

DAVID R. CRAIG  
HARFORD COUNTY EXECUTIVE



DEPARTMENT OF PROCUREMENT  
DEBORAH L. HENDERSON  
DIRECTOR

MARY F. CHANCE  
DIRECTOR OF ADMINISTRATION

JOSEPH S. PATTI, CPPO  
DEPUTY DIRECTOR

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HARFORD COUNTY GOVERNMENT

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August 10, 2011

Mr. Daniel C. Glynn, VP, Operations  
Shannon Chemical Corporation  
P. O. Box 376  
Malvern, Pennsylvania 19355

RE: Bid No. 10-191 Bulk Chemicals for Water and Wastewater Treatment

Dear Mr. Glynn:

Enclosed is your fully executed Contract Addendum No. 1 for the above-referenced bid.

If you have any questions, I can be contacted at the telephone number shown below.

Very truly yours,

Daniel J. Guthrie  
Purchasing Agent

DJG:KLH/klh

Enc. – A/S

cc: Gregg Bates, DPW/W&S/Sod Run  
Talad Said, DPW/W&S/Sod Run

*Preserving Harford's past; promoting Harford's future*

MY DIRECT PHONE NUMBER 410-638-3550

220 SOUTH MAIN STREET, BEL AIR, MARYLAND 21014 • 410-638-3000 • 410-879-2000 • TTY: 410-638-3086 • [www.harfordcountymd.gov](http://www.harfordcountymd.gov)

This document is available in alternative format upon request.

**HARFORD COUNTY PRICE AGREEMENT**

**BID NO. 10-191**

**BULK CHEMICALS FOR WATER & WASTEWATER TREATMENT**

**CONTRACT ADDENDUM NO. 1**

**THIS ADDENDUM** entered into this 28th day of June, 2011, by and between HARFORD COUNTY, MARYLAND, a body corporate and politic of the State of Maryland, hereinafter called the "County", and **SHANNON CHEMICAL CORPORATION, P. O. Box 376, Malvern, Pennsylvania 19355**, hereinafter called the "Contractor" is made to this agreement between the same parties dated June 10, 2010.

**WHEREAS**, the Contractor agreed to provide specific bulk chemicals to Harford County, Maryland; and

**WHEREAS**, per Section VII of the Agreement, the County has the exclusive option of extending the Agreement for three (3) additional one (1) year periods and the Contractor may submit a request for a price increase per contract year ; and

**WHEREAS**, the County wishes to extend the Agreement for the first option year and the contractor submitted a request dated June 21, 2011 for a price increase; and

**NOW, THEREFORE**, in consideration of the representations, covenants and promises and the recitals which are incorporated herein, the parties, intending to be legally bound, agree as follows:

The term of this Agreement will continue en force for the period July 1, 2011 through June 30, 2012 at the prices changes below.

<u>ITEM/CHEMICAL</u>	<u>CURRENT PRICE</u>	<u>PRICE EFFECTIVE 7/1/11</u>
5 – HFS (21% - 23%) – 500 lb. Drums	\$879.00 per wet ton	\$1,072.38 per wet ton
16 – Phosphoric Acid – 75% in 55 gal. Drums	\$1,187.87 per wet ton	\$1,294.78 per wet ton
17 – Phosphoric Acid – 75% Mini-bulk	\$8.87 per gal.	NO CHANGE

There are no other changes to this Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Addendum the day and year first above written.

WITNESS/ATTEST:

SHANNON CHEMICAL CORPORATION

Ann M. O'Connell

By: [Signature]  
Signature

Daniel C. Flynn, VP-Operations  
Print Name and Title

WITNESS/ATTEST:

HARFORD COUNTY, MARYLAND

Krusty L. Heim

By: [Signature] DLH  
Deborah L. Henderson  
Director of Procurement

Approved for form and legal sufficiency.

Approved for financial sufficiency.

Richard G. Herbig  
Richard G. Herbig  
Senior Assistant County Attorney

Kathryn L. Hewitt  
Kathryn L. Hewitt  
Treasurer

Reviewed and Concur.

[Signature]  
Robert B. Cooper  
Director, Department of Public Works

This agreement was fully executed on the 22<sup>nd</sup> day of July, 2011.



# Shannon Chemical Corporation

Specializing in LEAD and COPPER Corrosion Control

June 17, 2011

Harford County Government  
220 South Main Street  
Bel Air, MD 21014

Attention: Daniel J. Guthrie  
Procurement Agent II

Subject: Price Escalation  
Bid No. 10-191

Dear Dan,

We would like to exercise our option for a price increase due to current market conditions. Currently we supply the Harford County Government with the following products:

Product	Current Pricing	% Increase	New Price
HFS-23%	\$879.00/wet ton	22	\$1072.38
Phosphoric Acid	\$1,187.87/wet ton	<del>109</del>	<del>\$1306.66</del>

Thank you for your continued interest and support of SHANNON CHEMICAL CORPORATION'S products and services. We enjoy working with you and the great staff at the two water treatment plants. Please contact me if you have any questions or concerns.

Respectfully,

LC7)

Daniel C. Flynn  
SHANNON CHEMICAL CORPORATION



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/27/2011

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 may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> ECBM LP 300 Conshohocken State Rd Suite 405 West Conshohocken PA 19428		<b>CONTACT NAME:</b> Samantha McCue <b>PHONE (A/C, No, Ext):</b> (610) 668-7100 <b>FAX (A/C, No):</b> (610) 667-2208 <b>E-MAIL ADDRESS:</b> smccue@ecbm.com <b>PRODUCER CUSTOMER ID#:</b> 00000579															
<b>INSURED</b> Shannon Chemical Corp 602 Jeffers Circle, Ste 116 Exton PA 19341		<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Steadfast Insurance Company..</td> <td>26387</td> </tr> <tr> <td>INSURER B: Zurich American Ins Co</td> <td>16535</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Steadfast Insurance Company..	26387	INSURER B: Zurich American Ins Co	16535	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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**COVERAGES**      **CERTIFICATE NUMBER:** 11 M ALL LINES      **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 INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	EZL 9266227-01	6/1/2011	6/1/2012	MED EXP (Any one person) \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b>					PRODUCTS - COMPI/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> ANY AUTO		BAP 9266225-01	6/1/2011	6/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS		\$2,000 Comp. Deductible			PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS		\$2,000 Coll. Deductible			Hired Physical Damage \$ 50,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR					Underinsured motorist \$ 50,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ 4,000,000
	<input type="checkbox"/> DEDUCTIBLE					AGGREGATE \$ 4,000,000
	<input checked="" type="checkbox"/> RETENTION \$ 10,000		SEO 9266226-01	6/1/2011	6/1/2012	
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>					<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	WC 9266224-01	6/1/2011	6/1/2012	E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				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)  
Re: Bid No. 10-191  
Harford County Government is included as additional insured on the General Liability as per written contract per form STF-EZL-234-A CW 05/10 (attached).

<b>CERTIFICATE HOLDER</b> Harford County Government 220 South Main St. Bel Air, MD 21014	<b>CANCELLATION</b> 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 Joyce Shefsky/MCCSAM