

THE CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE

30-30 THOMSON AVENUE LONG ISLAND CITY, NEW YORK 11101-3045 TELEPHONE (718) 391-1000 WEBSITE www.nyc.gov/buildnyc



VOLUME 1 OF 3

BID BOOKLET

FOR FURNISHING ALL LABOR AND MATERIALS NECESSARY AND REQUIRED FOR:

PROJECT ID: HWK1048B

RECONSTRUCTION OF FLUSHING AVENUE

FROM NAVY STREET TO WILLIAMSBURG STREET (BROOKLYN WATERFRONT GREENWA¥)

INCLUDING CURB AND SIDEWALK RECONSTRUCTION, SEWER, STREET LIGHTING, AND TRAFFIC SIGNAL WORK

> Together With All Work Incidental Thereto BOROUGH OF BROOKLYN CITY OF NEW YORK

FOR THE DEPARTMENT OF TRANSPORTATION PREPARED BY PARSONS

DECEMBER 30, 2014

Bid Opening <u>11:00 A.M. on</u> Location <u>1st Floor Bid Room, 30-30 Thomson Ave., Long Island City, N.Y. 11101</u>



1 5-106



Andrea Glick Deputy Commissioner Administration Dr. Feniosky Peña-Mora Commissioner

John Goddard Agency Chief Contracting Officer Lorraine Holley Deputy ACCO Competitive Sealed Bid Contracts

June 10, 2015

CERTIFIED MAIL - RETURN RECEIPT REQUEST

JLJ IV Enterprises Inc. 213-19 99th Avenue Queens Village, NY 11429

RE:

FMS ID: HWK1048B E-PIN: 85015B0081001 DDC PIN: 8502015HW0027C Reconstruction of Flushing Avenue from Navy Street to Williamsburg Street - Borough of Brooklyn NOTICE OF AWARD

Dear Contractor:

You are hereby awarded the above referenced contract based upon your bid in the amount of \$6,651,909.89 submitted at the bid opening on March 25, 2015. Within ten (10) days of your receipt of his notice of award, you are required to take the actions set forth in Paragraphs (1) through (3) below. For your convenience, attached please find a copy of Schedule A of the General Conditions to the Contract, which sets forth the types and amounts of insurance coverage required for this contract.

- (1) Execute four copies of the Agreement in the Contracts Unit, 30-30 Thomson Avenue, 1st Floor, Long Island City, New York (IDCNY Building). A Commissioner of Deeds will be available to witness and notarize your signature. The Agreement must be signed by an officer of the corporation or a partner of the firm.
- (2) Submit to the Contracts Unit four properly executed performance and payment bonds. If required for this contract, copies of performance and payment bonds are attached.
- (3) Submit to the Contracts Unit the following insurance documentation: (a) original certificate of insurance for general liability in the amount required by Schedule A, and (b) original certificates of insurance or other proof of coverage for workers' compensation and disability benefits, as required by New York State Law. The insurance documentation specified in this paragraph is required for registration of the contract with the Comptroller's Office.



On or before the contract commencement date, you are required to submit all other certificates of insurance and/or policies in the types and amounts required by Schedule A. Such certificates of Insurance and/or policies must be submitted to the Agency Chief Contracting Office, Attention: Risk Manager, Fourth Floor at the above indicated department address.

Your attention is directed to the section of the Information for Bidders entitled "Failure to Execute Contract". As indicated in this section, in the event you fail to execute the contract and furnish the required bonds within the (10) days of your receipt of this notice of award, your bid security will be retained by the City and you will be liable for the difference between your bid price and the price for which the contract is subsequently awarded, less the amount of the bid security retained.

Sincerely,

orrain Holley

Lorraine Holley

02/06/2015 11:12AM Ver 5.00.01 Contract PIN 8502015HW0027C Project ID HWK1048B

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

BID SCHEDULE

NOTE: (1) The Agency may reject a bid if it contains unbalanced bid prices. An unbalanced bid is considered to be one containing lump sum or unit items which do not reflect reasonable actual costs plus a reasonable proportionate share of the Bidder's anticipated profit, overhead costs, and other indirect costs, anticipated for the performance of the items in question.

- (2) The following bid prices on Unit Price Contracts are to be paid for the actual quantities of the several classes of work in the completed work or structure, and they cover the cost of all work, labor, material, tools, plant and appliances of every description necessary to complete the entire work, as specified, and the removal of all debris, temporary work and appliances.
- (3) PLEASE BE SURE A LEGIBLE BID IS ENTERED, IN INK, FOR EACH ITEM. Alterations must be initialed in ink by the bidder.
- (4) The Extended Amount entered in Column 5 shall be the product of the Estimated Quantity in Column 2 times the Unit Price Bid in Column 4.
- (5) Prospective bidders must examine the Bid Schedule carefully and, before bidding, must advise the Commissioner, in writing, if any pages are missing, and must request that such missing pages be furnished them. The pages of this Bid Schedule are numbered consecutively, as follows: B - 3 through B - 50

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Contract PIN

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<u>COL. 1</u> ITEM NUMBER (SEQUENCE NO.)	<u>Col. 2</u> Engineer's Estimate of Ouantities	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)	COL. 5 EXTENDED AMOUNTS (IN FIGURES)
(SEQUENCE NO.)	UTANITIES		DOLLARS CI	S DOLLARS CTS
4.02 AG (001)	25,976.0 s.y.	ASPHALTIC CONCRETE WEARING COURSE, 3" THICK	\$0	s_519.520.00
4.02 CB (002)	930.0 Tons	ASPHALTIC CONCRETE MIXTURE	\$COU @	\$ 186000 00
4.04 DD (003)	3,047.0 C.Y.	CONCRETE BASE FOR PAVEMENT, 9" THICK, CLASS A-40	s_175 ac	\$ 533.225 ~~
4.05 AX (004)	156.0 C.Y.	HIGH-EARLY STRENGTH REINFORCED CONCRETE PAVEMENT (BUS STOPS)	\$	\$ 31,200 as

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COL. 1 ITEM NUMBER (SEQUENCE NO.)	COL. 2 ENGINEER'S ESTIMATE OF OUANTITIES	COL. 3 CLASSIFICATIONS	COL. 4 UNIT PRICE (IN FIGURE		COL. 5 EXTENDED AMOU (IN FIGURES	
(SEQUENCE NO.)	UUAMIIII		DOLLARS	CTS	DOLLARS	CTS
4.05 B (005)	28.0 C.Y.	REINFORCED CONCRETE PAVEMENT (FULL WIDTH PAVEMENT)	<u>\$ 400</u>	00	\$	2.
4.06	3.0	CONCRETE IN STRUCTURES, CLASS A-40				
(006)	с.ұ.		s900	<i>c</i> o	\$	<i>co</i>
4.08 AA	2,750.0	CONCRETE CURB (18" DEEP)	· ·	+		+
(007)	L.F.		\$42	03 	\$_115,500) ~~
4.09 AD (008)	3,987.0 L.F.	STRAIGHT STEEL FACED CONCRETE CURB (18" DEEP)	\$ <u>50</u>	- 	\$	

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<u>COL. 1</u> ITEM NUMBER (SEQUENCE NO.)	<u>COL. 2</u> Engineer's Estimate of Ouantities	INEER'S CLASSIFICATIONS UNIT PRICE IMATE OF (IN FIGURE		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)
(SEQUENCE NO.)	COMMITTES		DOLLARS CTS	DOLLARS CTS
4.09 AE (009)	1,430.0 L.F.	STRAIGHT STEEL FACED CONCRETE CURB (21" DEEP)	\$50 00	\$ 71,500.00
4.09 AF (010)	380.0 L.F.	STRAIGHT STEEL FACED CONCRETE CURB (27" DEEP)	s	s
4.09 BD (011)	192.0 L.F.	DEPRESSED STEEL FACED CONCRETE CURB (18" DEEP)	s58_00	s <u> </u>
4.09 BE (012)	20.0 L.F.	DEPRESSED STEEL FACED CONCRETE CURB (21" DEEP)	s58 ko	s <u> </u>

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<u>Col. 1</u> ITEM NUMBER	<u>COL. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>COL. 4</u> Unit prices (in Figures)	COL. 5 EXTENDED AMOUNTS (IN FIGURES)
(SEQUENCE NO.)	QUANTITIES		DOLLARS C	TS DOLLARS CTS
4.09 CD (013)	234.0 L.F.	CORNER STEEL FACED CONCRETE CURB (18" DEEP)	\$9 <i>F</i> =~	\$ <u>22932</u>
4.09 CE (014)	643.0 L.F.	CORNER STEEL FACED CONCRETE CURB (21" DEEP)	s98 eo	\$ 63,014,00
4.13 AAS (015)	41,841.0 S.F.	4" CONCRETE SIDEWALK (UNPIGMENTED)	\$	\$ 292 887.00
4.13 ABX (016)	9,565.0 S.F.	4" CONCRETE SIDEWALK WITH SPECIAL SCORING (PIGMENTED)	s9 as	s_ 86,085.00



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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ENGINEER'S ESTIMATE OF	CLASSIFICATIONS			EXTENDED AMOU (IN FIGURES	
QUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6,491.0	7" CONCRETE SIDEWALK (UNPIGMENTED)		1		
S.F.		\$10	00	\$ 64910	00
605.0	EMBEDDED PREFORMED DETECTABLE WARNING UNITS				+
S.F.		\$/	00	\$605	
12.0	IMPRINTED CONCRETE BLOCKS		 		+
EACH		\$535	0) 	\$ 6420	· · · ·
448.0	STEEL REINFORCEMENT BARS				+
LBS.		\$O	10	\$ 44	80
	ENGINEER'S ESTIMATE OF OUANTITIES 6,491.0 S.F. 605.0 S.F. 12.0 EACH 448.0	ENGINEER'S ESTIMATE OF OUANTITIESCLASSIFICATIONS6,491.0 S.F.7" CONCRETE SIDEWALK (UNPIGMENTED) S.F.605.0 S.F.EMBEDDED PREFORMED DETECTABLE WARNING UNITS S.F.12.0 EACHIMPRINTED CONCRETE BLOCKS448.0STEEL REINFORCEMENT BARS	ENGINEER'S ESTIMATE OF OUANTITIES CLASSIFICATIONS UNIT PRICE (IN FIGURES DOLLARS 6,491.0 7" CONCRETE SIDEWALK (UNPIGMENTED) \$/0 8.F. 605.0 EMBEDDED PREFORMED DETECTABLE WARNING UNITS S.F. \$/0 605.0 EMBEDDED PREFORMED DETECTABLE WARNING UNITS S.F. \$/ 12.0 IMPRINTED CONCRETE BLOCKS \$S 448.0 STEEL REINFORCEMENT BARS \$S	ENGINEER'S ESTIMATE OF OUANTITIES CLASSIFICATIONS UNIT PRICES (IN FIGURES) 6,491.0 7" CONCRETE SIDEWALK (UNPIGMENTED) 00 S.F. 10 00 605.0 EMBEDDED PREFORMED DETECTABLE WARNING UNITS S.F. 10 12.0 IMPRINTED CONCRETE BLOCKS 3 448.0 STEEL RE INFORCEMENT BARS 10 LBS. 10 10	ENGINEER'S ESTIMATE OF OUANTITIES 6,491.0 S.F. 605.0 EMBEDDED PREFORMED DETECTABLE WARNING UNITS S.F. 12.0 EACH 448.0 STEL REINFORCEMENT BARS LBS. CLASSIFICATIONS UNIT PRICES DOLLARS UNIT PRICES DOLLARS UNIT PRICES DOLLARS DOL

•]•]•]•] Contract PIN 8502015HW0027C 02/06/2015 Project ID 11:12AM HWK1048B NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION **BID PAGES DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN** COL. 4 COL. 2 COL. 3 COL. 1 CLASSIFICATIONS UNIT PRICES ITEM NUMBER ENGINEER'S (IN FIGURES) ESTIMATE OF (SEQUENCE NO.) OUANTITIES DOLLARS CTS . . .

4.16 BA (024)	21.0 EACH	TREES PLANTED, 2-1/2" TO 3" CALIPER, ALL TYPES	\$ /	<i>c</i> o 	\$
4.16 AA (023)	25.0 EACH	TREES REMOVED (4" TO UNDER 12" CALIPER)	\$ 1	<i>c</i> o 	\$
4.15 SS (022)	1,504.0 c.y.	STRUCTURAL SOIL FOUNDATION MATERIAL	\$ 80	a 	\$ 120,320.00
4.15 (021)	880.0 C.Y.	TOPSOIL	\$ 20	 00 	\$_176cr

<u>COL. 5</u>

DOLLARS

EXTENDED AMOUNTS

(IN FIGURES)

CTS

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<u>COL. 1</u> ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		<u>COL. 5</u> EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.) 4.17 AC (025)	OUANTITIES 193.0 EACH	SHRUBS PLANTED, 18" TO 24" HIGH, ALL TYPES		CTS	s 6755	CTS
4.17 PG1G (026)	924.0 Each	PERENNIALS OR GROUNDCOVERS, PLANTED, 1 GALLON, ALL TYPES	s/2 ^c	۵	\$ 11,088	
4.18 A (027)	41.0 Each	MAINTENANCE TREE PRUNING (UNDER 12" CAL.)	\$		\$	
4.21 (028)	220.0 P/HR	TREE CONSULTANT	s70	••	\$ 15,400	

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COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		<u>COL. 5</u> EXTENDED AMOUN (IN FIGURES)	TS
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
51.41 S 001 (029)	39.0 Each	STANDARD CATCH BASIN, TYPE 1	<u>s 7500</u>	 6 - -	<u>\$ 292, joe</u>	 65
51.42 \$1 \$0 (030)	5.0 Each	INCREMENTAL COST OF STANDARD CATCH BASIN TYPE 3 WITH CURB PIECE IN LIEU OF STANDARD CATCH BASIN TYPE 1	دەن72\$	<i>a</i> i	\$ <u>25,000</u> .	63
52.11D12 (031)	652.0 L.F.	12" DUCTILE IRON PIPE BASIN CONNECTION	s200	 05 	s_130,400.	Cð
6.01 AA (032)	1.0 L.S.	CLEARING AND GRUBBING	\$/08	 	\$	<i>c</i> o

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>	<u>COL. 5</u>
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)	EXTENDED AMOUNTS (IN FIGURES)
(SEQUENCE NO.)	QUANTITIES		DOLLARS CTS	DOLLARS CTS
6.02 AAN	5,687.0	UNCLASSIFIED EXCAVATION		
(033)	с.ұ.		s95 ⁰⁰	s 540 265 au
6.03 AA	13,662.0	STRIPPING PAVEMENT SURFACE (ASPHALTIC		
(034)	S.Y.	CONCRETE)	\$	s_191,268 00
6.06 AB	1,125.0	GRANITE BLOCK SIDEWALK (GROUTED JOINTS)		
(035)	S.Y.	(FURNISH BLOCK)	\$80 a	\$ 90,000 00
6.22 F	550.0	ADDITIONAL HARDWARE		
(036)	LBS.		\$0	\$

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

COL. 2 COL. 1 COL. 3 COL. 4 COL. 5 ITEM NUMBER ENGINEER'S CLASSIFICATIONS UNIT PRICES EXTENDED AMOUNTS ESTIMATE OF (IN FIGURES) (IN FIGURES) (SEQUENCE NO.) QUANTITIES DOLLARS CTS DOLLARS CTS 6.23 XBE FURNISH AND INSTALL 2" GALVANIZED STEEL 71.0 CONDUIT (WITH PAVEMENT EXCAVATION) (037) L.F. 30 50 2130 6.24 36,212.0 ASPHALTIC CONCRETE SIDEWALK (038) S.F. 00 5 81060 6.25 RS 1,320.0 TEMPORARY SIGNS (039) S.F. 8 ω 0560 6.26 8,514.0 TIMBER CURB 60 (040) 15 00 L.F. 27 7/0

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COL. 1 ITEM NUMBER	COL. 2 ENGINEER'S ESTIMATE OF	(IN FIGURES)		UNIT PRICES		TS
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.28 AA (041)	396.0 L.F.	LIGHTED TIMBER BARRICADES	s15	 	\$ <u>5940</u>	a.
6.40 C (042)	24.0 Month	ENGINEER'S FIELD OFFICE (TYPE C)	s0,000	 0° 	<u>\$ 240 000</u> .	01
6.43 (043)	1,200.0 SETS	PHOTOGRAPHS	s15		s <u> </u>	<i>CI</i> Ø
6.44 (044)	139,950.0 L.F.	THERMOPLASTIC REFLECTORIZED PAVEMENT MARKINGS (4" WIDE)	\$O	181	<u> </u>	<i>a</i>

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(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.49 (045)	11,726.0 L.F.	TEMPORARY PAVEMENT MARKINGS (4" WIDE)	\$O	814	\$ <u>2,831</u>	200
6.50 (046)	38.0 Each	CLEANING OF DRAINAGE STRUCTURES	\$	ω 1	s <u> </u>	62
6.52 FED (047)	1.0 F.S.	UNIFORMED FLAGPERSON PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 206,250.00	\$206,250		\$206,250	.00
6.53 (048)	11,726.0 L.F.	REMOVE EXISTING LANE MARKINGS (4" WIDE)	\$0	2/20	\$ <u> </u>	



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COL. 1 ITEM NUMBER	<u>COL. 2</u> ENGINEER'S ESTIMATE OF	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		<u>COL. 5</u> EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.55 (049)	6,836.0 L.F.	SAWCUTTING EXISTING PAVEMENT	\$/	<i>م</i> ک	<u>\$ 6836</u>	00
6.67 (050)	53.0 C.Y.	SUBBASE COURSE, SELECT GRANULAR MATERIAL	دحع	5 	s 26jo	00
6.68 (051)	3,058.0 S.Y.	PLASTIC FILTER FABRIC	\$	8	\$ <u>3018</u>	00
6.82 A (052)	346.0 S.F.	REMOVING EXISTING TRAFFIC AND STREET NAME SIGNS	\$	00	\$346	00

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(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.82 В (053)	647.0 L.F.	REMOVING EXISTING TRAFFIC AND STREET NAME SIGN POSTS	\$	CN 	s647	08
6.83 AA (054)	68.0 S.F.	FURNISHING NEW NON-REFLECTORIZED TRAFFIC SIGNS	sZ/	0) 	s1428	er)
6.83 AB (055)	1,004.0 L.F.	FURNISHING NEW TRAFFIC SIGN POSTS	s7	10/10	\$_7530	 cv
6.83 AR (056)	387.0 S.F.	FURNISHING NEW REFLECTORIZED TRAFFIC SIGNS	s <u>23</u>		s <u> </u>	ev

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>	<u>COL. 4</u>		
ITEM NUMBER (SEQUENCE NO.)	ENGINEER'S E STIMATE OF OUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.83 BA	455.0	INSTALLING TRAFFIC SIGNS				1
(057)	S.F.		\$ <u> </u>	~~ 	\$ 7280	07
6.83 BB	1,004.0	INSTALLING TRAFFIC SIGN POSTS				
(058)	L.F.		s <u> 15 </u>	100	<u>\$ 16,013</u>	80
6.84 B	1.0	LOLLIPOP TYPE BUS STOP SIGNS				
(059)	F.S.	PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 20,000.00	\$20,000.	00	\$.00
6.86 AA	35.0	FURNISHING NEW STREET NAME SIGNS				
(060)	S.F.		\$3	50	\$ 1242	50

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICE (IN FIGURE:		EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
6.86 BA	35.0	INSTALLING STREET NAME SIGNS				
(061)	S.F.		. 16	120	567	a
			۶ <u>ــــــ</u>	-† 	3	•
6.87	4,630.0	PLASTIC BARRELS			<i>:</i> •	
(062)	EACH		\$2u	æ 	\$ 92,600	8
				1		1

			*		† 1	\$ <u></u>
6.91 (063)	14,971.0 L.F.	REFLECTIVE CRACKING MEMBRANE (18" WIDE)	\$	0	75	\$
6.99 (064)	1.0 L.S.	AUDIO AND VIDEO DOCUMENTATION SURVEY	\$	20,000	 a) 	s <u>20,000</u> .

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION **DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN**

<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	COL. 4		<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF OUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUN (IN FIGURES)	
			DOLLARS	CTS	DOLLARS	CTS
60.11R520 (065)	330.0 L.F.	FURNISHING AND DELIVERING 20-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 55)	\$250	00 	\$ 82,500.	\
60.11R606 (066)	88.0 L.F.	FURNISHING AND DELIVERING 6-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 56)	\$	<i>0</i> 70	\$ 4840	ст
60.11R608 (067)	22.0 L.F.	FURNISHING AND DELIVERING 8-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 56)	\$QU	co 	s <u> </u>	00
60.11R612 (068)	132.0 L.F.	FURNISHING AND DELIVERING 12-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 56)	s90	00	\$ 11880	

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<u>COL. 1</u> ITEM NUMBER (SEQUENCE NO.)	COL. 2 ENGINEER'S ESTIMATE OF OUANTITIES	<u>COL. 3</u> CLASSIFICATIONS	COL. 4 UNIT PRICE (IN FIGURE)		COL. 5 EXTENDED AMOU (IN FIGURES	
60.12D06 (069)	116.0 L.F.	LAYING 6-INCH DUCTILE IRON PIPE AND FITTINGS	DOLLARS \$	CTS	DOLLARS \$9260	CTS
50.12D08 (070)	28.0 L.F.	LAYING 8-INCH DUCTILE IRON PIPE AND FITTINGS	s80		\$2240	0
50.12D12 (071)	143.0 L.F.	LAYING 12-INCH DUCTILE IRON PIPE AND FITTINGS	\$ 200	<i>ao</i>	\$ 28600	40
60.12D20 (072)	347.0 L.F.	LAYING 20-INCH DUCTILE IRON PIPE AND FITTINGS	\$ZJZJ	00	\$_86750	

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\$ 86750

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COL. 1	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
60.13M0A24 (073)	5.0 Tons	FURNISHING AND DELIVERING DUCTILE IRON MECHANICAL JOINT 24-INCH DIAMETER AND SMALLER FITTINGS, INCLUDING WEDGE TYPE RETAINER GLANDS	\$000	00	s	00
61.11DMM06 (074)	4.0 EACH	FURNISHING AND DELIVERING 6-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	s1100	•	\$ <u> </u>	co
61.11DMM20 (075)	2.0 EACH	FURNISHING AND DELIVERING 20-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	s18,000		\$ <u> </u>	0,
61.12DMM06 (076)	4.0 EACH	SETTING 6-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	\$	CO 	\$	00

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<u>COL. 1</u> ITEM NUMBER	<u>COL. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	COL. 4 UNIT PRICES (IN FIGURES)		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
61.12DMM20 (077)	2.0 Each	SETTING 20-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	\$500	03	\$ <u> </u>	6.0
62.11SD (078)	4.0 EACH	FURNISHING AND DELIVERING HYDRANTS	\$3000	67	\$2000.	00
62.12SG (079)	4.0 EACH	SETTING HYDRANTS COMPLETE WITH WEDGE TYPE RETAINER GLANDS	s750	eu 	\$ <u> </u>	00
62.13RH (080)	4.0 EACH	REMOVING HYDRANTS	\$	ن ن 	\$4	00



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COL. 4 COL. 1 COL. 2 COL. 3 COL. 5 ITEM NUMBER ENGINEER'S UNIT PRICES CLASSIFICATIONS EXTENDED AMOUNTS ESTIMATE OF (IN FIGURES) (IN FIGURES) (SEQUENCE NO.) QUANTITIES DOLLARS CTS DOLLARS CTS 62.14FS FURNISHING, DELIVERING AND INSTALLING 8.0 HYDRANT FENDERS (081) EACH 250 00 07 2.000 63.11VC 2.0 FURNISHING AND DELIVERING VARIOUS CASTINGS (082) TONS 100 00 00 200 637.9520 1.0 FIELD INFORMATION MANAGEMENT SYSTEM (083) F.S. PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 50,000.00 50,000 00 50,000.00 64.11EL 2.0 WITHDRAWING AND REPLACING HOUSE SERVICES USING 1-1/2-INCH OR LARGER SCREW TAPS (084) EACH 500 00 60 1000

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUN (IN FIGURES)	
	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
64.11ST (085)	2.0 EACH	WITHDRAWING AND REPLACING HOUSE SERVICES USING SMALLER THAN 1-1/2-INCH SCREW TAPS	s <u>30</u> U	C»	s <u> </u>	Cr
64.12COEG (086)	22.0 L.F.	CUTTING AND OFFSETTING HOUSE SERVICE WATER CONNECTIONS (EQUAL TO OR GREATER THAN 3-INCH DIAMETER)	\$	6	\$22	 00
64.12ESEG (087)	22.0 L.F.	EXTENDING HOUSE SERVICE WATER CONNECTIONS (EQUAL TO OR GREATER THAN 3-INCH DIAMETER)	\$85	00	\$676.	60
64.13WC20 (088)	2.0 Each	FURNISHING, DELIVERING AND INSTALLING WET CONNECTION SLEEVE ON 20-INCH WATER MAIN PIPE WITH VARIOUS OUTLETS	\$ <u> 2600</u>	0 J	\$ <u>5200</u>	03



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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF OUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES		EXTENDED AMOU (IN FIGURES	
	UVANI II IES		DOLLARS	CTS	DOLLARS	СТ
65.11BR (089)	200.0 LBS.	FURNISHING, DELIVERING AND INSTALLING BANDS, RODS, WASHERS, ETC., COMPLETE, FOR RESTRAINING JOINTS	\$O	2013	\$	Cr
65.21PS (090)	286.0 L.F.	FURNISHING AND PLACING POLYETHYLENE SLEEVE Unit price bid shall not be less than: \$ 0.50	\$O	50	\$	
65.31FF (091)	5,841.0 S.F.	FURNISHING, DELIVERING AND PLACING FILTER FABRIC Unit price bid shall not be less than: \$0.10	\$	103	\$584	10
65.51PC (092)	3.0 C.Y.	FURNISHING AND PLACING CAST-IN-PLACE CONCRETE CLASS 40 AND PRECAST CONCRETE CLASS 50	\$200	0.5	\$600	00

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>	-	<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONSUNIT PRICESEXTE(IN FIGURES)(I				
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
65.61SS (093)	5,060.0 LBS.	FURNISHING, DELIVERING AND PLACING STRUCTURAL, REINFORCING AND MISCELLANEOUS STEEL	\$O	500	s30	
65.71SG (094)	44.0 C.Y.	FURNISHING, DELIVERING AND PLACING SCREENED GRAVEL OR SCREENED BROKEN STONE BEDDING	\$50	 eD 	s_2250	er3
7.13 B (095)	18.0 MONTH	MAINTENANCE OF SITE Unit price bid shall not be less than: \$8,000.00	\$5,000	 C6 	\$ 450 000	
7.36 (096)	16,352.0 L.F.	PEDESTRIAN STEEL BARRICADES	s8	200 	s <u> 1308/6</u>	00



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COL. 1 ITEM NUMBER	<u>COL. 2</u> Engineer's Estimate of Ouantities	COL. 3 CLASSIFICATIONS	COL. 4 UNIT PRICES (IN FIGURES)		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES	· · · · · · · · · · · · · · · · · · ·	DOLLARS	CTS	DOLLARS	CTS
7.88 <u>AA</u> (097)	1.0 L.S.	RODENT INFESTATION SURVEY AND MONITORING Unit price bid shall not be less than: \$6,250.00	\$6258	as	s6210	6
7.88 AB (098)	2,142.0 EACH	RODENT BAIT STATIONS Unit price bid shall not be less than: \$60.00	\$60	00	<u>s 128520</u>	
7.88 AC (099)	2,142.0 EACH	BAITING OF RODENT BAIT STATIONS Unit price bid shall not be less than: \$9.50	s9	50	s20,349	 00
7.88 AD (100)	950.0 BLOCK	WATERBUG BAIT APPLICATIONS Unit price bid shall not be less than: \$65.00	\$65	00	\$ 61,750	 03

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COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	INGINEER'S CLASSIFICATIONS		<u>COL. 4</u> UNIT PRICES (IN FIGURES)		NTS)
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
70.31FN	660.0	FENCING		T 		<u>†</u>
(101)	L.F.		. 2	00		1
		Unit price bid shall not be less than: \$ 2.00	\$	∲ 	\$320	CN
70.81CB	338.0	CLEAN BACKFILL				+
(102)	с.ұ.		. 15	00		
		Unit price bid shall not be less than: \$15.00	\$ <u>``</u>)	 	\$5070	Cre
70.915W12 (103)	275.0 s.f.	FURNISHING AND PLACING SHEETING AND BRACING IN TRENCH FOR WATER MAIN PIPE 12-INCH IN DIAMETER AND LESS	\$O	21	s <u> </u>	
70.91sw20 (104)	4,620.0 S.F.	FURNISHING AND PLACING SHEETING AND BRACING IN TRENCH FOR WATER MAIN PIPE 20-INCH IN DIAMETER	\$O	27 100	s	



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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
8.02 A (105)	3,300.0 S.F.	SPECIAL CARE EXCAVATION AND RESTORATION FOR SIDEWALK WORK	\$Z	00	s <u> </u>	00
8.02 B (106)	451.0 L.F.	SPECIAL CARE EXCAVATION AND RESTORATION FOR CURB WORK	s	00 —	s	00
8.52 FP (107)	330.0 LBS.	STEEL FOUNDATION PLATE	s6	04	\$	68
8.52 PT-A (108)	4.0 Each	PAVING TRAY (PATHWAY TOTEM)	\$	<i>ø</i> 0	<u>\$ 4600</u>	00

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COL. 1 ITEM NUMBER (SEQUENCE NO.)	<u>COL. 2</u> ENGINEER'S ESTIMATE OF QUANTITIES	GINEER'S CLASSIFICATIONS UNIT PRICES (IMATE OF (IN FIGURES)			COL, 5 EXTENDED AMOUNTS (IN FIGURES)	
			DOLLARS	CTS	DOLLARS	CTS
9.00 C (109)	688.0 C.F.	EXPLORATORY TEST PITS	\$/0	w 	s6FF0	00
9.04 HW (110)	1.0 F.S.	ALLOWANCE FOR ANTI-FREEZE ADDITIVE IN CONCRETE PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 50,000.00	\$50,000.	00	\$50,000	.00
9.07 (111)	619.0 S.Y.	NON-WOVEN GEOTEXTILE (FOR BACKFILL AND UNDERDRAINS)	\$ <u> </u>	00	\$	00
9.99 M (112)	12.0 Month	FLASHING ARROW BOARD	\$500	00 	<u>\$ 6000</u>	<i>c)</i>

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COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
HW-914 (113)	1.0 F.S.	ALLOWANCE FOR WAYFINDING TOTEMS PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 36,000.00	\$36,000.	00	\$36,000	.00
PK-278 (114)	4.0 EACH	TRASH RECEPTACLE ON CONCRETE BASE	s/ 200	<i>e</i> v	sy pod	C1
SL-20.02.02 (115)	4.0 EACH	FURNISH AND INSTALL STANDARD TYPE ANCHOR BOLT FOUNDATION, AS PER DRAWING E-3788	\$090	CU	\$ 4360	a,
SL-20.08.01 (116)	1.0 EACH	REMOVE STANDARD TYPE ANCHOR BOLT CONCRETE FOUNDATION	\$	<i>a</i> v	s	<i>(</i> 6

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<u></u> <u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>		
ITEM NUMBER	ENGINEER'S ESTIMATE OF QUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUNTS (IN FIGURES)		
(SEQUENCE NO.)	COMMITTES		DOLLARS	CTS	DOLLARS	СТ	
SL-21.03.02 (117)	3.0 EACH	FURNISH AND INSTALL TYPE 2S, 4S, 6S, 8S OR 12S LAMPPOST WITH TRANSFORMER BASE	\$ <u> </u>	a	\$ <u> </u>	 	
SL-21.03.03 (118)	1.0 EACH	FURNISH AND INSTALL TYPE 2T, 6T, 8T OR 12T LAMPPOST WITH TRANSFORMER BASE	\$	w	\$ <u> </u>	00	
SL-21.09.05 (119)	1.0 EACH	REMOVE STANDARD FABRICATED STEEL, SPUN ALUMINUM NO. 10, ETC. WITH ARM(S), LUMINAIRE(S), CONTROL(S) WITH ALL ATTACHMENTS, IF ANY.	<u> </u>	در)	<u>\$ </u>		
SL-21.09.08 (120)	4.0 EACH	REMOVE ALL STREET LIGHTING EQUIPMENT FROM TYPE "M-2" TRAFFIC POST (ARM(S), PHOTOELECTRIC CONTROLLER, LUMINAIRE(S), SHAFT EXTENSION, WIRING, ETC.)	s626	cv 	\$ 2504		

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<u>COL.</u> 1

<u>COL. 2</u>

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COL. 3

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COL. 4

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<u>COL. 5</u>

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ITEM NUMBER	ENGINEER'S ESTIMATE OF OUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	UURNIIIIES		DOLLARS	CTS	DOLLARS	CTS
SL-21.09.09 (121)	3.0 EACH	REMOVE F.S. SPUN ALUMINUM, #10, ETC LAMPPOST, WITH ARMS(S), LUMINAIRE(S), ETC., WITH ALL ATTACHMENTS, IF ANY. REMOVE PORTION OF FOUNDATION. RESTORE TO SURROUNDING CONDITIONS.	s522	8	s	
SL-22.09.02 (122)	48.0 Each	REMOVE LUMINAIRE AND CONTROL, IF ANY, OTHER THAN PARK TYPE OR LOW PRESSURE SODIUM	\$/09	07	\$ 4992	·
SL-22.16.05 (123)	57.0 EACH	FURNISH AND INSTALL ROADWAY TYPE LED FIXTURE AS PER SPECIFICATION 466 WITH PEC RECEPTACLE AND PEC	s620	£)	\$ 35340	00
SL-24.02.02 (124)	4.0 EACH	FURNISH AND INSTALL FABRICATED STEEL 8 Ft. ARM ON LAMPPOST OR "M-2" TRAFFIC POLE SHAFT EXTENSION.	<u>\$ 6/6</u>	00	sZ464	Ø



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COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 ITEM NUMBER ENGINEER'S CLASSIFICATIONS UNIT PRICES EXTENDED AMOUNTS ESTIMATE OF (IN FIGURES) (IN FIGURES) (SEQUENCE NO.) OUANTITIES CTS DOLLARS DOLLARS CTS SL-24.02.16 4.0 FURNISH AND INSTALL FABRICATED STEEL 6 FT. SHAFT EXTENSION (SINGLE ARM) FOR "M-2" (125) EACH 889 00 TRAFFIC POST AS PER DWGs H-5159 OR H-5255. 60 3556 SL-26.01.04 57.0 FURNISH AND INSTALL LONG LIFE PHOTO ELECTRIC CONTROL WITH SURGE PROTECTION FOR (126) EACH LED LIGHT 93 100 Co 5301 SL-26.06.02 2.0 FURNISH AND INSTALL LED FIRE ALARM LUMINAIRES. (127) EACH 63 361 CN とて SL-29.01.01 FURNISH, INSTALL, MAINTAIN AND REMOVE 8.0 EQUIPMENT FOR TEMPORARY LIGHTING (PYLON), (128) EACH AS PER DRAWINGS F-5005 AND F-5005A 00 13848 73, \$



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<u>COL. 1</u> ITEM NUMBER	<u>COL. 2</u> ENGINEER'S ESTIMATE OF	<u>COL. 3</u> CLASSIFICATIONS	<u>COL. 4</u> Unit prices (in figures)		<u>Col. 5</u> Extended Amour (in Figures)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
SL-33.02.02 (129)	1,600.0 L.F.	FURNISH AND INSTALL NO. 6 AWG XLP COPPER CABLE OR EQUAL FOR OVERHEAD INSTALLATION	\$5	ev 	<u>\$</u> \$000	co
T-1.1 (130)	9.0 Each	INSTALL TYPE "S" OR "T" FOUNDATION	\$	08	\$ <u>9873</u> .	00
T-1.18 (131)	2.0 EACH	REMOVE TYPE "A", "B", "S" OR "T" SERIES FOUNDATION	s/00	0U 	s	
T-1.20 (132)	6.0 Each	REMOVE TYPE "M" SERIES FOUNDATION	\$/00	со 	\$600	05

T-1.29 (133) NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

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COL 5

DOLLARS

EXTENDED AMOUNTS

(IN FIGURES)

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>	
ITEM NUMBER	ENGINEER'S ESTIMATE OF	CLASSIFICATIONS	UNIT PRICE: (IN FIGURES	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS
1.29	2.0	RAISE OR LOWER FOUNDATION TO GRADE		
33)	EACH		\$	ω
L.3	8.0	INSTALL TYPE "M2-5S" FOUNDATION		
24)				1

T-1.3 (134)	8.0 EACH	INSTALL TYPE "M2-5S" FOUNDATION	\$	63	s_12568 eu
T-2.1 (135)	8.0 EACH	INSTALL TYPE "S-1" OR "T-1" SERIES POST	\$626_	ω ·	\$COPCO
T-2.16 (136)	1.0 EACH	FURNISH, INSTALL, MAINTAIN AND REMOVE TEMPORARY POST OR PYLON WITH SIGNALS	\$18/1	a	\$611_00

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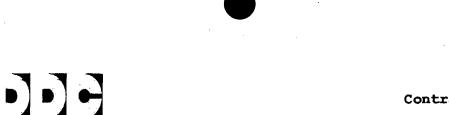
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COL. 1 ITEM NUMBER	<u>COL. 2</u> ENGINEER'S ESTIMATE OF	<u>COL. 3</u> CLASSIFICATIONS	<u>COL. 4</u> Unit prices (in figures)		<u>COL. 5</u> Extended amounts (In Figures)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-2.22 (137)	2.0 EACH	REMOVE TYPE "S-1" OR "T-1" SERIES POST	\$522	3	s1044	00
T-2.24 (138)	6.0 Each	REMOVE TYPE "M" SERIES POST	s <u>/25</u> 7	3	\$_7512	
T-2.28 (139)	4.0 Each	REMOVE MAST ARM FROM ANY POST	<u>\$ 626</u>		\$_2504	
T-2.32 (140)	4.0 Each	INSTALL STREET LIGHT LUMINAIRE SUPPORT ARM ON "M-2" POST	s417	00	s/668	03



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COL. 1 ITEM NUMBER	<u>COL. 2</u> Engineer's Estimate of Ouantities	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		<u>COL. 5</u> EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.)	QUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-2.4 (141)	6.0 EACH	INSTALL TYPE "M-2" POST	\$08% @	2	\$ 12,576	
T-20000 (142)	8.0 Each	FURNISH TEN FOOT ALUMINUM SIGNAL POST TYPE "S-1"	\$ <u>978</u>	U	\$ 7824	
T-20020 (143)	27.0 EACH	a) FURNISH 3/4" ANCHOR BOLT ASSEMBLIES FOR S-1 (EACH) (3 REQUIRED PER POST)	\$ <u> </u>	6	\$ 810	ac
T-20160 (144)	6.0 Each	FURNISH 20 FOOT SIGNAL MAST ARM POLE ASSEMBLY TYPE "M-2"	\$	o,	\$ 28.038	

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<u>COL. 1</u>	<u>COL. 2</u>	<u>COL. 3</u>	<u>COL. 4</u>		<u>COL. 5</u>	
ITEM NUMBER (SEQUENCE NO.)	ENGINEER'S ESTIMATE OF OUANTITIES	CLASSIFICATIONS	UNIT PRICES (IN FIGURES)		EXTENDED AMOU (IN FIGURES	NTS)
(SEQUENCE NO.)			DOLLARS	CTS	DOLLARS	CTS
T-20184 (145)	5.0 Each	a) FURNISH 5' EXTENSION ARM ASSEMBLY WITH FITTINGS	s6/4	Ø	\$ <u> </u>	03 j
T-20220 (146)	32.0 EACH	c) FURNISH 1-1/4" ANCHOR BOLT ASSEMBLIES FOR M-2 (EACH) (4 REQUIRED PER POST)	s5	28 	\$ 1696	00
T-3.1 (147)	32.0 EACH	INSTALL "ONE-WAY" SIGNAL UNIT ON MAST ARM OR TOP OF TRAFFIC POST	s09	01	\$ 6688	a
T-3.18 (148)	7.0 EACH	REMOVE SIGNAL HEAD FROM ANY TYPE POST	s209	<i>Ф</i> ъ 	, 1463	1 3 1



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COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)			<u>COL.5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	QUANTITIES		DOLLARS	CTS	DOLLARS	CTS	
T-3.2 (149)	18.0 EACH	INSTALL "ONE-WAY" SIGNAL UNIT ON THE SHAFT OF ANY POST	\$ 417	 00 	s7506		
T-3.21 (150)	12.0 Each	REMOVE PEDESTRIAN SIGNAL OR SIGN UNIT OR OTHER ILLUMINATED SIGNS FROM ANY POST	\$ 209	au 	\$S	av 	
T-3.26 (151)	4.0 Each	REMOVE STREET LIGHT LUMINAIRE AND PHOTO ELECTRIC CONTROL FROM STREET LIGHT ARM	\$ 104	<i>co</i>	s4/6		
T-3.27 (152)	4.0 Each	INSTALL STREET LIGHT LUMINAIRE AND PHOTO ELECTRIC CONTROL ON STREET LIGHT MAST	\$ 209	00	\$836	00	

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COL. 1 ITEM NUMBER	<u>COL. 2</u> ENGINEER'S ESTIMATE OF	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit price (in figure:		COL. 5 EXTENDED AMOU (IN FIGURES	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-3.6 (153)	12.0 Each	INSTALL PEDESTRIAN SIGNAL ON ANY TYPE POST	\$417	00	\$5004	00
T-30013L (154)	48.0 Each	FURNISH ADJUSTABLE 3 SECTION 1-WAY, DIE CAST ALUMINUM TRAFFIC SIGNALS 8" - W/LED LENS	<u>\$355</u>	- 0)	\$ 17,040	03
T-31150 (155)	3.0 Each	FURNISH "1SA" ALUMINUM DIE CASTINGS AND ASSEMBLY FOR POST SIGNAL MOUNTING	\$73	03 12	\$\$	
T-31175 (156)	4.0 EACH	Ъ) "2SPA"	s <u> </u>	<i>e</i>	\$ 1248	



Contract PIN Project ID 8502015HW0027C HWK1048B

02/06/2015 11:12AM BID PAGES

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

<u>Col. 1</u> Item Number	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	COL. 4 UNIT PRICES (IN FIGURES)		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS CTS	
T-31200 (157)	19.0 EACH	e) "VB" ASSEMBLY *ASSEMBLY IS EQUAL TO ONE PAIR	\$73	دم 	\$	
T-31210 (158)	30.0 Each	h) "HUB" ASSEMBLY *ASSEMBLY IS EQUAL TO ONE PAIR	\$36	6 ð	s_1080.00	
T-31225 (159)	2.0 EACH	c) "3MS"	sC	ръ 1	\$536.00	
T-31235 (160)	4.0 EACH	d) "4MS"	\$	ω 	sco	

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Contract PIN Project ID 8502015HW0027C

02/06/2015 11:12am BID PAGES

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

HWK1048B

<u>COL. 1</u> ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-31340 (161)	6.0 EACH	f) "VB-P" ASSEMBLY *ASSEMBLY IS EQUAL TO ONE PAIR	\$87	 	\$\$22	
T-31351 (162)	5.0 Each	g) "VB-2P" ASSEMBLY *ASSEMBLY IS EQUAL TO ONE PAIR	s 210	00	\$050	
T-33000L (163)	4.0 Each	FURNISH POLYCARBONATE INCANDESCENT PED SIGNAL W/LED LENS	\$ 290	as	s/60	00
T-33001-L (164)	8.0 EACH	FURNISH POLYCARBONATE PEDESTRIAN SIGNAL (16 X 16) W/LED COUNT LENS (SPECIFICATION A-L)	\$362		sS	·



Contract PIN Project ID 8502015HW0027C HWK1048B

02/06/2015 11:12AM BID PAGES

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

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COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> CLASSIFICATIONS	COL: 4 UNIT PRICES (IN FIGURES)	<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)
(SEQUENCE NO.)	QUANTITIES		DOLLARS CTS	DOLLARS CTS
T-5.1 (165)	600.0 L.F.	FURNISH AND INSTALL 2" RIGID UNDERGROUND CONDUIT IN UNPAVED ROADWAY	\$47_ ^{av}	\$ 28,200.00
T-5.2 (166)	175.0 L.F.	FURNISH AND INSTALL 2" RIGID UNDERGROUND CONDUIT IN PAVED ROADWAY	\$	s_8925.00
T-5.32 (167)	175.0 L.F.	RESTORING PERMANENT ROADWAY (INCLUDING SAWCUT)	\$SO CO	\$ 8750.00
T-5.7 (168)	25.0 L.F.	FURNISH AND INSTALL ADDITIONAL 2" RIGID UNDERGROUND CONDUIT	s	s_1275 a

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

Contract PIN

Proj**ec**t ID

8502015HW0027C

HWK1048B

<u>COL. 1</u> ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	<u>COL. 3</u> Classifications	<u>COL. 4</u> Unit prices (In figures)		<u>COL. 5</u> EXTENDED AMOUNTS (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-6.1 (169)	500.0 L.F.	INSTALL CABLE (INCLUDES OVERHEAD)	s8	ko	\$	08
T-6.10 (170)	2,000.0 L.F.	REMOVE CABLE (INCLUDES OVERHEAD)	\$4	cv	s	00
T-6.2 (171)	2,000.0 L.F.	INSTALL MULTIPLE CABLE (INCLUDES OVERHEAD)	\$ <u> </u>	<i>0</i> 0 	s <u> </u>	
T-60000B (172)	2,000.0 L.F.	FURNISH 2 c # 10B (BREAKDOWN = 2#10 WITH 3RD WIRE FOR GROUNDING).	sZ	 	\$4000	0

		Contract PIN	8502015HW0027C
NEW YORK CITY DEPARTMENT OF DESIGN AND C	ONSTRUCTION	Project ID	HWK1048B
DIVISION OF INFRASTRUCTURE - BUREAU OF DES			

COL. 1 COL. 2 COL. 3 ITEM NUMBER ENGINEER'S CLASSIFICATIONS ESTIMATE OF CLASSIFICATIONS		ER'S CLASSIFICATIONS UNIT P TE OF (IN FIG			<u>COL. 5</u> Extended Amounts (In Figures)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-60040 (173)	1,000.0 L.F.	c) 7 CONDUCTOR, 14 A.W.G.	\$Z	ου 	\$ <u>2000</u>	<i>c.</i> 0
T-60190 (174)	2,500.0 L.F.	e) 13 CONDUCTOR, 14 A.W.G.	\$3		\$ <u>7500</u>	در
T-7.38 (175)	1.0 Each	REMOVE POST MOUNTED SENSOR	s09	<i>ل</i> ان 	s2US.	00
T-7.45 (176)	4.0 EACH	REMOVE PEDESTRIAN PUSHBUTTON AND PUSHBUTTON SIGN	\$/04	<i>ω</i> 	s <u> </u>	60



Contract PIN

Project ID

8502015HW0027C

HWK1048B

COL. 1 ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	COL. 3 CLASSIFICATIONS	<u>COL. 4</u> Unit prices (in figures)		<u>COL. 5</u> Extended Amoun (In Figures)	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-7.78 (177)	1.0 Each	INSTALL MICROWAVE SENSOR ON METAL POLE (CENTER SUPPORT BRACKET)	\$ <u> </u>		s994	00
T-8.10 (178)	6.0 Each	RELOCATE CONCRETE PYLON WITH POST	\$/252	0 .	s <u>7512</u> .	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
T-8.8 (179)	6.0 Each	INSTALL CONCRETE PYLON	\$834	0.	\$ <u>5009</u>	
T-8.9 (180)	6.0 Each	REMOVE CONCRETE PYLON	\$ <u> 4n</u>		\$ <u>2502</u>	

)
02/06/2015 11:12AM BID PAGES		YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION SION OF INFRASTRUCTURE - BUREAU OF DESIGN	Contract PIN Project ID	1	8502015HW0027C HWK1048B	
<u>COL. 1</u> ITEM NUMBER	<u>Col. 2</u> Engineer's Estimate of	COL. <u>3</u> CLASSIFICATIONS	COL. 4 UNIT PRICES (IN FIGURES		COL. 5 EXTENDED AMOUN (IN FIGURES)	
(SEQUENCE NO.)	OUANTITIES	• • • •	DOLLARS	CTS	DOLLARS	CTS
	1.0	MOBILIZATION	SUB-TOTAL:	:	<u>\$ 6396067</u>	20
(182)	LUMP SUM	PRICE BID SHALL NOT EXCEED 4% OF THE ABO PRICE.	VE SUB-TOTAL		\$ 255842	69
- <u></u>			TOTAL BID PRICE:		\$ 6,651,909	89
	TH	EASE BE SURE A LEGIBLE BID IS ENTERED FO E BIDDER SHALL INSERT THE TOTAL BID PRIC E BID FORM ON PAGE C-4 OF THIS BID BOOKL	<u>e in</u>			

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

Contract PIN

Project ID

8502015HW0027C

HWK1048B

COL. 1 ITEM NUMBER	<u>COL. 2</u> ENGINEER'S ESTIMATE OF	<u>COL. 3</u> CLASSIFICATIONS	<u>Col. 4</u> Unit prices (in figures)		COL. 5 EXTENDED AMOU (IN FIGURES	
(SEQUENCE NO.)	OUANTITIES		DOLLARS	CTS	DOLLARS	CTS
T-81000 (181)	6.0 Each	FURNISH CONCRETE PYLON	<u>\$ </u>	ω.	<u>\$ 3840</u>	

BID FORM THE CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION DIVISION OF INFRASTRUCTURE

BID FOR FURNISHING ALL LABOR AND MATERIAL NECESSARY AND REQUIRED FOR:

PROJECT ID: HWK1048B

RECONSTRUCTION OF FLUSHING AVENUE

FROM NAVY STREET TO WILLIAMSBURG STREET (BROOKLYN WATERFRONT GREENWAY)

INCLUDING CURB AND SIDEWALK RECONSTRUCTION, SEWER, STREET LIGHTING, AND TRAFFIC SIGNAL WORK

Together With All Work Incidental Thereto BOROUGH OF BROOKLYN CITY OF NEW YORK

CITI OF NEW TORK
Name of Bidder: 1411 ED terprises Inc.
Date of Bid Opening: 3125115
Bidder is: (Check one, whichever applies) Individual () Partnership () Corporation (X). Place of Business of Bidder: $213 - 19$ 99 40 Ave 0 NV 11429 .
Bidder's Telephone Number: <u>78465500</u> Fax Number: <u>7184655100</u>
Bidder's E-Mail Address: JU CUN. COM
Residence of Bidder (If Individual):
If Bidder is a Partnership, fill in the following blanks: Names of Partners Residence of Partners
If Bidder is a Corporation, fill in the following blanks: Organized under the laws of the State of Dew UO(K.
Name and Home Address of President: CUMES ULIGNO 30 And averate Plandome Manor NY 11030
Name and Home Address of Secretary: Stephen LiCata.
Name and Home Address of Treasurer: Karmond, Kudalph.

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION BID BOOKLET DECEMBER 2013 The above-named Bidder affirms and declares:

1. The said bidder is of lawful age and the only one interested in this bid; and no person, firm or corporation other than hereinbefore named has any interest in this bid, or in the Contract proposed to be taken.

2. By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief: (1) the prices in this bid have been arrived at independently without collusion, consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor; (2) unless otherwise required by law, the prices quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and (3) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

3. No councilman or other officer or employee or person whose salary is payable in whole or in part from the City Treasury is directly or indirectly interested in this bid, or in the supplies, materials, equipment, work or labor to which it relates, or in any of the profits thereof.

4. The bidder is not in arrears to the City of New York upon debt or contract or taxes, and is not a defaulter, as surety or otherwise, upon any obligation of the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York or State of New York, nor is there any proceeding pending relating to the responsibility or qualification of the bidder to receive public contracts except as set forth on the Affirmation included as page C-6 of this Bid Booklet.

The bidder hereby affirms that it has paid all applicable City income, excise and other taxes for all years it has conducted business activities in New York City.

5. The bidder, as an individual, or as a member, partner, director or officer of the bidder, if the same be a firm, partnership or corporation, executes this document expressly warranting and representing that should this bid be accepted by the City and the Contract awarded to him, he and his subcontractors engaged in the performance: (1) will comply with the provisions of Section 6-108 of the Administrative Code of the City of New York and the non-discrimination provisions of Section 220a of the New York State Labor Law, as more expressly and in detail set forth in the Agreement; (2) will comply with Section 6-109 of the Administrative Code of the City of New York in relation to minimum wages and other stipulations as more expressly and in detail set forth in the Agreement; (3) have complied with the provisions of the aforesaid laws since their respective effective dates, and (4) will post notices to be furnished by the City, setting forth the requirements of the aforesaid laws in prominent and conspicuous places in each and every plant, factory, building and structure where employees engaged in the performance of the Contract can readily view it, and will continue to keep such notices posted until the supplies, materials and equipment, or work labor and services required to be furnished or rendered by the Contractor have been finally accepted by the City. In the event of any breach or violation of the foregoing, the Contractor may be subject to damages, liquidated or otherwise, cancellation of the Contract and suspension as a bidder for a period of three years. (The words, "the bidder", "he", "his", and "him" where used herein shall mean the individual bidder, firm, partnership or corporation executing this bid).

BID FORM

PROJECT ID. HWK1048B

<u>TOTAL BID PRICE</u>: In the space provided below, the Bidder shall indicate its Total Bid Price in figures. Such Total Bid Price is set forth on the final page of the Bid Schedule.

TOTAL BID PRICE: (a/k/a BID PROPOSAL)

s 6,651,909 89 BB 3,55/15

BIDDER'S SIGNATURE AND AFFIDAVIT

Bidder Bv (Signature of Partner or corporate officer) Attest: Secretary of Corporate Bidder (Corporate Seal

Affidavit on the following page should be subscribed and sworn to before a Notary Public

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CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION BID BOOKLET DECEMBER 2013

BID FORM (TO BE NOTARIZED)

AFFIDAVIT WHERE BIDDER IS AN INDIVIDUAL

STATE OF NEW YORK, COUNTY OF ______ ss:

I am the person described in and who executed the foregoing bid, and the several matters therein stated are in all respects true.

(Signature of the person who signed the Bid)

Subscribed and sworn to before me this _____ day of _____, ____,

Notary Public

AFFIDAVIT WHERE BIDDER IS A PARTNERSHIP

(Signature of Partner who signed the Bid)

Subscribed and sworn to before me this _____day of _____, ____,

Notary Public

AFFIDAVIT WHERE BIDDER IS A CORPORATION

STATE OF NEW YORK, COUNTY OF	baullo/ Covers	<u>></u> ss:
I am the Secret And	of the above named corporation	being duly sworn says: whose name is subscribed to and which
executed the foregoing bid. I reside at		vitose nume is substribed to the which
I have knowledge of the several matters the	herein stated, and they are in all fo	spects true.
	le le	ida
	(Signature of Corpora	ate Officer who signed the Bid)
Subscribed and sworn to before me this	- V	•
Sum day of Warch 2015	BY PUL	
CORN AUNA	OTARY PUB	
Notary Public	NOTIN P QUILLE	
U	★ No. 01GU6233691 ★	
	Exp. 01/03/19	
	PLEENS COUNTY OF	
	OFNEW	
CITY OF NEW YORK	C-5	BID BOOKLET

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION BID BOOKLET DECEMBER 2013

AFFIRMATION

PROJECT ID. HWK1048B

The undersigned bidder affirms and declares that said bidder is not in arrears to the City of New York upon debt, contract or taxes and is not a defaulter, as surety or otherwise, upon obligation to the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York, nor is there any proceeding pending relating to the responsibility or qualification of the bidder to receive public contracts except:

(If none, the bidder shall insert the word "None" in the space provided above.)

	ame of I	
Addre City		<u>SUNACE</u> State <u>DU</u> Zip Code <u>11429</u>
CHEC	K ONE	BOX AND INCLUDE APPROPRIATE NUMBER:
<u> </u>	Α-	Individual or Sole Proprietorship* SOCIAL SECURITY NUMBER
<u> </u>	В -	Partnership, Joint Venture or other unincorporated organization EMPLOYER IDENTIFICATION NUMBER
1 th	C-	Corporation EMPLOYER IDENTIFICATION NUMBER
		1136207587
By:		flette
_	Sig	nature
Title:	Soci	dans
	If a co	rporation, place seal here

This affirmation must be signed by an officer or duly authorized representative.

*Under the Federal Privacy Act the furnishing of Social Security Numbers by bidders on City contracts is voluntary. Failure to provide a Social Security Number will not result in a bidder's disqualification. Social Security Numbers will be used to identify bidders, proposers or vendors to ensure their compliance with laws, to assist the City in enforcement of laws, as well as to provide the City a means of identifying of businesses which seek City contracts.

BID BOND 1 FORM OF BID BOND

KNOW ALL MEN BY THESE PRESENTS. That we, J.L.J. IV Enterprises, Inc. 213-19 99th Avenue, Queens Village, NY 11429

hereinafter referred to as the "Principal", and Liberty Mutual Insurance Company 1200 MacArthur Blvd., Mahwah, NJ 07043

hereinafter referred to as the "Surety" are held and firmly bound to THE CITY OF NEW YORK, hereinafter referred to as the "CITY", or to its successors and assigns in the penal sum of

TEN PERCENT OF AMOUNT BID

(<u>10% Amt Bid</u>), Dollars lawful money of the United States, for the payment of which said sum of money well and truly to be made, we, and each of us, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Whereas, the Principal is about to submit (or has submitted) to the City the accompanying proposal, hereby made a part hereof, to enter into a contract in writing for

Cont. #HWK1048B - Reconstruction of Flushing Ave., Including Sewer mains, Street Lighting and Traffic Signal

Work - Boro of Brooklyn

NOW, THEREFORE, the conditions of this obligation are such that if the Principal shall not withdraw said Proposal without the consent of the City for a period of forty-five (45) days after the opening of bids and in the event of acceptance of the Principal's Proposal by the City, if the Principal shall:

(a) Within ten (10) days after notification by the City, execute in quadruplicate and deliver to the City all the executed counterparts of the Contract in the form set forth in the Contract Documents, in accordance with the proposal as accepted, and

(b) Furnish a performance bond and separate payment bond, as may be required by the City, for the faithful performance and proper fulfillment of such Contract, which bonds shall be satisfactory in all respects to the City and shall be executed by good and sufficient sureties, and

(c) In all respects perform the agreement created by the acceptance of said Proposal as provided in the Information for Bidders, bound herewith and made a part hereof, or if the City shall reject the aforesaid Proposal, then this obligation shall be null and void; otherwise to remain in full force and effect.



BID BOND 2

In the event that the Proposal of the Principal shall be accepted and the Contract be awarded to him the Surety hereunder agrees subject only to the payment by the Principal of the premium therefore, if requested by the City, to write the aforementioned performance and payment bonds in the form set forth in the Contract Documents.

It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall in no event exceed the penal amount of this obligation as herein stated.

There shall be no liability under this bond if, in the event of the acceptance of the Principal's Proposal by the City, either a performance bond or payment bond, or both, shall not be required by the City on or before the 30th day after the date on which the City signs the Contract.

The surety, for the value received, hereby stipulates and agrees that the obligations of the Surety and its bond shall in no way be impaired or affected by any postponements of the date upon which the City will receive or open bids, or by any extensions of the time within which the City may accept the Principal's Proposal, or by any waiver by the City of any of the requirements of the Information for Bidders, and the Surety hereby waives notice of any such postponements, extensions, or waivers.

IN WITNESS WHEREOF, the Principal and the Surety have hereunto set their hands and seals and such of them as are corporations have caused their corporate seals to be hereto affixed and these presents to be signed by their proper officers the <u>9th</u>_____ day of <u>March</u>_____. <u>2015</u>_.

J.L.J.	IV Enterprises, Inc.	(L.S.)
	Principal	
ву:	Aprox	

(Seal)

(Seal)

Liberty Mutual Insura	nce Company
By: Rufut	Vern
Robert Kempner,	Attorney-in-Fact

C-8

BID BOND 3.

ACKNOWLEDGMENT OF PRINCIPAL, IF A CORPORATION

		- C
State of NA NC		SS:
On this OUtr		$\partial 015$, before me personally came
	Ca-a to me kno	own, who, being by me duly sworn, did depose and say
that he resides at	lathituck NU	
that he is the		
the corporation desc	cribed in and which executed th	e foregoing instrument; that he knows the seal of said
corporation; that on	e of the seals affixed Rysaid ins	trument is such seal; that it was so affixed by order of
the directors of said	corporation and that he stand	his name thereto by like order.
	★ (No. 01GU6233691) Exp. 01/03/19 CP	Notary Public Notary Public
	OF NEWYO	
	OFNEW	
	ACKNOWLEDGMENT OF P	RINCIPAL, IF A PARTNERSHIP
and the second s		
State of	County of	88
On this	day of,	, before me personally appeared
	to me kno	own and known to me to be one of the members of the
firm of		described in and who executed the foregoing
	acknowledged to me that he exe	cuted the same as and for the act and deed of said
firm.		
		•
	а.	
	•	Notary Public
	ACKNOWLEDGMENT OF P	RINCIPAL, IF AN INDIVIDUAL
		and a second
State of	County of	SS:
On this	day of	, before me personally appeared
		own and known to me to be the person described in
· · · · ·	to me kn	Own and known to me to be the derson described m
and who executed f		
and who executed t		knowledged that he executed the same.
and who executed t		

Notary Public

AFFIX ACKNOWLEDGMENTS AND JUSTIFICATION OF SURETIES

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C-9

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ACKNOWLEGEMENT OF PRINCIPAL, OF A CORPORATION

STATE OF NANUOV SS: COUNTY OF On this \mathcal{A} day of 2015 before me personally came _ ronon to me known, who, being by me duly sworn did depose and say that he resides at WOX htuck. that he is the Secreta 11 of ILINE Meron Sesinc. the corporation described in and which executed the foregoing instrument; that he knows the seal of said corporation; that one of the seals affixed to the foregoing instrument is such seal; that it was an affixed by order of the board of directors of said corporation; and that he signed his name therein by like order. No. 01GU6233691 Exp. 01/03/19 Notary Pub ACKNOWLEGEMENT OF SURETY STATE OF New York **SS**: Nassau COUNTY OF March On this 9th day of 2015 . before me personally came Robert Kempner to me known, who, being by me duly sworn, did depose and say that he is an Attorney-In-Fact of Liberty Mutual Insurance Company the corporation described in and which executed the within instrument; that he knows the corporate seal of said corporation; that the seal affixed to the within instrument is such corporate seal, and that he signed and said instrument and affixed the said seal as Attorney-In-Fact by authority of the Board of Directors of said corporation and by authority of this office under the Standing Resolutions thereof. alified in Suffolk County 2018 Commission Expires March 23, My commission expires Notary Public

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND. This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated. Certificate No. 6777181 American Fire and Casualty Company Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company **POWER OF ATTORNEY** KNOWN ALL PERSONS BY THESE PRESENTS: That American Fire & Casualty Company and The Ohio Casualty Insurance Company are corporations duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, _____Joseph Sforzo; Robert Kempner; Robert W. O'Kane; Susan P. Hammel all of the city of Plainview , state of NY each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons. IN WITNESS WHEREOF, this Power of Atterney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed day of November 2014 thereto this 10th American Fire and Casualty Company INSU The Ohio Casualty Insurance Company 0/10 Liberty Mutual Insurance Company 1906 1919 1912 1991 West American Insurance Company guarantees CACINA Bv: David M. Carey, Assistant Secretary STATE OF PENNSYLVANIA SS COUNTY OF MONTGOMERY On this 10th day of November ca 2014, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of American Fire and Casualty Company, Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company, and that he, as such, being authorized so to do, residual value Attorney execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer. IN WITNESS WHEREOF, I have hereunto subscri PASTE ame and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written. ALL SA COMMONWEALTH OF PENNSYLVANIA OUNONWER Notarial Seal Teresa Pastella, Notary Public Plymouth Twp., Montgomery County Feresa Pastella, Notary Public OF My Commission Expires Merch 28, 2017 mber, Pennsylvania Association of Notario Po MASY This Power of Attorney Is made and executed putsion to and the total authority of the following By-laws and Authorizations of American Fire and Casualty Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows: ority of the following By-laws and Authorizations of American Fire and Casualty Company, The Ohio Casualty Insurance S . Jo ARTICLE IV - OFFICERS - Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make. execute. seal. acknowledge and deliver as surety any and all undertakings; bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so val executed, such instruments shall be as binding as if sloned by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under è Pe the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority. ARTICLE XIII - Execution of Contracts - SECTION 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president. E and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys in-fact subject to the limitations set forth in their cont respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary. Ô Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed. I, Gregory W. Davenport, the undersigned, Assistant Secretary, of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 9th day of March



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Gregory W. Davenport, Assistant Secretary

4:30 pm EST on any business day.

1-610-832-8240 between 9:00 am



LIBERTY MUTUAL INSURANCE COMPANY

FINANCIAL STATEMENT - DECEMBER 31, 2013

Liabilities

Assets	
Cash and Bank Deposits	\$1.118.180.550
*Bonds U.S Government	1.883.225.943
*Other Bonds	12.039.490.815
*Stocks	9.030.962.112
Real Estate	251.301.90°
Agents' Balances or Uncollected Premiums	4.781.042.931
Accrued Interest and Rents	149.855.386
Other Admitted Assets	15,216,749,451

Unearned Premiums
Reserve for Claims and Claims Expense
Funds Held Under Reinsurance Treaties
Reserve for Dividends to Policyholders
Additional Statutory Reserve
Reserve for Commissions. Taxes and
Other Liabilities
Total
Special Surplus Funds \$55.636.852
Capital Stock 11.250.000
Paid in Surplus 7.898.235.167
Unassigned Surplus 7.161.171.306
Surplus to Policyholders 15.126.396.325
Total Liabilities and Surplus



* Bonds are stated at amortized or investment value. Stocks at Association Market Values. The foregoing financial information is taken from Liberty Mutual Insurance Company's financial statement filed with the state of Massachusetts Department of Insurance.

I. TIM MIKOLAJEWSKI. Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the foregoing is a true, and correct statement of the Assets and Liabilities of said Corporation, as of December 31, 2013, to the best of my knowledge and belief.

IN WITNESS WHEREOF. I have hereunto set my hand and affixed the seal of said Corporation at Seattle. Washington, this 20th day of March, 2014.

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Assistant Secretary

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M/WBE PROGRAM

M/WBE UTILIZATION PLAN

<u>M/WBE Program Requirements</u>: The requirements for the M/WBE Program are set forth on the following pages of this Bid Booklet, in the section entitled "Notice to All Prospective Contractors".

<u>Schedule B: M/WBE Utilization Plan</u>: Schedule B: M/WBE Utilization Plan for this Contract is set forth in this Bid Booklet on the pages following the section entitled "Notice to All Prospective Contractors". The M/WBE Utilization Plan (Part I) indicates whether Participation Goals have been established for this Contract. If Participation Goals have been established for this Contract, the bidder must submit an M/WBE Utilization Plan (Part II) with its bid.

<u>Waiver</u>: The bidder may seek a full or partial pre-award waiver of the Participation Goals in accordance with the "Notice to All Prospective Contractors" (See Part A, Section 10). The bidder's request for a waiver must be submitted at least seven (7) calendar days prior to the bid date. Waiver requests submitted after the deadline will not be considered. The form for requesting a waiver of the Participation Goals is set forth in the M/WBE Utilization Plan (Part III).

Rejection of the Bid: The bidder must complete Schedule B: M/WBE Utilization Plan (Part II) set forth in this Bid Booklet on the pages following the section entitled "Notice to All Prospective Contractors". A Schedule B submitted by the bidder which does not include the Vendor Certification and Required Affirmations (See Section V of Part II) will be deemed to be non-responsive, unless a full waiver of the Participation Goals is granted (Schedule B, Part III). In the event that the City determines that the bidder has submitted a Schedule B where the Vendor Certification and Required Affirmations are completed but other aspects of the Schedule B are not complete, or contain a copy or computation error that is at odds with the Vendor Certification and Required Affirmations, the bidder will be notified by the Agency and will be given four (4) calendar days from receipt of notification to cure the specified deficiencies and return a completed Schedule B to the Agency. Failure to do so will result in a determination that the Bid is non-responsive. Receipt of notification is defined as the date notice is emailed or faxed (if the bidder has provided an email address or fax number), or no later than five (5) calendar days from the date of mailing or upon delivery, if delivered.

Impact on LBE Requirements: If Participation Goals have been established for the participation of M/WBEs, the contractor is not required to comply with the Locally Based Enterprise Program ("LBE"). The LBE Program is set forth in Article 67 of the Contract.

NOTICE TO ALL PROSPECTIVE CONTRACTORS

PARTICIPATION BY MINORITY-OWNED AND WOMEN-OWNED BUSINESS ENTERPRISES IN CITY PROCUREMENT

ARTICLE I. M/WBE PROGRAM

Local Law No. 129 of 2005 added and Local Law 1 of 2013 amended Section 6-129 of the Administrative Code of the City of New York (hereinafter "Section 6-129"). Section 6-129 establishes the program for participation in City procurement ("M/WBE Program") by minority- owned business enterprises ("MBEs") and women-owned business enterprises ("WBEs"), certified in accordance with Section 1304 of the New York City Charter. As stated in Section 6-129, the intent of the program is to address the impact of discrimination on the City's procurement process, and to promote the public interest in avoiding fraud and favoritism in the procurement process, increasing competition for City business, and lowering contract costs. The contract provisions contained herein are pursuant to Section 6-129, and the rules of the Department of Small Business Services ("DSBS") promulgated thereunder.

If this Contract is subject to the M/WBE Program established by Section 6-129, the specific requirements of MBE and/or WBE participation for this Contract are set forth in Schedule B of the Contract (entitled the "M/WBE Utilization Plan"), and are detailed below. The Contractor must comply with all applicable MBE and WBE requirements for this Contract.

All provisions of Section 6-129 are hereby incorporated in the Contract by reference and all terms used herein that are not defined herein shall have the meanings given such terms in Section 6-129. Article I, Part A, below, sets forth provisions related to the participation goals for construction, standard and professional services contracts. Article I, Part B, below, sets forth priscellaneous provisions related to the M/WBE Program.

PART A

PARTICIPATION GOALS FOR CONSTRUCTION, STANDARD AND PROFESSIONAL SERVICES CONTRACTS OR TASK ORDERS

1. The **MBE and/or WBE** Participation Goals established for this Contract or Task Orders issued pursuant to this Contract, ("**Participation Goals**"), as applicable, are set forth on Schedule B, Part I to this Contract (see Page 1, line 1 Total Participation Goals) or will be set forth on Schedule B, Part I to Task Orders issued pursuant to this Contract, as applicable.

The **Participation Goals** represent a percentage of the total dollar value of the Contract or Task Order, as applicable, that may be achieved by awarding subcontracts to firms certified with New York City Department of Small Business Services as MBEs and/or WBEs, and/or by crediting the participation of prime contractors and/or qualified joint ventures as provided in Section 3 below, unless the goals have been waived or modified by Agency in accordance with Section 6-129 and Part A, Sections 10 and 11 below, respectively.

2. If **Participation Goals** have been established for this Contract or Task Orders issued pursuant to this Contract, Contractor agrees or shall agree as a material term of the Contract that Contractor shall be subject to the **Participation Goals**, unless the goals are waived or modified by Agency in accordance with Section 6-129 and Part A, Sections 10 and 11 below, respectively.

3. If **Participation Goals** have been established for this Contract or Task Order issued pursuant to this Contract, a Contractor that is an MBE and/or WBE shall be permitted to count its own participation toward fulfillment of the relevant **Participation Goal**, provided that in accordance with Section 6-129 the value of Contractor's participation shall be determined by subtracting from the total value of the Contract or Task Order, as applicable, any amounts that the Contractor pays to direct subcontractors (as defined in Section 6-129(c)(13)), and provided further that a Contractor that is certified as both an MBE and a WBE may count its own participation either toward the goal for MBEs or the goal for WBEs, but not both.

A Contractor that is a qualified joint venture (as defined in Section 6-129(c)(30)) shall be permitted to count a percentage of its own participation toward fulfillment of the relevant **Participation Goal**. In accordance with Section 6-129, the value of Contractor's participation shall be determined by subtracting from the total value of the Contract or Task Order, as applicable, any amounts that Contractor pays to direct subcontractors, and then multiplying the remainder by the percentage to be applied to total profit to determine the amount to which an MBE or WBE is entitled pursuant to the joint venture agreement, provided that where a participant in a joint venture is certified as both an MBE and a WBE, such amount shall be counted either toward the goal for MBEs or the goal for WBEs, but not both.

4. A. If **Participation Goals** have been established for this Contract, a prospective contractor shall be required to submit with its bid or proposal, as applicable, a completed Schedule B, M/WBE Utilization Plan, Part II (see Pages 2-4) indicating: (a) whether the contractor is an MBE or WBE, or qualified joint venture; (b) the percentage of work it intends to award to direct subcontractors; and (c) in cases where the contractor intends to award direct subcontracts, a description of the type and dollar value of work designated for participation by MBEs and/or WBEs, and the time frames in which such work is scheduled to begin and end. In the event that this M/WBE Utilization Plan indicates that the bidder or proposer, as applicable, does not intend to meet the **Participation Goals**, the bid or proposal, as applicable, shall be deemed non-responsive, unless Agency has granted the bidder or proposer, as applicable, a contract with Section 6-129 and Part A, Section 10 below.

B. (i) If this Contract is for a master services agreement or other requirements type contract that will result in the issuance of Task Orders that will be individually registered ("Master Services Agreement") and is subject to M/WBE **Participation Goals**, a prospective contractor shall be required to submit with its bid or proposal, as applicable, a completed Schedule B, M/WBE Participation Requirements for Master Services Agreements That Will Require Individually Registered Task Orders, Part II (page 2) indicating the prospective contractor's certification and required affirmations to make all reasonable good faith efforts to meet participation goals established on each individual Task Order issued pursuant to this Contract, or if a partial waiver is obtained or such goals are modified by the Agency, to meet the modified **Participation Goals** by soliciting and obtaining the participation of certified MBE and/or WBE firms. In the event that the Schedule B indicates that the bidder or proposer, as applicable, does not intend to meet the **Participation Goals** that may be established on Task Orders issued pursuant to this Contract, the bid or proposal, as applicable, shall be deemed nonresponsive.

(ii) Participation Goals on a Master Services Agreement will be established for individual Task Orders issued after the Master Services Agreement is awarded. If Participation Goals have been established on a Task Order, a contractor shall be required to submit a Schedule B - M/WBE Utilization Plan For Independently Registered Task Orders That Are Issued Rursuant to Master Services Agreements, Part II (see Pages 2-4) indicating: (a) whether the contractor is an MBE or WBE, or qualified joint venture; (b) the percentage of work it intends to award to direct subcontractors; and (c) in cases where the contractor intends to award direct subcontracts, a description of the type and dollar value of work designated for participation by MBEs and/or WBEs, and the time frames in which such work is scheduled to begin and end. The contractor must engage in good faith efforts to meet the Participation Goals as established for the Task Order unless Agency has granted the contractor a pre-award waiver of the Participation Goals in accordance with Section 6-129 and Part A, Section 10 below.

C. THE BIDDER/PROPOSER MUST COMPLETE THE SCHEDULE B INCLUDED HEREIN (SCHEDULE B, PART II). A SCHEDULE B SUBMITTED BY THE BIDDER/PROPOSER WHICH DOES NOT INCLUDE THE VENDOR CERTIFICATION AND REQUIRED AFFIRMATIONS (SEE SECTION V OF PART II) WILL BE DEEMED TO BE NON-RESPONSIVE, UNLESS A FULL WAIVER OF THE PARTICIPATION GOALS IS GRANTED (SCHEDULE B, PART III). IN THE EVENT THAT THE CITY DETERMINES THAT THE BIDDER/PROPOSER HAS SUBMITTED A SCHEDULE B WHERE THE VENDOR CERTIFICATION AND REQUIRED AFFIRMATIONS ARE COMPLETED BUT OTHER ASPECTS OF THE SCHEDULE B ARE NOT COMPLETE, OR CONTAIN A COPY OR COMPUTATION ERROR THAT IS AT ODDS WITH THE VENDOR CERTIFICATION AND AFFIRMATIONS, THE BIDDER/PROPOSER WILL BE NOTIFIED BY THE AGENCY AND WILL BE GIVEN FOUR (4) CALENDAR DAYS FROM RECEIPT OF NOTIFICATION TO CURE THE SPECIFIED DEFICIENCIES AND RETURN A COMPLETED SCHEDULE B TO THE AGENCY. FAILURE TO DO

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SO WILL RESULT IN A DETERMINATION THAT THE BID/PROPOSAL IS NON-RESPONSIVE. RECEIPT OF NOTIFICATION IS DEFINED AS THE DATE NOTICE IS E-MAILED OR FAXED (IF THE BIDDER/PROPOSER HAS PROVIDED AN E-MAIL ADDRESS OR FAX NUMBER), OR NO LATER THAN FIVE (5) CALENDAR DAYS FROM THE DATE OF MAILING OR UPON DELIVERY, IF DELIVERED.

5. Where an M/WBE Utilization Plan has been submitted, the Contractor shall, within 30 days of issuance by Agency of a notice to proceed, submit a list of proposed persons or entities to which it intends to award subcontracts within the subsequent 12 months. In the case of multiyear contracts, such list shall also be submitted every year thereafter. The Agency may also require the Contractor to report periodically about the contracts awarded by its direct subcontractors to indirect subcontractors (as defined in Section 6-129(c)(22)). PLEASE NOTE: If this Contract is a public works project subject to GML §101(5) (i.e., a contract valued at or below \$3M for projects in New York City) or if the Contract is subject to a project labor agreement in accordance with Labor Law §222, and the bidder is required to identify at the time of bid submission its intended subcontractors for the Wicks trades (plumbing and gas fitting; steam heating, hot water heating, ventilating and air conditioning (HVAC); and electric wiring), the Contractor must identify all those to which it intends to award construction subcontracts for any portion of the Wicks trade work at the time of bid submission, regardless of what point in the life of the contract such subcontracts will occur. In identifying intended subcontractors in the bid submission, bidders may satisfy any Participation Goals established for this Contract by proposing one or more subcontractors that are MBEs and/or WBEs for any portion of the Wicks trade work. In the event that the Contractor's selection of a subcontractor is disapproved, the Contractor shall have a reasonable time to propose alternate subcontractors.

6. MBE and WBE firms must be certified by DSBS in order for the Contractor to credit such firms' participation toward the attainment of the **Participation Goals**. Such certification must occur prior to the firms' commencement of work. A list of MBE and WBE firms may be obtained from the DSBS website at www.nyc.gov/buycertified, by emailing DSBS at buyer@sbs.nyc.gov, by calling (212) 513-6356, or by visiting or writing DSBS at 110 William St., New York, New York, 10038, 7th floor. Eligible firms that have not yet been certified may contact DSBS in order to seek certification by visiting www.nyc.gov/getcertified, emailing MWBE@sbs.nyc.gov, or calling the DSBS certification helpline at (212) 513-6311. A firm that is certified as both an MBE and a WBE may be counted either toward the goal for MBEs or the goal for WBEs, but not both. No credit shall be given for participation by a graduate MBE or graduate WBE, as defined in Section 6-129(c)(20).

7. Where an M/WBE Utilization Plan has been submitted the Contractor shall, with each voucher for payment, and/or periodically as Agency may require, submit statements, certified under penalty of perjury, which shall include, but not be limited to;: the total amount the Contractor paid to its direct subcontractors, and, where applicable pursuant to Section 6-129(j), the total amount direct subcontractors paid to indirect subcontractors; the names, addresses and contact numbers of each MBE or WBE hired as a subcontractor by the Contractor, and, where applicable, hired by any of the Contractor's direct subcontractors; and the dates and amounts paid to each MBE or WBE. The Contractor shall also submit, along with its voucher for final payment: the total amount it paid to subcontractors, and, where applicable pursuant to Section 6-129(j), the total amount its direct subcontractors paid directly to their indirect subcontractors; and a final list, certified under penalty of perjury, which shall include the name, address and contact information of each subcontractor that is an MBE or WBE, the work performed by, and the dates and amounts paid to each.

8. If payments made to, or work performed by, MBEs or WBEs are less than the amount specified in the Contractor's M/WBE Utilization Plan, Agency shall take appropriate action, in accordance with Section 6-129 and Article II below, unless the Contractor has obtained a modification of its M/WBE Utilization Plan in accordance with Section 6-129 and Part A, Section 11 below.

9. Where an **M/WBE** Utilization Plan has been submitted, and the Contractor requests a change order the value of which exceeds the greater of 10 percent of the Contract or Task Order, as applicable, or \$500,000, Agency shall review the scope of work for the Contract or Task Order, as applicable, and the scale and types of work involved in the change order, and determine whether the **Participation Goals** should be modified.

10. Pre-award waiver of the **Participation Goals**. (a) A bidder or proposer, or contractor with respect to a Task Order, may seek a pre-award full or partial waiver of the **Participation Goals** in accordance with Section 6-129, which requests that Agency change one or more **Participation Goals** on the grounds that the **Participation Goals** are unreasonable in light of the availability of certified firms to perform the services required, or by demonstrating that it has legitimate business reasons for proposing a lower level of subcontracting in its M/WBE Utilization Plan.

(b) To apply for a full or partial waiver of the **Participation Goals**, a bidder, proposer, or contractor, as applicable, must complete Part III (Page 5) of Schedule B and submit such request no later than seven (7) calendar days prior to the date and time the bids, proposals, or Task Orders are due, in writing to the Agency by email at <u>poped@ddc.nyc.gov</u> or via facsimile at (718) 391-1886. Bidders, proposers, or contractors, as applicable, who have submitted requests will receive an Agency response by no later than two (2) calendar days prior to the due date for bids, proposals, or Task Orders; provided, however, that if that date would fall on a weekend or holiday, an Agency response will be provided by close-of-business on the business day before such weekend or holiday date.

(c) If the Agency determines that the **Participation Goals** are unreasonable in light of the availability of certified firms to perform the services required, it shall revise the solicitation and extend the deadline for bids and proposals, or revise the Task Order, as applicable.

(d) Agency may grant a full or partial waiver of the **Participation Goals** to a bidder, proposer or contractor, as applicable, who demonstrates—before submission of the bid, proposal or Task Order, as applicable—that it has legitimate business reasons for proposing the level of subcontracting in its **M/WBE** Utilization Plan. In making its determination, Agency shall consider factors that shall include, but not be limited to, whether the bidder, proposer or contractor, as applicable, has the capacity and the bona fibe intention to perform the Contract without any subcontracting, or to perform the Contract without awarding the amount of subcontracts represented by the **Participation Goals**. In making such determination, Agency may consider whether the **M/WBE** Utilization Plan is consistent with past subcontracting practices of the bidder, proposer or contractor, as applicable, has made efforts to form a joint venture with a certified firm, and whether the bidder, proposer, or contractor, as applicable, has made ego faith efforts to identify other portions of the Contract that it intends to subcontract.

11. Modification of M/WBE Utilization Plan. (a) A Contractor may request a modification of its M/WBE Utilization Plan after award of this Contract. PDEASE NOTE: If this Contract is a public works project subject to GML §101(5) (i.e., a contract valued at or below \$3M for projects in New York City) or if the Contract is subject to a project labor agreement in accordance with Labor Law §222, and the bidder is required to identify at the time of bid submission its intended subcontractors for the Wicks trades (plumbing and gas fitting; steam heating, hot water heating, ventilating and air conditioning (HVAC); and electric wiring), the Contractor may request a Modification of its M/WBE Utilization Plan as part of its bid submission. The Agency may grant a request for Modification of a Contractor's M/WBE Utilization Plan if it determines that the Contractor has established, with appropriate documentary and other evidence, that it made reasonable, good faith efforts to meet the Participation Goals. In making such determination, Agency shall consider evidence of the following efforts, as applicable, along with any other relevant factors:

- (i) The Contractor advertised opportunities to participate in the Contract, where appropriate, in general circulation media, trade and professional association publications and small business media, and publications of minority and women's business organizations;
- (ii) The Contractor provided notice of specific opportunities to participate in the Contract, in a timely manner, to minority and women's business organizations;
- (iii) The Contractor sent written notices, by certified mail or facsimile, in a timely manner, to advise MBEs or WBEs that their interest in the Contract was solicited;
- (iv) The Contractor made efforts to identify portions of the work that could be substituted for portions originally designated for participation by MBEs and/or WBEs in the M/WBE Utilization Plan, and for which the Contractor claims an inability to retain MBEs or WBEs;

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- (v) The Contractor held meetings with MBEs and/or WBEs prior to the date their bids or proposals were due, for the purpose of explaining in detail the scope and requirements of the work for which their bids or proposals were solicited;
- (vi) The Contractor made efforts to negotiate with MBEs and/or WBEs as relevant to perform specific subcontracts, or act as suppliers or service providers;
- (vii) Timely written requests for assistance made by the Contractor to Agency's M/WBE liaison officer and to DSBS;
- (viii) Description of how recommendations made by DSBS and Agency were acted upon and an explanation of why action upon such recommendations did not lead to the desired level of participation of MBEs and/or WBEs.

Agency's M/WBE officer shall provide written notice to the Contractor of the determination.

(b) The Agency may modify the **Participation Goals** when the scope of the work has been changed by the Agency in a manner that affects the scale and types of work that the Contractor indicated in its **M/WBE** Utilization Plan would be awarded to subcontractors.

12. If this Contract is for an indefinite quantity of construction, standard or professional services or is a requirements type contract and the Contractor has submitted an M/WBE Utilization Plan and has committed to subcontract work to MBEs and/or WBEs in order to meet the **Participation Goals**, the Contractor will not be deemed in violation of the M/WBE Program requirements for this Contract with regard to any work which was intended to be subcontracted to an MBE and/or WBE to the extent that the Agency has determined that such work is not needed.

13. If **Participation Goals** have been established for this Contract or a Task Order issued pursuant to this Contract, at least once annually during the term of the Contract or Task Order, as applicable, Agency shall review the Contractor's progress toward attainment of its M/WBE Utilization Plan, including but not limited to, by reviewing the percentage of work the Contractor has actually awarded to MBE and/or WBE subcontractors and the payments the Contractor made to such subcontractors.

14. If **Participation Goals** have been established for this Contract or a Task Order issued pursuant to this Contract, Agency shall evaluate and assess the Contractor's performance in meeting those goals, and such evaluation and assessment shall become part of the Contractor's overall contract performance evaluation.

PART B: MISCELLANEOUS

1. The Contractor shall take notice that, if this solicitation requires the establishment of an M/WBEUtilization Plan, the resulting contract may be addited by DSBS to determine compliance with Section 6-129. See §6-129(e)(10). Furthermore, such resulting contract may also be examined by the City's Comptroller to assess compliance with the M/WBE Utilization Plan

2. Pursuant to DSBS rules, construction contracts that include a requirement for an M/WBE Utilization Plan shall not be subject to the law governing Locally Based Enterprises set forth in Section 6-108.1 of the Administrative Code of the City of New York.

3. DSBS is available to assist contractors and potential contractors in determining the availability of MBEs and/or WBEs to participate as subcontractors, and in identifying opportunities that are appropriate for participation by MBEs and/or WBEs in contracts.

4. Prospective contractors are encouraged to enter into qualified joint venture agreements with MBEs and/or WBEs as defined by Section 6-129(c)(30).



5. By submitting a bid or proposal the Contractor hereby acknowledges its understanding of the M/WBE Program requirements set forth herein and the pertinent provisions of Section 6-129, and any rules promulgated thereunder, and if awarded this Contract, the Contractor hereby agrees to comply with the M/WBE Program requirements of this Contract and pertinent provisions of Section 6-129, and any rules promulgated thereunder, all of which shall be deemed to be material terms of this Contract. The Contractor hereby agrees to make all reasonable, good faith efforts to solicit and obtain the participation of MBEs and/or WBEs to meet the required **Participation Goals**.

ARTICLE II. ENFORCEMENT

1. If Agency determines that a bidder or proposer, as applicable, has, in relation to this procurement, violated Section 6-129 or the DSBS rules promulgated pursuant to Section 6-129, Agency may disqualify such bidder or proposer, as applicable, from competing for this Contract and the Agency may revoke such bidder's or proposer's prequalification status, if applicable.

2. Whenever Agency believes that the Contractor or a subcontractor is not in compliance with Section 6-129 or the DSBS rules promulgated pursuant to Section 6-129, or any provision of this Contract that implements Section 6-129, including, but not limited to any M/WBE Utilization Plan, Agency shall send a written notice to the Contractor describing the alleged noncompliance and offering the Contractor an opportunity to be heard. Agency shall then conduct an investigation to determine whether such Contractor or subcontractor is in compliance.

3. In the event that the Contractor has been found to have violated Section 6-129, the DSBS rules promulgated pursuant to Section 6-129, or any provision of this Contract that implements Section 6-129, including, but not limited to, any M/WBE Utilization Plan, Agency may determine that one of the following actions should be taken:

- (a) entering into an agreement with the Contractor allowing the Contractor to cure the violation;
- (b) revoking the Contractor's pre-qualification to bid or make proposals for future contracts;
- (c) making a finding that the Contractor is in default of the Contracy;
- (d) terminating the Contract;
- (e) declaring the Contractor to be in breach of Contract;
- (f) withholding payment or reimbursement;
- (g) determining not to renew the Contract;
- (h) assessing actual and consequential damages;
- (i) assessing liquidated damages or reducing fees, provided that liquidated damages may be based on amounts representing costs of delays in carrying out the purposes of the M/WBE Program, or in meeting the purposes of the Contract, the costs of meeting utilization goals through additional procurements, the administrative costs of investigation and enforcement, or other factors set forth in the Contract;
- (j) exercising rights under the Contract to procure goods, services or construction from another contractor and charge the cost of such contract to the Contractor that has been found to be in noncompliance; or
- (k) taking any other appropriate remedy.

4. If an M/WBE Utilization Plan has been submitted, and pursuant to this Article II, Section 3, the Contractor has been found to have failed to fulfill its **Participation Goals** contained in its M/WBE Utilization Plan or the **Participation Goals** as modified by Agency pursuant to Article I, Part A, Section 11, Agency may assess liquidated damages in the amount of ten percent (10%) of the difference between the dollar amount of work required to be awarded to MBE and/or WBE firms to meet the **Participation Goals** and the dollar amount the Contractor actually awarded and paid, and/or credited, to MBE and/or WBE firms. In view of the difficulty of accurately ascertaining the loss which the City will suffer by reason of Contractor's failure to meet the **Participation Goals**, the foregoing amount is hereby fixed and agreed as the liquidated damages that the City will suffer by reason of such failure, and not as a penalty. Agency may deduct and retain out of any monies which may become due under this Contract the amount of any such liquidated damages; and in case the amount which may become due under this Contract shall be less than the amount of liquidated damages suffered by the City, the Contractor shall be liable to pay the difference.

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5. Whenever Agency has reason to believe that an MBE and/or WBE is not qualified for certification, or is participating in a contract in a manner that does not serve a commercially useful function (as defined in Section 6-129(c)(8)), or has violated any provision of Section 6-129, Agency shall notify the Commissioner of DSBS who shall determine whether the certification of such business enterprise should be revoked.

6. Statements made in any instrument submitted to Agency pursuant to Section 6-129 shall be submitted under penalty of perjury and any false or misleading statement or omission shall be grounds for the application of any applicable criminal and/or civil penalties for perjury. The making of a false or fraudulent statement by an MBE and/or WBE in any instrument submitted pursuant to Section 6-129 shall, in addition, be grounds for revocation of its certification.

7. The Contractor's record in implementing its **MWBE** Utilization Plan shall be a factor in the evaluation of its performance. Whenever Agency determines that a Contractor's compliance with an **M/WBE** Utilization Plan has been unsatisfactory, Agency shall, after consultation with the City Chief Procurement Officer, file an advice of caution form for inclusion in VENDEX as caution data.

SCHEDULE B – M/WBE Utilization Plan Part I: M/WBE Participation Goals

Part I to be completed by contracting agency

Contract Overview						
APT E- Pin #	85015B0081	FMS	Project ID	#: <u>HWK10</u>	48B	
Project Title/ Agency PIN #	Reconstruction of Flushing Avenue / 8502015HW0027C					
Bid/Proposal Response Date						
Contracting Agency	Department of Design and	Construction				
Agency Address	30-30 Thomson Ave.	City Long Isla	nd City	State NY	_ Zip Code _ 1110	
Contact Person	Ramon Rodriguez	Title	Deputy	ACCO		
Telephone #	(718) 391-1505	Email	RODR	IGUR@ddc	.nyc.gov	
Project Description (atte	ach additional pages if necessary)		$A \downarrow i$		\geq	
ľ		TO WILLIAMS FERFRONT GR WALK RECON ND TRAFFIC S	BURG STI EENWAY STRUGTIG IGNAL W	REET ON, SEWER	, .	
M/WBE Participation G Enter the percentage amount I Professional Services.	or each group or for an unspecified y	ogal. Please note th	at there are i	io goals for Asi	an Amoricans in	

Prime Contract Industry: Construction

Percentage	
EXEMPT %	
UNSPECIFIED*	
UNSPECIFIED*	
UNSPECIFIED*	
UNSPECIFIED*	
EXEMPT %	Line 1
	EXEMPT % UNSPECIFIED* UNSPECIFIED* UNSPECIFIED* UNSPECIFIED*

*Note: For this procurement, individual ethnicity and gender goals are not specified. The Total Participation Goal for construction contracts may be met by using either Black-American, Hispanic-American, Asian American, or Women certified firms or any combination of such firms.

APT E-PIN #: _____

	APT E-	
Tax ID #:	PIN # :	
		,,

SCHEDULE B - Part II: M/WBE Participation Plan

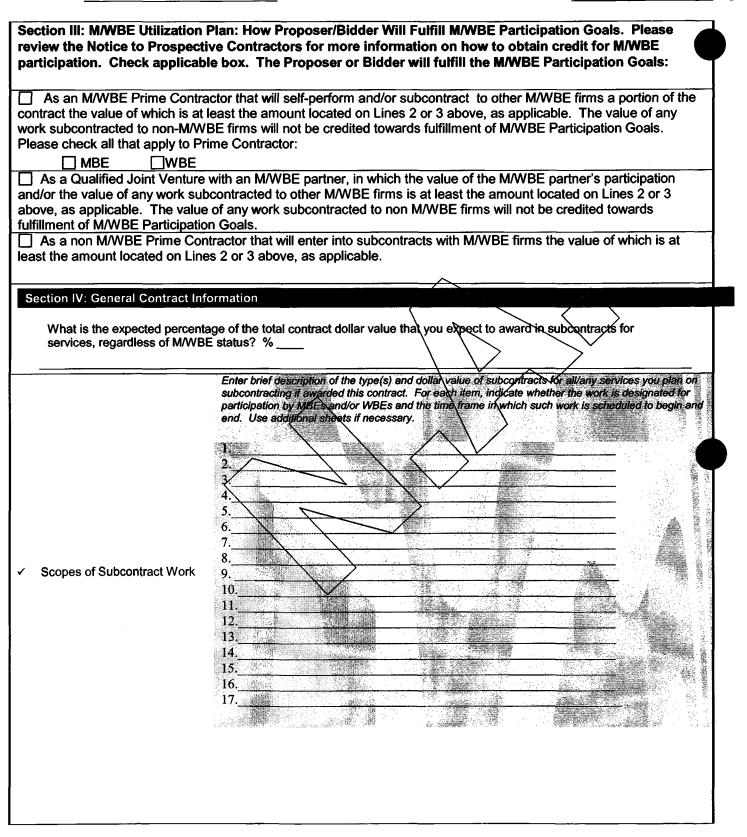
Part II to be completed by the bidder/proposer.

Please note: For Non-M/WBE Prime Contractors who will NOT subcontract any services and will self-perform the entire contract, you must obtain a FULL waiver by completing the Waiver Application on pages 17 and 18 and timely submitting it to the contracting agency pursuant to the Notice to Prospective Contractors. Once a FULL WAIVER is granted, it must be included with your bid or proposal and you do not have to complete or submit this form with your bid or proposal.

Section I: Prime Contractor Contact Information							
Tax ID #			FMS Vendor ID #				
Business Name	Business Name			Contact Person			
Address	iress						
Telephone #	Email	\checkmark		\square	<u> </u>		
Section II: M/WBE Utilization Goal Calcul				bsec	tion.		
PRIME CONTRACTOR ADOPTING AG			IPATION GOALS				
For Prime Contractors (including Qualified Joint Ventures and M/WBE firms) adopting Agency M/WBE	Total Bid/Proposal Value		Agency Total Participation Goals (Line 1, Page 13)		Calculated M/WBE Participation Amount		
Participation Goals. Calculate the total dollar value of your total bid that you agree will be awarded to I/WBE subcontractors for services and/or redited to an M/WBE prime contractor or Qualified Joint Venture.		$\langle \rangle$			- -		
Please review the Notice to Prospective Contractors for more information on how to obtain credit for M/WBE participation.	s	x		=	\$ Line 2		
PRIME CONTRACTOR OBTAINED PARTIAL WAIVER APPROVAL: ADOPTING MODIFIED M/WBE PARTICIPATION GOALS							
For Prime Contractors (including Qualified Joint Ventures and M/WBE	Total Bid/Proposal Value		Adjusted Participation Goal (From Partial Waiver)		Calculated M/WBE Participation Amount		
firms) adopting Modified M/WBE Participation Goals.							
Calculate the total dollar value of your total bid that you agree will be awarded to MWBE subcontractors for services and/or credited to an MWBE prime contractor or Qualified Joint Venture.							
Please review the Notice to Prospective Contractors for more information on how to obtain credit for M/WBE participation.	\$	x		E	\$ Line 3		

Tax ID #:

APT E-PIN #:



Tax ID #:

APT E-PIN #:

Section V: Vendor Certification and Required Affirmations

I hereby:

1) acknowledge my understanding of the M/WBE participation requirements as set forth herein and the pertinent provisions of Section 6-129 of the Administrative Code of the City of New York ("Section 6-129"), and the rules promulgated thereunder;

2) affirm that the information supplied in support of this M/WBE Utilization Plan is true and correct; 3) agree, if awarded this Contract, to comply with the M/WBE participation requirements of this Contract, the pertinent provisions of Section 6-129, and the rules promulgated thereunder, all of which shall be deemed to be material terms of this Contract;

4) agree and affirm that it is a material term of this Contract that the Vendor will award the total dollar value of the M/WBE Participation Goals to certified MBEs and/or WBEs, unless a full waiver is obtained or such goals are modified by the Agency; and

5) agree and affirm, if awarded this Contract, to make all reasonable, good faith efforts to meet the *M/WBE Participation Goals, or If a partial waiver* is obtained or such goals are modified by the Agency, to meet the modified Participation Goals by soliciting and obtaining the participation of certified MBE and/or WBE firms.

Signature	Date
Print Name	Title

SCHEDULE B - PART III - REQUEST FOR WAIVER OF M/WBE PARTICIPATION REQUIREMENT

Contract Overview			
Tax ID #		FMS V	/endor ID #
Business Name			
Contact Name	Telephor		Email
Type of Procurement	Competitive Sealed Bids [Other	Bid/Response Due Date
APT E-PIN # (for this procurement):			Contracting Agency:
M/WBE Participat	ion Goals as described in bid/sol Agency M/WBE Participation Goal	11. A.	ùment s
Proposed MANRE Par	ticipation Goal as anticipated by ve	ndor seekind	g waiver
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			aith by the bidder/proposer to be subcontracted Contractor or Qualified Joint Venture.
			ail below (attach additional pages if needed)
		<u> </u>	
	•	capacity and	d good faith intention to perform all such work
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TYPE OF Contract		ENTITY		DATE COMPLETED
- Manager at enti	ty that hired vendor (N	lame/Phone No./Email)		
Total Contract Amount	\$	Total Amount Subcontracted \$		
Type of Work Subcontracted		\frown	$\searrow \not \leftarrow$	\
TYPE OF Contract		AGENCY/ENTITY	$\overline{}$	DATE COMPLETED
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Total Contract Amount	\$	Total Amount Subcontracted \$		
Item of Work		Item of Work Subcontracted		Item of Work
Subcontracted and alue of subcontract		and Value of subcontract		Subcontracted and Value of subcontract
	CATION : I hereby affi		upplied in support of	his waiver request is true and
Signature:			Date:	
Jignature.			Title:	

APPRENTICESHIP PROGRAM REQUIREMENTS

Bidders are advised that the Apprenticeship Program Requirements set forth below apply to each contract for which a check mark is indicated before the word "Yes". Compliance with these requirements will be determined solely by the City.

 $\sqrt{1}$ YES _____NO

(1) Apprenticeship Program Requirements

<u>Notice to Bidders</u>: Please be advised that, pursuant to the authority granted to the City under Labor Law Section 816-b, the Department of Design and Construction hereby requires that the contractor awarded a contract as a result of this Invitation for Bids, and any of its subcontractors with subcontracts worth one million dollars or over, have, prior to entering into such contract or subcontract, apprenticeship agreements appropriate for the type and scope of work to be performed that have been registered with, and approved by, the New York State Commissioner of Labor. In addition, the contractor and its subcontractors will be required to show that such apprenticeship programs have three years of current, successful experience in providing career opportunities.

The failure to prove, upon request, that these requirements have been met shall result in the contract not being awarded to the contractor or the subcontract not being approved.

Please be further advised that, pursuant to Labor Law Section 220, the allowable ratio of apprentices to journeypersons in any craft classification shall not be greater than the ratio permitted to the contractor as to its workforce on any job under the registered apprenticeship program.

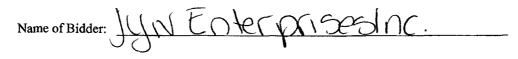
(2) Apprenticeship Program Questionnaire

The bidder must submit a completed and signed Apprenticeship Program Questionnaire. The Questionnaire is set forth on the following page of the Bid Booklet.

APPRENTICESHIP PROGRAM QUESTIONNAIRE

PROJECT ID: HWK1048B

The bidder must submit a completed and signed Apprenticeship Program Questionnaire.



1. Does the bidder have an Apprenticeship Program appropriate for the type and scope of work to be performed? [Note: Participation may be by either direct sponsorship or through collective bargaining agreement(s).]



- Has the bidder's Apprenticeship Program been registered with, and approved by, the New York State Commissioner of Labor?
 YES NO
- Has the bidder's Apprenticeship Program had three years of successful experience in providing career opportunities?
 YES NO

If the answer to Question #3 is "Yes", the bidder shall, in the space below, provide information regarding the experience the Apprenticeship Program has had in providing career opportunities. The bidder may attach additional pages if necessary.

) pharam (MERIANT. Bidder: reta By: Title: of Partner or Corporate Officer) Date:

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION 20

BID BOOKLET DECEMBER 2013

LOCAL 731 Training Fund

LIUNA

3411 35th Avenue Astoria, NY 11106

Tel: 718-752-9860 • Fax: 718-752-9880

May 8, 2015

To Whom It May Concern:

This letter is to confirm JL/IV Enterprises, Inc. has a signed agreement with Union Local 731. Union Local 731 has an Apprenticeship Program approved by the New York State Department

of Labor.

Sincerely,

P huscello

Michael Truscello

Apprenticeship Coordinator



TOTAL P.01



HIGHWAY, ROAD & STREET CONSTRUCTION LABORERS' LOCAL UNION 1010

136-25 37th Avenue, Suite 502 • Flushing, NY 11354 Phone: (718) 886-3310 • Fax: (718) 886-8885

JLJIV Enterprises Inc. 213-19 99th Avenue Queens Village, NY 11429

May 8th, 2015

Dear Sir/Madam:

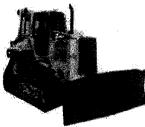
This will confirm that (Local 1010 Apprentice, Skill Improvement and Training Fund) to which you contribute, sponsors the Local 1010 Pavers Join Apprenticeship Committee. The Local 1010 Pavers JAC is a New York State Department of Labor Approved apprenticeship program registered under Sponsor # 12607 and ATP Code 18-514 for Skilled Construction Craft Laborers.

If you have any questions, please contact the undersigned.

Very truly yours, Highway, Road & Street Construction Laborers' Local1010.

Francisco Fernandez Secretary-Treasurer





International Union Of Operating Engineers Local 15, 15A, 15B, 15C & 15D

training center



APPRENTICESHIP • SKILL IMPROVEMENT & SAFETY P.O. BOX 489 • STATION B • HOWARD BEACH, NEW YORK 11414 (718) 835-0400 • FAX (718) 835-2210

UNION TRUSTEES JAMES T. CALLAHAN THOMAS A. CALLAHAN PATRICK J. PETERSON DIRECTOR EMPLOYER TRUSTEES FRANK DIMENNA JOHN BRUNETTI

May 8, 2015

JLJ IV Enterprises Inc. 213-19 99th Ave. Queens Village, NY 11429

To Whom It May Concern:

Please be advised that The International Union of Operating Engineers Local 15 has an Apprentice program registered with the New York State Department of Labor which meets the standards established by the Commissioner of Labor and the United States Department of Labor, Bureau of Apprenticeship Training in accordance with (29CFR29).

The IUOE Local 15 Apprentice Training Program is a joint apprenticeship committee operated program. The committee is composed of an equal number of representatives of the employers and of the employees represented by a bona fide collective bargaining agreement and has been established to conduct, operate, and administer the apprenticeship program.

Since the above-mentioned employers are signatory to our agreements, they are therefore participants in our apprenticeship training program.

If any further information is needed, please do not hesitate to contact me at the above number.

Very truly yours

Patrick Peterson Director of Training

PP/ev

Project ID. HUKI048B

SAFETY QUESTIONNAIRE

The bidder must include, with its bid, all information requested on this Safety Questionnaire. Failure to provide a completed and signed Safety Questionnaire at the time of bid opening may result in disqualification of the bid as non-responsive.

1. Bidder Information:

Company Name: 1111 E Oter Pr	ises Inc.	······································
DDC Project Number: HWK1048	3	
Company Size: Ten (10)	employees or less	
Greater t	han ten (10) employees	
Company has previously worked for DDC	YES	NO
2. Type(s) of Construction Work		
TYPE OF WORK General Building Construction Residential Building Construction Nonresidential Building Construction Heavy Construction, except building	LAST 3 YEARS	THIS PROJECT
Highway and Street Construction Heavy Construction, except highways Plumbing, Heating, HVAC Painting and Paper Hanging	100	100

3. Experience Modification Rate:

Masonry, Stonework and Plastering

Carpentry and Floor Work Roofing, Siding, and Sheet Metal

Specialty Trade Contracting

Electrical Work

Concrete Work

Asbestos Abatement Other (specify)

The Experience Modification Rate (EMR) is a rating generated by the National Council of Compensation Insurance (NCCI). This rating is used to determine the contractor's premium for worker's compensation insurance. The contractor may obtain its EMR by contacting its insurance broker or the NCCI. If the contractor cannot obtain its EMR, it must submit a written explanation as to why.

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Project ID. HUNKIDU8B

The Contractor must indicate its <u>Intrastate and Interstate EMR</u> for the past three years. [Note: For contractors with less than three years of experience, the EMR will be considered to be 1.00].

YEAR	INTRASTATE RATE	INTERSTATE RATE
2014		1.02
2013		.91
DOID		

If the Intrastate and/or Interstate EMR for any of the past three years is greater than 1.00, the contractor must attach, to this questionnaire, a written explanation for the rating and identify what corrective action was taken to correct the situation resulting in that rating.

4. OSHA Information:

YES	<u>NO</u>
YES	<u></u> NO

Contractor has received a willful violation issued by OSHA or New York City Department of Buildings (NYCDOB) within the last three years.

_ NO Contractor has had an incident requiring OSHA notification within 8 hours (all work-related fatalities) or an incident requiring OSHA notification within 24 hours (all work-related impatient hospitalizations, all amputations and all losses of an eye).

The Occupational Safety and Health Act (OSHA) of 1970 requires employers with ten or more employees, on a yearly basis to complete and maintain on file the form entitled "Log of Work-related Injuries and Illnesses". This form is commonly referred to as the OSHA 300 Log (OSHA 200 Log for 2001 and earlier).

The OSHA 300 Log must be submitted for the last three years for contractors with more than ten employees.

The Contractor must indicate the total number of hours worked by its employees, as reflected in payroll records for the past three years.

The contractor must submit the Incident Rate for Lost Time Injuries (the Incident Rate) for the past three years. The Incident Rate is calculated in accordance with the formula set forth below. For each given year, the total number of incidents is the total number of non-fatal injuries and illnesses reported on the OSHA 300 Log. The 200,000 hours represents the equivalent of 100 employees working forty hours a week, fifty weeks per year.

Incident Rate =	Total Number of Incidents Total Number of Hours Worked b	
YEAR	TOTAL NUMBERS OF HOURS WORKED BY EMPLOYEES	INCIDENT RATE
ROIY	-210,000	381
2013	202.000	4.95
2012	280,000	1.9

BID BOOKLET DECEMBER 2013

Project ID. HUK 10483

If the contractor's Incident Rate for any of the past three years is one point higher than the Incident Rate for the type of construction it performs (listed below), the contractor must attach, to this questionnaire, a written explanation for the relatively high rate.

General Building Construction	8.5
Residential Building Construction	7.0
Nonresidential Building Construction	10.2
Heavy Construction, except building	8.7
Highway and Street Construction	9.7
Heavy Construction, except highways	8.3
Plumbing, Heating, HVAC	11.3
Painting and Paper Hanging	6.9
Electrical Work	9.5
Masonry, Stonework and Plastering	10.5
Carpentry and Floor Work	12.2
Roofing, Siding, and Sheet Metal	10.3
Concrete Work	8.6
Specialty Trade Contracting	8.6

5. Safety Performance on Previous DDC Project(s)

YES _____NO Contractor previously audited by the DDC Office of Site Safety.

DDC Project Number(s): UEI295, Hof200944 HullP2019.

YES NO

Accident on previous DDC Project(s).

DDC Project Number(s): MEDSGT, HUP20094X HWHP2019.

___YES ___NO

Fatality or Life-altering Injury on DDC Project(s) within the last three years. [Examples of a life-altering injury include loss of limb, loss of a sense (e.g., sight, hearing), or loss of neurological function].

DDC Project Number(s): Date: 3/2010 Let By: (Signature of Owner, Partner, Corporate Officer) creta Title:

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	cord information about every wor		d about every work	related injury or liness that invo	IIInesses ves loss of consciousness, restricted work	protects th possible w occupation	e confide hile the i hal safety	entiality of nformatio	i employee n is being i		int	U.S. D upstional Sala	201 2 epartment y and Meekin A	of Labor
care profes use two line	sional. You must also record work	related injuries an You must compare	d illnesses that m te an dryiny and ill	et any of the specific recording marincident Report (OSHA For	nd illnesses that are diagnosed by a physi criteria listed in 29 CFR Part 1904.8 through 1 301) or equivalent form for each injury or	1904.12. Feel It	ee ko				Establishment nan Chy Que	JZJ	TK Eat ge sm N	er fines
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verily that the entries are Using the Log, count the ad no cases, write "0." Employees, former empk	complete and accurate individual entries you m oyees, and their represe	below completing this summary ade for each category. Then write	: e the totals below, making s he OSHA Form 300 in its a	Inesses occurred during the year. Remember to review the Log ure you've added the entries from every page of the Log. If you inferty. They also have limited access to the OSHA Form 301 or ons for these forms.	Form approved ONB no. Establishment Information Your contradightment none JLJT IL Enterprises Inc. Street 213-19 99th Ang
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leaths	Total number of cases with days away from work 	Total number of cases with job transfer or restriction	Total number of other recordable cases 		Industry description (e.g., Manufature of mover truck trailers)
Number of Day	, vs				North American Industrial Classification (NAICS), if known (c.g., 336212)
Total number of days from work		tal number of days of job nsfer or restriction			Employmeant Automations (if you don't have free figures, so the Worksheet on the back of this page to estimate.) Annual average number of employees <u>100</u> Total hours worked by all employees last year <u>280, (XX</u>)
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Total number of (M) (njuries Skin disorders Respiratory condition	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	(4) Poisonings (5) Hearing loss (6) All other illnesse	g g g		Knowingty fakilying this document may result in a fine. I certify that I have formined this document and that to the best of my knowledge the correst are true, accurate, and complete. Security 1965 56012 3 k 2013

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OSHA's Form 301 Injury and Illness	Incident Report	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.
This Injury and Illness incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the employer and OSHA develop a picture of the extent and severity of work-related incidents. Within 7 calendar days after you receive fulformation that a recordable work-related injury or illness has occurred, you must fill out this form an any state worker's compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information this form. According to Public Law 91-596 and 29 CFR bis form on file for 5 years following the year to which it pertains. If you need additional copies of this form, you must have photocopy and use as many as you need.	Internation about the employee I) Full near	10 What was the employee delay both before the holdent accurred? Describe the scirrig, as well as the tools, equipment, or material the employee was using. It specific, Exampler, "climbing a ladder while carrying realing materials", "graving chlorise free hard specific, Exampler, "climbing a ladder while carrying realing materials", "graving chlorise free hard specific, Exampler, "deliy computer key easing." Was Firing a Fall Protection Guard Ra; I by nailing wire Fencing to a wood Frame. 15) What happenent tell us have the injury occurred. Example: "When ladder slipped on wet floor, worker."
Completed by John Masiello Title <u>Project Manager</u> Phone (718), 465-5600 Date 1, 1.5, 13	West completents transfel in an emetry West oness? West No No No No No No No	"radial arm can," If this question days not apply to the incident, how is bland. A Ha mm Cr 18) If the couplepee died, when did death occur? Done of death!!

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OSHA's Form 301 Injury and Illness I	Incident Report	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	U.S. Department of Labor Despetional Enforty and Health Administration
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are not required to respond to the N-3644 - 201 Constitution Avenue, NW, Pable reporting busines for the collection of information is estimated on average 22 minutes including due for reviewing instructions, correcting estimated due sources: galanting due

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Summary of Work-Related Injuries and Illne	Year 2015
All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the to verify that the entrins are complete and eccurate before operplaying this summary. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. It had no cases, write '0." Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirely. They also have limited access to the OSHA Form 30 its equivalent. See 29 CFR Part 1904.35, in OSHA's recordisepting rule, for further details on the access provisions for these forms. Number: of Cases	Byou Establishment Information
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Number of Days Total number of days away from work Total number of days of job transfer or restriction B (k) (k) (k)	Employment information (I) you don't have does figure, so the Workber on the back of this page is estimate.) Annual average number of employees <u>108</u> Total hours worked by all employees last year <u>202,000</u>
Injury and illness Types Total number of (M) 5 (4) Poisonings 0 1) Injuries 5 (4) Poisonings 0 2) Skin disorders 0 (6) Hearing loss 0 9) Respiratory conditions 0 (6) All other illnesses 0	Sign here Knowingly fakifying this document may result in a fine. I certify that I have exceptioned this document and that to the best of my knowledge the entricance true, accurate, and complete.

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OSHA's Form 301 Injury and Illness	Incident Report	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	U.S. Department of Labor Geographical Series and Academication
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Completed by John Masello Ticle Project Manager Phone 710,465-5600 Dave L. 6,14	 ⁸⁾ Was employee treated in an energency room? Xes No ⁹⁾ Was employee hospitalized overnight as an in-parlexe? Xes No 	17) What object as substance directly harmed the ear "radial atta and" if this question does not opply to the Timber sheets 18) If the employee died, when did death occur? Data	ny + concrete barrier

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OSHA's Form 301 Injury and Illness	Incident Report	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	U.S. Department of Labor
	Information about the employee	Information about the case	Finist approved OMB us. 1218-0176
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insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form. According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains. If you need additional copies of this form, you may photocopy and use as many as you need.	Information about the physician or other health can professional ¹⁷ Name of physician or other health care professional ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If accument vag given away from the verticles, where use is given? ¹⁷ If a ccument vag given away from the verticles, where use is given? ¹⁷ If a ccument vag given away from the verticles, where use is given? ¹⁷ If a ccument vag given away from the verticles, where use is given? ¹⁷ If a ccument vag given away from the verticles, where use is given? ¹⁷ If a ccument vag given away from the verticles, where verticles, where is it given? ¹⁷ If a ccument vag given away from the verticles, where verticles, where is a ccument vag given away from the verticles, where v	 (13) What happened? Tell us how the lajury occurred. E fell 20 fee?, "Worker was grayed with chlorise we developed apresets in wrist over time." While CLOSSing The St Was Struct by a (16) What was the Aviery or Winser? Tell us the part of the more operific than "hurt," "pain," or sore." Example tunnel syndrome." In jured low (2) (3) What object or substance directly harmed the one of the part of the substance of the substance	on guater broke during replacement"; "Worker reet Victor Comos Moving Uchicle. he body that was affected and how it was affected he body that was affected and how it was affected in "strained buck"; "chemical burn, hand"; "co
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OSHA'S Form 300 (Rev. 01/2004)

Attentions: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

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This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Wirk-Related Injuries and Hinesses and the accompanying Summery, these forms help the employee and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receiv information that a recordable work-related injury or liness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

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If you need additional copies of this form, you may photocopy and use as many as you need.

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Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational earlety and health purposes.

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This Injury and Illness incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurved. Together with the Log of Work-Related Injuries and illnesses and the accompanying Summery, these forms help the employer and OSHA develop a picture of the exten d severity of work-related incidents.

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OSHA's Form 300 (Rev. 01/2004)

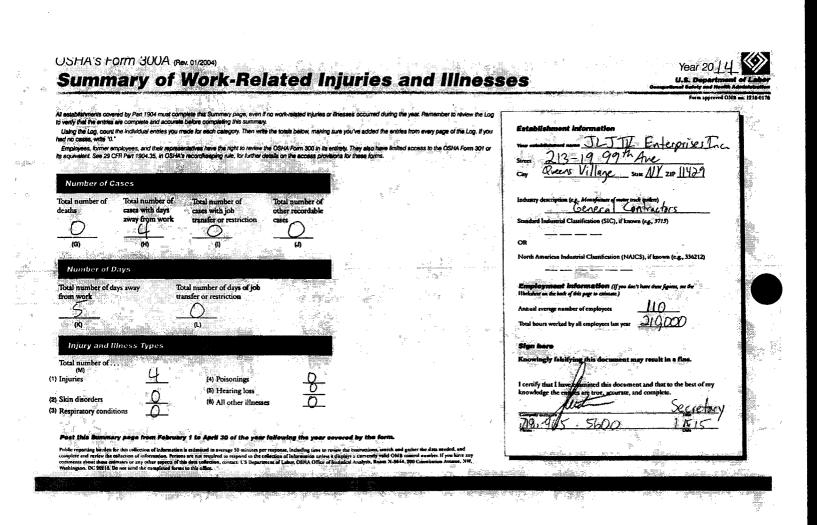
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(A) Case no.	(B) Employee's name	{C} Job title (e.g., Welder)	(D) Date of injury or onset	(E) Where the event occurred (c.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured	based on the mes that cases	t senious outcome for	Enter the number of days the injured or N worker wet:	Observe the "Solid" converse of a
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19-4	Victor Pestonit	Laborer	11/23	E. 64 STIP BAR	Middle Engrapointer on right hand fred			days days	
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about then Analysis, F	e enimates or any other aspects of this da upon N-3644, 200 Constitution Avenue, 1	ta collection. contact: 1 W, Washington, DC 2	25 Department of 1.a) 0210. Do not send the	or, OSHA Office of Statistical completed forms to this office.	an a film a san a san ang pupuka san ana ang san ang s	a ay na an		Page L of Le	(1) (2) (3) (4) (5) (6)



This Injury and Illness Incident Report is one first forms you must fill out when a record related injury or illness has occurred. Tog the Log of Wark-Related Injuries and Illnesses accompanying Summary, these forms help employer and OSHA develop a picture of and severity of work-related incidents.

Within 7 calendar days after you rece information that a recordable work-related illness has occurred, you must fill out this equivalent. Some state workers' compensation insurance, or other reports may be accept substitutes. To be considered an equivaler any substitute must contain all the inform asked for on this form.

According to Public Law 91-596 and 1904, OSHA's recordkeeping rule, you mi this form on file for 5 years following the which it pertains.

If you need additional copies of this i may photocopy and use as many as you n

> John. Coject M 710, 465 5600 Date

nass Incident Report		Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	U.S. Department of Labor	
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Public reporting burden for this collection of information is estimated in average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gabering and maintaining the data medical, and completing and reviewing the collection of information, forward in average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gabering and maintaining the data medical, and completing and reviewing the collection of information. Forwar are non-required to response to the collection of information unless k displays a correct told UMB control number. If you have any comments about this estimate or any other aspects of this data collection, including soggestions for reducing this borden, coatact: US Department of Labor, USHA Office of Statistical Analysis, Room X-3644, 200 Consistent Avenue, NW, Washington, DC 29210. Do sot send the completed forms to this office.

This Injury and illness incident Report is one of the first forms you must fill out when a recordable workrelated injury or illness has occurred. Together with the Log of Work-Related injuries and illnesses and the accompanying Summary, these forms help the employer and OSHA develop a pixture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state works's compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

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		Form upproved OMB no. 1218-0175
	Information about the employee	mormstion about the case
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Together with	13 Summer 34-43 Weidner Ave	11) Date of injury or illness 7/22/14
esses and the elp the	an Oceanside and All 200 11572	12) Time employee began workAP/PM
e of the extent		13) Time of event <u>B:30</u> Aug PM Check if time cannot be determined
eceive	3) Date of block <u>4</u> / <u>8</u> / <u>70</u> 4) Date block <u>1</u> / <u>2</u> / <u>0</u>	14) What was the employed doing fust heling the incident occurred? Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. Examples: "climbing a ladder while
lated injury or	5) 🕅 Male	carrying rooling materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."
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ceptable		
alent form, ormation	Information about the physician or other bealth care arefeasional	15) What happened? Tell as how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 foet"; "Worker was aprayed with chlorine when gashet broke during replacement"; "Worker
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ou need.	Fedliky	tunnël syndrome."
	Street	Left index finger cut + broken
-	City Brate ZIP	· · · · · · · · · · · · · · · · · · ·
· //	6) Was supployee trusted in an emergency room?	17) What abject or substance directly harmed the anylogoe? Examples: "concrete floor"; "chlorine"; "radial arm unw." If this question does not apply to the incident, leave it blank.
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Manager	9) Wes employee hospicalized overnight as an in-perions?	
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ate <u>[] [S, []</u>		18) If the employee alled, when all death scour? Date of death
	<i>J</i>	N/A

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for

occupational safety and health purposes.

U.S. Department of La

Police reporting barden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, starting existing four sources, gathering and maintaining the cine material and completing and reviewing the collection of information. Percent and ONB control number. If you have any comments along this estimate or any other aspects of this data collection, including soggestions for reducing this burden, conset: US Department of Labor, OSHA Office of starting Annu. NS 464, 200 Committation Avenue, NW.

This Injury and Illness Incident Report is one of first forms you must fill out when a records related injury or illness has occurred. Toge the Log of Work-Related Injuries and Illnesses accompanying Summary, these forms help the employer and OSHA develop a picture of the and severity of work-related incidents.

Within 7 calendar days after you receiv information that a recordable work-related illness has occurred, you must fill out this f equivalent. Some state workers' compensat insurance, or other reports may be accepta substitutes. To be considered an equivalent any substitute must contain all the informa asked for on this form.

According to Public Law 91-596 and 2 1904, OSHA's recordkeeping rule, you mu this form on file for 5 years following the y which it pertains.

If you need additional copies of this fo may photocopy and use as many as you ne

SHA's Form 301 D jury and Illness I	Incident Report	employee hells only over a sindification of the administration of the administration of the administration of the administration is being used for occupational safety and health purposes.	U.S. Department of Labor Compational Subply and Naikla Administration
injury and Illness Incident Report is one of the orms you must fill out when a recordable work- d injury or illness has occurred. Together with og of Work-Related Injuries and Illnesser and the apanying Summary, these forms help the oyer and OSHA develop a picture of the extent everity of work-related incidents. Vithin 7 calendar days after you receive mation that a recordable work-related injury or a has occurred, you must fill out this form or an alent. Some state workers' compensation, ance, or other reports may be acceptable instes. To be considered an equivalent form, ubstitute must contain all the information i for on this form. According to Public Law 91-596 and 29 CFR, OSHA's recordkeeping rule, you must keep orm on file for 5 years following the year to h it pertains. If you need additional copies of this form, you photocopy and use as many as you need.	Information about the employee I) Full muse Doroteo Mercedes B) Boron 221 Efna St. City_Brooklyn	 11) Doto of injury or illasos 12) Time employee began work 13) Time of event 14) What was the comployee delong just be fight the field tools, squipment, or material the employer was sub-carrying reading materials"; "spraying chloriae for he was 'jack' 15) What happenear Tiell us have the injury occurred. I fail 20 fact"; "Warker was sprayed with chloriae of developed socrasies in writ over time." Jack - hit his r 15) What was the shurry or illoses? Toil us the part of more specific than "hart," "play," or sore." Example tunnel syndromie." Middle Hor broke to be only or here. 	M Detects if time immode be descripted deter accounted? Describe the activity, as well as the g. Be specific. Examples: "climbing a hadder while m hand sprayer", "delty computer key-entry." - ha mmering: cement Examples: "When hadder slipped on wet Boos, worker is graded broke during replacement," "Worker - broke while jackhosmmerin whit foot the body that was affected and how is was affected; be der: "strained beck", "chemical burn, hand"; "carped 2 on right foot is m
Project Munager 718,465,5600 Dave 1,15,15	⁶) Was compleyee treased in an emergency room? Yes No ⁹) Was employee hospitalized oversight as an in-patient? Wes No No	17) What object or substance directly harmed the a "radial arm saw." If this grantion does not apply to $Tac k - 1$ [18] If the amployae died, when did doubt accord by	he incident, leave it blank, nor mMCI

Attention: This form contains information relating to

Public reporting barden for this collection of information is submated to average 12 minutes per response, including time for reviewing instructions, statching existing data sources, gethering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information splexs is display's current wild UNB control number: If you have any comments about this estimate or any odier aspects of the data collection, including suggestions for reducing this builder, completely for the completel forms in this office.

Information about the employee

This Injury and Illness Incident R first forms you must fill out wh related injury or illness has occu the Log of Work-Related Injuries of accompanying Summary, these f employer and OSHA develop a and severity of work-related in

Within 7 calendar days afo information that a recordable w illnëss has occurred, you must equivalent. Some state workers insurance, or other reports ma substitutes. To be considered at any substitute must contain all asked for on this form.

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stitutes. To be considered an equivalent form, y substitute must contain all the information teed for on this form. According to Public Law 91-596 and 29 CFR 04, OSHA's recordkeeping rule, you must keep is form on file for 5 years following the year to pich it pertains. If you need additional copies of this form, you ay photocopy and use as many as you need.	Information about the physician or other health care professional Name of physician or other health care professional ' It treatment was given away from the worksis, where was it given? Facility	 (5) Must supposed? Tell us bor the injury occurred. Examples: "When ladder slipped on wer lison, mother fit 20 feet," "Worker was sprayed with chlorine when guidet book during replacement," "Worker developed encreasing in wrist over them." He held the troutling plate tool long while it was being lowered on to the truck bed (4) Must was the hylory or Massel Tell us the part of the body that was affected how is was affected; be more specific than "bart," "pain," or one." Examples: "strained back", "chemical burn, hand"; "carpet runned syndrome." The pointer and middle finger on the right hand were fractived. (1) What absed or unbetance directly harmed the employeer Examples: "concrete floor"; "chlorine";
npleted by John Masiello e <u>Project Manage</u> me 718,465-5600 Date 1,15,15	 Was capiloyee transfel in an emergancy room? Yes No Was maployee hospicalized overaight as an imparient? Yan No 	"radial arm and" if this question does not apply to the backback, have it blank. Hraffic road platk (1) if the employee disk, when the death eccur?Deter of death''

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Attention: This form contains information relating to

employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Information about the case

U.S. Departm

OME no. 1215-0

Public reporting borders for this collection of information is estimated to a servage 22 minutes per compare, including time for reviewing interactions, searching estiming data sources, gathering and minutesing the data meeters, and completing and reviewing the collection of information rights and real-wind distances of this determine the collection of information and in a longity is current wild OMB control number: If you have any comments about this estimate to a any other aspects of this data collection, including suggestions for relation this burden, contact (S) Department of Labor. OSHA Office of Spatial Office. ad to the ts are not required to serpto a N-3644, 200 formations

A. PROJECT REFERENCES - SIMILAR CONTRACTS COMPLETED BY THE BIDDER

List all contracts substantially completed within the last 4 years similar to the contract being awarded, up to a maximum of 10, in descending order of date of substantial completion.

Project & Location	Contract Type	Contract Amount (\$000)	Date Completed	Owner Reference & Tel. No.	Architect/Engineer Reference & Tel. No. if different from owner
NYCDDC Hulzollac	Converx Runs	#3,361,138	6/2014		·
NYCOD C 19mp 2009MX	Complex Amps	# 3,747,000	3/ 2014		
NYCODC MED 595	WATER MANS	\$ 10, 784,000	11/2012		
NYCDDC 1 from 1667 W	Itmy Becons.	\$25,000,000	12/2009		
NYCDOC HWK 973	Huy Neton.	\$ 000,000	12/2009		
NYCDDC <i>НWMM 006</i>	Itny Actor.	\$ 4,000,000	12/2009		
NYCOOC HWMWTCAID	Huy. Actor.	\$1,000,000	12/2004		

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION

26

B. PROJECT REFERENCES - CONTRACTS CURRENTLY UNDER CONSTRUCTION BY THE BIDDER

List all contracts currently under construction even if they are not similar to the contract being awarded.

27

Project & Location	Contract Type	Contract Amount (\$000)	Subcontracted to Others (\$000)	Uncompleted Portion (\$000)	Date Scheduled to Complete	Owner Reference & Tel. No.	Architect/En gineer Reference & Tel. No. if different from owner
NYCDOC Hampzoig	Hury REZON.	# 52,000,000	\$ 5,750,000	# 20, 366,999	6/2016		
NYCODC. MEJ 598	MATTER MAINS	#23,179,026	\$ 3,300,000	#14,000,000	4/2016		
NYCOOL HERZOBMX	Complex RAMS	\$ 6,543,000	# 327, 000	\$ 4,750,00 °	10/2015		
NYCOOL HWSET200B	TILLISIT	#1,579,516	# 84,000	# 1,000,000	4/2015	· · · · · · · · · · · · · · · · · · ·	
NYCODC Hurcsoff JEN	Sabol Shaty.	#2,574,096	\$ 175,000	\$2,000,000	6/2016		

CITY OF NEW YORK

DEPARTMENT OF DESIGN AND CONSTRUCTION



List all contracts awarded to or won by the bidder but not yet started.

Project & Location	Contract Type	Contract Amount (\$000)	Date Scheduled to Start	Owner Reference & Tel. No.	Architect/Engineer Reference & Tel. No. if different from owner
NYCODC MED 608	UNTEN MINS	# 8,936,669	9/2016		

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION 28

13 Maple Avenue Locust Valley, NY 11560

EDUCATION

MANHATTAN COLLEGE, Riverdale, NY, May 1997 Received degree of Master of Science in Civil Engineering. <u>YALE UNIVERSITY</u>, New Haven, CT, May 1992 Received degree of Bachelor of Science in Mechanical Engineering. <u>IONA PREPARATORY SCHOOL</u>, New Rochelle, NY, June 1988 Graduated Class Valedictorian with honors.

EXPERIENCE

<u>JLJ IV ENTERPRISES, INC.</u>, Queens Village, NY February 2010 to Present Project Manager, responsible for managing all aspects of several NYCDDC Contracts, including MED595, for the installation of steel water mains on Astor Place in Manhattan, NY; and HWMP2019, for the reconstruction of East Houston St. Responsible for utility interference and capital work negotiations and assisting with estimation for projects to be bid. <u>FELIX ASSOCIATES, LLC.</u>, Bronx, NY February 2004 to February 2010 Vice President/Chief Engineer responsible for estimating and preparing bids for all private and public utility infrastructure projects, as well as overseeing Project Managers. Direct preengineering of projects, in addition to supervising field/engineering changes to active projects. <u>CARP CONSTRUCTION CORP</u>., Staten Island, NY August 2003 to February 2004 Project Manager, managing all aspects of NYCDDC Contract QED968, for the installation of steel water mains and sewers along Grand Avenue in Queens, NY. Responsible for the design of the geometry for steel water main and pipe ramming operations. Coordinate with private utilities and prepare cost estimates associated with utility work covered under Section U of this project. Also assist other project managers with design changes, implementation, and utility interference

work on other projects. <u>CAPORUSSO CONTRACTING CORP.</u>, Staten Island, NY September 2001 to August 2003 Held position as Project Manager. Responsible for the payments on several NYCDDC Contracts, and handled all private utility interference claims. Prepared estimates for municipal and private utility projects, including steel water main, storm and sanitary sewers, roadway, and underground utility construction.

FELIX EQUITIES, INC., Lincolndale, NY February 1998 to September 2001 Held position as Field Engineer/Assistant Project Manager on the sixty-five million dollar NYSDOT reconstruction of Route 9A from Horatio Street to West 26th Street in Manhattan. Handled progress payments in excess of seventy million dollars with the NYS Department of Transportation. Responsible for processing change orders and negotiating prices as a result of redesign and modified conditions associated with the various highway and utility aspects of the project. Accountable for the procurement of highway, utility, and specialty materials and their proper incorporation into the project. Scheduled and coordinated the activities of subcontractors and Felix field personnel in order to properly complete the phases of contract work. Coordinated shop drawing submittals, approvals, and fabrication of materials to be permanently incorporated into the project.

<u>CONSOLIDATED EDISON COMPANY OF NY, INC.</u>, NY, NY February 1997 to February 1998 Held position of Operations Supervisor with Steam Distribution Services Department. Responsible for the proper operation, maintenance, and safety of steam piping, valves, and metering owned by Con Edison on customers' premises. Directed the Seasonal Service Program involving the redesign, layout, and rerouting of steam service piping in customers' premises in an effort to increase safety and reduce O&M expenditures due to service corrosion leaks. <u>CONSOLIDATED EDISON COMPANY OF NY. INC.</u>, NY, NY August 1995 to February 1997 Held position of Operations Supervisor with Steam Field Operations Department, responsible for the operation, maintenance, and safety of the Steam Distribution System. Directly supervised company and contractor crews during routine and emergency procedures. Managed projects involving excavation, welding, and restoration operations. Coordinated steam system outages with customers and responded to customer concerns.

<u>CONSOLIDATED EDISON COMPANY OF NY, INC.</u>, NY, NY June 1992 to August 1995 Joined Corporate Management Intern Program. Completed several assignments involving various areas of the utility industry including: steam engineering and design; power generation (steam and electric); electric transmission and distribution (underground network); natural gas transmission and distribution (i.e. pressure control and corrosion prevention); and natural gas sales and marketing. Conducted several presentations to "Intern Committee," comprised of company officers

ACTIVITIES

New York State Licensed Professional Engineer Member of the Society of Municipal Engineers of the City of New York

Phil Basso

Objective

Looking for new challenges and new opportunities in the field of construction, to advance and grow with the company.

Experience

June, 1999 to Present

JLJ IV Enterprises Inc.

Queens Village, NY

Supervisor

- Coordinate day to day field responsibilities with a labor force of up to 40 laborers
- Resolves difficult situations that may arise in a timely manner so as to not lose any production of work
- Extensive knowledge in the field of City Construction
- A vast background on maintaining and protecting underground Utility facilities in conjunction with City Projects
- Keeper of daily logs such as Time sheets, Billing sheets, and Daily work logs
 - The Following is a list of previous and current jobs I have worked on:
 - 1. HWQ600D1R Reconstruction of Sutphin Blvd in the Borough of Queens
 - 2. HWXC029 Reconstruction of Manhattan College Parkway in the Borough of Bronx
 - 3. HWK732A Reconstruction of 5th Ave. in Borough of Brooklyn
 - 4. HWK973 Reconstruction of Fulton St. in Borough of Brooklyn
 - 5. HWCSCH-1 School Safety (Various Boroughs)
 - 6. SECB05K-1 Brooklyn Catch Basins Various locations in the Borough of Brooklyn
 - 7. SECB06K Brooklyn Catch Basins Various locations in the Borough of Brooklyn
 - 8. SECBMTAN3 Manhattan Catch Basins Various locations in the Borough of Manhattan
 - 9. HWP2009MX Complex Pedestrian Ramps Various locations in the Boroughs of Manhattan and the Bronx

Sept, 1994 - Sept, 1998

Eagle Cleaners

Coral Springs, FL

President

- In charge of managing a 5 to 7 support staff
- Managed Payroll Reports and Inventory Reports
- Handled all day to day Managerial tasks
- Strengthen Client Relationship and resolved any issues that arrose

Education

1978 to 1982

F.D. Roosevelt High School

High School Diploma

Additional

Local 15 Union Member – Operator of Heavy Equipment such as Front End Loader, Compressor Machines, Vermeer, Backhoes, and Compression Operated Spotlight.

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		•	agensy:	Vanguard Covera 131 SUNNYSIDE PLAINVIEW, NY (516)349-1333	BLVD, SUITE 112			213-1 Quee Bue;	/ Enter 19 99th Ins Villi (718)- Ity.com	Aver Ige, I	NIO NY 1					
			ROGER/TRAILER	R22027	BLUE POINT, NY	86499	24,80		X	X	X	X				
			PETERBILT/TRACTO		QUEENS VILLAGE, NY	31499	92,00		ž	X.	X	X	1,000	1,000		
			ATLAS/TRAILER	057005	BLUE POINT, NY	65499 65499	10,00		X	Х Х	X	Х.	•			
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		2001	FORDIVAN	A04848	QUEENS VILLAGE NY	01485	30,70		x	x	â	â	1.000			
		2001	FORDIVAN	A04805	QUEENS VILLAGE, NY	01499	30.70		Ŷ	x	x	Â.	1,000	1,000	1	
	CODY	2002	PETERBILTATRACTO		QUEENS VILLAGE NY	31499	125,00		x	x	x	x	1,000	1,000		
	ELL.	1995	FREIGNAN	873484	QUEENS VILLAGE, NY	01400	32,00		x	x	x	x	1.000	1,000		
		2002	BENSON/TRAILER	000325	QUEENS VILLAGE, NY	68499	50,00		x	x	X	x	1,000	1,000	1	
	CODY	2002	BENSON/TRAILER	000336	QUEENS VILLAGE, NY	65499	50.00		x	x	x	x	1,000	-	ł	
	CODY	2001	PETERBUILT/TRAC	1	QUEENS VILLAGE, NY	31499	90,0		x	x	x	x	1,000	1,000		
	3 المال	1000	CATERPILLARMOB		QUEENS VILLAGE. NY	7905		X	x	x	X	x	1,000	1,000		
	JL 13	2000	CATERPILLARMON		QUEENS VILLAGE, NY	7905		x	x	x	x	x	1			
	CODY	1985	KAWASMOBILE EC		QUEENS VILLAGE, NY	7905	1	×	X	X	x	x	1			
	JLJ3	1992	CATERPILLARAMOR	LE 1 000753	QUEENS VILLAGE, NY	7908		X	X	X	X	X				
	CODY	1995	VERMEMOBILE EQ	UPN000403	QUEENS VILLAGE, NY			X	X	X	X	X				
020	CODY	1989	DYNAHMOBILE EQ	UIPM 490203	QUEENS VILLAGE, NY			X	X	X	X	X				
1021	CODY	1999	DYNAHMOBILE EQ	UIPM 490325	QUEENS VILLAGE, NY	7908		X	X	X	X	· X	1		l.	
022	J.B.	2001	CATERMOBILE EQ	UIPM LO2948	QUEENS VILLAGE, NY	7905		X	X	X	X	X	1		1	
023	CODY	2002	CLEWENT/TRAILER	003529	QUEENS VILLAGE, NY	68490	50,0	00 X	X	X	X	X	1,000	1,000		
1024	J.B.	1985	TRANSCRAFT/TRA	LER 020641	QUEENS VILLAGE, NY	65499	50,0	ωX	X	X	X	X		-		•
1025	CODY		PETERBUILTATRAC	TOR \$10192	QUEENS VILLAGE, NY	31400	96,0	00 X	X	X	X	X	1,000	1,000		•
1025	CODY	2004	PETERBUILT/TRAC	TOR 829659	QUEENS VILLAGE, NY		103,0			X	X	X	1,000	1,000		
)027	JLIV	2002			QUEENS VILLAGE, NY			x joo		X	X	X	1		1	
8500	JUIV	2001			QUEENS VILLAGE, NY	7905	53,0	00 X		X	X	X	1			
	JUN	1995		A73829	QUEENS VILLAGE, NY	01499		X	X	X	X	X	1			
	JLIV	2003		800005	QUEENS VILLAGE, N	01499		600 X		X	X	X	1,000	1,000		
(1031	JUN	2003			QUEENS VILLAGE, M	7906	96,2	197 X	X	X	X	X	1			
3032	CODY	/ 2003	PETERBUILT/TRAC	TOR 589592	QUEENS VILLAGE, NY	31499	285,0	xloox	K X	X	X	X	1,000	1,000		

		·							à				··		-
				Vanguard Coverag			For:	JL IV	Cala		a				
			agency:	131 SUNNYSIDE 2				213-19				•			
				PLAINVIEW, NY 1	1803			Queen				1429			
1				(516)349-1333				Bue: (800				
-				and the second second					<u>/:::u</u>				- instant	an a state of the second	
0003	JUN	1986		00100743	QUEENS VILLAGE, NY	7103	100,00	01X	-X	X	X	X	1		
00034			CATERPILLARMOE		QUEENS VILLAGE, NY	7906	70,00		X	X	X	X			
00035		2003	FORDIVAN	891521	QUEENS VILLAGE, NY	01499	31,50		X	X	X	X	1,000	1,000	
00036		2004	FORDIVAN	834751	QUEENS VILLAGE, NY	01499	22,00		X	X	X	X	1,000	1,000	
			HILL/TRAILER	322031	QUEENS VILLAGE, NY	68499	25,00		X	X	X	X	1,000	1,000	
	CODA	2005	PETERBUILT/TRACT	OR 874851	QUEENS VILLAGE, NY	68499	108,00		X	X	X	X	1,000	1,000	
00030		2003	CATERPILLARMOB		QUEENS VILLAGE, NY	7908	78,00		X	X	X	X	1		
	CODY		FRUEHTRAILER	004202	QUEENS VILLAGE, NY	68499		X	X	X	X	X			
00041		2006	FORDWAN	A25895	QUEENS VILLAGE, NY	01499	29,50		X	X	X	X	1,000	1,000	
	JLIV	2004	CATMOBILE EQUIP		QUEENS VILLAGE, NY	7908	95,00		X	X	X	X			
	JLJV	2004	FORD/TRUCK	603354	QUEENS VILLAGE, NY	31499	50,8		X	X	X	X	1,000		
	JUN	2011	JAGUARXJL	V16903	EAST WILLISTON, NY	7396	84,60	. 1	X	X	X	X	1,000		
00045		2004	FORDYTRUCK	829985	QUEENS VILLAGE, NY	01499	27,0		X	X	X	X	1,000		
00048	1		SP/TE/TRAILER	188262	QUEENS VILLAGE, NY	66499	30,00	1	X	X	X	X	1,000		
	ATT I	2007	CHEVYMALIBU	104674	QUEENS VILLAGE, NY	7396	20,1		ÿ	Х.	X	X	1,000	1,000	
00048		2006	CATERPILLARMOB		QUEENS VILLAGE, NY	7906	70,0		X	Х.	Ň	X			
00049			CATERPILLARMOB		QUEENS VILLAGE, NY	7906	100,0	- 1 A	ÿ	XX	X	X.		4	
			PETERBILT/TRACTI	1	QUEENS VILLAGE, NY	7905	123,3		X X	x	X X	XX	1,000		
D0061			CHEVY/SILVERADO	1	QUEENS VILLAGE, NY	7908	121,5		Ŷ	â	x	Ŷ	1,000		
00053					QUEENS VILLAGE, NY	7908			Ŷ	Ŷ	x	x	1,000	1,000	
0005					QUEENS VILLAGE, NY	7905	114,8		Ŷ	x	Ŷ	x	{ ·		
0005				425440	QUEENS VILLAGE, NY	7905		00 X	x	x	x	Ŷ	1.000	1,000	
0005				060583	QUEENS VILLAGE, NY	01400		~[<u>2</u>	Ŷ	x	Ŷ	$\hat{\mathbf{x}}$	1,000	1,000	
0005		1		403109	QUEENS VILLAGE, NY	021499	35.0	ωx	Ŷ	x x	- Ŷ.	x	1,000	1,000	
0005				309724	QUEENS VILLAGE, NY	7398		35 X	x	x	x	x	1.000	-	
r		F			QUEENS VILLAGE, NY	7906		TIX .	x	x	x ·	x	1,000	. inan	
0008					QUEENS VILLAGE, NY	7908	1	X	x	x	x	x	1		
0008					QUEENS VILLAGE, NY	7908		x	X	X	X	x	1		
0008		1		A24119	QUEENS VILLAGE, NY	01483	29.7	10 X	X		X	x	1.000	1.000	1
0005				022047	QUEENS VILLAGE, NY	06499		X	X		X	X		.,	
	5 JUN			B49134	QUEENS VILLAGE, NY	01499	29.9	75 X	X		X	X	1,000	1,000	Į
			CHEV/TRAILBLAZE	R 248639	QUEENS VILLAGE, NY	01499		X loo	X		X	X	1,000		
				•											

			agency:	Vanguand C 131 SUMNY PLAINVIEW (518)349-1:	81DE 81	VD, SUITE 112		2	13-11 Jupon Super	990 15 V15	rprise Avei ege, 1 485-5	NY 1		,			
57 10	XOY I	603	GLEMENTARYALER	000949	1.27		0400	5.	X	X	X	-X	X-	1,000	1.000		
			CHEVY/C4500	406843		QUEENS VILLAGE NY	01499	41,70	x	X	X	X	X	1.000	1.000		
1 ee	ILIV :	2007	GMC/4500	411121		QUEENS VILLAGE, NY	21499	40,00		X	X	X	X	1,000	1,000		
171 0	CODY	2006	MACK/TRUCK	023067	. [QUEENS VILLAGE, NY	31498	70,00)X	X	X	X	X	1,000	1,000		
72 J		2004	GMC	901511		QUEENS VILLAGE, NY	01499		X	X	X	X	X				
73 .	1.JIV	2003	SUZU	900020		QUEENS VILLAGE, NY	01499	22,00	0X	X	X	X	X	1,000	1,000		
74	ו אוריו	2010	GMC/ACADIA SLT-1			EAST MEADOW, NY	01499	43,70	5 X	X	X	X	X	1,000	1,000		
		1909	CAT/Mobile Equipm			QUEENS VILLAGE, NY	7908		X	X	X	X	X			ł	
78.	JUN		CAT <i>Mobile</i> Equipm		L	QUEENS VILLAGE, NY	7908		X	X	X	X	X			1	
			CAT/Mobile Equipm			QUEENS VILLAGE, NY	7906	1	X	X	X	X	X	}		1	
		2003	ISUZU	902405		QUEENS VILLAGE, NY	21499	13,60		X	X	X	X	1,000	1,000	1	
r			ISUZU	70086	-	QUEENS VILLAGE, NY	21499	13,60		. X	X	X	X	1,000		1	
		2010	NISSAN/ARMADA L		-	BRONXVILLE, NY	7398	54,25	DX	X	X	X	X	1,000	1,000		30/30/90
		1968	GMC	63036		QUEENS VILLAGE, NY	01409		X	X	X	X	X				
		2001	MACK/TRUCK	00219	•	QUEENS VILLAGE, NY	1 · · · ·	100,00		X	X	X	X	1,000	1,000		
	JUN	2011	LAND ROVER/RAN			PLANDOME, NY	7396	0,53		X	X	X	X	1,000	1,000		30/30/90
		2008	CATHEOE	1.0027	-	QUEENS VILLAGE, NY		110,00		X	X	X	X				
		2011	BMW/750LXJ	43258		PLANDOME, NY	7396	95,00		X	X	X	X	1,000	1,000	1	30/30/90
		2010	CAT/M315D	MOSI	-	QUEENS VILLAGE, NY	7906	249,3		X	X	X	X	1		1	
		2003	MACK/TRUCK	00524	•	QUEENS VILLAGE, NY	31499	125,00	찌즈	X	X	X	X	1,000			
1	J.J.	1976	TONCOTRAILER	47515	-	QUEENS VILLAGE, NY	68499			X		X	X	1,000			
080	JUIV	2011	CHEV/EXPRESS	15579	-	QUEENS VILLAGE, NY		27,5		X	X X	X	X X	1,000		1	
	JUN	2012		AN 10515	•	QUEENS VILLAGE, NY		30,0		x		- Â	Ŷ	1,000		1	
091	VILL	2007	UDUIC	02283	-	QUEENS VILLAGE, NY	1	100.0	~IC	x		x	x	1,000			
093	VILLIN	2007	PETERBUILT/335 WITZC	00047	-	QUEENS VILLAGE, NY		38.0		Ŷ		x	Ŷ	1,000		1	
094	JLIV	2008	CATERPILLARMS	[-	WULLING VILLINGE, MT		35.0		Ŷ		-	x	1,000			46 ma -
095	JUIV	2007		60283		QUEENS VILLAGE, NY	31499	120.0		x		Ŷ	Ŷ	1,000		1	30/30/9
2006	JUN	2012	f	1	-	QUEENS VILLAGE, N			25 X	x		- x	x	1,000		1	
2097	JUIV	2008				QUEENS VILLAGE, N			ωx	x		x	x	1.000		(
5008	JLIV	F	AUDIA-4	11634		C ACAMMINA A INTELLINE IAI	7398		40 X	x		x	$\hat{\mathbf{x}}$	1.000		1	30/30/9
	JUIV		LAND ROVER/RAI	1		PLANDOME, NY	7395		BOX	x		X	••	1.000		· · [30/30/9

		aganoy:	Vanguers Coverage Corporation 131 SUNNYSIDE BLVD, SUITE 112 PLAINVIEW, NY 11803 (516)349-1333	For: JLJ IV Enterprises, Inc. 213-19 90th Avenue Queens Village, NY 11429 Bus: (718)465-5600 HQNI V.com	
0001		1999 1	Nodel 900, CAT PAYLOADER	3.001018	111.000
0002		1988 N	NODEL 802, KAWASAKI PAYLOADER	ICSS80211C1118	35.000
0003		1992 N	NODEL 986, CAT PAYLOADER	88000763	100,000
0004			BC00753		50,000
0006	1	.	JOHN DEERE EXCAVATION	CK0596D000346	30,000
0008		1987	CAT 225 EXCAVATOR	7915369	25.000
0007		1998	CAT 320 EXCAVATOR	4TF47383	89,000
0000		1996	VERMEER	V5R1000403	95.000
0009	1	1980 E	SH-13, 490 DYNAHOE	400203	12,000
0010		1990 E	SH-18, 490 DYNAHOE	BG490325	42,000
0011		2000 8	91-20, 446 CAT	5BL02190	87.000
0012		2001 4	M8 CAT, 58L02948	811-25	95,000
0013			H-28, 446 CAT, 58L02231		87,000
0014	1	1 1	TV1200DPR, BENFORD ROLLER	SLB10PG0EW07CC090	12,000
0015			1212707, INGERSOLL RAND ROLLER	C18094	12,000
0016			MODEL V32, TRAMAC HAMMER		55,000
0017	1	2000	MODEL 3258L, CATERPILLAR	2JR02901	138.000
0018	1		TRAMAC 700 HYDRAULIC HAMMER	150830	28,000
0019	1		MODEL 501, ROCKBLASTER HAMMER	233068	13,000
0020	5.14	2002	BH30 446B, CATERPILLAR	5BL03050	63,000
0021	J.J.4	2001	BH34 446B, CATERPILLAR	5BL02965	53,000
0022	JLJ 4	2003	BH34 446B, CATERPELAR	CAT0446BA5BL03138	95,297
0023	J.J.4		1VRS122V2W1000143, VERMEER		100,000
0024	JU 4		CATERPILLAR, BH36 4468, CATERPILLAR	68L02580	70,000
0025	JULI 4	2004	BH40 446B, CAT BACKHOE LOADER	CATD446DCD9L00164	96,000
0025	JUA		908-G, CAT WHEEL LOADER	9R8-00480	182,320
0027		2001	950G, CAT PAYLOADER	2,1501604	125,000
0028	1	2003	BH 38, CAT 440B	5BL03159	85,000
0029		2003	BH 42, CAT 446B	59L03169	85,000
0030			S10, TRAMAC	T51950	30,000
0031	1	1 1	TRAMAC 700 HAMMER	105330	32,500
0032	4		1000-15 CC, EAGLE PORTABLE CRUSHING PLANT	30454	419,429
0033			8H44 4460 BACKHOE L, CATERPILLAR 4460	CAT0446DJDBL00459	108,375
0034			BH46 446D BACKHOE, CATERPILLAR 446D	CAT446DCDBL00298	100,000

These schedules are provided as a brief sulline of your policy. You must refer to the provisions found in your policy for the details of your coverages, terms, conditions and exclusions that apply.

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	• .	agency:	Vanguard Coverage Corporation 131 SUNNYBIDE BLVD, SUITE 112 PLAINVIEW, NY 11803 (518)349-1333	For: JLJ IV Enterpri 213-19 Seth An Queene Village Bue: (718)485 J ICHI V.com	Venue 1. NY 11429	
0036 0038 0037 0038 0039 0040 0041 0042 0043 0044 0045 0046 0045 0048 0048 0048	J. 14 J. 14 J. 14 J. 14 J. 14 J. 14 J. 14 J. 14	1998 1V 2004 BH 2008 SH 2007 RB 7U 1998 TV 2003 PH 2008 344 2008 344 2008 CA 2008 CA	W170E8-6, KOMATSU WHEEL EXCAVATOR R8122V5W1000146, VERMEER CONCRETE CUTTER H8 446D BACKHOE, CATERPILLAR 446D 60 460E, CATERPILLAR BACKHOE LOADER WITH AL 27-120, WACKER ROLLER 1200DPR, BENFORD ROLLER 1200DPR, BENFORD ROLLER 1200DPR, BENFORD ROLLER 1200D28, PETERBUILT FLATBED WITH PALFINGER M SCL, CATERPILLAR EXCAVATOR RAMAC 700 HAMMER WITH MOUNTING BRACKET, CO 0E, CATERPILLAR 450E TERPILLAR, M316D, EXCAVATOR TERPILLAR, M318O, CATM318DPW8P00700 Wahing Plant Incl all parts	5897252 5686293 07CC054 0 100071185		114,60 86,00 92,00 150,00 20,00 12,00 160,00 230,00 40,00 91,00 249,32 185,00 10,67 1,000,00

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	sgency:	Vanguerd Coverage Corpo 131 SUNNYBIDE BLVD, Si PLAINVIEW, NY 11803 (616)349-1233	ration UITE 112	For,	JLJ IV Enterprise 213-19 99h Ave Queens Vilage, Bus: (716)465-0 JICHIV.com	nue NY 11429 1900	
LEASED RENTED					500,000		
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	opce of Award ubmillish/Approvah	0 days Mon 6/15/15 Mon 6/15/15 45 days Mon 6/15/15 Wed 7/29/15 1	8/7 7/3							Septemb 7/01 8/20
3 1	noitsside	1 day Thu 7/30/15 Thu 7/30/15,2	NTHERE PARTY							
	lushing Ave - Navy St lo Effici Pl Bection U Utility Work (North)	321 days Fri 7/31/15 Fri 10/21/16 3 days Fri 7/31/15 Tue 8/4/15/3	3	5						
	Water mein work Dreinage/Catch Basins (North Side)	1 day Thu 86/15 Thu 66/15 15 2 days Non 8/10/15 Tue 8/11/15 16		'n						
	Section U Utility Work (South) Drainage/Catch Basins (South Side)	2 days Mon 9/28/15 Tue 9/29/15 137 2 days Wed 9/30/15 Thu 10/1/15		† 1	-					
	Excension/Curb/Sidewalk (South Skie) Excension/Curb/Sidewalk Work (Nonh Side) Roadway Excension/Grading/Concrete Base	7 days Fri 11/5/15 Mon 11/16/15 139		1	F. 1 2011					
	Curb/Sidewalk Work (South Side)	7 days Wed 5/6/16 Thu 5/18/16 140 3 days Wed 10/5/18 \$ri 10/7/18 141							2°	
,	Landscaping Jushing Ave - Ethot PI to N. Portland Ave Section 13 URMy Work (North)	2 days Thu 10/20/16 Fn 10/21/16 73 320 days Wed 8/5/15 Tue 10/25/16			<u>i</u>			·		
	Section U Utility Work (North) Water meth work	1 day Wed 8/5/15 Wed 8/5/155 1 day Fri 6/7/15 Fri 6/7/156		¥					1	
	Drainage/Catch Basins (North Side) Section U Utility Work (South)	1 day Wed 8/12/15 Wed 8/12/15 7	1	۲,	L .					
	Drainage/Catch Basins (South Side)	1 day Fri 10/2/15 Fri 10/2/15/9 1 day Mon 10/5/15 Mon 10/5/15/16	1		ę j					
	Excevation/Curb/Sidewalk Work (North Side) Bus Pade	10 days Tue 11/17/15 Mon 11/30/15.10 2 days Fr 6/17/15 Mon 5/20/16.11	1		Čite				÷	
	Roadway Excavation/Grading/Concrete Base Curb/Sidewalk Work (South Side)	5 days Twe 5/21/16 Mon 5/27/16 21 1 day Mon 10/10/16 Mon 10/10/16 12		1					č	
6	Landscaping Tushing Ave - N. Portland Ave to N. Oxtord \$1	2 days Mon 10/24/18 Tue 10/25/16 13 316 days Thu 8/13/15 Thu 10/27/18		1			1		}	
	Section U Utility Work (North)	2 days The 8/13/15 Fri 8/14/15 17		ç		1				
1	Drainage/Catch Basins (North Side) Section U Utility Work (South)	2 days Mon 8/17/15 Tus 8/18/15/25 1 day Tus 10/5/15 Tus 10/6/15 19		T	÷					
ł	Drainage/Catch Basins (South Side) Excavation/Curb/Sidewalk Work (North Side)	1 day Wed 10/7/15 Wed 10/7/15/28 8 days 7ue 12/1/15 Thu 12/10/15/20			Ę					
æ	Roadway Excevation/Grading/Concrete Bese Curb/Sidewalk Work (South Side)	5 days Tue 6/28/16 Mon 7/4/16 22 2 days Tue 10/11/16 Wed 10/12/16 23				4x7			\$	
Ь.	Landscaping Landscaping Huahing Ave - N. Oxford St to Cumberland St	2 days Wed 10/26/16 Thu 10/27/16:24 2 days Wed 10/26/16 Thu 10/27/16:24 314 days Wed 2/19/15 Mon 10/31/16	1							
	Section U Utility Work (North)	1 day Wed 8/19/15 Wed 5/19/15/27		÷						
1	Drainage/Calch Basins (Nonh Side) Excavation/Curb/Sidewalk Work (Nonh Side)	2 days Thu 8/20/15 Fri 8/21/15 35 8 days Fri 12/11/15 Tue 12/22/15 30		7		3.a				
ł	Roadway Excavation/Grading/Concrete Base Curb/Skiewskik Work (South Side)	5 days Tus 7/5/16 Mon 7/11/18 31	L.			entime I			Б	
ъ.	Landscaping	1 day Thu 10/13/16 Thu 10/13/16 32 2 days Fil 10/28/16 Men 10/31/16/33	1		1	4				
1	Jushing Ave - Cumberland St to Cariton Ave Section U Utility Work (North Side)	313 days Non 8/24/15 Wed 11/2/18 1 day Mon 8/24/15 Mon 8/24/15 36	1	÷.						
	Drainage/Catch Basins (North Side) Excavation/Cuth/Sidewalk Work (North Side)	2 days Tus 8/25/15 Wed 8/26/15.42 10 days Wed 12/23/15 Tus 1/5/16-37		7		±				
	Øvs Pada	2 days Tue 7/12/16 Wed 7/13/16 38							5	
L	Rosdway Excevation/Grading/Concrete Base Curb/Sidewaft Work (South Side)	5 days Thu 7/14/16 Wed 7/20/16/45 1 day Fn 10/14/16 Fn 10/14/16/39			1				The second se	
θ,	Landscaping Sushing Ave - Cariton Ave to Adelohi Si	2 days Tue 11/1/16 Wed 11/2/18 40 312 days Thu 8/27/15 Fri 11/4/16	1							
	Section U Utity Work (North Side) Orainage/Catch Basins (North Side)	1 day Thu 8/27/15 Thu 8/27/15 43		2	1					
	Excention/Curb/Sidewalk Work (North Side)	2 days Fri 8/28/15 Mon 8/31/15 50 10 days Wed 1/6/16 Tue 1/19/16 44		ă,		iter.				
	Roadway Excavation/Grading/Concrete Base Curb/Sidewalk Work (South Side)	5 days Thu 7/21/16 Wed 7/27/18 48 1 day Mon 10/17/16 Mon 10/17/18 47							A	
ъ,	Landscaping Flushing Ave - Adelphi St to Clermont Ave	2 days Thu 11/3/16 Fri 11/4/16 48		<u>.</u>			1			
	Section U Utility Work (North Side)	311 days Tue 9/1/15 Tue 11/8/16 1 day Tue 9/1/15 Tue 9/1/15 51								
	Orainage/Galch Basins (North Side) Section U Utility Work (South Side)	t day Wed 9/2/15 Wed 9/2/15 57	1	۲	•					
	Drainage/Calch Basins (South Side) Excavation/Curb/Sidewalk Work (North Side)	1 day Fri 10/9/15 Fri 10/9/15 59	1		t i	- <u>i</u>	1			
	Roadway Excavation/Grading/Concrete Base	10 days Wed 1/20/16 Tue 2/2/16 52 5 days Thu 7/28/16 Wed 8/3/16/53	1			- Stee			2	7
	Curb/Sidevrafk Work (South Side) Landscaping	1 day Tue 10/18/16 Tue 10/18/16 54 2 days Mon 11/7/16 Tue 11/8/16 55	1						*	
1	Section U Utility Work (North Side)	311 days Thu \$/3/15 Thu 11/10/16		÷						
	Dreinage/Cetch Basins (Nonth Side)	1 day Thu 9/3/15 Thu 9/3/15 56 1 day Fri 9/4/15 Fri 9/4/15/66		ę.	1					
	Section U Unity York (South Side) Dramage/Catch Basins (South Side)	1 day Mon 10/12/15 Mon 10/12/15 60 1 day Tue 10/13/15 Tue 10/13/15 65			Ţ					
	Excevetion/Curb/Sidewalk Work (North Side) Bus Pade	10 days Wed 2/3/16 Tue 2/16/16.61 2 days Thu 7/26/16 Fit 7/20/16.53				5	500			•
	Roadway Excevation/Grading/Concrete Base Curb/Sidewalk Work (South Side)	5 days Mon &/1/16 Fri &/5/16.71	1							ъ.
	Landscaping	1 day Wed 10/19/16 Wed 10/19/16 63 2 days Wed 11/9/16 The 11/10/16/64		. 1			1 1			
1	lushing Ave - Vanderbilt Ave to Clinton Ave Section U Utility Work (North Side)	311 days Mon 9/7/15 Mon 11/14/18 1 day Mon 9/7/15 Mon 9/7/1567		÷						
	Drainage/Calch Basins (Nonh Side) Excavation/Curb/Sidewsik Work (North Side)	1 day Tua 9/8/15 Tua 9/8/15 76 10 days Wed 2/17/16 Tua 3/1/16 70	1 .	7			*			
	Roadway Excention/Grading/Concrete Base	5 days Mon 8/8/16 Fri 8/12/16/72					ž			5
•	Curb/Sidewalk Work (South Side) Landscaping	1 day Thu 10/20/16 Thu 10/20/16 73 2 days Fri 11/11/16 Mon 11/14/16 74	-							
ļ	Flushing Avs - Clinton Ave to Waverly Ave Section U Utility Work (North Side)	311 days Wed 9/9/15 Wed 11/18/18 1 day Wed 9/9/15 Wed 9/9/15 77	1	7						
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ŀ	Drainage/Catch Basins (South Side)	1 day Wed 10/14/15 Wed 10/14/15 69 2 days Thu 10/15/15 Fri 10/16/15.85			1		.			
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3	Curb/Sidewalk Work (South Side)	2 days Fri 10/21/16 Mon 10/24/16.80 2 days Tue 11/15/16 Wed 11/16/16 81								2. A
1	lushing Ave - Waverly Ave to Washington Ave	311 days Fri 9/11/15 Fri 11/16/16	1	÷						
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	Section U (fility Work (South Side) Oran age/Catch Basins (South Side)	1 day Mon 10/19/15 Mon 10/19/15/85 1 day Tue 10/20/15 Tue 10/20/15/94	1		in Çana					
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	Roadway Excevation/Grading/Concrete Base	2 days Mon 6/22/16 Tue 8/23/16 88 5 days Wed 8/24/16 Tue 8/10/16 97								5
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	Section U Utility Work (South Side) Drainage/Catch Basins (South Side)	1 day Wed 10/21/15 Wed 10/21/15 95 1 day Thu 10/22/15 Thu 10/22/15 104			Ç.					
	Excevation/Curb/Sidewalk Work (North Side) - Roadway Externation/Grading/Concrete Base	10 days Wed 3/30/16 Tue 4/12/16 96 3 days Wed 3/31/16 Tue 9/5/16 98					*	s2.		a
	CurtySidewalk Work (South Side) Landscaping	1 day Wed 10/25/16 Wed 10/25/16 99 2 days Mon 11/21/16 Tue 11/22/16 100	1							745
1	lushing Ave - Hall St to Ryarson St	285 days Fet 10/23/16 The 11/24/16	l.		. .					
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	Curb/Sidewalk Work (South Side)	2 days Thu 10/27/16 Fri 10/28/15 108	1							\$
,	Landscaping lushing Ave - Ryerson SI to Grand Ave	2 days Wed 11/23/16 Tru 11/24/16 109 312 days Fri 9/18/15 Mon 11/28/16	}		1					
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	Section U Unity Viola (South Side) Drainage/Catch Basing (South Side)	1 day Wed 10/28/15 Wed 10/26/15 112	1	ſ	č					
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	Section U Utility Work (South Side) Drsinege/Carch Basine (South Side)	1 day Wed 11/4/15 Wed 11/4/15/130 1 day Teu 1/6/15 Teu 11/5/15/138		1	Ç		1			
	Excevation/Curb/Sidewalk Work (North Side)	10 days Wed \$/25/16 Tue \$/7/16 131			r		į	2	<i>w</i>	
	Roadway Excavation/Grading/Concrete Basa Curb/Sidewalk Work (South Side)	5 days Wed 9/28/16 Tue 10/4/16 132 1 day Wed 11/2/16 Wed 11/2/16 133								
v	Landscaping Hing Asphas Pavement (South Side)	2 days Thu 12/1/16 Fri 12/2/16-134 7 days Thu 11/3/16 Fri 11/11/16/142	-							
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aving Road		5 days Wed 11/23/16 Tue 11/28/16 145								

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Project: NYCDOC INWK10488 - Praim Date: Tue 3/31/15	Task Spät Mässione Summary	•	Project, Summary External Tasks External Milestone Inactive Milestone	•	Inactive Summary Manual Task Curation-only Manual Summary Rotup	۰۰۰۰۰۰ ۲	Start-only	 External Milastone Progress Gessline	#5351500#300#3087308730	 	_

VENDEX COMPLIANCE

(A) <u>Vendex Fees</u>: Pursuant to Procurement Policy Board Rule 2-08(f)(2), the contractor will be charged a fee for the administration of the VENDEX system, including the Vendor Name Check process, if a Vendor Name Check review is required to be conducted by the Department of Investigation. The contractor shall also be required to pay the applicable required fees for any of its subcontractors for which Vendor Name Check reviews are required. The fee(s) will be deducted from payments made to the contractor under the contract. For contracts with an estimated value of less than or equal to \$1,000,000, the fee will be \$175 per Vendor Name Check review. For contracts with an estimated value of greater than \$1,000,000, the fee will be \$350 per Vendor Name Check review.

(B) <u>Confirmation of Vendex Compliance</u>: The Bidder shall submit this Confirmation of Vendex Compliance to the Department of Design and Construction, Contracts Section, 30-30 Thomson Avenue – First Floor, Long Island City, NY 11101.

Bid Information: The Bidder shall complete the bid information set forth below.

Name of Bidder: YIN EOTER PRISES INC.
Bidder's Address: \$1349 99th ALE QV NULLIZS.
Bidder's Telephone Number: 718465 Soc
Bidder's Fax Number: 718 465 5700
Date of Bid Opening: 3125115
PROJECT ID: HUKIOU83

<u>Vendex Compliance</u>: To demonstrate compliance with Vendex requirements, the Bidder shall complete either Section (1) or Section (2) below, whichever applies.

(1) <u>Submission of Vendex Questionnaires to MOCS</u>: By signing in the space provided below, the Bidder certifies that as of the date specified below, the Bidder has submitted Vendex Questionnaires to the Mayor's Office of Contract Services, Attn: VENDEX, 253 Broadway, 9th Floor, New York, New York 10007.

Date of Submission:

By: _

(Signature of Partner or corporate officer)

Print Name:

(2) <u>Submission of Certification of No Change to DDC:</u> By signing in the space provided below, the Bidder certifies that it has read the instructions in a "Vendor's Guide to Vendex" and that such instructions do not require the Bidder to submit Vendex Questionnaires. The Bidder has completed TWO ORIGINALS of the Certification of No Change set forth on the next page of this Bid Booklet.

By: Signature of Partner or corporate officer) Print Name:

(NO TEXT ON THIS PAGE)

Certificate of No Change Form



- Please submit two completed forms. Copies will not be accepted.
- Please send both copies to the agency that requested it, unless you are advised to send it directly to the Mayor's Office of Contract Services (MOCS).
- A materially false statement willfully or fraudulently made in connection with this certification, and/or the failure to conduct appropriate due diligence in verifying the information that is the subject of this certification, may result in rendering the submitting entity non-responsible for the purpose of contract award.
- A materially false statement willfully or fraudulently made in connection with this certification may subject the person making the false statement to criminal charges

being duly sworn, state that I have read

and understand all the items contained in the vendor questionnaire and any submission of change as identified on page one of this form and certify that as of this date, these items have not changed. I further certify that, to the best of my knowledge, information and belief, those answers are full, complete, and accurate; and that, to the best of my knowledge, information, and belief, those answers continue to be full, complete, and accurate.

In addition, I further certify on behalf of the submitting vendor that the information contained in the principal questionnaire(s) and any submission of change identified on page two of this form have not changed and have been verified and continue, to the best of my knowledge, to be full, complete and accurate.

I understand that the City of New York will rely on the information supplied in this certification as additional inducement to enter into a contract with the submitting entity.

Vendor Questionnaire This section is required.

This refers to the vendor questionnaire(s) submitted for the vendor doing business with the City.

Name of Submitting Entity: VIN ENTERPOSES MC.
Name of Submitting Entity: <u>YIN ENTERPOSES INC.</u> Vendor's Address: <u>213-19</u> 99th ALE ON NY 11429.
Vendor's EIN or TIN: 11-36305 TT Requesting Agency: NUCDAC
Signature date on the last full vendor questionnaire signed for the submitting vendor: 912114
Signature date on change submission for the submitting vendor:

Mayor's Office of Contract Services 253 Broadway, 9th Floor New York, NY 10007 Phone: 212 788 0018 Fax: 212 788 0049

Principal Questionnaire

This section refers to the most recent principal questionnaire submissions.



Principal Name	Date of signature on last full Principal Questionnaire	Date(s) of signature on submission of change $Q \mid \mathcal{A} \mid \mathcal{A}$
2 Stephen Licata	912/14	912/14
3 Raymond Rudolph	912114	9/2/14
4		
5		
6		

Check if additional changes were submitted and attach a document with the date of additional submissions.

Certification This section is required.

This form must be signed and notarized. Please complete this twice. Copies will not be accepted.

Certified By:	
Stephen Licata	-
Name (Print)	
Scorptany	
Title	•
JUNTERPERDAGES INC.	-
Name of Submitting Entity	-
1/40th 3/24/15	
Signature // Date	
Notarized By:	
adin hink Choons 0164623369	ļ
Notary Public County License Issued License Number	
Sworn to before me on: $\bigcirc (2417)$ (2 2)	
Date ★ (No. 01GU6233691) ★ (Exp. 01/03/19) ★	
Mayor's Office of Contract Services 253 Broadway, 9th Floor New York, NY 10007 Phone: 212 788 0018 Fax: 212 788 0049	

IRAN DIVESTMENT ACT COMPLIANCE RIDER

FOR NEW YORK CITY CONTRACTORS

The Iran Divestment Act of 2012, effective as of April 12, 2012, is codified at State Finance Law ("SFL") §165-a and General Municipal Law ("GML") §103-g. The Iran Divestment Act, with certain exceptions, prohibits municipalities, including the City, from entering into contracts with persons engaged in investment activities in the energy sector of Iran. Pursuant to the terms set forth in SFL §165-a and GML §103-g, a person engages in investment activities in the energy sector of Iran if:

- (a) The person provides goods or services of twenty million dollars or more in the energy sector of Iran, including a person that provides oil or liquefied natural gas tankers, or products used to construct or maintain pipelines used to transport oil or liquefied natural gas, for the energy sector of Iran; or
- (b) The person is a financial institution that extends twenty million dollars or more in credit to another person, for forty-five days or more, if that person will use the credit to provide goods or services in the energy sector in Iran and is identified on a list created pursuant to paragraph (b) of subdivision three of Section 165-a of the State Finance Law and maintained by the Commissioner of the Office of General Services.

A bid or proposal shall not be considered for award nor shall any award be made where the bidder or proposer fails to submit a signed and verified bidder's certification.

Each bidder or proposer must certify that it is not on the list of entities engaged in investment activities in Iran created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. In any case where the bidder or proposer cannot certify that they are not on such list, the bidder or proposer shall so state and shall furnish with the bid or proposal a signed statement which sets forth in detail the reasons why such statement cannot be made. The City of New York may award a bid to a bidder who cannot make the certification on a case by case basis if:

- (1) The investment activities in Iran were made before the effective date of this section (i.e., April 12, 2012), the investment activities in Iran have not been expanded or renewed after the effective date of this section and the person has adopted, publicized and is implementing a formal plan to cease the investment activities in Iran and to refrain from engaging in any new investments in Iran: or
- (2) The City makes a determination that the goods or services are necessary for the City to perform its functions and that, absent such an exemption, the City would be unable to obtain the goods or services for which the contract is offered. Such determination shall be made in writing and shall be a public document.

CITY OF NEW YORK DEPARTMENT OF DESIGN AND CONSTRUCTION 31

DECEMBER 2013

BIDDER'S CERTIFICATION OF COMPLIANCE WITH IRAN DIVESTMENT ACT

Pursuant to General Municipal Law §103-g, which generally prohibits the City from entering into contracts with persons engaged in investment activities in the energy sector of Iran, the bidder/proposer submits the following certification:

[Please Check One]

P

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BIDDER'S CERTIFICATION

By submission of this bid or proposal, each bidder/proposer and each person signing on behalf of any bidder/proposer certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief, that each bidder/proposer is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law.

I am unable to certify that my name and the name of the bidder/proposer does not appear on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. I have attached a signed statement setting forth in detail why I cannot so certify.

contrily.	here	
	Stephon Li PRINTI Secretar	CL +Q ED NAME
Sworn to before me this 24 day of 3, 2015 Auto (phane) Notary Public	TARY PUS	
	No. 01GU6233691 Exp. 01/03/19 ★	
CITY OF NEW YORK	20	BID BOOKI ET

DEPARTMENT OF DESIGN AND CONSTRUCTION

THE CITY OF NEW YORK DEPARTMENT OF SMALL BUSINESS SERVICES DIVISION OF LABOR SERVICES CONTRACT COMPLIANCE UNIT 110 WILLIAMS STREET NEW YORK, NEW YORK 10038 PHONE: (212) 513-6323 FAX: (212) 618-8879

CONSTRUCTION

EMPLOYMENT

REPORT

BID BOOKLET DECEMBER 2013

33

(NO TEXT ON THIS PAGE)

The City of New York **Department of Small Business Services Division of Labor Services Contract Compliance Unit** 110 William Street New York, New York 10038 Phone: (212) 513 - 6323 Fax: (212) 618-8879

CONSTRUCTION EMPLOYMENT REPORT INSTRUCTIONS

WHO MUST FILE A CONSTRUCTION EMPLOYMENT REPORT

A Construction Employment Report (ER) must be filed if you meet the following conditions:				
CONTRACT FUNDING SOURCE	CONTRACTOR	CONTRACT VALUE	SUBMISSION REQUIREMENT	
Federal/Federally assisted	Prime and subcontractors	\$10,000 or greater		
	Prime contractor	\$1,000,000 or greater Construction Employmen		
City and state funded	Cubaaabaaataa	\$750,000 or greater		
Subcontractor -		Less than \$750,000	Less than \$750,000 Certificate (City/State Only)	

Prime Contractor:

- A general contractor or construction manager selected to perform work on a construction project funded (in whole or in part) by the federal government with a proposed contract value of \$10,000 or more.
- A general contractor or construction manager selected to perform work on a construction project funded or assisted by the City of New York with a proposed contract value of \$1,000,000 or more.

Subcontractor:

- A subcontractor selected to perform work on a construction project funded (in whole or in part) by the federal government with a proposed contract value of \$10,000 or more.
- A subcontractor selected to perform work on a construction project funded or assisted by the City of New York with a proposed contract value of \$750,000 or more.
- A subcontractor selected to perform work on a construction project funded or assisted by the City of New York with a proposed contract value of less than \$750,000 must submit a "Less than \$750,000" certificate.

WHERE TO FILE

Employment Reports must be filed with the City agency awarding the contract. If you are a contractor or subcontractor who will be working for a private developer in receipt of funding or assistance from the City, the ER must be filed with the City agency with jurisdiction over the developer's project.

DLS REVIEW PROCESS

In accordance with Executive Order 50 (EO 50), upon receipt by DLS of a completed ER, DLS conducts a review of the contractor's current employment policies, practices and procedures, as well as perform a statistical analysis of the contractor's workforce, if necessary. The process is as follows:

- Within five (5) business days, DLS will review the ER for completeness and accuracy. If any information is omitted or incorrect, or if necessary documents are not submitted, the submission shall be deemed incomplete and DLS will inform the contractor. The substantive compliance review does not commence until the submission is complete. An incomplete submission will delay the review process and may preclude or interrupt the contract approval.
- 2. If the ER submission is complete, the compliance review will proceed, resulting in one of the following:

Certificate of Approval

The contractor is found to be in compliance with all applicable laws and regulations. The approval is valid for 36 months.

Continued Approval Certificate

The contractor has been issued a Certificate of Approval in the previous 36 months which is good for the applicable contract.

Conditional Certificate of Compliance

The contractor is required to take corrective actions in order to be in compliance with EO 50. The contractor must meet the conditions within one month of the issue of the Conditional Certificate.

Determination of Nonperformance

The contractor has failed to take the required corrective actions stipulated in the Conditional Certificate. A determination of nonperformance may prevent a contractor from receiving an award of a contract.

HOW TO COMPLETE THE EMPLOYMENT REPORT

Contents

General Information

Part I: Contractor/Subcontractor Information

Part II: Employment Policies and Practices

Part III: Contract Bid Information and Projected and Current Workforce Forms Signature Page

PART I: CONTRACTOR/SUBCONTRACTOR INFORMATION

- Questions 7 11: Please provide the required contact information for your company. All contracts must have a designated Equal Employment Officer.
- Question 12: If you are a subcontractor, you must state the name of the contractor for whom you are providing the construction services.
- Question 13: Please provide the number of permanent employees in your company.
- Question 14a-g: The Project Identification Number (PIN) and the Contract Registration ID Number (CT#) can be obtained from the City agency. Provide a description of the trade work you will perform on this project and the address where the work will be performed. Subcontractors can obtain this information from the contract they have with the prime contractor.
- Questions 15 18: If your company has received a valid Certificate of Approval within the past 36 months, been audited by the United States Department of Labor, Office of Federal Contract Compliance Programs (OFCCP), or if your company has submitted an ER for a different contract for which you have not yet received a compliance certificate, then you only need to complete and submit the following:
 - General Information section
 - Part I Contractor/Subcontractor Information
 - Form B Projected Workforce
 - Signature Page

If your company is currently waiting for an approval on another contract previously submitted, be certain to identify the date on which you submitted the completed Employment Report, the name of the City contracting agency with which the contract was made, and the name and telephone number of the person to whom the Employment Report was submitted.

If your company was issued a Conditional Certificate of Approval, all required corrective actions must have been taken or DLS will not issue a Continued Certificate.

Question 18: If the company was audited by the OFCCP, also provide the following:

- Identify the reviewing OFCCP office by its name and address
- If an unconditional certificate of compliance was issued by the OFCCP, attach a copy of the certificate in lieu of completing Parts II and III;
- Include copies of all corrective actions and documentation of OFCCP's performance; and
- Provide a copy of all stated OFCCP findings.
- Question 19: Please provide a copy of any Collective Bargaining Agreement(s) which is negotiated through an employer trade association on behalf of your organization or any of its affiliates.

PART II: EMPLOYMENT POLICIES AND PRACTICES

Remember to label all documents with the question number for which they are submitted.

Questions 20a	policies, benefits and the policy(ies), proce If your firm follows un Please submit the m	You must respond to the questions as to whether or not your firm has documents reflecting written policies, benefits and procedures. If so, then you must identify <u>by name</u> each document in which the policy(ies), procedure(s) and benefit(s) is located and submit copies of all of the document(s). If your firm follows unwritten practices or procedures, include an explanation of how they operate. Please submit the most current document(s), including all applicable amendments. Label each document and/or unwritten practice according to the question to which it corresponds (e.g. 20a, 20b, etc.)		
Questions 21a	 h: Inquires about the m Reform and Control . 	anner/methods by which yo Act of 1986 (IRCA).	ou comply with the requirer	nents of the Immigration
Question 22:	Inquires into where a	nd how I-9 forms are maint	ained and stored.	
Questions 23a	medical examination	Inquires into whether or not there is a requirement that an applicant or employee be subjected to a medical examination at any given time. Copes of the medical information questionnaire and instructions must be submitted with the Employment Report.		
Question 24:		Indicate the existence and location of all statements of your firm's Equal Employment Opportunity policy and attach a copy of each statement.		
Question 25:	Submit any current A	Submit any current Affirmative Action Plan(s) created pursuant to Executive Order 11246.		
Question 26:	and submit a copy of	If your firm or collective bargaining agreement has an internal grievance procedure, indicate this and submit a copy of the policy and procedure. If unwritten, explain its nature and operation. Explain how your firm's procedure addresses EEO complaints.		
Question 27:	•	If your employees have used the procedure in the last three (3) years, please submit an explanation in the format indicated below:		
1. Number of complaint(s)	2. Nature of the complaint(s)	3. Position(s) of the complainant(s)	4. Was an investigation conducted? Y/N	5. Current status of the disposition

Question 28: Indicate whether in the past three (3) years complaints have been filed with a court of law or administrative agency, naming your company as a defendant (or respondent) in a complaint alleging violation of any anti-discrimination or affirmative action laws. If yes, develop and submit a log to show, for each administrative/and or judicial action filed, the following information:

1. Name(s) of complainant(s)	2. Administrative agency or court in which action	3. Nature of the complaint(s)	4. Current status	5. If not pending, the complaint's disposition
	was filed			

Question 29: Identify each job for which a physical qualification exists. Identify and explain the physical qualification(s) for each stated job. Submit job descriptions for each job and the reasons for the qualifications.

Question 30: Identify each job for which there exists any qualification related to age, race, color, national origin, sex, creed, disability, marital status, sexual orientation or citizenship status. Identify and explain the specific related qualification for each job stated. Submit job descriptions for each job and the reasons for the qualifications.

PART III: CONTRACT BID INFORMATION AND PROJECTED AND CURRENT WORKFORCE FORMS

FORM A: CONTRACT BID INFORMATION - USE OF SUBCONTRACTORS/TRADES

Your projections for the utilization of subcontractors on the proposed contract are to be provided in this section. A chart has been provided for the identification of subcontractors. Information is to be provided to the extent known at the time the ER is filed for review by DLS. If the subcontractor's name is unknown, then write "unknown". Under "ownership", enter the appropriate race/ethnic and gender code. If the contract is federally funded or assisted and the subcontractor is being utilized in accordance with applicable federal requirements with respect to Minority Business Enterprise or Woman Business Enterprise requirements, enter the appropriate code. This will also apply to state funded contracts with similar requirements for minority and female owned businesses.

FORM B: PROJECTED WORKFORCE FOR WORK TO BE PERFORMED ON THIS PROJECT

For each trade to be engaged by your company for this project, enter the projected workforce for Males and Females by trade classification in the charts provided.

FORM C: CURRENT WORKFORCE FOR WORK TO BE PERFORMED ON THIS PROJECT

For each trade *currently* engaged by your company for all work performed in NYC, enter the current workforce for Males and Females by trade classification in the charts provided.

SIGNATURE PAGE

The signatory of this Employment Report and all other documents submitted to DLS must be an official authorized to enter into a binding legal agreement. The signature page must be completed in its entirety and notarized. Only original signatures will be accepted.

The City of New York Department of Small Business Services **Division of Labor Services Contract Compliance Unit** 110 William Street, New York, New York 10038 Phone: (212) 513 - 6323 Fax: (212) 618-8879 CONSTRUCTION EMPLOYMENT REPORT

GENERAL INFORMATION

Your contractual relationship in this contract is: Prime contractor x Subcontractor 1. Are MWBE goals attached to this project? Yes No 1a. 2. Please check one of the following if your firm would like information on how to certify with the City of New York as a: Minority Owned Business Enterprise Locally Based Business Enterprise Women Owned Business Enterprise **Emerging Business Enterprise Disadvantaged Business Enterprise** If you are certified as an MBE, WBE, LBE, EBE or DBE, what city/state agency are you 2a. certified with? Are you DBE certified? Yes No Please indicate if you would like assistance-from SBS in identifying certified MWBEs for 3. contracting opportunities: Yes___ No_V Is this project subject to a project labor agreement? Yes No 4. No ___ 5. Are you a Union contractor? Yes If yes, please list which local(s) you affiliated with 1010 731 10 29 36 Are you a Veteran owned company? Yes 6. No PART I: CONTRACTOR/SUBCONTRACTOR INFORMATION 7. Employer Identification Number or Federal Tax I.D. 8. Company Name 9. **Company Address and Zip Code** Ilano 10. Operating Office 9465200 11. JANAAr

Designated Equal Opportunity Compliance Officer (If same as Item #10, write "same")

n + a

Telephone Number

Name of Prime Contractor and Contact Person (If same as Item #8, write "same")

12.

13.	Number of employees in your company:	96
14.	Contract information:	
	(a) UCDDC Contracting Agency (City Agency)	(b) Contract Amount
	(c) Procurement Identification Number (PIN)	(d) Contract Registration Number (CT#)
	(e) Projected Commencement Date	(f) Projected Completion Date
	(g) Description and location of proposed contrac	
		·
15.	Has your firm been reviewed by the Division of La and issued a Certificate of Approval? YesN	abor Services (DLS) within the past 36 months
	If yes, attach a copy of certificate.	
16.	Has DLS within the past month reviewed an Emp and issued a Conditional Certificate of Approval?	
	If yes, attach a copy of certificate.	
W	OTE: DLS WILL NOT ISSUE A CONTINUED CER ITH THIS CONTRACT UNLESS THE REQUIRED ONDITIONAL CERTIFICATES OF APPROVAL HA	CORRECTIVE ACTIONS IN PRIOR
17.	Has an Employment Report already been submit Employment Report) for which you have not yet r Yes No If yes,	
	Date submitted:Agency to which submitted:	
	Name of Agency Person:	
	Contract No:	
18.	Has your company in the past 36 months been at Labor, Office of Federal Contract Compliance Pro	udited by the United States Department of
	if yes,	· ·

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- (a) Name and address of OFCCP office.
- (b) Was a Certificate of Equal Employment Compliance issued within the past 36 months? Yes___ No____

If yes, attach a copy of such certificate.

(c) Were any corrective actions required or agreed to? Yes___ No___

If yes, attach a copy of such requirements or agreements.

(d) Were any deficiencies found? Yes___ No_

If yes, attach a copy of such findings.

19. Is your company or its affiliates a member or members of an employers' trade association which is responsible for negotiating collective bargaining agreements (CBA) which affect construction site hiring? Yes___ No_

If yes, attach a list of such associations and all applicable CBA's.

PART II: DOCUMENTS REQUIRED

- 20. For the following policies or practices, attach the relevant documents (e.g., printed booklets, brochures, manuals, memoranda, etc.). If the policy(ies) are unwritten, attach a full explanation of the practices. See instructions.
 - $(\underline{4}, \underline{6})$ Health benefit coverage/description(s) for all management, nonunion and union employees (whether company or union administered)
 - $\underline{\mu}$ (b) Disability, life, other insurance coverage/description
 - (c) Employee Policy/Handbook
 - N (d) Personnel Policy/Manual
 - (e) Supervisor's Policy/Manual
 - (f) Pension plan or 401k coverage/description for all management, nonunion and union employees, whether company or union administered
 - (g) Collective bargaining agreement(s).
 - (h) Employment Application(s)
 - (i) Employee evaluation policy/form(s).
 - (j) Does your firm have medical and/or non-medical (i.e. education, military, personal, pregnancy, child care) leave policy?

- To comply with the Immigration Reform and Control Act of 1986 when and of whom does your 21. firm require the completion of an I-9 Form?
 - (a) Prior to job offer Yes Yes V (b) After a conditional job offer No (c) After a job offer Yes_∠ No (d) Within the first three days on the job Yes___ No_ (e) To some applicants Yes 🕔 No 2 (f) To all applicants Yes 🗸 No (g) To some employees No Yes Yes_ 1/No (h) To all employees
- 22. Explain where and how completed I-9 Forms, with their supportive documentation, are maintained and made accessible.

Yes

Yes

NUNOF ion pleta

Does your firm or any of its collective bargaining agreements require job applicants to take a 23. medical examination? Yes No V

No

No

No

If yes, is the medical examination given:

- (a) Prior to a job offer
- (b) After a conditional job offer Yes
- (c) After a job offer Yes
- (d) To all applicants No Yes No

(e) Only to some applicants

If yes, list for which applicants below and attach copies of all medical examination or questionnaire forms and instructions utilized for these examinations.

Do you have a written equal employment opportunity (EEO) policy? Yes 24. No.

If yes, list the document(s) and page number(s) where these written policies are located.

25. Does the company have a current affirmative action plan(s) (AAP)

Minorities and Women

Individuals with handicaps

/ Other. Please specify

Does your firm or collective bargaining agreement(s) have an internal grievance procedure with 26. respect to EEO complaints? Yes ____ No__

If yes, please attach a copy of this policy.

If no, attach a report detailing your firm's unwritten procedure for handling EEO complaints.

Page 4 Revised 8/13 FOR OFFICIAL USE ONLY: File No.

27. Has any employee, within the past three years, filed a complaint pursuant to an internal grievance procedure or with any official of your firm with respect to equal employment opportunity? Yes____ No /

If yes, attach an internal complaint log. See instructions.

28. Has your firm, within the past three years, been named as a defendant (or respondent) in any administrative or judicial action where the complainant (plaintiff) alleged violation of any anti-discrimination or affirmative action laws? Yes___ No

If yes, attach a log. See instructions.

29. Are there any jobs for which there are physical qualifications? Yes___ No____

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

30. Are there any jobs for which there are age, race, color, national origin, sex, creed, disability, marital status, sexual orientation, or citizenship qualifications? Yes____ No____

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

SIGNATURE PAGE

I, (print name of authorized official signing) <u>POMALACA</u> hereby certify that the information submitted herewith is true and complete to the best of my knowledge and belief and submitted with the understanding that compliance with New York City's equal employment requirements, as contained in Chapter 56 of the City Charter, Executive Order No. 50 (1980), as amended, and the implementing Rules and Regulations, is a contractual obligation. I also agree on behalf of the company to submit a certified copy of payroll records to the Division of Labor Services on a monthly basis.

Contractor's Name ennon

Name of person who prepared this Employment Report

Name of official authorized to sign on behalf of the contractor

Telephone Numb

Signature of authorized official

If contractors are found to be underutilizing minorities and females in any given trade based on Chapter 56 Section 3H, the Division of Labor Services reserves the right to request the contractor's workforce data and to implement an employment program.

Contractors who fail to comply with the above mentioned requirements or are found to be in noncompliance may be subject to the withholding of final payment.

Willful or fraudulent falsifications of any data or information submitted herewith may result in the termination of the contract between the City and the bidder or contractor and in disapproval of future contracts for a period of up to five years. Further, such falsification may result in civil and/and or criminal prosecution.

To the extent permitted by law and consistent with the proper discharge of DLS' responsibilities under Charter Chapter 56 of the City Charter and Executive Order No. 50 (1980) and the implementing Rules and Regulations, all information provided by a contractor to DLS shall be confidential.

Only original signatures accepted.

day of March 20 1 Sworn to before me this $\hat{\nabla}$ Authorized No. 01GU6233691 Exp. 01/03/19 Page 6 OFNE Revised 8/13 FOR OFFICIAL USE ONLY: File No.

The City of New York Department of Small Business Services Division of Labor Services Contract Compliance Unit 110 William Street, New York, New York 10038 Phone: (212) 513 – 6323 Fax: (212) 618-8879 CONSTRUCTION EMPLOYMENT REPORT

GENERAL INFORMATION

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1. ·	Your contractual relationship in this contract is: Prime contractor x Subcontractor
1a.	Are M/WBE goals attached to this project? Yes V No
2.	Please check one of the following if your firm would like information on how to certify with the City of New York as a:
	Minority Owned Business Enterprise Locally Based Business Enterprise Women Owned Business Enterprise Emerging Business Enterprise Disadvantaged Business Enterprise Emerging Business Enterprise
2a.	If you are certified as an MBE, WBE, LBE, EBE or DBE, what city/state agency are you certified with? Are you DBE certified? Yes No
3.	Please indicate if you would like assistance from SBS in identifying certified M/WBEs for contracting opportunities: Yes No
4.	Is this project subject to a project labor agreement? Yes No _/
5.	Are you a Union contractor? Yes No If yes, please list which local(s) you affiliated with /010/731/1536/14/15/29
6.	Are you a Veteran owned company? Yes No
PART	I: CONTRACTOR/SUBCONTRACTOR INFORMATION
7.	//-3630755 Employer Identification Number or Federal Tax I.D.
8.	JLJ IV ENTERPHISES, INC. Company Name
9.	213-19 99th Ave, Queons VILLE, NY 11429 Company Address and Zip Code
10.	JANES JULINO7/8-465-200Chief Operating OfficerTelephone Number
11.	CAROLYN GUINAN 718-465-5800
	Designated Equal Opportunity Compliance Officer Telephone Number (If same as Item #10, write "same")
12.	SAME
	Name of Prime Contractor and Contact Person (If same as Item #8, write "same")

Contract information:	
(a) <u>NYCDOC</u>	(b) <u><i>(b, 65/, 909. 89</i></u>
Contracting Agency (City Agency)	Contract Amount
c) 850 2015 HW 00 27C	(d)
Procurement Identification Number (PIN)	Contract Registration Number (CT#
(e)	(f) 785
Projected Commencement Date	Projected Completion Date

15. Has your firm been reviewed by the Division of Labor Services (DLS) within the past 36 months and issued a Certificate of Approval? Yes No____

WILLIAnsburg PL. INCLUSING DEAMAGE, WATER MANS, TRAPPER of STREET LAURING.

If yes, attach a copy of certificate.

16. Has DLS within the past month reviewed an Employment Report submission for your company and issued a Conditional Certificate of Approval? Yes_/ No____

If yes, attach a copy of certificate.

NOTE: DLS WILL NOT ISSUE A CONTINUED CERTIFICATE OF APPROVAL IN CONNECTION WITH THIS CONTRACT UNLESS THE REQUIRED CORRECTIVE ACTIONS IN PRIOR CONDITIONAL CERTIFICATES OF APPROVAL HAVE BEEN TAKEN.

Has an Employment Report already been submitted for a different contract (not covered by this Employment Report) for which you have not yet received compliance certificate?
 Yes____No_V____If yes,

Date submitted:	
Agency to which submitted:	
Name of Agency Person:	
Contract No:	·
Telephone:	

18. Has your company in the past 36 months been audited by the United States Department of Labor, Office of Federal Contract Compliance Programs (OFCCP)? Yes____ No____

If yes,

Page 2 Revised 8/13 FOR OFFICIAL USE ONLY: File No.

- (a) Name and address of OFCCP office.
- (b) Was a Certificate of Equal Employment Compliance issued within the past 36 months? Yes___ No____

If yes, attach a copy of such certificate.

(c) Were any corrective actions required or agreed to? Yes___ No_

If yes, attach a copy of such requirements or agreements.

(d) Were any deficiencies found? Yes___ No_✓

If yes, attach a copy of such findings.

19. Is your company or its affiliates a member or members of an employers' trade association which is responsible for negotiating collective bargaining agreements (CBA) which affect construction site hiring? Yes ____ No____

If yes, attach a list of such associations and all applicable CBA's.

PART II: DOCUMENTS REQUIRED

- 20. For the following policies or practices, attach the relevant documents (e.g., printed booklets, brochures, manuals, memoranda, etc.). If the policy(ies) are unwritten, attach a full explanation of the practices. See instructions.
 - $\frac{1}{2}$ (a) Health benefit coverage/description(s) for all management, nonunion and union employees (whether company or union administered)
 - $\underline{\checkmark}$ (b) Disability, life, other insurance coverage/description
 - A (c) Employee Policy/Handbook
 - N (d) Personnel Policy/Manual
 - N (e) Supervisor's Policy/Manual
 - (f) Pension plan or 401k coverage/description for all management, nonunion and union employees, whether company or union administered
 - \bigvee (g) Collective bargaining agreement(s).
 - \checkmark (h) Employment Application(s)
 - (i) Employee evaluation policy/form(s).
 - (j) Does your firm have medical and/or non-medical (i.e. education, military, personal, pregnancy, child care) leave policy?

21. To comply with the Immigration Reform and Control Act of 1986 when <u>and of whom</u> does your firm require the completion of an I-9 Form?

(a) Prior to job offer	Yes_ No
(b) After a conditional job offer	Yes 🖌 No
(c) After a job offer	Yes No
(d) Within the first three days on the job	
(e) To some applicants	YesNo
(f) To all applicants	Yes No
(g) To some employees	YesNo
(h) To all employees	Yes No
(e) To some applicants(f) To all applicants	YesNo YesNo YesNo YesNo

22. Explain where and how completed I-9 Forms, with their supportive documentation, are maintained and made accessible.

AT OUR MAN OFFICE: 213-19 99th AVE, DUCTUS VILLAGE, NY 11429

23. Does your firm or any of its collective bargaining agreements require job applicants to take a medical examination? Yes____ No____

If yes, is the medical examination given:

(a) Prior to a job offer
(b) After a conditional job offer
(c) After a job offer
(d) To all applicants
(e) Only to some applicants
Yes_____ No___
Yes____ No___

If yes, list for which applicants below and attach copies of all medical examination or questionnaire forms and instructions utilized for these examinations.

24. Do you have a written equal employment opportunity (EEO) policy? Yes No

If yes, list the document(s) and page number(s) where these written policies are located.

25. Does the company have a current affirmative action plan(s) (AAP)

- N Minorities and Women
 - N Individuals with handicaps

N__Other. Please specify

26. Does your firm or collective bargaining agreement(s) have an internal grievance procedure with respect to EEO complaints? Yes

If yes, please attach a copy of this bolicy.

If no, attach a report detailing your firm's unwritten procedure for handling EEO complaints.

Page 4 Revised 8/13 FOR OFFICIAL USE ONLY: File No._ 27. Has any employee, within the past three years, filed a complaint pursuant to an internal grievance procedure or with any official of your firm with respect to equal employment opportunity? Yes___ No___

If yes, attach an internal complaint log. See instructions.

28. Has your firm, within the past three years, been named as a defendant (or respondent) in any administrative or judicial action where the complainant (plaintiff) alleged violation of any anti-discrimination or affirmative action laws? Yes___ No___

If yes, attach a log. See instructions.

29. Are there any jobs for which there are physical qualifications? Yes___ No_

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

30. Are there any jobs for which there are age, race, color, national origin, sex, creed, disability, marital status, sexual orientation, or citizenship qualifications? Yes___ No___

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

SIGNATURE PAGE

STEPHEN LICHA I, (print name of authorized official signing) hereby certify that the information submitted herewith is true and complete to the best of my knowledge and belief and submitted with the understanding that compliance with New York City's equal employment requirements, as contained in Chapter 56 of the City Charter, Executive Order No. 50 (1980), as amended, and the implementing Rules and Regulations, is a contractual obligation. I also agree on behalf of the company to submit a certified copy of payroll records to the Division of Labor Services on a monthly basis.

JLJ IV ENTERME, Im. Contractor's Name STEPHEN LCHA Name of person who prepared this Employment Report Speritor Licita Name of official authorized to sign on behalf of the contractor 718-4/05-5000 Telephone Nymber Signature of authorized official

If contractors are found to be underutilizing minorities and females in any given trade based on Chapter 56 Section 3H, the Division of Labor Services reserves the right to request the contractor's workforce data and to implement an employment program.

Contractors who fail to comply with the above mentioned requirements or are found to be in noncompliance may be subject to the withholding of final payment.

Willful or fraudulent falsifications of any data or information submitted herewith may result in the termination of the contract between the City and the bidder or contractor and in disapproval of future contracts for a period of up to five years. Further, such falsification may result in civil and/and or criminal prosecution.

To the extent permitted by law and consistent with the proper discharge of DLS' responsibilities under Charter Chapter 56 of the City Charter and Executive Order No. 50 (1980) and the implementing Rules and Regulations, all information provided by a contractor to DLS shall be confidential.

Only original signatures accepted.

31st day of <u>Marcu</u> 20 <u>15</u> <u>Authorized Signature</u> Sworn to/before me this _3/ No. 01GU6233691 Exp. 01/03/

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FORM A. CONTRACT BID INFORMATION: USE OF SUBCONTRACTORS/TRADES

- 1. Do you plan to subcontractor work on this contract? Yes 🗸 No____
- 2. If yes, complete the chart below.

NOTE: All proposed subcontractors with a subcontract in excess of \$750,000 must complete an Employment Report for review and approval before the contract may be awarded and work commences.

SUBCONTRACTOR'S NAME*	OWNERSHIP (ENTER APPROPRIATE CODE LETTERS BELOW)	WORK TO BE PERFORMED BY SUBCONTRACTOR	TRADE PROJECTED FOR USE BY SUBCONTRACTOR	PROJECTED DOLLAR VALUE OF SUBCONTRACT
ADVANCED MILL PANE	В	Milling & Astimo Phing	Milling & ASPHALE PAVING	# 1,050,000 -
TBD	TBD	STREET LIGHTING / TUMIC SIGNES	Elteman	# 367,000-
TBD	TBD	LANDSCHENE	Lanoscoping	# 224,695 -
TBD	TBD	LINE STRIPING	LINE STRIPING	# 150,000 -
TBD	700	RODENT COTTOL	lodar Corroe	# 120,000 -

*if subcontractor is presently unknown, please enter the trade (craft name).

OWNERSHIP CODES

- W: White
- B: Black
- H: Hispanic
- A: Asian
- N: Native American
- F: Female



TRADE CLASSIFICATION CODES

(J) Journeylevel Workers(H) Helper(TOT) Total by Column

(A) Apprentice (TRN) Trainee For each trade to be engaged by your company for this project, enter the projected workforce for Males and Females by trade classification on the charts below.

Trade:			N	MALES					FE	MALES		
Union Affiliation, if applicable		(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.	1	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.
Total (Col. #1-10):	J	5	1	2		-			1	(-	
Total Minority, Male & Female	н				_							_
(Col. #2,3,4,5,7,8,9, & 10):	A		_								-	_
Total Female (Col. #6 – 10): 2_	TRN				·							
· · · ·	⊤ 0 Т	5	(2	0	ð		0	1	1	0	0

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

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UNION.

FORM B: PROJECTED WORKFORCE

Trade:		MALES							FEMALES						
Union Affiliation, if applicable		(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.	٦ I	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.			
Total (Col. #1-10):	J	2			_	_				_	_				
Z Total Minority, Male & Female	Н				-	-			_		-	-			
(Col. #2,3,4,5,7,8,9, & 10):	A		_						_		_	(
Total Female (Col. #6 – 10): 	TRN	_													
	TOT	2	0	0	0	0		0	0	0	0	0			

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

UMON.



TRADE CLASSIFICATION CODES

(J) Journeylevel Workers(H) Helper(TOT) Total by Column

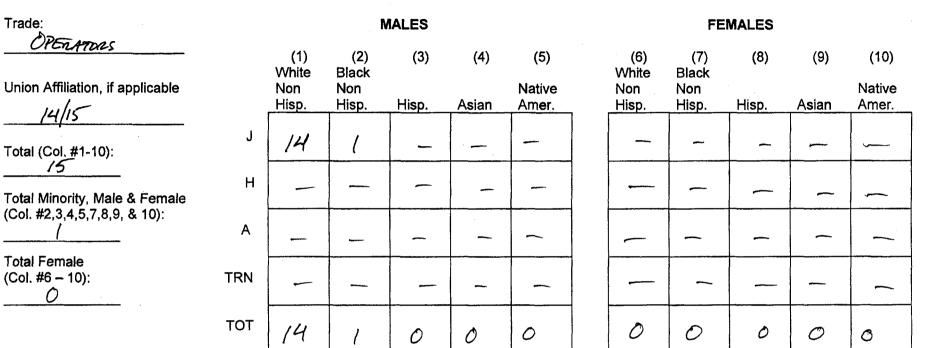
(A) Apprentice (TRN) Trainee For each trade currently engaged by your company for all work performed in New York City, enter the current workforce for Males and Females by trade classification on the charts below.

Trade:			f	MALES			FEMALES						
LABOLEES TIMETICS Union Affiliation, if applicable 731 10 10/1536		(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.	1	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.	
Total (Col. #1-10):	J	36	5	15		_		-	2	- 2	-		
60 Total Minority, Male & Female	н		-		_	_		_	-	-	-	-	
(Col. #2,3,4,5,7,8,9, & 10): 24	А		_	-	-					-	-		
Total Female (Col. #6 – 10): 	TRN	_			_	-		-			_	_	
	тот	36	5	15	0	0		ð	2_	2	0	D	

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

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What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

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UNION.



INFRASTRUCTURE DIVISION BUREAU OF DESIGN

VOLUME 1 OF 3

PROJECT ID: HWK1048B

RECONSTRUCTION OF FLUSHING AVENUE

FROM NAVY STREET TO WILLIAMSBURG STREET (BROOKLYN WATERFRONT GREENWAY)

INCLUDING CURB AND SIDEWALK RECONSTRUCTION, SEWER, STREET LIGHTING, AND TRAFFIC SIGNAL WORK

Together With All Work Incidental Thereto BOROUGH OF BROOKLYN CITY OF NEW YORK

	Contractor.
Dated	 , 20