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**State of Rhode Island and Providence Plantations
BID 7549185 BID RESPONSE**

**Bid Title: ALARM MONITORING SERVICES
FOR THE DEPT OF CORRECTIONS BUILDINGS**

40 Worthington Road, Cranston, RI 02920
Tel: 401-941-4222 Fax: 401-941-4333
www.shanix.com . info@shanix.com

State of Rhode Island and Providence Plantations
Department of Administration
Division of Purchases

RIVIP BIDDER CERTIFICATION COVER FORM
SECTION 1 - BIDDER INFORMATION

Bidder must be registered as a vendor on the RIVIP system at www.purchasing.ri.gov to submit a bid proposal.

Solicitation Number: 7549185A3
Solicitation Title: ALARM MONITORING SERVICES FOR THE DEPT. OF CORRECTIONS BUILDINGS -
ADDENDUM 3 (8 PGS)
**Bid Proposal Submission
Deadline Date & Time:** 2/5/2015 11:30 AM
RIVIP Vendor ID #: 2450
Bidder Name: Shanix, Inc.
Address: 40 Worthington Road
Cranston , RI 02920-7940
USA
Telephone: (401) 941-4222
Fax: (401) 941-4333
Contact Name: Mustapha Gharaee
Contact Title: Vice President
Contact Email: mustapha@shanix.com

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 1-3, and if "Yes," provide details below. Complete Disclosure 4.

- N 1. 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 subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "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.
4. List each officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address,

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.

Disclosure details (continue on additional sheet if necessary):

| | |
|--|---|
| <u>Kekin A. Shah, President</u> <u>40 Worthington Road</u> <u>Cranston, RI 02920</u> | <u>Mustapha Gharacee, Vice President</u> <u>40 Worthington Road</u> <u>Cranston, RI 02920</u> |
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SECTION 3 —CERTIFICATIONS

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

Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.

THE BIDDER CERTIFIES THAT:

- Y 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 this solicitation.
- Y 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 of any contract awarded pursuant to this solicitation 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.
- Y 3. The Bidder will maintain all required insurance 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.
- Y 4. 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 this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.
- Y 5. 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, principals, directors, managers, 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.
- Y 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.
- Y 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.

Certification details (continue on additional sheet if necessary):



Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 ONE CAPITOL HILL
 PROVIDENCE RI 02908

BUYER: Ohara 2nd, John F
 PHONE #: 401-574-8125

CREATION DATE : 26-JAN-15
 BID NUMBER: 7549185,3
 TITLE: Alarm Monitoring Services for the Dept. of
 Corrections Buildings
 BLANKET START : 01-FEB-15
 BLANKET END : 31-DEC-17
 BID CLOSING DATE AND TIME: 05-FEB-2015 11:30:00

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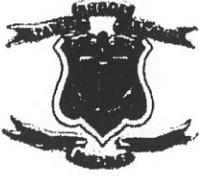
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 DOC CDC WAREHOUSE
 ATTN: (SEE 'ATTN' line in PO)
 25 POWER ROAD
 CRANSTON, RI 02920
 US

Requisition Number: 1393781

Amendment Description: Addendum Number Three

| Line | Description | Quantity | Unit | Unit Price | Total |
|------|--|----------|------|------------|-------|
| | <p>Blanket Requirement: February 1, 2015 - December 31, 2017</p> <p>Mandatory Pre-Bid-Conference, has been rescheduled:</p> <p>There will be a SECOND Mandatory Pre-Bid Conference held:</p> <p>Location: Dept. of Corrections, 10 Garvey Rd., Cranston, RI 02920. Meet in the Conference Room. Date: Tuesday, January 20, 2015. Time: 10:00 AM.</p> <p>Therefore the Bid Closing Date and Time has been changed: From: 1/15/15 at 11:30 AM To: 1/29/15 at 11:30 AM</p> | | | | |

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer



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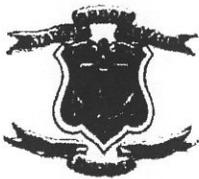
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 ATTN: (SEE 'ATTN' line in PO)
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 US

Requisition Number: 1393781
 Amendment Description: Addendum Number Three

| Line | Description | Quantity | Unit | Unit Price | Total |
|------|--|----------|------|------------|-------|
| | <p>Addendum Number One.</p> <p>Due to a scheduling conflict within the State offices the previous Mandatory Pre-Bid Conference has to be re-scheduled. We apologize for those vendors who did show up at the previous scheduled date. however,</p> <p>YOU MUST ATTEND THIS SECOND CONFERENCE IN ORDER TO BE ELIGIBLE TO BID.</p> <p>Mandatory Pre-Bid-Conference.</p> <p>There will be the SECOND Mandatory Pre-Bid Conference held. Please see page one (1) for the Date, Time and Location.</p> <p>Questions concerning this solicitation must be received by the Division of Purchases at: doa.purconstruction@purchasing.ri.gov no later than Thursday, January 22, 2015, 5:00 PM. Questions should be submitted in a Microsoft Word attachment. Please reference the RFQ# on all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.</p> <p>Addendum Number Two.</p> <p>See attached (4) pages.</p> | | | | |

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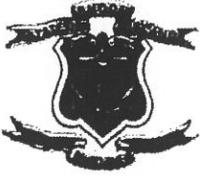
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DOC CDC WAREHOUSE
 ATTN: (SEE 'ATTN' line in PO)
 25 POWER ROAD
 CRANSTON, RI 02920
 US

Requisition Number: 1393781

Amendment Description: Addendum Number Three

| Line | Description | Quantity | Unit | Unit Price | Total |
|------|---|----------|------|--------------------|--------------------------|
| 1 | <p>Addendum Number Three.</p> <p>Due to the late issuance of this Addendum the Bid Closing Date and Time has been extended:</p> <p>From: 1/29/15 at 11:30 AM.</p> <p>To: 2/5/15 at 11:30 AM.</p> <p>Note: Attached to this Addendum 3, is a four (4) page list of the Alarm equipment currently located at the Dept. of Corrections. This list was asked for from a vendor at the 2nd Mandatory Pre-Bid Conference.</p> <p>APA-14704 2/1/15 - 6/30/15 SERVICE TECHNICIAN HOURLY RATE ON SITE FOR BUILDING ALARM MONITORING SERVICES FOR DOC BUILDINGS. TO INCLUDE: CDC WARHOUSE & ANNEX, ADMIN A & B, INMATE ACCOUNTS, MEDIUM (DONALD PRICE) & DIX BUILDING</p> | 3,640.00 | Hour | 75. ⁰⁰ | 273,000. ⁰⁰ |
| 2 | APA-14704 7/1/15 - 6/30/16 SERVICE TECHNICIAN HOURLY RATE ON SITE | 8,736.00 | Hour | 78. ⁰⁰ | 681,408. ⁰⁰ |
| 3 | APA-14704 7/1/16 - 6/30/17 SERVICE TECHNICIAN HOURLY RATE ON SITE | 8,736.00 | Hour | 80. ⁰⁰ | 698,880. ⁰⁰ |
| 4 | APA-14704 7/1/17 - 12/31/17 SERVICE TECHNICIAN HOURLY RATE ON SITE | 4,368.00 | Hour | 85. ⁰⁰ | 371,280. ⁰⁰ |
| 5 | APA-14704 2/1/15 - 6/30/15 SERVICE TECHNICIAN OVERTIME RATE ON SITE | 3,640.00 | Hour | 125. ⁰⁰ | 455,000. ⁰⁰ |
| 6 | APA-14704 7/1/15 - 6/30/16 SERVICE TECHNICIAN OVERTIME RATE ON SITE | 8,736.00 | Hour | 128. ⁰⁰ | 1,118,208. ⁰⁰ |
| 7 | APA-14704 7/1/16 - 6/30/17 SERVICE TECHNICIAN OVERTIME RATE ON SITE | 8,736.00 | Hour | 132. ⁰⁰ | 1,153,152. ⁰⁰ |
| 8 | APA-14704 7/1/17 - 12/31/17 SERVICE TECHNICIAN OVERTIME RATE ON SITE | 4,368.00 | Hour | 135. ⁰⁰ | 589,680. ⁰⁰ |

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Requisition Number: 1393781
Amendment Description: Addendum Number Three

| Line | Description | Quantity | Unit | Unit Price | Total |
|------|--|----------|------|--------------------|----------------------|
| 9 | APA-14704 2/1/15 - 6/30/15 WEEKLY MONITORING FEE | 22.00 | Week | 110. ⁰⁰ | 2,420. ⁰⁰ |
| 10 | APA-14704 7/1/15 - 6/30/16 WEEKLY MONITORING FEE | 52.00 | Week | 112. ⁰⁰ | 5,824. ⁰⁰ |
| 11 | APA-14704 7/1/16 - 6/30/17 WEEKLY MONITORING FEE | 52.00 | Week | 115. ⁰⁰ | 5,980. ⁰⁰ |
| 12 | APA-14704 7/1/17 - 12/31/17 WEEKLY MONITORING FEE | 26.00 | Week | 120. ⁰⁰ | 3,120. ⁰⁰ |
| 13 | APA-14704 2/1/15 - 6/30/15 WEEKLY OPEN CLOSE REPORTS | 22.00 | Week | 70. ⁰⁰ | 1,540. ⁰⁰ |
| 14 | APA-14704 7/1/15 - 6/30/16 WEEKLY OPEN CLOSE REPORTS | 52.00 | Week | 72. ⁰⁰ | 3,744. ⁰⁰ |
| 15 | APA-14704 7/1/16 - 6/30/17 WEEKLY OPEN CLOSE REPORTS | 52.00 | Week | 75. ⁰⁰ | 3,900. ⁰⁰ |
| 16 | APA-14704 7/1/17 - 12/31/17 WEEKLY OPEN CLOSE REPORTS 2/1/15 -12/31/17 PARTS AT MAUFACTURER'S LIST PRICE LESS <u>10</u> % | 27.00 | Week | 80. ⁰⁰ | 2,160. ⁰⁰ |

* Monitoring Fee includes 6 Radio + 14 Digital Monitorings
* * Open/close Report Fee is for 15 Open/Close Reportings

Delivery: As needed - depending on issue

Terms of Payment: Net 30 Days

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Department of Correction Alarm equipment.

9 Power Road (CDC/ Annex) RADIO

- 1) ENTRY DOORS
- 2) WAREHOUSE DOORS
- 3) MOTION OFFICE
- 4) MOTION WAREHOUSE
- 5) EXTERIOR OVERHEAD DOOR
- 6) OFFICE ENTRY DOOR
- 7) MOTION WAREHOUSE
- 8) OFFICE/MIDDLE WAREHOUSE MOTIONS
- 9) INTERIOR OVERHEAD DOOR

9 Power Road (Partition 1 & 2) DIGITAL

9 Power Road (Partition 3) DIGITAL

40 Howard Avenue (Admin-A) DIGITAL

- 1) WATER DETECTOR TELCOM ROOM
- 2) HIGH TEMP TELCOM ROOM
- 3) HIGH TEMP RECORDING ROOM
- 4) WATER DETECTOR TENETICS ROOM
- 5) WATER DETECTOR GEN/TRANS ROOM
- 6) WATER DETECTOR STATE POLICE
- 7) WATER DETECTOR MECHANIC SUMP PUMP
- 8) WATER DETECTOR VAULT
- 9) HIGH TEMP TENETICS ROOM

51 West Road (Inmate Accounts) **RADIO**

- 1) SILENT PANIC
- 2) SILENT PANIC
- 3) MOTION FRONT FOYER
- 4) GLASS BREAK FRONT FOYER
- 5) MOTION MAIN OFFICE
- 6) GLASS BREAK MAIN OFFICE
- 7) GLASS BREAK EMERGENCY FOYER
- 8) MOTION SUPERVISOR'S OFFICE
- 9) GLASS BREAK SUPERVISOR'S OFFICE
- 10) VAULT
- 11) VAULT ROOM DOOR
- 12) MOTION VAULT ROOM
- 13) SILENT PANIC
- 14) SAFE DOOR
- 15) FRONT FOYER DOOR
- 16) REAR DORR
- 17) EMERGENCY FOYER DOOR

51 West Road (Inmate Accounts) **DIGITAL**

20 Goddard (Donald Price) **RADIO**

- 1 MAIN DOOR
- 2 MOTION FRONT
- 3 MOTION REAR
- 4 SIDE DOOR

25 Power Road (CDC) RADIO

- 1) FRONT OUTER DOOR
- 2) GLASS BREAK FOYER
- 3) GLASS BREAK WAITING ROOM
- 4) MOTION RECEPTION
- 5) GLASS BREAK TERRY'S OFFICE
- 6) GLASS BREAK BREAK ROOM
- 7) GLASS BREAK ROGER'S OFFICE
- 8) WAREHOUSE SIDE DOOR
- 9) MOTION WAREHOUSE RECEPTION
- 10) MOTION MAIN WAREOUSE
- 11) WALKIN OVERHEAD DOOR
- 12) OVERHEAD 1
- 13) OVERHEAD 2
- 14) OVERHEAD 3
- 15) OVERHEAD 4
- 16) OVERHEAD 5
- 17) OVERHEAD 6
- 18) MOTION OVERHEAD DOORS
- 19) SIDE OVERHEAD DOOR
- 20) MOTION SIDE OVERHEAD DOOR
- 21) MOTION COOLER AREA
- 22) MOTION DATA ROOM
- 23) DATA ROOM OUTER DOOR
- 24) ROOF HATCH
- 25) REAR WAREHOUSE DOOR
- 26) MOTION REAR WAREHOUSE

39 Howard Avenue (Admin-B) **RADIO** for all Partitions

(VAULT) **DIGITAL**

- 1) DOOR
- 2) MOTION

(K9) **DIGITAL**

- 3) DOOR K-9
- 4) MOTION K9

(ARMORY) **DIGITAL**

- 6) DOOR ARMORY
- 7) MOTION ARMORY

(WIRELESS PANICS) **DIGITAL**

ZONES 11, 40, 42, 43

(SECURITY) **DIGITAL**

- 5 MOTION EQUIPMENT RM
- 8 MOTION SECURITY
- 9 DOOR/MOTION KEVIN'S OFFICE
- 41 SECURITY DOOR

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

| | |
|---|---|
| Name (as shown on your income tax return) SHANIX, INC. | |
| Business name, if different from above SHANIX TECHNOLOGY, INC. | |
| Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶ | |
| Address (number, street, and apt. or suite no.) 40 WORTHINGTON ROAD | Requester's name and address (optional) |
| City, state, and ZIP code CRANSTON, RI 02920 | |
| List account number(s) here (optional) | |

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

| |
|--------------------------------|
| Social security number |
| or |
| Employer identification number |
| 05 0399282 |

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of U.S. person ▶

Gloria Johnson

Date ▶

2/4/15

General Instructions

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

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,



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 journeyman 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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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: [Signature]
Mustapha Gharraee
Title: Vice President

Subscribed and sworn before me this 4th day of February 2015

[Signature]
Notary Public
My commission expires: 8/5/18



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Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety

TELECOMM CORPORATION DATA TSC
VIDEO TSC
TELEP TSC
SOUND TSC

LIC# 1922
SHANIX INC
KEKIN A SHAH
40 WORINGTON ROAD
CRANSTON RI 02920



Ronald R. Andrews
Administrator

02/28/2015
Expiration Date

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

TELECOM SYS CONTRACT DATA TSC
VIDEO TSC
TELEP TSC
SOUND TSC

LIC# 1920
MUSTAPHA GHARAEI
40 OLD LOUISQUISSET PIKE #1204L
NORTH SMITHFIELD RI 02896



JOHN SHAW
Administrator

07/31/2016
Expiration Date



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**ALL SHANIX TECHNICIANS ARE LICENSED TELECOMMUNICATIONS TECHNICIANS
IN THE STATE OF RHODE ISLAND
PARTIAL LIST**

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

**TELECOM TECHNICIAN DATA TST
VIDEO TST**

LIC# 5571
CHRISTOPHER J AMARAL
34 GLENROSE DRIVE
RIVERSIDE RI 02915



JOHN SHAW
Administrator 04/30/2016
Expiration Date

Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety

**TELECOM SYS CONTRACT DATA TSC
VIDEO TSC
TELEP TSC
SOUND TSC**

LIC# 2659
DANA L ROSTRON
P O BOX 1117
COVENTRY RI 02816



Ronald R. Amoruso
Administrator 10/31/2015
Expiration Date

Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety

**TELECOM TECHNICIAN DATA TST
VIDEO TST
TELEP TST
SOUND TST**

LIC# 5544
JAMES P PERRY
75 SPECK AVE
CRANSTON RI 02910



Ronald R. Amoruso
Administrator 12/31/2015
Expiration Date

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

**TELECOM TECHNICIAN DATA TST
VIDEO TST
TELEP TST
SOUND TST**

LIC# 7274
KEVIN TANNER
40 WORTHINGTON ROAD
CRANSTON RI 02920



JOHN SHAW
Administrator 03/31/2015
Expiration Date

Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety

**TELECOM TECHNICIAN DATA TST
VIDEO TST
TELEP TST
SOUND TST**

LIC# 1363
ANTHONY S COSTA
48 HIGHLAND AVENUE
JOHNSTON RI 02919



Ronald R. Amoruso
Administrator 12/31/2015
Expiration Date

Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety

**TELECOM TECHNICIAN VIDEO TST
TELECOM SYS APPRENT
SHANIX INC
LIC# 6185
ROBERTO C PEREIRA
341 GRATTAN
FALL RIVER MA 02721**



Ronald R. Amoruso
Administrator 04/30/2015
Expiration Date



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PARTIAL LIST
ALL SHANIX TECHNICIANS ARE OSHA CERTIFIED

OSHA 002200300 

U.S. Department of Labor
Occupational Safety and Health Administration

Mustapha Gharee

has successfully completed a 10-hour Occupational Safety and Health
Training Course in

Construction Safety & Health

Michael Pillarella 11/23/08
(Trainer) (Date)

OSHA 001580521 

U.S. Department of Labor
Occupational Safety and Health Administration

Nathan Pierce

has successfully completed a 10-hour Occupational Safety and Health
Training Course in

Construction Safety & Health

Peter Rice 66873 10/31/2007
(Trainer) (Date)

OSHA 001381530 

U.S. Department of Labor
Occupational Safety and Health Administration

Pierre Dorval

has successfully completed a 10-hour Occupational Safety and Health
Training Course in

Construction Safety & Health

Peter Rice 66873 4/22/2007
(Trainer) (Date)



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CORPORATE DATA

- Corporation Name: **Shanix, Inc. d/b/a Shanix Technology**
- Address: **40 Worthington Road, Cranston, Rhode Island 02920**
- Telephone: **(401) 941-4222**
- Facsimile: **(401) 941-4333**
- Date & State of Corp.: **Incorporated 1983 – State of Rhode Island**
- Officer's Name: **Kekin A. Shah, President**
- Federal Tax ID No.: **05-0399282**
- Dun & Bradstreet No.: **034396879**

- Website: **www.shanix.com**
- Total Employees: **35**
- Territory: **New England**
- Expertise: **Security, AV Presentation Technology & Systems Integration**
- Minority Certification: **National Minority Supplier Development Council (NMSDC)**
- Licenses/Certifications: **Rhode Island Master Price Agreement (MPA # 419 & 416)
RI Telecommunications Systems Contractor
MA Security Systems Contractor
MA Division of Capital Asset Management (DCAM)
CORI, OSHA, TWIC, CAC
US Department of Defense Clearance – CAGE Code 1QUD5**
- Memberships/Associations: **Professional Security Association (PSA)
American Society for Industrial Security (ASIS)
International Security Conference (ISC)
GSA Certified / Pelco, Inc.
InfoComm International**

**40 Worthington Road • Cranston, RI 02920 • Phone 401.941.4222 • Fax 401.941.4333
www.shanix.com • info@shanix.com • Toll Free 800.783.2067**



GREATER NEW ENGLAND MINORITY SUPPLIER DEVELOPMENT COUNCIL

THIS CERTIFIES THAT

Shanix, Inc. dba Shanix Technology, Inc.

Has met the requirements for certification as a bona fide Minority Business Enterprise as defined by the National Minority Supplier Development Council, Inc. (NMSDC) and as adopted by the Greater New England Minority Supplier Development Council.

****NAICS Code(s):** 561622; 561621; 541512; 517510; 238210

****Description of their product/services as defined by the North American Industry Classification System (NAICS)**

May 30, 2014 GN00615

Issued Date Certificate Number

July 31, 2015

Expiration Date
Dr. Fred McKimney, President, GNEMSDC

By using your assigned (through NMSDC only) password, NMSDC Corporate Members may view the original certificate by logging in at: <http://www.nmsdc.org>



An affiliate of the National Minority Supplier Development Council, Inc. (NMSDC)