

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: 7549186PH2A7
Solicitation Title: PHASE 2 - RENOVATION AND ADDITION FOGARTY LIFE SCIENCE SCHOOL OF NURSING, RIC - ADD #7 (9 PGS)

Bid Proposal Submission
Deadline Date & Time: 6/15/2015 11:30 AM

RIVIP Vendor ID #: 40133
Bidder Name: Ahlborg Construction Corporation
Address: 21 College Hill Road
2nd Floor
Warwick , RI 02886
USA

Telephone: (401) 265-7300
Fax: (401) 681-4950
Contact Name: Eric S. Ahlborg
Contact Title: President
Contact Email: eahlborg@ahlborg.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 1-4, and if "Yes," provide details below. Complete Disclosure 5. 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.

- 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.

Solicitation #: 7549186PH2A7

Solicitation Title: Renovation & Addition Fogarty Life Science School of Nursing,
Rhode Island College

BID FORM

To: The Department of Administration, Division of Purchases
One Capitol Hill, Providence, RI 02908

Project: RIC School of Nursing Addition and Renovation
Rhode Island College
Providence, RI

Bidder:

Ahlborg Construction Corporation

Legal name of entity

21 College Hill Road - 2nd Floor Warwick, RI 02886

Address

Glenn R. Ahlborg

Contact name

gahlborg@ahlborg.com

Contact email

401-681-4949

Contact telephone

401-681-4950

Contact fax

1. BASE BID PRICE

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

\$ 4,383,000.00

(Base Bid Price *in figures* printed electronically, typed, or handwritten legibly in ink)

Four Million Three Hundred Eighty Three Thousand Dollars

(Base Bid Price *in words* electronically, typed, or handwritten legibly in ink)

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- **ALLOWANCES**

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

1.	Concealed Existing Conditions Repair Allowance	\$10,000
2.	Exterior improvements Allowance	\$35,000
3.	<u>Unit Price Totals</u>	<u>\$25,000</u>

Total Allowances: **\$70,000**

- **BONDS**

The Base Bid Price ***includes*** 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.

All Addenda must be acknowledged.

Addendum No. <u>1</u> , dated <u>April 17, 2015</u>	Addendum No. <u>6</u> , dated <u>June 4, 2015</u>
Addendum No. <u>2</u> , dated <u>May 7, 2015</u>	Addendum No. <u>7</u> , dated <u>June 10, 2015</u>
Addendum No. <u>3</u> , dated <u>May 20, 2015</u>	
Addendum No. <u>4</u> , dated <u>May 26, 2015</u>	
Addendum No. <u>5</u> , dated <u>May 29, 2015</u>	

2. ALTERNATES (*Additions 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 the Base Bid Price by the amount set forth below for each Alternate selected.

1. Alternate #1: North Section of Parking Lot.

Add/~~Reduce~~ One Hundred Seventy Thousand Dollars (\$ 170,000.00)

2. Alternate #2: Renovation of Faculty Lounge F-102.

Add/~~Reduce~~ Forty Three Thousand Dollars (\$ 43,000.00)

3. Alternate #3: Renovations of Fogarty Rooms: Classroom F124, Student Lounge F137 and Groups Study Rooms 137A, 137B and 137C.

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Rhode Island College

Add/~~Deduct~~ Eighty Four Thousand Dollars (\$ 84,000.00)

4. Alternate #4: Landscape Plantings

Add/~~Deduct~~ Sixty Eight Thousand Dollars (\$ 68,000.00)

5. Alternate #5: Renovation of Fogarty Rooms: Offices 120A, 120B and 120C.

Add/~~Deduct~~ Thirty Three Thousand Dollars (\$ 33,000.00)

3. UNIT PRICES

See Project Manual Section 01 2200.

4. CONTRACT TIME

The Bidder offers to perform the work in accordance with the timeline specified below:

- Begin Submittals.....7 days after PO is issued
- Mobilize on Site14 days after PO is issued
- Addition Weather Tight..... November 30, 2015
- Addition Substantial Completion..... May 30, 2016

- Final Completion.....June 30, 2016

- Existing Building Renovation Final Completion August 1, 2016

- Work Prohibited.....to be coordinated with academic and campus calendar

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 **each** calendar day of delay beyond the date for substantial completion, as determined in the sole discretion of the State:

One Thousand Dollars (\$1,000.00) per day.

BID FORM SIGNATURE(S)

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

Solicitation #: 7549186PH2A7

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Rhode Island College

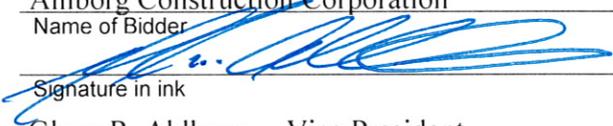
Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

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.

BIDDER

Date: June 15, 2015

Ahlborg Construction Corporation
Name of Bidder


Signature in ink

Glenn R. Ahlborg - Vice President
Printed name and title of person signing on behalf of Bidder

32212
Bidder's Contractor Registration Number

BID BOND

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

CONTRACTOR:

(Name, legal status and address)

AHLBORG CONSTRUCTION CORP.
21 COLLEGE HILL ROAD
WARWICK, RI 02886

SURETY:

(Name, legal status and principal place of business):

PHILADELPHIA INDEMNITY INSURANCE COMPANY
ONE BALA PLAZA, SUITE 100
BALA CYNWYD, PA 19004-1403

OWNER:

(Name, legal status and address)

STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION, DIVISION OF PURCHASES
ONE CAPITOL HILL
PROVIDENCE, RI 02908

BOND AMOUNT: \$ FIVE PERCENT (5%) OF THE ATTACHED BID DOLLARS

PROJECT: 7549186PH2

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

RENOVATION AND ADDITION FOGARTY LIFE SCIENCE SCHOOL OF NURSING
RHODE ISLAND COLLEGE
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.

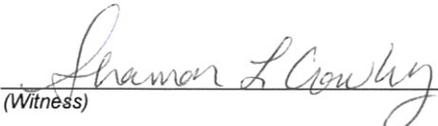
If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

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 requirements 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 15th day of June, 2015.

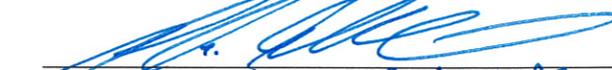


(Witness)



(Witness)

AHLBORG CONSTRUCTION CORP.



(Principal) **GLENN R. AHLBORG** (Seal)
Vice - President

(Title)

PHILADELPHIA INDEMNITY INSURANCE COMPANY

(Surety) (Seal)


(Attorney-in-Fact) **BRIAN M. ROSSI**

PHILADELPHIA INDEMNITY INSURANCE COMPANY

One Bala Plaza, Suite 100
Bala Cynwyd, PA 19004
Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: that PHILADELPHIA INDEMNITY INSURANCE COMPANY (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint: **Brian M. Rossi; Christopher A. Iannotti and Elisa Cardone OF THE CITY OF EAST GREENWICH, STATE OF RHODE ISLAND.**

Its true and lawful Attorney(s) in fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed **\$25,000,000**

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of PHILADELPHIA INDEMNITY INSURANCE COMPANY at a meeting duly called the 1st day of July, 2011.

RESOLVED: That the Board of Directors hereby authorizes the President or any Vice President of the Company to: (1) Appoint Attorney(s) in Fact and authorize the Attorney(s) in Fact to execute on behalf of the Company bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and to attach the seal of the Company thereto; and (2) to remove, at any time, any such Attorney-in-Fact and revoke the authority given. And, be it

FURTHER RESOLVED: That the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or certificate relating thereto by facsimile, and any such Power of Attorney so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with the respect to any bond or undertaking to which it is attached.

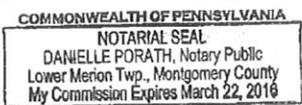
IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEAL TO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 7TH DAY OF FEBRUARY 2013.



(Seal)

Robert D. O'Leary Jr., President & CEO
Philadelphia Indemnity Insurance Company

On this 7th day of February 2013, before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the PHILADELPHIA INDEMNITY INSURANCE COMPANY; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.



(Notary Seal)

Notary Public:
residing at: Bala Cynwyd, PA
My commission expires: March 22, 2016

I, Craig P. Keller, Executive Vice President, Chief Financial Officer and Secretary of PHILADELPHIA INDEMNITY INSURANCE COMPANY, do hereby certify that the foregoing resolution of the Board of Directors and this Power of Attorney issued pursuant thereto are true and correct and are still in full force and effect. I do further certify that Robert D. O'Leary Jr., who executed the Power of Attorney as President, was on the date of execution of the attached Power of Attorney the duly elected President of PHILADELPHIA INDEMNITY INSURANCE COMPANY.

In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this 15TH day of JUNE, 20 15.



Craig P. Keller, Executive Vice President, Chief Financial Officer & Secretary
PHILADELPHIA INDEMNITY INSURANCE COMPANY

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)

[] [] []

26 | 3024881

NAME AHLBORG CONSTRUCTION CORPORATION

ADDRESS 21 COLLEGE HILL ROAD - 2ND FLOOR

(REMITTANCE ADDRESS, IF DIFFERENT) _____

CITY, STATE AND ZIP CODE WARWICK, RHODE ISLAND 02886

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] **TITLE** PRESIDENT **DATE** 1/14/15 **TEL NO.** 401-681-4949

BUSINESS DESIGNATION:

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

- 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



STATE OF RHODE ISLAND

CONTRACTORS' REGISTRATION
AND LICENSING BOARD

REGISTRATION NO.

EXP. DATE

REGISTRANT'S NAME

32212

12/1/16

AHLBORG CONSTRUCTION CORPORATION

AUTHORIZED REPRESENTATIVE

ERIC S AHLBORG

DRIVER'S LICENSE #

RI 8107106

EXECUTIVE DIRECTOR

Greg A. Walker