

1 **BILL NO. S-24-11-53**

2 **SPECIAL ORDINANCE NO. S- 170-24**

3
4 **AN ORDINANCE** approving the awarding of ITB #8355844 -
5 **SERVICE AGREEMENT – CLEAN-UPS FOR**
6 **NEIGHBORHOOD CODE - (\$250,000.00)** between YARD
7 **JOBS INC.** and the City of Fort Wayne, Indiana, by and
8 through its Purchasing Department.

9 **NOW, THEREFORE, BE IT ORDAINED BY THE COMMON COUNCIL OF THE**
10 **CITY OF FORT WAYNE, INDIANA;**

11 **SECTION 1.** That ITB #8355844 - SERVICE AGREEMENT – CLEAN-UPS FOR
12 NEIGHBORHOOD CODE - between YARD JOBS INC. and the City of Fort Wayne,
13 Indiana, by and through its Purchasing Department, is hereby ratified, and affirmed and
14 approved in all respects, respectfully for:

15 All labor, insurance, material, equipment, tools, power, transportation,
16 miscellaneous equipment, etc., necessary for CLEANING UP TRASH AND
17 DEBRIS AND FILLING CISTERNS IN THE CITY OF FORT WAYNE;

18 involving a total cost of TWO HUNDRED FIFTY THOUSAND AND 00/100 DOLLARS –
19 (\$250,000.00) all as more particularly set forth in said ITB #8355844 - SERVICE
20 AGREEMENT – CLEAN-UPS FOR NEIGHBORHOOD CODE which is on file in the
21 Department of Purchasing, and is by reference incorporated herein, made a part hereof,
22 and is hereby in all things ratified, confirmed and approved.

23 **SECTION 2.** That this Ordinance shall be in full force and effect from and after its
24 passage and any and all necessary approval by the Mayor.

25 
26 Council Member

27 APPROVED AS TO FORM AND LEGALITY

28 
29 Malak Heiny, City Attorney

30

Annual Requirements for Clean-ups for the Neighborhood Code Compliance Department (#8355844)

Owner: Purchasing
 Solicitor: Fort Wayne IN, City of
 12/29/2022 11:00 AM EST

Section Title: Item Description
 Cost of filling cisterns, Note: All open unsecured cisterns shall be filled to top with #73 stone. Recycled stone acceptable.
 1 Cost of stone

2 Labor
 3 Truck charge. (NCC will only pay for specific time truck is being loaded and driven to cistern location)
 4 Bobcat (if applicable)
 5 Backhoe/Front End Loader (if applicable)

Type 1: ALL-INCLUSIVE
 6 Brush, limbs and logs
 7 General Refuse and Garbage (i.e. furniture, small appliances, toys, bags of garbage, junk, etc.)
 8 Tires (up to 18 inches)
 9 Tires (over 18 inches)
 10 Tractor Tire
 11 Televisions (up to 46 inches)
 12 Televisions (over 46 inches)

Type II: TIME AND MATERIAL
 13 Labor
 14 Trucking
 15 Equipment
 16 Brush, limbs and logs
 17 General refuse
 18 Tires (up to 18 inches)
 19 Tires (over 18 inches)
 20 Tractor Tire
 21 Television (up to 46 inches)
 22 Television (over 46 inches)

Base Bid Total:

UoM	Quantity	Yard Jobs, Inc Unit Price	Extension	Work Companies Unit Price	Extension
Ton	1	\$23.00	\$23.00	\$20.00	\$485.00
Hour	1	\$45.00	\$45.00	\$60.00	\$20.00
Hour	1	\$55.00	\$55.00	\$125.00	\$60.00
Hour	1	\$75.00	\$75.00	\$115.00	\$115.00
Hour	1	\$90.00	\$90.00	\$165.00	\$165.00
			\$249.00	\$460.00	\$460.00
Cu Yd	1	\$40.00	\$40.00	\$40.00	\$40.00
Cu Yd	1	\$82.00	\$82.00	\$95.00	\$95.00
Ea	1	\$15.00	\$15.00	\$25.00	\$25.00
Ea	1	\$23.00	\$23.00	\$50.00	\$50.00
Ea	1	\$28.00	\$28.00	\$100.00	\$100.00
Ea	1	\$23.00	\$23.00	\$50.00	\$50.00
Ea	1	\$38.00	\$38.00	\$100.00	\$100.00
			\$406.00	\$760.00	\$760.00
Hour	1	\$48.00	\$48.00	\$60.00	\$60.00
Hour	1	\$55.00	\$55.00	\$125.00	\$125.00
Hour	1	\$80.00	\$80.00	\$115.00	\$115.00
Cu Yd	1	\$35.00	\$35.00	\$40.00	\$40.00
Cu Yd	1	\$75.00	\$75.00	\$95.00	\$95.00
Ea	1	\$13.00	\$13.00	\$25.00	\$25.00
Ea	1	\$20.00	\$20.00	\$50.00	\$50.00
Ea	1	\$25.00	\$25.00	\$100.00	\$100.00
Ea	1	\$20.00	\$20.00	\$50.00	\$50.00
Ea	1	\$35.00	\$35.00	\$100.00	\$100.00
			\$948.00	\$4,705.00	\$4,705.00



CITY OF FORT WAYNE

INDIANA

October 14, 2024

Mr. Monty Sorg
Yard Jobs Inc.
4961 N. Old Fort Wayne Road
Huntington, IN 46750
yardjobs@yahoo.com

Dear Mr. Sorg:

Subject: ITB #8355844- Annual Requirements for the Clean-ups for the Neighborhood Code Compliance Department

The City of Fort Wayne's Purchasing Department would like to extend the above subject contract from January 1, 2025, to December 31, 2025, at the existing pricing and specifications.

Please indicate your concurrence by signing below and faxing this letter to my attention at 260-427-1393 or email gayle.cooper@cityoffortwayne.org no later than Thursday November 7, 2024.

If this extension is accepted for this service, a purchase order will be issued after January 1, 2025.

Should you have any questions, please do not hesitate to contact our office at 260-427-1376.

Sincerely,

Yard Jobs, Inc.

Gayle Cooper

Signature of Authorized Representative

10-18-24

Date

ENHANCED QUALITY OF LIFE FOR ALL

CITIZENS SQUARE

200 E. Berry St. • Fort Wayne, Indiana • 46802 • cityoffortwayne.org

An Equal Opportunity Employer



SERVICE AGREEMENT: _____

SUPPLIER NAME <i>Varo Jobs</i>	CITY DEPARTMENT <i>Neighborhood Code</i>
STREET ADDRESS <i>4961 N. Old Fort Wayne Rd</i>	STREET ADDRESS <i>200 E. Berry St. Ste 320</i>
CITY, STATE, ZIP CODE <i>Huntington, IN 46750</i>	CITY, STATE, ZIP CODE <i>Fort Wayne, IN 46802</i>
ATTENTION/PHONE <i>Monty Sorg</i>	

Service Description	Rates
<i>2025 Cleanups & filling cisterns Per ITB # 8355844</i>	<i>\$250,000⁰⁰</i>
Aggregate Price	

The following is made a part of this Agreement:

This Agreement is entered into between Supplier and the City. The additional terms and conditions on the reverse side hereof are part of this Agreement. Capitalized terms on this page are used as defined terms when the context so requires. The City may extend the Contract at its option, for an equivalent period, by written notice to the Supplier not less than thirty days prior to the expiration date.

SUPPLIER:

For Independent Contractors: Will any individuals other than yourself perform work on this project? Yes No
 o If yes, see reverse side for Worker's Comp. requirement.

CITY OF FORT WAYNE:

By (Signature): <i>Monty Sorg</i>	By (Signature):
Printed Name: <i>Monty Sorg</i>	Printed Name:
Date: <i>11-21-24</i>	Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/05/2024

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 CARPER-KOEPPE INSURANCE, INC. PO BOX 129 HAMILTON IN 46742	CONTACT NAME: RANDALL L. KOEPPE PHONE (A/C, No., Ext): 260-488-2636 E-MAIL ADDRESS: CARPERKOEPPEINSURANCE@GMAIL.COM	FAX (A/C, No.):
INSURED R MONTY SORG YARD JOBS INC 4961 N OLD FORT WAYNE ROAD HUNTINGTON IN 46750	INSURER(S) AFFORDING COVERAGE INSURER A: AUTO OWNERS INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC #

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 SUBR INSD WVD	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 type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	09982783	04/13/2024	04/13/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <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) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER CANCELLATION

CITY OF FORT WAYNE 200 EAST BERRY STREET SUITE 490 michelle.metzger@cityoffortwayne.org FORT WAYNE IN 46802	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 RANDALL L. KOEPPE
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/16/2024 14:25

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 Stroup, Adam 2815 N Jefferson St Huntington, IN 46750	CONTACT NAME: PHONE (A/C, No, Ext): (260) 356-2522 FAX (A/C, No): E-MAIL ADDRESS: Adam.Stroup@infarmbureau.com	
	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : United Farm Family Mutual Insurance Company 15288 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	
INSURED YARD JOBS, INC. 4961 N OLD FORT WAYNE RD HUNTINGTON, IN 46750-9603		

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"/> PRO-JECT <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 \$ \$
A	AUTOMOBILE LIABILITY <input 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			CAP8521314	04/10/2024	04/10/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 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) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER 	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 Stroup, Adam

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COUNCIL DIGEST SHEET

Enclosed with this introduction form is a tab sheet and related material from the vendor(s) who submitted bid(s). Purchasing Department is providing this information to Council as an overview of this award.

RFPs & BIDS

Bid/RFP #	ITB # 0355044
Awarded To	Yard Jobs
Amount	\$250,000.00
Conflict of interest on file?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of Registrants	
Number of Bidders	2
Required Attachments	RFPs – attach Award Matrix; Bids – attach Tab Sheet

EXTENSIONS

Date Last Bid Out	12-29-22
# Extensions Granted To Date	2

SPECIAL PROCUREMENT

Contract #/ID (State, Federal, Piggyback--Authority)	
Sole Source/ Compatibility Justification	

BID CRITERIA (Take Buy Indiana requirements into consideration.)

Most Responsible, Responsive Lowest	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, explain below</i>
If not lowest, explain	

COUNCIL DIGEST SHEET

COST COMPARISON

<i>Increase/decrease amount from prior years For annual purchase (if available).</i>	
--	--

DESCRIPTION OF PROJECT / NEED

<i>Identify need for project & describe project; attach supporting documents as necessary.</i>	<i>This bid covers the cost of cleaning up trash and debris and filling cisterns in the City of Fort Wayne</i>

REQUEST FOR PRIOR APPROVAL

<i>Provide justification if prior approval is being requested.</i>	

FUNDING SOURCE

<i>Account Information.</i>	<i>183 UNSF3 5369</i>

**Neighborhood Code Compliance
200 East Berry St. Suite 320
Fort Wayne, IN 46802**

CKB 11/21/24

To: Council Members
From: Christopher Blauvelt, Deputy Director
Date: November 21, 2024
Subject: I.T.B. #8355844 Clean Ups

This bid covers the cost of cleaning up trash and debris and filling cisterns.

Neighborhood Code will be awarding Yard Jobs Inc. the 2025 bid for our clean-ups and filling of cisterns for \$250,000. Yard Jobs Inc has agreed to extend the 2023 ITB #8355844 contract from January 1, 2025 to December 31, 2025 at the existing pricing and specifications.

If we would not award this contract there would be trash & debris that would remain on properties and cisterns that are open and potentially hazardous.

We have budgeted for these clean-ups in the Unsafe Building Fund.

BILL NO. S-24-11-53

REPORT OF COMMITTEE ON FINANCE

December 3, 2024

Marty Bender Chair


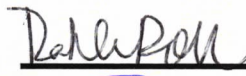




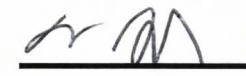

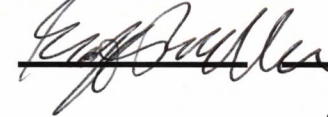
Rohli Booker Co-Chair

All Council Members

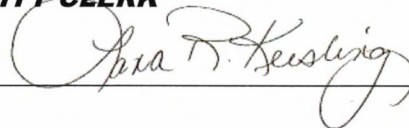
An Ordinance approving the awarding of ITB #8355844 - Service Agreement – Clean-Ups For Neighborhood Code - between Yard Jobs Inc. and the City of Fort Wayne, Indiana, by and through its Purchasing Department

Involving a total cost of \$250,000.00

COMMITTEE ON FINANCE HAVE HAD SAID Ordinance under consideration and beg leave to report back to the Common Council that said Ordinance

<u>COUNCIL MEMBER</u>	<u>DO PASS</u>	<u>DO NOT PASS</u>	<u>ABSTAIN</u>
<u>BENDER</u>			
<u>BOOKER</u>			
<u>CHAMBERS</u>			
<u>ENSLEY</u>			
<u>FREISTROFFER</u>			
<u>HARTMAN</u>			
<u>JEHL</u>			
<u>MYERS</u>			
<u>PADDOCK</u>			

**LANA R. KEESLING
CITY CLERK**



Public Hearing Date: N/A


Read the first time in full and on motion by Councilperson Bender.

Read the second time by title and referred to the Finance Committee.

Read the third time in full and on motion by Councilperson Bender, placed on passage by the following vote:

<u>TOTAL VOTES</u>	<u>AYES</u>	<u>NAYS</u>	<u>ABSTAINED</u>	<u>ABSENT</u>
BENDER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BOOKER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHAMBERS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ENSLEY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FREISTROFFER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HARTMAN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JEHL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MYERS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PADDOCK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DATED: December 10, 2024




 LANA R. KEESLING, CITY CLERK

Passed and adopted by the Common Council of the City of Fort Wayne, Indiana, as

Special Ordinance No. S-24-11-53 on the 10th day of December, 2024

ATTEST:



 LANA R. KEESLING
 CITY CLERK



 PRESIDING OFFICER

Presented by me to the Mayor of the City of Fort Wayne, Indiana, on the 11th of December 2024, at the hour of 11:10 o'clock A.M. E.S.T.



 LANA R. KEESLING, CITY CLERK

Approved and signed by me this 12th day of December 2024, at the

hour of 9:02 o'clock A.M. E.S.T.

RECEIVED
 DEC 12 2024
 LANA R. KEESLING
 CITY CLERK



 SHARON TUCKER, MAYOR