

DANIEL P. MCCOY
COUNTY EXECUTIVE

# COUNTY OF ALBANY WATER PURIFICATION DISTRICT 1 CANAL ROAD, SOUTH ALBANY, NEW YORK 12204

REMITTANCE: 112 STATE ST., BASEMENT, ALBANY, NY 12207 PHONE: (518) 447-1611 FAX: (518) 433-0369

www.albanycounty.com

COMMISSION

DENNIS RIGOSU

JOHN W. BISHOP, JR.
NICHOLAS W. FOGLIA
MAGGIE ALIX
CHARLES G. CARLUCCIO

ANGELO GAUDIO, P.E. EXECUTIVE DIRECTOR

September 27, 2023

Hon. Andrew Joyce Chairman Albany County Legislature 112 State Street – Suite 710 Albany, New York 12207

Re: Emergency High Voltage Repair and associated Budget Amendment.

Dear Mr. Joyce,

The Albany County Water Purification District (District) is requesting approval of an emergency contract with High Voltage Electric Service Inc., (HVES) for the replacement of a voltage switch that failed at the District's North Plant. In July the high voltage switch suppling power to the North Plant's Solids Building failed resulting in a power loss to the Solids Building and a disruption to the Plant's sludge process. HVES was contacted to inspect the switchgear and it was determined that an electrical arc inside the switch caused the failure. Due to the damage and age of the switch, the switchgear was recommended for replacement and HVES was directed to make a temporary repair to reestablish power to the Solids Building and replace the switchgear. The total amount for the repairs including the switch replacement was \$ 270,525.

At the time of the failure the District filed an insurance claim for the cost of the equipment replacement. The insurance adjuster approved the claim minus the County's \$10,000 deductible. As the insurance payment needs to be accepted into revenue line it will be deposited into the District's "Other Unclassified" Revenue Line (G28130.02770).

The repair was paid through the District's Equipment Repair line (G98130.4.4070). As this was an unexpected repair the District is requesting a budget amendment to transfer the insurance payment into the District's Equipment Repair Line to replace the money that was expended for the switch repair.

A summary of the transfer request is as follows:

#### **Budget Amendment Transfer:**

Decrease Other Unclassified Revenue Line (G8130.0.2770):

\$ 260,525

Increase Equipment Repair Line (G98130.4.4070):

\$ 260,525

The requested transfers are not anticipated to negatively impact the District's 2023 budget.

If you have any questions or concerns you may reach me at (518) 447-1617.

Sincerely,

Angelo Gaudio, P.E. Executive Director

cc: Dennis A. Feeney, Majority Leader Rebekah Kennedy, Majority Counsel Frank Mauriello, Minority Leader Arnis Zilgme, Minority Counsel

Enc: Budget transfer form Emergency Contract Insurance Claim Form

					APPROPRIATIONS				
-		ACCO	ACCOUNT NO.	o.	RESOLUTION DESCRIPTION	INCREASE	DECREASE	Position #	DEPARTMENT NAME
	ပ	8130	4	4070	Equipment Repair	\$260,525.00			Water Purification
					TOTAL APPROPRIATIONS	\$ 260,525.00 \$			
					ESTIMATED REVENUES				
		ACCO	ACCOUNT NO.	0.	RESOLUTION DESCRIPTION	DECREASE	INCREASE		DEPARTMENT NAME
	ဖ	8130	0	2770	Other Unclassified (Revenue Line)	\$ 260,525.00			
$\rightarrow$					TOTAL ESTIMATED REVENUES				
					GRAND TOTALS	\$ 260,525.00 \$			

.,

### <u>ALBANY COUNTY</u> <u>CONTRACT FOR EMERGENCY SERVICES</u>

1.	Department Requ	esting Contract:	Water Puri	fication District	
	County Represen	tative requesting c	ontract:		
	Angelo Gaudio		Date: _	7/25/23	
2.	Name of Vendor:	High Voltage E	Electric Servi	ce, Inc	
	Address:	6 Seward Stre			
		Albany NY 122	203		
	Telephone #518	8-869-4961	Fax	#_ 518-869-4	962
		f (or Social Securit			
		1	Note: This is	required for pa	ayment of invoices
3.	<b>Description of ser</b> Troubleshoot a	vices being providenders		•	h Plant
		Work to include r			
	selective switch	n similar to the PT	Building swi	itch replaceme	nt done in 2022
	Work will be de	one based on the	2023 HVES	rate sheet pro	vided.
4.	Price to be paid le	ss taxes. <u>This must</u>	include ALI	L incidental cos	sts: ie: travel, lodging etc
	\$	Per (ho	ur, day, job)	Total amt. \$_	NTE \$300,000
5 <u>r</u>	Start date: 7/26				
6.	Copy of Vendor's	Insurance - <i>Note:</i> being issued or any	Insurance ce work beings	ertificates are re started. The ve	equired prior to any Purc endor is responsible for

By signing below, the Vendor agrees:

- 1. That the information contained in paragraphs 3 through 6 above is true and correct, that the services to be provided by the Vendor are accurately described above, and that the Vendor shall provide the services described above on the terms and conditions contained in this agreement.
- 2. Should Vendor's required insurance be cancelled, Vendor shall submit the insurer's notice of cancellation to the County within two (2) business days of receipt.

- 3. In addition to, and not in limitation of, the insurance requirements contained in Schedule "A" attached hereto and made a part hereof, the Vendor agrees to the fullest extent of the law:
  - a) The Vendor shall defend, indemnify and save harmless the County of Albany, its agents, representatives and employees, from and against any and all claims, damages, losses and expenses (including, but not limited to, reasonable attorney's fees) arising out of or in consequence of any negligent or intentional act or omission of the Vendor, its agents or employees, to the extent of its or their responsibility of such claims, damages, losses or expenses; and
  - b) The County may terminate this agreement if Vendor refuses or fails to supply enough properly skilled workers or proper materials to meet any of its requirements, if Vendor fails to make payment to County-approved subcontractors for materials or labor, or disregards laws, ordinances, rules or regulations or orders of a public entity having jurisdiction over the work, or if Vendor is substantially in breach of any of its provisions. Additionally, the County may, without cause, order the Vendor in writing to suspend, delay or interrupt the work in whole or in part for such period of time as the County may determine. The Vendor may terminate this agreement if the County is substantially in breach of it.
  - c) Pursuant to §109 of the General Municipal Law, the Vendor is prohibited from assigning, transferring, conveying, subcontracting or otherwise disposing of this agreement, or of its right, title or interest therein, to any other person or entity without the prior written consent of the County.
  - d) Vendor shall maintain complete and proper accounting records that shall clearly identify all costs associated with and revenue derived from the work performed under this agreement. Vendor shall retain such records for six (6) years after final payment or termination of this agreement and shall make such information available to the County and authorized State and/or Federal personnel during such period.
  - e) If Vendor is of the opinion that any work it has been directed to perform is beyond the scope of this agreement and constitutes extra work, Vendor shall promptly notify the County of that opinion. The County shall be the sole judge as to whether or not the work is in fact beyond the scope of this agreement and whether or not it constitutes extra work. If the County determines such work constitutes extra work, it shall provide extra compensation to Vendor on a negotiated basis.
  - f) Vendor shall at all times obtain and maintain all licenses required by New York State, or other relevant regulating body, to perform the services required under this agreement.
  - g) This agreement may only be modified by a formal written amendment executed by the parties.
  - h) This agreement shall be governed by and construed in accordance with the laws of the State of New York. The Vendor agrees that the designated venue is Albany County, New York.

The above information will be used by the County to generate a purchase order for the services described. No services included as a part of this form are to be provided to the County prior to the receipt of a purchase order by the vendor. If you have any questions concerning this form, please call the Albany County Purchasing Department at (518) 447-7140.

Vendor Signature Date

Gus J. Mininberg, President

Vendor Name Printed

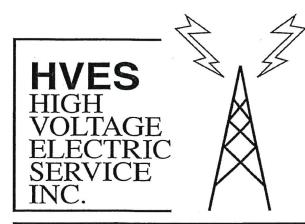
## SCHEDULE "A" INSURANCE COVERAGE

- 1. Workers' Compensation and Employers' Liability Insurance: A policy or policies providing protection for employees in the event of job-related injuries.
- 2. Automobile Liability Insurance: A policy or policies with the limits of not less than \$500,000 combined for each accident because of bodily injury, sickness, or disease, sustained by any person, caused by accident, and arising out of the ownership, maintenance or use of any automobile for damage because of injury to or destruction of property, including the loss of use thereof, caused by accident and arising out of the ownership, maintenance, or use of any automobile.
- 3. General Liability Insurance: A policy or policies of comprehensive all-risk insurance, including coverage for demolition of structures, with limits of not less than:

#### Liability For:

#### **Combined Single Limit**

Property Damage	\$1,000,000
Bodily Injury	\$1,000,000
Personal Injury	\$1,000,000



Phone: 518-869-4961 • Fax: 518-869-4962

BILL TO:

Albany County Water Purification District

Accounts Payable

112 State Street, Basement

Albany, NY 12207

INVOICE:

19357, page 1 of 2

DATE:

08/16/2023

PO. No.:

Per Contract Dated

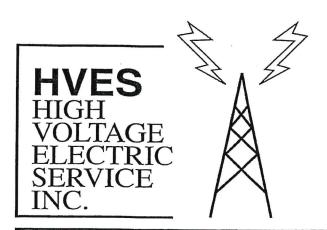
07/25/2023

TERMS:

2% 10/Net 30 Days

Billing for supply	y and installation of new primary selective switch at North	Unit Price	Extended Price			
	Plant Solids Building.					
07/25/2023						
8 hrs Fie	eld Engineer Service #1 ST	\$200.00	\$1,600.00			
8 hrs Uti	ility Truck #1	\$25.00	\$200.00			
07/26/2023		y	¥			
8 hrs Fie	eld Engineer Service #1 ST	\$200.00	\$1,600.00			
8 hrs Uti	ility Truck #1	\$25.00	\$200.00			
07/27/2023						
4 hrs Fie	eld Engineer Service #1 ST	\$200.00	\$800.00			
07/28/2023						
4 hrs Fie	eld Engineer Service #1 ST	\$200.00	\$800.00			
08/01/2023						
	eld Engineer Service #1 ST	\$200.00	\$1,600.00			
	ility Truck #1	\$25.00	\$200.00			
08/05/2023		****				
	eld Engineer Service #1 ST	\$200.00	\$800.00			
08/06/2023		#200.00	<b>#</b>			
	eld Engineer Service #1 ST	\$200.00	\$800.00			
08/08/2023		#200.00	01 (00 00			
	eld Engineer Service #1 ST	\$200.00	\$1,600.00			
	ility Truck #1	\$25.00	\$200.00			
08/09/2023	1177	#200.00	#1 COO OO			
	eld Engineer Service #1 ST	\$200.00	\$1,600.00			
8 hrs Uti	ility Truck #1	\$25.00	\$200.00			

CONTINUED NEXT PAGE



Phone: 518-869-4961 • Fax: 518-869-4962

BILL TO:

Albany County Sewer District

Accounts Payable

112 State Street, Basement

Albany, NY 12207

**INVOICE:** 

19357, page 2 of 2

DATE:

08/16/2023

PO. No.:

Per Contract Dated

07/25/2023

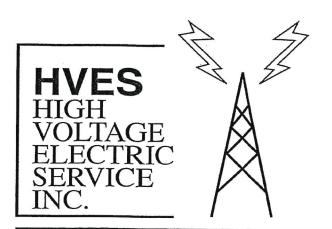
TERMS:

2% 10/Net 30 Days

		TERMS: 29	% 10/Net 30 Days	
Billing for si	apply and installation of new primary selective switch at North	Unit Price	Extended Price	
Plant Solids	Building.			
08/10/2023				
8 hrs	Field Engineer Service #1 ST	\$200.00	\$1,600.00	
8 hrs	Utility Truck #1	\$25.00	\$200.00	
08/11/2023				
4 hrs	Field Engineer Service #1 ST	\$200.00	\$800.00	
Test Equipm	ent:			
1 job	Hipotronics 80kV Hipot	\$260.00	\$260.00	
1 job	Biddle MIT515 Megger	\$300.00	\$300.00	
1 job	100A Ducter/DLRO	\$250.00	\$250.00	
Materials:	Ÿ	T. It		
1 each	GE primary selective switch, rebuilt	\$58,500.00	\$58,500.00	
1 each	Transformer transition section	\$4,100.00	\$4,100.00	
1 each	Metal side skin	\$1,000.00	\$1,000.00	
2 each	Cable connection compartments	\$1,800.00	\$3,600.00	
3 each	100E fuses for spares	\$440.00	\$1,320.00	
Subcontracted Services:				
1 each	M. Scher & Son Invoice 9753	\$134,000.00	\$134,000.00	
20%	Rate sheet mark-up on subcontracted services	, , , , , , , , , , , , , , , , , , , ,	\$26,800.00	
	purchase #14-6002563.			

TOTAL INVOICE:

\$244,930.00



Phone: 518-869-4961 • Fax: 518-869-4962

BILL TO:

Albany County Sewer District

Accounts Payable

112 State Street, Basement

Albany, NY 12207

INVOICE:

19325, page 2 of 2

DATE:

07/27/2023

PO. No.:

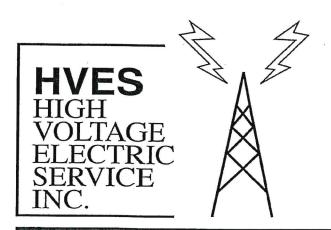
TERMS:

2% 10/Net 30 Days

			o 10/Net 30 Days
	r emergency repairs at North Plant to restore power after Solids	Unit Price	Extended Price
Building's	s Primary Selective Switch failed.		
Subcontra	acted Services:		
1 each	Metal Clad Services Invoice 1018	\$3,000.00	\$3,000.00
20%	Rate Sheet mark-up on subcontracted services	*	\$600.00
	•		
	*		
Tay avem	nt purchase #14 6002562		
i ax-exelli	pt purchase #14-6002563.		

TOTAL INVOICE:

\$25,595.90



Phone: 518-869-4961 • Fax: 518-869-4962

BILL TO:

Albany County Water Purification District

Accounts Payable

112 State Street, Basement

Albany, NY 12207

INVOICE:

19325, page 1 of 2

DATE:

07/27/2023

PO. No.:

TERMS:

2% 10/Net 30 Days

Billing for emergency repairs at North Plant to restore power after Solids  Unit Price Exten  Building's Primary Selective Switch failed.	ded Price
07/23/2023	
	22 400 00
	2,400.00
4 hrs Utility Truck #1 \$25.00	\$100.00
	11 600 00
\$250.00 p	1,600.00
	31,600.00
8 hrs Utility Truck #1 \$25.00	\$200.00
8 hrs Utility Truck #2 \$25.00	\$200.00
Materials:	
4 each 15kV insulators \$425.00	31,700.00
6 each Fuse supports \$825.00	4,950.00
3 each Spare 65E fuses \$2,450.00 \$	7,350.00
4 each GPO-3 insulating barriers \$410.00 \$	31,640.00
2 pkg Disposable rags \$5.00	\$10.00
2 each Mother Earth cleaner \$12.85	\$25.70
3 each Abrasive cleaning pads \$3.00	\$9.00
12 each 3/8"x1" flat head hex specialty bolts for insulators \$11.25	\$135.00
12 each Stainless steel 1/2"x1.25" bolts \$0.85	\$10.20
24 each Stainless steel ½" flat washers \$0.50	\$12.00
12 each Stainless steel ½" lock washers \$0.65	\$7.80
12 each Silicon bronze ½" hex nuts \$2.00	\$24.00
12 each Stainless steel 3/8"x1" bolts \$0.80	\$9.60
12 each Stainless steel 3/8" flat washers \$0.50	\$6.00
12 each Stainless steel 3/8" lock washers \$0.55	\$6.60

CONTINUED NEXT PAGE

#### SWORN STATEMENT IN PROOF OF LOSS

\$150,000,000.00			US00065682PR22A
AMOUNT OF POLICY AT TIME OF LOSS			POLICY NUMBER
August 15, 2022	UNDISP	'UTED	Arthur J. Gallagher
DATE ISSUED			AGENT
August 15, 2023	-		Latham, NY
DATE EXPIRES			AGENCY AT
To the	Croonyvich Incurre	C	
of Stamford, CT	Greenwich Insurance	Company	Insurance Company
At the time of loss, by the above indi	ated policy of insurance, you insured	County of	Albany - Water Treatment Facility
against loss by Equipment Breakdown			er Schedule "A", according to the terms
1 Time and Origina A	forms, endorsements, transfers and assignments at	tached thereto.	
Dicar.		ss occurred about the hour of	f Unknown o'clock am/pm
on the 22nd day of July	2023 TI	ne cause and origin of the said	d loss were
Lose connection at ruse clip on swite	th at the North Plasht Solids Building caused	l the switch failure and su	ubsequent damage to downstream equipment
2. Occupancy: The building described, or	containing the property described, was occupied	at the time of the loss as follo	ows, and for no
AT A STATE OF THE	: Water Treatment Facility	re verdicinos and discussion and the same an	
3. Title and interest: At the time of the lo	ss the interest of your insured in the property desc	ribed therein was	Owner
			No other person or persons had any
interest therein or encumbrance there	con, except: X- N/A		
PLEASE	INDICATE ANY OTHER OWNERSHIP/ MORTG	AGEE FOR THIS PROPERT	Y ON THE LINE ABOVE
<ol> <li>Changes: Since the said policy was issu</li> </ol>	ed there has been no assignment thereof, or chang	ge of interest, use, occupancy	, possession,
location or exposure of the property desc	ribed except: None		
	***		
5. Total Insurance: The total amount of in	nsurance upon the property described by this polic	Turns at the time of law	7150 000 000 00
	rtionment attached under Schedule "C", besides w		\$150,000,000.00
insurance, written or oral, valid or invalid		nich there was no policy or o	other contract of
	he time of the loss was		ACREED AMOUNT
	(UNDISPUTED AMOUN		
	(ONDISTOTED AMOON		
			To Be Determined
	sured participation		
The remount Claimed under the above	e numbered policy is(UNDISPUTED PA	TYMEN1)	260,525.90
Any norcon who beautions			
alse incomplete or misleading i	with intent to injure, defraud, or dece nformation is guilty of a felony of thir	ive any Insurance Co.	., files a statement of claim concerning any
in the second se	mormation is guilty of a felony of this	a degree.	
The furnishing of this blank on the access	5		
the farmstang of this blank of the prepara	tion of proofs by a representative of the above cor	npany is not a waiver of any	of ils rights.
State of New York			
County of Albany		was the Same	
ubscribed and sworn before me this	15th day of At	ngélo Gaudio ACI	MPD Executive Director
	0 1 = 0 = -	1111	Note a Public
	15th day of Ar Sept- 2023 —	- may Mil	Notary Public
	1	/ •	
			TRACY A MURPHY
adawick #			Notary Public, State of New York
edgwick # YC23944440	(®) sed{	gwick .	No. 02MU6263245 Insurer Clair Qualified in Albany County 0010287
1023377770		(	Commission Expires June 11, 2016
			11,0010

Sedgwick # NYC23944440

#### Gaudio, Angelo

From:

Hyde, Cliff < Cliff. Hyde@Sedgwick.com>

Sent:

Thursday, September 14, 2023 2:26 PM

To: Cc: Gaudio, Angelo Hyde, Cliff

Subject:

Albany County Solid Waste Plant Claim - NYC23944440

**Attachments:** 

Undisputed POL - 9.14.2023.pdf

#### Angelo,

The insurance carrier has agreed to cover the claim submitted for the North Solid Waste Plant located on Canal Road, Albany, NY for the reported equipment breakdown occurring on July 22, 2023. Currently, our measurement of this event (and based on what was submitted) totals \$270,525.90 and with the policy deductible that amount reduces to \$260,525.90. These figures are detailed below:

HVES – Emergency Repairs

\$ 25,595.90

HVES - Switch Replacement

\$ 244,930.00

Sub-Total

\$ 270,525.90

Less Deductible

\$ 10,000.00

Total

\$ 260,525.90

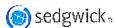
It is also our understanding that as a result of this event, there was a compressor that was also affected. Specifically, Ingersoll Rand Compressor #2. Please provide copies of all supporting documentation for the repair or replacement of this compressor for consideration in the measurement and/ or future payment of this claim. In the interim, the carrier has requested we secure a proof of loss for the undisputed amounts detailed above. This proof of loss is attached to this email and needs to be signed, notarized and returned to me with payment and mailing instructions for issuance of this payment. Please be certain to fill out Line #3 (Above highlighted area) and if there are no other interested parties simply put not applicable or N/A.

Once the proof of loss is executed, please email it to me with the payment details discussed. With that, the carrier will make a payment for the measurement of the claim to date. Please know that by executing the attached proof of loss, Albany County is not waiving their rights under the policy for future payments specific to this event. When we sort out the compressor issue, we will present it to the carrier for consideration and should be able to wrap the claim up. Until then, this payment should be considered a partial or undisputed amount to date.

If you have any questions, please call or email me.

#### Best regards,

Clifford W. Hyde Jr. | Senior Executive General Adjuster 120 Broadway, New York, NY 10271
DIRECT: (917) 291-4100
EMAIL Cliff.Hyde@sedgwick.com
www.sedgwick.com | Caring counts®



No representative of Sedgwick, or any consultant retained on behalf of the insurer(s) working with Sedgwick, has any authority either to bind the insurer(s) to coverage, or to interpret, waive, or alter any of the terms, conditions, or limitations of the policy. The insurer(s) reserves the right to make all decisions concerning coverage.

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Any personal data acquired, processed or shared by us will be lawfully processed in line with applicable data protection legislation. If you have any questions regarding how we process personal data refer to our <u>Privacy Notice</u>. Any communication including this email and files/attachments transmitted with it are confidential and are intended solely for the use of the individual or entity to whom they are addressed. If this message has been sent to you in error, you must not copy, distribute or disclose of the information it contains and you must notify us immediately (contact is within the privacy policy) and delete the message from your system.