**TOWN OF DERRY, NH**

**QUOTE/BID LIST**

**B19-105 Request for Bids – Downtown Trash Removal**

| Company Name | Quote/Bid | Date June 7, 2018 |
|---|---|---|
| **Stateline Waste Management** | **$4,200.00/year – Apparent Low Bidder** | |
| Pinard Waste System | $5,800.00 /year | |

**Budget line** _____

**Bid Recipient** _____

**Department Head Signature**_____ **Date** _____

**B19-105**

**Town of Derry – Public Works Department**
**Request for Quotation**

The Town of Derry is requesting quotes for removal of trash from (8) Municipal 30 gallon barrels along East and West Broadway in the Downtown area. The barrels must be serviced twice weekly on Mondays and Thursdays.

The contractor will be responsible for pick up and disposal of waste from these barrels at a licensed facility. The waste will not be accepted at the Derry Transfer Station.

The quote is to be based on an annual fee for said service. No additional fees or adjustments will be allowed for the duration of the contract.

Payment will be made on a monthly basis based on the annual fee divided into nine equal payments. This contract is for a period beginning July 1, 2018 through June 30, 2019.

The contractor must supply the Town of Derry with a **certificate of insurance** for a minimum of $1,000,000.00 liability insurance.

**Must be submitted by June 08, 2018**

$4,200 Per Year ($350 PER MONTH)

Company Name: STATELINE WASTE MANAGEMENT

Email Address: INFO @ STATELINEWM.COM

Phone Number: (603) 321-3873

Address: PO Box 92
WINDHAM NH 03087

Signature of Principal

Acceptance by the Town of Derry _____

May be faxed to (603) 432-6130, Attn: Alan R. Côté, Supt. of Operations

* ALTERNATIVE PROPOSAL → TWO YEAR CONTRACT : $4,100 / YR
→ THREE YEAR CONTRACT : $4,000 / YR

[illegible]

[illegible]

The Town of Derry is requesting [illegible] removal of trash for [illegible] Monday to Friday [illegible] and were [illegible] in the Department [illegible] [illegible] on Monday and Thursday.

The [illegible] is requesting [illegible] pick up and [illegible] [illegible] [illegible]

**B19-105**

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The contractor must supply the Town of Derry with a **certificate of insurance** for a minimum of $1,000,000.00 liability insurance.

**Must be submitted by June 08, 2018**

5,800 Per Year Five Thousand Eight Hundred

Company Name: Pinard Waste Systems

Email Address: bsilva@pinardwaste.com

Phone Number: (603) 623-7953

Address: P.O. Box 5048
Manchester NH. 03108

Signature of Principal _____

Acceptance by the Town of Derry _____

May be faxed to (603) 432-6130, Attn: Alan R. Côté, Supt. of Operations