

Halifax Highway Department

PLOW TRUCK DRIVERS NEEDED!!



The Town of Halifax is currently looking for experienced Plow Truck Drivers for the upcoming winter season. Ability to work long hours in emergency snow events. Increased rates differ according to truck and plow size (s).

Please take a few minutes to review the [2023 Plow Application Package](#) attached below. Upon completion, packets should be returned to the Halifax Highway Barn, 60 Hemlock Lane, Halifax, MA 02338. If an application is returned by Friday November 3, 2023, a sign-up bonus of \$400.00 per piece of equipment will be paid-out at the end of the season on April 30, 2024.

If you have any questions, please call the Highway Department at (781)293-1760 or e-mail Steve.Hayward@halifax-ma.org or Kathleen.Garland@halifax-ma.org.

14.0 RATES – EFFECTIVE NOVEMBER 1, 2022

4 WHEEL DRIVE PICKUP TRUCK: 6,600-10,999 GVW		GUARANTEED MINIMUM
8 - FOOT MIN PLOW	\$80.50 PER HOUR	\$1,610.00
9 –FOOT PLOW	\$82.50 PER HOUR	\$1650.00
4- OR 6-WHEEL TRUCK: 11,000 – 15,999 GVW		
9 – FOOT MIN PLOW	\$85.50 PER HOUR	\$1,710.00
10 – FOOT PLOW	\$87.50 PER HOUR	\$1,750.00
6 WHEEL TRUCK 16,000 – 26,000 GVW		
10 – FOOT PLOW	\$91.50 PER HOUR	\$1,830.00
6 WHEEL TRUCK 26,001 – 40,000 GVW		
11 - FOOT MIN PLOW	\$99.50 PER HOUR	\$1,990.00
10 WHEEL TRUCK		
11 – FOOT MIN	\$131.50 PER HOUR	\$2,030.00
SKID STEER W/ 8' PLOW OR SNOW PUSHER		
	\$101.50 PER HOUR	
4 WD BACKHOE W/ PLOW OR SNOW PUSHER		
	\$121.50 PER HOUR	\$2,430.00
**LOADER OR TRACTOR		
11- FOOT MIN PLOW	\$141.50 PER HOUR	

*SIGN-UP BONUS \$400.00 PER PIECE OF EQUIPMENT IF SIGNED UP BY NOVEMBER 15, 2023
PAID OUT AT END SEASON (APRIL 30, 2023)

** SPECIALTY MACHINE HAS SIGN UP BONUS OF \$400.00. NO GUARANTEED MINIMUM, ONLY
USED FOR CERTAIN SNOW EVENTS

APPLICATION FOR SNOW PLOWING

REGULATIONS FOR SNOW PLOWING

1.0 NOTIFICATION

Notification will be made by the Highway Department personnel. Upon notification all vehicles are to report immediately to the highway barn, located at 60 Hemlock Lane, to punch in. Each contractor/ individual has the obligation to notify the Highway Department of phone number/ contact information.

2.0 SIGN-IN

Plowers must punch in on timecards at the highway barn. Plowing time will start at the time of the call. A maximum of a half hour will be allowed from the time of the call to the time of reporting to the Highway Barn. If the plower has not arrived within a half hour of the call, time will start when the plower punches in at the barn. All plowers must have a valid license in their possession when reporting to plow. Licenses could be spot checked by Highway Surveyor. Those without a valid license in their possession will not be allowed to plow.

3.0 ALCOHOL AND CONTROLLED SUBSTANCES

The use of alcohol and/or controlled substances by the contractor/operators during the snow plowing operations is strictly forbidden. Any contractor/operator suspected of such use by the Town supervisor will be relieved of duty immediately and may result in termination of contract with the Town.

4.0 CONTRACTOR CONDUCT

Courtesy and safety will be the rule of the road at all times. Abusive language to the public will not be tolerated. If there is a conflict or situation, please call the Highway Department or the Halifax Police Department.

5.0 SNOW PLOWING

All vehicles will report with full tanks of gas. Equipment will arrive ready for operating and no compensation will be provided for time involved in the attachment or detachment of plowing equipment.

Each vehicle will be provided with a street listing of the designated route assigned. Each driver must acquaint him/herself with the route and check for new streets and/or deleted streets from the prior year's route.

All vehicles shall plow only the route assigned to them. If any plow route needs assistance, please notify the Highway Barn office.

Contract plowers while actively on the clock plowing for the Town, cannot be hired, or requested to clear private driveways or walkways; in an emergency situation the Highway Surveyor has the authority to use their discretion regarding this matter.

The vehicle, after signing in, will go immediately to the assigned route and commence plowing in the following manner:

- 5.1 Open every street on the route with at least one pass in each direction.
- 5.2 At intersections, where possible, plowing should be to the right to minimize the snow remaining in the intersection.
- 5.3 All contractors/individual plowers will be expected to remain on their routes for the duration of the plowing segment.
- 5.4 Avoid piling snow at intersections.
- 5.5 In cul-de-sacs, do not block driveways, mailboxes, or basins.

6.0 SIGN OUT

Plowers are to return to the Highway Barn after their route has been cleared. They may be asked to assist on another route or stand by until they are released by the Highway Surveyor or someone he authorizes to do so.

7.0 DOWN TIME REPAIRS

Each contractor/individual must make provisions for emergency repairs to the vehicle as necessary. If the vehicle is down for repairs, time will be deducted for time lost if it is for more than one hour.

If a vehicle must leave the route for repairs, the Highway Department shall be notified as soon as possible. Routes have been assigned two vehicles and each operator must check with other before leaving the route.



HALIFAX HIGHWAY & CEMETERY
R. Steven Hayward
Highway Surveyor

60 Hemlock Lane
Halifax, MA 02338
Phone: 781-293-1760
Facsimile: 781-293-1762

CERTIFICATE OF NON-COLLUSION

PURSUANT TO M.G.L. , CHAPTER 30, SECTION 39 M:

The undersigned certifies under penalties or perjury that this bid is all respects bona fide, fair and made without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corruption, union, committee, club or other organization, entity, or group of individuals.

NAME & TITLE OF PERSON SIGNING GENERAL BID OR PROPOSAL

NAME OF BUSINESS

DATE



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CERTIFICATE OF WORKMENS COMPENSATION INSURANCE EXEMPTION

The undersigned certifies under the under penalties of perjury that h/she is a self-employed Independent Contractor and is not required by law to carry Workmen's Compensation Insurance.

SIGNATURE OF INDEPENDENT CONTRACTOR

DATE



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TAX COMPLIANCE CERTIFICATE

Pursuant to M.G.L. c. 62C, §49A, I certify under the penalties of perjury that, to the best of my knowledge and belief, I am in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

Signature of person submitting bid

Name of Business

Telephone Number

Date

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.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	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. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: 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. <input type="checkbox"/> Other (see instructions) ► _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

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.

Note: 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.

Social security number									
				-					
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ►	Date ►
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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.

APPLICATION FOR SNOW PLOWING

PLEASE PRINT OR TYPE

NAME: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SS# OR FED ID#: _____

TELEPHONE DAY: _____ TELEPHONE NIGHT: _____

CELL PHONE: _____

VEHICLE

MAKE: _____ MODEL: _____ YEAR: _____

GVW FROM DOOR OF TRUCK: _____

COLOR: _____ BLADE WIDTH: _____ BLADE HEIGHT: _____

REGISTRATION #: _____ STATE: _____ EXP DATE: _____

Attached to this application, please include the following.

- A copy of current vehicle registration
- A signed original contract
- A copy of driver's license for each driver
- A copy of the Certificate of Insurance listing "Town of Halifax" as a Certificate Holder
- A signed copy of Certificate of Non-Collusion
- A signed copy of Workmen's Compensation exemption or an Insurance Certificate for Workman's Compensation Insurance
- A completed and signed W-9
- A signed Tax Compliance Certification

I hereby submit the following price based on established rates:

RATE FOR VEHICLE IS \$ _____ PER HOUR

SIGNATURE: _____ DATE: _____

OWNER OPERATED: YES _____ NO: _____

TOWN OF HALIFAX – HIGHWAY DEPARTMENT
SNOW PLOWING AGREEMENT FOR HIRED EQUIPMENT SERVICES FOR THE WINTER SEASON

Contractor is herewith retained to supply equipment and personnel for snow removal services, and agrees to provide same upon the following terms and conditions:

- I. Contractor acknowledges that he/she is a self-employed Independent Contractor and is solely responsible for providing equipment and personnel for snow removal purposes. Maintenance, insurance and operation of equipment as well as payment, supervision and insurance or personnel shall be at the owner's sole expense and responsibility. Contractor must provide certificates or insurance showing proof of liability, personal injury, and property damage and workmen's compensation coverage (unless owner is the operator) to the Town of Halifax indicating that coverage includes "Contract snow plowing for the Town of Halifax".
- II. All hired equipment must be in good operating condition and must meet all rules, regulations, registration requirements and inspection requirements of the Commonwealth of Massachusetts. All vehicles must be equipped with approved 360 degree amber warning rotating or strobe lights.
- III. Contractor must provide a telephone number on a twenty-four hour basis and respond to calls for service promptly. Compensated time will commence at the time a contractor is called provided equipment arrives at the highway barn ready for operation within a half hour of the time of the call. If more than one half hour passes after the call, compensated times will commence only upon arrival of equipment.
- IV. Time card will be provided and operators must punch in on time clock located in the highway barn. Contractor must have a valid Massachusetts driver's license in his/her possession while driving for the Town of Halifax and have it available to show Highway Surveyor.
- V. Rules and regulations are attached and are incorporated in to this Agreement by reference. Said rules and regulations are to be observed by all contractors and their personnel.
- VI. A copy of the application for snow plowing is attached and is incorporated into this Agreement by reference. Compensation to the contractor will be according to the rate on this Application. Equipment for Contractors provides for plowing must be as stated in the Applications for snow plowing.
- VII. Town of Halifax, Highway Department reserves the right to terminate this Agreement at any time.
- VIII. The contractor agrees to accept the rate of \$_____ per hour as agreed as full and fair compensation.

CONTRACTORS NAME: _____ DATE: _____

ADDRESS: _____

SIGNATURE: _____ SS# OR TAX ID#: _____

HIGHWAY SURVEYOR APPROVAL: _____ DATE: _____