

BIDDER CHECKLIST ATTACHMENTS TO BE COMPLETED AND RETURNED WITH BID	SUBMIT THIS CHECKLIST
SEALED RFB ENVELOPE LABEL	
	Check (v)
ATTACHMENT 1: Insurance Requirements and Acknowledgement (page 51 acknowledgement to be submitted)	✓
ATTACHMENT 2: Excel Tabulation Price Sheet (must complete and Submit in excel format on USB DRIVE). DO NOT RECREATE THIS FORM.	✓
ATTACHMENT 3: Bid Form	✓
ATTACHMENT 4: Statement of Organization	✓
ATTACHMENT 5: Addenda and Bond Form	✓
ATTACHMENT 6: Equipment and Source of Supply/Subcontractor List	✓
ATTACHMENT 7: Qualifications and References	✓
ATTACHMENT 8: Non-Collusive Affidavit	✓
ATTACHMENT 9: Conflict of Interest	✓
ATTACHMENT 10: Public Entity Crime Information	✓
ATTACHMENT 11: Drug-Free Workplace Form	✓
ATTACHMENT 12: Affidavit Claiming Status as a Local Business or North Port Local Business Status (If not claiming, state N/A)	N/A
ATTACHMENT 13: Scrutinized Company Certification Form	✓
ATTACHMENT 14: Lobbying Certification	✓
ATTACHMENT 15: Vendor's Certification For E-Verify System	✓

ENVELOPES MUST BE MARKED
"SEALED BID ENVELOPE LABEL BELOW (NEXT PAGE)".

PLEASE NOTE: Courier Packages (Fedex, UPS, etc.) shall be clearly marked.

If not using label provided on the next page, please include the following on the outside envelope: COMPANY NAME, RFB #, RFB TITLE, DATE DUE, TIME DUE, SUBMITTED BY, NAME OF COMPANY, E-MAIL ADDRESS, TELEPHONE.

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

CITY OF NORTH PORT
 '21OCT26AM11:21
 PURCHASING DIVISION

ATTACHMENT 1:

EXCEL TABULATION

SEPARATE ATTACHMENT

- DO NOT RECREATE
- COMPLETE AND SUBMIT IN EXCEL FORMAT ON USB DRIVE

It is understood that the estimated summary of pay item quantities are approximate only and are solely for the purpose of facilitating the comparison of bids, and that the Contractor's compensation shall be computed upon the basis of the actual quantities in the completed work, whether they be more or less than those shown.

Preparation of Bid Schedules: Contractor **MUST** use the City provided excel spreadsheet. **DO NOT RECREATE FORM**. All blank spaces in the Bid Form to be filled. *Bidder should not reference the words "No Charge, N/A, included, dash, etc." in any of the blocks. Bidder must identify a monetary amount for each UNIT COST (unless the unit price is "x" out by the City). UNIT COST prevails over EXTENDED COST. Failure to identify a monetary amount in any of the UNIT COST line items shall cause Bidder to be deemed non-responsive and bid response be rejected.* In case of discrepancy between unit price and extended price, the unit price will govern. Apparent errors in extension will be corrected.

ATTACHMENT 2:**INSURANCE REQUIREMENTS**

Contractor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.

The insurance requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The City in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this Contract by the Contractor, his agents, representatives, employees, or subcontractors. Contractor is free to purchase such additional insurance as may be determined necessary.

LIMITS OF INSURANCE - Contractor shall provide coverage with limits of liability not less than those stated below. An excess liability policy or umbrella liability policy may be used to meet the minimum liability requirements provided that the coverage is written on a "following form" basis.

Requirements:**1. Commercial General Liability – Occurrence Form (CG 00 01)**

Policy shall include bodily injury, property damage, broad form contractual liability and Explosion, Collapse and Underground (XCU) coverage. The general aggregate limit shall apply separately to this project/location or the general aggregate limit shall be twice the required occurrence limit.

The Contractor shall procure and maintain, and require all subcontractors to procure and maintain a comprehensive general liability policy, including, but not limited to

- General Aggregate \$1,000,000
- Each Occurrence \$1,000,000
- products and completed ops \$1,000,000
- damage to rented premises \$100,000
- fire damage \$100,000

- a) The policy shall be endorsed to include the following additional insured language: "City of North Port and its officers, employees, agents and volunteers" shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor.
- b) Contractor's subcontractors shall be subject to the same minimum requirements identified above.
- c) Policy shall be endorsed for a waiver of subrogation against the City of North Port.

2. Commercial Automobile Liability

Bodily injury and property damage for any owned, hired, and non-owned vehicles used in the performance of this Contract. Automobile liability must be written on a standard ISO form (CA 00 01) covering any auto (Code 1), or if Contractor has no owned autos, hired (Code 8) and non-owned (Code 9) autos.

- Combined Single Limit (CSL) (Ea Accident) \$1,000,000
- Bodily Injury (per person) \$1,000,000
- Bodily Injury (per accident) \$1,000,000
- Property Damage (per accident) \$1,000,000

- a) The policy shall be endorsed to include the following additional insured language: "City of North Port and its officers, employees, agents and volunteers" shall be named as an additional insured with

respect to liability arising out of the activities performed by, or on behalf of the Contractor, including automobiles owned, leased, hired or borrowed by the Contractor".

- b. Contractor's sub-contractors shall be subject to the same minimum requirements identified in this section.
- c. Policy shall contain a waiver of subrogation against the City of North Port.

3. Worker's Compensation and Employers' Liability (PER CHAPTER 440. FLORIDA STATUTES)

The Contractor shall procure and maintain Worker's Compensation insurance for all his employees to be engaged in work on the project under this Contract and, in case any such work is sublet, the Contractor shall require the subcontractor similarly to provide Worker's Compensation insurance for all of the latter's employees to be engaged in such work unless such employees are covered by protection afforded by the Contractor's Workers Compensation insurance. For additional information contact the Department of financial Services, Workers' Compensation Division at 850.413.1601 or on the web at www.fldfs.com. In case any class of employees engaged in hazardous work on the project under this Contract is not protected under the Worker's Compensation Statute, the Contractor shall provide, and shall cause each subcontractor to provide, Employer's Liability Insurance for the protection of such of his employees not otherwise protected under such provisions. The minimum liability limits of such insurance shall not be less than herein specified or in that amount specified by law for that type of damage claim.

Proof of such insurance shall be filed by the Contractor with the City within ten (10) days after the execution of this Contract.

Workers' Compensation Employers' Liability

- Each Accident, each employee, bodily injury or disease \$1,000,000
- a. Policy shall contain a waiver of subrogation against the City of North Port.
 - b. Contractor's sub-contractors shall be subject to the same minimum requirements identified in this section.
 - c. If the contractor has no employees, the contractor must submit to the City the Workers Compensation Exemption from the State of Florida.

4. Contractors' Pollution Legal Liability (if project involves environmental hazards) – If Required.

- Each Occurrence or Claim \$500,000
- Policy Aggregate \$500,000

GENERAL REQUIREMENTS:

A. The City of North Port is to be named additional insured on **Comprehensive Commercial General Liability Policy and Auto Policy**. All certificates of insurance must be on file with and approved by the City before commencement of any work activities under this Contract.

Any and all deductibles to the above referenced policies are to be the responsibility of the Contractor. The Contractor's insurance is considered primary for any loss regardless of any insurance maintained by the City. The Contractor is responsible for all insurance policy premiums, deductibles, or SIR (self-insured retentions) or any loss or portion of any loss that is not covered by any available insurance policy.

All insurance policies must be issued by companies of recognized responsibility licensed to do business in Florida and must contain a provision that prohibits cancellation unless the City is provided notice as stated within the policy. It is the Contractor's responsibility to provide notice to the City.

B. WAIVER OF SUBROGATION: All required insurance policies, with the exception of Workers Compensation, are to be endorsed with a waiver of subrogation. The insurance companies, by proper endorsement or thru other means, agrees to waive all rights of subrogation against the City, its officers, officials, employees and volunteers, and the City's insurance carriers, for losses paid under the terms of these policies that arises from the contractual relationship or work performed by the Contractor for the City. It is the Contractor's responsibility to notify their insurance company of the Waiver of Subrogation and request written authorization or the proper endorsement. Additionally, the Contractor, its officers, officials, agents, employees, volunteers, and any Subcontractors, agrees to waive all rights of subrogation against the City and its insurance carriers for any losses paid, sustained or incurred, but not covered by insurance, that arise from the contractual relationship or work performed. This waiver also applies to any deductibles or self-insured retentions the Contractor or its agents may be responsible for.

C. POLICY FORM:

1. All policies, required by this Contract, **with the exception of Workers Compensation**, or unless specific approval is given by Risk Management through the City's Purchasing Office, are to be **written on an occurrence basis**, shall name the City of North Port, its Commissioners, officers, agents, employees and volunteers as additional insured as their interest may appear under this Contract. Insurer(s), with the exception of Professional Liability and Workers Compensation, shall agree to waive all rights of subrogation against the City of North Port, its Commissioners, officers, agents, employees, or volunteers.
2. Insurance requirements itemized in this Contract, and required of the Contractor, shall be provided by or on behalf of all subcontractors to cover their operations performed under this Contract. The Contractor shall be held responsible for any modifications, deviations, or omissions in these insurance requirements as they apply to subcontractors.
3. Each insurance policy required by this Contract shall:
 - a. Apply separately to each insured against whom claim is made and suit is brought, except with respect to limits of the insurer's liability.
 - b. Be endorsed to state that coverage shall not be suspended, voided or cancelled by either party except after notice is delivered in accordance with the policy provisions. The Contractor is to notify the City Purchasing Office by written notice via certified mail, return receipt requested.
4. The City shall retain the right to review, at any time, coverage, form, and amount of insurance.

5. The procuring of required policies of insurance shall not be construed to limit Contractor's liability nor to fulfill the indemnification provisions and requirements of this Contract. The extent of Contractor's liability for indemnity of the City shall not be limited by insurance coverage or lack thereof, or unreasonably delayed for any reason, including but not limited to, insurance coverage disputes between the Contractor and its carrier.
6. The Contractor shall be solely responsible for payment of all premiums for insurance contributing to the satisfaction of this Contract and shall be solely responsible for the payment of all deductibles and retentions to which such policies are subject, whether or not the City is an insured under the policy.
7. Claims Made Policies will be accepted for professional and hazardous materials and such other risks as are authorized by the City's Risk Office. All Claims Made Policies contributing to the satisfaction of the insurance requirements herein shall have an extended reporting period option or automatic coverage of not less than two (2) years. If provided as an option, the Contractor agrees to purchase the extended reporting period on cancellation or termination unless a new policy is affected with a retroactive date, including at least the last policy year.
8. Certificates of Insurance Evidencing Claims Made or Occurrences form coverage and conditions to this Contract, as well as the contract number and description of work, are to be furnished to the City's Purchasing Office (4970 City Hall Boulevard, Suite 337, North Port, FL 34286) prior to commencement of work AND a minimum of thirty (30) calendar days prior to expiration of the insurance contract when applicable. All insurance certificates shall be received by the City's Purchasing Office before the Contractor will be allowed to commence or continue work. The Certificate of Insurance issued by the underwriting department of the insurance carrier shall certify compliance with the insurance requirements provided herein.

Bidders should carefully review their existing insurances and consider their ability to meet these requirements prior to submission. The requirements should be forwarded to their agent, broker, and insurance providers for review

Unless otherwise specified, it shall be the responsibility of the contractor to ensure that all subcontractors comply with the same insurance requirements spelled out above.

All certificates of insurance must be on file with and approved by the City of North Port Risk Division before the commencement of any work activities.

Bidder Statement:

We understand the requirements requested and agree to fully comply.

BIDDER'S NAME TITLE Raymond Pool TITLE Regional Manager

AUTHORIZED SIGNATURE DATE  DATE 10/21/2021

THIS PAGE MUST BE COMPLETED AND SUBMITTED

**ATTACHMENT 3:
"REVISED BID FORM"**

Name of Bidder/Company Name: Hawkins, Inc.
Business Address: 2263 Clark St
City/State/Zip Code: Apopka, FL 32793
Bidder/Company Telephone Number: 800-330-1369
E-mail Address: Chuck.pool@hawkinsinc.com
Contractor License #: _____
FEID #: 41-0771293

To the City Commission of the City of North Port pursuant to and in compliance with your notice inviting sealed bids (Invitation to Bid), Instructions to Bidders, and the other documents relating thereto, the undersigned Bidder, having familiarized himself/herself with the terms of the Contract documents, local conditions affecting the performance of the Contract, and the cost of the work at the place where the work is to be done, hereby proposes and agrees to perform within the time stipulated in the Contract, including all of its component parts and everything required to be performed, and to provide and furnish any and all of the labor, material, tools, expendable equipment, and all utility and transportation services and design of certain items necessary to perform the Contract and complete in a workmanlike manner, all of the work required in connection with the construction of said work all in strict conformity with the plans and specifications and other Contract documents for the prices hereinafter set forth.

The undersigned, as Bidder, does hereby declare that he has read the Request for Bids, Instructions to Bidders, General Provisions, Special Provisions, Technical Specifications & Conditions, Attachments, Exhibits, Insurance Requirements, Bid Form, Permit Fees, Plan Revisions, Plans, and any other reports or documentation for: **RFB 2022-01 WATER AND WASTEWATER TREATMENT CHEMICALS** and further agrees to furnish all items listed on the attached Bid Form in accordance with the unit price line items as indicated on the bid schedule form(s) submitted. The above specified documents are herein incorporated into the Bid Form.

The undersigned as Bidder, declares that the only persons or parties interested in this submittal as principals are those named herein: that this submittal is made without collusion with any person, firm, or corporation: and he/she proposes and agrees, if the proposal is accepted, that he/she will execute a Contract with the City in the form set forth in the Contract documents and that he/she will accept in full payment thereof the following prices, to wit:

PROJECT TOTAL: _____ \$ 958,835.00

Through the signing of this Bid Form, Bidder attests his/her bid is guaranteed for a period of not less than **NINETY (90) DAYS** from the date of the official bid opening.

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional manager.

THIS PAGE MUST BE COMPLETED AND SUBMITTED

**ATTACHMENT 4:
STATEMENT OF ORGANIZATION**

The following information will be provided to the City of North Port for incorporation in legal documents. It is, therefore, vital all information is accurate and complete. Please be certain all spelling, and capitalization is exactly as registered with the state or federal government.

Company Name Hawkins, Inc.

612-331-6910 chuck.pool@hawkinsinc.com 800-524-9315

Telephone # **E-Mail** **Fax #**
2381 Rosegate

Main Office Address **MN** **55113**
Minneapolis

City **State** **Zip Code**

Address of Office Servicing City of North Port, if different than above: SAME AS ABOVE

871 Industrial Ct

Office Address **FL** **33935**
LaBelle

City **State** **Zip Code**
800-330-1369 jeff.barnes@hawkinsinc.com 800-524-9315

Telephone # **E-mail** **Fax #**
Raymond Pool / Regional Manager

Name & Title of Firm Representative

Federal Identification Number: 41-0771293

Bidder shall submit proof that it is authorized to do business in the State of Florida unless registration is not required by law.

(Please Check One)

Is this a Florida Corporation: Yes or No

If not a Florida Corporation,

In what state was it created: MN

Name as spelled in that State: Hawkins, Inc.

What kind of corporation is it: "For Profit" or "Not for Profit"

Is it in good standing: Yes or No

Authorized to transact business in Florida: Yes or No

State of Florida Department of State Certificate of Authority Document No.: F14000004437

Does it use a registered fictitious name: Yes or No

Names of Officers:

President: Patrick Hawkins Secretary: Richard Erstad

Vice President: _____ Treasurer: _____

Director: _____ Director: _____

Other: _____ Other: _____

Name of Corporation (As used in Florida):

Hawkins Water Treatment Group

(Spelled exactly as it is registered with the state or federal government)

Corporate Address:

Post Office Box: PO Box 860263
City, State Zip: Minneapolis, MN 55486-0263
Street Address: 2381 Rosegate
City, State, Zip: Roseville, MN 55113

STATE OF FLORIDA

COUNTY OF Orange

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this
21st day of October 2021, by Raymond Pool.

Notary Public – State of Florida

Personally Known OR Produced Identification _____
Type of Identification Produced _____



Date: 10/21/2021

Signed (Person authorized to bind the company):

Name (printed): Raymond Pool Title: Regional Manager

THIS PAGE MUST BE COMPLETED AND SUBMITTED

ATTACHMENT 6:

EQUIPMENT AND SUBCONTRACTOR/SUPPLIER LIST

Equipment is located at: 871 Industrial Ct, LaBelle, FL 33935

The following is a listing of your equipment, inclusive of manufacturer, year and condition. List the condition of equipment/vehicles utilized for this project in accordance with the following scale: **1-Excellent: 2-Good: 3-Fair: 4-Poor.** (Attach additional sheets, if required.)

Description	Manufacturer	Year	Condition	Leased/Owned (If leased, date of expiration)
40ft, tandem axle, flatbed	Freightliner	2016	2	Owned.

SOURCE OF SUPPLY AND SUBCONTRACTOR FORM

The following sources of supply and subcontractors shall be used for the **RFB NO. 2022-01 WATER AND WASTEWATER TREATMENT CHEMICALS**. If Bidder does not have a source of supply or subcontractor, insert "to be determined". When a source or subcontractor is determined, selection will be subject to City approval. (If not applicable, state N/A).

SUBCONTRACTOR(S)

(PLEASE INCLUDE ADDRESS/TELEPHONE NUMBER & E-MAIL)

1. N/A
2. _____
3. _____

SUPPLIER(S)

1. Ammonium Sulfate 40% (AS4000) - Manufactured by Hawkins
2. Sulfuric Acid 50% - Purchased at 93%, diluted to 50% by Hawkins.
3. ~~Hydrogen~~ Sodium Hydrosulfide 32% - Chevoke Chemical, Inc.

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

THIS PAGE MUST BE COMPLETED AND SUBMITTED

**ATTACHMENT 7:
QUALIFICATIONS AND REFERENCES**

Prime bidder must be fully licensed to do business in the State of Florida and be currently licensed as a Certified General Contractor in the State of Florida and provide proof of licensure with the submitted Bid Proposal. Bidders must have successfully completed, as a Prime or Subcontractor, at least one (2) projects, in the past six (6) years, of similar type, size and dollar value of the project described herein.

1. Business/Customer Name: Florida Keys Aquaduct Authority

Name of Contact Person/Title: Jay Miller / Manager of WWTP Operations

Telephone# 305-296-2454 Fax _____ E-mail jmillier@fkaa.com

Address 700 Front Street (Stock Island), Key West, FL 33040

Phone Number _____

Duration of Contract or business relationship 2015 / Current

Type of Services Provided Mini bulk delivery of various water treatment chemicals to multiple facilities

Contract Period: FROM 11/30/2018 TO 12/01/2026

Contract Price \$400,000.00 Annually Contract Price at Completion of the Project \$ 3,200,000.00

2. Business/Customer Name: City of Deltona

Name of Contact Person/Title: Shane Churney

Telephone# 386-871-7432 Fax _____ E-mail SChurney@deltonafl.gov

Address 255 Enterprise, Deltona, FL 32735

Phone Number _____

Duration of Contract or business relationship 2005 / Current

Type of Services Provided Mini bulk delivery of various water treatment chemicals to multiple facilities

Contract Period: FROM 09/06/2018 TO 09/05/2022

Contract Price \$585,000.00 Annually Contract Price at Completion of the Project \$ 2,340,000.00

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

THIS PAGE MUST BE COMPLETED AND SUBMITTED

3. Business/Customer Name: City of Palm Coast

Name of Contact Person/Title: Fred Greiner / Chief Operator

Telephone# 386-986-2347 Fax _____ E-mail fgreiner@palmcoastgov.com

Address 50 Citation Blvd, Palm Coast, FL 32164

Contract Period: FROM 10/01/2021 TO 09/30/2024

Contract Price \$ 112,000.00 Annually Contract Price at Completion of the Project \$ 336,000.00

Phone Number _____

Duration of Contract or business relationship 2013 / Current

Type of Services Provided Mini bulk delivery of various water treatment chemicals to multiple facilities

~~Contract Period: FROM _____ TO _____~~

~~Contract Price \$ _____ Contract Price at Completion of the Project \$ _____~~

4. Business/Customer Name: Coral Springs Improvement District

Name of Contact Person/Title: Joe Stephens

Telephone# 954-796-6665 Fax _____ E-mail joes@csidfl.org

Address 10300 NW 11th Manor, Coral Springs, FL 33071

Phone Number _____

Duration of Contract or business relationship 2015 / Current

Type of Services Provided Mini bulk delivery of various water treatment chemicals

Contract Period: FROM _____ TO _____

Contract Price \$ _____ Contract Price at Completion of the Project \$ _____

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

THIS PAGE MUST BE COMPLETED AND SUBMITTED

ATTACHMENT 8:

NON-COLLUSIVE AFFIDAVIT

State of Florida
County of Orange } ss.

Before me, the undersigned authority, personally appeared:

Raymond Pool who, being first duly sworn, deposes and says that:

1. He/She is the Regional Manager (Owner, Partner, Officer, Representative or Agent) of Hawkins, Inc., the Respondent that has submitted the attached reply:

2. He/She is fully informed respecting the preparation and contents of the attached reply and of all pertinent circumstances respecting such reply:

3. Such reply is genuine and is not a collusive or sham reply:

4. Neither the said Respondent nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other respondent, firm, or person to submit a collusive or sham reply in connection with the work for which the attached reply has been submitted: or have in any manner, directly or indirectly sought by agreement or collusion, or communication or conference with any respondent, firm, or person to fix the price or prices in the attached reply or of any other respondent, or to fix any overhead, profit, or cost elements of the reply price or the reply price of any other respondent, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the reply work.

Signed, sealed and delivered this 21st day of October, 2021.

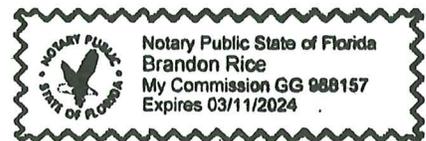
By: Raymond Pool
(Printed Name)
Regional Manager
(Title)

STATE OF FLORIDA
COUNTY OF Orange

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 21st day of October 2021, by Raymond Pool.

[Signature]
Notary Public – State of Florida

Personally Known OR Produced Identification _____
Type of Identification Produced _____



THIS PAGE MUST BE COMPLETED AND SUBMITTED

**ATTACHMENT 9:
CONFLICT OF INTEREST FORM**

F.S. §112.313 places limitations on public officers (including advisory board members) and employees' ability to contract with the City either directly or indirectly. Therefore, please indicate if the following applies:

PART I.

I am an employee, public officer or advisory board member of the City

_____ (List Position Or Board)

I am the spouse or child of an employee, public officer or advisory board member of the City

Name: _____

An employee, public officer or advisory board member of the City, or their spouse or child, is an officer, partner, director, or proprietor of Respondent or has a material interest in Respondent. "Material interest" means direct or indirect ownership of more than 5 percent of the total assets or capital stock of any business entity. For the purposes of [§112.313], indirect ownership does not include ownership by a spouse or minor child.

Name: _____

Respondent employs or contracts with an employee, public officer or advisory board member of the City

Name: _____

None of The Above

PART II:

Are you going to request an advisory board member waiver?

I will request an advisory board member waiver under §112.313(12)

I will NOT request an advisory board member waiver under §112.313(12)

N/A

The City shall review any relationships which may be prohibited under the Florida Ethics Code and will disqualify any bidders whose conflicts are not waived or exempt.

Hawkins, Inc.

COMPANY: _____

SIGNATURE: _____



Raymond Pool / Regional Manager

This page must be completed and submitted

**ATTACHMENT 10:
PUBLIC ENTITY CRIME INFORMATION**

As provided by F.S. §287.133, a person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a Contract to provide any goods or services to a public entity, may not submit a bid on a Contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a Contractor, supplier, Subcontractor, or Consultant under a Contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

I, Raymond Pool, being an authorized representative of the Respondent Hawkins, Inc.

Located at: 2263 Clark St

City: Apopka State: FL Zip Code: 32703, have read and understand the contents above. I further certify that Respondent is not disqualified from replying to this solicitation because of F.S. §287.133.

Signature:  Date: 10/21/2021

Telephone #: 800-330-1369 Fax #: 800-524-9315

Federal ID #: 41-0771293 E-mail: chuck.pool@hawkinsinc.com

State of Florida

County of Orange

STATE OF FLORIDA

COUNTY OF Orange

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 21st day of October 2021, by Raymond Pool.


Notary Public – State of Florida

Personally Known OR Produced Identification

Type of Identification Produced _____

Date: 10/21/2021



Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

THIS PAGE MUST BE COMPLETED AND SUBMITTED

**ATTACHMENT 11:
DRUG-FREE WORKPLACE FORM**

The undersigned Respondent in accordance with Florida Statute §287.087 hereby certifies that: Hawkins, Inc. (Company Name) does:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
 2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
 3. Give each employee engaged in providing the commodities or Contractual services that are under bid a copy of the statement specified in subsection (1).
 4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or Contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
 5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
 6. Make a good faith effort to continue to maintain a drug free workplace through implementation of this section.
- As the person authorized to sign the statement, I certify that Respondent complies fully with the above requirements.

Check one:



As the person authorized to sign this statement, I certify that this firm complies fully with above requirements.



As the person authorized to sign this statement, this firm **does not** comply fully with the above requirements.



Signature

Raymond Pool

Print Name

10/21/2021

Date

THIS PAGE MUST BE COMPLETED AND SUBMITTED

ATTACHMENT 13:

Scrutinized Company Certification Form

Company Name: Hawkins, Inc.Authorized Representative Name and Title: Raymond Pool / Regional ManagerAddress: 2263 Clark St City: Apopka State: FL ZIP: 32703Phone Number: 800-330-1369 Email Address: chuck.pool@hawkinsinc.com

A company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a Contract with the City of North Port for goods or services of any amount if, at the time of bidding on, submitting a proposal for, or entering into or renewing such Contract, the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Florida Statutes, section 215.4725, or is engaged in a boycott of Israel.

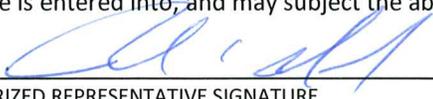
A company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a Contract with the City of North Port for goods or services of \$1 million or more if, at the time of bidding on, submitting a proposal for, or entering into or renewing such Contract, the company is on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to Florida Statutes, section 215.473, or with companies engaged in business operations in Cuba or Syria.

CHOOSE ONE OF THE FOLLOWING

This bid, proposal, Contract or Contract renewal is for goods or services of less than \$1 million. As the person authorized to sign on behalf of the above-named company, and as required by Florida Statutes, section 287.135(5), I hereby certify that the above-named company is not participating in a boycott of Israel.

This bid, proposal, Contract or Contract renewal is for goods or services of \$1 million or more. As the person authorized to sign on behalf of the above-named company, and as required by Florida Statutes, section 287.135(5), I hereby certify that the above-named company is not participating in a boycott of Israel, is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and it does not have business operations in Cuba or Syria.

I understand that pursuant to Florida Statutes, section 287.135, the submission of a false certification may result in the termination of the Contract if one is entered into, and may subject the above-named company to civil penalties, attorney's fees and costs.

Certified By: 
AUTHORIZED REPRESENTATIVE SIGNATURE

Print Name and Title: Raymond Pool, Regional Manager

Date Certified: 10/21/2021

Solicitation/Contract/PO Number (Completed by Purchasing): _____

THIS PAGE MUST BE COMPLETED AND SUBMITTED

ATTACHMENT 14:

LOBBYING CERTIFICATION

"The undersigned hereby certifies, to the best of his or her knowledge and belief, that":

STATE OF Florida

COUNTY OF Orange

This 21st day October of 2021 Raymond Pool, being first duly sworn, deposes and says that he or she is the authorized representative of Hawkins, Inc. (Name of the Contractor, firm or individual), and that the vendor and any of its agents agree to have no contact or communication with, or discuss any matter related in any way to any active City of North Port solicitation, with any City of North Port elected officials, officers, their appointees or their agents or any other staff or outside individuals working with the City in respect to this request other than the designated Procurement Official Contact and to abide by the restrictions outlined in the General Terms and Conditions of the Solicitation. Technical questions directed to the project manager, is prohibited. These persons shall not be lobbied, either individually or collectively, regarding any questions for bid, proposal, qualification and/or any other solicitations released by the City. To do so is grounds for immediate disqualification from the selection process. The selection process is not considered final until such a time as the Commission has made a final and conclusive determination.

(a) No City appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence either directly or indirectly an officer or employee of the City, City Commission in connection with the awarding of any City Contract.

(b) If any funds other than City appropriated funds have been paid or will be paid to any person for influencing or attempting to influence a member of City Commission or an officer or employee of the City in connection with this Contract, the undersigned shall complete and submit Standard Form-L "Disclosure Form to Report Lobbying", in accordance with its instructions.

Signed, sealed and delivered this 21st day of October, 2021.

By: [Signature]

Raymond Pool
(Printed Name)
Regional Manager
(Title)

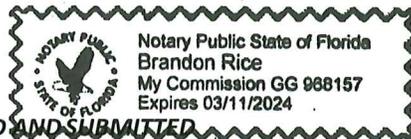
STATE OF FLORIDA

COUNTY OF Orange

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 21st day of October 2021, by Raymond Pool.

[Signature]
Notary Public – State of Florida

Personally Known OR Produced Identification
Type of Identification Produced _____



THIS PAGE MUST BE COMPLETED AND SUBMITTED

ATTACHMENT 15:
VENDOR'S CERTIFICATION FOR E-VERIFY SYSTEM

STATE OF Florida
COUNTY OF Orange

The undersigned Vendor/Consultant/Contractor (Vendor), after being duly sworn, states the following:

1. Vendor is a person or entity that has entered into or is attempting to enter into a contract with the City of North Port (City) to provide labor, supplies, or services to the City in exchange for salary, wages or other remuneration.
2. Vendor has registered with and will use the E-Verify System of the United States Department of Homeland Security to verify the employment eligibility of:
 - a. All persons newly hired by the Vendor to perform employment duties within Florida during the term of the contract; and
 - b. All persons, including sub-contractors, sub-vendors or sub-consultants, assigned by the Vendor to perform work pursuant to the contract with the City.
3. If the Vendor becomes the successful Contractor who enters into a contract with the City, then the Vendor will comply with the requirements of Section 448.095, Fla. Stat. "Employment Eligibility", as amended from time to time.
4. Vendor will obtain an affidavit from all subcontractors attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien as defined in 8 United States Code, Section 1324A(H)(3).
5. Vendor will maintain the original affidavit of all subcontractors for the duration of the contract.
6. Vendor affirms that failure to comply with the state law requirements can result in the City's termination of the contract and other penalties as provided by law.

VENDOR: Hawkins, Inc. (Vendor's Company Name)

[Signature] (Vendor signature)

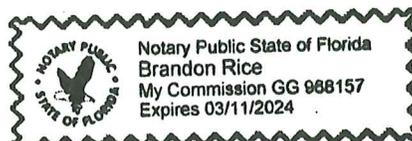
Raymond Pool (Vendor's name printed)

Regional Manager (Title)

Sworn to and subscribed before me by means of physical presence or online notarization, this 21st day of October, 2021, by Raymond Pool as Regional Manager.

[Signature]
Notary Public

Personally Known OR Produced Identification _____
Type of Identification Produced _____



THIS PAGE MUST BE COMPLETED AND SUBMITTED

ADDENDA

The undersigned acknowledges receipt of the following addenda, and the cost, if any, of such revisions has been included in the bid price.

Addendum No. 1		10/04		Dated		Addendum No. 5		Dated	10/14
Addendum No. 2		10/06		Dated		Addendum No. 6		Dated	10/18
Addendum No. 3		10/08		Dated		Addendum No. 7		Dated	10/20
Addendum No. 4		10/13		Dated		Addendum No.		Dated	

Date: 10/21/2021

Signed (Person authorized to bind the company): 

Name (printed): Raymond Pool Title: Regional Manager

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)



City of North Port
FINANCE DEPARTMENT/PURCHASING DIVISION
4970 CITY HALL BLVD, STE 337
NORTH PORT, FLORIDA 34287
Office: 941.429.7170
Fax: 941.429.7173
Email: purchasing@cityofnorthport.com



October 4, 2021
ADDENDUM 1

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~striketroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Question 1: Is 10% the correct percentage for Ammonium Sulfate?

Answer 1: No, the correct percentage for Ammonium Sulfate is 40%. Please disregard the 10% and use 40% for the Ammonium Sulfate.

Question 2: What are the tank sizes at each location?

Answer 2: - North East Booster Location: Two (350) Gallon Tanks

- Water Treatment Plant Location on Pan American: Two (550) Gallon Tanks

- Southwest Booster Location: One (1000) Gallon Tank

Question 3: Do you have the bid tabulation for the previous contract.

Answer 3: No. The City of North Port Currently does not have a contract in place for chemicals. The City of North Port piggybacks off other contracts from various municipalities. Below is a list of the Municipalities and the pricing we receive for chemicals. Please be aware these contracts and pricing below may be older and may not accurately reflect current market pricing.

Sodium Hypochlorite (Chlorine): Charlotte County Florida Contract, 0.554/gallon

Aluminum Sulfate: Ormond Beach, Florida Contract, \$248.75/dry ton, and 0.672/gallon

Liquid Caustic: City of Tampa Contract, \$1.973/gallon

Antiscalent: Currently no contract in place or piggyback.

Sulfuric Acid: City of Palm Coast, Florida Contract, \$2.05/gallon

Ammonium Sulfate: City of Palm Coast, Florida, \$1.62/gallon

Sodium Hydrosulfide (NaHS): Currently no contract in place or piggyback.

Powder Activated Carbon: City has not purchased

Polymer: City has not purchased.

Polymer Polydyne: Pricing is \$1.32/pounds

Question 4: On page 34 of the bid documents, for the directions for Attachment 2, the bid states to submit one USB drive. Does the bidder need to print the excel spreadsheet as well and include it in the bid documents? Also, should the USB drive only include the pricing sheet?

Answer 4: Vendors must submit a hard copy of their bid and bid schedule as well as a USB with the bid and bid schedule. Bid schedule on the USB must be in excel format.

Question 5: Does the city require the whole bid package to be sent back or just the specific attachments on page 34 (plus any other relevant info)?

Answer 5: Please submit the required documents outlined in the solicitation.

Question 6: On pg. 24, Under "Price Adjustments" the bid is stating storage tanks, when required for materials offered under this bid, shall be furnished by the successful bidder, on a no-cost-to-buyer loan basis. Are Storage tanks anticipated for this award? Specifically, for the Liquid Aluminum Sulfate.

Answer 6: They are not anticipated. I do not expect additional storage tanks to be supplied.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
North Port, Florida 34286
Tel: 941.429.7102
Fax: 941.429.7173
E-mail: gthomas@cityofnorthport.com

Receipt of Addendum No. 1 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.1



City of North Port
FINANCE DEPARTMENT/PURCHASING DIVISION
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October 6, 2021
ADDENDUM 2

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~strike throughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Question 1: The bidder checklist references Attachment 5, Addenda and Bond Form. This form is not included.

Answer 1: There is no bond requirement for this bid. Please disregard the bond language.

Question 2: The volume mentioned for the liquid aluminum sulfate on the pricing sheet is 900,000 gallons. Is this the correct Unit of Measure?

Answer 2: Estimated volume is 25,000 Gallons annually.

Question 3: On the excel pricing sheet, if we are not bidding a certain product what are we supposed to use as the total unit cost? When I write in "NO BID" I receive an error. Do you want "No Bid" written in the space or are we to leave the products we are not bidding blank?

Answer 3: Please leave the space blank for "No Bid".

Question 4: If we plan to use subcontractors to deliver the product, does the subcontractor have to product 2 references and their safety incident reports? This is mentioned on page 18, section 1.2.1.

Answer 4: Yes.

Question 5: Is this a mini-bulk delivery for items SP-20 and SP-21?

If yes, what is the distance to the tank from the access point? Do you have a pump and a meter on the day tank?

Answer 5: SP-20 shall be delivered in 250-gallon totes and will be dropped off and stored on site in the transported totes. SP-21 shall be delivered in 250-gallon totes and will be dropped off and stored on site in the transported totes.

Question 6: If Sp-20 and SP-21 are not mini bulk will you need a lift gate truck?

Answer 6: Both should be delivered and lowered to ground level on site by vendor.

Question 7: Do you need inside delivery? If yes, please provide the distance from the off-loading site to the storage site.

Answer 7: No.

Question 8: We will be supplying and delivering chemicals which does not require us to be a general contractor. Could you please explain this requirement?

Answer 8: Not needed.

Question 9: The current cost of Corrosion Inhibitor.

Answer 9: No Contract in place.

Question 10: Attachment #5 (Addenda and Bond Form) from bidders' checklist was not included in bid.

Answer 10: There is no attachment 5 so please disregard. There are no bond requirements for this bid. For the addenda portion, please utilize the "**Revised Bid Form**" that replaces the previous Bid Form as the addendum information has been added at the bottom of "**Revised Bid Form**". "**Revised Bid Form**" is attached to this addendum.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
North Port, Florida 34286
Tel: 941.429.7102
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Receipt of Addendum No. 2 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.2



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October 8, 2021
ADDENDUM 3

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

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Question 1: Pg. 24; SP-05 References: "Bidders must have successfully completed, as a Prime or Subcontractor, at least one (2) projects, in the past six (6) years, of similar type, size and dollar value of the project described herein."

- a. Does the bid require 1 or 2 projects of similar size, scope, and value?
- b. Does the bid require a total of 4 references or 2?
- c. If you are using a subcontractor, does the subcontractor need to provide 2 or 4 references?
- d. Does the bid require an original signature on the reference sheets from the subcontractor? Or can you provide a scanned copy?

Answer 1: a. Two Projects of similar size, scope, and value.
b. The bid requires a total of two references.
c. If you are using a subcontractor, the subcontractor needs to provide 2 references.
d. A scanned version is acceptable.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
North Port, Florida 34286
Tel: 941.429.7102
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E-mail: gthomas@cityofnorthport.com

Receipt of Addendum No. 3 shall be noted within the Bid Form in the appropriate section.
End of Addendum No.3



City of North Port
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October 13, 2021
ADDENDUM 4

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~striketroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Question 1: Could you please provide me with the following information for the Sodium Hypochlorite 12.5% portion of the bid:

How much Sodium Hypochlorite 12.5% do you generally need per gallon per location each delivery?

- 8898 South Tamiami Trail
- 5355 Pan American BLVD
- 5655 North Port BLVD
- 1550 Nabatoff St.
- 8060 South Tamiami Trail
- 11820 Manasota Beach Road

Answer: 1

- 8898 South Tamiami Trail: 500 gallons
- 5355 Pan American BLVD: 3500 gallons
- 5655 North Port BLVD: 2000 gallons
- 1550 Nabatoff St.: 1000 gallons
- 8060 South Tamiami Trail: 1000 gallons
- 11820 Manasota Beach Road: Not online yet expected in April 2022 about 1000 gallons
- *We will be ordering 5355 Pan American BLVD and 8898 South Tamiami Trail weekly at the same time. (4000 gallons)
- We will be ordering chemicals at the other 4 sites every two weeks. (5000 gallons)

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
North Port, Florida 34286
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Fax: 941.429.7173
E-mail: gthomas@cityofnorthport.com

Receipt of Addendum No. 4 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.4



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October 14, 2021
ADDENDUM 5

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~striketroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Clarification 1: In Addendum 2 you corrected the volume of the Liquid Aluminum Sulfate from 900,000 gallons to 25,000 gallons annually. Will you be revising the Bid Schedule to reflect the new volume?

Answer 1: When completing the bid schedule utilize 25,000 gallons annually for the volume of Liquid Aluminum Sulfate.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
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Receipt of Addendum No. 5 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.5



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 Email: purchasing@cityofnorthport.com



October 18, 2021
ADDENDUM 6

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 22, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~striketroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Clarification 1: On page 27 for the specs of Aluminum Sulfate, it says Aluminum Sulfate shall be in accordance with AWWA specs. It also states that the Aluminum Sulfate is liquid at 40%. AWWA specs of Aluminum Sulfate is liquid at 48%. Can you clarify?

Answer 1: 48% is the correct specification.

Clarification 2: On page 27, it states that Aluminum Sulfate shall meet NSF-60 or 61 as appropriate for 400 mg/L feed rate. Per NSF, the max use of Aluminum Sulfate is 150 mg/L. Please clarify.

Answer 2: NSF-feed rate of 400 mg/L is properly specified.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
 4970 City Hall Blvd.
 North Port, Florida 34286
 Tel: 941.429.7102
 Fax: 941.429.7173
 E-mail: gthomas@cityofnorthport.com

Receipt of Addendum No. 6 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.6



City of North Port
FINANCE DEPARTMENT/PURCHASING DIVISION
4970 CITY HALL BLVD, STE 337
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Email: purchasing@cityofnorthport.com



October 20, 2021
ADDENDUM 7

TO: PROSPECTIVE BIDDERS

RE: RFB NO. 2022-01 Water and Wastewater Treatment Chemicals

DUE DATE October 26, 2021 at 2:00 P.M.

City Hall, Room 244 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 244 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above bid are issued to modify, and/or clarify the bid and contract documents (the deletions are as ~~striketroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and bids to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

Question 1: Will the bid be extended?

Answer 1: Yes, RFB 2022-01 Water and Wastewater Treatment Chemicals will not open on ~~10/22/21~~ at 2:00 p.m. The new bid opening date will be October 26, 2021 at 2:00 p.m.

Clarification 1: Does line-item number two Aluminum Sulfate (40%) on the bid schedule change to Aluminum Sulfate (48%) in accordance with Clarification One on Addendum Six?

Clarification Answer 1: Yes, Line-item number two ~~Aluminum Sulfate (40%)~~ on the bid schedule has been corrected to Aluminum Sulfate (48%). Use Aluminum Sulfate (48%) for Line-item Two for pricing on the bid schedule.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Geoff Thomas
Contract Administrator I
Finance Department/Purchasing Division
4970 City Hall Blvd.
North Port, Florida 34286
Tel: 941.429.7102
Fax: 941.429.7173
E-mail: gthomas@cityofnorthport.com

Receipt of Addendum No. 7 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.7

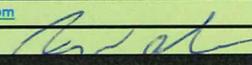
**RFB 2022-01 CHEMICALS ATTACHMENT 1
 BID FORM - TABULATION- COST SCHEDULE**

Bidders are required to complete all fields shaded in green. All other fields will be automatically calculated.

NAME OF BUSINESS: Hawkins, Inc.

CONTACT PERSON: Raymond Pool

EMAIL ADDRESS: chuck.pool@hawkinsinc.com

AUTHORIZED SIGNATURE: Raymond Pool 

ITEM #	DESCRIPTION	EST QTY	UNIT	TOTAL UNIT COST	EXTENDED COST
I	CHEMICALS				
1	SODIUM HYDROXIDE SOLUTION NaOH at 50% (CAUSTIC SODA)	36,500	GALLON		\$ -
2	ALUMINUM SULFATE (40%)	900,000	GALLON		\$ -
3	COAGULANT AID	6,400	POUND		\$ -
4	POWDERED ACTIVATED CARBON	4,800	POUND		\$ -
5	SODIUM HYPOCHLORITE SOLUTION NaOCl 12.5%	260,000	GALLON		\$ -
6	SULFURIC ACID	22,000	GALLON	\$3.25	\$ 71,500.00
7	AMMONIUM SULFATE 40% LIQUID	17,300	GALLON	\$3.95	\$ 68,335.00
8	FLOCCULANT POLYMER (WSTEWATER DRUM THICKENER)	10,000	GALLON		\$ -
9	LIQUID CO2 (CARBON DIOXIDE)	9,125	POUND		\$ -
10	SCALE INHIBITOR	8,400	GALLON		\$ -
11	CORROSION INHIBITOR (ORTHOPHOSPHATE BLEND)	4,300	GALLON		\$ -
12	CALCIUM CHLORIDE 32%	36,500	GALLON		\$ -
13	SODIUM HYDROSULFIDE	21,000	GALLON	\$39.00	\$ 819,000.00
TOTAL					\$ 958,835.00



WATER TREATMENT GROUP

Hawkins, Inc.
2263 Clark Street
Apopka, FL
PH: 800-330-1369
FAX: 800-524-9315

June 19, 2020

To Whom It May Concern:

As Hawkins, Inc's Vice President-Water Treatment Group, I hereby authorize Raymond C. Pool to sign any and all bid documents, contracts/agreements along with any and all related material for and on behalf of Hawkins, Inc.

Thank you,

Doug Lange
Vice President
Water Treatment Group

State of Florida

Department of State

I certify from the records of this office that HAWKINS WATER TREATMENT GROUP, INC. is a Minnesota corporation authorized to transact business in the State of Florida, qualified on October 20, 2014.

The document number of this corporation is F14000004437.

I further certify that said corporation has paid all fees due this office through December 31, 2021, that its most recent annual report/uniform business report was filed on February 10, 2021, and that its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Tenth day of February, 2021*



Ronald R. Lee
Secretary of State

Tracking Number: 6577133637CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

Company ID Number: 116278

Client Company ID Number: 763528

Information Required for the E-Verify Program

Information relating to your Company:

Company Name	Hawkins, Inc.
Company Facility Address	2381 Rosegate Roseville, MN 55113
Company Alternate Address	
County or Parish	RAMSEY
Employer Identification Number	410771293
North American Industry Classification Systems Code	325
Parent Company	
Number of Employees	500 to 999 0 to 500 <i>DM</i>
Number of Sites Verified for	34

W-9

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

- 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Hawkins Inc
2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC [X] C Corporation [] S Corporation [] Partnership [] Trust/estate

Unlimited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) in _____

Notes: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) in _____

8 Address (number, street, and apt. or suite no.) See instructions. 2381 Rosegate

9 City, state, and ZIP code Roseville, MN 55113

7 List account number(s) here (optional)

Requester's name and address (optional)

Exempt payee code (if any)
Exemption from FATCA reporting code (if any)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN), if you do not have a number, see How to get a TIN, later.

Social security number: [][][][] - [][][] - [][][][][]

Notes: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

Employer identification number: 4 1 - 0 7 7 1 2 9 3

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person Paul J. Jara

Date 10/25/2021

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:
• Form 1099-INT (interest earned or paid)

• Form 1099-DIV (dividends, including those from stocks or mutual funds)

• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

• Form 1099-S (proceeds from real estate transactions)

• Form 1099-K (merchant card and third party network transactions)

• Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

• Form 1099-C (canceled debt)

• Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.

SAFETY DATA SHEET

COMPANY IDENTITY: CCI
 PRODUCT IDENTITY: SODIUM HYDROSULFIDE 32%

SDS DATE: 01/23/2020
 REPLACES: 09/05/2018

This Safety Data Sheet conforms to ANSI Z400.5, and to the format requirements and the International Chemical Safety Cards of the Global Harmonizing System.

THIS SDS COMPLIES WITH CFR 1910.1200 (HAZARD COMMUNICATIONS STANDARD)

IMPORTANT: Read this SDS before handling & disposing of this product.

Pass this information on to employees, customers, & users of this product.

SECTION 1. IDENTIFICATION OF THE SUBSTANCE OR MIXTURE AND OF THE SUPPLIER

PRODUCT IDENTITY: SODIUM HYDROSULFIDE 32%
 SDS NUMBER: CR6451
 COMPANY IDENTITY: CCI CHEMICAL
 COMPANY ADDRESS: 3540 EAST 26TH STREET, VERNON, CALIFORNIA 90058
 COMPANY PHONE: 800-767-9112
 EMERGENCY PHONES: CHEMTREC: 1-800-424-9300 (USA)
 CANUTEC: 1-613-996-6666 (CANADA)

SECTION 2. HAZARDS IDENTIFICATION

DANGER!!



EXPOSURE PREVENTION:

HAZARD STATEMENTS:

H100s = General, H200s = Physical, H300 = Health, H400s = Environmental

- H318 Causes serious eye damage.
- H315 Causes skin irritation and possible corrosion to the skin.
- H335 May cause respiratory irritation contains hydrogen sulfide, a highly toxic gas.
- H302 Harmful if swallowed. Ingestion will irritate/burn mouth, throat and gastrointestinal tract.

PRECAUTIONARY STATEMENTS:

P100s = General, P200s = Prevention, P300s = Response, P400s = Storage, P500s = Disposal

- P262 Do not get in eyes, on skin, or on clothing.
- P280 Wear protective gloves/protective clothing/eye protection/face protection.
- P305+351+338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses if present & easy to do – Continue rinsing.
- P309+311 If exposed or you feel unwell: Call a POISON CENTER or doctor/physician.
- P405+102 Store locked up. Keep out of reach of children.

SECTION 3. COMPOSITION/INFORMATION ON INGREDIENTS

MATERIAL	CAS#	EINECS#
Sodium Hydrosulfide	16721-80-5	240-778-0
Water	7732-18-5	231-791-2

Trace components: Trace ingredients (if any) are present in < 1% concentration, (< 0.1% for potential carcinogens, reproductive toxins, respiratory tract mutagens, and sensitizers). None of the trace ingredients contribute significant Additional hazards at the concentrations that may be present in this product. All pertinent hazard information has been provided in this document, per the requirements of the Federal Occupational Safety and Health Administration Standard (29 CFR 1910.1200), U.S. State equivalents, and Canadian Hazardous Materials Identification System Standard (CPR 4).

SECTION 4. FIRST AID MEASURES

EYE CONTACT:

If this product enters the eyes, open eyes while under gently running water. Use sufficient force to open eyelids. Roll eyes to expose more surface. Minimum flushing is for 15 minutes. Seek immediate medical attention.

SKIN CONTACT:

If the product contaminates the skin, immediately begin decontamination with running water. Minimum flushing is for 15 minutes. Remove contaminated clothing, taking care not to contaminate eyes. If skin becomes irritated and irritation persists, medical attention may be necessary. Wash contaminated clothing before reuse, discard contaminated shoes.

INHALATION:

After high vapor exposure, remove to fresh air. If it is suspected that the fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. Keep person warm and at rest, breathing is difficult, give oxygen. If breathing has stopped, trained personnel should immediately begin artificial respiration. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband. If the heart has stopped, trained personnel should immediately begin cardiopulmonary resuscitation (CPR). Seek immediate medical attention. In case of inhalation of decomposition products in a fire, symptoms may be delayed. The exposed person may need to be kept under medical surveillance for 48 hours.

SWALLOWING:

If swallowed, CALL PHYSICIAN OR POISON CONTROL CENTER FOR MOST CURRENT INFORMATION. If professional advice is not available, give two glasses of water to drink. DO NOT INDUCE VOMITING. Never induce vomiting or give liquids to someone who is unconscious, having convulsions, or unable to swallow. Seek immediate medical attention.

NOTES TO PHYSICIAN:

There is no specific antidote. Treatment of overexposure should be directed at the control of symptoms and the clinical condition of the patient. Any material aspirated during vomiting may cause lung injury. Therefore, emesis Should be induced mechanically or pharmacologically. If it is considered necessary to evacuate the stomach contents, this should be done by means least likely to cause aspiration (such as: Gastric lavage after endotracheal intubation).

Victims of chemical exposure must be taken for medical attention. Rescuers should be taken for medical attention, if necessary. Take a copy of the label and SDS to physician or health professional with victim.

SECTION 5. FIRE FIGHTING MEASURES

FIRE & EXPLOSIONS PREVENTIVE MEASURES:

Isolate from extreme heat and open flame.

EXTINGUISHING MEDIA:

In case of fire in surroundings, all extinguishing agents allowed. Contact with acids gives off hydrogen sulfide, a toxic and flammable gas that may form explosive mixtures in air.

SPECIAL FIRE FIGHTING PROCEDURES:

Water spray may be ineffective on fire but can protect fire-fighters & cool closed containers. Use fog nozzles if water is used. Do not enter confined fire-space without full bunker gear. (Helmet with face shield, bunker coats, gloves & rubber boots). Use NIOSH approved positive-pressure self-contained breathing apparatus.

UNUSUAL EXPLOSION AND FIRE PROCEDURES:

Noncombustible.

Isolate from acids.

Closed containers may explode if exposed to extreme heat.

Applying to hot surfaces requires special precautions.

SECTION 6. ACCIDENTAL RELEASE MEASURES

SPILL AND LEAK RESPONSE AND ENVIRONMENTAL PRECAUTIONS:

Uncontrolled releases should be responded to by trained personnel using pre-planned procedures. Proper protective equipment should be used. In case of a spill, clear the affected area, protect people, and respond with trained personnel.

PERSONAL PROTECTIVE EQUIPMENT:

The proper protective equipment for incidental releases (such as: 1 Litter of the product released in a well-ventilated area), use impermeable gloves (triple-gloves, rubber gloves and nitrile gloves, over latex gloves), goggles, face shield, and appropriate body protection. In the event of a large release, use impermeable gloves, specific for the material handled, chemically resistant suit and boots, and hard hat. Self-Contained Breathing Apparatus or respirator may be required where engineering controls are not adequate or conditions for potential exposure exist. When respirators are required, select NIOSH/MSHA approved based on actual or potential airborne concentrations in accordance with latest OSHA and/or ANSI recommendations.

ENVIRONMENTAL PRECAUTIONS:

Stop spill at source. Construct temporary dikes of dirt, sand, or any appropriate readily available material to prevent spreading of the material. Close or cap valves and/or block or plug hole in leaking container and transfer to another container, keep from entering storm sewers and ditches which lead to waterways, and if necessary, call the local fire or police department for immediate emergency assistance.

CONTAINMENT AND CLEAN-UP MEASURES:

Absorb spilled liquid with poly pads or other suitable absorbent materials. If necessary, neutralize using suitable buffering material, (acid with soda ash or base with phosphoric acid), and test area with litmus paper to confirm neutralization. Clean up with non-combustible absorbent (such as: sand, soil, and so on). Shovel up and place all spill residue in suitable containers. Dispose of at an appropriate waste disposal facility according to current applicable laws and regulations and product characteristics at time of disposal (see Section 13- Disposal Considerations).

SECTION 7. HANDLING AND STORAGE

HANDLING:

Use only with adequate ventilation. Do not get in eyes, on skin or clothing. Wear OSHA Standard full face shield. Consult Safety Equipment Supplier. Wear goggles, face shield, gloves, apron & footwear impervious to material. Wash clothing before reuse.

STORAGE:

Keep separated from strong oxidants, strong acids, metals, food & feedstuffs. Keep dry. Do not store above 49 C/120 F. Keep container tightly closed & upright when not in use to prevent leakage. Wear full face shield, gloves & full protective clothing when opening or handling. When empty, drain completely, replace bungs securely.

NONBULK: CONTAINERS:

Store containers in a cool, dry location, away from direct sunlight, sources of intense heat, or where freezing is possible. Material should be stored in a secondary containers or in a diked area, as appropriate.
 Store containers away from incompatible chemicals (see section 10, Stability and Reactivity). Post warning and "NO SMOKING" signs in storage and use areas, as appropriate. Empty containers should be handle with care.
 Never store food, feed. Or drinking water in containers which held this product.

BULK CONTAINERS:

All tanks and pipelines which contain this material must be labeled. Perform routine maintenance on tanks or pipelines which contain this product. Report all leaks immediately to the proper personnel.

TANK CAR SHIPMENTS:

Tank cars carrying this product should be loaded and unloaded in strict accordance with tank-car manufacturers Recommendations and all established on-site safety procedures. Appropriate personal protective equipment must be used (see Section 8, Engineering Controls and Personal Protective Equipment). All loading and unloading equipment must be inspected, prior to each use. Loading and unloading operations must be attended, at all times. Tank cars must be verified to be correct for receiving this product and be properly prepared, prior to starting the transfer operations. Hoses must be verified to be in the correct positions, before starting transfer operations. A sample (if required) must be taken and verified prior to starting transfer operations. All lines must be blown-down and purged before disconnecting them from the tank car vessel.

PROTECTIVE PRACTICES DURING MAINTENANCE OF CONTAMINATED EQUIPMENT:

Follow practices indicated in section 6 (Accidental Release Measures). Make sure certain application equipment is locked and tagged-out safely. Always use this product in areas where adequate ventilations is provided. Collect all reinstates and dispose of according to applicable Federal, State, Provincial, or local procedures.

SECTION 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

MATERIAL	CAS#	EINECS#	TWA (OSHA)	TLV (ACGIH)
Sodium Hydrosulfide	16721-80-5	240-778-0	20 ppm (ceiling)	10 ppm (ceiling)
Water	7732-18-15	231-791-2	None Known	None Known

MATERIAL	CAS#	EIENECS#	CEILING	STEL (OSHA/ACGIH)	HAP
Sodium Hydrosulfide	16721-80-5	240-778-0	20 ppm	20 ppm	No

This product contains no EPA Hazardous Air Pollutants (HAP) in amounts > 0.1%.

RESPIRATORY EXPOSURE CONTROLS:

A respiratory protective program that meets OSHA CFR 1910.134 and ANSI Z86.2 requirements or European Standard EN 149 must be followed whenever workplace conditions warrant a respirator's use.

VENTILATION:

LOCAL EXHAUST: Necessary MECHANICAL (General): Necessary
 SPECIAL: None OTHER: None

Please refer to ACGIH document, "Industrial Ventilation, A Manual of Recommended Practices", most recent edition, for details.

PERSONAL PROTECTION:

Wear OSHA Standard full face shield. Consult Safety Equipment Supplier. Wear goggles, face shield, gloves, apron & footwear impervious to material. Wash clothing before reuse.

WORK & HYGIENIC PRACTICES:

Provide readily accessible eye wash stations & safety showers. Wash at the end of each work shift & before eating, smoking or using the toilet. Promptly remove clothing that becomes contaminated. Destroy contaminated leather articles. Launder or discard contaminated clothing.

SECTION 9. PHYSICAL & CHEMICAL PROPERTIES:

APPEARANCE:	yellowish/green color clear liquid
ODOR:	Sulfide odor
ODOR THRESHOLD:	Not Available
pH (Neat):	10-12
MELTING POINT:	52-54 °C
BOILING POINT:	253° F (122.8° C)
FLASH POINT (TEST METHOD):	90°C
EVAPORATION RATE (n-BUTYL ACETATE=1):	Not Applicable
FLAMMABILITY CLASSIFICATION:	Non-Combustible
LOWER FLAMMABLE LIMIT IN AIR (% by vol):	Not Applicable
UPPER FLAMMABLE LIMIT IN AIR (% by vol):	Not Available
VAPOR PRESSURE (mm of Hg)@20 C:	17 mm
VAPOR DENSITY (air = 1):	1.17
SPECIFIC GRAVITY (Water = 1):	1.22-1.25
POUNDS/GALLON:	10.258
WATER SOLUBILITY:	Complete
PARTITION COEFFICIENT (n-Octane/Water):	Not Available
AUTO IGNITION TEMPERATURE:	Not Applicable
DECOMPOSITION TEMPERAURE:	Not Available

SECTION 10. STABILITY & REACTIVITY**STABILITY:**

Stable under most conditions.

CONDITIONS TO AVOID:

Isolate from extreme heat, and open flame.

MATERIALS TO AVOID:

Acids will cause the release of highly toxic hydrogen sulfide. Sodium hydrosulfide solution is not compatible with zinc, aluminum or their alloys. Corrosive to steel above 150° F.

HAZARDOUS DECOMPOSITION PRODUCTS:

Hydrogen Sulfide.

HAZARDOUS POLYMERIZATION:

Will not occur.

SECTION 11. TOXICOLOGICAL INFORMATION

ACUTE HAZARDS

EYE & SKIN CONTACT:

Severe burns to skin, defatting, dermatitis.
Severe burns to eyes, redness, tearing, and blurred vision.
Liquid can cause severe skin & eye burns. Wash thoroughly after handling.

INHALATION:

Severe respiratory tract irritation may occur. Vapor harmful.
The applicable occupational exposure limit value should not be exceeded during any part of working exposure.

SWALLOWING:

Harmful or fatal if swallowed.

SUBCHRONIC HAZARDS/CONDITIONS AGGRAVATED

CONDITIONS AGGRAVATED:

None Known.

TOXICITY INFORMATION

ORAL: Data not available.

DERMAL: Data not available

INHALATION: INH-RAT LC 50: 444 ppm (hydrogen sulfide)
INH-MOUSE LC 50: 1,500 mg/m³ 18 minutes
INH-RAT LC 50: 1,500 mg/m³ 14 minutes

TERATOLOGY: No data available

MUTAGENICITY: Data not available

SECTION 12. ECOLOGICAL INFORMATION

ALL WORK PRACTICES MUST BE AIMED AT ELIMINATING ENVIRONMENTAL CONTAMINATION.

EFFECT OF MATERIAL ON PLANTS AND ANIMALS:

This product may be harmful or fatal to plant and animal life if released into the environment.
Refer to section 11 (Toxicological Information) for further data on the effects of this product's components on test animals.

EFFECT OF MATERIAL ON AQUATIC LIFE:

Static acute 96 hour- LC50 for mosquito fish is 206 mg/L. (TI m- fresh water)
LC50 fly inhalation 1,500 mg/m³, 7 minutes
TLm Gammarus 0.84 mg/L, 96 hours (hydrogen sulfide)
TLm Ephemera 0.316 mg/L, 96 hours (hydrogen sulfide)
TLm Flathead minnow 0.071-0.55 mg/L @ 6-24°C 96 hour flow through bioassay (hydrogen sulfide)
TLm Bluegill 0.0090-0.0140 mg/L @ 20-22°C 96 hour flow through bioassay (hydrogen sulfide)
TLm Brook trout 0.0216-0.0308 mg/L @ 8-12.5°C 96 hour flow through bioassay (hydrogen sulfide)

MOBILITY IN SOIL:

Mobility of this material has not been determined.

DEGRADABILITY:

This product is completely biodegradable.

ACCUMULATION:

Bioaccumulation of this product has not been determined.

SECTION 13. DISPOSAL CONSIDERATIONS

Processing, use or contamination may change the waste management options. Recycle / dispose of observing national, regional, state, provincial and local health, safety & pollution laws. If in doubt, contact appropriate agencies.

SECTION 14. TRANSPORT INFORMATION

DOT/TDG SHIP NAME: UN2949 Sodium Hydrosulfide with not less than 25 percent water of crystallization, 8, PG II CORROSIVE.

DRUM LABEL: (CORROSIVE)

IATA / ICAO: UN2949 Sodium Hydrosulfide with not less than 25 percent water of crystallization, 8, PG-II CORROSIVE.

IMO / IMDG: UN2949 Sodium Hydrosulfide with not less than 25 percent water of crystallization, 8, PG-II CORROSIVE.

EMERGENCY RESPONSE GUIDEBOOK NUMBER 154

**SECTION 15. REGULATORY INFORMATION****EPA REGULATIONS:**

SARA SECTION 311/312 HAZARDS: Immediate (acute) YES
 Fire YES
 Sudden release NO
 Reactivity YES
 Delay (chronic) NO

Section 313 (Toxic Release Report- Form R): NO

SARA TITLE III INGREDIENTS	CAS#	EINECS#	(REG.SECTION)	RQ (LBS)
Sodium Hydrosulfide	16721-80-5	240-778-0	(311,312)	5000

Any release equal to or exceeding the RQ must be reported to the National Response Center (800-424-8802) and appropriate state and local regulatory agencies as described in 40 CFR 302.6 and 40 CFR 355.40 respectively. Failure to report may result in substantial civil and criminal penalties. State & local regulations may be more restrictive than federal regulations.

California Proposition 65 Information:

WARNING! This product can expose you to chemicals including Benzene, which are known to the State of California to cause birth defects or other Reproductive harm. For more information go to www.P65Warnings.ca.gov.

INTERNATIONAL REGULATIONS:

The components of this product are listed on the chemical inventories of the following countries: Australia (AICS), Canada (DSL,NDSL), China (IECSC), Europe (EINECS,ELINCS), Japan (METI/CSCL, MHLW/ISHL), South Korea (KECI), New Zealand (NZIOC), Philippines (PICCS), Switzerland (SWISS), Taiwan (NECSI), USA (TSCA).

CANADA: WORKPLACE HAZARDOUS MATERIALS INFORMATION SYSTEM (WHMIS)

D2B: Irritating to skin / eyes.

E: Corrosive Material.

SECTION 16. OTHER INFORMATION

HAZARD RATINGS:

HEALTH (NFPA): 3, HEALTH (HMIS): 3, FLAMMABILITY: 2, PHYSICAL HAZARD: 1

(Personal Protection Rating to be supplied by user based on use conditions.)

This information is intended solely for the use of individuals trained in the NFPA & HMIS hazard rating system.

EMPLOYEE TRAINING:

See Section 2 for Risk & Safety Statements. Employees should be made aware of all hazards of this material (as stated in this SDS) before handling it.

NOTICE

All information, recommendations, and suggestions appearing herein concerning this product are based upon data obtained from the manufacturer and/or recognized technical sources; however, C.C.I. makes no warranty, representation or guaranty as to the accuracy, sufficiency or completeness of the material set forth herein. It is the user's responsibility to determine the safety, toxicity and suitability of his own use, handling and disposal of the product. Additional product literature may be available upon request. Since actual use by others is beyond our control, no warranty, express or implied is made by C.C.I. as to the effects of such use, the results to be obtained or the safety and toxicity of the product nor does C.C.I. assume any liability arising out of use by others of this product.



SAFETY DATA SHEET

Issue Date: 07-May-2015

Revision Date: 09-Jun-2021

Version 1

1. Identification

Product identifier

Product Name: AS4000 40%

Other means of identification

Product Code: 42702

Synonyms: Diammonium sulfate; Sulfuric acid, diammonium

Recommended use of the chemical and restrictions on use

Recommended Use: Industrial, Manufacturing or Laboratory use.

Restrictions on Use: None known

Details of the supplier of the safety data sheet

Manufacturer: Hawkins, Inc.
2381 Rosegate
Roseville, MN 55113
(612) 331-6910

Emergency telephone number

Emergency Telephone: CHEMTREC: 1-800-424-9300 (US) / +1 703-741-5970 (International)

2. Hazard(s) identification

Classification

This chemical is not considered hazardous by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200)

Hazards not otherwise classified (HNOC)

Not applicable

Label elements

Signal word: None

Hazard statements:

Not a hazardous substance or mixture according to the Globally Harmonized System (GHS)

As part of good industrial and personal hygiene and safety procedure, avoid all unnecessary exposure to the chemical substance and ensure prompt removal from skin, eyes and clothing.

Unknown Acute toxicity: Not applicable

Other Information

Not applicable

3. Composition/information on ingredients

Chemical name	CAS No.	Weight-%
Ammonium sulfate	7783-20-2	39-41

Water	7732-18-5	Balance
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Any concentration shown as a range is due to batch variation or the exact percentage has been withheld as a trade secret.

4. First-aid measures

Description of first aid measures

Inhalation	Remove to fresh air. If symptoms persist, call a physician.
Eye contact	Rinse thoroughly with plenty of water for at least 15 minutes, lifting lower and upper eyelids. Consult a physician.
Skin contact	Wash off immediately with soap and plenty of water while removing all contaminated clothes and shoes. If skin irritation persists, call a physician.
Ingestion	Clean mouth with water and drink afterwards plenty of water. If symptoms persist, call a physician.

Most important symptoms and effects, both acute and delayed

Symptoms No information available.

Indication of any immediate medical attention and special treatment needed

Note to physicians Treat symptomatically.

5. Fire-fighting measures

Suitable Extinguishing Media	Use extinguishing measures that are appropriate to local circumstances and the surrounding environment.
Large Fire	CAUTION: Use of water spray when fighting fire may be inefficient.
Unsuitable extinguishing media	Do not scatter spilled material with high pressure water streams.
Specific hazards arising from the chemical	Flammable ammonia gas may be released in a fire. Non-combustible, substance itself does not burn but may decompose upon heating to produce corrosive and/or toxic fumes. Cool drums with water spray. Do not allow run-off from fire-fighting to enter drains or water courses.
Hazardous combustion products	Ammonia. Oxides of sulfur. Nitrogen oxides (NO _x).
Explosion Data	
Sensitivity to mechanical impact	None.
Sensitivity to static discharge	None.
Special protective equipment for fire-fighters	Firefighters should wear self-contained breathing apparatus and full firefighting turnout gear. Use personal protection equipment.

6. Accidental release measures

Personal precautions, protective equipment and emergency procedures

Personal precautions Ensure adequate ventilation.

Methods and material for containment and cleaning up

Methods for containment Prevent further leakage or spillage if safe to do so.

Methods for cleaning up Dike far ahead of liquid spill for later disposal. Soak up with inert absorbent material. Pick up and transfer to properly labeled containers. Clean contaminated surface thoroughly. After cleaning, flush away traces with water.

7. Handling and storage

Precautions for safe handling**Advice on safe handling**

Handle in accordance with good industrial hygiene and safety practice.

Conditions for safe storage, including any incompatibilities**Storage Conditions**

Keep containers tightly closed in a dry, cool and well-ventilated place. Do not freeze. Keep at temperatures between 55 and 85 °F.

Incompatible Materials

Strong oxidizing agents, strong acids, and strong bases. Metals.

8. Exposure controls/personal protection**Control parameters****Exposure Limits**

The following ingredients are the only ingredients of the product above the cut-off level (or level that contributes to the hazard classification of the mixture) which have an exposure limit applicable in the region for which this safety data sheet is intended or other recommended limit. At this time, the other relevant constituents have no known exposure limits from the sources listed here.

Chemical name	ACGIH TLV	OSHA PEL	NIOSH IDLH
Ammonia 7664-41-7	STEL: 35 ppm TWA: 25 ppm	TWA: 50 ppm TWA: 35 mg/m ³ (vacated) STEL: 35 ppm (vacated) STEL: 27 mg/m ³	IDLH: 300 ppm TWA: 25 ppm TWA: 18 mg/m ³ STEL: 35 ppm STEL: 27 mg/m ³

Exposure Guidelines

Vacated limits revoked by the Court of Appeals decision in AFL-CIO v. OSHA, 965 F.2d 962 (11th Cir., 1992).

Appropriate engineering controls**Engineering controls**

Showers
Eyewash stations
Ventilation systems.

Individual protection measures, such as personal protective equipment**Eye/face protection**

Tight sealing safety goggles.

Skin and body protection

Wear suitable protective clothing.

Respiratory protection

No protective equipment is needed under normal use conditions. If exposure limits are exceeded or irritation is experienced, ventilation and evacuation may be required.

Environmental exposure controls

Do not allow into any sewer, on the ground or into any body of water. Local authorities should be advised if significant spillages cannot be contained.

General hygiene considerations

Handle in accordance with good industrial hygiene and safety practice.

9. Physical and chemical properties**Information on basic physical and chemical properties**

Physical State:	Liquid
Appearance:	Clear
Color:	Colorless
Odor:	No information available
Odor Threshold:	No information available
pH:	
pH Range:	4-5
Salt Out Point:	No information available
Melting Point/Freezing Point:	-12 °C / 11 °F
Boiling Point/Boiling Range:	No information available

Flash Point:	No information available
Evaporation Rate (BuAc=1):	No information available
Flammability (solid, gas):	No information available
Flammability Limits in Air:	No information available
Vapor Pressure (mm Hg):	No information available
Vapor density (Air =1):	No information available
Specific Gravity (H ₂ O=1):	1.225
Water Solubility:	No information available
Solubility(ies):	No information available
Partition Coefficient (n-octanol/water):	No information available
Autoignition Temperature:	No information available
Decomposition Temperature:	No information available
Kinematic Viscosity:	No information available
Dynamic Viscosity:	No information available

Other information

Explosive properties	No information available
Oxidizing properties	No information available
Molecular Weight:	N/A

10. Stability and reactivity

Reactivity	No information available.
Chemical stability	Stable under normal conditions.
Possibility of hazardous reactions	May react with oxidizers - danger of explosion. Releases flammable ammonia gas when heated.
Conditions to avoid	Extremes of temperature and direct sunlight. Keep away from open flames, hot surfaces and sources of ignition.
Incompatible Materials	Strong oxidizing agents, strong acids, and strong bases. Metals.
Hazardous decomposition products	Ammonia. Nitrogen oxides (NO _x). Sulfur oxides.

11. Toxicological information**Information on likely routes of exposure****Product Information**

Inhalation	Specific test data for the substance or mixture is not available.
Eye contact	Specific test data for the substance or mixture is not available.
Skin contact	Specific test data for the substance or mixture is not available.
Ingestion	Specific test data for the substance or mixture is not available.

Symptoms related to the physical, chemical and toxicological characteristics

Symptoms	No information available.
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Numerical measures of toxicity**Acute Toxicity:**

The following values are calculated based on chapter 3.1 of the GHS document

ATEmix (oral)	6,926.80 mg/kg
ATEmix (dermal)	4,882.90 mg/kg

Component Information

Chemical name	Oral LD ₅₀ :	Dermal LD ₅₀ :	LC ₅₀ (Lethal Concentration):
Ammonium sulfate	= 2840 mg/kg (Rat)	> 2000 mg/kg (Rat)	-

7783-20-2			
Water 7732-18-5	> 90 mL/kg (Rat)	-	-

Delayed and immediate effects as well as chronic effects from short and long-term exposure

- Skin corrosion/irritation** No information available.
- Serious eye damage/eye irritation** No information available.
- Respiratory or skin sensitization** No information available.
- Germ cell mutagenicity** No information available.
- Carcinogenicity** This product does not contain any carcinogens or potential carcinogens as listed by OSHA, IARC or NTP.
- Reproductive toxicity** No information available.
- STOT - single exposure** No information available.
- STOT - repeated exposure** No information available.
- Aspiration hazard** No information available.
- Other Adverse Effects:** No information available.

12. Ecological information

Ecotoxicity The environmental impact of this product has not been fully investigated.

Chemical name	Toxicity to algae	Toxicity to fish	Toxicity to microorganisms	Toxicity to daphnia and other aquatic invertebrates
Ammonium sulfate 7783-20-2	-	250 mg/L (LC50 96 h - Brachydanio rerio) 480 mg/L (LC50 96 h flow-through - Brachydanio rerio) 420 mg/L (LC50 96 h semi-static - Brachydanio rerio) 18 mg/L (LC50 96 h - Cyprinus carpio) 32.2 - 41.9 mg/L (LC50 96 h flow-through - Oncorhynchus mykiss) 5.2 - 8.2 mg/L (LC50 96 h static - Oncorhynchus mykiss) 100 mg/L (LC50 96 h - Pimephales promelas) 123 - 128 mg/L (LC50 96 h semi-static - Poecilia reticulata) 126 mg/L (LC50 96 h - Poecilia reticulata)	-	14 mg/L (LC50 48 h - Daphnia magna)

Persistence and Degradability: No information available.

Bioaccumulation: There is no data for this product.

Component Information

Chemical name	Partition Coefficient:
Ammonium sulfate 7783-20-2	-5.1

Mobility: No information available.

Other Adverse Effects: No information available.

13. Disposal considerations**Waste treatment methods**

Waste from residues/unused products Dispose of in accordance with local, state, and national regulations. Dispose of waste in accordance with environmental legislation.

Contaminated packaging Do not reuse empty containers.

14. Transport information**DOT**

Description Not DOT Regulated

15. Regulatory information**International Inventories**

Chemical name	TSCA	AICS	DSL	NDSL	EINECS	ELINCS	ENCS	IECSC	KECL	PICCS
Ammonium sulfate 7783-20-2	Present ACTIVE	Present	Present	-	Present	-	Present	Present	Present	Present
Water 7732-18-5	Present ACTIVE	Present	Present	-	Present	-	Present	Present	Present	Present

TSCA - United States Toxic Substances Control Act Section 8(b) Inventory

AICS - Australian Inventory of Chemical Substances

DSL/NDSL - Canadian Domestic Substances List/Non-Domestic Substances List

EINECS/ELINCS - European Inventory of Existing Chemical Substances/European List of Notified Chemical Substances

ENCS - Japan Existing and New Chemical Substances

IECSC - China Inventory of Existing Chemical Substances

KECL - Korean Existing and Evaluated Chemical Substances

PICCS - Philippines Inventory of Chemicals and Chemical Substances

US Federal Regulations**SARA 313**

Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 (SARA). This product contains a chemical or chemicals which are subject to the reporting requirements of the Act and Title 40 of the Code of Federal Regulations, Part 372.

Chemical name	SARA 313 - Threshold Values %
Ammonium sulfate 7783-20-2	1.0

SARA 311/312 Hazard Categories

Under the amended regulations at 40 CFR 370, EPCRA 311/312 Tier II reporting for the 2017 and later calendar years will need to be consistent with updated hazard classifications.

CERCLA

This material, as supplied, does not contain any substances regulated as hazardous substances under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA) (40 CFR 302) or the Superfund Amendments and Reauthorization Act (SARA) (40 CFR 355). There may be specific reporting requirements at the local, regional, or state level pertaining to releases of this material.

Clean Water Act (CWA)

This product does not contain any substances regulated as pollutants pursuant to the Clean Water Act (40 CFR 122.21 and 40 CFR 122.42).

OSHA - Process Safety Management - Highly Hazardous Chemicals

This product does not contain any substances regulated under Process Safety Management (29 CFR 1910.119).

Department of Homeland Security - Chemical Facility Anti-Terrorism Standards (CFATS)

This product does not contain any substances regulated under the Chemical Facility Anti-Terrorism Standards (6 CFR 27).

16. Other information

NSF/ANSI 60 Certification



Certified to
NSF/ANSI 60

Maximum Use (mg/L unless otherwise indicated): 60

Prepared By: HSE Department
Issue Date: 07-May-2015
Revision Date: 09-Jun-2021
Revision Note: Format change. Reviewed and Re-issued.

Disclaimer:

The information provided in this Safety Data Sheet is correct to the best of our knowledge, information and belief at the date of its publication. The information given is designed only as a guidance for safe handling, use, processing, storage, transportation, disposal and release and is not to be considered a warranty or quality specification. The information relates only to the specific material designated and may not be valid for such material used in combination with any other materials or in any process, unless specified in the text.

End of Safety Data Sheet



Corporate Office
2381 Rosegate
Roseville, Minnesota 55113
Phone: (612) 331-6910
Fax: (612) 331-5304

PRODUCT DATA SHEET

AS4000 40%

PDS – 1930; REVISION 01
EFFECTIVE DATE: 27 APR 18

General Characteristics:

Appearance: Clear, colorless solution
Shelf Life: 365 days
Storage Recommendation: 55 – 85° F, dry conditions

Standard Specifications:

PHYSICAL PROPERTIES	SPECIFICATION
Specific Gravity at 68° F	1.220 – 1.230
pH (Neat)	4.00 – 5.00

NSF Certification: Certified to NSF ANSI/Std. 60 with a maximum use level of 60 mg/L.

Notice for Product Numbers: 42700, 42701, 42702, 43949, 43983, 45776, 47115, 54354, 59150 (“Product(s)”)

Hawkins, Inc. (“Hawkins”) presents the information in this Product Data Sheet (“Information”) in good faith and believes the Information to be accurate as of the Effective Date. Hawkins warrants only that when Hawkins ships the Product, it will meet published specifications. Other than this warranty, **HAWKINS MAKES NO OTHER REPRESENTATION OR WARRANTY, EITHER EXPRESS OR IMPLIED, FOR COMPLETENESS, ACCURACY, MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, OR ANY OTHER NATURE WITH RESPECT TO THE INFORMATION, OR TO THE PRODUCT TO WHICH THIS INFORMATION REFERS.** Hawkins will not be responsible for damages of any nature whatsoever resulting from the use of, or reliance upon, the Information or the Product to which the Information refers.



SAFETY DATA SHEET

Issue Date: 23-Jun-2015

Revision Date: 12-Mar-2021

Version 1

1. Identification

Product identifier

Product Name: Sulfuric Acid 50%

Other means of identification

Product Code: 43944

Synonyms: Oil of vitriol; sulphuric acid

UN/ID No: UN2796

Recommended use of the chemical and restrictions on use

Recommended Use: Industrial, Manufacturing or Laboratory use.

Restrictions on Use: None known

Details of the supplier of the safety data sheet

Manufacturer: Hawkins, Inc.
2381 Rosegate
Roseville, MN 55113
(612) 331-6910

Emergency telephone number

Emergency Telephone: CHEMTREC: 1-800-424-9300 (US) / +1 703-741-5970 (International)

2. Hazard(s) identification

Classification

This chemical is considered hazardous by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200)

Skin corrosion/irritation	Category 1 Sub-category A
Serious eye damage/eye irritation	Category 1
Carcinogenicity	Category 1A
Corrosive to metals	Category 1

Hazards not otherwise classified (HNOC)

Not applicable

Label elements

Signal word: Danger

Hazard statements:

Causes severe skin burns and eye damage

May cause cancer

May be corrosive to metals



Precautionary Statements - Prevention:

Obtain special instructions before use
 Do not handle until all safety precautions have been read and understood
 Wear protective gloves/protective clothing/eye protection/face protection
 Do not breathe dusts or mists
 Wash face, hands and any exposed skin thoroughly after handling
 Keep only in original container

Precautionary Statements - Response:

Immediately call a POISON CENTER or doctor
 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing
 Immediately call a POISON CENTER or doctor
 IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/ shower
 Wash contaminated clothing before reuse
 IF INHALED: Remove person to fresh air and keep comfortable for breathing
 Immediately call a POISON CENTER or doctor
 IF SWALLOWED: Rinse mouth. DO NOT induce vomiting
 Absorb spillage to prevent material damage

Precautionary Statements - Storage:

Store locked up
 Store in corrosion resistant container with a resistant inner liner

Precautionary Statements - Disposal:

Dispose of contents/container to an approved waste disposal plant

Unknown Acute toxicity:

51 % of the mixture consists of ingredient(s) of unknown toxicity
 0 % of the mixture consists of ingredient(s) of unknown acute oral toxicity
 51 % of the mixture consists of ingredient(s) of unknown acute dermal toxicity
 51 % of the mixture consists of ingredient(s) of unknown acute inhalation toxicity (gas)
 51 % of the mixture consists of ingredient(s) of unknown acute inhalation toxicity (vapor)
 51 % of the mixture consists of ingredient(s) of unknown acute inhalation toxicity (dust/mist)

Other Information

Not applicable

3. Composition/information on ingredients

Chemical name	CAS No.	Weight-%
Sulfuric acid	7664-93-9	49-51
Water	7732-18-5	Balance

Any concentration shown as a range is due to batch variation or the exact percentage has been withheld as a trade secret.

4. First-aid measures**Description of first aid measures****General advice**

Show this safety data sheet to the doctor in attendance. Immediate medical attention is required. IF exposed or concerned: Get medical advice/attention.

Inhalation

Remove to fresh air. If breathing has stopped, give artificial respiration. Get medical attention immediately. Do not use mouth-to-mouth method if victim ingested or inhaled the substance; give artificial respiration with the aid of a pocket mask equipped with a one-way valve or other proper respiratory medical device. If breathing is difficult, (trained personnel should) give oxygen. Delayed pulmonary edema may occur. Get immediate medical advice/attention.

Eye contact

Rinse immediately with plenty of water, also under the eyelids, for at least 20 minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Keep eye wide open while rinsing. Do not rub affected area. Get immediate medical advice/attention.

Skin contact	Get immediate medical advice/attention. Untreated wounds from corrosion of the skin heal slowly and with difficulty. If possible, wipe off areas of contact with dry cloth before flushing with water, as water contact will generate heat. Flush with running water for at least 20 minutes. Take off contaminated clothing and wash before reuse. Immediate medical attention is required.
Ingestion	Clean mouth with water and drink afterwards plenty of water. Never give anything by mouth to an unconscious person. Do NOT induce vomiting. Get immediate medical advice/attention.
Self-protection of the first aider	Avoid contact with skin, eyes or clothing. Wear personal protective clothing (see section 8). Ensure that medical personnel are aware of the material(s) involved, take precautions to protect themselves and prevent spread of contamination. Avoid direct contact with skin. Use barrier to give mouth-to-mouth resuscitation.

Most important symptoms and effects, both acute and delayed

Symptoms Redness. Burning. May cause blindness. Coughing and/ or wheezing.

Indication of any immediate medical attention and special treatment needed

Note to physicians Product is a corrosive material. Use of gastric lavage or emesis is contraindicated. Possible perforation of stomach or esophagus should be investigated. Do not give chemical antidotes. Asphyxia from glottal edema may occur. Marked decrease in blood pressure may occur with moist rales, frothy sputum, and high pulse pressure. Concentrated acid destroys tissue by severe dehydrating action. Dilute solutions act as milder irritants due to acid properties. Sudden circulatory collapse can occur. Sulfuric acid mist may product bronchoconstriction in asthmatics. Concentrated acid is more toxic than pH alone. Treat via dilution - do not attempt neutralization.

5. Fire-fighting measures

Suitable Extinguishing Media	Carbon dioxide (CO ₂). Dry chemical. Dry sand.
Small Fire	Move containers from fire area if you can do it without risk. Do not get water inside containers.
Large Fire	Flood fire area with large quantities of water, while knocking down vapors with water fog. Do not get water inside containers or in contact with substance. If insufficient water supply: knock down vapors only.
Unsuitable extinguishing media	Do not scatter spilled material with high pressure water streams. DO NOT USE WATER ON MATERIAL ITSELF. Reaction with water may generate much heat that will increase the concentration of fumes in the air.
Specific hazards arising from the chemical	The product causes burns of eyes, skin and mucous membranes. Thermal decomposition can lead to release of irritating gases and vapors. Non-combustible. May ignite combustibles (wood paper, oil, clothing, etc.). Reaction with water may generate much heat which will increase the concentration of fumes in the air. May react with metals or heat to release flammable hydrogen gas. Do not allow run-off from fire-fighting to enter drains or water courses.
Hazardous combustion products	Oxides of sulfur.
Explosion Data	
Sensitivity to mechanical impact	None.
Sensitivity to static discharge	None.
Special protective equipment for fire-fighters	Firefighters should wear self-contained breathing apparatus and full firefighting turnout gear. Use personal protection equipment.

6. Accidental release measures**Personal precautions, protective equipment and emergency procedures**

Personal precautions Avoid contact with skin, eyes or clothing. Ensure adequate ventilation. Use personal

protective equipment as required. Corrosive material. Evacuate personnel to safe areas. Keep people away from and upwind of spill/leak.

Other information Refer to protective measures listed in Sections 7 and 8.

Methods and material for containment and cleaning up

Methods for containment Prevent further leakage or spillage if safe to do so. Dike far ahead of spill to collect runoff water. Keep out of drains, sewers, ditches and waterways.

Methods for cleaning up Dike far ahead of liquid spill for later disposal. Neutralize with soda ash (sodium carbonate) or lime over area of spill. Use a non-combustible material like vermiculite, sand or earth to soak up the product and place into a container for later disposal. Clean contaminated surface thoroughly. After cleaning, flush away traces with water.

7. Handling and storage

Precautions for safe handling

Advice on safe handling Handle in accordance with good industrial hygiene and safety practice. Avoid contact with skin, eyes or clothing. In case of insufficient ventilation, wear suitable respiratory equipment. Handle product only in closed system or provide appropriate exhaust ventilation. Do not eat, drink or smoke when using this product. Take off contaminated clothing and wash before reuse. When diluting, always add the product to water. Never add water to the product. Reacts violently with water. Contact with water will generate heat. Use non-sparking tools as flammable hydrogen gas may be present in the container and head space.

Conditions for safe storage, including any incompatibilities

Storage Conditions Keep containers tightly closed in a dry, cool and well-ventilated place. Protect from moisture. Store locked up. Keep out of the reach of children. Store away from other materials. Do not store near combustible materials.

Incompatible Materials Water. Metals. Strong acids. Strong oxidizing agents. Strong reducing agents. Alkali. Cyanide compounds. Sulfides. Organic material. Chlorates. Nitrogen containing compounds.

Packaging materials Not recommended: low density polyethylene; brass, zinc, bronze, copper, aluminum, iron and alloys of these metals.

8. Exposure controls/personal protection

Control parameters

Exposure Limits The following ingredients are the only ingredients of the product above the cut-off level (or level that contributes to the hazard classification of the mixture) which have an exposure limit applicable in the region for which this safety data sheet is intended or other recommended limit. At this time, the other relevant constituents have no known exposure limits from the sources listed here.

Chemical name	ACGIH TLV	OSHA PEL	NIOSH IDLH
Sulfuric acid 7664-93-9	TWA: 0.2 mg/m ³ thoracic particulate matter	TWA: 1 mg/m ³ (vacated) TWA: 1 mg/m ³	IDLH: 15 mg/m ³ TWA: 1 mg/m ³

Appropriate engineering controls

Engineering controls Showers
Eyewash stations
Ventilation systems.

Individual protection measures, such as personal protective equipment

Eye/face protection Face protection shield. Tight sealing safety goggles.

Hand protection Wear suitable gloves. Impervious gloves.

Skin and body protection	Wear suitable protective clothing. Long sleeved clothing. Chemical resistant apron.
Respiratory protection	No protective equipment is needed under normal use conditions. If exposure limits are exceeded or irritation is experienced, ventilation and evacuation may be required.
Environmental exposure controls	Do not allow into any sewer, on the ground or into any body of water. Prevent product from entering drains.
General hygiene considerations	Wear suitable gloves and eye/face protection. Do not eat, drink or smoke when using this product. Regular cleaning of equipment, work area and clothing is recommended. Avoid contact with skin, eyes or clothing. Remove and wash contaminated clothing and gloves, including the inside, before re-use. Contaminated work clothing should not be allowed out of the workplace. Wash hands before breaks and immediately after handling the product.

9. Physical and chemical properties

Information on basic physical and chemical properties

Physical State:	Liquid
Appearance:	Clear
Color:	Colorless to yellowish
Odor:	Odorless
Odor Threshold:	No information available
pH:	No information available
Salt Out Point:	No information available
Melting Point/Freezing Point:	-37 °C / -34 °F
Boiling Point/Boiling Range:	No information available
Flash Point:	No information available
Evaporation Rate (BuAc=1):	No information available
Flammability (solid, gas):	No information available
Flammability Limits in Air:	No information available
Vapor Pressure (mm Hg):	No information available
Vapor density (Air =1):	No information available
Specific Gravity (H₂O=1):	1.399
Water Solubility:	Freely soluble in water with heat liberation.
Solubility(ies):	No information available
Partition Coefficient (n-octanol/water):	No information available
Autoignition Temperature:	No information available
Decomposition Temperature:	No information available
Kinematic Viscosity:	No information available
Dynamic Viscosity:	No information available
Other information	
Explosive properties	No information available
Oxidizing properties	No information available
Molecular Weight:	98.08

10. Stability and reactivity

Reactivity	Releases heat and toxic, irritating vapors when mixed with water. Contact with metals may evolve flammable hydrogen gas. Reacts violently with strong alkaline and reducing agents.
Chemical stability	Hygroscopic. Decomposes on heating.
Possibility of hazardous reactions	Contact with metals may evolve flammable hydrogen gas. Reacts with organic materials and may cause ignition of finely divided materials on contact.
Conditions to avoid	Exposure to air or moisture over prolonged periods. Extremes of temperature and direct sunlight.
Incompatible Materials	Water. Metals. Strong acids. Strong oxidizing agents. Strong reducing agents. Alkali.

Cyanide compounds. Sulfides. Organic material. Chlorates. Nitrogen containing compounds.

Hazardous decomposition products Thermal decomposition can lead to release of irritating and toxic gases and vapors. Sulfur oxides.

11. Toxicological information

Information on likely routes of exposure

Product Information

Inhalation

Specific test data for the substance or mixture is not available. Corrosive by inhalation. (based on components). Inhalation of corrosive fumes/gases may cause coughing, choking, headache, dizziness, and weakness for several hours. Pulmonary edema may occur with tightness in the chest, shortness of breath, bluish skin, decreased blood pressure, and increased heart rate. Inhaled corrosive substances can lead to a toxic edema of the lungs. Pulmonary edema can be fatal.

Eye contact

Specific test data for the substance or mixture is not available. Causes burns. (based on components). Corrosive to the eyes and may cause severe damage including blindness. Causes serious eye damage. May cause irreversible damage to eyes.

Skin contact

Specific test data for the substance or mixture is not available. Causes severe burns.

Ingestion

Specific test data for the substance or mixture is not available. Causes burns. (based on components). Ingestion causes burns of the upper digestive and respiratory tracts. May cause severe burning pain in the mouth and stomach with vomiting and diarrhea of dark blood. Blood pressure may decrease. Brownish or yellowish stains may be seen around the mouth. Swelling of the throat may cause shortness of breath and choking. May cause lung damage if swallowed. May be fatal if swallowed and enters airways.

Symptoms related to the physical, chemical and toxicological characteristics

Symptoms

Redness. Burning. May cause blindness. Coughing and/ or wheezing.

Numerical measures of toxicity

Not applicable

Acute Toxicity:

The following values are calculated based on chapter 3.1 of the GHS document

ATEmix (oral) 4,196.08 mg/kg

Component Information

Chemical name	Oral LD ₅₀ :	Dermal LD ₅₀ :	LC ₅₀ (Lethal Concentration):
Sulfuric acid 7664-93-9	= 2140 mg/kg (Rat)	-	= 0.375 mg/L (Rat) 4 h
Water 7732-18-5	> 90 mL/kg (Rat)	-	-

Delayed and immediate effects as well as chronic effects from short and long-term exposure

Skin corrosion/irritation

Causes severe burns.

Serious eye damage/eye irritation

Classification based on data available for ingredients. Causes burns. Risk of serious damage to eyes.

Respiratory or skin sensitization

No information available.

Germ cell mutagenicity

No information available.

Carcinogenicity

Classification based on data available for ingredients.

The table below indicates whether each agency has listed any ingredient as a carcinogen.

Chemical name	ACGIH	IARC	NTP	OSHA
Sulfuric acid 7664-93-9	A2	Group 1	Known	X

ACGIH (American Conference of Governmental Industrial Hygienists)

A2 - Suspected Human Carcinogen

IARC (International Agency for Research on Cancer)

Group 1 - Carcinogenic to Humans

NTP (National Toxicology Program)

Known - Known Carcinogen

OSHA (Occupational Safety and Health Administration of the US Department of Labor)

X - Present

Reproductive toxicity No information available.

STOT - single exposure No information available.

STOT - repeated exposure No information available.

Aspiration hazard No information available.

Other Adverse Effects: No information available.

12. Ecological information

Ecotoxicity The environmental impact of this product has not been fully investigated.

Chemical name	Toxicity to algae	Toxicity to fish	Toxicity to microorganisms	Toxicity to daphnia and other aquatic invertebrates
Sulfuric acid 7664-93-9	-	500 mg/L (LC50 96 h static - Brachydanio rerio)	-	-

Persistence and Degradability: No information available.

Bioaccumulation: There is no data for this product.

Mobility: No information available.

Other Adverse Effects: No information available.

13. Disposal considerations

Waste treatment methods

Waste from residues/unused products Dispose of in accordance with local, state, and national regulations. Dispose of waste in accordance with environmental legislation.

Contaminated packaging Do not reuse empty containers.

14. Transport information

DOT

UN/ID No	UN2796
Proper shipping name	SULFURIC ACID
Hazard Class	8
Packing Group	II

Description

UN2796, SULFURIC ACID, 8, PG II



15. Regulatory information

International Inventories

Chemical name	TSCA	AICS	DSL	NDSL	EINECS	ELINCS	ENCS	IECSC	KECL	PICCS
Sulfuric acid 7664-93-9	Present ACTIVE	Present	Present	-	Present	-	Present	Present	Present	Present
Water 7732-18-5	Present ACTIVE	Present	Present	-	Present	-	Present	Present	Present	Present

TSCA - United States Toxic Substances Control Act Section 8(b) Inventory

AICS - Australian Inventory of Chemical Substances

DSL/NDSL - Canadian Domestic Substances List/Non-Domestic Substances List

EINECS/ELINCS - European Inventory of Existing Chemical Substances/European List of Notified Chemical Substances

ENCS - Japan Existing and New Chemical Substances

IECSC - China Inventory of Existing Chemical Substances

KECL - Korean Existing and Evaluated Chemical Substances

PICCS - Philippines Inventory of Chemicals and Chemical Substances

US Federal Regulations

SARA 313

Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 (SARA). This product contains a chemical or chemicals which are subject to the reporting requirements of the Act and Title 40 of the Code of Federal Regulations, Part 372.

Chemical name	SARA 313 - Threshold Values %
Sulfuric acid 7664-93-9	1.0

SARA 311/312 Hazard Categories

Under the amended regulations at 40 CFR 370, EPCRA 311/312 Tier II reporting for the 2017 and later calendar years will need to be consistent with updated hazard classifications.

CERCLA

This material, as supplied, contains one or more substances regulated as a hazardous substance under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA) (40 CFR 302).

Chemical name	Hazardous Substances RQs	Extremely Hazardous Substances RQs	SARA Extremely Hazardous Substances TPQ
Sulfuric acid 7664-93-9	1000 lb	1000 lb	1000 lb TPQ

Clean Water Act (CWA)

This product contains the following substances which are regulated pollutants pursuant to the Clean Water Act (40 CFR 122.21 and 40 CFR 122.42).

Chemical name	CWA - Reportable Quantities	CWA - Toxic Pollutants	CWA - Priority Pollutants	CWA - Hazardous Substances
Sulfuric acid 7664-93-9	1000 lb	-	-	X

OSHA - Process Safety Management - Highly Hazardous Chemicals

This product does not contain any substances regulated under Process Safety Management (29 CFR 1910.119).

Department of Homeland Security - Chemical Facility Anti-Terrorism Standards (CFATS)

This product does not contain any substances regulated under the Chemical Facility Anti-Terrorism Standards (6 CFR 27).

16. Other information**NSF/ANSI 60 Certification**

Certified to
NSF/ANSI 60

**Maximum Use (mg/L unless
otherwise indicated):** 93

Prepared By: HSE Department
Issue Date: 23-Jun-2015
Revision Date: 12-Mar-2021
Revision Note: Reviewed and Re-issued. Format change.

Disclaimer:

The information provided in this Safety Data Sheet is correct to the best of our knowledge, information and belief at the date of its publication. The information given is designed only as a guidance for safe handling, use, processing, storage, transportation, disposal and release and is not to be considered a warranty or quality specification. The information relates only to the specific material designated and may not be valid for such material used in combination with any other materials or in any process, unless specified in the text.

End of Safety Data Sheet