



Gulbrandsen Technologies Inc.

2 Main Street ■ P.O. Box 5523
Clinton, NJ 08809

☎ 908.735.5458

FAX 908.735.6971

WEB www.gulbrandsen.com

September 8, 2015

To,
Sabrina Schmidt
100 E Main St. Suite 100,
Pflugerville, TX 78660,

Re: " SEALED BID NUMBER 2015-7 Water and Wastewater Chemicals "

Dear Sabrina;

We at Gulbrandsen Technologies, Inc. are submitting the necessary Bid Information for the **"Water and Wastewater Chemicals "** for **City of Pflugerville, Texas.**

Product: **GPAC 2800**
Unit Price/ Pound: **\$0.1827/Pound of GPAC 2800 delivered**
Packaging: **45,000 Pounds minimum**
Payment Terms: **Net 30 days**

The documents included are:

1. Cover Letter
2. Bid Proposal
3. Specification (GPAC 2800)
4. MSDS (GPAC 2800)
5. NSF Certification
6. Insurance Certificate.

If any further clarifications are needed on any of the above, please feel free to contact me at the below mentioned number. We look forward to doing business with you in the future.

Regards,

Sheila Hagerman | Key Accounts Manager, Core Business
Gulbrandsen Technologies | 9401 Strang Rd. | LaPorte, TX 77571
phone: [281.467.6985](tel:281.467.6985) | email: shagerman@gulbrandsen.com
Customer Service: [908.735.5458](tel:908.735.5458)
www.gulbrandsen.com



where quality meets life

PFLUGERVILLE TEXAS

City of Pflugerville

Bid Number 2015-7
Bid Title Water and Wastewater Chemicals

Bid Start Date September 2, 2015
Bid End Date September 15, 2015 @ 2:00 PM

Bid Contact Wiley Webb
Utilities Superintendent
512-990-6400
wileyw@pflugervilletx.gov

Contract Duration 1 year beginning October 1, 2015

Contract Renewal Optional 2 Annual Renewals, upon agreement with the City of Pflugerville. (Any price increase associated with annual renewal must be justified by information related to the CPI index or other vendor cost increases.) Annual renewals are predicated on sufficient budgetary allocation by City Council for the renewal of the awarded contract. Any provision of this to this request for bids to the contrary notwithstanding, City Council shall be under no obligation to make such budgetary allocation.

Contract to begin upon acceptance from the City Council, the City of Pflugerville will issue a purchase order for the chemicals being purchased based on the bid pricing.

Standard Disclaimer The right is reserved to accept or reject all or part of the bid, and to accept the offer considered most advantageous to the city by item or total bid. The City of Pflugerville will award to the lowest responsible bidder who provides goods or services at the best value to the city.

Company Name Gulbrandsen Technologies Inc.

City of Pflugerville
Bid Number 2015-7
Water and Wastewater Chemical Bid

Bid Information

1. Bid will be awarded per line item.
2. Supplier to deliver chemicals to, water treatment plant, wastewater treatment plant, and 2 different water well sites delivery addresses are on the bid sheets for each chemical.
3. Able to deliver within 48 hours of notification.
4. See bid sheet for estimated annual chemical usage.
5. Specification sheets for each chemical attached.
6. Certificate of insurance must be included with bid documents.(see attached example)
7. Completed W9 to be returned with bid.
8. City of Pflugerville terms and conditions.
9. Reference sheet.
10. Interlocal Cooperative Contracting.

All documents herein and attached are required to be Completed and returned with the response.

Company Name Gulbrandsen Technologies Inc.

City of Pflugerville
Bid Number: 2015-7
Water and Wastewater Chemical Bid

Tax ID No: 222-492-075

Legal Business Name: Gulbrandsen Technologies Inc.

Address: 2 Main Street Po Box 5523

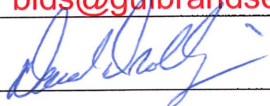
City State & Zip: Clinton , NJ 08809

Contact: Nikki Hughes Bid Administrator

Telephone: 908-736-5459

Business Entity Type: Manufacturing

Email Address: bids@gulbrandsen.com

Authorized Signature 

Print Name David D. Drollinger

“By the signature hereon affixed, the bidder hereby certifies that neither the bidder nor the entity represented by the bidder, or anyone acting for such entity has violated the antitrust laws of this State, codified in section 15.01 et seq., Texas Business and Commerce Code, or Federal Antitrust laws, nor communicated directly or indirectly, The bid made to any competitor or any other person engaged in such line of business.”

Original bids are due to the City of Pflugerville Attn: Sabrina Schmidt
100 E Main St. Suite 100, Pflugerville, TX 78660, or mailed to City of Pflugerville Attn:
Sabrina Schmidt, P.O. Box 589, Pflugerville, TX 78691.

Prior to 2 pm on September 15, 2015.

Envelopes must have bid number, opening date and time on the outside of the sealed envelope. Bidders name must also appear on the outside of the envelope.

City of Pflugerville
Bid No. 2015-7
Water and Wastewater Chemical Bid Sheet

1. Clarifloc C-6232 Polymer 3-275 gal totes Price per tote \$ _____
Estimated (275gal)-36 totes/year
Delivery address: Wastewater Treatment Plant
15500 Sun Light Near Way
Pflugerville, TX 78660.

2. Sodium Bisulfite Aqueous Solution 800 gal/load Price per gallon \$ _____
Estimated 1,600 gal/year
Delivery address: Water Treatment Plant,
17601 Weiss Ln.
Pflugerville, TX 78660.

- 2A. Sodium Bisulfite Aqueous Solution 800-1000 gal/load Price per gallon \$ _____
Estimated 25,000 gal/year
Delivery address: Wastewater Treatment Plant
15500 Sun Light Near Way
Pflugerville, TX 78660.

3. Aluminum Sulfate, Technical Grade 4,500-5,000 gal/load Price per gallon \$ _____
Estimated 110,000 gal/year
Delivery address: Wastewater Treatment Plant
15500 Sun Light Near Way,
Pflugerville, TX 78660.

4. Chlorine 4 one ton Cylinders/delivery Price per ton \$ _____
Estimated 40 tons/year
Delivery address: Wastewater Treatment Plant
15500 Sun Light Near Way,
Pflugerville, TX 78660.

- 4 A. Chlorine 150 lb. Cylinder Price per Cylinder \$ _____
Estimated 50 150lb. Cylinders/year
Delivery addresses: Water well # 6 1607 Glen Rose Chase,
& Water Well # 7, Chisholm Trail, Pflugerville, TX 78660.

Company Name Gulbrandsen Technologies Inc.

5. Liquid Ammonium Sulfate (LAS) 40,720 lbs. per load Price per lb. \$ _____
Estimated 8 loads/year
Delivery Address: Water Treatment Plant
17601 Weiss Ln,
Pflugerville, TX 78660.

A. Liquid Ammonium Sulfate (LAS) 55 gal/drum Price per drum \$ _____
Estimated 44 55gal/year
Delivery Addresses: Water Well # 6, 1607 Glen Rose Chase,
& Water Well #7, Chisholm Trail, Pflugerville, TX 78660.

6. Aluminum Chlorhydrate Solution (ACH)45,000 lbs. per load Price per lb. \$ \$0.1827/lb
Estimated 6 loads/year
Delivery Address: Water Treatment Plant,
17601 Weiss Ln, Pflugerville, TX 78660.

7. Salt 24 tons per load Price per ton \$ _____
Estimated 7 loads/year
Delivery Address: Water Treatment Plant,
17601 Weiss Ln, Pflugerville, TX 78660.

8. Sodium Hyperchlorite 10% 55 Gal. Drum Price per Drum \$ _____
Estimated 30 55ga drums/year
Delivery Address: Water Treatment Plant,
17601 Weiss Ln, Pflugerville, TX 78660.

*****PRICE per chemical above MUST include all delivery/fuel charges per chemical.**

Chemicals are to be delivered to the addresses specified above.
Deliveries will be between the hours 7am –4pm, Monday – Friday.

Company Name Gulbrandsen Technologies Inc.

CLARIFLOC C-6232 POLYMER

Specification Sheet

Typical Properties

Physical Form	Clear to Milky White Liquid
Cationicity	Low
Freezing Point	7 F. (-14 C.)
Flash Point	>200 F.(<93 C.)
Density	8.6-8.7

Manufacturing Specifications

Total Solids	41- 48%
Residual AcAm	<1000 ppm
Neat Viscosity	300 – 2000 cPs
Molecular Weight	Structured

SODIUM BISULFITE AQUEOUS SOLUTION

Specification Sheet

Typical Composition	CAS #'s	% Sodium
Sodium Bisulfite(NaHSO_3)	7631-90-5	38-44
Sodium Sulfite (Na_2SO_3)	7757-83-7	<1
Sodium Sulfate (Na_2SO_4)	7757-82-6	<4
Water	7732-18-5	60-65

Physical & Chemical Properties

Appearance and Odor	Clear yellow liquid, pungent odor
Boiling Point	103 ⁰ C/217 ⁰ F Estimated
Melting Point	No Data
Vapor Density (air=1):	>1.0 Estimate
Vapor Pressure:	32mm Hg Estimate
Solubility in Water	Dilutable
Specific Gravity ($\text{H}_2\text{O}=1$):	1.31 to 1.38
Ph:	3.5 to 5.0
Other(i.e. wt. Per gallon)	10.8 to 11.3 lb/gal

ALUMINUM SULFATE, TECHNICAL GRADE

Specification Sheet

	Min.	Max.
Aluminum Oxide (0%)	8.25	8.51
Alum Sulfate	48.53	50.06
Appearance	Clear	
Color	Amber,Colorless,Light Amber,Light Straw, Greenish Blue	
Iron	0	0.35
pH	1	3
Specific Gravity	1.323	1.3352

CHLORINE

Specification Sheet

Component	Basis	Specification
Purity	Vol. %	99.5 Min.
Moisture	ppm by wt.	50 Max.
Nonvolatile Matter (NVM)	ppm by wt.	30 Max.
Total Chloromethanes	ppm by wt.	175 Max.
Carbon Tetrachloride	ppm by wt.	100 Max.
Chloroform	ppm by wt.	75 Max.

Meets ANSI/AWWA B301-04 Test Requirements.

LAS

QUALITY CONTROL DEPARTMENT

SPECIFICATION SHEET

PRODUCT		
AQUAMINE		RM5115-1GBulk
SPECIFICATION	SPECIFICATION VERSION	SPECIFICATION DATE
	1.3000	
PRODUCT SPECIFICATION		
TEST	TEST ID	REQUIREMENTS
Ammonia as NH3	Ammonia	9.8 =< Value =< 10.8
Assay	Assay	38 =< Value =< 42
REMARKS		
DOT MARKINGS		
UN CODE	PACKAGING GROUP	CAS NUMBER
DOT NAME		
Not Regulated		
CONTAINS		
HAZARD TEXT		

Important

The information on the sheet is believed to be accurate but is not warranted to be so. Protective equipment, health effects, and other related safety measures are based on intended and anticipated product use. Recipients are advised to confirm in advance of need that the information is applicable and suitable to their circumstances.

Specifications
Aluminum Chlorhydrate Solution

Formula	$\text{Al}_2(\text{OH})_5\text{Cl} \cdot 2 \text{H}_2\text{O}$	
Nomenclature	Aluminum Chlorhydrate Solution (50%)	
CAS Number	12042-91-0	
CAS Index Name	Aluminum Hydroxychloride	
Grade	Technical	
Molecular Weight	210.5	
Description	Aluminum Chlorhydrate Solution is clear to slightly hazy in Appearance. It meets AWWA standard ANSI/AWWA B408-03 And has been certified by the National Sanitation Foundation (NSF) For the use in the treatment of drinking water at maximum dosage Of 250 mg/L.	
Specifications	Alumina, % Al_2O_3	23.0-24.0
	Chlorides, %Cl	7.90-8.40
	Basicity, %	82.5-84.5
	Specific Gravity (at 60°F):	1.330-1.350
	Appearance	Clear to slightly hazy solution. free of visible foreign matter or sediment.
	Turbidity,NTU	<50

Salt
Specification Sheet

Salt (food Grade)

Sodium Hypochlorite

QUALITY CONTROL DEPARTMENT

SPECIFICATION SHEET

PRODUCT	
10% Solution	AC6010-55KR01

SPECIFICATION	SPECIFICATION VERSION	SPECIFICATION DATE
	4.4000	08/15/2006

PRODUCT SPECIFICATION		
TEST	TEST ID	REQUIREMENTS
Available Chlorine (%)	Avail Cl2	9 =< Value =< 11.5
Excess Sodium Hydroxide (%)	Ex Sod Hydro	.1 =< Value =< 2
Iron	Iron	0 =< Value =< 1
Sodium Hypochlorite (%)	Sod Hypo	9.5 =< Value =< 12
Specific Gravity	Spec Gravity	1.13 =< Value =< 1.25

REMARKS
MUL 105 mg/L Certified to ANS/NSF Standard 60

DOT MARKINGS

UN CODE	PACKAGING GROUP	CAS NUMBER
1791	III	7681-52-9

DOT NAME
Hypochlorite solution

CONTAINS

HAZARD TEXT
Class 8

Important

The information on the sheet is believed to be accurate but is not warranted to be so. Protective equipment, health effects, and other related safety measures are based on intended and anticipated product use. Recipients are advised to confirm in advance of need that the information is applicable and suitable to their circumstances.

City of Pflugerville
Insurance Requirements

Bidder/Proposer performing work on City property or public right-of-way for the City of Pflugerville shall provide the City a certificate of insurance evidencing the coverage provisions identified herein. Bidder/Proposer shall provide the City evidence that all subcontractors performing work on the project have the same types and amounts of coverage as required herein or that the subcontractors are included under the contractor's policy. The City, at its own discretion, may require a certified copy of the policy.

All insurance companies and coverage must be authorized by the Texas Department of Insurance to transact business in the State of Texas and must be acceptable to the City of Pflugerville.

Listed below are the types and amounts of insurance required. The City reserves the right to amend or require additional types and amounts of coverage or provisions depending on the nature of the work.

Type of Insurance	Amount of Insurance	Provisions
Commercial General (Public) Liability to include coverage for: Premises/Operations Products/ Completed Operations Independent Contractors Personal Injury Contractual Liability	1,000,000 per occurrence, 2,000,000 general aggregate Or 2,000,000 combined single coverage limit	City to be listed as additional insured and provide 30- days notice of cancellation or material change in coverage City to be provided a waiver of subrogation City prefers that insurer be rated B+V1 or higher by A.M. Best or A or higher by Standard & Poors
Business Auto Liability	1,000,000 combined single limit	City to be provided a waiver of subrogation
Workers' Compensation & Employers Liability	Statutory Limits 1,000,000 each accident	City to be provided a waiver of subrogation

Questions regarding this insurance should be directed to the City of Pflugerville (512)990-6100 A contract will not be issued without evidence of Insurance. We will only accept the ACORD 25 or ISO certificate of insurance forms.

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

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; check only **one** of the following seven boxes:

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

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____

Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

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) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) 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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

			-				-				
--	--	--	---	--	--	--	---	--	--	--	--

or

Employer identification number

			-								
--	--	--	---	--	--	--	--	--	--	--	--

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/ffw9.

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?* on page 2.
- By signing the filled-out form, you:
- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - Certify that you are not subject to backup withholding, or
 - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

TERMS AND CONDITIONS
(Version 2/1/12)

By fulfilling a Purchase Order for goods or services, the contracting party identified below agrees that the below terms and conditions (as applicable to the purchase order) shall govern all agreements with the City unless otherwise agreed to by a specifically executed separate provision if permissible by law. Absent a specifically executed separate provision the below terms are BINDING and SUPERSEDE any and all other terms and/or conditions whether oral or written.

1. **Payment Provisions.** The City's payments under the Contract, including the time of payment and the payment of interest on overdue amounts, are subject to Chapter 2251, Texas Government Code. The City reserves the right to modify any amount due to contractor presented by invoice to the City if necessary to conform the amount to the terms of the contract.
2. **Multiyear Contracts.** If the City does not appropriate funds to make any payment for a fiscal year after the City's fiscal year in which the contract becomes effective and there are no proceeds available for payment from the sale of bonds or other debt instruments, then the Contract automatically terminates at the beginning of the first day of the successive fiscal year. (Section 5, Article XI, Texas Constitution). It is understood and agreed the City shall have the right to terminate the agreement at the end of any City fiscal year if the governing body of the City does not appropriate funds sufficient to continue the contract, as determined by the City's budget for the fiscal year in question. The City may execute such termination by giving contractor a written notice of termination at the end of its then current fiscal year.
3. **Best Value Determination.** All competitive bids or proposals received shall be evaluated based on the best value for the City. Best value shall be determined by any relevant criteria specifically listed in the solicitation and by considering all or part of the criteria listed below.
 - a. Bid price
 - b. Reputation of the bidder and of bidder's goods and services
 - c. The quality of the bidder's goods or services
 - d. The extent to which the goods or services meet the City's needs
 - e. Bidder's past relationship with the City - All vendors shall be evaluated on their past performance and prior dealings with the City to include, but not limited to, failure to meet specifications, poor quality, poor workmanship, and late delivery.
4. **Local Preference.** The City Council supports the local preference option for purchasing. In accordance with Chapter 271.9051 of the State of Texas Local Government Code, the City Council may choose to award a competitive bid to a bidder whose principal place of business is in the City limits, provided that this bid is within 5% of the lowest bid price received.
5. **No Ex-Parte Communications during Competitive Bidding Period.** To insure the proper and fair evaluation of a response, the City prohibits ex parte communication (e.g., unsolicited) initiated by the proposed contractor to a City official or employee evaluating or considering the responses prior to the time a formal decision has been made. Questions and other communication from vendors will be permissible until 5:00 pm on the day specified as the deadline for questions. Any communication between responder and the City after the deadline for questions will be initiated by the appropriate City official or employee in order to obtain information or clarification needed to develop a proper and accurate evaluation of the response. Ex parte communication may be grounds for disqualifying the offending responder from consideration or award of the solicitation then in evaluation, or any future solicitation.
6. **Abandonment or Default.** A contractor who abandons or defaults the work on the contract and causes the City to purchase the services elsewhere may be charged for any increased cost of goods, materials and/or services related thereto and shall be considered disqualified in any re-advertisement of the service and may not be considered in future bids for the same type of work for a period of three years for the same scope of work, goods or services.
7. **Disclosure of Litigation.** Each contractor shall include in its proposal a complete disclosure of any civil or criminal litigation or investigation pending which involves the respondent or which has occurred in the past in which the respondent has been judged guilty or liable by a competent court regardless of whether the Court Order or Judgment is final or on appeal.
8. **Cancellation.** The City reserves the right to cancel the contract without penalty by providing 30-days prior written notice to the contracting party. Termination under this paragraph shall not relieve the contractor of any obligation or liability that has occurred prior to cancellation. **NOTE: This contract is subject to cancellation, without penalty, at any time the City deems the vendor to be non-compliant with contractual obligations.**
9. **Annual Vendor Performance Review.** The City reserves the right to review the vendor's performance annually and to cancel all or part of the agreement (without penalty) or continue the contract through the next period.
10. **Compliance with other laws and certification of eligibility to contract.** Any offer to contract with the City shall be considered an executed certification that the contractor shall comply with all federal, state, and local laws, statutes, ordinances, rules and regulations, (as amended during the contracting period) and any orders and decrees of any court or administrative bodies or tribunals in any matter affecting the performance of the resulting agreement, including without limitation, immigration laws, workers' compensation laws, minimum and maximum salary and wage statutes and regulations, and licensing laws and regulations. **Additionally, such offer shall indicate that the contractor has fully read and understood the terms and conditions for eligibility to contract with the City pursuant to Chapter 38 of the City's Ordinances and certifies they are in compliance with those local requirements.** When requested, the contractor shall furnish the City with satisfactory proof of its compliance within 10 days or any contract with the City is void.
11. **Compliance with all Codes, Permitting and Licensing Requirements.** The successful contractor shall comply with all national, state and local standards, codes and ordinances as well as any other authorities that have jurisdiction pertaining to equipment and materials used and their application. None of the terms or provisions of the specification shall be construed as waiving any rules, regulations or requirements of these authorities. The successful bidder shall be responsible for obtaining all necessary permits, certificates and/or licenses to fulfill contractual obligations.
12. **Liability and Indemnity of City.** Any provision of the Contract is void and unenforceable if it: (1) limits or releases either party from liability that would exist by law in the absence of the provision; (2) creates liability for either party that would not exist by law in the absence of the provision; or (3) waives or limits either party's rights, defenses, remedies, or immunities that would exist by law in the absence of the provision. (Section 5, Article XI, Texas Constitution)
13. **Indemnity and Independent Contractor Status of Contractor.** Contractor shall indemnify, save harmless and defend the City, its officers, agents, and employees from and against any and all suits, actions, legal proceedings, claims, demands, damages, costs, expenses, attorney's fees and any and all other costs or fees (whether grounded in Constitutional law, Tort, Contract, or Property Law, or raised pursuant to local, state or federal statutory provision), arising out of the performance of the resulting agreement and/or arising out of a willful or negligent act or omission of the contractor, its officers, agents, and employees. It is understood and agreed that the contractor and any employee or sub-contractor of contractor shall not be considered an employee of the City. The contractor shall not be within protection or coverage of the City's workers' compensation insurance, health insurance, liability insurance or any other insurance that the City from time to time may have in force and effect. City specifically reserves the right to reject any and all contractor's employees, representatives or sub-contractors and/or their employees for any cause, should the presence of any such person on City property or their

interaction with City employees be found not in the best interest of the City, harassing, or is found to interfere with the effective and efficient operation of the City's workplace.

14. Liens. Contractor agrees to and shall indemnify and save harmless the City against any and all liens and encumbrances for all labor, goods and services which may be provided under the resulting agreement. At the City's request the contractor or subcontractors shall provide a proper release of all liens, or satisfactory evidence of freedom from liens shall be delivered to the City.

15. Confidentiality. Any provision in the Contract that attempts to prevent the City's disclosure of information that is subject to public disclosure under federal or Texas law or regulation, or court or administrative decision or ruling, is invalid. (Chapter 552, Texas Government Code)

16. Tax Exemption. The City is not liable to Vendor for any federal, state, or local taxes for which the City is not liable by law, including state and local sales and use taxes (Section 151.309 and Title 3, Texas Tax Code), and federal excise tax (Subtitle D of the Internal Revenue Code) for certain purchases. Accordingly, those taxes may not be added to any item. Texas limited sales tax exemption certificates will be furnished upon request. Vendors shall not charge for said taxes. If billed, the City will remit payment less sales tax.

17. Contractual Limitations Period. Any provision of the Contract that establishes a limitations period that does not run against the City by law or that is shorter than two years is void. (Sections 16.061 and 16.070, Texas Civil Practice and Remedies Code)

18. Sovereign Immunity. Any provision of the Contract that seeks to waive the City's immunity from suit and/or immunity from liability is void unless agreed to by specific acknowledgement of the provision within the contract.

19. Governing Law and Venue. Texas law governs this Contract and any lawsuit on this Contract must be filed in a court that has jurisdiction in Travis County, Texas.

REFERENCE SHEET

Please complete and return this form with the Solicitation response

Bid No: 2015-7
Water and Wastewater Chemicals

Bidders Name: Gulbrandsen Technologies Inc. Date September 9 2015

Provide the name, address, telephone and point of contact of at least three firms that have utilized the chemical for at least 2 years. References will be checked prior to award. Any negative responses received may result in disqualification of bid.

1. Company's Name Brushy Creek
Name of Contact Tami Nager
Title of Contact Purchasing.
E-Mail Address t.nagar@bcmud.org
Present Address 221 E. Main St.,
City, State, Zip Code Round Rock, TX 78664
Telephone Number (512) 255-7871 Fax Number ()

2. Company's Name Upper Trinity Regional Water
Name of Contact Charles Ellis
Title of Contact Purchasing
E-Mail Address cellis@utrwd.com
Present Address 900 North Kealy Street
City, State, Zip Code Lewisville, TX 75067
Telephone Number (972) 219-1228 Fax Number ()

3. Company's Name City of Bartlesville
Name of Contact Robert Jenkins
Title of Contact Superintendant
E-Mail Address rejinkens@cityofbartlesville.org
Present Address 401 S Johnstone Ave
City, State, Zip Code Bartlesville, OK 74003
Telephone Number (918) 338-4055 Fax Number ()

Failure to provide the required information with the solicitation response may automatically disqualify the response from consideration from award.



Interlocal Cooperative Contracting

Other governmental entities within the State of Texas may be extended the opportunity to purchase off of the City of Pflugerville's solicitation, with the consent and agreement of the successful vendor(s) and the City of Pflugerville. Such consent and agreement shall be conclusively inferred from lack of exception to this clause in the vendor's response. However, all parties indicate their understanding and all parties hereby expressly agree that the City of Pflugerville is not an agent of, partner to, or representative of those outside agencies or entities and that the City of Pflugerville is not obligated or liable for any action or debts that may arise out of such independently-negotiated "piggyback" procurements.

Vendor Name: Gulbrandsen Technologies Inc.

Agree

Disagree

Date: Sept 8 2015

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. GULBRANDSEN TECHNOLOGIES, INC.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member 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.) 2 MAIN STREET	Requester's name and address (optional)
	6 City, state, and ZIP code CLINTON, NJ 08809	
	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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number										
or										
Employer identification number										
2	2		-	2	4	9	2	0	7	5

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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 3/3/15
------------------	----------------------------	---------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/3/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER IOA Northeast, Inc. 1451 Route 34, Suite 101 Farmingdale, NJ 07727	CONTACT NAME: PHONE (A/C, No, Ext): (732) 751-2900 FAX (A/C, No): (732) 751-2929 E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED Gulbrandsen Technologies, Inc. 2 Main Street Clinton, NJ 08809	INSURER A : ACE Property and Casualty Insurance Co 20699	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X	X	APCG24914525-006	02/01/2014	02/01/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 POLLUTION \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			XOOG24914537-006	02/01/2014	02/01/2015	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Bid#: 2015-7 - Water and Wastewater Chemicals

Certificate Holder is Additional Insured with respect to General Liability when required by written contract per form #PC26849 04/09 for work performed for them by the named insured. Waiver of Subrogation with respect to General Liability per form #PC26741 03/09.

SEE ATTACHED ACORD 101

CERTIFICATE HOLDER CANCELLATION

City of Pflugerville 100 E. Main St., Suite 100 Pflugerville, TX	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--



ADDITIONAL REMARKS SCHEDULE

AGENCY IOA Northeast, Inc.		NAMED INSURED Gulbrandsen Technologies, Inc. 2 Main Street Clinton, NJ 08809	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:
Cancellation Clause: 90 Days Notice of Cancellation for everything except 15 Days Notice for Non-Payment of Premium - Form #PC26885 06/09

EARLIER NOTICE OF CANCELLATION PROVIDED BY US

Named Insured Gulbrandsen Technologies, Inc.			Endorsement Number 26
Policy Symbol APC	Policy Number G24914525-006	Policy Period 2/1/2015 to 2/1/2016	Effective Date of Endorsement 2/1/2015
Issued By (Name of Insurance Company) Illinois Union Insurance Company			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

ACE POLLUTION AND CASUALTY INSURANCE POLICY

SCHEDULE

Number of Days Notice: 90 Days for Other than Non Payment of Premium

Number of Days Notice: 15 Days Notice for Non Payment of Premium

For any statutorily permitted reason other than non payment of premium, the number of days required for notice of cancellation, as provided in the Cancellation Condition of Section **V** – Conditions, is increased to the number of days shown in the Schedule above.

All other terms and conditions of this policy remain unchanged.

Authorized Representative



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/08/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER MARSH USA INC. ATTN: RAFFLES 248-945-5650 (fax) ONE TOWNE SQUARE, SUITE 1100 SOUTHFIELD, MI 48076 00399 -00399-RAF-15/16	CONTACT NAME: PHONE (A/C. No. Ext): E-MAIL ADDRESS:	FAX (A/C. No):
	INSURER(S) AFFORDING COVERAGE	
INSURED GULBRANDSEN TECHNOLOGIES, INC. 2 MAIN STREET CLINTON, NJ 08809	INSURER A : Zurich American Insurance Company	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** CHI-006402728-01 **REVISION NUMBER:** 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		X	BAP4578621-05 - ALL OTHER BAP4578622-05 - PRIV. PASS.	04/01/2015 04/01/2015	04/01/2016 04/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC4578620-05	04/01/2015	04/01/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 WAIVER OF SUBROGATION APPLIES TO AUTO LIABILITY AND WORKERS' COMPENSATION IN FAVOR OF THE CERTIFICATE HOLDER WHERE REQUIRED BY WRITTEN CONTRACT. WORKERS' COMPENSATION DOES NOT APPLY TO MONOPOLISTIC STATES (ND, OH, WA AND WY), PUERTO RICO OR THE VIRGIN ISLANDS.

CERTIFICATE HOLDER

CANCELLATION

City of Pflugerville 100 E. Main St Suite 100 Pflugerville, TX 78660	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE of Marsh USA Inc. John C Hurley
---	---



GPAC 2800 PRODUCT SPECIFICATIONS

<u>PARAMETER</u>		<u>SPECIFICATION</u>
SPECIFIC GRAVITY (@ 20°C)		1.330 - 1.350
%Al	The logo consists of a circle containing the letters "NSF" in a bold, sans-serif font. Below the circle is a rectangular box containing the text "Certified to NSF/ANSI 60".	12.2 - 12.7
%Cl		7.9 - 8.4
Al:Cl Ratio		1.9:1 - 2.1:1
pH (30%w/w)		4.0 - 4.4
%BASICITY		82.5 - 84.3
APPEARANCE		CLEAR TO SLIGHTLY HAZY

Gulbrandsen Technologies, Inc. and its divisions, affiliates and subsidiaries ("Gulbrandsen") believe that the information contained in each material safety data sheet ("MSDS"), technical data sheet ("TDS"), product information brochure and/or information contained herein (including data and statements) is accurate as of the date of publication. The MSDSs, TDSs, product information brochures, and information contained herein are referred to collectively as the "Data Sheets". It is the responsibility of the user to obtain and use the most recent version of the Data Sheets. Each Data Sheet relates only to the specific product designated therein and may not be valid where such product is used in combination with any other materials or in any process. Further, since the conditions and methods of use of the product and information are beyond the control of Gulbrandsen, Gulbrandsen expressly disclaims any and all liability as to any consequential damages or results obtained or arising from any use of the products or the information contained in the Data Sheets. **NO WARRANTY OF MERCHANTABILITY, FITNESS FOR ANY PARTICULAR PURPOSE OR ANY OTHER WARRANTY, EXPRESS OR IMPLIED, IS MADE AS CONCERNS THE DATA SHEETS OR THE RELATED PRODUCTS.**

No statement made in the Data Sheets or by any employee or agent of Gulbrandsen shall be construed as a permission or recommendation for the use of any product in a manner that might infringe existing patents. No employee, agent, distributor, or sales representative is authorized to vary the terms of the above paragraph, to make any statements, representations, or warranties inconsistent with the above paragraph, or to provide any information that is at variance with the above paragraph. All materials related to the product are subject in all respects to the above paragraph and to the extent that they are inconsistent with the above paragraph, the terms of the above paragraph shall control.

Revised: 04/17/2008
Supersedes: 01/01/2003

GULBRANDSEN TECHNOLOGIES, INC.
2 Main Street • P.O. Box 5523 • Clinton, New Jersey 08809
908-735-5458 • Fax 908-735-6971



SAFETY DATA SHEET

GPAC 2800

Section 1. Identification

GHS product identifier : GPAC 2800

Other means of identification : Not available.

Relevant identified uses of the substance or mixture and uses advised against

Not available.

Supplier's details : Gulbrandsen Technologies, Inc.
2 Main Street
Clinton, NJ 08809
Phone: 908-735-5458

e-mail address of person responsible for this MSDS : SDSinfo@gulbrandsen.com

Emergency telephone number : CHEMTREC, U.S. : 1-800-424-9300 International: +1-703-527-3887
CCN# 9962

Section 2. Hazards identification

OSHA/HCS status : While this material is not considered hazardous by the OSHA Hazard Communication Standard (29 CFR 1910.1200), this SDS contains valuable information critical to the safe handling and proper use of the product. This SDS should be retained and available for employees and other users of this product.

Classification of the substance or mixture : Not classified.

GHS label elements

Signal word : No signal word.

Hazard statements : No known significant effects or critical hazards.

Precautionary statements

Prevention : Not applicable.

Response : Not applicable.

Storage : Not applicable.

Disposal : Not applicable.

Hazards not otherwise classified : None known.

Section 3. Composition/information on ingredients

Substance/mixture : Mixture
Other means of identification : Not available.

CAS number/other identifiers

CAS number : Not applicable.
Product code : Not available.

There are no ingredients present which, within the current knowledge of the supplier and in the concentrations applicable, are classified as hazardous to health or the environment and hence require reporting in this section.

Occupational exposure limits, if available, are listed in Section 8.

Section 4. First aid measures

Description of necessary first aid measures

Eye contact : Immediately flush eyes with plenty of water, occasionally lifting the upper and lower eyelids. Check for and remove any contact lenses. Get medical attention if irritation occurs.

Inhalation : Remove victim to fresh air and keep at rest in a position comfortable for breathing. Get medical attention if symptoms occur.

Skin contact : Flush contaminated skin with plenty of water. Get medical attention if symptoms occur.

Ingestion : Wash out mouth with water. Remove victim to fresh air and keep at rest in a position comfortable for breathing. If material has been swallowed and the exposed person is conscious, give small quantities of water to drink. Do not induce vomiting unless directed to do so by medical personnel. Get medical attention if symptoms occur.

Most important symptoms/effects, acute and delayed

Potential acute health effects

Eye contact : No known significant effects or critical hazards.
Inhalation : No known significant effects or critical hazards.
Skin contact : No known significant effects or critical hazards.
Ingestion : No known significant effects or critical hazards.

Over-exposure signs/symptoms

Eye contact : No known significant effects or critical hazards.
Inhalation : No known significant effects or critical hazards.
Skin contact : No known significant effects or critical hazards.
Ingestion : No known significant effects or critical hazards.

Indication of immediate medical attention and special treatment needed, if necessary

Notes to physician : Treat symptomatically. Contact poison treatment specialist immediately if large quantities have been ingested or inhaled.

Specific treatments : No specific treatment.

Protection of first-aiders : No action shall be taken involving any personal risk or without suitable training.

Section 4. First aid measures

See toxicological information (Section 11)

Section 5. Fire-fighting measures

Extinguishing media

Suitable extinguishing media : Use an extinguishing agent suitable for the surrounding fire.

Unsuitable extinguishing media : None known.

Specific hazards arising from the chemical : No specific fire or explosion hazard.

Hazardous thermal decomposition products : Decomposition products may include the following materials:
halogenated compounds
metal oxide/oxides

Special protective actions for fire-fighters : No special measures are required.

Special protective equipment for fire-fighters : Fire-fighters should wear appropriate protective equipment and self-contained breathing apparatus (SCBA) with a full face-piece operated in positive pressure mode.

Section 6. Accidental release measures

Personal precautions, protective equipment and emergency procedures

For non-emergency personnel : No action shall be taken involving any personal risk or without suitable training. Keep unnecessary and unprotected personnel from entering. Do not touch or walk through spilled material. Put on appropriate personal protective equipment.

For emergency responders : If specialized clothing is required to deal with the spillage, take note of any information in Section 8 on suitable and unsuitable materials. See also the information in "For non-emergency personnel".

Environmental precautions : Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers. Inform the relevant authorities if the product has caused environmental pollution (sewers, waterways, soil or air).

Methods and materials for containment and cleaning up

Spill : Stop leak if without risk. Move containers from spill area. Prevent entry into sewers, water courses, basements or confined areas. Wash spillages into an effluent treatment plant or proceed as follows. Contain and collect spillage with non-combustible, absorbent material e.g. sand, earth, vermiculite or diatomaceous earth and place in container for disposal according to local regulations (see Section 13). Dispose of via a licensed waste disposal contractor. Note: see Section 1 for emergency contact information and Section 13 for waste disposal.

Section 7. Handling and storage

Precautions for safe handling

- Protective measures** : Put on appropriate personal protective equipment (see Section 8).
- Advice on general occupational hygiene** : Eating, drinking and smoking should be prohibited in areas where this material is handled, stored and processed. Workers should wash hands and face before eating, drinking and smoking. See also Section 8 for additional information on hygiene measures.

- Conditions for safe storage, including any incompatibilities** : Store in accordance with local regulations. Store in original container protected from direct sunlight in a dry, cool and well-ventilated area, away from incompatible materials (see Section 10) and food and drink. Keep container tightly closed and sealed until ready for use. Containers that have been opened must be carefully resealed and kept upright to prevent leakage. Do not store in unlabeled containers. Use appropriate containment to avoid environmental contamination.

Section 8. Exposure controls/personal protection

Control parameters

Occupational exposure limits

None.

- Appropriate engineering controls** : Good general ventilation should be sufficient to control worker exposure to airborne contaminants.
- Environmental exposure controls** : Emissions from ventilation or work process equipment should be checked to ensure they comply with the requirements of environmental protection legislation.

Individual protection measures

- Hygiene measures** : Wash hands, forearms and face thoroughly after handling chemical products, before eating, smoking and using the lavatory and at the end of the working period. Appropriate techniques should be used to remove potentially contaminated clothing. Wash contaminated clothing before reusing. Ensure that eyewash stations and safety showers are close to the workstation location.
- Eye/face protection** : Safety eyewear complying with an approved standard should be used when a risk assessment indicates this is necessary to avoid exposure to liquid splashes, mists, gases or dusts. If contact is possible, the following protection should be worn, unless the assessment indicates a higher degree of protection: safety glasses with side-shields.
- Skin protection**
- Hand protection** : Chemical-resistant, impervious gloves complying with an approved standard should be worn at all times when handling chemical products if a risk assessment indicates this is necessary.
- Body protection** : Personal protective equipment for the body should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.
- Other skin protection** : Appropriate footwear and any additional skin protection measures should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.

Section 8. Exposure controls/personal protection

- Respiratory protection** : Use a properly fitted, air-purifying or supplied air respirator complying with an approved standard if a risk assessment indicates this is necessary. Respirator selection must be based on known or anticipated exposure levels, the hazards of the product and the safe working limits of the selected respirator.

Section 9. Physical and chemical properties

Appearance

- Physical state** : Liquid.
- Color** : Colorless to light yellow.
- Odor** : None
- Odor threshold** : Not available.
- pH** : 4 to 5
- Melting point** : -7°C (19.4°F)
- Boiling point** : 110°C (230°F)
- Flash point** : Not applicable.
- Burning time** : Not applicable.
- Burning rate** : Not applicable.
- Evaporation rate** : Not available.
- Flammability (solid, gas)** : Not available.
- Lower and upper explosive (flammable) limits** : Not available.
- Vapor pressure** : Not available.
- Vapor density** : 1 [Air = 1]
- Relative density** : 1.33 to 1.35
- Solubility** : Easily soluble in the following materials: cold water and hot water.
- Solubility in water** : Not available.
- Partition coefficient: n-octanol/water** : Not available.
- Auto-ignition temperature** : Not available.
- Decomposition temperature** : Not available.
- SADT** : Not available.
- Viscosity** : Not available.

Section 10. Stability and reactivity

- Reactivity** : No specific test data related to reactivity available for this product or its ingredients.
- Chemical stability** : The product is stable.
- Possibility of hazardous reactions** : Under normal conditions of storage and use, hazardous reactions will not occur.
- Conditions to avoid** : No specific data.

Section 10. Stability and reactivity

Incompatible materials : Reactive or incompatible with the following materials: oxidizing materials and metals.

Hazardous decomposition products : Under normal conditions of storage and use, hazardous decomposition products should not be produced.

Section 11. Toxicological information

Information on toxicological effects

Acute toxicity

There is no data available.

Irritation/Corrosion

Skin : There is no data available.

Eyes : There is no data available.

Respiratory : There is no data available.

Sensitization

Skin : There is no data available.

Respiratory : There is no data available.

Mutagenicity

There is no data available.

Carcinogenicity

There is no data available.

Reproductive toxicity

There is no data available.

Teratogenicity

There is no data available.

Specific target organ toxicity (single exposure)

There is no data available.

Specific target organ toxicity (repeated exposure)

There is no data available.

Aspiration hazard

There is no data available.

Information on the likely routes of exposure : Routes of entry anticipated: Oral, Dermal, Inhalation.

Potential acute health effects

Eye contact : No known significant effects or critical hazards.

Inhalation : No known significant effects or critical hazards.

Skin contact : No known significant effects or critical hazards.

Ingestion : No known significant effects or critical hazards.

Symptoms related to the physical, chemical and toxicological characteristics

Section 11. Toxicological information

- Eye contact** : No known significant effects or critical hazards.
Inhalation : No known significant effects or critical hazards.
Skin contact : No known significant effects or critical hazards.
Ingestion : No known significant effects or critical hazards.

Delayed and immediate effects and also chronic effects from short and long term exposure

Short term exposure

- Potential immediate effects** : No known significant effects or critical hazards.
Potential delayed effects : No known significant effects or critical hazards.

Long term exposure

- Potential immediate effects** : No known significant effects or critical hazards.
Potential delayed effects : No known significant effects or critical hazards.

Potential chronic health effects

- General** : No known significant effects or critical hazards.
Carcinogenicity : No known significant effects or critical hazards.
Mutagenicity : No known significant effects or critical hazards.
Teratogenicity : No known significant effects or critical hazards.
Developmental effects : No known significant effects or critical hazards.
Fertility effects : No known significant effects or critical hazards.

Numerical measures of toxicity

Acute toxicity estimates

There is no data available.

Section 12. Ecological information

Toxicity

Product/ingredient name	Result	Species	Exposure
Aluminium Chlorohydrate Solution	Chronic EC50 6999 mg/L Chronic LC50 3623 mg/L	Daphnia - Daphnia magna Fish - Fathead Minnow	- -

Persistence and degradability

There is no data available.

Bioaccumulative potential

There is no data available.

Mobility in soil

Section 12. Ecological information

Soil/water partition coefficient (K_{oc}) : -2.49

Other adverse effects : No known significant effects or critical hazards.

Section 13. Disposal considerations

Disposal methods : The generation of waste should be avoided or minimized wherever possible. Disposal of this product, solutions and any by-products should comply with the requirements of environmental protection and waste disposal legislation and any regional local authority requirements. Dispose of surplus and non-recyclable products via a licensed waste disposal contractor. Waste should not be disposed of untreated to the sewer unless fully compliant with the requirements of all authorities with jurisdiction. Waste packaging should be recycled. Incineration or landfill should only be considered when recycling is not feasible. This material and its container must be disposed of in a safe way. Empty containers or liners may retain some product residues. Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers.

Section 14. Transport information

	DOT Classification	IMDG	IATA
UN number	Not regulated.	Not regulated.	Not regulated.
UN proper shipping name	-	-	-
Transport hazard class(es)	-	-	-
Packing group	-	-	-
Environmental hazards	No.	No.	No.
Additional information	-	-	-

Special precautions for user : **Transport within user's premises:** always transport in closed containers that are upright and secure. Ensure that persons transporting the product know what to do in the event of an accident or spillage.

Transport in bulk according to Annex II of MARPOL 73/78 and the IBC Code : Not available.

Section 15. Regulatory information

U.S. Federal regulations : TSCA 8(a) CDR Exempt/Partial exemption: Not determined
United States inventory (TSCA 8b): All components are listed or exempted.

Clean Air Act Section 112 (b) Hazardous Air Pollutants (HAPs) : Not listed

Clean Air Act Section 602 Class I Substances : Not listed

Clean Air Act Section 602 Class II Substances : Not listed

DEA List I Chemicals (Precursor Chemicals) : Not listed

DEA List II Chemicals (Essential Chemicals) : Not listed

SARA 302/304

Composition/information on ingredients

No products were found.

SARA 304 RQ : Not applicable.

SARA 311/312

Classification : Not applicable.

Composition/information on ingredients

No products were found.

State regulations

Massachusetts : None of the components are listed.

New York : None of the components are listed.

New Jersey : None of the components are listed.

Pennsylvania : The following components are listed: Dialuminium Chloride Pentahydroxide

California Prop. 65

No products were found.

International regulations

International lists : **Australia inventory (AICS)**: All components are listed or exempted.
China inventory (IECSC): All components are listed or exempted.
Japan inventory: Not determined.
Korea inventory: All components are listed or exempted.
Malaysia Inventory (EHS Register): Not determined.
New Zealand Inventory of Chemicals (NZIoC): All components are listed or exempted.
Philippines inventory (PICCS): All components are listed or exempted.
Taiwan inventory (CSNN): Not determined.

Chemical Weapons Convention List Schedule I Chemicals : Not listed

Section 15. Regulatory information

**Chemical Weapons
Convention List Schedule
II Chemicals** : Not listed

**Chemical Weapons
Convention List Schedule
III Chemicals** : Not listed

Section 16. Other information

History

Date of issue mm/dd/yyyy : 06/15/2014
Version : 1
Revised Section(s) : Not applicable.
Prepared by : KMK Regulatory Services Inc.
Key to abbreviations : ATE = Acute Toxicity Estimate
BCF = Bioconcentration Factor
GHS = Globally Harmonized System of Classification and Labelling of Chemicals
IATA = International Air Transport Association
IBC = Intermediate Bulk Container
IMDG = International Maritime Dangerous Goods
LogPow = logarithm of the octanol/water partition coefficient
MARPOL 73/78 = International Convention for the Prevention of Pollution From Ships,
1973 as modified by the Protocol of 1978. ("Marpol" = marine pollution)
UN = United Nations

Notice to reader

To the best of our knowledge, the information contained herein is accurate. However, neither the above-named supplier, nor any of its subsidiaries, assumes any liability whatsoever for the accuracy or completeness of the information contained herein. Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although certain hazards are described herein, we cannot guarantee that these are the only hazards that exist.



KMK Regulatory Services

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The Public Health and Safety Organization

NSF Product and Service Listings

These NSF Official Listings are current as of **Tuesday, September 08, 2015** at 12:15 a.m. Eastern Time. Please contact [NSF International](#) to confirm the status of any Listing, report errors, or make suggestions.

Alert: NSF is concerned about fraudulent downloading and manipulation of website text. Always confirm this information by clicking on the below link for the most accurate information: <http://info.nsf.org/Certified/PwsChemicals/Listings.asp?CompanyName=Gulbrandsen+Technologies+Inc%2E&TradeName=GPAC+2800&PlantState=Texas+TX&>

NSF/ANSI 60 Drinking Water Treatment Chemicals - Health Effects

Gulbrandsen Technologies, Inc.

1 Riverside Way

Phillipsburg, NJ 08865

United States

908-454-1569

[Visit this company's website \(http://www.gulbrandsen.com\)](http://www.gulbrandsen.com)

Facility : La Porte, TX

Aluminum Chlorohydrate[AL]**Trade Designation**

GPAC 2800

Product Function

Coagulation & Flocculation

Max Use

250 mg/L

[AL] Based on an evaluation of health effects data, the level of aluminum in the finished drinking water shall not exceed 2 mg/L.

[CP] The finished drinking water shall be monitored to ensure that levels of copper do not exceed 1.3 mg/L.

Number of matching Manufacturers is 1

Number of matching Products is 1

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