



JOSEPH A. CURTATONE  
MAYOR



**CITY OF SOMERVILLE, MASSACHUSETTS  
COMMUNITY PRESERVATION COMMITTEE  
FY20 FUNDING CYCLE APPLICATION PACKET  
APRIL 24, 2019**

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Dick Bauer  
Laura Beretsky  
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**STAFF**

Kristen Stelljes

This packet contains all of the forms that applicants need to submit as part of their FY20 application for Community Preservation Act funds. These forms should accompany the narrative submission as described in the [CPA application instructions packet](#). Should you have any questions during the application process, including if you need language support, please contact Kristen Stelljes, the Community Preservation Act Manager. She can be reached at [kstelljes@somervillema.gov](mailto:kstelljes@somervillema.gov) or 617.625.6600 x2107 or at Somerville City Hall at 93 Highland Avenue Somerville, MA 02143. You can also access additional resources and videos of application workshops at: [www.somervillema.gov/cpa](http://www.somervillema.gov/cpa)

The following forms are included in this packet:

1. The FY20 pre-application form for community projects proposed for City land and proposals for feasibility studies (p. 2-3)
2. The FY20 project eligibility form, which must be submitted to and reviewed by the Community Preservation Committee (CPC) before an applicant can submit a full application. An electronic version of the project eligibility form is available [online](#). (p.4-5)
3. Fillable application cover page (p. 6)
4. Fillable submission requirements checklist (p. 7-8)
5. Fillable budget summary (p. 9)
6. Fillable Grant and Trust Fund Disclosure Form (p. 10-11)
7. Fillable Mandatory Campaign Contribution Disclosure and Certification Form (p. 12-16)
8. Ordinance to Safeguard Vulnerable Road Users Acknowledgement (p. 17)



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<b>Application Process Checklist:</b>	
	<b>May 15:</b> Submit pre-applications (only for community proposed projects on City land and feasibility studies)
	<b>June 4 at 6:30pm or June 5 at 1:00pm :</b> Attend application workshop, Central Library Auditorium
	<b>July 10:</b> Submit eligibility determination form to <a href="mailto:kstelljes@somervillema.gov">kstelljes@somervillema.gov</a> .
	<b>September 5:</b> Attend CPA Manager office hours by appointment.
	<b>September 24:</b> Submit funding applications to City Hall (93 Highland Ave) by noon
	<b>October 10 or 23:</b> Present application to CPC (dates tentative)



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## CITY OF SOMERVILLE, MASSACHUSETTS COMMUNITY PRESERVATION COMMITTEE

**FY20 FUNDING CYCLE**

### **PRE-APPLICATION FOR COMMUNITY PROPOSED PROJECTS ON CITY LAND & FEASIBILITY STUDIES**

Submit an electronic copy (fillable PDF available at [www.somervillema.gov/CPA](http://www.somervillema.gov/CPA)) no later than **12 noon on Wednesday, May 15** to: Kristen Stelljes, [kstelljes@somervillema.gov](mailto:kstelljes@somervillema.gov). [Download and save file before you begin typing to ensure work is saved.]

The Somerville Community Preservation Committee requires the property owner of public lands be a co-applicant on all projects for Community Preservation Act (CPA) funding. To propose an idea for a CPA funded project on City of Somerville owned land, submit this form to the CPA Manager. The Manager will help match you with the appropriate City department who will opt to sign on as a co-applicant, work with you to develop the idea further for a future funding round, connect you with an existing effort on the property, or decline to sign on as a co-applicant.

You can also use this form to request a feasibility study be conducted for your proposed project idea- both for projects on City land and for land that is privately owned. The City does not need to be a co-applicant on feasibility study projects. Feasibility studies are used to determine the likelihood of a project's success, strategies for increasing the likelihood of success, and to clarify alignment with Community Preservation Committee guidelines and goals. If selected, the CPA Manager will make arrangements for the study to be conducted. Feasibility studies may include public processes to determine the acceptability of the project to the community, surveys, costing, and technical advice from relevant experts on strategies to ensure the success of the project.

PROJECT NAME: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

PROPOSER(S) NAME / ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

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

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

*Please indicate (X) all categories that apply to this project (at least one). For more detailed information on these categories, refer to the "Community Preservation Act Funding Allowable Uses" chart on page 3.*

**FOR HISTORIC RESOURCES PROJECTS:**

Is the resource in a Local Historic District and/or listed on the State Register of Historic Places?

Yes  No

(you can check designation at [mhc-macris.net](http://mhc-macris.net))

If no, has the Somerville Historic Preservation Commission made a determination that the resource is significant? Yes  No

	Open Space	Recreational Land	Historic Resources	Community Housing (blended projects only)
Acquisition				
Creation				
Preservation				
Support				
Rehabilitation/Restoration				



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MAYOR

Please indicate (X) all categories for which you are seeking consideration with this application.

City department to sign on as co-applicant		Feasibility study funding	
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**PROJECT SUMMARY:**

**PROJECT STATUS** (What community need is this trying to address and what level of planning has already been undertaken to inform the proposed project, including stakeholders engaged to date?):

**FOR FEASIBILITY STUDIES ONLY: QUESTIONS AND BARRIERS TO IMPLEMENTATION** (What questions do you think still need to be answered to help the Community Preservation Committee assess the merits of this project? What barriers to implementation do you anticipate for the project and how can these be overcome?):

**FOR CITY OF SOMERVILLE USE:** Date Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Date Applicant Notified \_\_\_\_\_

**Co-applicant:** Relevant department \_\_\_\_\_ Co-apply Develop further Join existing Not currently possible

**Feasibility study:** Fund Don't fund

**COMMENTS:**



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# CITY OF SOMERVILLE, MASSACHUSETTS COMMUNITY PRESERVATION COMMITTEE FY20 FUNDING CYCLE ELIGIBILITY DETERMINATION FORM

Submit an electronic copy (fillable PDF available at [www.somervillema.gov/CPA](http://www.somervillema.gov/CPA)) no later than **4:30pm Wednesday, July 10, 2019** to: Kristen Stelljes, [kstelljes@somervillema.gov](mailto:kstelljes@somervillema.gov). [Download and save file before you begin typing to ensure work is saved.]

PROJECT NAME: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

APPLICANT(S) NAME / ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

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

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Interested in collaborating with local artist on your project? Yes  No

*Please indicate (X) all categories that apply to this project (at least one). For more detailed information on these categories, refer to the "Community Preservation Act Funding Allowable Uses" chart on the next page.*

	Open Space	Recreational Land	Historic Resources	Community Housing (blended projects only)
Acquisition				
Creation				
Preservation				
Support				
Rehabilitation/ Restoration				

**PROPERTY OWNERSHIP:**

Legal Property Owner of Record (if applicable):

Is the owner the applicant? Yes  No

If No, does the applicant have site control or written consent of the property owner to submit an application? City of Somerville must be co-applicant on all projects on City property.

Yes (Attach documentation)

No (Project will be deemed ineligible for this applicant)

**FOR HISTORIC RESOURCES PROJECTS:**

Is the resource in a Local Historic District and/or listed on the State Register of Historic Places? Yes  No

(you can check designation at [mhc-macris.net](http://mhc-macris.net))

If no, has the Somerville Historic Preservation Commission made a determination that the resource is significant? Yes  No

**PROJECT SUMMARY:**



JOSEPH A. CURTATONE  
MAYOR



**PROJECT STATUS** (What community need is this trying to address and what level of planning has already been undertaken to inform the proposed project?):

**FOR CPC USE:** Date Received \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Date Applicant Notified \_\_\_\_\_

Eligible

Potentially Eligible

Not Eligible

More Information Needed

**COMMENTS:**



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# CITY OF SOMERVILLE, MASSACHUSETTS COMMUNITY PRESERVATION COMMITTEE FY20 FUNDING CYCLE APPLICATION COVER PAGE

## 1. PROJECT INFORMATION

PROJECT NAME: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

LEGAL PROPERTY OWNER OF RECORD: \_\_\_\_\_

ONE SENTENCE DESCRIPTION OF PROJECT: \_\_\_\_\_

*Please indicate (X) all categories that apply to this project (minimum of one) in the chart.*

	Open Space	Recreational Land	Historic Resources	Community Housing (blended projects only)
Acquisition				
Creation				
Preservation				
Support				
Rehabilitation/Restoration				

ESTIMATED START DATE: \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

CPA FUNDING REQUEST: \_\_\_\_\_

TOTAL BUDGET FOR PROJECT: \_\_\_\_\_

## 2. APPLICANT INFORMATION

APPLICATION NAME / ORGANIZATION: \_\_\_\_\_

CO-APPLICATION NAME / ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

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

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## 3. SIGNATURES

I (we) certify that all information provided in this entire submission is true and correct to the best of my (our) knowledge and that no information which might reasonably affect funding has been excluded. I (we) authorize the Community Preservation Committee and/or the City of Somerville to obtain verification from any source provided.

Name (printed) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (printed) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_



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## CITY OF SOMERVILLE, MASSACHUSETTS COMMUNITY PRESERVATION COMMITTEE FY20 FUNDING CYCLE SUBMISSION REQUIREMENTS CHECKLIST

Please check (✓) each item included in your submission, which should include the applicable items in the order listed below.

### GENERAL:

- Application Cover Page (form provided)
- Submission Requirements Checklist (this form)
- Narratives (prompts provided in instruction packet)
- Project timeline: a project schedule showing all major milestones (i.e., study, design, environmental, permitting, construction, etc.), including receipt of other funding sources
- Grant and Trust Funds Disclosure Form (form provided)
- Campaign Contribution Mandatory Disclosure and Certification Form (form provided- only needed if requesting \$50,000 or more in CPA funds)
- Ordinance to Safeguard Vulnerable Road Users Acknowledgement (form provided)

### FINANCIAL:

- Budget Summary (form provided- construction projects must include cost for permanent CPA dedication sign)
- Itemized budget of all project costs, including the proposed source for each cost
- Three written quotes for project costs. If quotes cannot be secured, detailed cost estimates may be used if a thorough explanation of the estimates is included.
- Proof of secured funding (e.g., commitment letters or bank statements), if applicable. If providing bank statements, please redact identifying information such as account numbers.

### VISUAL:

- Map of the property location showing all features pertinent to the project, including current or future rapid transit stations
- Photos of the project site (not more than 4 views per site); include digital copies

### OWNERSHIP/OPERATION (NON-CITY):

- Documentation of site control or written consent of the property owner to undertake the project, if the owner is not the applicant
- City has signed on as a co-applicant for community projects proposed on City land.
- Certificates of Good Standing from the [City](#) and the [State](#), if applicable
- 501(c)(3) certification, if operating as a non-profit
- Purchase and sale agreement or copy of current recorded deed, if applicable

### COMMUNITY SUPPORT (RECOMMENDED):

- Letters of support from residents, community groups, other City boards, commissions, or departments, or from City, state, or federal officials



**HISTORIC RESOURCES PROJECTS:**

- Documentation that the project is listed on the State Register of Historic Places or a written determination from the Somerville Historic Preservation Commission that the resource is significant in the history, archeology, architecture, or culture of Somerville.
- Photos documenting the condition of the property
- Report or condition assessment by a qualified professional describing the current condition of the property, if available.

**PLANS AND REPORTS (IF AVAILABLE; SUBMIT DIGITAL COPIES ONLY)**

- Renderings, site plans, engineering plans, design and bidding plans, specifications, and any MAAB variance requests
- Applicable reports (e.g., 21E, historic structure report, appraisals, survey plans, feasibility studies).



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**CITY OF SOMERVILLE, MASSACHUSETTS  
COMMUNITY PRESERVATION COMMITTEE  
FY20 FUNDING CYCLE  
BUDGET SUMMARY**

PROJECT NAME: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

<b>SUMMARY OF PROJECT COSTS</b>						
<i>Please include a complete itemized budget of all project expenses, including the proposed funding source for each expense, in your submission. Budget needs to include cost of permanent CPA dedication sign if requesting construction funds.</i>						
	PROPOSED SOURCE	EXPENSES				TOTAL
		STUDY	SOFT COSTS*	ACQUISITION	CONSTRUCTION**	
1	Somerville CPA					
2						
3						
4						
5						
6						
<b>TOTAL PROJECT COSTS</b>						

\*Soft costs include design, professional services, permitting fees, closing costs, legal, etc.  
\*\* Construction includes new construction, preservation, rehabilitation, restoration work, and/or accessibility related expenses

<b>EXPLANATION OF FUNDING SOURCES</b>			
<i>Please explain the status of each funding source (i.e., submitting application on X date, applied on X date, received award notification on X date, funds on hand, etc.). For sources where funding has been awarded or funds are on hand, please include documentation from the funding source (e.g., commitment letter, bank statement) in application packet</i>			
	SOURCE	SECURED? (YES/NO)	STATUS OF FUNDING SOURCE
1			
2			
3			
4			
5			



**GRANT AND TRUST FUNDS DISCLOSURE FORM**  
**PURSUANT TO CITY OF SOMERVILLE CODE OR ORDINANCES SEC. 15**

(copies of the Ordinance are available upon request)

**Instructions:** All applicants for grant and/or trust funds administered by the City must complete this form as part of its application submission to the City of Somerville. Complete all sections of this form.

**Section 1**

Legal Name of Applicant:

Indicate whether the applicant had any grant, contract, or agreement with a federal, state or local agency terminated within the last three (3) years.

**Check One:**

- Yes** (If yes, please identify the grant, contract, or agreement including parties, term, and cause of termination on an additional page.)
- No**

**Section 2**

**Applicants are required to disclose any circumstances constituting a conflict of interest or potential conflict of interest arising from or relating to the proposed grant or trust disbursement, whether real or apparent.**

**Conflict of Interest Prohibited.** No employee, officer or agent of the grantee shall participate in any particular matter, including but not limited to, the selection, or in the award or administration of a contract, grant or subgrant, or employment agreement administered by way of funds received by the City of Somerville if a conflict of interest, real or apparent, would arise. Such a conflict would arise when:

- 1) an employee, officer or agent, or
- 2) any member of his or her immediate family, or
- 3) a business organization in which he or she is serving as officer, director, trustee, partner, or employee; or
- 4) any person or organization with whom he or she is negotiating or has any arrangement concerning prospective employment,

has a financial or other interest in the person or entity selected for an award, or a contract, grant, subgrant, or employment agreement of the grantee or the funds for which originate from or are awarded through the city.

**Check One:**

**No Conflict Of Interest**

**Potential or Actual Conflict of Interest** (If checked, disclose in detail all relevant facts, including names of individuals or organizations, relevant contract, grant, subgrant or employment agreement, and source of funding on an additional page.)

**Section 3**

Attach a copy of applicant’s policy addressing conflicts of interest that may arise involving management, employees and the members of its board of directors or other governing body. See the *City of Somerville Code of Ordinances Section 15-42(c)* for complete requirements. Should the policy be revised during the grant term, a copy of the revised policy must be submitted to the City within thirty (30) days of being revised.

**Section 4**

Identify all officers, employees, contractors, subgrantees or other persons providing any type of service in relation to the proposed grant activity, in the following format. Use additional page(s) as necessary.

Name (Individual or Entity)	Association	Service Provided	Value of Service (\$)	Amount of City Funds Supporting Service (\$)	Mark “X” if individual or entity has had any grant, contract, or agreement with a federal, state or local agency terminated within the last 3 years.*

\*If yes, please identify the grant, contract, or agreement including parties, term, and cause of termination on an additional page.

**Section 5**

This form is hereby completed on behalf of the applicant named above. Through the undersigned individual, the applicant hereby certifies that the completed form is true and accurate. The applicant acknowledges that it has read, understands, and agrees to comply with, the requirements of *City of Somerville Code of Ordinances Section 15*.

During the term of any grant, grantees have a continuing obligation to submit an updated Disclosure Form to the City of Somerville immediately as to any circumstances which constitute a potential or actual conflict of interest.

Signature:

Print Name of Authorized Individual:

Title:

Date:



**CITY OF SOMERVILLE CAMPAIGN CONTRIBUTION ORDINANCE SEC. 15-72\*  
MANDATORY DISCLOSURE AND CERTIFICATION FORM**

**INSTRUCTIONS:** APPLICANTS, PLEASE COMPLETE THE ENTIRE FORM AND FILE WITH THE SAME CITY OFFICE OR AGENCY WITH WHOM YOU FILED OR WILL FILE BELOW APPLICATION.

**PART I. APPLICATION FOR ITEM**

**Describe the item** you have, or will apply for, relating to this disclosure:

ITEM:	
TYPE (X):	<input type="checkbox"/> Contract <input type="checkbox"/> Zoning Relief <input type="checkbox"/> Real Estate <input type="checkbox"/> Financial Assistance
CITY DEPT. OR AGENCY:	

**PART II. APPLICANT INFORMATION**

Provide the following information for the Applicant:

NAME:	
ADDRESS:	
TELEPHONE NO.:	
E-MAIL:	

**On Schedule A**, you must also provide the same information for the Applicant’s principals, chief executive officer, president, chief financial officer, treasurer, chief operating officer, chief procurement officer, directors, or persons performing similar functions, or shareholders in excess of ten percent and managing agent to the extent applicable. **Please complete Schedule A. If not applicable, please check N/A on Schedule A.**

**PART III. CAMPAIGN CONTRIBUTION DISCLOSURE**

**On Schedule B**, Applicants must disclose all contributions made by the applicant during the 12 months prior to the application (identified in Part I), to any person who was a candidate for elective office of the City of Somerville (mayor, board of aldermen, and school committee). The attribution rules in Section 15-73 of the Somerville Code of Ordinances shall apply to the contributions that must be disclosed. **On Schedule B**, applicants must also disclose such contributions made by persons attributed to the applicant under the ordinance. If the applicant is an individual, any such contributions made by the individual, any spouse of the individual, and any children of the individual must be disclosed. If the applicant is not an individual but a corporation, partnership or limited liability corporation, then any contributions made by any of its chief executive officer, president, chief financial officer, treasurer, chief operating officer, chief procurement officer, directors, members, managers, principals, or persons performing similar functions, or shareholders in excess of ten percent, and their spouses and children, must be disclosed. **Please complete Schedule B. If disclosure is not required, please check N/A on Schedule B.** *Note: Contributions made before January 1, 2017 are not required to be disclosed.*

\* Please see the Pay to Play and Campaign Contribution Ordinance for definitions and all requirements.

**PART IV. SUBCONTRACTOR INFORMATION**

Have you applied for a Contract and intend to use a subcontractor on this Contract? Yes No

If “**Yes**”, complete **Schedule C**. If “**No**”, **proceed to Part V**.

**PART V. SIGNATURE, CERTIFICATION, AND ATTESTATION:**

I, the undersigned applicant, hereby further certify as follows: If awarded the item that is applied for (as identified above) under subsections (a), (b), (c), or (d) in Section 15-72 of the Somerville Code of Ordinances, the Applicant, and anyone attributed to the Applicant, and if the application is for a contract any subcontractor used on the contract, will not make any contribution in any calendar year in an amount in excess of \$500.00 to any individual incumbent or to any individual candidate for elective office of the City of Somerville for the next four (4) calendar years following the award of the item, or for the duration of the term of the contract, whichever is longer.

Signed under the pains and penalties of perjury:

Signature of Affiant: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name of Affiant: \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

(Witnessed or attested by)

(Seal)

My Commission expires:

**THIS FORM SHALL BE OPEN TO PUBLIC INSPECTION**

**SCHEDULE A – APPLICANT INFORMATION**

**INSTRUCTIONS:** FOR EACH OF APPLICANT’S PRINCIPALS, CHIEF EXECUTIVE OFFICER, PRESIDENT, CHIEF FINANCIAL OFFICER, TREASURER, CHIEF OPERATING OFFICER, CHIEF PROCUREMENT OFFICER, DIRECTORS, OR PERSONS PERFORMING SIMILAR FUNCTIONS, OR SHAREHOLDERS IN EXCESS OF TEN PERCENT AND MANAGING AGENT TO THE EXTENT APPLICABLE, COMPLETE THE FOLLOWING. ATTACH ADDITIONAL PAGES IF REQUIRED.

**IF NOT APPLICABLE, CHECK HERE:** \_\_\_.

<b><u>NAME</u></b>	<b><u>POSITION</u></b>	<b><u>E-MAIL ADDRESS</u></b>	<b><u>PHONE NO.</u></b>	<b><u>ADDRESS</u></b>

**SCHEDULE B– CONTRIBUTION DISCLOSURE INFORMATION**

**INSTRUCTIONS:** FOR EACH CONTRIBUTION, YOU MUST DISCLOSE THE FOLLOWING INFORMATION. ATTACH ADDITIONAL PAGES IF REQUIRED.

*Note: Contributions made before January 1, 2017 are not required to be disclosed.*

**IF NOT APPLICABLE, CHECK HERE:** \_\_\_\_.

<b><u>NAME OF CONTRIBUTOR</u></b>	<b><u>RELATIONSHIP TO APPLICANT</u></b>	<b><u>NAME OF RECIPIENT</u></b>	<b><u>DATE OF CONTRIBUTION (MM/DD/YYYY)</u></b>	<b><u>AMOUNT OF CONTRIBUTION (\$..\$)</u></b>



**SCHEDULE C – SUBCONTRACTOR INFORMATION**

**INSTRUCTIONS:** LIST THE NAME, BUSINESS ADDRESS, AND PHONE NUMBER OF EACH SUBCONTRACTOR AND THE AMOUNT OR PERCENTAGE TO BE PAID TO EACH SUBCONTRACTOR. ATTACH ADDITIONAL PAGES IF REQUIRED.

<b><u>NAME</u></b>	<b><u>AMOUNT OR % PAID</u></b>	<b><u>PHONE NO.</u></b>	<b><u>BUSINESS ADDRESS</u></b>



**SOMERVILLE ORDINANCE TO SAFEGUARD VULNERABLE ROAD USERS**  
**CITY OF SOMERVILLE CODE OF ORDINANCES ARTICLE VIII, SEC. 12-117 et seq.**

Prospective contractors must familiarize themselves with the City of Somerville’s Ordinance to Protect Vulnerable Road Users. The full text of this local law can be found [here](#).

1. **Request for Inspection:** Inspections are conducted on Thursdays from 4pm-7pm at the Somerville Department of Public Works, located at 1 Franey Road. Each inspection takes approximately 20 minutes.
  - a. Any vendor covered by this Ordinance shall complete an inspection request form and email it to [fleetinspections@somervillema.gov](mailto:fleetinspections@somervillema.gov).
  - b. Please submit request form no later than 3pm on the Tuesday before the requested inspection date.
2. **Fee:** The fee for the initial inspection is \$100. The fee for a renewal inspection (every two years) is \$50.
  - a. Payment of the fee is due upon scheduling of the inspection. The fee can be paid via check or credit card. Checks should be made out to the City of Somerville and include the vendor’s phone number.
3. **Approval:** Vehicles inspected and approved by the Fleet Division will have an inspection approval sticker affixed to the windshield of the vehicle. A copy of the inspection report and certificate of inspection shall be issued to the vendor.
  - a. Inspection stickers are not transferable.
  - b. Any major overhaul of safe guard equipment shall be required to be re-inspected.
4. **Rejection:** If a vehicle is rejected for failing to comply with any of the technical specifications outlined in the ordinance, it shall be corrected and henceforth re-inspected within 30 days at no additional fee.
  - a. If a second inspection results in a rejection, a fee of \$50 will be required for any subsequent inspections.
  - b. Any vendor who fails to comply within 60 days of their first inspection may be subject to having their contract cancelled.
5. **Questions:** Please direct questions about vehicle inspections to Fleet Superintendent Ron Bonney at [rbonney@somervillema.gov](mailto:rbonney@somervillema.gov) or at (617) 625-6600, ext. 5524.

Acknowledgement

In accordance with Sec. 12-119 “Requirements” in the Ordinance, bidders must sign the following:

Unless certified that the Ordinance is not applicable to this contract or otherwise waived by the City, I acknowledge that my company has installed (or will install prior to commencing work for the contract) side guards, cross-over mirrors or equivalent blind spot countermeasures, convex mirrors or equivalent blind spot countermeasures, side-visible turn signals, and appropriate warning signage, in accordance with SCO Chapter 12, Article VII on all large vehicles it uses or will use within the City of Somerville in connection with any contract.

\_\_\_\_\_  
Authorized Signatory’s Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Company Name

I certify that the Ordinance does not apply to this contract for the following:

- Vehicles do not meet or exceed Class 3 GVWR     Vehicles do not exceed 15 MPH     No vehicles on project  
 Other: \_\_\_\_\_