

State of Rhode Island and Providence Plantations Contract Offer
RIVIP BIDDER CERTIFICATION COVER FORM

SECTION 1 - VENDOR INFORMATION

Bid/RFP Number: 7538376A2
Bid/RFP Title: PROVIDE INTERIOR RENOVATION FOR A DISASTER RECOVERY ROOM AT LINCOLN CAMPUS, CCRI(13 PGS)
Opening Date & Time: 2/21/2014 01:30 PM
RIVIP Vendor ID #: 3399
Vendor Name: Calson Construction Corporation
Address: 34 Oakdale Avenue
Johnston , RI 02919
USA
Telephone: (401) 272-1100
Fax: 401-272-0035
E-Mail: calsoncorp@aol.com
Contact Person: Caroline Calcagni
Title: President
R.I. Foreign Corp #:

NOTICE TO VENDORS

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 Regulation 5.11, and in addition, for highway and bridge projects, also see Procurement Regulation 5.13, accessible at www.purchasing.ri.gov.

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.ri.gov. 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.

SECTION 2 – REQUIREMENTS

ALL OFFERS ARE SUBJECT TO THE REQUIREMENTS, PROVISIONS AND PROCEDURES CONTAINED IN THIS CERTIFICATION FORM. Offerors are expected to READ, SIGN and COMPLY WITH all requirements. Failure to do so may be grounds for disqualification of the offer contained herein.

Section 2.1 - RULES FOR SUBMITTING OFFERS

2.1A. This CERTIFICATION FORM MUST BE ATTACHED IN ITS ENTIRETY TO THE FRONT OF THE OFFER and shall be considered an integral part of each offer made by a vendor to enter into a contract with the State of Rhode Island, Division of Purchases. As such, submittal of the entire Bidder Certification Cover Form, signed by a duly authorized representative of the offeror attesting that he/she (1) has read and agrees to comply with the requirements set forth herein and (2) to the accuracy of the information provided and the offer extended, is a mandatory part of any contract award.

To assure that offers are considered on time, each offer must be submitted with the specific Bid/RFP/LOI number (provided above) and the date and time of opening marked in the upper left hand corner of envelope. Each bid/offer must be submitted in separate sealed envelopes.

A complete, signed (in ink) offer package must be delivered to the Division of Purchases (via any mail or messenger service) by the time and date specified for the opening of responses in a sealed envelope.

Bids must be submitted on the RI bid solicitation forms provided, indicating brand and part numbers of items offered, as appropriate. Bidders must submit detailed cuts and specs on items offered as equivalent to brands requested WITH THE OFFER. Bidders must be able to submit samples if requested. Mail To: Division of Purchases, One Capitol Hill, Second Floor, Providence, RI 02908-5855.

Documents misdirected to other State locations or which are not present in the Division of Purchases at the time of opening for whatever cause will be deemed to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the Division of Purchases. Postmarks shall not be considered proof of timely submission.

2.1B. RIVIP SOLICITATIONS. To assure maximum access opportunities for users, public bid/RFP solicitations shall be posted on the RIVIP for a minimum of seven days and no amendments shall be made within the last five days before the date an offer is due. Except when access to the Web Site has been severely curtailed and it is determined by the State Purchasing Agent that special circumstances preclude extending a solicitation due date, requests to mail or fax hard copies of solicitations will not be honored. When the result of an Internet solicitation is unsuccessful, the State of Rhode Island will cancel the original solicitation and resolicit the original offer directly from vendors.

2.2. PRICING. Offers are irrevocable for sixty (60) days from the opening date (or such other extended period set forth in the solicitation) and may not be withdrawn, except with the express permission of the State Purchasing Agent. All pricing will be considered to be firm and fixed unless otherwise indicated. The State of Rhode Island is exempt from Federal excise taxes and State Sales and Use Taxes. Such taxes shall not be included in the bid price. PRICES QUOTED ARE FOB DESTINATION.

2.3. DELIVERY and PRODUCT QUALITY. All offers must define delivery dates for all items; if no delivery date is specified, it is assumed that immediate delivery from stock will be made. The contractor will be responsible for delivery of materials in first class condition. Rejected materials will be at vendor's expense.

2.4. PREVAILING WAGE, OSHA SAFETY TRAINING, and APPRENTICESHIP REQUIREMENTS.

Bidders must comply with the provisions of the Rhode Island labor laws, including R. I. Gen. Laws §§ 37-13-1 *et seq.* and occupational safety laws, including R. I. Gen. Laws §§ 28-20-1 *et seq.* These laws mandate for public works construction projects the payment of prevailing wage rates, the implementation and maintenance of occupational safety standards, and for projects with a minimum value of \$1 Million, the employment of apprentices. The successful Bidder must submit certifications of compliance with these laws from each of its subcontractors prior to their commencement of any work. Prevailing wage rates, apprenticeship requirements, and other workforce and safety regulations are accessible at www.dlt.ri.gov.

2.5. PUBLIC RECORDS. Offerors are advised that all materials submitted to the State for consideration in response to this solicitation will be considered without exception to be Public Records pursuant to Title 38 Chapter 2 of the Rhode Island General Laws, and will be released for inspection immediately upon request once an award has been made. Offerors are encouraged to attend public bid/RFP openings to obtain information; however, bid/RFP response summaries may be reviewed after award(s) have been made by using the RIVIP at any time or appearing in person at the Division of Purchases Mondays through Fridays between 8:30 a.m. and 3:30 p.m. Telephone requests for results will not be honored. Written requests for results will only be honored if the information is not available on the RIVIP.

SECTION 3 - AWARD DETERMINATION

Award will be made to the responsive and responsible offeror quoting the lowest net price in accordance with specifications, for any individual item(s), for major groupings of items, or for all items listed, at the State's sole option.

3.1. BID SURETY. Where bid surety is required, bidder must furnish a bid bond or certified check for 5% of the bid total with the bid, or for such other amount as may be specified. Bids submitted without a required bid surety will not be considered.

3.2. SPECIFICATIONS. Unless specified "no substitute," product offerings equivalent in quality and performance will be considered (at the sole option of the State) on the condition that the offer is accompanied by detailed product specifications. Offers which fail to include alternate specifications may be deemed nonresponsive.

SECTION 4 – CONTRACT PROVISIONS

4.1. VENDOR AUTHORIZATION TO PROCEED.

4.1A. When a purchase order, change order, contract/agreement or contract/agreement amendment is issued by the RI Division of Purchases, no claim for payment for services rendered or goods delivered contrary to or in excess of the contract terms and scope shall be considered valid unless the vendor has obtained a written change order or contract amendment issued by the Division of Purchases PRIOR TO delivery.

4.1B. Any offer, whether in response to a solicitation for proposals or bids, or made without a solicitation, which is accepted in the form of an order OR Pricing Agreement made in writing by the Purchasing Agent, or a state official with purchasing authority delegated by the Purchasing Agent, shall be considered a binding contract.

4.2. REGULATIONS, GENERAL TERMS AND CONDITIONS GOVERNING STATE CONTRACTS. This solicitation and any contract or purchase order arising from it are issued in accordance with the specific requirements described herein, and the State's Purchasing Laws and Regulations and other applicable State Laws. The Regulations, General Terms and Conditions are incorporated into all state contracts. These regulations and basic information on How To Do Business with the State of Rhode Island are posted on the Rhode Island Vendor Information Program Website (www.purchasing.ri.gov).

4.2A. ARRA SUPPLEMENTAL TERMS AND CONDITIONS. Contracts and sub-awards funded in whole or in part by the American Recovery and Reinvestment Act of 2009. Pub.L.No. 111-5 and any amendments thereto, such contracts and sub-awards, shall be subject to the Supplemental Terms and Conditions For Contracts and Sub-awards Funded in Whole or in Part by the American Recovery and Reinvestment Act of 2009. Pub.L.No. 111-5 and any amendments thereto located on the Division of Purchases website at www.purchasing.ri.gov.

4.3. EQUAL EMPLOYMENT OPPORTUNITY. Compliance certificate and agreement procedures will apply to all awards for supplies or services valued at \$10,000 and more. Minority Business Enterprise policies and procedures, including subcontracting opportunities as described in Title 37 Chapter 14.1, of the Rhode Island General Laws, also apply.

4.4. PERFORMANCE BONDS. Where indicated, successful bidder must furnish a 100% performance bond and labor and payment bond for contracts subject to Title 37 Chapters 12 and 13 of the Rhode Island General Laws. All bonds must be furnished by a surety company authorized to conduct business in the State of Rhode Island. Performance bonds must be submitted within 21 calendar days of the issuance of a tentative notice of award.

4.5. DEFAULT and NON-COMPLIANCE. Default and/or non-compliance with the RIVIP requirements and any other aspects of the award may result in withholding of payment(s), contract termination, debarment, suspension, or any other remedy necessary that is in the best interest of the state.

4.6. COMPLIANCE. Vendor must comply with all applicable federal, state and local laws, regulations and ordinances.

4.7. SPRINKLER IMPAIRMENT AND HOT WORK. The Contractor agrees to comply with the practices of the State's insurance carrier for sprinkler impairment and hot work. Prior to performing any work, the Contractor shall obtain the necessary information for compliance from the Risk Management Office at the Department of Administration or the agency for which work will be performed.

SECTION 5 – CERTIFICATIONS AND DISCLOSURES
ALL CONTRACT AWARDS ARE SUBJECT TO THE FOLLOWING DISCLOSURES & CERTIFICATIONS

Offerors must respond to every disclosure statement.
A person authorized to enter into contracts must sign the offer and attest to the accuracy of all statements.

Indicate Yes (Y) or No (N):

- N 1. State whether your company, or any owner, stockholder, officer, director, member, partner, or principal thereof, or any subsidiary or affiliated company, has been subject to suspension or debarment by any federal, state, or municipal government agency, or the subject of criminal prosecution, or convicted of a criminal offense within the previous five (5) years. If so, then provide details below.
- N 2. State whether your company, or any owner, stockholder, officer, director, member, partner, or principal thereof, or any subsidiary or affiliated company, has had any contracts with a federal, state or municipal government agency terminated for any reason within the previous five (5) years. If so, then provide details below.
- N 3. State whether your company or any owner, stockholder, officer, director, member, partner, or principal thereof, or any subsidiary or affiliated company, has been fined more than \$5000 for violation(s) of Rhode Island environmental laws by the Rhode Island Department of Environmental Management within the previous five (5) years. If so, then provide details below.
- Y 4. I/we certify that I/we will immediately disclose, in writing, to the Chief Purchasing Officer any potential conflict of interest, which may occur during the course of the engagement authorized pursuant to this contract.
- Y 5. I/we acknowledge that, in accordance with Chapter 37-2-54(c) of the Rhode Island General Laws "no purchase or contract shall be binding on the state or any agency thereof unless approved by the Department [of Administration] or made under general regulations which the Chief Purchasing Officer may prescribe", including change orders and other types of contracts and under State Purchasing Regulation 8.2.1.1.2, "any alleged oral agreement or arrangements made by a bidder or contractor with any agency or an employee of the Office of Purchases may be disregarded and shall not be binding on the state".
- Y 6. I/we certify that I/we or my/our firm possesses all licenses required by Federal and State laws and regulations as they pertain to the requirements of the solicitation and offer made herein and shall maintain such required license(s) during the entire course of the contract resulting from the offer contained herein and should my/our license lapse or be suspended, I/we shall immediately inform the Rhode Island State Purchasing Agent in writing of such circumstance.
- Y 7. I/we certify that I/we will maintain required insurance during the entire course of the contract resulting from the offer contained herein and should my/our insurance lapse or be suspended, I/we shall immediately inform the Rhode Island State Purchasing Agent in writing of such circumstance.
- Y 8. I/we certify that I/we understand that falsification of any information herein or failure to notify the Rhode Island State Purchasing Agent as certified herein may be grounds for suspension, debarment and/or prosecution for fraud.
- Y 9. I/we acknowledge that the provisions and procedures set forth in this form apply to any contract arising from this offer.
- Y 10. I/we acknowledge that I/we understand the State's Purchasing Laws (37-2 of the General Laws of Rhode Island) and Purchasing Regulations and General Terms and Conditions available at the Rhode Island Division of Purchases Website (www.purchasing.ri.gov) apply as the governing conditions for any contract or purchase order I/we may receive from the State of Rhode Island, including the offer contained herein.
- Y 11. I/We certify that 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.
- Y 12. I/we certify that the above vendor information is correct and complete.

BID FORM
(Revised February 7, 2014)

DATE: February 21, 2014

BID TO: STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
OFFICE OF PURCHASES
ONE CAPITAL HILL
PROVIDENCE, RHODE ISLAND 02908
401-277-2317

PROJECT: COMMUNITY COLLEGE OF RHODE ISLAND
FLANAGAN CAMPUS
1762 LOUISQUISSET PIKE
LINCOLN, RHODE ISLAND 02865
INTERIOR RENOVATION DRR COMPUTER ROOM

SUBMITTED BY:

Firm Name

Calson Construction Corporation

Street Address

34 Oakdale Ave

Mailing Address (if different from above)

City/State/Zip Johnston, RI 02919

TELEPHONE: (401) 272-1100

FAX: (401) 272-0035

CONTACT:

Name/Title Caroline Calcagni, President

FEDERAL TAX
I.D. NUMBER

05-0472828

LICENSE NO.

19046
(If Applicable)

CONTRACTOR'S PROPOSAL The undersigned Bidder agrees that he will contract with the Community College of Rhode Island to provide all necessary labor, supervision, tools, equipment and other means to do all the work and furnish all the materials specified in the contract in the manner and time therein prescribed, and that he will take in full payment the amount set forth hereon.

Bid for Interior Renovation DRR Computer Room, (Flanagan Campus), in its entirety, all Addenda, and the following documents by this reference are hereby made a part of this proposal:

- a. Invitation for Bids
- b. Instructions to Bidder Specification 00200/A701
- c. Special Instructions to Bidder
- d. Bid Form Specifications 00410
- e. Bidders Qualifications Specifications 00450
- f. Accord Certificate of Insurance Form

Bidder acknowledges receipt (if applicable) of Addenda Number(s) 1 , 2 , and .

The cost of all labor, material, and equipment necessary for the completion of the work, even though not shown or specified, shall be included in the Lump Sum Bid.

Please check your calculations before submitting your Bid; the Community College of Rhode Island will not be responsible for Bidder's miscalculations.

LUMP SUM BID FOR ENTIRE PROJECT:

Seven-Hundred-Thirty-Thousand-Dollars & 00¢ _____ (\$ 730,000.00 .)
(written, and _____ numerically)

ALTERNATE:

Alternate No.1: Access flooring installation: This alternate contemplates the deduction from the Base Bid all work associated with the installation of the access flooring and the purchase & installation of the ground wiring system in the Phase 2 designated area of the computer room as identified and shown on the drawings. Purchase of the access flooring designated for this area will be included in the base bid.

DEDUCT: Five-Hundred-Dollars & 00¢ _____ (\$ 500.00)
(written, and _____ numerically)

Calson Construction Corporation

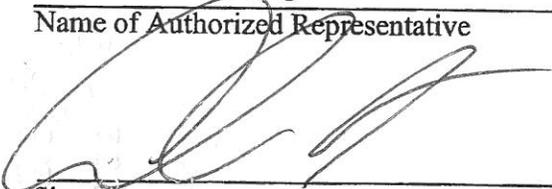
Company Name of Bidder

34 Oakdale Ave, Johnston, RI 02919

Mailing Address (PO Box or street) Town, State, and Zip Code

Caroline Calcagni

Name of Authorized Representative



President

Signature

Title

Corporation

Type of Business (Corp, Partnership, Sole Proprietorship)

401-272-1100

Telephone Number

401-272-0035

Facsimile

DATES:

Anticipated Award

March 2014

Submit Submittals

within 15 days of issuance of
CCRI PO

Mobilize On Site

within 30 days of issuance of
CCRI PO

Substantial Completion

180 days of issuance of CCRI PO

Final Completion

200 days of issuance of CCRI PO



**RI Department of Labor and Training
Workforce Regulation and Safety Division
Professional Regulation - Prevailing Wage**

General Contractor Apprenticeship Certification Form

This form **MUST** be completed and submitted at the time of bidding and is available on the Department of Labor and Training's Website at www.dlt.ri.gov, under Workforce Regulation and Safety, Prevailing Wage, Publications and Forms.

Bid/RFP Number: #7538376

Bid/RFP Title: Provide Interior Renovations for a Disaster Recovery Room @ Lincoln Campus, CCRJ

RIVIP Vendor ID#: 3399

Vendor Name: Calson Construction Corporation

Address: 34 Oakdale Ave, Johnston, RI 02919

Telephone: 401-272-1100

Fax: 401-272-0035

E-Mail: calsoncorp@aol.com

Contact Person and Title: Caroline Calcagni, President

Calson Construction Corporation (Company Name & Address) (hereafter "bidder") hereby certifies that bidder meets the general contractor apprenticeship requirements of R. I. Gen. Laws § 37- 13- 3.1 because bidder meets one of the following qualifications (check):

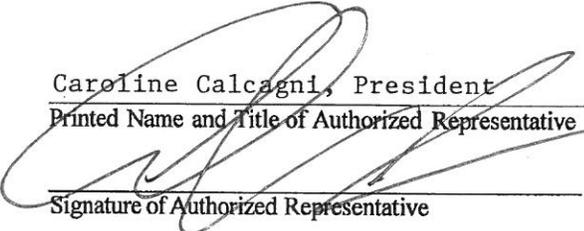
- A. Bidder sponsors a current and duly approved Rhode Island Department of Labor and Training Apprenticeship Program and currently employs at least one apprentice per trade/occupation, who will obtain "on the job training" experience in the apprentice's trade by performing on the contract (attach apprenticeship program standards and apprenticeship agreement);
- B. Bidder sponsors a current and duly registered Rhode Island Department of Labor and Training reciprocal apprenticeship program pursuant to R. I. Gen. Laws § 28-45-16 and currently employs at least one apprentice per trade/occupation, who will obtain "on the job training" experience in the apprentice's trade by performing work on the contract (attach apprenticeship program standards, apprenticeship agreement and Rhode Island Department of Labor and Training Reciprocal Apprenticeship Program Approval);

- C. ____ Bidder has entered into a current collective bargaining agreement with a duly approved Rhode Island Department of Labor and Training Apprenticeship Program sponsor and, pursuant to the terms of the collective bargaining agreement, will employ at least one apprentice per trade/occupation, who will obtain "on the job training" experience in the apprentice's trade by performing work on the contract (attach relevant section of collective bargaining agreement and signature page);
- D. ____ Bidder has entered into a current labor agreement with a duly approved Rhode Island Department of Labor and Training Apprenticeship Program sponsor and, pursuant to the terms of the labor agreement, will employ at least one apprentice per trade/occupation, who will obtain "on the job training" experience in the apprentice's trade by performing work on the contract (attach relevant section of labor agreement and signature page);
- E. ____ Bidder will not perform work on the awarded contract except through subcontractors (non performance);
- F. ____ Bidder has received approval from the Rhode Island Department of Labor and Training that it satisfies the general contractor requirements of R. I. Gen. Laws §37-13-3.1 for purposes of a particular bid (attach Rhode Island Department of Labor and Training correspondence).

Caroline Calcagni, President
Printed Name and Title of Authorized Representative

2-21-14

Date


Signature of Authorized Representative



Rhode Island Department of Labor and Training

Apprenticeship



.....the world's oldest formal system of learning

STANDARDS OF APPRENTICESHIP

For the Trade(s): Laborer

Terms: 4 yrs/8000 hours

FORMULATED
BY:

TRAINING PROGRAM SPONSOR: RI Construction Training Academy

ADDRESS: 249 Roosevelt Ave, Suite 203, Box 4, Pawtucket, RI 02860

WITH THE ASSISTANCE of

the STATE OF RHODE ISLAND APPRENTICESHIP COUNCIL

Rhode Island Department of Labor & Training
Building #70 1511 Pontiac Avenue,
POB # 20247 Cranston, RI 02920-0943



State of Rhode Island Apprenticeship Agreement

RI Department Of Labor & Training
State Apprenticeship Council
1511 Pontiac Avenue, PO Box 20247
Cranston, Rhode Island 02920-0943
www.dlt.ri.gov/apprenticeship

RI Apprentice #: _____
RI SAC Program #: _____



INSTRUCTIONS: Please complete application and submit the following to the address listed above: two (2) passport-size photos, a company ratio sheet, proof of related instruction school enrollment, and a check or money order in the amount of \$24.00 Failure to complete application or not provide required documents will delay processing.

Gender: Male <input type="radio"/> Female <input type="radio"/>	Race: American Indian or Alaskan native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or other Pacific Islander <input type="radio"/> White <input type="radio"/>	Highest Education Level: GED <input type="radio"/> High School Graduate <input checked="" type="radio"/> Post Secondary or Technical Training <input type="radio"/>	Veteran Status: Veteran <input type="radio"/> Non-Veteran <input checked="" type="radio"/>
Ethnic Group: Hispanic or Latino <input type="radio"/> Not Hispanic or Latino <input checked="" type="radio"/>			

THIS AGREEMENT, entered into this 20 day of August, 20 12 between

Calson Corporation
(NAME OF SPONSORING ORGANIZATION)

herein after referred to as the SPONSOR, and

ANDREW J. GIANLORENZO
(NAME OF APPRENTICE)

D.O.B. SEPTEMBER 18, 1988 S.S. #: ~~XXXXXX~~ 4183
(MONTH) (DAY) (YEAR)

hereinafter referred to as the APPRENTICE, and (if a minor) N/A
(NAME OF PARENT OR GUARDIAN)

WITNESSED THAT THE SPONSOR AND THE APPRENTICE DESIRE to enter into an agreement of apprenticeship and, therefore, in consideration of the premise and the mutual covenants herein contained, do hereby mutually covenant and agree as follows.

THAT THE SPONSOR AGREES to be responsible for the selection, placement and training of the APPRENTICE in the trade or craft of Construction Laborer, a(n) 8000 hour program, as work is available, in conformity with the terms and conditions set forth in the apprenticeship, standards currently in effect and made part hereof;

THAT THE APPRENTICE AGREES to perform diligently and faithfully the work of the trade or craft during the period of apprenticeship, in conformity with the terms and conditions set forth and made a part hereof;

THAT THE APPRENTICESHIP TERM BEGINS on the 20 day of August, 20 12, with 0 hours credit for previous experience and terminates upon the satisfactory completion of 9000 hours of employment for said SPONSOR in said trade or craft with projected completion date on the 20 day of August, 20 16, as stipulated in the apprenticeship standards currently in effect;

THAT EITHER PARTY MAY TERMINATE without cause the agreement during the probationary period as provided for herein, by submitting written notification of termination to the registration agency; that after the probationary period, the agreement may be suspended, cancelled, or terminated for good cause with due notice to the APPRENTICE and a reasonable opportunity for corrective action and with written notice to the APPRENTICE and the registration agency of the final action taken;

THAT IF THE REGISTRATION OF THE PROGRAM HAS BEEN CANCELLED OR REVOKED, the Apprentice shall be notified by the SPONSOR within 15 days of the cancellation or revocation;

THAT THE PARTIES AGREE THAT THE RHODE ISLAND DEPT. OF LABOR AND TRAINING is the appropriate authority designated under the program to receive, process and make disposition of controversies or differences arising out of the apprenticeship agreement when the controversies or differences cannot be adjusted locally or resolved in accordance with the established trade procedure or applicable collective bargaining provisions;

THAT THE SPONSOR AGREES THAT THE APPRENTICE shall be given equal opportunity in all phases of apprenticeship employment and training without discrimination because of race, color, religion, national origin, or sex in accordance with the State Plan for Equal Employment Opportunity in Apprenticeship, and Title 29 or the Code of Federal Regulations, part 30, as amended.

THAT THE STANDARDS OF THE APPRENTICESHIP PROGRAM, as it exists on the date of the agreement and as it may be amended during the period of the agreement, is incorporated and made part of this agreement; and the APPRENTICE shall be given an opportunity to read the SPONSOR'S approved standards prior to signing that apprenticeship agreement;

SCHEDULES AND STANDARDS

Number of hours of On-The-Job training provided 8000
 Length of Probationary Period 1000
 Hours of Related Technical Instruction required per year 144 minimum
 Related Training Instruction Source BICTA
 Related Instruction shall be compensated Yes No
 The Progressive Wage Scale to be paid: (State in percentages of the Journeyperson's hourly rate)

1 st	<u>1000</u> hours	<u>50</u> %	6 th	<u>1000</u> hours	<u>75</u> %
2 nd	<u>1000</u> hours	<u>55</u> %	7 th	<u>1000</u> hours	<u>85</u> %
3 rd	<u>1000</u> hours	<u>60</u> %	8 th	<u>1000</u> hours	<u>95</u> %
4 th	<u>1000</u> hours	<u>65</u> %	9 th	_____ hours	_____ %
5 th	<u>1000</u> hours	<u>70</u> %	10 th	_____ hours	_____ %

The Journeyperson's hourly rate on 8/20/2012 was \$16.00
 If the program's wage rate is not established by a collective bargaining agreement, indicate in dollars and cents the average Journeyperson's hourly rate.

If the Sponsor is an association, state the name of the participating employer: N/A

Schedule of ON-THE-JOB-TRAINING work processes to be taught and the approximate time for each process, attached as Appendix I and made a part hereof.

THIS AGREEMENT IS SUBJECT TO APPROVAL BY THE RHODE ISLAND DEPT. OF LABOR AND TRAINING

IN WITNESS WHEREOF, the parties hereunto affix their signatures.

(Signature)
 (SIGNATURE OF APPRENTICE)
14 ANGELL DR EAST PROV. RI 02914
 (STREET ADDRESS, CITY/TOWN, STATE, ZIP CODE)
(401) 639-0757
 (TELEPHONE NUMBER)
N/A
 (GUARDIAN)

(Signature)
 (SIGNATURE OF AUTHORIZED REPRESENTATIVE)
34 Oakdale Avenue Johnston RI 02919
 (STREET ADDRESS, CITY/TOWN, STATE, ZIP CODE)
401-272-1100
 (TELEPHONE NUMBER)

(APPROVED BY: JOINT APPRENTICESHIP COMMITTEE)

FOR DLT USE ONLY
 REGISTERED WITH RHODE ISLAND DEPARTMENT OF LABOR AND TRAINING

(Signature and Title of Authorized Official)

(Date)



Rhode Island Department of Labor and Training

Apprenticeship



.....the world's oldest formal system of learning

STANDARDS OF APPRENTICESHIP

For the Trade(s): Electrical Terms: 4 yrs / 8000 Hrs.

FORMULATED
BY:

TRAINING PROGRAM SPONSOR: RI Construction Training Academy

ADDRESS: 249 Roosevelt Ave, Suite 203, Box 4, Pawtucket, RI 02860

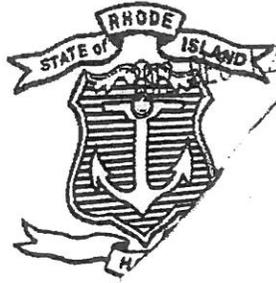
WITH THE ASSISTANCE of

the STATE OF RHODE ISLAND APPRENTICESHIP COUNCIL

Rhode Island Department of Labor & Training
Building #70 1511 Pontiac Avenue,
POB # 20247 Cranston, RI 02920-0943

RI Apprentice #: 21526

RI SAC Program #: 2597



State of Rhode Island Apprenticeship Agreement



RI Department Of Labor & Training
State Apprenticeship Council
1511 Pontiac Avenue, PO Box 202450
Cranston, Rhode Island 02926-0943
www.dlt.ri.gov/apprenticeship

RECEIVED
DEC 21 2012

INSTRUCTIONS: Please complete application and submit the following to the address listed above: two (2) passport-size photos, a company ratio sheet, proof of related instruction school enrollment, and a check or money order in the amount of \$24.00 Failure to complete application or not provide required documents will delay processing.

Gender:
Male
Female

Ethnic Group:
Hispanic or Latino
Not Hispanic or Latino

Race:
American Indian or Alaskan native
Asian
Black or African American
Native Hawaiian or other Pacific Islander
White

Highest Education Level:
GED
High School Graduate
Post Secondary or Technical Training

Veteran Status:
Veteran
Non-Veteran

MO# 14 - 621743620
12/12/12
\$24.00

THIS AGREEMENT, entered into this 12 day of December, 20 12 between
Calson Coast. Corp. herein after referred to as the SPONSOR, and
(NAME OF SPONSORING ORGANIZATION)
Francesco Rocchio, D.O.B. 11/28/1987 S.S. #: ~~XXXXX~~ 5823
(NAME OF APPRENTICE) (MONTH) (DAY) (YEAR)

hereinafter referred to as the APPRENTICE, and (if a minor) _____ (NAME OF PARENT OR GUARDIAN)

WITNESSED THAT THE SPONSOR AND THE APPRENTICE DESIRE to enter into an agreement of apprenticeship and, therefore, in consideration of the premise and the mutual covenants herein contained, do hereby mutually covenant and agree as follows.

THAT THE SPONSOR AGREES to be responsible for the selection, placement and training of the APPRENTICE in the trade or craft of Electrician, a(n) 8000 hour program, as work is available, in conformity with the terms and conditions set forth in the apprenticeship, standards currently in effect and made part hereof:

THAT THE APPRENTICE AGREES to perform diligently and faithfully the work of the trade or craft during the period of apprenticeship, in conformity with the terms and conditions set forth and made a part hereof;

THAT THE APPRENTICESHIP TERM BEGINS on the 12 day of December, 20 12, with 2355 hours credit for previous experience and terminates upon the satisfactory completion of _____ hours of employment for said SPONSOR in said trade or craft with projected completion date on the 12th day of December, 20 15, as stipulated in the apprenticeship standards currently in effect;

THAT EITHER PARTY MAY TERMINATE without cause the agreement during the probationary period as provided for herein, by submitting written notification of termination to the registration agency; that after the probationary period, the agreement may be suspended, cancelled, or terminated for good cause with due notice to the APPRENTICE and a reasonable opportunity for corrective action and with written notice to the APPRENTICE and the registration agency of the final action taken;

THAT IF THE REGISTRATION OF THE PROGRAM HAS BEEN CANCELLED OR REVOKED, the Apprentice shall be notified _____ within 15 days of the cancellation or revocation;

THAT THE PARTIES AGREE THAT THE RHODE ISLAND DEPT. OF LABOR AND TRAINING is the appropriate authority designated under the program to receive, process and make disposition of controversies or differences arising out of the apprenticeship agreement when the controversies or differences cannot be adjusted locally or resolved in accordance with the established trade procedure or applicable collective bargaining provisions;

THAT THE SPONSOR AGREES THAT THE APPRENTICE shall be given equal opportunity in all phases of apprenticeship employment and training without discrimination because of race, color, religion, national origin, or sex in accordance with the State Plan for Equal Employment Opportunity in Apprenticeship, and Title 29 or the Code of Federal Regulations, part 30, as amended.

THAT THE STANDARDS OF THE APPRENTICESHIP PROGRAM, as it exists on the date of the agreement and as it may be amended during the period of the agreement, is incorporated and made part of this agreement; and the APPRENTICE shall be given an opportunity to read the SPONSOR'S approved standards prior to signing that apprenticeship agreement;

SCHEDULES AND STANDARDS

Number of hours of On-The-Job training provided 8000
 Length of Probationary Period 1000
 Hours of Related Technical Instruction required per year 144 minimum
 Related Training Instruction Source _____
 Related Instruction shall be compensated Yes No
 The Progressive Wage Scale to be paid: (State in percentages of the Journeyperson's hourly rate)

1 st	<u>1000</u>	hours	<u>50</u>	%	6 th	<u>1000</u>	hours	<u>75</u>	%
2 nd	<u>1000</u>	hours	<u>55</u>	%	7 th	<u>1000</u>	hours	<u>85</u>	%
3 rd	<u>1000</u>	hours	<u>60</u>	%	8 th	<u>1000</u>	hours	<u>95</u>	%
4 th	<u>1000</u>	hours	<u>65</u>	%	9 th	_____	hours	_____	%
5 th	<u>1000</u>	hours	<u>70</u>	%	10 th	_____	hours	_____	%

The Journeyperson's hourly rate on 12/12/12, was \$ 26.00

If the program's wage rate is not established by a collective bargaining agreement, indicate in dollars and cents the average Journeyperson's hourly rate.

If the Sponsor is an association, state the name of the participating employer: _____

Schedule of ON-THE-JOB-TRAINING work processes to be taught and the approximate time for each process, attached as Appendix I and made a part hereof.

THIS AGREEMENT IS SUBJECT TO APPROVAL BY THE RHODE ISLAND DEPT. OF LABOR AND TRAINING

IN WITNESS WHEREOF, the parties hereunto affix their signatures.

Jameso Keesha
 (SIGNATURE OF APPRENTICE)
38 Scituate Ave Johnston RI 02919
 (STREET ADDRESS, CITY/TOWN, STATE, ZIP CODE)
401-944-7594
 (TELEPHONE NUMBER)

STEPHEN CAPOZZOLI
 (SIGNATURE OF AUTHORIZED REPRESENTATIVE)
34 OAKDALE AVE JOHNSTON, RI
 (STREET ADDRESS, CITY/TOWN, STATE, ZIP CODE)
401-272-1100 02919
 (TELEPHONE NUMBER)

 (GUARDIAN)

 (APPROVED BY: JOINT APPRENTICESHIP COMMITTEE)

[Signature]
 (Signature and Title of Authorized Official)
FOR DLT USE ONLY
 REGISTERED WITH RHODE ISLAND DEPARTMENT OF LABOR AND TRAINING
1/22/13
 (Date)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Labor and Training

Center General Complex

1511 Pontiac Avenue
Cranston, RI 02920-4407

TTY: Via RI Relay 711

Lincoln D. Chafee
Governor

Charles J. Fogarty
Director

STATE CONTRACT ADDENDUM

RHODE ISLAND DEPARTMENT OF LABOR AND TRAINING

PREVAILING WAGE REQUIREMENTS

(37-13-1 ET SEQ.)

The prevailing wage requirements are generally set forth in RIGL 37-13-1 et seq. These requirements refer to the prevailing rate of pay for regular, holiday, and overtime wages to be paid to each craftsmen, mechanic, teamster, laborer, or other type of worker performing work on public works projects when state or municipal funds exceed one thousand dollars (\$1,000).

All Prevailing Wage Contractors and Subcontractors are required to:

1. Submit to the Awarding Authority a list of the contractor's subcontractors for any part or all of the prevailing wage work in accordance with RIGL § 37-13-4;
2. Pay all prevailing wage employees at least once per week and in accordance with RIGL §37-13-7 (see Appendix B attached);
3. Post the prevailing wage rate scale and the Department of Labor and Training's prevailing wage poster in a prominent and easily accessible place on the work site in accordance with RIGL §37-13-11; posters may be downloaded at www.dlt.ri.gov/pw/Posters.htm .poster/htm or obtained from the Department of Labor and Training, Center General Complex, 1511 Pontiac Avenue, Cranston, Rhode Island;
4. Access the Department of Labor and Training website, at www.dlt.ri.gov on or before July 1st of each year, until such time as the contract is completed, to ascertain the current prevailing wage rates and the amount of payment or contributions for each covered prevailing wage employee and make any necessary adjustments to the covered employee's prevailing wage rates effective July 1st of each year in compliance with RIGL §37-13-8;
5. Attach a copy of this CONTRACT ADDENDUM and its attachments as a binding obligation to any and all contracts between the contractor and any

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TTY via RI Relay 711



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Labor and Training

Center General Complex
1511 Pontiac Avenue
Cranston, RI 02920-4407

Telephone; (401) 462-8000
TTY; Via RI Relay 711

Lincoln D. Chafee
Governor
Charles J. Fogarty
Director

subcontractors and their assignees for prevailing wage work performed pursuant to this contract;

6. Provide for the payment of overtime for prevailing wage employees who work in excess of eight (8) hours in any one day or forty (40) hours in any one week as provided by RIGL §37-13-10;
7. Maintain accurate prevailing wage employee payroll records on a Rhode Island Certified Weekly Payroll form available for download at www.dlt.ri.gov/pw.forms/htm, as required by RIGL §37-13-13, and make those records available to the Department of Labor and Training upon request;
8. Furnish the fully executed RI Certified Weekly Payroll Form to the awarding authority on a monthly basis for all work completed in the preceding month.
9. For general or primary contracts one million dollars (\$1,000,000) or more, shall maintain on the work site a fully executed RI Certified Prevailing Wage Daily Log listing the contractor's employees employed each day on the public works site; the RI Certified Prevailing Wage Daily Log shall be available for inspection on the public works site at all times; this rule shall not apply to road, highway, or bridge public works projects. Where applicable, furnish both the Rhode Island Certified Prevailing Wage Daily Log together with the Rhode Island Weekly Certified Payroll to the awarding authority.
10. Assure that all covered prevailing wage employees on construction projects with a total project cost of one hundred thousand dollars (\$100,000) or more has a OSHA ten (10) hour construction safety certification in compliance with RIGL § 37-23-1;
11. Employ apprentices for the performance of the awarded contract when the contract is valued at one million dollars (\$1,000,000) or more, and comply with the apprentice to journey person ratio for each trade approved by the apprenticeship council of the Department of Labor and Training in compliance with RIGL §37-13-3.1;
12. Assure that all prevailing wage employees who perform work which requires a Rhode Island trade license possess the appropriate Rhode Island trade license in compliance with Rhode Island law; and

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TTY via Rf Relay 711



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1511 Pontiac Avenue
Cranston, RI 02920-4407

Telephone: (401) 462-8000
TTY: Via RI Relay 711

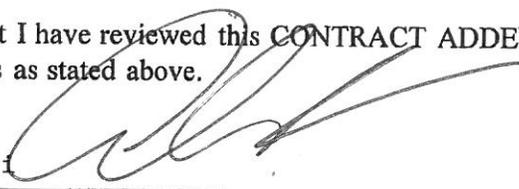
Lincoln D. Chafee
Governor
Charles J. Fogarty
Director

13. Comply with all applicable provisions of RIGL §37-13-1, et. seq;

Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at www.dlt.ri.gov/pw.

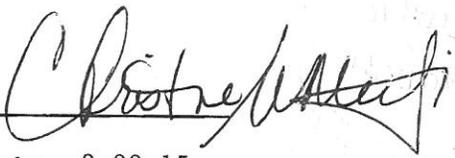
CERTIFICATION

I hereby certify that I have reviewed this CONTRACT ADDENDUM and understand my obligations as stated above.

By: Caroline Calcagni 

Title: President

Subscribed and sworn before me this 21st day of Feb, 2014

Christine Melfi 

Notary Public

My commission expires: 2-22-15

An Equal Opportunity Employer/Program, /Auxiliary aids and services are available upon request to individuals with disabilities.

TTY via RI Relay 711

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)

--	--	--

05	0472828
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NAME Calson Construction Corporation

ADDRESS 34 Oakdale Ave

(REMITTANCE ADDRESS, IF DIFFERENT) n/a

CITY, STATE AND ZIP CODE Johnston, RI 02919

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



TITLE President

DATE 2-21-4

TEL NO. 401-272-1100

BUSINESS DESIGNATION:

- Please Check One:
- Individual
 - Partnership
 - Medical Services Corporation
 - Corporation
 - Trust/Estate
 - Government/Nonprofit Corporation
 - 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:

- 1) 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.

Mail to: Supplier Coordinator, One Capitol Hill, Providence, RI 02908

ELECTRICAL CORP AC003078
A-003078 B-000858
CALSON CONSTRUCTION CORPORATIO

STEPHEN L CAPOZZOLI
34 OAKDALE AVENUE
JOHNSTON RI 02919



Ronald R. Ambrose
Administrator

12/31/2015
Expiration Date



STATE OF RHODE ISLAND

CONTRACTORS' REGISTRATION AND LICENSING BOARD

REGISTRATION NO.

EXP DATE

REGISTRANT'S NAME

19046 07/1/12
CALSON CONSTRUCTION CORPORATION

AUTHORIZED REPRESENTATIVE

G. ALFRED CALCAGNE, JR.

DRIVER'S LICENSE #

RI 0300444

EXECUTIVE DIRECTOR

George A. Malen

CERTIFICATE OF COMPLETION

Awarded to

*Alfred Calgagni
Calson Corp.*

*Has attended and successfully completed the Nelson Firestop Products
Training Course for System Comprehension and Proper Installation Procedures.*

Presented by

**Nelson Firestop Products
Tulsa, Oklahoma**

March 24, 2009

Mike Harris

Mike Harris
Manufacturer's Representative
Nelson Firestop Products



EMERSON™
Industrial Automation
NELSON Firestop

Nelson Firestop is a registered provider for The American Institute of Architects Continuing Education System

This Certifies that...
Alfred Calgagni
Has successfully completed
Nelson Firestop Products training...
Date: 3/24/09 Instructor: Mike Harris



NELSON
Firestop Products

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A 310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we Calson Construction Corporation,
34 Oakdale Avenue, Johnston, RI 02919

as Principal, hereinafter called the Principal, and Berkley Insurance Company,
412 Mount Kemble Avenue, Suite 310N, Morristown, NJ 07960

a corporation duly organized under the laws of the State of Delaware
as Surety, hereinafter called the Surety, are held and firmly bound unto
State of Rhode Island and Providence Plantations, One Capitol Hill, Providence, RI 02903

as Obligee, hereinafter called the Obligee, in the sum of FIVE PERCENT OF THE AMOUNT OF
THE ACCOMPANYING BID Dollars (\$ 5% of Bid),
for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind
ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly
by these presents.

WHEREAS, the Principal has submitted a bid for Interior Renovations DRR Computer Room, CCRI, Flanagan Campus, Lincoln, RI
Project #7538376

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract
with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding
or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt
payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter
such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the penalty
hereof between the amount specified in said bid and such larger amount for which the Obligee 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.

Signed and sealed this 14th day of February 2014
[Signature]

(Witness)

[Signature]

Calson Construction Corporation
(Principal) (Seal)

[Signature]

(Witness)

[Signature]

Berkley Insurance Company
(Surety) (Seal)

[Signature]

Joan A. Verardo (Title) Attorney-in-Fact

POWER OF ATTORNEY
BERKLEY INSURANCE COMPANY
WILMINGTON, DELAWARE

NOTICE: The warning found elsewhere in this Power of Attorney affects the validity thereof. Please review carefully.

KNOW ALL MEN BY THESE PRESENTS, that BERKLEY INSURANCE COMPANY (the "Company"), a corporation duly organized and existing under the laws of the State of Delaware, having its principal office in Greenwich, CT, has made, constituted and appointed, and does by these presents make, constitute and appoint: **Donald L. Goodrich or Joan A. Verardo of Goodrich-Blessing Agency, Inc. of Cranston, RI** its true and lawful Attorney-in-Fact, to sign its name as surety only as delineated below and to execute, seal, acknowledge and deliver any and all bonds and undertakings, with the exception of Financial Guaranty Insurance, providing that no single obligation shall exceed **Fifty Million and 00/100 U.S. Dollars (U.S.\$50,000,000.00)**, to the same extent as if such bonds had been duly executed and acknowledged by the regularly elected officers of the Company at its principal office in their own proper persons.

This Power of Attorney shall be construed and enforced in accordance with, and governed by, the laws of the State of Delaware, without giving effect to the principles of conflicts of laws thereof. This Power of Attorney is granted pursuant to the following resolutions which were duly and validly adopted at a meeting of the Board of Directors of the Company held on January 25, 2010:

RESOLVED, that, with respect to the Surety business written by Berkley Surety Group, LLC, the Chairman of the Board, Chief Executive Officer, President or any Vice President of the Company, in conjunction with the Secretary or any Assistant Secretary are hereby authorized to execute powers of attorney authorizing and qualifying the attorney-in-fact named therein to execute bonds, undertakings, recognizances, or other suretyship obligations on behalf of the Company, and to affix the corporate seal of the Company to powers of attorney executed pursuant hereto; and said officers may remove any such attorney-in-fact and revoke any power of attorney previously granted; and further

RESOLVED, that such power of attorney limits the acts of those named therein to the bonds, undertakings, recognizances, or other suretyship obligations specifically named therein, and they have no authority to bind the Company except in the manner and to the extent therein stated; and further

RESOLVED, that such power of attorney revokes all previous powers issued on behalf of the attorney-in-fact named; and further

RESOLVED, that the signature of any authorized officer and the seal of the Company may be affixed by facsimile to any power of attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligation of the Company; and such signature and seal when so used shall have the same force and effect as though manually affixed. The Company may continue to use for the purposes herein stated the facsimile signature of any person or persons who shall have been such officer or officers of the Company, notwithstanding the fact that they may have ceased to be such at the time when such instruments shall be issued.

IN WITNESS WHEREOF, the Company has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 15 day of January, 2013:

Attest:

Berkley Insurance Company

(Seal)

By

Ira S. Lederman
Senior Vice President & Secretary

By

Jeffrey M. Hafter
Senior Vice President

WARNING: THIS POWER INVALID IF NOT PRINTED ON BLUE "BERKLEY" SECURITY PAPER.

STATE OF CONNECTICUT)

) ss:

COUNTY OF FAIRFIELD)

Sworn to before me, a Notary Public in the State of Connecticut, this 15 day of January, 2013, by Ira S. Lederman and Jeffrey M. Hafter who are sworn to me to be the Senior Vice President and Secretary, and the Senior Vice President, respectively, of Berkley Insurance Company.

EILEEN KILLEEN

NOTARY PUBLIC, STATE OF CONNECTICUT
MY COMMISSION EXPIRES JUNE 30, 2017

Eileen Killeen
Notary Public, State of Connecticut

CERTIFICATE

I, the undersigned, Assistant Secretary of BERKLEY INSURANCE COMPANY, DO HEREBY CERTIFY that the foregoing is a true, correct and complete copy of the original Power of Attorney; that said Power of Attorney has not been revoked or rescinded and that the authority of the Attorney-in-Fact set forth therein, who executed the bond or undertaking to which this Power of Attorney is attached, is in full force and effect as of this date.

Given under my hand and seal of the Company, this 14th day of February, 2014.

(Seal)

Andrew M. Tuma
Andrew M. Tuma

WARNING - Any unauthorized reproduction or alteration of this document is prohibited. This power of attorney is void unless seals are readable and the certification seal at the bottom is embossed. The background imprint, warning and confirmation (on reverse) must be in blue ink.

Instructions for Inquiries and Notices Under the Bond Attached to This Power

Berkley Surety Group, LLC is the affiliated underwriting manager for the surety business of: Acadia Insurance Company, Berkley Insurance Company, Berkley Regional Insurance Company, Carolina Casualty Insurance Company, Union Standard Insurance Company, Continental Western Insurance Company, and Union Insurance Company.

To verify the authenticity of the bond, please call (866) 768-3534 or email BSGInquiry@berkleysurety.com

Any written notices, inquiries, claims or demands to the surety on the bond to which this Rider is attached should be directed to:

**Berkley Surety Group, LLC
412 Mount Kemble Avenue
Suite 310N
Morristown, NJ 07960
Attention: Surety Claims Department**

Or

email BSGClaim@berkleysurety.com

Please include with all notices the bond number and the name of the principal on the bond. Where a claim is being asserted, please set forth generally the basis of the claim. In the case of a payment or performance bond, please identify the project to which the bond pertains.