

MIDDLE-SNAKE-TAMARAC RIVERS WATERSHED DISTRICT

2026 PROPOSAL FOR EQUIPMENT RENTAL

Sealed Quotes will be accepted until 1:00 P.M. on
Tuesday March 31, 2026



Prepared by: Middle-Snake-Tamarac Rivers Watershed District
453 North McKinley Street
P.O. Box 154
Warren, Minnesota 56762
www.mstrwd.org
218-745-4741

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QUOTING REQUIREMENTS

- 1) Quotes will be received by the Board of Managers of the Middle-Snake-Tamarac Rivers Watershed District at the District office at 453 N McKinley St in Warren, MN until **1:00 PM, March 31, 2026** and then at said office publicly opened and read.
- 2) Quotes are to be submitted on proposal forms furnished by the District. Proposal forms will be issued to prospective Quoters upon request. The Quoter may furnish their own form, but it must be in a similar format.
- 3) Each proposal must be delivered in a sealed envelope and be marked "**Quote For Equipment Rental**", addressed to MSTRWD PO Box 154 Warren, MN 56762.
- 4) The Quoter shall specify an hourly rate for each item of equipment, equipment specifications and any additional information they may want considered.
- 5) All Quotes will remain in effect through the 2026 construction season.
- 6) The right is reserved to reject any or all proposals, to waive defects and technicalities, or to advertise for new proposals.
- 7) The District may make such investigations as deemed necessary to determine the ability of the Quoter to perform the work and to award contracts to those other than the apparent low quoter.
- 8) Incomplete Quotes will not be considered.
- 9) **The Quoter is required to be registered with the Minnesota Department of Labor and Industry. Examples of construction contractors who must comply with the law are: individual independent contractors; businesses registered with the Secretary of State, such as limited liability companies, corporations and partnerships; and other types of business entities that perform building construction or improvement services. Additional information can be found on the Department of Labor and Industry website: www.dli.mn.gov.**

INSURANCE PROVISIONS

The contractor shall maintain the following minimum insurance coverage until the contract is completed:

WORKERS' COMPENSATION

As required by Minnesota law

COMPREHENSIVE GENERAL LIABILITY

Bodily Injury \$1,000,000 each occurrence

Property Damage \$1,000,000 each occurrence

VEHICLE LIABILITY

Bodily Injury \$1,000,000 each person

 \$1,000,000 each occurrence

Property Damage \$1,000,000 each occurrence

and shall provide to and maintain with the District current certificates of each policy. Please include a copy of your current certificate of liability insurance.

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input 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: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions)▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				
or				
Employer identification number				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

PROPOSAL FOR EQUIPMENT RENTAL

TO: Secretary, MIDDLE-SNAKE-TAMARAC RIVERS WATERSHED DISTRICT

PROPOSAL OF: _____
(Contractor Name)

(Address)

(Federal ID # or SS #) _____
(Phone)

(Fax) _____
(Cell)

(Email)

To furnish equipment and experienced, competent labor in accordance with the request for proposal for equipment rental for works under the jurisdiction of the Board of Managers of the Middle-Snake-Tamarac Rivers Watershed District during the 2026 construction season.

In accordance with the advertisement inviting proposals for equipment rentals: I hereby certify that I am the only person interested in this proposal as principle. I have examined the request for proposals and the specifications and conditions and understand that these will form the basis of a contract.

I agree to comply with provisions of MN Statute Chapter 181, Section 181.59 concerning discrimination for reasons of race, creed or color.

I propose to furnish the equipment listed on the attached pages for the unit prices shown thereon.

CONTRACTOR: _____

SIGNED BY: _____

DATE: _____

PROPOSAL FOR EQUIPMENT RENTAL

DOZERS

(Page 1)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Shoe Width	Base Width	Operating Weight

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Dozer equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Shoe Width	Base Width	Operating Weight

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Dozer equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
DOZERS
 (Page 2)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Shoe Width	Base Width	Operating Weight

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Dozer equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Shoe Width	Base Width	Operating Weight

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Dozer equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
EXCAVATORS
 (Page 1)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Bucket	Counter Weight (Lbs)	Operating Weight	Max Horizontal Reach

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Backhoe equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Bucket	Counter Weight (Lbs)	Operating Weight	Max Horizontal Reach

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Backhoe equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
EXCAVATORS
 (Page 2)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Bucket	Counter Weight (Lbs)	Operating Weight	Max Horizontal Reach

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Backhoe equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Track Length	Bucket	Counter Weight (Lbs)	Operating Weight	Max Horizontal Reach

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Backhoe equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
SCRAPERS
 (Page 1)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Bowl

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Scraper equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Bowl

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Scraper equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
SCRAPERS
 (Page 2)

I Propose to furnish the following equipment at the rate specified:

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Bowl

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Scraper equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

MAKE:		MODEL:	
YEAR:		Rental Rate (Per Hour):	

ENGINE	HP	Bowl

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Is this Scraper equipped with a laser? Y N
 If so, is this laser included in the rental rate? Y N

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL
MOWERS
 (Page 1)

I Propose to furnish the following equipment at the rate specified:

TRACTOR MAKE:		MODEL:	
YEAR:		FWD Y/N:	
MOWER MAKE		MOWER WIDTH:	
RENTAL RATE (Per Hour):			
RENTAL RATE (Per Pass, Per Mile):			

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Other Considerations: _____

TRACTOR MAKE:		MODEL:	
YEAR:		FWD Y/N:	
MOWER MAKE		MOWER WIDTH:	
RENTAL RATE (Per Hour):			
RENTAL RATE (Per Pass, Per Mile):			

SPECIAL OR OPTIONAL EQUIPMENT:	Rate:

Other Considerations: _____

PROPOSAL FOR EQUIPMENT RENTAL

OTHER

(May be attachments, backhoes, implements, skidsteers, tractors, etc.)

(Page 1)

I Propose to furnish the following equipment at the rate specified:

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

PROPOSAL FOR EQUIPMENT RENTAL
OTHER
 (Page 2)

I Propose to furnish the following equipment at the rate specified:

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

TYPE OF EQUIPMENT:			
MAKE:		MODEL:	
YEAR:		SERIAL #	
RENTAL RATE (Per Hour)			

RENTAL RATE CONTRACT

STATE OF MINNESOTA

MIDDLE-SNAKE-TAMARAC RIVERS WATERSHED DISTRICT
IN PORTIONS OF MARSHALL, POLK, KITTSON,
PENNINGTON, AND ROSEAU COUNTIES

Contract For: **2026 Equipment Rental Rates**

WHEREAS, the Contractor has offered to furnish equipment at the rates set forth in the proposal and said proposal appears to provide the lowest cost.

THIS AGREEMENT, made this _____ day of _____, 2026, by and between

_____ of _____,
(Owner/Agent) (Contactor name)

and

MIDDLE-SNAKE-TAMARAC RIVERS WATERSHED DISTRICT

By: President _____, Secretary _____
William Petersen Bradley Blawat

__6th__ day of __April__, 2026.