Addendum #1

COLLUSION - Each bidder shall complete the Non Collusion Affidavit that is a part of this Invitation. Any act(s) of misrepresentation or collusion in connection with a bid shall be a basis to disqualify a bid submitted by the bidder responsible for said misrepresentation or collusion. In the event that such conduct is discovered after the execution of the Contract, the City may terminate the Contract without incurring any liability, penalty, damages or other loss.

BIDDER'S NON COLLUSION AFFIDAVIT

The undersigned bidder, having fully informed himself/itself regarding the accuracy of the statements made herein, certifies that:

(1)   the bid is genuine; it is not a collusive or sham bid;

(2)   the bidder developed the bid independently and submitted it without collusion with, and without any agreement, understanding, communication or planned common course of action with, any other person or entity designed to limit independent bidding or competition;

(3)   the bidder, its employees and agents have not communicated the contents of the bid to any person not an employee or agent of the bidder and will not communicate the bid to any such person prior to the official opening of the bid; and

(4)   no elected or appointed official or other officer or employee of the Town of Canton is directly or indirectly interested in the bidder's bid, or in the supplies, materials, equipment, work or labor to which it relates, or in any of the profits thereof.

The undersigned bidder further certifies that this statement is executed for the purpose of inducing the Town of Canton to consider its bid and make an award in accordance therewith.

_____   _____
Legal Name of Bidder   (signature)
                                     Bidder's Representative, Duly Authorized

                                     _____
                                     Name of Bidder's Authorized Representative

                                     _____
                                     Title of Bidder's Authorized Representative

                                     _____
                                     Date

Subscribed and sworn to before me this _____ day of _____, 20___.

                                     _____
                                     Notary Public
                                     My Commission Expires:

                         (Acknowledgement if a Corporation)

State of Connecticut   )
)   ss:
County of Hartford   )