

**TOWN OF MANCHESTER  
GENERAL SERVICES DEPARTMENT  
494 MAIN STREET - P.O. BOX 191  
MANCHESTER, CONNECTICUT 06045-0191**

**BID NO. 09/10-75**

**PROPOSAL FOR  
FIBER PLANT REPAIRS,  
TRANSFERS AND RELATED WORK**

**1.0 SCOPE OF SERVICES**

The Town of Manchester has approximately 35 miles of fiber cables located in the municipal gain on utility poles across town. It is the intent of this bid to hire an experienced and qualified contractor that will be available for hire by the Town of Manchester for maintenance and emergency repairs as needed for its fiber-optic cable plant and defunct fire alarm wires.

All contractors and their work must be in full compliance with federal, state and local laws and regulations, building codes, OSHA rules, regulations and standards, zoning regulations, licensing and legal qualifications to perform all phases of required work.

There are 3 types of single mode fiber cables involved as described below:

The most common fiber cable is an armored 48 count single-mode fiber cable lashed to a ¼” steel galvanized strand.

The plant also has several miles of 48-count ADSS (All-dielectric self-supporting) fiber cable. This is attached to the pole by means of a split clamp device.

The Illing School to Police link is 700 ft of 24-count figure-eight fiber.

There are also a variety of multimode fiber runs between some of the buildings. These are typically in conduit.

**2.0 EXTERIOR WORK**

The work described below is representative of the kind of services that may arise due to planned and/or unplanned outages and repairs. The most likely to occur are items 1 and 2. All items usually require vendor co-ordination with the public utilities CL&P, COX Cable and AT&T.

**REPAIRS and REMOVALS may consist of one or more of the following:**

**1. A simple planned pole replacement where lashing remains intact.**

Response Time: To be coordinated with existing utilities.

Typically where a single pole is being swapped due to age or lack of space. It requires detaching from the old pole and attaching to the new pole. The only component swap may be the bolt. All other parts (strand clamps, Grounding components, lashing clamps) should be reusable.

**2. A simple unplanned pole replacement where lashing remains intact.**

Response Time: To be coordinated with existing utilities.

Typically where a single pole is being swapped due to storm or vehicle damage. It requires detaching from the old pole and attaching to the new pole. The only component swap may be the bolt. All other parts (strand clamps, grounding components, lashing clamps) should be reusable.

**3. A complex planned pole replacement where lashing must be re-done.**

Response Time: To be coordinated with existing utilities.

Typically where one or more poles are being swapped due to roadwork or construction project. It requires detaching from the old poles and attaching to the new poles. All new components will be required including but not limited to bolts, nuts, strand, strand clamps, grounding components, lashing clamps. Labor must include unlash and re-lashing fiber to the nearest slack point.

**4. A complex planned pole replacement where lashing must be re-done and fusion splicing is required.**

Response Time: To be coordinated with existing utilities.

Typically where one or more poles are being swapped due to roadwork or construction project and the move requires more fiber than is available in the slack points/storage loops. It requires detaching from the old poles and attaching to the new poles. All new components will be required including but not limited to bolts, nuts, strand, strand clamps, grounding components, lashing clamps and a strand mounted Coyote type splice closure. Labor must include unlash, fusion splicing, installation of the splice enclosure and re-lashing the fiber cable.

**5. An unplanned fiber cable break due to some external force with a network down condition.**

Response Time: Within 4 hours and may require co-ordination with utilities.

Typically where the fiber must be retrieved from the nearest slack points/storage loops. New components may include strand, lashing wire, lashing clamps and a strand mounted Coyote type splice closure. Labor must include unlash, fusion splicing, installation of the splice enclosure and re-lashing the fiber cable.

**6. An unplanned fiber cable break due to some external force without a network down condition.**

Response Time: Within 24 hours and may require co-ordination with utilities.

Typically where the fiber must be retrieved from the nearest slack points/storage loops. New components may include strand, lashing wire, lashing clamps and a strand mounted Coyote type splice enclosure. Labor must include unlash, fusion splicing, installation of the splice enclosure and re-lashing the fiber cable.

**7. Copper fire alarm wire removal and/or cross-arm removal.**

Response Time: To be coordinated with existing utilities.

Some of the poles will have copper fire alarm wire, which can be removed instead of transferred. Also old cross-arms from the old copper fire alarm system must be removed and the copper wires involved must be anchored on the adjacent poles so as to avoid wires on the ground.

### **3.0 INTERIOR WORK**

All interior work must be done by properly licensed personnel licensed by the Connecticut Department of Consumer Protection. The EXTERIOR/INTERIOR demarcation point will be determined by the Town.

### **4.0 NEW INSTALLATIONS**

The Town may wish to include new installation work in this bid for small projects for fiber or copper work. The Town reserves the right to seek separate bids for larger projects. All new work will be billed at the hourly bid prices. Materials will be priced separately.

### **5.0 BID PRICES**

#### **Hourly Rates**

Bidders are asked to bid an hourly rate for service calls during the hours outlined on the proposal sheet for scheduled work and emergency work. The hourly rate shall be paid for actual time on the job plus 1 (one) hour for travel. The hourly rate shall include all costs such as tools, equipment and fuel required to perform the work. If specialized equipment, such as a backhoe, or other similar types of equipment is utilized, bidder may itemize the costs separately with an hourly rate and submit with bid proposal.

#### **Materials**

On those occasions when parts and materials are also required, the contractors invoice shall include costs for materials required. The Town reserves the right to purchase materials directly if it so chooses. All invoices from the contractor shall be itemized detailing hours worked, hourly rate, materials, etc.

#### **On Call Availability Costs**

Contractor shall indicate the cost, if any, to the Town for the contractor to be available by pager, cell, etc. for emergency call outs on weekends and holidays. The Town would require the contractor to be available on call in the event of a network down condition for approximately 110 days (52 weekends, New Year's Day, Memorial Day, July 4<sup>th</sup>, Labor Day, Thanksgiving, Christmas). This cost would represent the on call costs only. In the event of a call out, the Town would pay the emergency rates listed on the proposal sheet. Contractor shall indicate the annual cost for this availability plus any additional costs which would apply beyond the emergency rates bid.

### **6.0 CONTRACT AWARD AND TERM**

The Town shall make an award to experienced and qualified contractor(s) to perform work on an as needed basis. Exterior work and interior work may be awarded to separate contractors. There is no guaranteed minimum amount of work to be performed. The estimated hours of work are based on past experience. If the awarded contractor is unable to perform work on the schedule required by the Town, the Town reserves the right to terminate the contract.

The contract shall be for two years from the date of award. By mutual consent of the Town and the contractor, this contract may be extended on an annual basis for up to three additional years at the same prices, terms, and conditions.

#### **7.0 MANCHESTER LIVING WAGE ORDINANCE**

This bid is subject to the provisions of the Town of Manchester Living Wage Ordinance. A summary description of the ordinance and the certification form is attached. Contractors are asked to indicate on the attached Certification Form if your firm would be considered a covered employer. The Certification Form shall be returned to the Town with the proposal.

## **Summary Description for Vendors Regarding Manchester's Living Wage Ordinance**

Effective February 1, 2010, the Town of Manchester adopted a living wage ordinance. This Summary Description is designed to provide any vendor bidding on a Town of Manchester contract with the key provisions of that ordinance. It does not contain the full ordinance.

### **LIVING WAGE REQUIREMENT:**

The ordinance requires that companies awarded service contracts by the Town of Manchester exceeding \$25,000 pay their **Eligible Employees** a **living wage**. Companies considered **Covered Employers** subject to this requirement are defined below. The Town of Manchester has determined that the contract resulting from this bid or Request for Proposals will be subject to the ordinance if the total contract value is \$25,000 or more.

The living wage is currently calculated to be \$12.19/hour for employees that are provided comprehensive health care benefits, or \$15.54/hour for employees that are not provided comprehensive health care benefits.

The living wage and health benefit requirements are adjusted annually each July, effective July 1, 2010. Companies will be required to pay the applicable living wage rate in effect during the term of their contracts.

### **COVERED EMPLOYERS AND EXEMPTIONS:**

The ordinance requires that Covered Employers pay the living wage rate. Certain employers are excluded from paying the living wage rate. They are as follows:

- Non-profit organizations as defined by the ordinance, and
- Entities that employ less than 25 eligible employees.

### **ELIGIBLE EMPLOYEES:**

Eligible employees are **all permanent, full time employees** of the company (defined as a normal work week of at least 30 hours), working in the State of Connecticut, **not just those working on the Town contract.** The following are not considered eligible employees for the purposes of the living wage requirement:

- Employees with a normal work week of less than 30 hours.
- Seasonal or temporary employees.
- Employees under the age of 18.
- Employees hired as part of a school-to-work program.

- Students who serves in a work-study program or as an intern.
- Trainees participating for not more than six months in a training program.
- Employees enrolled in a governmentally funded vocational rehabilitation program.
- Volunteers working without pay.
- Employees exempted under Section 14(c) of the Fair Labor Standards Act due to disabilities.
- Any person whose wage rate is subject to a federal or State of Connecticut statute or regulation mandating a prevailing wage rate.

**EMPLOYER OBLIGATIONS:**

Covered Employers are required to do the following pursuant to the ordinance.

- Certify with the submission of their bid or proposal a) that they will pay the required living wage to eligible employees if awarded a contract, or b) that they are exempt from requirements of the ordinance,
- Upon award, covered employers shall provide the Town a sworn affidavit affirming that all eligible employees of the covered employer working in the State of Connecticut are receiving the living wage and health benefits required by this ordinance.
- This sworn affidavit shall be provided thereafter on an annual basis within 30 days of a request being made by the Town if the duration of the contract exceeds one (1) year.
- Notify their employees of their rights under the Living Wage Ordinance by posting a copy of the ordinance and other materials prepared by the Town of Manchester in locations where employees will see them.
- Make best efforts to attempt to hire residents of the Town of Manchester for all new positions which result from a service contract subject to the ordinance.

**PROHIBITED PRACTICES:**

- Covered Employers cannot decrease non-wage benefits (such as insurance, vacation, or pension) as a means of complying with the living wage requirements.
- Covered Employers cannot retaliate or discriminate against any employee for making a complaint against the covered employer regarding compliance with living wage requirements.

**ENFORCEMENT:**

The Town may enforce the provisions of this ordinance by the imposition of fines, suspension of contract or declaring the Covered Employer ineligible for future contracts.

**WAIVERS:**

The ordinance provides for the waiver of certain requirements in the ordinance. However, no waivers will be considered until the bidding process has been completed and a contract has been awarded. Requests for waivers must be made by the Covered Employer, in writing, to the General Manager. The General Manager shall submit the waiver request to the Board of Directors, which shall have the sole discretion as to whether it is granted.

**The above is intended to be a summary of the requirements of the living wage ordinance as they affect covered employers and is provided for informational purposes only. Employers should read the entire Living Wage Ordinance. It can be found online at [www.townofmanchester.org](http://www.townofmanchester.org) on the left side of the page. Click on Document Center, scroll to General Services and click on Living Wage Ordinance.**

**TOWN OF MANCHESTER  
LIVING WAGE CERTIFICATION FORM**

The Town of Manchester has determined that this contract may be subject to the provisions of the Manchester Living Wage Ordinance, Chapter 212 of the Manchester Code of Ordinances, Sections 212-1 through 212-11.

Bidders are required to indicate whether they are a Covered Employer as defined by the Manchester Living Wage Ordinance or are exempt from the requirements by marking the appropriate section below. **FAILURE TO INDICATE MAY RESULT IN THE REJECTION OF YOUR BID.**

\_\_\_\_\_ I/We are a covered employer and shall pay the required living wage to eligible employees and comply with the requirements of the ordinance during the term of the contract.

**Or that:**

\_\_\_\_\_ I/We are not a Covered Employer and therefore not subject to Manchester's Living Wage Ordinance for the reason indicated below:

\_\_\_\_\_ Charitable foundations, charitable trusts or nonprofit agencies or nonprofit corporations, provided that the foundation, trust or nonprofit agency or corporation is exempt from federal income taxation and may accept charitable contributions under Section 501 of the Internal Revenue Code of 1986, or any subsequent corresponding internal revenue code of the United States, as from time to time amended.

\_\_\_\_\_ Bidder employs less than twenty five (25) eligible employees.

\_\_\_\_\_ Annual contract value is less than \$25,000.

I, \_\_\_\_\_ of \_\_\_\_\_ do hereby certify  
Officer, Owner, Authorized Rep.                      Company Name

that the representations made above are accurate for \_\_\_\_\_ :  
Bid Name or RFP Name

Signed by: \_\_\_\_\_ Dated: \_\_\_\_\_

**TO BE RETURNED WITH BID OR RFP SUBMISSION.**

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I, We the undersigned, hereby agree to furnish and deliver the following computer hardware at the net prices named herein, subject to and in accordance with the Invitation to Bid, Rules and Regulations for Competitive Bidding, Standard and Special Instructions to Bidders and specifications, all of which are made part of this Proposal.

**SCHEDULED WORK**

	<b>Estimated Hours</b>	<b>x</b>	<b>Hourly Rate</b>	<b>=</b>	<b>Total</b>
<b>2 PERSON CREW WITH BUCKET TRUCK</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	50	x	\$	=	\$
• Saturday and after hours Mon. – Fri.:	10	x	\$	=	\$
• Sunday and Holidays:	5	x	\$	=	\$
<b>1 PERSON WITH SPLICE TRUCK</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	30	x	\$	=	\$
• Saturday and after hours Mon. – Fri.:	10	x	\$	=	\$
• Sunday and Holidays:	5	x	\$	=	\$

**VENDOR NAME:** \_\_\_\_\_

**PROPOSAL FOR  
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**SCHEDULED WORK**

	<u>Estimated Hours</u>	x	<u>Hourly Rate</u>	=	<u>Total</u>
<b>SINGLE PERSON</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	<u>20</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Saturday and after hours Mon. – Fri.:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Sunday and Holidays:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>

**EMERGENCY WORK WITH 4 HOUR RESPONSE TIME**

	<u>Estimated Hours</u>	x	<u>Hourly Rate</u>	=	<u>Total</u>
<b>2 PERSON CREW WITH BUCKET TRUCK</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	<u>10</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Saturday and after hours Mon. – Fri.:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Sunday and Holidays:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>

**VENDOR NAME:** \_\_\_\_\_

**PROPOSAL FOR  
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TRANSFERS AND RELATED WORK**

**EMERGENCY WORK WITH 4 HOUR RESPONSE TIME**

	<u>Estimated Hours</u>	x	<u>Hourly Rate</u>	=	<u>Total</u>
<b>1 PERSON WITH SPLICE TRUCK</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	<u>10</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Saturday and after hours Mon. – Fri.:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Sunday and Holidays:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
 <b>SINGLE PERSON</b>					
• <u>Regular Hourly</u> Monday – Friday 7:30 a.m. – 4:30 p.m.	<u>10</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Saturday and after hours Mon. – Fri.:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
• Sunday and Holidays:	<u>5</u>	x	\$ <u>                    </u>	=	\$ <u>                    </u>
			<b>GRAND TOTAL \$</b>		\$ <u>                                    </u>

**VENDOR NAME:** \_\_\_\_\_

**PROPOSAL FOR  
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**On Call Availability Costs**

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**Specialized Equipment Costs**

_____	\$_____HR
_____	\$_____HR
_____	\$_____HR

BIDDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

SIGNED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

NAME:(please print): \_\_\_\_\_ DATE: \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

FEDERAL TAX IDENTIFICATION NUMBER (FEIN): \_\_\_\_\_

E-MAIL: \_\_\_\_\_