# Request for Proposals for PFAS Removal Treatment at Unity College

### General

Unity College (Owner) of Unity, Maine is requesting proposals for the removal of PFAS from their public drinking water supply wells.

The water supply at Unity College is sourced from several Public Water Systems (PWS) each with their own supply well, treatment system, and distribution infrastructure (see Appendix A for existing conditions). A summary of PWSs with PFAS detections is detailed in the table below.

PWS Name	PWSID#	Well Name	Initial PFAS Result	Confirmation PFAS Result
Unity College #642	ME0000642	Cottages	27.6-ng/L	
Unity College - #3	ME0110642	Unity 3	62.2-ng/L	
Unity College - Wood Hall	ME0300642	Wood Hall	29.3-ng/L	27.5-ng/L
Unity College - #900642	ME0900642	Performing Arts	50.3-ng/L	

The Cottages, Unity 3, Wood Hall, and Performing Arts wells all exceed the interim State drinking water standard of 20-ng/L for PFAS and treatment is required to return these supplies to compliance.

The Owner is therefore seeking proposals for the removal of PFAS from their Cottages, Unity 3, Wood Hall, and Performing Arts wells; treated water samples must report back at below the detection level of 2.0-ng/L.

With their proposal, Treatment Installers must include:

- A summary of treatment design for each well.
- A quote for PFAS treatment installation for each well. Quotes must include the total cost to
  design the treatment system, including obtaining review and stamp by a Maine licensed
  Professional Engineer, and install the treatment system, including labor and materials, internal
  plumbing modifications, electrical power installation (as needed for new equipment), follow up
  water quality sampling for PFAS, and any other costs associated to complete the work.
- A statement of schedule to render the materials and services quoted must also be provided with the proposal.

The Owner reserves the right to move forward with any or none of the individual well treatment proposals depending on funding availability. Please note, if funding is limited, the Owner plans to prioritize the system at Wood Hall.

If you are interest, please send your proposal to:

Christopher Bond Director of Facilities cbond@unity.edu

Proposals must be submitted no later than 4:00pm September 14, 2022. Failure to submit a proposal by September 9, 2022 may lead to disqualification for consideration of contract award.

Treatment Installers are encouraged to contact Mr. Bond for a site visit before submitting his/her quote. Questions about the existing facilities may be addressed to Mr. Bond at <a href="mailto:cbond@unity.edu">cbond@unity.edu</a> or 207-509-7179.

Disclaimer: This project is expected to be funded in part by a Maine Drinking Water State Revolving Fund (DWSRF) loan. Neither the State of Maine nor any of its departments, agencies, or employees will be party to the contract.

### **Proposal Considerations**

All new components of the treatment system that will come in contact with the water must be certified to meet NSF/ANSI Standard 61.

All plumbing components must meet the Reduction of Lead in Drinking Water Act (requirements and exemptions can be found at www.epa.gov/safewater).

No treatment bypasses are permissible.

Proposal must specify the estimated bed life (gallons treated) of the media installed, based on the provided design, before breakthrough and need for media replacement.

Following treatment installation, finished water PFAS samples must be collected, analyzed at a certified laboratory, and reported as measuring below the detection level of 2.0-ng/L

### American Iron and Steel (AIS) Requirements

The American Iron and Steel (AIS) provision requires DWSRF assistance recipients to use iron and steel products that are produced in the United States. Treatment Installer must provide a certification letter from the product manufacturer for all iron and steel products permanently incorporated into a project. A sample letter is available in Appendix B. For more details, exemptions, and waivers, please see: <a href="https://www.epa.gov/cwsrf/state-revolving-fund-american-iron-and-steel-ais-requirement">https://www.epa.gov/cwsrf/state-revolving-fund-american-iron-and-steel-ais-requirement</a> or contact Maine Drinking Water Program representative.

### **Davis-Bacon Wages**

The Davis-Bacon Act (DBA) was enacted by Congress on March 3, 1931, to assure local workers a fair wage and to provide local contractors a fair opportunity to compete for local federal government contracts. Contractors and subcontractors must pay laborers and mechanics employed directly upon the site of the work at least the locally prevailing wages (including fringe benefits), listed in the Davis-Bacon wage determination in the contract, for the work performed. Locally prevailing wage rates are determined by the US Department of Labor (USDOL). The wage determination for this project is included in Appendix C.

Treatment Installer and any subcontractors must provide certified payrolls to the Owner using Department of Labor form WH-347 (Appendix C).

EXEMPTION 1: If work is to be performed by an owner of a business (i.e., a plumber who owns their own business and is doing the work themselves with no assistance) they do not need to pay themselves the Davis-Bacon Rates and are not required to report their own payroll. The owner-operator must provide a signed Davis-Bacon Owner-Operator Exemption Certification, available in Appendix C.

EXEMPTION 2: If the total project cost (labor + materials) is less than \$2000, Davis-Bacon Wage Rates will not apply.

Upon award of contract, the treatment installer must promptly provide a completed DWP Change Application (Appendix D) and all design drawings submitted with the Change Application must be reviewed and stamped by a Professional Engineer licensed in the State of Maine, regardless of system cost (\$10,000.00 threshold does not apply).

Work at Wood Hall Well must be completed within 60-days of contract award.

Work at Unity 3, Cottages, and Performing Arts wells must be completed within 90-days of contract award.

An itemized invoice is required for payment.

# **APPENDIX A: EXISTING CONDITIONS**

# **Inspection Report: Site Directions and Diagrams**

PWS Name: Unity College Cottages. Inspector: Haig F. Brochu Date: 10-14-2015.

PWSID: ME0000642 District: DWP-7D PWS Type: NTNC

Inspection Type: Sanitary Survey Contact: Bruce Cook / DO

### **Source Detail**

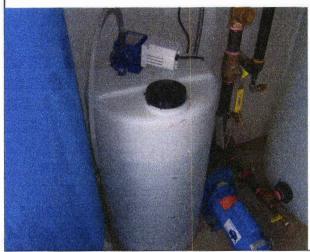


400-foot bedrock well with SS cover inside of locked concrete tile

### **System Schematic**

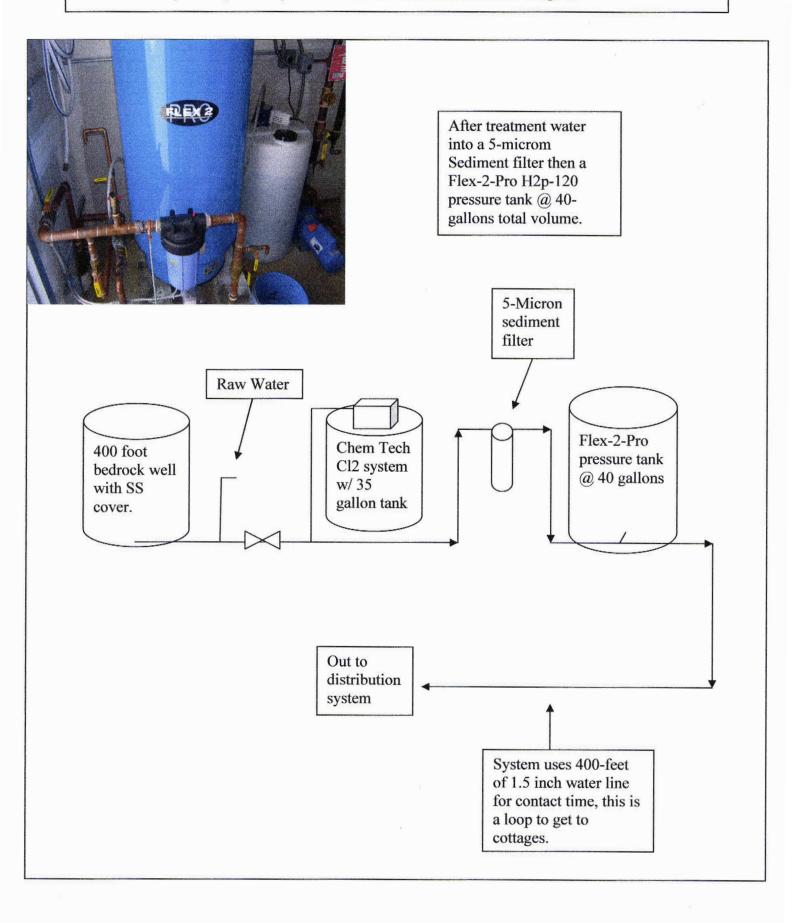


This picture shows proper Raw Water sample point prior to check and Cl2 injection after check.



Cl2 treatment is a Chem tech pump with a 35-gallon solution tank

# Unity College Cottages ME0000642 System Schematic Page 2.



# Sanitary Survey Inspection Report: Unity College - Unity #3 ME0110642

PWS Name: <u>Unity College – Unity #3</u> PWSID: <u>ME0110642</u> Inspector: <u>Darren Brann</u>

Date: 4/17/2019 District: <u>DWP-D</u> PWS Type: <u>NTNC</u> Inspection Type: <u>Sanitary Survey</u>

Contact: Silas Reynolds

**SOURCE:** Well HD 1:110642101. 280' bedrock well @ 30 GPM w/ a sanitary seal well cap. Located in a locked well tile near Unity #3 building walkway.



# Sanitary Survey Inspection Report: Unity College – Unity #3 ME0110642

**TREAT PT-1:** A sediment filter for iron removal and Pulsafeeder chlorine feed pump w/ 15-gallon day tank. Located in treatment room.







# Sanitary Survey Inspection Report: Unity College – Unity #3 ME0110642

**STORAGE-1:** A Well-X-Trol WX-449C pressure tank in treatment room.



**STORAGE-2:** Two contact tanks of unknown volume or make/model. Each tank appears to be in the 300-500-gallon range for volume.

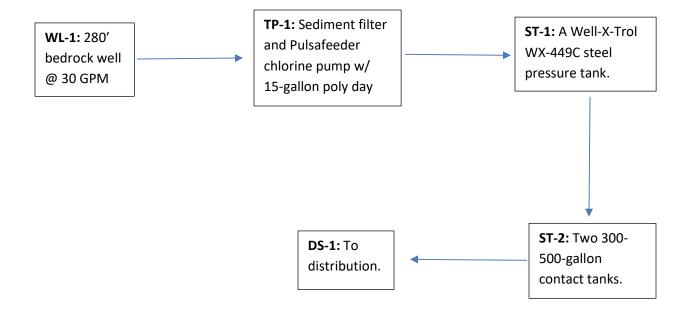


# Sanitary Survey Inspection Report: Unity College – Unity #3 ME0110642

Routine bacteria sampling site: Unity #3 common sink.



### **SYSTEM SCHEMATIC**



PWS Name: <u>Unity College – Wood Hall</u> PWSID: <u>ME0300642</u> Inspector: <u>Darren Brann</u>

Date: <u>4/17/2019</u> District: <u>DWP-D</u> PWS Type: <u>NTNC</u> Inspection Type: <u>Sanitary Survey</u>

**Contact:** Silas Reynolds

**SOURCE:** Well HD 1:300642101. 147' bedrock well @ 30 GPM w/ a sanitary seal well cap. Located in a locked well tile near Wood Hall parking lot. Well cap was loose, and conduit not sealed at time of the inspection. System immediately corrected deficiencies.



**TREAT PT-1:** A Pulsafeeder chlorine feed pump w/ 50-gallon day tank. Injection point is before ST-1. Located in treatment room.



**STORAGE-1:** A Goulds V140 steel pressure tank.



**STORAGE-2:** Four 300-gallon poly storage tanks. Tanks are used for chlorination contact time.



5 hp Baldor booster pump



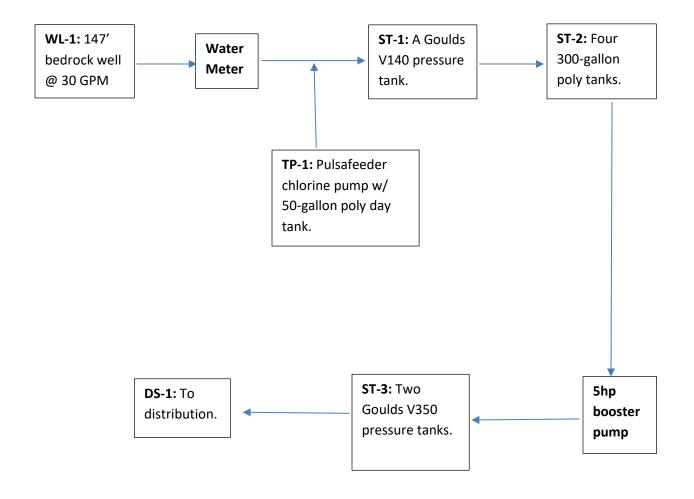
**STORAGE-3:** Two Goulds V350 steel pressure tanks



Routine bacteria sampling site: East View common sink.



### **SYSTEM SCHEMATIC**



# **Inspection Report: Site Directions and Diagrams**

PWS Name: Unity Center for the Arts. Inspector: Haig F. Brochu Date:10-17-2017.

PWSID: ME0094924

District: DWP-D

**PWS Type:** Transient

Inspection Type: Sanitary Survey

Contact: Silas Reynolds

## Source Detail



Well HD # 1 is a 250foot bedrock well with SS cover all tight.

### **System Schematic**

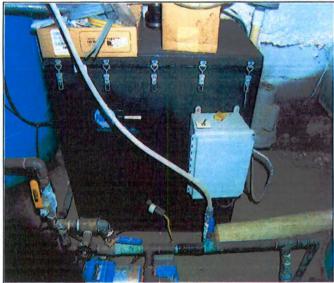


New Raw Water sample point installed same afternoon as SS by system.



From well to Storage 1 are 2 pressure tanks a Well X Trol WX-250 and a State Pump Mate SPMD 86,
They have a Volume of 12 + 26 = 38 gal.

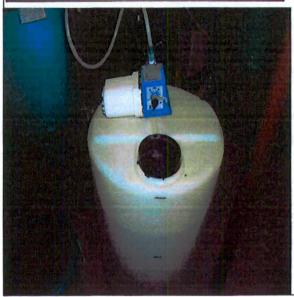
## Unity Center for the Arts ME0094924 System Schematic Page 2.



From Storage 1 to Treatment 1 first is an Air Raider air stripper which removes Sulfer Dixoide, Taste and Order control. Injection Point in Picture is after this unit, Cl2 injection.

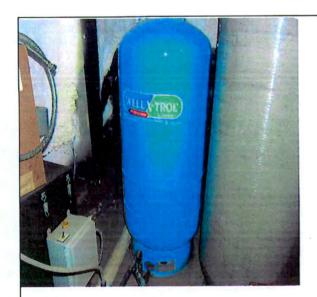


Water is picked up from air stripper by a Goulds 1 Hp Booster pump.



Next water is Chlorinated this is a Chem-Tech pump with a 30 gallon solution tank. Injection point is in front of air stripper.

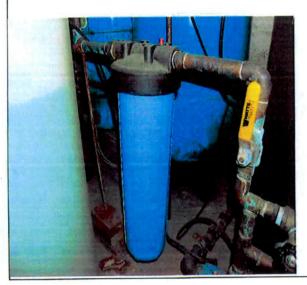
# Unity Center for the Arts, ME0094924 System Schematic Page 3.



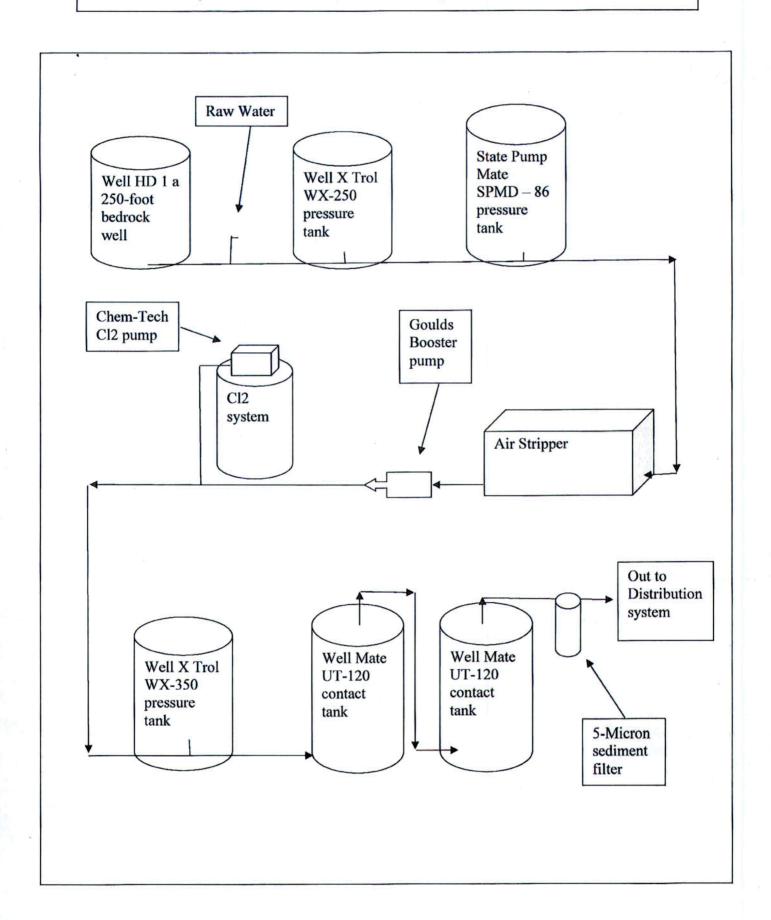
After Treatment water into Storage 2 a Well X Trol WX-350 pressure tank it has a Volume of 40-gallons.



Storage 3 are 2 Well Mate UT- 120 contact tanks with a total volume of 240 gallons.



Last is a 5-micron sediment filter then finished water out to distribution.



# **APPENDIX B: AIS MATERIALS**



# From the "Consolidated Appropriations Act, 2014"

H.R. 3547 (PL113-76, enacted 1/17/2014)

### USE OF AMERICAN IRON AND STEEL

"SEC. 436. (a)(1) None of the funds made available by a State water pollution control revolving fund as authorized by title VI of the Federal Water Pollution Control Act (33 U.S.C. 1381 et seq.) or made available by a drinking water treatment revolving loan fund as authorized by section 1452 of the Safe Drinking Water Act (42 U.S.C. 300j–12) shall be used for a project for the construction, alteration, maintenance, or repair of a public water system or treatment works unless all of the iron and steel products used in the project are produced in the United States.

- (2) In this section, the term "iron and steel products" means the following products made primarily of iron or steel: lined or unlined pipes and fittings, manhole covers and other municipal castings, hydrants, tanks, flanges, pipe clamps and restraints, valves, structural steel, reinforced precast concrete, and construction materials.
- (b) Subsection (a) shall not apply in any case or category of cases in which the Administrator of the Environmental Protection Agency (in this section referred to as the "Administrator") finds that—
  - (1) applying subsection (a) would be inconsistent with the public interest;
- (2) iron and steel products are not produced in the United States in sufficient and reasonably available quantities and of a satisfactory quality; or
- (3) inclusion of iron and steel products produced in the United States will increase the cost of the overall project by more than 25 percent.
- (c) If the Administrator receives a request for a waiver under this section, the Administrator shall make available to the public on an informal basis a copy of the request and information available to the Administrator concerning the request, and shall allow for informal public input on the request for at least 15 days prior to making a finding based on the request. The Administrator shall make the request and accompanying information available by electronic means, including on the official public Internet Web site of the Environmental Protection Agency.
- (d) This section shall be applied in a manner consistent with United States obligations under international agreements.
- (e) The Administrator may retain up to 0.25 percent of the funds appropriated in this Act for the Clean and Drinking Water State Revolving Funds for carrying out the provisions described in subsection (a)(1) for management and oversight of the requirements of this section.
- (f) This section does not apply with respect to a project if a State agency approves the engineering plans and specifications for the project, in that agency's capacity to approve such plans and specifications prior to a project requesting bids, prior to the date of the enactment of this Act."



# CERTIFICATION BY THE OWNER OF COMPLIANCE WITH THE USE OF AMERICAN IRON AND STEEL LAW

enacted on 1/17/2014

(To be attached to each Utility Construction SRF requisition submitted for payment)

We, the Owner named,, having obtained funding from the St								
of Maine, State Revolving F	Fund (SRF), for the Utility C	Construction Project named						
	, hereby sub	mit to the SRF program, cer	tification					
from each contractor workir	ng on the Utility Construction	on Project that the use of Ar	nerican Iron					
and Steel in the construction	of the project complies wit	th the law, or that a waiver l	nas been					
obtained from the U.S. Envi	ronmental Protection Agend	cy. Thereby, it is to the bes	t of the					
Owner's knowledge that the	costs being requested with	this SRF requisition #	are in					
compliance with the Use of	American Iron and Steel La	ıw.						
Signature of Official	Printed name							

Attachment: Certification by Contractor



# CERTIFICATION BY CONTRACTOR OF COMPLIANCE WITH THE USE OF AMERICAN IRON AND STEEL LAW

enacted on 1/17/2014

(To be attached to each Utility Construction payment application)

We, the Prime Contractor and Subcontractors, as named below, hereby certify that the use of						
American iron and steel in the utility	construction of the Project name	ed				
	, being requ	ested in the Utility				
Construction payment application (or	invoice) # and dated	d, complies				
with the Use of American Iron and St	eel Law, or that a waiver been of	obtained from the U.S.				
Environmental Protection Agency.						
Prime Contractor Name:						
Signature of Official	Printed name	Date				
Subcontractor Name	Signature of Official	<u>Date</u>				

# Sample Step Manufacturer Certification

(Documentation must be provided on company letterhead)

Date			
Company N	Name		
Company A	Address		
City, State	Zip		
Subject:	American Iron a	nd Steel Step Manufacturer Certification	
	Project Name		_
(melting, be (manufactu the project	ending, coating, galviring or fabricating)	(company representative), certify that the vanizing, cutting, etc.) process for the following products and/or materials she with the American Iron and Steel require rograms.	nipped or provided for
Item, Produ	acts and/or Materials	<b>:</b> :	
1			
2			
3			
Such proce	ss took place at the	following location:	(address)
If any of th	e above compliance	statements change while providing mater	ial to this project we
will immed	liately notify the prin	me contractor and the engineer.	
Company r	epresentative	Signature	Date

# State Revolving Fund (SRF)

## American Iron and Steel - De Minimis Tracking Form

The EPA has issued a public interest waiver for De Minimis incidental components. An Owner wishing to use this waiver should consult with their contractor(s) to maintain an itemized list to track the components covered under De Minimis. The Owner may create their own format for the list or use this sample form.

NOTE: The De Minimis waiver is only applicable to the cost of materials for the entire project. Do not include other project costs (lanstallation costs, etc.) in the "Total Cost of Materials". The total cost of a material may be based on estimated, or if available, actu-  sosts.  "Undo used for de minimis incidental components cumulatively may comprise no more than a total of 5 percent of the total cost  the materials used in and incorporated into a project; the cost of an individual item may not exceed 1 percent of the total cost  materials used in and incorporated into a project.  Total Cost of Materials:    S% Limit:	Owner:			Loan #:				
Installation costs, etc.) in the "Total Cost of Materials". The total cost of a material may be based on estimated, or if available, actu- tosts.  "Undo used for de minimis incidental components cumulatively may comprise no more than a total of 5 percent of the total cost of the materials used in and incorporated into a project; the cost of an individual item may not exceed 1 percent of the total cost of materials used in and incorporated into a project.  Total Cost of Materials:    Total Cost of Materials:	Project Name:							
the materials used in and incorporated into a project; the cost of an individual item may not exceed 1 percent of the total cost of materials used in and incorporated into a project.  Total Cost of Materials:    S% Limit:   1% limit:	IOTE: The De Minimis waiver is only applicable to the cost of materials for the entire project. Do not include other project costs (labor, installation costs, etc.) in the "Total Cost of Materials". The total cost of a material may be based on estimated, or if available, actual osts.							
Manufacturer & Component Description  Part/Model # Quantity (if applicable)  Cost per Unit (if applicable)  Component's Total Cost  Total Cost  Attached  Invoice or recall the part of th	unds used for de minimis incidental components cumulatively may comprise no more than a total of 5 percent of the total cost of he materials used in and incorporated into a project; the cost of an individual item may not exceed 1 percent of the total cost of the naterials used in and incorporated into a project.							
Description  Part/Model # (if applicable) (if applicable)  Total Cost attached  It is applicable (if applicable)  It is applicable (if applica	Total Cost of Materials:		5% Limit:		1% limit:			
Completed by:  Name: Title:		Part/Model #	- 1			Invoice or receipt attached		
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Completed by:  Name: Title:								
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Company:  Name:  Title:	Use additional sheets as necessary							
Name: Title:	Completed by:							
	Company:							
	Name:			Title:				
Signature: Date:	Signature:			Date:				

# **APPENDIX C: AIS Documents**

Janet T. Mills Governor

Jeanne M. Lambrew, Ph.D. Commissioner



Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention
11 State House Station
286 Water Street
Augusta, Maine 04333-0011
Tel; (207) 287-8016; Fax (207) 287-9058
TTY: Dial 711 (Maine Relay)

## **DDavis-Bacon Owner-Operator Exemption Certification**

I,	, am the owner-operator of the bona fide business
(Owner Name Printed)	
	and have been contracted to perform labor on a
(Business Name)	
treatment works project located at	in the town of
	(Name of Public Water System)
, Maine. I d	certify that I own at least 20-percent equity interest in the
(Town)	
enterprise in which employed and am active	vely engaged in its management. I am thereby exempt from
Davis-Bacon Act prevailing wage rates per	Title 29 CFR 5.2(m). A copy of my business license will be
provided to the Maine Drinking Water Pro	gram if requested.
☐ I do not plan to have anyone else assist☐ I do plan to have others assist me with	me with the work. the work. They will be subject to Davis-Bacon Act prevailing
	. Certified payrolls will
	(Plumber, Electrician, Carpenter, etc.)
be provided to the Maine Drinking Water	Program to validate the prevailing wage rates are met.
Signature:	
Date:	
Federal Tay ID Number:	

### **U.S. Department of Labor**

### **PAYROLL**

Wage and Hour Division

### (For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTR	ACTOR							ADD	RES	S							OMB No. Expires: 0	:1235-0008 )7/31/2024
PAYROLL NO. FOR WEEK ENDING			PROJECT AND LOCATION PROJECT OR CONTRACT NO.															
(1)	(2) 9NO 8NO	(3)	ST.	(4) D	DAY AND	DATE	E	(5	)	(6)	(7)			DED	(8) DUCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	HOURS W	VORKED	EAC	H DAY	TOT HOU	AL JRS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

#### **Public Burden Statement**

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W.

Date	-		
I			
(Name of Signat	ory Party)	(Title	*)
do hereby state:			
(1) That I pay or supervise	the payment of the persons emplo	oyed by	
	(0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		on the
	(Contractor or Subcontractor)		
(Building or Wo		ring the payroll period	commencing on the
, -	•		
	,, and ending the		
	oject have been paid the full week ctly or indirectly to or on behalf of s		t no rebates have
			from the full
	(Contractor or Subcontractor)		
3 (29 C.F.R. Subtitle A), issued	ny person, other than permissible of by the Secretary of Labor under the tat. 357; 40 U.S.C. § 3145), and de	ne Copeland Act, as a	
correct and complete; that the vapplicable wage rates contained	wise under this contract required t wage rates for laborers or mechani d in any wage determination incorp r or mechanic conform with the wo	ics contained therein a orated into the contrac	are not less than the
program registered with a State	nployed in the above period are du apprenticeship agency recognized nent of Labor, or if no such recogni	d by the Bureau of App	prenticeship and

#### (4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

with the Bureau of Apprenticeship and Training, United States Department of Labor.

 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

### (b) WHERE FRINGE BENEFITS ARE PAID IN CASH

 Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

### (c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION				
REMARKS:					
NAME AND TITLE	SIGNATURE				
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR					

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

"General Decision Number: ME20220009 04/01/2022

Superseded General Decision Number: ME20210009

State: Maine

Construction Type: Building

County: Kennebec County in Maine.

BUILDING CONSTRUCTION PROJECTS (does not include single family homes or apartments up to and including 4 stories). Note: Contracts subject to the Davis-Bacon Act are generally required to pay at least the applicable minimum wage rate required under Executive Order 14026 or Executive Order 13658. Please note that these Executive Orders apply to covered contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but do not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60).

- Executive Order 14026 generally applies to the contract.
- . The contractor must pay all covered workers at least \$15.00 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in 2022.

If the contract was awarded on or between January 1, 2015 and January 29, 2022, and the contract is not renewed or extended on or after January 30, 2022:

- Executive Order 13658 generally applies to the contract.
- . The contractor must pay all covered workers at least \$11.25 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on that contract in 2022.

The applicable Executive Order minimum wage rate will be adjusted annually. If this contract is covered by one of the Executive Orders and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must still submit a conformance request.

Additional information on contractor requirements and worker protections under the Executive Orders is available at https://www.dol.gov/agencies/whd/government-contracts.

Modification Number Publication Date 0 01/07/2022 1 02/25/2022 2 04/01/2022

BRMA0003-013 05/01/2020

	Rates	Fringes
BRICKLAYER		28.02
* IRON0007-034 03/16/2022		
	Rates	Fringes
IRONWORKER (ORNAMENTAL AND REINFORCING)		24.04
LAB00327-003 12/01/2020		
	Rates	Fringes
LABORER: Common or General (Industrial Work Only)		18.47
* SUME2014-018 01/31/2017		
	Rates	Fringes
CARPENTER, Includes Drywall Hanging, and Metal Stud Installation	\$ 19.42	11.52
CEMENT MASON/CONCRETE FINISHER		3.82
DRYWALL FINISHER/TAPER		2.87
ELECTRICIAN		9.57
ELEVATOR MECHANIC		24.95
IRONWORKER, STRUCTURAL	\$ 18.84	1.81
LABORER: Common or General	\$ 15.49	7.07
LABORER: Mason Tender - Brick	\$ 18.33	2.01
OPERATOR:		
Backhoe/Excavator/Trackhoe	\$ 20.42	3.12
OPERATOR: Crane	\$ 23.98	7.46
PAINTER (Brush and Roller)	\$ 15.86	2.66
PLUMBER, Includes HVAC Pipe Installation	\$ 20.08	3.70
SHEET METAL WORKER, Includes HVAC Duct Installation	\$ 16.97	1.92
TRUCK DRIVER: Dump Truck	\$ 14.79 **	2.53
WELDERS - Receive rate prescri operation to which welding is		rforming

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<sup>\*\*</sup> Workers in this classification may be entitled to a higher

minimum wage under Executive Order 14026 (\$15.00) or 13658 (\$11.25). Please see the Note at the top of the wage determination for more information.

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at

https://www.dol.gov/agencies/whd/government-contracts.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

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The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of ""identifiers"" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

Union Rate Identifiers

A four letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than ""SU"" or ""UAVG"" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing this classification and rate.

Survey Rate Identifiers

Classifications listed under the ""SU"" identifier indicate that no one rate prevailed for this classification in the survey and

the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

Survey wage rates are not updated and remain in effect until a new survey is conducted.

Union Average Rate Identifiers

Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

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### WAGE DETERMINATION APPEALS PROCESS

- 1.) Has there been an initial decision in the matter? This can be:
- \* an existing published wage determination
- \* a survey underlying a wage determination
- \* a Wage and Hour Division letter setting forth a position on a wage determination matter
- \* a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour National Office because National Office has responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations Wage and Hour Division U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

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END OF GENERAL DECISIO"

# **APPENDIX D: DWP CHANGE APPLICATION**



Department of Health and Human Services Maine Center for Disease Control and Prevention 286 Water Street 11 State House Station Augusta, Maine 04333-0011 Tel.: (207) 287-8016; Fax: (207) 287-9058 TTY Users: Dial 711 (Maine Relay)

Tel. (207) 287-2070

Drinking Water Program

Fax (207) 287-4172

# **Drinking Water System Change Application**

The Maine Rules Relating to Drinking Water state that "No new construction, addition, or alteration involving the source, treatment, or storage of water in any system shall be commenced until the plans and specifications have been submitted to and approved in writing by the Department (DHHS), unless such construction, addition, or alteration is exempted... [for more detail see the Maine Rules Relating to Drinking Water, Section 3.C.1. at <a href="https://www.medwp.com">www.medwp.com</a>]

In order for the Drinking Water Program (DWP) to review a water system change proposal, pertinent information must be made available to properly review the request. To avoid numerous individual requests for information, this application was created to request all necessary information at once.

When requesting review and approval of water system change, please complete this application and provide applicable information as requested. Not all questions on this application will apply to your project. If a question or request for information is not applicable to the project being reviewed, simply note this on the application.

Large scale projects for which plans and specifications have been prepared by an engineering firm (standpipes/reservoirs, entire treatment plant construction/modification, pump/booster station designs) may submit the prepared plans and specifications in place of the Drinking Water System Change Application. The proposal must include a reason for the project, the estimated project schedule, and a statement by the system's Primary Operator acknowledging approval of the proposed plan.

Note: This application is not intended for Drinking Water State Revolving Fund (DWSRF) projects. For DWSRF projects, submit project plans and specs to the DWP Project Manager for that project. For questions on this, contact Nathan Saunders at 287-5685 or Nathan.Saunders@Maine.gov.

### Completed applications can be mailed to:

Maine Drinking Water Program Station #11 Augusta, Maine 04333.

An electronic copy may also be emailed to your Public Water System Inspector.

If you have questions, please call 207-287-2070.

Please note that the Drinking Water Program has 30 days to review your application and provide approval. Submit your application as soon as possible to prevent delaying your anticipated start date. No changes can be made to the water system before written approval is received from the DWP.

# **Drinking Water System Change Application**

Date:	PWSID# (if known):
Public	PWSID# (if known):c Water System (PWS) Name:
Addre	ess:
PWS	Contact Name:Phone:
	t-iiidii.
Addre	on Completing this form:Phone:Phone:
, taare	(ii dinoront nom i vvo dadroco).
	e-mail:
DWP	e-mail:  PWS Inspector**:  not filled in by the applicant, DWP please fill in this name)
(** if	not filled in by the applicant, DWP please fill in this name)
All Pı	rojects
1.	Provide a brief description of the project and explain why this change is being made.
2.	Was this change required by the DWP (MCL exceedance) or is it being made voluntarily?
3.	Provide a diagram of the existing system that shows the majors pieces of equipment (e.g., source, storage, existing treatment, sample taps, other major appurtenances) as well as how the proposed treatment will be integrated. See example on final page of this application.
	Diagram Provided
4.	Provide an engineer or designer's report if available.
	Report Provided
5.	Who is making the request for the change (PWS Owner, Engineer working for the owner, Treatment Installer, other)?
6.	What is the intended schedule for the change? When do you plan to start/ when do you expect to be finished? Do you have any deadlines that need to be met?
7.	For treatment related projects include raw water quality data (e.g., pH, concentration of contaminant, concentration of competing or interfering contaminants, speciation results, etc.) Data should be recent and from an acceptable source (a Maine certified laboratory).
	Water Quality Data Provided
8.	For treatment projects costing \$10,000 or more, plans stamped by a Maine Licensed Professional

Engineer-See Maine P.E. Law. Projects submitted without a Professional Engineer stamp must include a cost estimate for the entire project to document the exemption for the Professional

SOP ID #: DWP0227

	Professional Engineer stamp  Cost Estimate Providence of the cost	for projects exceeding	•	rater Systems require a
9.	Project Stamped by Provide validation (a written slicensed plumber when requined Necessary Qualifications of available on-line at			

### Anion Exchange / Cation Exchange/ Adsorptive Media

- 1. What is the purpose of the treatment?
- 2. Identify the specific type(s) of media (e.g., Purolite A300E, ArsenXnp, etc.).
- 3. Specify the number of treatment vessels (if greater than one unit, describe the configuration (e.g., in series, parallel, twin-alternating, etc.).
- 4. What is the size (volume) of each vessel?
- 5. Describe backwash or regeneration processes that will occur (*N/A for non-backwashing Adsorptive Media*)
  - What is the purpose? (e.g., regenerate media, remove fines, to remove channeling, etc.)
  - What is the factor controlling backwash/regeneration? (e.g., specific time, volume of water). **Provide the specific controlling value** (e.g., unit regenerates automatically every 3,000 gallons per flow meter attached to head unit).
  - Describe the location of where spent backwash/regeneration water is being disposed (e.g., combined septic field, sanitary sewer, etc.) – note that the DEP and possibly the Radiation Control Program will be notified of all backwashing/regenerating water treatment systems with the potential that the proposed waste disposal method will be unacceptable. Applicant must show that a septic field is capable of handling the change in hydraulic load resulting from the new treatment backwash.

HHE-200 and Hydraulic Load Calculations Provided

- 6. Describe backflow prevention measures on all drains from treatment equipment.
- 7. Provide specifications from the supplier/manufacturer and NSF Standard certification for each of the following:

  Provided
  - a Media
  - b. Treatment Vessel
  - c. Treatment Control Head
  - d. Salt
  - e. Brine Tank (Food grade acceptable)

### **Aeration**

Aerat	ion
1.	What is the purpose of the treatment?
2.	Identify the make and model number of aerator.
3.	Describe the air inlet and vent design.
4.	Provide specifications from the supplier/manufacturer.  Specifications Provided
Ultrav	riolet (UV)
1.	What is the purpose of the treatment?
2.	What is the make/model number of the UV unit?
	Provide specifications from the supplier/manufacturer and NSF Standard 55 certification.  Specifications/NSF Certification Provided  Describe any bypasses.
The for	ollowing questions only pertain to UV installed for Disinfection (vs. oxidation for particulate val).
5.	How will it be ensured that the manufacturer's maximum rated flow and pressure are not exceeded.
6.	What provisions will be in place to prevent untreated water from entering the distribution system in the case of a power outage/UV unit failure?
7.	Describe how UV light intensity will be continuously monitored.

# Filtration (Cartridge)

1.	Why is the cartridge filter needed?		
2.	What size particle will be removed (micron designation of the filter)?		
3.	Has a pressure drop been estimated?		
4.	Will pressure gages be installed before and after the filter housing?		
5.	Provide specifications from the supplier/manufacturer and NSF Standard certification for each of the following: Provided		
	a. Filter Cartridge b. Filter Housing		
Filtration Maintenance/Media Change			
1.	What is the existing media and when was it last changed out?		
2.	Provide specifications for replacement media (including NSF certification).  Specifications/NSF Certification Provided		
3.	Will there be any change in filter operation? (Different flow rate, different backwash procedures, etc.)		
4.	How many filters do you plan to have offline at any one time? Do you anticipate this project will have any effect on your ability to meet demand?		
5.	Do you plan on doing any other maintenance on the filters while they are offline? Cleaning, sealing, replacing parts, etc. If yes, provide specs, NSF certifications, drawings, etc. for additional work as necessary.		

### Storage / Pressure Tanks

- 1. Will the new tank be replacing a tank currently installed or will it be installed in addition to existing storage?
- 2. What type of storage tank will be installed? (Bladder, hydropneumatic, atmospheric). Provide the make and model number, if applicable.
- 3. What is the volume of the storage tank?
- 4. Provide specifications for the tank from the supplier/manufacturer and NSF Standard 61 certification. (Food grade designation is acceptable in place of NSF 61 for synthetic tanks less than 15,000-gal in capacity which supplies less than 500 service connections.)

Specifications/NSF Certifications Provided

5. Will any other components be installed/applied as part of the tank installation? (Float switch, coatings/sealants for concrete tanks, etc.). Provide additional specifications from the supplier/manufacturer(s) and NSF Standard 61 certification.

### **Pumps**

- 1. Will the new pump be replacing a pump currently installed or will it be installed in addition to existing pumps?
- 2. What type of pump will be installed? (submersible well pump, booster pump, etc.). Provide the make and model number.
- 3. What is the capacity of the pump?
- 4. Provide specifications for the pump from the supplier/manufacturer and NSF Standard 61 certification.

Specifications/NSF Certification Provided

# **Applicant Signature:**

Signature of individual completing this form:	Date:
Signature of PWS's Primary Operator (PO):(or attach an e-mail from the operator showing the PO's required to have an operator, the PO's signature or e-malong with this application to the DWP.	'''
Name of DWP Engineer (Reviewer, filled in by DWP):	

## EXAMPLE: Diagram for a change application requesting to install a new GAC filter and upgraded UV unit.

Note how the drawing designates between existing equipment and new proposed components. Use of a legend prevents the drawing from becoming cluttered and difficult to read, while still allowing the Reviewer a detailed view of the treatment system. Diagrams must include all new and existing treatment, location of sample taps, any bypasses, storage, pumps, and any other components in contact with potable water.

