

RESOLUTION 2011-022

A RESOLUTION AUTHORIZING APPROVAL TO AWARD THE CONTRACT TO BEST SANITATION SERVICES FOR THE SUPPLYING AND SERVICING OF PORTABLE TOILET UNITS DURING THE 2011 FISCAL YEAR AT THE VERNON HILLS ATHLETIC COMPLEX, VERNON HILLS GOLF COURSE, JULY FOURTH CELEBRATION, SUMMER CELEBRATION, OKTOBERFEST CELEBRATION, AND HOLIDAY LIGHT SHOW IN AN AMOUNT NOT TO EXCEED \$15,000

WHEREAS, the Vernon Hills Public Works Department sought proposals for the supplying and servicing of portable toilet units for the Vernon Hills Athletic Complex, Vernon Hills Golf Course, July Fourth Celebration, Summer Celebration, Oktoberfest Celebration, and the Holiday Light Show; and

WHEREAS, Best Sanitation Services submitted a proposal to hold their pricing the same from 2010 in the amount of \$10,676; and

WHEREAS, Waste Management, who provided this service for the Village prior to 2010, submitted a proposal in the amount of \$11,240; and

WHEREAS, Best Sanitation Services submitted the lowest proposal between the two proposals solicited; and

WHEREAS, Public Works staff is familiar and pleased with the services that Best Sanitation Services provided in 2010.

NOW THEREFORE, BE IT RESOLVED BY THE VILLAGE PRESIDENT AND BOARD OF TRUSTEES OF THE VILLAGE OF VERNON HILLS, LAKE COUNTY, ILLINOIS:

THAT, the Village Manager is authorized to sign an extended contract agreement with Best Sanitation Services to supply and service portable toilet units for the 2011 Fiscal Year at the Vernon Hills Athletic Complex, Vernon Hills Golf Course, July Fourth Celebration, Summer Celebration, Oktoberfest Celebration, and the Holiday Light Show in an amount not to exceed \$15,000.

Dated the 1st day of March 2011.

Adopted by roll call vote as follows:

AYES: 5 – Schultz, Schwartz, Koch, Hebda, Marquardt

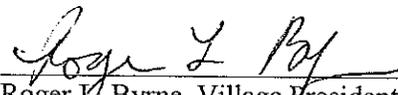
NAYS: 0 - None

ABSENT AND NOT VOTING: 1 - Williams

PASSED: 3/1/2011

APPROVED: 3/1/2011

ATTEST: 3/2/2011


Roger E. Byrne, Village President


Michael A. Anson, Village Clerk





Monday, January 24, 2011

Matt Bartlett
Village of Vernon Hills
490 Greenleaf Drive
Vernon Hills, IL 60061

Dear Matt,

Thank you for choosing Best Sanitation Services, A Black Tie Sanitation Company for your portable sanitation needs during the 2010 season. We value your business and the trust you have placed in us and we appreciate the opportunity to continue working with you and the Village of Vernon Hills. Our company remains committed to delivering exceptional products and services at the best value so that we can contribute to the overall success of your recreational programs and special events.

Best Sanitation Services is willing to extend the offer to hold our pricing from the 2010 bid for the 2011 season with a signed agreement from the Village. I have outlined the per event prices below:

<u>Description</u>	<u>Total Cost</u>
Vernon Hills Athletic Complex (Seasonal)	\$ 4192.00
Weekend Service at VHAC	\$ 225.00
July Fourth	\$ 614.00
Summer Celebration	\$ 2935.00
Oktoberfest	\$ 1180.00
Holiday Light Show	\$ 150.00
Vernon Hills Golf Course (2x per week service)	\$ 1080.00
Vernon Hills Golf Course (1x per week service)	\$ 300.00
Total for 2011 Season	\$10676.00

If you have any questions, or if I can provide you with a service agreement, please call me at 877.919.2378 or via email at valerie.marlow@blacktiesanitation.com. Thank you again for your consideration and I look forward to hearing from you!

Sincerely,

Valerie A. Marlow

Valerie Marlow
Senior Accounts Manager
Best Sanitation Services, Inc
A Black Tie Sanitation Company

PO Box 496 * Lincolnshire, IL 60069
877-919-BEST (2378)

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
SUMMER CELEBRATION
LAKEVIEW PKWY
CENTURY PARK
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60089
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

Contact Name: MATT BARTLETT

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Phone: 847-680-2271

Fax:

Fax:

Email: mattb@vhill.org

Email: mattb@vhill.org

Account Number	Payment Terms	Ordered By	Purchase Order
9186-003	NET 10 DAYS	MATT BARTLETT	

Date	Quantity	Description	Unit Price	Extension
07/13/2011		DELIVERY-SE CONTACT: MATT BARTLETT 847.767.6872 CALL MATT PRIOR TO ARRIVAL AND HE WILL MEET YOU. ENTER PLAZA OFF OF LAKEVIEW PKWY THROUGH CAR STOP ENTRANCE. ***SEE MAP***		
	32	STANDARD RESTROOM	\$50.00	\$1,600.00
	2	WHEELCHAIR ACCESSIBLE	\$83.00	\$166.00
	4	HAND WASH STATION	\$50.00	\$200.00
				<u>\$1,966.00</u>
07/15/2011		EXTRA SERVICE SERVICE ALL UNITS BY 9AM. CONTACT: MATT BARTLETT 847.767.6872		
	32	STANDARD RSTRM SERVICE	\$8.50	\$272.00
	2	WHEELCHAIR ACCESS SERVICE	\$8.50	\$17.00
	4	HAND WASH STATION SERVICE	\$8.50	\$34.00
				<u>\$323.00</u>
07/16/2011		EXTRA SERVICE SERVICE ALL UNITS BY 9AM. CONTACT: MATT BARTLETT 847.767.6872		
	32	STANDARD RSTRM SERVICE	\$8.50	\$272.00
	2	WHEELCHAIR ACCESS SERVICE	\$8.50	\$17.00
	4	HAND WASH STATION SERVICE	\$8.50	\$34.00
				<u>\$323.00</u>
07/17/2011		EXTRA SERVICE SERVICE ALL UNITS BY 9AM. CONTACT: MATT BARTLETT 847.767.6872		
	32	STANDARD RSTRM SERVICE	\$8.50	\$272.00
	2	WHEELCHAIR ACCESS SERVICE	\$8.50	\$17.00
	4	HAND WASH STATION SERVICE	\$8.50	\$34.00
				<u>\$323.00</u>
07/18/2011		PICK UP -SE PICKUP IN THE MORNING.		
	32	STANDARD RESTROOM	\$0.00	\$0.00
	2	WHEELCHAIR ACCESSIBLE	\$0.00	\$0.00
	4	HAND WASH STATION	\$0.00	\$0.00
				<u>\$0.00</u>

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
SUMMER CELEBRATION
LAKEVIEW PKWY
CENTURY PARK
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

Agreement Total \$2,935.00

If you accept this agreement, please sign and return to:

Best Sanitation Services, A Black Tie Sanitation Company

PO Box 496
Lincolnshire, IL 60069
Fax: 815-277-3665

Signature:

A handwritten signature in black ink, appearing to be "Michael S. Allison", written over a horizontal line.

Date:

3/4/11

Print Name:

Michael S. Allison
Village Manager

Service Agreement



Contract Date: February 22, 2011

Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
VERNON HILLS ATHLETIC
COMPLEX
LAKEVIEW PKWY & NIKE PKWY
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 847-634-7343
bestsanitationservices.com

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Fax:

Email: mattb@vhills.org

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Fax:

Email: mattb@vhills.org

Account Number	Payment Terms	Ordered By	Purchase Order	
9186-001	NET 10 DAYS	MATT BARTLETT		
Date	Quantity	Description	Weekly Price	Price Per 32 weeks
4/1/2011	2.00	STANDARD RESTROOM	\$30.00	\$1,920.00
4/1/2011	1.00	WHEELCHAIR ACCESSIBLE	\$38.00	\$1,216.00
4/1/2011	1.00	HAND WASH STATION	\$33.00	\$1,056.00

Total per 32 weeks: \$4,192.00

Total: \$4,192.00

One Time Delivery/Pickup: *Included*

If you accept this agreement, please sign and return to:

Best Sanitation Services, A Black Tie Sanitation Company

PO Box 496
Lincolnshire, IL 60069
Fax: 847-634-7343

Print Name:

Michael S. Allison
Village Manager

Signature:

Date:

3/4/11

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
VERNON HILLS GOLF COURSE
291 EVERGREEN DR
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 847-634-7343
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Contact Name: MATT BARTLETT

Phone: 847-680-2271

Fax:

Email: mattb@vhills.org

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Fax:

Email: mattb@vhills.org

Account Number	Payment Terms	Ordered By	Purchase Order		
9186-006	NET 10 DAYS	MATT BARTLETT			
Date	Quantity	Description	Services	Weekly Price	Price Per Contract Period
4/1/2011	5/14/2011	2.00	STANDARD RESTROOM	\$30.00	\$300.00
9/16/2011	10/31/2011				
5/15/2011	9/15/2011	2.00	STANDARD RESTROOM	\$60.00	\$1,080.00

Total per 28 weeks: \$1,380.00

Total: \$1,380.00

One Time Delivery/Pickup: *Included*

If you accept this agreement, please sign and return to:

Print Name:

Michael S. Allison
Village Manager

Signature:

Best Sanitation Services, A Black Tie Sanitation Company

PO Box 496
Lincolnshire, IL 60069
Fax: 847-634-7343

Date:

3/4/11

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
HOLIDAY LIGHT SHOW
1350 N MILWAUKEE
CUNEO MUSEUM
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

Contact Name: MATT BARTLETT

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Phone: 847-680-2271

Fax:

Fax:

Email: mattb@vhills.org

Email: mattb@vhills.org

Account Number	Payment Terms	Ordered By	Purchase Order
9186-005	NET 10 DAYS	MATT BARTLETT	

Date	Quantity	Description	Unit Price	Extension
01/03/2012	PICK UP -RT OK TO PICKUP ANYTIME. 2	STANDARD RESTROOM	\$0.00	\$0.00
11/23/2011	DELIVERY-RT CONTACT: MATT BARTLETT 847.767.6872 CALL MATT PRIOR TO ARRIVAL AND HE WILL MEET YOU. 2	STANDARD RESTROOM	\$75.00	\$150.00
			Agreement Total	\$150.00

If you accept this agreement, please sign and return to:

Best Sanitation Services, A Black Tie Sanitation Company

PO Box 496

Lincolnshire, IL 60069

Fax: 815-277-3665

Signature: _____

Date: 3/4/11

Print Name: _____

Michael S. Allison
Village Manager

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
JULY 4TH
LAKEVIEW PKWY & CENTER DR
CENTURY PARK
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
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Contact Name: MATT BARTLETT

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Fax:

Email: mattb@vhills.org

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Fax:

Email: mattb@vhills.org

Account Number	Payment Terms	Ordered By	Purchase Order
9186-002	NET 10 DAYS	MATT BARTLETT	

Date	Quantity	Description	Unit Price	Extension
07/02/2011		DELIVERY-SE CONTACT: MATT BARTLETT 847.767.6872 CALL MATT PRIOR TO ARRIVAL AND HE WILL MEET YOU. UNITS WILL BE PLACED IN THE PLAZA OFF OF LAKEVIEW PARKWAY, ON GRASS BETWEEN THE BUSHES. ***SEE MAP***		
	7	STANDARD RESTROOM	\$62.00	\$434.00
	1	WHEELCHAIR ACCESSIBLE	\$110.00	\$110.00
	1	HAND WASH STATION	\$70.00	\$70.00
				\$614.00
07/05/2011		PICK UP -SE OK TO PICKUP ANYTIME ON MONDAY.		
	7	STANDARD RESTROOM	\$0.00	\$0.00
	1	WHEELCHAIR ACCESSIBLE	\$0.00	\$0.00
	1	HAND WASH STATION	\$0.00	\$0.00
				\$0.00
Agreement Total				\$614.00

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
JULY 4TH
LAKEVIEW PKWY & CENTER DR
CENTURY PARK
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

If you accept this agreement, please sign and return to:

Best Sanitation Services, A Black Tie Sanitation Company

PO Box 496
Lincolnshire, IL 60069
Fax: 815-277-3665

Signature:

A handwritten signature in black ink, appearing to read "Michael S. Allison", written over a horizontal line.

Date:

3/4/11

Print Name:

Michael S. Allison
Village Manager

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
OKTOBERFEST
75 US 45
METRA STATION
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

Contact Name: MATT BARTLETT

Contact Name: MATT BARTLETT

Phone: 847-680-2271

Phone: 847-680-2271

Fax:

Fax:

Email: mattb@vhills.org

Email: mattb@vhills.org

Account Number	Payment Terms	Ordered By	Purchase Order
9186-004	NET 10 DAYS	MATT BARTLETT	

Date	Quantity	Description	Unit Price	Extension
10/02/2011		PICK UP -SE		
		OK TO PICKUP ON SUN 10/2 OR MON 10/3.		
	14	STANDARD RESTROOM	\$0.00	\$0.00
	2	WHEELCHAIR ACCESSIBLE	\$0.00	\$0.00
	4	HAND WASH STATION	\$0.00	\$0.00
				\$0.00
09/30/2011		DELIVERY-SE		
		CONTACT: MATT BARTLETT 847.767.6872		
		CALL MATT PRIOR TO ARRIVAL AND HE WILL MEET YOU.		
		METRA PARKING LOT WILL BE CLOSED OFF FOR EVENT. ***SEE MAP***		
	14	STANDARD RESTROOM	\$55.00	\$770.00
	2	WHEELCHAIR ACCESSIBLE	\$85.00	\$170.00
	4	HAND WASH STATION	\$60.00	\$240.00
				\$1,180.00
Agreement Total				\$1,180.00

Service Agreement

Contract Date: February 28, 2011



Billing Address:

VERNON HILLS PUBLIC WORKS
490 GREENLEAF DR
VERNON HILLS, IL 60061

Service Address:

VERNON HILLS PUBLIC WORKS
OKTOBERFEST
75 US 45
METRA STATION
VERNON HILLS, IL 60061

PO Box 496
Lincolnshire, IL 60069
877-919-BEST (2378)
F: 815-277-3665
bestsanitationservices.com

If you accept this agreement, please sign and return to:

Best Sanitation Services, A Black Tie Sanitation Company
PO Box 496
Lincolnshire, IL 60069
Fax: 815-277-3665

Signature:

A handwritten signature in black ink, appearing to be "Michael S. Allison", written over a horizontal line.

Date:

3/4/11

Print Name:

Michael S. Allison
Village Manager

ACORD CERTIFICATE OF LIABILITY INSURANCE

Date (MM/DD/YR)
3/1/2011

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Heffernan Insurance Brokers
PO Box 69038
Portland, OR 97239

CONTACT NAME:
PHONE (A/C, No, Ext): 800-208-6912 **FAX (A/C, No):** 800-215-0147
EMAIL ADDRESS:

INSURED
Best Sanitation Services
225 LaGrange Road
Frankfort, IL 60423

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	Massachusetts Bay Ins	
INSURER B:	Allamerica Financial Benefit	
INSURER C:	HANOVER INSURANCE	
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAME 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X		ZDF899509800	3/1/11	3/1/12	EACH OCCURRENCE	\$ 1,000,000
	GENL. AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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	
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			AWF896647200	3/1/11	3/1/12	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			UHF903783000	3/1/11	3/1/12	EACH OCCURRENCE	\$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? (Mandatory in N.H.) If yes, describe under DESCRIPTION OF OPERATIONS below						AGGREGATE \$ 2,000,000 \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? (Mandatory in N.H.) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WDF899822500	3/1/11	3/1/12	<input checked="" type="checkbox"/> WC STATUTORY LIMITS E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Project: As on file with the insured. Village of Vernon Hills is named as Additional Insured on the General Liability per the attached form.

CERTIFICATE HOLDER

CANCELLATION

Village of Vernon Hills
Vernon Hills Park District
290 Evergreen Dr.
Vernon Hills, IL 60061

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



ACORD 25 (2010/05)

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APPROVED