TITLE:





PURCHASING DEPARTMENT

600 Mt. Pleasant Avenue, Building #5 Providence, Rhode Island 02908 Phone: 401-456-8047 Fax: 401-456-8528

INVITATION TO BID

SOLICITATION NUMBER: 44639

SOLICITATION TITLE: DONOVAN DINING CENTER ELEVATOR PROJECT —RIC

BID PROPOSAL SUBMISSION DEADLINE: March 27, 2020 at 11:00 AM

NOTICE TO VENDORS:

This solicitation shall be subject to Procurement Regulation 220-RICR-30-00-4

Per Section 4.6 A(1)c,vendors who are not prequalified may bid on a public works project, but the vendor must be prequalified prior to the issuance of the award.

Please follow instructions provided at https://www.ridop.ri.gov/prequalification/

Sales Representaive

	ket Form should be submitted in a separate seincluded within the Public Copy.	aled envelope at time of bid submission.
PREBID CONFERENCE X NONMANDATORY MANDATORY	E	
	ollege Campus, 600 Mount Pleasant Avenue, Pr van Dining Center – 2 nd Floor – Room 204 n 12, 2020	ovidence, RI 02908
March 17, 2020 @ 2:00 PM	concerning this solicitation may be emailed to a <u>1 (EST)</u> . Please reference the Bid # on all corress an addendum to this solicitation. It is the resp	pondence. Questions received if any, will
PAYMENT AND PERFOI	RMANCE BOND REQUIRED: Yes	BID BOND REQUIRED: Yes
EDD.		
FEIN:	04-3204998	
VENDOR NAME:	Atlantic Elevator South Co., Inc.	
ADDRESS:	1900 Fall River Avenue, Seekonk, MA 02771	
TELEPHONE:	800-378-3538	
FAX:	508-336-2538	
CONTACT PERSON:	Jon Mathews	
EMAIL:	jonmathews@atlanticelevatorsouth.com	

NOTICE TO VENDORS: BIDDER CERTIFICATION COVER FORM

Each bid proposal for a *public works project* must include a "public copy" to be available for public inspection upon the opening of bids. **Bid proposals that do not include a copy for public inspection will be deemed nonresponsive.** For further information on how to comply with this statutory requirement, see R.I. Gen. Laws §§ 37-2-18(b) and (j). Also see Procurement Regulations 5.11, and in addition, for highway and bridge projects, also see Procurement Regulations 5.13, accessible at www.ridop.ri.gov.

SECTION 2 —DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below						
N 1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of t Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal						
"Yes," provide details below.						
N 2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the						
Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority						
terminated for any reason within the previous 5 years. If "Yes," provide details below.						
N 3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the						
Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s)						
by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.						
N 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is						
serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority						
or quasi-public corporation, including without limitation, any entity created as a legislative body or public or state agency by the						
general assembly or constitution of this state. Disclosure details (continue on additional sheet if necessary):						
Disclosure delatis (continue on additional sheet if necessary).						
SECTION 3 – OWNERSHIP DISCLOSURE						
Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed						
nonresponsive.						
If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other						
owners that hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is						
required.						
List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate						
rent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address,						

SECTION 4 – CERTIFICATIONS

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive. Indicate Yes (Y) or No (N) and if No, provide details below:

principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each

intermediate parent company and the ultimate parent company of the bidder.

THE BIDDER CERTIFIES THAT:

<u>Y</u>	_ 1.	The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to the solicitation.
<u>Y</u>	_ 2.	The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements any contract awarded pursuant to this solicitations and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.
<u>Y</u>	_ 3.	The Bidder will maintain all required licenses during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.
Υ Υ		The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in the Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or
-	_	Official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.
Y	_ 6.	This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principles, directors, mangers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.
<u>Y</u>	_ 7.	The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws 37-2.5-3 as a person or entity engaging in investment activities in Iran described in 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.
<u>Y</u>	8.	The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.
Cert	ific	ation details (continue on additional sheet if necessary):

Submission by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the State of Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation and the bid proposal. The Bidder certifies that: (1) the Bidder has reviews this solicitation and agrees to comply with its terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted in the bid proposal (including this Bidder Certification Form) is accurate and complete. The Bidder acknowledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any contract awarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below represents, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of this bid proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

BIDDER

Date: June 1, 2020

Atlantic Elevator South Co., Inc.

Manue of Bidder

Signature in ink Sales Representative

Printed name and title of person signing on behalf of Bidder

RETURN OF BID INVITATION - Bids must be mailed/delivered to RHODE ISLAND COLLEGE PURCHASING

DEPARTMENT, BUILDING #5 in a sealed envelope furnished, by the time and date specified for the opening of responses.

Bids misdirected to other locations or which are not present at the time of opening for whatever cause will be considered to be late, and will be returned unopened. For the purposes of this requirement the official time and date shall be that of the date/time stamp in the reception area.

Solicitation #:	44639	
Solicitation Ti	itle: Rhode Island College - Donovan Dir	ning Elevator
BID FORM		
DID FURIN		
To:	Rhode Island College	
	Purchasing Office, Building #5, East Carr	npus
	600 Mt. Pleasant Avenue, Providence, R	02908
Bidder:		
Didder.	Atlantic Elevator South Co., Inc.	
	Legal name of entity	
	1900 Fall River Avenue, Seekonk, MA 02771	
	Address (street/city/state/zip)	
	Jon Mathews	jonmathews@atlanticelevatorsouth.com

1. BASE BID PRICE

Contact name

800-378-3538

Contact telephone

The Bidder submits this bid proposal to perform all of the work (including labor and materials) described in the solicitation for this Base Bid Price (including the costs for all Allowances, Bonds, and Addenda):

\$	280,000.00		80,000.00	0	
	(base bid price in figures	orinted electronically, type	ped, or handwritten legibly in ink	k)	
	Two Hundred-Eighty	Thousand Dollars	Two-Hundre	ed - Eint	y Thousand
	(base bid price in words p	rinted electronically, typ	ed, or handwritten legibly in ink))	_
llav	vanasa			Done	ars or

Contact email

Contact fax

508-336-2538

Allowances

The Base Bid Price includes the costs for the following Allowances:

1. Allowance 1: The existing in-ground hydraulic cylinder and ram assembly shall be replaced with new for one hundred thousand dollars (\$100,000).

Bonds

The Base Bid Price <u>includes</u> the costs for all Bid and Payment and Performance Bonds required by the solicitation.

Addenda

The Bidder has examined the entire solicitation (including the following Addenda), and the Base Bid Price *includes* the costs of any modifications required by the Addenda.

Solicitation #:44639 Solicitation Title: <u>Rhode Island College – Donovan Dining Elevator</u>				
	All Addenda must be acknow	vledged.		
	Addendum No. 1 dated:	3/10/2020 Acknowledged		
	Addendum No. 2 dated:	3/17/2020 Acknowledged		
	Addendum No. 3 dated:	4/9/2020 Acknowledged		
	Addendum No. 4 dated:	5/18/2020 Acknowledged		

2. ALTERNATES (Additions/Subtractions to Base Bid Price)

The Bidder offers to: (i) perform the work described in these Alternates as selected by the State in the order of priority specified below, based on the availability of funds and the best interest of the State; and (ii) increase or reduce the Base Bid Price by the amount set forth below for each Alternate selected.

1. Alternate 1: Provide the Work as described using only straight-time, regular working hours extending the schedule from 30 working days. 6 days a week for 5 weeks, to 40 working days, 5 days a week for 8 weeks.

A	dd: Subtract: x		
\$	30,000.00	#30,000	
	(base bid price in figures printed e	electronically, typed, or handwritten legibly in ink)	
			15 //
	Thirty Thousand Dollars	ThurtyThousand	Dollars
	(base bid price in words printed e	lectronically, typed, or hardwritten legibly in ink)	dr

3. UNIT PRICES

The Bidder submits these predetermined Unit Prices as the basis for any change orders approved in advance by the State. These Unit Prices include all costs, including labor, materials, services, regulatory compliance, overhead, and profit. – **NONE**

4. CONTRACT TIME

In order to expedite the work and minimize elevator down-time, the bidder offers to provide overtime labor as necessary as the base bid to perform the work in accordance with the timeline specified below:

Start of construction: Within 7 days of issued PO

Substantial completion: Within 30 working days of issued PO

Final completion: Within 45 working days of issued PO

Solicitation	#:	44639					
Solicitation	Title	: Rhode	Island	College -	Donovan	Dining	Elevator

5. LIQUIDATED DAMAGES

The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for <u>each</u> *calendar* day of delay beyond the date for substantial completion, as determined in the sole discretion of the State: \$500/day.

Five Hundred dollars per calendar day.

This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the Bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

Date:

June 1, 2020

Atlantic Elevator South Co., Inc.
Name of Bidger

Signature in inc

Jon Mathews Sales Representative
Printed name and title of person signing on behalf of Bidder

#RI License # 28
Bidder's Contractor Registration Number

State of Rhode Island PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpayer Identification Number (T.I.N.)
Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number. Social Security No. (SSN) Employer ID No. (EIN) 04 3204998
NAME Atlantic Elevator South Co., Inc.
ADDRESS 1900 Fall River Avenue
(REMITTANCE ADDRESS, IF DIFFERENT)
CITY, STATE AND ZIP CODE Seekonk, MA 02771
 CERTIFICATION: Under penalties of perjury, I certify that: (1) The number shown on this form is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because either: (A) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (B) the IRS has notified me that I am no longer subject to backup withholding. Certification Instructions — You must cross out item (2) above if you have been notified by the IRS that you are subject to backup withholding because of under-reporting interest or dividends on your tax return. However, if after being notified by IRS that you were subject to backup withholding you received another notification from IRS that you are no longer subject to backup
withholding, do not cross out item (2). PLEASE SIGN HERE SIGNATURE SIGNATURE Sales Representative to blockup TITLE Sales Representative to blockup TITLE Sales Representative to blockup TITLE Sales Representative to blockup TEL NO. 800-378-3538
BUSINESS DESIGNATION: Please Check One: Individual Medical Services Corporation Government/Nonprofit Corporation Partnership S- Corporation Trust/Estate Legal Services Corporation
NAME: Be sure to enter your full and correct name as listed in the IRS file for you or your business.

ADDRESS, CITY, STATE AND ZIP CODE: Enter your primary business address and remittance address if different from your primary address). If you operate a business at more than one location, adhere to the following:

- Same T.I.N. with more than one location -- attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.
- 2) Different T.I.N. for each different location -- submit a completed W-9 form for each T.I.N. and location. (One year-end tax information return will be reported for each T.I.N. and remittance address.)

CERTIFICATION -- Sign the certification, enter your title, date, and your telephone number (including area code and extension).

BUSINESS TYPE CHECK-OFF -- Check the appropriate box for the type of business ownership.

Rhode Island College

SECTION 1 - RIVIP VENDOR INFORMATION

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DIU/	KLL	Nulli	Del.

44639A1

Bid/RFP Title:

Addendum 1 - Donovan Dining Center Elevator Projec

Bid Contact Person:

Purchasing - RIC

Bid Contact Phone:

401-456-8047

Opening Date & Time:

6/1/2020 11:00 AM

RIVIP Vendor ID #:

506

Vendor Name:

Atlantic Elevator South Co., Inc.

Address:

1900 Fall River Avenue

Telephone:

800-378-3538

Fax:

508-336-2538

E-Mail:

sales@atlanticelevatorsouth.com

Contact Person:

Thomas Driscoll

Title:

Vice President

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

Submit offers as required within the Bid/RFP document. This contract is NOT a state bid.

Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, (3) that vendor understands and has complied with the requirements set forth.

Vendor signature: Hove certify that the above vendor information is correct and complete.

Date___6/1/2020

Jon Mathews

Sales Representative

Rhode Island College

SECTION 1 - RIVIP VENDOR INFORMATION

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44639A2

Bid/RFP Title:

Addendum 2 - Donovan Dining Center Elevator Projec

Bid Contact Person:

Purchasing - RIC

Bid Contact Phone:

401-456-8047

Opening Date & Time:

6/1/2020 11:00 AM

RIVIP Vendor ID #:

506

Vendor Name:

Atlantic Elevator South Co., Inc.

Address:

1900 Fall River Avenue

Telephone:

800-378-3538

Fax:

508-336-2538

E-Mail:

sales@atlanticelevatorsouth.com

Contact Person:

Thomas Driscoll

Title:

Vice President

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

Submit offers as required within the Bid/RFP document. This contract is NOT a state bid.

Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, (3) that vendor understands and has complied with the requirements set forth.

Date 6/1/2020

Jon Mathews Sales Representative

Rhode Island College

SECTION 1 - RIVIP VENDOR INFORMATION

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DIU		- IV	ulli	Del.

44639A3

Bid/RFP Title:

Addendum 3 - Donovan Dining Center Elevator Projec

Bid Contact Person:

Purchasing - RIC

Bid Contact Phone:

401-456-8047

Opening Date & Time:

6/1/2020 11:00 AM

RIVIP Vendor ID #:

506

Vendor Name:

Atlantic Elevator South Co., Inc.

Address:

1900 Fall River Avenue

Telephone:

800-378-3538

Fax:

508-336-2538

E-Mail:

sales@atlanticelevatorsouth.com

Contact Person:

Thomas Driscoll

Title:

Vice President

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

Submit offers as required within the Bid/RFP document. This contract is NOT a state bid.

Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, (3) that vendor understands and has complied with the requirements set forth.

Vendor's Signature: We certify that the above vendor information is correct and complete.

Date 6/1/2020

Jon Mathews \$ales Representative

Rhode Island College

SECTION 1 – RIVIP VENDOR INFORMATION

Bid/RFP Number:	44639A
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Bid/RFP Title: Addendum 4 - Donovan Dining Center Elevator Project - RIC

Bid Contact Person: Purchasing - RIC

Bid Contact Phone: 401-456-8047

Opening Date & Time: 6/1/2020 11:00 AM

RIVIP Vendor ID #: 506

Vendor Name: Atlantic Elevator South Co., Inc.

1900 Fall River Avenue Address:

Telephone: 800-378-3538

Fax: 508-336-2538

E-Mail: sales@atlanticelevatorsouth.com

Contact Person: Thomas Driscoll

Title: Vice President

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

Submit offers as required within the Bid/RFP document. This contract is NOT a state bid.

Rhode Island College

SECTION 1 - RIVIP VENDOR INFORMATION

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RI	$\alpha \prime \kappa$	\mathbf{F}	NI	ımr	or.

44639

Bid/RFP Title:

Donovan Dining Center Elevator project - RIC

Bid Contact Person:

Purchasing - RIC

Bid Contact Phone:

401-456-8047

Opening Date & Time:

6/1/2020 11:00 AM

RIVIP Vendor ID #:

506

Vendor Name:

Atlantic Elevator South Co., Inc.

Address:

1900 Fall River Avenue

Telephone:

800-378-3538

Fax:

508-336-2538

E-Mail:

sales@atlanticelevatorsouth.com

Contact Person:

Thomas Driscoll

Title:

Vice President

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

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Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, (3) that vendor understands and has complied with the requirements set forth.

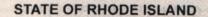
Vendor's cignature. Two certify that the above vendor information is correct and complete.

Date June 1, 2020

Jon Mathews

Atlantic Elevator South Co., Inc.

Sales Representative





RI Department of Labor and Training Workforce Regulation and Safety Division Occupational Safety



This elevator company license certifies that:

Atlantic Elevator South, Inc.

having met all the requirements as estable d by the Code Commission for Occupational Safety, as well as the requirements established by the Depart Labor and Training, Division of Workforce Regulation and Safety, Occupational Safety Unit, this company is below a wathorized to inspect, install, construct, maintain, and repair all devices subject to the provisions of Rhode Island General Lews 23-33 and the Rules and Regulations promulgated by the Commission or until the License expires or is revoked for cause provided by law.

LICENSE NUMBER: #28
Expires on 8/1/2020

Joseph Degnan, Assistant Director

on of Workforce Regulation and Safety Occupational Safety Unit

State of Rhode Island and Providence Plantations Rhode Island Department of Labor and Training

License Type MI/AT License # 61

EUGENE CARROLL
15 BOYENBERRY DRIVE
WESTPORT MA 02790

ELEVATOR UNIT

08/01/2020 Expiration Date

Û

Commonwealth of Massachusetts Division of Professional Licensure

Elevator Mechanic

EM-005134

Expires: 08/27/2020

EUGENE P CARROLL
15 BOYSENBERRY DRIVE
WESTPORT MA 92790

Ch B

Commissioner

BID BOND

Document A310TM - 2010

Conforms with The American Institute of Architects AIA Document 310

CONTRACTOR:

(Name, legal status and address)
Atlantic Elevator South Co., Inc.

1900 Fall River Avenue Seekonk, MA 02771

SURETY:

(Name, legal status and principal place of business)

North American Specialty Insurance Company

1200 Main St., Suite 800 Kansas City, MO 64105

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

OWNER:

(Name, legal status and address)

The State of Rhode Island, acting by and through the Department of Administration Division of Purchases, on behalf of the User Agency Providence, RI

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

Agency ID# 6024496

BOND AMOUNT: \$

Five Thousand Eight Hundred \$5,800

PROJECT:

(Name, location or address, and Project number, if any)

Donovan Dining Center Elevator Project - RIC #44639 Rhode Island College, 600 Mount Pleasant Ave. Providence, RI

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this

1st

day of June, 2020

	(Principal)	(Seal)
(Witness)		
	(Title)	
Christine B Gallagher	North American Specialty	y Insurance Company
(Witness)	(Surety)	(Seal) ORPORANO
	(Title) Adam W. DeSancti	SEAL 1973
		gol saves way

Atlantic Elevator South Co., Inc.

SWISS RE CORPORATE SOLUTIONS

NORTH AMERICAN SPECIALTY INSURANCE COMPANY WASHINGTON INTERNATIONAL INSURANCE COMPANY

WESTPORT INSURANCE CORPORATION GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, THAT North American Specialty Insurance Company, a corporation duly organized and existing under laws of the State of New Hampshire, and having its principal office in the City of Kansas City, Missouri and Washington International Insurance Company a corporation organized and existing under the laws of the State of New Hampshire and having its principal office in the City of Kansas City, Missouri, and Westport Insurance Corporation, organized under the laws of the State of Missouri, and having its principal office in the City of Kansas City, Missouri does hereby make, constitute and appoint:

JAMES A. AXON, GREGORY D. JUWA, MICHAEL F. CARNEY, WILDER PARKS, JR., PAUL A. PATALANO, LESLIANN J. ORTIZ, ADAM W. DeSANCTIS, MICHAEL T. GILBERT, CHRISTINE B. GALLAGHER,

BRYAN F. JUWA, DAVID A. BOUTIETTE, RICHARD F. CARUSO, REBECCA SHANLEY, JONATHAN E. DUGGAN, LINDSAY A. RAFFAEL, and JORDAN J. TIRONE

JOINTLY OR SEVERALLY

Its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its act and deed, bonds or other writings obligatory in the nature of a bond on behalf of each of said Companies, as surety, on contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract or suretyship executed under this authority shall exceed the amount of: ONE HUNDRED TWENTY FIVE MILLION (\$125,000,000.00) DOLLARS

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of North American Specialty Insurance Company and Washington International Insurance Company at meetings duly called and held on March 24, 2000 and Westport Insurance Corporation by written consent of its Executive Committee dated July 18, 2011.

"RESOLVED, that any two of the President, any Senior Vice President, any Vice President, any Assistant Vice President, the Secretary or any Assistant Secretary be, and each or any of them hereby is authorized to execute a Power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings and all contracts of surety, and that each or any of them hereby is authorized to attest to the execution of any such Power of Attorney and to attach therein the seal of the Company; and it is

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be binding upon the Company when so affixed and in the future with regard to any bond, undertaking or contract of surety to which it is attached."





Steven P. Anderson, Senior Vice President of Washington International Insurance Company & Senior Vice President of North American Specialty Insurance Company & Senior Vice President of Westport Insurance Corporation

Mike A. Ito, Senior Vice President of Washington International Insurance Company

& Senior Vice President of North American Specialty Insurance Company & Senior Vice President of Westport Insurance Corporation



IN WITNESS WHEREOF, North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation have caused their official seals to be hereunto affixed, and these presents to be signed by their authorized officers this day of **JANUARY**

> North American Specialty Insurance Company Washington International Insurance Company Westport Insurance Corporation

State of Illinois County of Cook

JANUARY , 20 19, before me, a Notary Public personally appeared Steven P. Anderson , Senior Vice President of

Washington International Insurance Company and Senior Vice President of North American Specialty Insurance Company and Senior Vice President of Westport Insurance Corporation and Michael A. Ito Senior Vice President of Washington International Insurance Company and Senior Vice President

of North American Specialty Insurance Company and Senior Vice President of Westport Insurance Corporation, personally known to me, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as officers of and acknowledged said instrument to be the voluntary act and deed of their respective companies.

OFFICIAL SEAL M. KENNY Public - State of Illinois Commission Expires

M. Kenny, Notary Public

I, Jeffrey Goldberg , the duly elected Vice President and Assistant Secretary of North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney given by said North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation which is still in full force and effect.

IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Companies this 1st day of 20 20 .

Jeffrey Goldberg, Vice President & Assistant Secretary of Washington International Insurance Company & North American Specialty Insurance Company & Vice President & Assistant Secretary of Westport Insurance Corporation