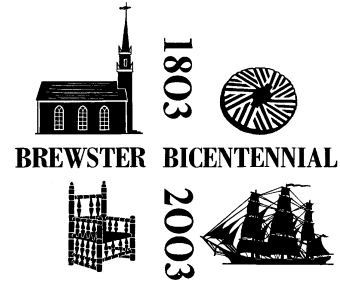




## Department of Public Works

201 Run Hill Road  
Brewster, Massachusetts 02631-1898  
Tel (508) 896-3212  
Fax (508) 896-4540  
James Jones-Foreman



DATE: October 25, 2017  
RE: **TOWN OF BREWSTER SNOW REMOVAL CONTRACTS  
2017/2018 WINTER SEASON**

Please find enclosed the necessary information pertaining to the Brewster Department of Public Works (DPW) Snow Removal Contracts for the 2017/2018 Winter Season.

Vehicle Inspections for the 2017/2018 Snow Removal Contracts shall be held at the Brewster DPW. Please contact DPW Foreman to arrange inspection. Upon completion of successful vehicle inspection and submittal of complete application to the DPW, contracts will be forwarded to the Brewster Town Administrator for approval. **All applications and vehicle inspections shall be finalized by 11/20/17**

### Requirements:

1. A properly equipped, inspected, and functioning vehicle intended for use this season. All plow equipment, sander equipment, and lighting shall be attached and in proper working order. All Contract Equipment shall be mechanically prepared and on call 24 hours per day. Suitable **EMERGENCY LIGHTING**, as determined by the DPW Superintendent or his/her designee, is required on all vehicles.
2. All contract equipment shall be equipped with a **shovel, tow chain, and cellular telephone.**
3. A valid registration certificate is required.
4. Insurance Certificate which names the Town of Brewster as insured for the amounts below. The Insurance Certificate will need to be valid through June 30, 2018.
5. If you do not carry Workmen's Compensation Liability Insurance please be sure to sign the enclosed waiver. Worker's Compensation Liability Insurance or a Waiver is required for all persons operating or riding in a vehicle during snow removal operations.

Anyone failing to meet these requirements at this time **may be excluded** from this year's list of approved Snow Removal Contractors. We appreciate your cooperation in this matter.

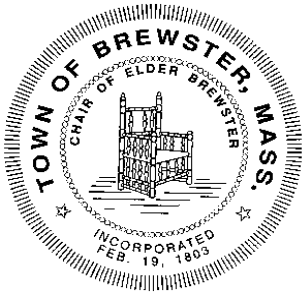
- Contract equipment shall report to their predetermined route immediately upon notification by the DPW Foreman or his/her designee.
- Private Snow Removal Work shall not be performed while actively working for the Town of Brewster (ie on the Town's time).
- Please keep speeds under 25mph
- Any damage that is repetitive or excessive will be the contractor's responsibility to repair damage.

**Failure to comply shall be cause for the Town Administrator to terminate this agreement upon recommendation of the DPW Superintendent.**

**TOWN OF BREWSTER  
2017-2018 SNOW REMOVAL RATE SCHEDULE**

**\*3 Hour MINIMUM for All Sub-Contractors\***

Pick-up (1/2, 3/4, or 1 Ton) w/up to 8' Plow	\$70.00/Hr
6 Wheel 1 Ton Dump Truck w/up to 10' Plow	\$80.00/Hr
6 Wheel Dump Truck less than 26,000 GVW w/9' or 10' Plow	\$85.00/Hr
6 Wheel Dump Truck greater than 26,000 GVW w/up to 11' Plow	TBD
10 Wheel Dump Truck w/up to 11' Plow	TBD
Equipment w/sander extra	\$10.00/Hr
Loader - 1.5 - 3 CY Capacity	\$125.00/Hr
Loader - 3 - 5 CY Capacity	\$150.00/Hr
Back-Hoe	\$125.00/Hr
Skid-Steer	\$75.00/Hr
Trax	\$100.00/Hr
Trax w/ snow blower	\$125.00/Hr
Equipment w/Plows or Snow Blower extra	\$10.00/Hr



# Department of Public Works

201 Run Hill Road  
Brewster, Massachusetts 02631-1898  
Tel (508) 896-3212  
Fax (508) 896-4540  
James Jones-Foreman



## 2017-2018 SNOW REMOVAL CONTRACT EQUIPMENT AGREEMENT VEHICLE INFORMATION

VEHICLE DESCRIPTION #1:

Vehicle \_\_\_\_\_ Weight \_\_\_\_\_  
Plow length \_\_\_\_\_ Plow rate \_\_\_\_\_

REGISTRATION # \_\_\_\_\_

Hauling rate \_\_\_\_\_

Sander rate \_\_\_\_\_

Company Name \_\_\_\_\_

Authorized Signature \_\_\_\_\_, Title \_\_\_\_\_

Name (printed) \_\_\_\_\_

Residential Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Telephone \_\_\_\_\_

Cellular Telephone \_\_\_\_\_

Business FID or Social Security # \_\_\_\_\_

Date \_\_\_\_\_

**VEHICLE DESCRIPTION #2:**

Vehicle \_\_\_\_\_

Weight \_\_\_\_\_

Plow length \_\_\_\_\_

Plow rate \_\_\_\_\_

REGISTRATION # \_\_\_\_\_

Hauling rate \_\_\_\_\_

Sander rate \_\_\_\_\_

Company Name \_\_\_\_\_

Authorized Signature \_\_\_\_\_, Title \_\_\_\_\_

Name (printed) \_\_\_\_\_

Residential Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Telephone \_\_\_\_\_

Cellular Telephone \_\_\_\_\_

Business FID or Social Security # \_\_\_\_\_

Date \_\_\_\_\_

Contract year inclusive: 2017/2018

**2017-2018 TOWN OF BREWSTER  
INSURANCE REQUIREMENTS**

<u>TYPE</u>	<u>LIMITS</u>
WORKMEN'S COMPENSATION	Per Statute
COMPREHENSIVE GENERAL LIABILITY	
Personal Injury	\$100,000 each occurrence \$300,000 Aggregate
Property Damage	\$100,000 each occurrence \$300,000 Aggregate
COMPREHENSIVE AUTOMOBILE LIABILITY	
Bodily Injury	\$100,000 each occurrence \$300,000 Aggregate
Property Damage	\$100,000 each occurrence \$300,000 Aggregate
UMBRELLA COVERAGE	
General Liability (operations and injury)	\$100,000 each occurrence \$300,000 Aggregate