

**TOWN OF GLASTONBURY
PROCUREMENT NOTICE
REQUEST FOR PROPOSAL
WATER TREATMENT SYSTEM FOR WINTER HILL FARM
RPGL-2013- 19**

The Town of Glastonbury will be accepting proposals from qualified individuals or firms to provide and install a water treatment system for the Winter Hill Farm, 177 Bailey Road, Glastonbury, CT. Proposals shall provide technical data for components to be provided, pricing proposals, and other data necessary in order to determine the best value.

There will be a PRE-PROPOSAL MEETING held at Winter Hill Farm, 177 Bailey Road, Glastonbury on March 21, 2013 at 2:00 p.m.

Proposals must be submitted to the Purchasing Agent no later than **Thursday March 28, 2013 at 11:00 a.m.**

LATE PROPOSALS WILL NOT BE CONSIDERED. COPIES OF THE PROPOSAL ARE AVAILABLE ON THE TOWN'S WEBSITE AT www.glastonbury-ct.gov.

Mary F. Visone
Purchasing Agent

TABLE OF CONTENTS

| | Page No. |
|--|-----------------|
| Section I General Information | 3 |
| Section II Considerations and Restrictions | 3 |
| Section III Submission of Proposal | 4 |
| Minimum Requirements | 4 |
| Term of Service | 4 |
| Site Inspection | 5 |
| Proposal Instructions | 5 |
| Evaluation Criteria | 8 |
| Selection Process | 8 |
| Timeline | 9 |
| Insurance Requirements | 9 |
| Indemnification | 10 |
| Attachments | |
| • Attachment A – Selected Plan Pages | |
| • Attachment B - Town of Glastonbury Response Page | 12 |
| • Attachment C – Statement of Non-Collusion | 13 |

SECTION I – GENERAL INFORMATION

Background – The Winter Hill Farm is currently leased as a horse boarding and training facility. The facility is served by an on- site well. Current testing of the well water shows elevated amounts of iron and manganese.

General Intent - It is the general intent to provide a design and installation of a system to remove elevated levels of iron and manganese and provide 25 gpm of water that meets State of CT secondary drinking water standards. The design and installation will include all equipment and materials to provide desired results and also include pricing for yearly service through June 30, 2016 including all labor and materials. The Town will install any discharge structures required to accommodate the backwash from the system. Also required will be schematics, component information and a schedule for installation

Existing Facility – Background information is included in Attachment A.

SECTION II – CONSIDERATIONS AND RESTRICTIONS

- The successful respondent shall ensure the system will comply with all applicable codes. The building will be available for work immediately however, work schedules and locations will need to be coordinated on a daily basis with the Tenant and Facilities Department. Hours available for work will be from 7:00 AM to 5:00 PM, Monday through Friday, holidays excepted. Work on weekends and evenings may be scheduled, as necessary.
- The proposed system shall take into account ease of maintenance of the units and subsequent maintenance as well as cost and ability to be serviced by an independent third party provider.
- Vendors may propose more than one alternative to satisfy the Town's requirement. For each alternative proposed the following information shall be provided, at a minimum:
 - Price to perform the work.
 - Technical data for each of the components proposed for installation including layout, configuration piping, make, model, size, and quantities of components to be provided, enclosures if necessary and any other data necessary to evaluate the applicability of the system.
 - Complete scope of work included in the proposal and any work not included in the proposal but required to make the system fully functional.
 - A schedule indicating major milestones for installation of the system if required, removal of existing components, operational testing, and operations and maintenance training of Town staff and tenants.
 - Warranties available for proposed system and availability of extended warranties
 - Any premium costs associated with system outside of original installation costs
 - Names and phone numbers of references for similar work performed on facilities in Connecticut
- All drawings, reports, data, and other documents prepared by the Vendor according to this Agreement shall be submitted to the Town for its review and approval. Resulting

work products of the Vendor pursuant to this solicitation shall become property of the Town of Glastonbury.

- No such approval shall in any way be construed to relieve the Vendor of responsibility for technical adequacy or operate as a waiver of any of the Town's rights under this Agreement. The Vendor shall remain liable to the Town according to applicable laws and practices for all damages to the Town caused by the Vendor's negligent performance of any of the services furnished under this Agreement.
- If necessary, the Vendor shall conduct regular meetings with the Town, and other appropriate parties, at a location established by the Town to review progress. The Vendor will provide written notes of each meeting to all attending parties before the next meeting.
- Consideration will be given to the type of system proposed, the associated cost, the yearly maintenance costs and the time required to provide and install the units.
- System proposed shall also be able to be serviced by a third party vendor without any proprietary restrictions.
- **The Town shall not be obligated to accept any proposal and the Town shall reserve the sole right to determine the appropriateness of any proposal for this work.**

SECTION III - SUBMISSION OF PROPOSAL

MINIMUM REQUIREMENTS

- Vendor shall be licensed by the State of Connecticut to perform the work required and involved.
- Vendor shall have an assigned project manager to oversee this work and act as liaison to the Town.
- Vendor shall demonstrate sufficient staff resources to perform the work.
- Vendor shall have demonstrated experience designing and installing similar systems in facilities within the past five (5) years.

TERM OF SERVICE

The selected firm will be expected to commence services within 15 days of contract execution or on such other schedule as may be agreed to with the Town. The Town anticipates allocating up to 2 weeks of overall time for the project described herein including data collection, meetings, consultant preparation, etc. The Town of Glastonbury reserves the right to cancel this proposal process at any time should any of the following conditions exist:

- Funds are not appropriated to allow continuance of this contract.
- The Town, through changes in its requirements or method of operation, no longer has a need for this service.

- The Town is not satisfied with the level of services provided under the contract or the contractor fails to comply with any of the terms and conditions outlined in the contract.

SITE INSPECTION

A **site inspection** is scheduled for 2:00 p.m. **March 21, 2013** at the site at 177 Bailey Road, Glastonbury, CT 06033.

PROPOSAL INSTRUCTIONS

- By submitting a proposal, you represent that you have thoroughly examined and become familiar with the Scope of Services outlined in this RFP and you are capable of performing the work to achieve the Town's objectives.
- All firms are required to submit a **clearly marked** original and six (6) copies of their proposal to Mary F. Visone, Purchasing Agent, 2155 Main Street, Glastonbury, CT by the date and time listed in the proposal response page. All proposals will be opened publicly and recorded as received. Respondents may be present at the opening; however, there will be no public reading of Proposals. Proposals received later than the time and date specified will not be considered. The proposal must be submitted in a sealed envelope or package and the outside shall be clearly marked as follows:

**SEALED REQUEST FOR PROPOSAL
PROCUREMENT NOTICE
WATER TREATMENT SYSTEM WINTER HILL FARM
RPGL-2013-19
March 28th, 2013
11:00 AM**

- All respondents are required to submit the information detailed below. **Responses shall be organized and presented in the order listed below to assist the Town in reviewing and rating proposals.** Responses should be presented in appropriate detail to thoroughly respond to the requirements and expected services described herein.
 1. Table of Contents, to include clear identification of the material provided by section and number.
 2. A letter of transmittal indicating the firm's interest in providing the service and any other information that would assist the Town in making a selection. This letter must be signed by a person legally authorized to bind the firm to a contract.
 3. Name and telephone number of person(s) to be contacted for further information or clarification.
 4. Copy of State of Connecticut license to perform the work if required.
 5. Name and qualifications of assigned project manager and a list of staff members who would be involved with the project, including their assigned roles and a description of their background and experience.

6. A background statement including a description of relevant experience of the firm/individual submitting the proposal.
7. For each alternative proposed the following information:
 - a. Price to perform the work.
 - b. Technical data for each of the system(s) and components proposed for installation including layout, configuration, make, model, network requirements, size, and quantities of components to be provided, and any other data necessary to evaluate the applicability of the system.
 - c. Complete scope of work included in the proposal and any work not included in the proposal but required to make the units fully functional.
 - d. A schedule indicating major milestones for installation of new system, removal of existing components, operational testing, and operations and maintenance training of Town staff.
 - e. Warranties provided.
 - f. Any premium costs associated with work outside of normal work hours that is not included in the basic price proposal.
 - g. Names and phone numbers of references for similar work performed.
8. Respondent shall provide a list of 3-5 references and examples of previous similar projects successfully completed within the last five years with the contact name, address and telephone number of the owners' representative in each project.
9. A concluding statement as to why the respondent is best qualified to meet the needs of the Town.
10. Proposal Response Form (**ATTACHMENT B**).
11. Description of any exceptions taken to this RFP. If any proposal involves any exception from the stated requirements and specifications, they must be clearly noted as exceptions and attached to the proposal.
12. Respondent is required to review the Town of Glastonbury Code of Ethics adopted July 8, 2003 and effective August 1, 2003. Respondent shall acknowledge that they have reviewed the document in the area provided on the attached Ethics Acknowledgement form included on **ATTACHMENT B**. The selected respondent will also be required to complete and sign a Consultant Acknowledgement Form prior to award. The Code of Ethics and the Consultant Acknowledgment Form can be accessed at the Town of Glastonbury website at www.glastonbury-ct.gov. Upon entering the website click on "General Information, then Bids & RFPs," which will bring you to the links for the Code of Ethics and the Consultant Acknowledgement Form. If the respondent does not have access to the internet, a copy of these documents can be obtained through the Purchasing Department at the address listed within this proposal.
13. Statement of Non-Collusion (**ATTACHMENT C**).
14. **Non Resident Contractors (IF APPLICABLE)**

The Town is required to report names of nonresident (out of state) Contractors to the State of Connecticut, Department of Revenue Services (DRS) to ensure that Employment Taxes and other applicable taxes are being paid by Contractors. **Upon award, all nonresident contractors must furnish a five percent (5%) sales tax guarantee bond (state form AU-766), or a cash bond for 5% of the total contract price (state form AU-72) to DRS even though this project is exempt from most sales and use taxes.**

See State Notice to Nonresident Contractors SN 2005(12). If the above bond is not provided the Town is required to withhold 5% from Contractor's payments and forward it to the State DRS.

Contractor must promptly furnish to the Town a copy of the **Certificate of Compliance** issued by the State DRS.

15. Any technical questions regarding this RFP shall be made in writing and directed to Mr. David Sacchitella, Building Superintendent, at (860) 652-7706 or via e-mail at Dave.Sacchitella@glastonbury-ct.gov. Administrative questions should be directed to Mary F. Visone, Purchasing Agent at (860) 652-7588. All questions, answers, and/or addenda, as applicable, will be posted on the Town's website at www.glastonbury-ct.gov (Upon entering the website click on Bids & RFPs). **It is the respondent's responsibility to check the website for addenda prior to submission of any proposal.**

Note: Responses to requests for more specific contract information than is contained in the RFP shall be limited to information that is available to all offerors and that is necessary to complete this process. The request must be received at least five (5) business days prior to the advertised response deadline.

16. The Town of Glastonbury is dedicated to waste reduction and the practice of using and promoting the use of recycled and environmentally preferable products. Respondents are encouraged to submit RFP responses that are printed double-sided (except for the signed proposal page) on recycled paper, and to use paper dividers to organize the RFP for review. All proposal pages should be secured with a binder clip, staple or elastic band, and shall not be submitted in plastic binders or covers, nor shall the proposal contain any plastic inserts or pages. We appreciate your efforts towards a greener environment.
- Failure to include any of the above-referenced items in the submitted PROPOSAL may be grounds for disqualifying said proposal.

EVALUATION CRITERIA

- The Town of Glastonbury shall select the responsible and responsive Proposal which is determined by the Town to be the best suited, most advantageous, and provides the best value to the Town on the basis of the criteria included in this Request for Proposal. The Town expressly reserves the right to negotiate with the selected Proposer prior to an award of any contract pursuant to this RFP. Best value shall be determined by consideration of some or all of the following factors as deemed appropriate by the Town.
 - The qualifications and experience of the vendor and its designated account representative. Successful performance of similar work on other accounts.
 - Completeness of the proposal and adequacy of the information provided.
 - Technical Solution/Approach to Project: Types, capabilities, efficiency, applicability, ease of operation and maintenance, warranties, etc. of system and components proposed.
 - Schedule.
 - Total Cost/Overall Value: Initial price to provide and install and incentives and rebates available and confirmed.
 - The number, scope, and significance of conditions or exceptions attached or contained in the proposal.

SELECTION PROCESS

- This request for proposals does not commit the Town of Glastonbury to award a contract or to pay any costs incurred in the preparation of a proposal to this request. All proposals submitted in response to this request become the property of the Town of Glastonbury. The Town of Glastonbury reserves the right to accept or reject any or all proposals received as a result of this request, to negotiate with the selected respondents, the right to extend the contract for an additional services, or to cancel in part or in its entirety the request for proposals, if it is in the best interests of the Town to do so.
- An Evaluation Committee, appointed by the Town Manager, will evaluate all proposals received for completeness and the respondent's ability to meet all requirements as outlined in this RFP.
- Following review and evaluation of proposals, the Town reserves the right to request certain additional information. Based on review and rating of proposals, if determined to be necessary, a short list of respondents may be invited to interview with the Town Selection Committee.
- Additional technical and/or cost information may be requested from any respondent by the evaluation committee prior to, during, or after the interview for clarification purposes, but in no way changes the original proposal submitted. Interviews are at the option of the evaluation committee and may or may not be conducted.

- Based on the results of the interview process, the Town will review the Scope of Services, proposed price, and other factors with the top-rated firm(s) and negotiate a specific agreement based on these discussions.
- The selected respondent will be issued a purchase order to perform the work.

TIMELINE

The Town intends to adhere to the schedule listed below as closely as possible, but reserves the right to modify the schedule in the best interest of the Town as required.

| | |
|----------------------------------|-----------------------------|
| Publicize RFP | March 15, 2013 |
| Pre-proposal Meeting | March 21, 2013 |
| RFP Due Date | March 28, 2013 @ 11:00 A.M. |
| Shortlist of Submittals Received | TBD, if necessary |
| Interviews with Top Respondents | TBD, if necessary |
| Contract Effective Date | TBD |

INSURANCE

The Bidder shall, at its own expense and cost, obtain and keep in force during the entire duration of the Project or Work the following insurance coverage covering the Bidder and all of its agents, employees and sub-contractors and other providers of services and shall name the **Town and its employees and agents as an Additional Insured** on a primary and non-contributory basis to the Bidders Commercial General Liability and Automobile Liability policies. **These requirements shall be clearly stated in the remarks section on the Bidders Certificate of Insurance.** Insurance shall be written with Carriers approved in the State of Connecticut and with a minimum Best's Rating of A-. In addition, all Carriers are subject to approval by the Town. Minimum Limits and requirements are stated below:

1) Worker's Compensation Insurance:

- Statutory Coverage
- Employer's Liability
- \$100,000 each accident/\$500,000 disease-policy limit/\$100,000 disease each employee

2) Commercial General Liability:

- Including Premises & Operations, Products and Completed Operations, Personal and Advertising Injury, Contractual Liability and Independent Contractors.

- Limits of Liability for Bodily Injury and Property Damage
Each Occurrence \$1,000,000
Aggregate \$2,000,000 (The Aggregate Limit shall apply separately to each job.)
- A Waiver of Subrogation shall be provided

3) Automobile Insurance:

- Including all owned, hired, borrowed and non-owned vehicles
- Limit of Liability for Bodily Injury and Property Damage:
Per Accident \$1,000,000

4) Professional Liability:

- Limit of Liability: \$1,000,000

5) Umbrella Liability:

- Limit of Liability: \$2,000,000 Per Occurrence & Annual Aggregate

Coverage is to apply in excess of all primary insurance policies, coverages, and limits specified above

The Bidder shall direct its Insurer to provide a Certificate of Insurance to the Town before any work is performed. The awarded Consultant(s) will be responsible to provide written notice to the Owner 30 days prior to cancellation of any insurance policy. The Certificate shall evidence all required coverage including the Additional Insured and Waiver of Subrogation. The Bidder shall provide the Town copies of any such policies upon request.

INDEMNIFICATION

To the fullest extent permitted by law, the Bidder shall indemnify and hold harmless the Town and its consultants, agents, and employees from and against all claims, damages, losses and expenses, direct, indirect or consequential (including but not limited to fees and charges of engineers, attorneys and other professionals and court and arbitration costs) arising out of or resulting from the performance of the Bidder's work, provided that such claim, damage, loss or expense is caused in whole or in part by any negligent act or omission by the Bidder, or breach of its obligations herein or by any person or organization directly or indirectly employed or engaged by the Bidder to perform or furnish either of the services, or anyone for whose acts the Bidder may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder.

The above insurance requirements are the Town's general requirements. Insurance requirements with the awarded respondent are subject to final negotiations.

ATTACHMENT A

See attached plans/data:

- **Site plan, recent water test results**

177 Bailey Street



See page 2 for Legend and Disclaimer



Glastonbury, CT

9/27/2012

Page 1 of 2

WELL COMPLETION REPORT

WDD-5 12-69 REV. 9-71

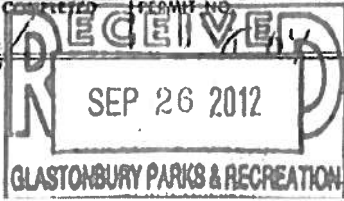
STATE OF CONNECTICUT
WELL DRILLING BOARD
 State Office Building
 HARTFORD, CONNECTICUT 06116

| |
|----------------|
| Do NOT fill in |
| STATE WELL NO. |
| OTHER NO. |

| | | | | |
|----------------------|---|---|--|--|
| OWNER | NAME <i>Kenneth Prows</i> | | ADDRESS <i>151 Bartley Rd Glastonbury</i> | |
| LOCATION OF WELL | (No. & Street) <i>183 Bartley Rd</i> | | (Town) <i>Glastonbury</i> | |
| PROPOSED USE OF WELL | <input checked="" type="checkbox"/> DOMESTIC | <input type="checkbox"/> BUSINESS ESTABLISHMENT | <input checked="" type="checkbox"/> FARM | <input type="checkbox"/> TEST WELL |
| | <input type="checkbox"/> PUBLIC SUPPLY | <input type="checkbox"/> INDUSTRIAL | <input type="checkbox"/> AIR CONDITIONING | <input type="checkbox"/> OTHER (Specify) |
| DRILLING EQUIPMENT | <input type="checkbox"/> ROTARY | <input checked="" type="checkbox"/> COMPRESSED AIR PERCUSSION | <input type="checkbox"/> CABLE PERCUSSION | <input type="checkbox"/> OTHER (Specify) |
| CASING DETAILS | LENGTH (feet) <i>40</i> | DIAMETER (Inches) <i>6</i> | WEIGHT PER FOOT <i>17</i> | DRIVE SHOE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | | WAS CASING GROUTED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| YIELD TEST | <input type="checkbox"/> DAILED | <input type="checkbox"/> PUMPED | <input checked="" type="checkbox"/> COMPRESSED AIR | HOURS <i>4</i> |
| WATER LEVEL | MEASURE FROM LAND SURFACE—STATIC (Specify feet) | | DURING YIELD TEST (feet) | |
| | <i>70</i> | | <i>100</i> | |
| SCREEN DETAILS | Depth of Completed Well in feet below land surface: <i>140</i> | | | LENGTH OPEN TO AQUIFER (feet) |
| | SLOT SIZE | DIAMETER (Inches) | IF GRAVEL PACKED: | Diameter of well including gravel pack (Inches): |

| DEPTH FROM LAND SURFACE FEET to FEET | | FORMATION DESCRIPTION | Sketch exact location of well with distances, to at least two permanent landmarks. |
|---|--------------------|-----------------------|--|
| 0 | 31 | Hard Pan | |
| 31 | 100 | Granite | |
| If yield was tested at different depths during drilling, list below | | | |
| FEET | GALLONS PER MINUTE | | |
| <i>101</i> | <i>25</i> | | |

| | | | | |
|--------------------------------------|------------|-------------------------------|---------------------------------|--|
| DATE WELL COMPLETED <i>9-1-11</i> | PERMIT NO. | REGISTRATION NO. <i>65</i> | DATE OF REPORT <i>9-1-11</i> | WELL DRILLER (Signature) <i>[Signature]</i> |
|--------------------------------------|------------|-------------------------------|---------------------------------|--|



LOCAL DIRECTOR OF HEALTH



STATE OF CONNECTICUT

Department of Public Health Laboratory
 Clinical Testing License: CL-0197
 10 Clinton St.
 P.O. Box 1689
 Hartford, CT 06144
 Telephone (860) 509-8500

| NO. | ACCESSION NO. | ACCOUNTING | PAGE | PAGE |
|-------------|---------------|------------|------|------|
| NR, GLASWME | 22406004 | D06033 | 0 | 1 |

INFORMATION
 054GLASTONBURY
 TOWN OF GLASTONBURY
 WINTER HILL FA
 GLASTONBURY CT 06033

GLASTONBURY DIRECTOR OF HEALTH
 DAVID W. BOONE RS
 PO BOX 6523
 GLASTONBURY CT 06033

| COLLECTED | RECEIVED | REPORTED |
|-------------------|-------------------|-------------------|
| 04/01/10 11:06 | 04/01/10 12:00 | 04/13/10 14:20 |

| REPORT | FINAL REPORT | COMMENT |
|--------|--------------|---------|
|--------|--------------|---------|

| TEST(S) | RESULT(S) |
|---------|-----------|
|---------|-----------|

| | |
|------------------------------|--|
| | SAMPLING POINT: PRESSURE TANK COLLECTOR: KENDRICK TITLE: SANITARIAN PRIVATE WELL |
| *** | |
| APPARENT COLOR | 48 |
| TRUE COLOR | 38 |
| ODOR | 3 HYDROGEN SULFIDE |
| TURBIDITY | 22. |
| PH | 6.9 |
| AMMONIA | <0.05 |
| *** UNITS: MG/L UNLESS NOTED | |
| ALKALINITY | 46 |
| HARDNESS | 45 |
| CHLORIDE | 11 |
| NITRATE | <0.2 |
| NITRITE | <0.2 |
| IRON | 12 |
| MANGANESE | 0.32 |
| SODIUM, DIRECT | 8.4 |

RECEIVED
 APR 21 2010
 GLASTONBURY HEALTH DEPT.

M. G. ...
 4/19/10

 ** END OF REPORT **

HAIR-24-2010 09:03 AM BUFFORD DRILLING
Mar 23 10 04:47 EnviroTech Laboratory

060 633 4000

P. 02

060005 0004
wintehill farm

ENVIROTECH LABORATORY, LLC

77 COOK HILL ROAD • WINDSOR, CONNECTICUT 06095

MARYELLEN DLUZIO

TELEPHONE:

(860) 608-7249

March 23, 2010

Bufford Drilling
320 Spring St. Ext
Glastonbury, Ct. 06033

Dear Sir:

We have the following to report on the sample submitted to this Laboratory on March 22, 2010

Sample Number: 77650

Mark: water sample collected 3/22/10 by Uwe Roehrl from
Lot No. -, 177 Bulley Rd., Glastonbury, Ct.

| TEST PARAMETERS | CURRENT TEST RESULTS (In mg/L) | MAXIMUM CONTAMINATION LEVELS (MCL) |
|------------------|-----------------------------------|------------------------------------|
| ODOR | 0 | NO MCL |
| TURBIDITY | 0 | NO MCL |
| COLOR | 30 | NO MCL |
| PH | 6.32 | NO MCL |
| NITRITE NITROGEN | < 0.001 | 1.0 mg/L |
| NITRATE NITROGEN | 2.00 | 10.0 mg/L |
| CHLORIDE | 33 | 250 mg/L |
| HARDNESS | 100 | NO MCL |
| IRON | 9.95 | NO MCL |
| MANGANESE | 0.45 | NO MCL |
| SODIUM | 13.3 | NO MCL |
| SULFATE | 26 | NO MCL |

BACTERIOLOGICAL EXAM

Number of Coliform Bacteria
Per 100 ml's (membrane filter) 0 0

All parameters analyzed are below the Maximum Contamination Levels (MCL's) for potable water and meet the drinking water standards established by the Conn. State Health Department except for iron and odor. The iron content is extremely high and well above the recommended 0.3 mg/L staining level. The manganese content is above the recommended 0.05 mg/L staining guideline. A faint "sulfur" type odor was detected. If after regular use of this well these parameters do not lower, treatment would be desirable. If there are any questions, we would be pleased to discuss them with you.

Very truly yours,
EnviroTech Laboratory, LLC

Maryellen DLUZIO, a member
PH 0464



Friday, September 14, 2012

Attn: Mr. David Boone
Glastonbury Health Department
2155 Main Street
Glastonbury, CT 06033

Project ID: GLASTONBURY HEALTH CLUB
Sample ID#s: BC65796

This laboratory is in compliance with the NELAC requirements of procedures used except where indicated.

This report contains results for the parameters tested, under the sampling conditions described on the Chain Of Custody, as received by the laboratory.

A scanned version of the COC form accompanies the analytical report and is an exact duplicate of the original.

If you have any questions concerning this testing, please do not hesitate to contact Phoenix Client Services at ext. 200.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Phyllis Shiller".

Phyllis Shiller
Laboratory Director

NELAC - #NY11301
CT Lab Registration #PH-0618
MA Lab Registration #MA-CT-007
ME Lab Registration #CT-007
NH Lab Registration #213693-A,B

NJ Lab Registration #CT-003
NY Lab Registration #11301
PA Lab Registration #68-03630
RI Lab Registration #63
VT Lab Registration #VT11301



Environmental Laboratories, Inc.
 567 East Middle Turnpike, P.O.Box 370, Manchester, CT 06046
 Tel. (860) 646-1102 Fax (860) 646-0823

Analysis Report
 September 14, 2012

FOR: Attn: Mr. David Boone
 Glastonbury Health Department
 2155 Main Street
 Glastonbury, CT 06033

Sample Information

Matrix: DRINKING WATER
 Locallon Code: GLASTHEA
 Rush Request: Standard
 P.O.#:

Custody Information

Collected by: JD
 Received by: LB
 Analyzed by: see "By" below

Date Time

09/10/12 13:45
 09/10/12 14:08

Laboratory Data

SDG ID: GBC65796
 Phoenix ID: BC65796

Project ID: GLASTONBURY HEALTH CLUB
 Client ID: G-10-12

| Parameter | Result | RL/ PQL | Units | DW MCL | Sec Goal | Date/Time | By | Reference |
|--|-----------|------------|-------|-----------|-------------|-----------|----|-----------|
| Iron | 0.27 | 0.005 | mg/L | | 0.3 | 09/13/12 | LK | E200.7 |
| *** Iron exceeds Secondary Goal *** | | | | | | | | |
| Manganese | 0.341 | 0.002 | mg/L | | 0.05 | 09/13/12 | LK | E200.7 |
| *** Manganese exceeds Secondary Goal *** | | | | | | | | |
| Total Metal Digestion | Completed | | | | | 09/11/12 | AG | E200.7 |

RL/PQL=Reporting/Practical Quantitation Level ND=Not Detected BRL=Below Reporting Level (less than the reporting level, the lowest amount the laboratory can detect and report.) MCL = Maximum Contaminant Level MCLG = Maximum Contaminant Level Goal

Comments:

Maximum Contaminant Level (Lower of): 40 CFR Part 141; CT Public Health Code 19-13-B102
 Secondary DW Maximum Contaminant Level Goal (MCLG): (Lower of): 40 CFR Part 143; CT Public Health Code 19-13-B102
 If there are any questions regarding this data, please call Phoenix Client Services at extension 200.
 This report must not be reproduced except in full as defined by the attached chain of custody.

Phyllis Shiller, Laboratory Director
 September 14, 2012

Reviewed and Released by: Johanna Harrington, Project Manager



Environmental Laboratories, Inc.
 587 East Middle Turnpike, P.O.Box 370, Manchester, CT 06045
 Tel. (860) 645-1102 Fax (860) 645-0823

QA/QC Report

September 14, 2012

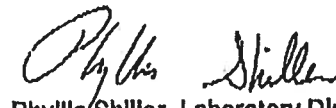
QA/QC Data

SDG I.D.: GBC65796

| Parameter | Blank | Sample Result | Dup Result | Dup RPD | LCS % | LCSD % | LCS RPD | MS % | MSD % | MS RPD | % Rec Limits | % RPD Limits |
|---|-------|---------------|------------|---------|-------|--------|---------|------|-------|--------|--------------|--------------|
| QA/QC Batch 208933, QC Sample No: BC64637 (BC65796) | | | | | | | | | | | | |
| <u>ICP Metals - Aqueous</u> | | | | | | | | | | | | |
| Iron | BRL | 0.181 | 0.185 | 2.20 | 98.2 | 95.5 | 0.7 | 93.3 | 93.3 | 0.0 | 75 - 125 | 20 |
| Manganese | BRL | 0.072 | 0.073 | 1.40 | 95.2 | 93.5 | 1.8 | 91.8 | 91.4 | 0.4 | 75 - 125 | 20 |

If there are any questions regarding this data, please call Phoenix Client Services at extension 200.

- RPD - Relative Percent Difference
- LCS - Laboratory Control Sample
- LCSD - Laboratory Control Sample Duplicate
- MS - Matrix Spike
- MS Dup - Matrix Spike Duplicate
- NC - No Criteria
- Intf - Interference


 Phyllis Shiller, Laboratory Director
 September 14, 2012

Sample Criteria Exceedences Report

GBC65796 - GLASTHEA

| Sample No | Acode | Phoenix Analyte | Criteria | Result | RL | Criteria | RL | Analysis Units |
|-----------|-------|-----------------|--|--------|-------|----------|------|----------------|
| BC65796 | FE-DW | Iron | EPA / 40 CFR 141 DW / 143.3 Secondary MCLS | 9.27 | 0.005 | 0.3 | 0.3 | mg/L |
| BC65796 | MN-DW | Manganese | EPA / 40 CFR 141 DW / 143.3 Secondary MCLS | 0.341 | 0.002 | 0.05 | 0.05 | mg/L |

Phoenix Laboratories does not assume responsibility for the data contained in this report. It is provided as an additional tool to identify requested criteria exceedences. All efforts are made to ensure the accuracy of the data (obtained from appropriate agencies). A lack of exceedence information does not necessarily suggest conformance to the criteria. It is ultimately the site professional's responsibility to determine appropriate compliance.



CHAIN OF CUSTODY RECORD

587 East Middle Turnpike, P.O. Box 370, Manchester, CT 06040
 Email: service@phoenixlabs.com Fax (860) 645-0823
 Client Services (860) 645-8726

Temp Pg of

Data Delivery:

Fax #:
 Email: david.beane@phoenixlabs.com

Customer: GLASTONBURY HIGH SCHOOL
 Address: 115 MAIN ST
GLASTONBURY, CT 06033-6023

Project: GLASTONBURY HIGH SCHOOL
 Report to: HEATH DEPT - DAD
 Invoice to: HEATH DEPT

Project P.O. #:
 Phone #:
 Fax #:

Client Sample - Information - Identification

Sampler's Signature: John R. Dechert Date: 9/10/12

Matrix Code:
 DW=drinking water S=soil/solid O=other
 GW=groundwater SL=sludge A=air

Phoenix Sample # 067910
 Customer Sample Identification G-10-12
 Date Sampled 9/10/12 1:45 PM
 Time Sampled

Analysis Request
Test Water

| | | | | | | | |
|-------------------------------------|-----------------------|----------------------|---------------------|--------------|-------------------|-------------------|----------------|
| Salvage Material (S-Building) (H2O) | GL Soil container () | GL 40 ml VOA Vol () | GL Amber 1000ml () | PL AS 6 () | PL H2SO4 () | PL HNO3 250ml () | Bacteria Boils |
| GL Soil container () | GL 40 ml VOA Vol () | GL Amber 1000ml () | PL AS 6 () | PL H2SO4 () | PL HNO3 250ml () | Bacteria Boils | |
| GL Soil container () | GL 40 ml VOA Vol () | GL Amber 1000ml () | PL AS 6 () | PL H2SO4 () | PL HNO3 250ml () | Bacteria Boils | |
| GL Soil container () | GL 40 ml VOA Vol () | GL Amber 1000ml () | PL AS 6 () | PL H2SO4 () | PL HNO3 250ml () | Bacteria Boils | |
| GL Soil container () | GL 40 ml VOA Vol () | GL Amber 1000ml () | PL AS 6 () | PL H2SO4 () | PL HNO3 250ml () | Bacteria Boils | |

Relinquished by: John R. Dechert
 Accepted by: Chauadine
 Date: 9/10/12 Time: 1408

Turnaround:
 1 Day*
 2 Days*
 3 Days*
 Standard
 Other

CTRE
 RCP Cert.
 GW Protect.
 GA Mobility
 GB Mobility
 SW Protect.
 Res. Vol.
 Ind. Vol.
 Res. Criteria
 Other

MIA
 MCP Cert.
 GW-1
 GW-2
 GW-3
 S-1
 S-2
 S-3
 MWRA eSMART
 Other

Data Format
 Excel
 PDF
 GIS/Key
 EQUIS
 Other

Data Package
 ASP-A
 NJ Reduced Desiv.
 NJ Hazsite EDD
 Phoenix Std Report
 Other

Comments, Special Requirements or Regulations:

State where samples were collected: _____



STATE OF CONNECTICUT
 Department of Public Health Laboratory
 10 Clinton St, Hartford, CT 06106
 Phone: (860) 509-8500
 Fax: (860) 509-8697



ANALYTICAL RESULTS

Workorder: 236719 177 Bailey St Glast 090512

Location Glastonbury

Lab ID: 236719001
 Sample GL9612

Date Received: 9/6/2012 10:27:00 AM Matrix: Drinking Water
 Date Collected: 9/6/2012 10:01:00 AM Description: Town Of Glastonbury

| Parameters | Results | Units | Report Limit | DF Prepared | By | Analyzed | By |
|------------|---------|-------|--------------|-------------|----|----------|----|
|------------|---------|-------|--------------|-------------|----|----------|----|

--Environmental Microbiology--

Analytical Method: Membrane Filtration

| | | | | | | | |
|-------------------------------|---------|--------|--|---|--|----------|-----|
| Iron Bact Gallionella Species | >10,000 | /100mL | | 1 | | 9/5/2012 | GG1 |
|-------------------------------|---------|--------|--|---|--|----------|-----|

**** Comment about analyte above It is difficult to enumerate iron bacteria because of its cellular morphology. The numerical value for this result is an estimated count.

**** Comment about analyte above Significant

REPORT OF ANALYSIS

Connecticut Registration No: PH-0905

EPA Certificate No. 2010CT01

Report ID: 236719 - 2530763

ATTACHMENT B
PROPOSAL RESPONSE PAGE

TOWN OF GLASTONBURY
PROPOSAL
DATE ADVERTISED

3-15-13

RPGL #
DATE / TIME DUE

2013-19
March 28, 2013 @ 11:00
a.m.

WATER TREATMENT SYSTEM WINTER HILL FARM

NAME OF PROPOSAL

Pricing proposals shall include line items for:

SYSTEM \$ _____
YEARLY SERVICE \$ _____

Additionally, proposals shall include:

- a. Hourly labor rates

CODE OF ETHICS:

I / We have reviewed a copy of the Town of Glastonbury's Code of Ethics and agree to submit a Consultant Acknowledgement Form if I / We are selected. Yes _____ No _____ *

*Respondent is advised that effective August 1, 2003, the Town of Glastonbury cannot consider any proposal where the respondent has not agreed to the above statement.

The Respondent acknowledges receipt of the following Addendums:

Addendum #1 _____ Date: _____
Addendum #2 _____ Date: _____
Addendum #3 _____ Date: _____

| | |
|----------------------------------|--------------------------------|
| _____ | _____ |
| Type or Print Name of Individual | Doing Business as (Trade Name) |
| _____ | _____ |
| Signature of Individual | Street Address |
| _____ | _____ |
| Title | City, State, Zip Code |
| _____ | _____ |
| Date | Telephone Number / Fax Number |
| _____ | _____ |
| E-Mail Address | SS # or TIN# |

(Seal – If proposal is by a Corporation)

Attest

ATTACHMENT C

TOWN OF GLASTONBURY
PROCUREMENT NOTICE
REQUEST FOR PROPOSAL
WATER TREATMENT WINTER HILL FARM

NON-COLLUSION STATEMENT

The company submitting this proposal certifies that it is being submitted without any collusion, communication or agreement as to any matter relating to it with any other respondent or competitor. We understand that this proposal must be signed by an authorized agent of our company to constitute a valid proposal.

Date: _____

Name of Company: _____

Name and Title of Agent: _____

By (SIGNATURE): _____

Address: _____

Telephone Number: _____