or demolition of the structures. This survey is being performed with limited sampling for informational purposes. Samples will be collected in unobtrusive locations and include the following materials:

The buildings at the Site are listed as being built between 1955 through 1985. The time frame for PCB building materials is between 1950's through 1978. Buildings constructed in that time frame will require assessment for PCB materials. Those buildings constructed after 1979 will not require assessment for PCB materials. When the property is scheduled for renovation or demolition, PCB sampling can be performed and tailored to the planned project. No PCB samples will be collected at this time since identification of PCB materials would trigger the requirement for remediation by regulation. A visual survey of potential PCB materials will be performed, and recommendations provided.

4. Report Preparation (Arch/Structural/MEP) | \$4,300

Consultant will provide separate reports for the Phase I ESA, the Building Conditions Assessment and the Hazardous Materials Assessment. Each report will identify the methods and findings of the assessments, as well as any recommendations as applicable.

5. Expenses | \$900

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SCHEDULE

ACTION ITEM	TIMEFRAME
Phase I Environmental Site Assessment – Field Work Review of Plans and Documents	2 weeks (Concurrent)
Field Work for MEP/Arch/Hazardous Materials Testing Field Work	1 week
Laboratory Testing Results	1 week
Final Reports with Cost Estimates	3 weeks

COMPLETE AND RETURN

RFP #20-08

You are required to furnish the following information to the Town of Hamden:

Name and address of Company (Print or type) BL Companies Connecticut, Inc.
355 Research Parkway
Meriden, CT 06450

Lump sum price for equipment, material, and labor: \$ 40,500.00

\$Forty Thousand Five Hundred Dollars
WRITTEN AMOUNT

Name and Title of Agent of Company (Print or type) Derek Kohl, PE, Vice President

Signature:  Date: 2/25/2020

Telephone: 203.630.1406

Email: DKohl@blcompanies.com

Fax: 203.630.2615

Federal I.D. Number: 34-2021431

Start Date _____

Completion Date _____

Current Insurance must be on File or provided



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/12/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Smith Insurance Brown & Brown of CT, Inc. 55 Capital Blvd. Rocky Hill CT 06067		CONTACT NAME: Sarah Nave PHONE (A/C, No, Ext): (860) 665-9430 E-MAIL ADDRESS: snave@bbofct.com		FAX (A/C, No):	
INSURED BL Companies Connecticut, Inc. 355 Research Parkway Meriden CT 06450		INSURER(S) AFFORDING COVERAGE		NAIC #	
		INSURER A: The Charter Oak Fire Insurance Company		25615	
		INSURER B: Travelers Property Casualty Company of America		25674	
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

COVERAGES **CERTIFICATE NUMBER:** 20 BLC CT, Inc. **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION WAIVED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y		P6305196P353COF20	01/17/2020	01/17/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			8102L8564472042	01/17/2020	01/17/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			CUP0K9022562043	01/17/2020	01/17/2021	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	UB9J1261322043	01/17/2020	01/17/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Valuable Papers			P6305196P353COF20	01/17/2020	01/17/2021	Per Location \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project/Site: RFP #20-08 High Meadows Building Evaluation Services.
Additional Insured: Town of Hamden

CERTIFICATE HOLDER Town of Hamden 2750 Dixwell Avenue Hamden CT 06518	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Sarah Nave</i>
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/11/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Smith Brothers Insurance, LLC. 68 National Drive Glastonbury, CT 06033	CONTACT NAME: Kristen D. Kane PHONE (A/C, No, Ext): (860) 430-3258 E-MAIL ADDRESS: kkane@SmithBrothersUSA.com		FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE INSURER A: Beazley Insurance Company		NAIC # 37540
INSURED BL Companies Connecticut, Inc. 355 Research Parkway Meriden, CT 06450	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED: RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N if yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liab			V11AE5180801	6/17/2018	6/17/2020	Each Claim 2,000,000 Aggregate 2,000,000
A				V11AE5180801	6/17/2018	6/17/2020	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) FOR PROFESSIONAL LIABILITY COVERAGE, THE AGGREGATE LIMIT IS THE TOTAL INSURANCE AVAILABLE FOR CLAIMS PRESENTED WITHIN THE POLICY PERIOD FOR ALL OPERATIONS OF THE INSURED. THIS LIMIT WILL BE REDUCED BY PAYMENTS OF CLAIMS AND EXPENSES. THIS INSURANCE IS NOT FOR A SPECIFIC PROJECT. RETRO DATE: FULL PRIOR ACTS. ANNUAL REINSTATEMENT OF LIMITS APPLIES.

Re: RFP #20-08 High Meadows Building Evaluation Services.

CERTIFICATE HOLDER Town of Hamden 2750 Dixwell Avenue Hamden, CT 06518	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Kimberly S. Connolly</i>
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