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:** | 7550128A1 | |
| **Solicitation Title:** | RENOVATIONS AND UPGRADES TO RI DEPARTMENT OF CORRECTIONS ADM BUILDING A&B ADD#1 1 ZIP FILE | |
| **Bid Proposal Submission Deadline Date & Time:** | 1/27/2016 | 1:30 PM |
| **RIVIP Vendor ID #:** | 19975 | |
| **Bidder Name:** | Mill City Construction, Inc. | |
| **Address:** | 7 Old Great Rd.<br><br>Lincoln , RI 02865<br>USA | |
| **Telephone:** | 401-766-3100 | |
| **Fax:** | 401-769-8910 | |
| **Contact Name:** | Paul L. Girard | |
| **Contact Title:** | Vice President | |
| **Contact Email:** | pgirard@mill-city.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.

N 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasi-public corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.

5. 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):*

## 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):*

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

**BIDDER**

**Date:** January 27, 2016

Mill City Construction, Inc.

Name of Bidder

Signature in ink

Michael Montle, Project Manager

Printed name and title of person signing on behalf of Bidder

**Solicitation #: 7550128**
**Solicitation Tittle: Renovations and Upgrades to Rhode Island Department of Corrections Administration Buildings A & B.**

**BID FORM**

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

Project: Renovations and Upgrades to Administration Buildings A & B
Rhode Island Department of Corrections
40 Howard Avenue, Cranston, Rhode Island

Date: January 15, 2016

Bidder:

Mill City Construction, Inc.
Legal name of entity

7 Old Great Road, Lincoln, RI 02865
Address

| Michael Montle | mike@mill-city.com |
|---|---|
| Contact name | Contact email |
| (401) 766-3100 | (401) 769-8910 |
| Contact telephone | 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):

$ 1,683,620.00

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

One Million Six Hundred Eighty-three Thousand Six Hundred Twenty Dollars and Zero Cents

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

**Solicitation #: 7550128**
**Solicitation Tittle: Renovations and Upgrades to Rhode Island Department of Corrections Administration Buildings A & B.**

- ## ALLOWANCES

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

| | |
|---|---|
| 1. **Miscellaneous Mechanical, Electrical and Plumbing Work** | **$68,000.00** |
| 2. **General Carpentry** | **$60,000.00** |
| **Total Allowances:** | **$128,000.00** |

- ## 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. 1, dated January 15, 2016

Addendum No. 2, dated _____

Addendum No. 3, dated _____

## 2. ALTERNATES *(Additions to Base Bide Price)*

Not Used.

## ADD ALTERNATE NUMBER ONE

Not Used.

$ N/A

(Amount *in figures* printed electronically, typed, or handwritten legibly in ink)

N/A

(Amount *in words* electronically, typed, or handwritten legibly in ink)

## 3. UNIT PRICES

Unit Prices Not Used

## 4. CONTRACT TIME

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

- Start of Construction ..... May 2016
- Substantial Completion ..... September 2016
- Final Completion ..... October 2016

The Final Completion date for Work shall be within **120** calendar days of the Purchase Order from the Division of Purchases.

## 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: **Five Hundred Dollars ($500.00) 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 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:** January 27, 2016

Mill City Construction, Inc.
Name of Bidder

Signature in ink

Michael Montle, Project Manager
Printed name and title of person signing on behalf of Bidder

# 9568
Bidder's Contractor Registration Number

THE AMERICAN INSTITUTE OF ARCHITECTS

*AIA Document A310*

# Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we **MILL CITY CONSTRUCTION, INC., of Seven Old Great Road, Lincoln, Rhode Island**
as Principal, hereinafter called the Principal, and **HARTFORD CASUALTY INSURANCE COMPANY**
a corporation duly organized under the laws of the State of **Indiana**
as Surety, hereinafter called the Surety, are held and firmly bound unto **RHODE ISLAND DEPARTMENT OF CORRECTIONS**

as Obligee, hereinafter called the Obligee, in the sum of **Five Percent of the Amount of the Attached 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 **Renovations & Upgrades to Administrative Buildings A & B**

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 **27th of January, 2016.**

Holly A Yagnesak
*(Witness)*

Jessica M. Roa
*(Witness)*

MILL CITY CONSTRUCTION, INC.
*(Principal)* *(Seal)*
By: Andre Girard
Andre Girard *(Title)* President

HARTFORD CASUALTY INSURANCE COMPANY
*(Surety)* *(Seal)*
By: Denise A Chianese
**Denise A. Chianese,** *(Title)* **Attorney-in-Fact**

# POWER OF ATTORNEY

*Direct Inquiries/Claims to:*
**THE HARTFORD**
**Bond T-4**
**One Hartford Plaza**
**Hartford, Connecticut 06155**
*call:* **888-266-3488** *or fax:* **860-757-5835)**

**KNOW ALL PERSONS BY THESE PRESENTS THAT:** Agency Code: 08 089016

- [X] **Hartford Fire Insurance Company**, a corporation duly organized under the laws of the State of Connecticut
- [X] **Hartford Casualty Insurance Company**, a corporation duly organized under the laws of the State of Indiana
- [ ] **Hartford Accident and Indemnity Company**, a corporation duly organized under the laws of the State of Connecticut
- [ ] **Hartford Underwriters Insurance Company**, a corporation duly organized under the laws of the State of Connecticut
- [ ] **Twin City Fire Insurance Company**, a corporation duly organized under the laws of the State of Indiana
- [ ] **Hartford Insurance Company of Illinois**, a corporation duly organized under the laws of the State of Illinois
- [ ] **Hartford Insurance Company of the Midwest**, a corporation duly organized under the laws of the State of Indiana
- [ ] **Hartford Insurance Company of the Southeast**, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, ***up to the amount of*** UNLIMITED :

FRED R. TRIPP, ANDREW FOTOPULOS, DAVID J. BYRNE III, CHARLES A BYRNE, DENISE A. CHIANESE OF EAST PROVIDENCE, RHODE ISLAND

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒, and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

**In Witness Whereof**, and as authorized by a Resolution of the Board of Directors of the Companies on August 1, 2009, the Companies have caused these presents to be signed by its Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.

Wesley W. Cowling, Assistant Secretary

M. Ross Fisher, Vice President

STATE OF CONNECTICUT }
COUNTY OF HARTFORD } ss. Hartford

On this 12th day of July, 2012, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.

Kathleen T. Maynard
Notary Public
My Commission Expires July 31, 2016

**CERTIFICATE**

I, the undersigned, Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of January 27, 2016

Signed and sealed at the City of Hartford.

Gary W. Stumper, Vice President

**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:** 7550128A1

**Bid/RFP Title:** Renovations and Upgrades to RIDOC Admin Bldg A & B

**RIVIP Vendor ID#:** 19975

**Vendor Name:** Mill City Construction, Inc.

**Address:** 7 Old Great Road, Lincoln, RI 02865

**Telephone:** (401) 766-3100

**Fax:** (401) 769-8910

**E-Mail:** mike@mill-city.com

**Contact Person and Title:** Michael Montle, Project Manager

Mill City Construction, Inc., 7 Old Great Road, Lincoln, RI 02865 (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. X 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).

Michael Montle, Project Manager
Printed Name and Title of Authorized Representative

January 27, 2016
Date

Signature of Authorized Representative

FORM W-9
REV 8/15

# STATE OF RHODE ISLAND
## FORM W-9 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 0469049

**NAME** MILL CITY CONSTRUCTION, INC.

**ADDRESS** 7 OLD GREAT ROAD

**CITY, STATE AND ZIP CODE** LINCOLN, RI 02865

**PAYMENT REMITTANCE ADDRESS, IF DIFFERENT FROM THE ADDRESS ABOVE**

**ADDRESS**

**CITY, STATE AND ZIP CODE**

**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 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.

(3) I am a U.S. citizen or other U.S. person (as defined by the IRS).

**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.

***Please sign here and provide title, date and telephone number:***

**SIGNATURE** Holly A Yagmusak **TITLE** CONTROLLER **DATE** 1/27/2016 **TEL NO** (401) 766-3100

*Original Signature Required (Digital Signature Not Acceptable)*

**BUSINESS DESIGNATION:**

*Please Check One*: Individual ☐ Corporation ☒ Trust/Estate ☐ Government/Nonprofit Corporation ☐

Partnership ☐ Medical Services Corporation ☐ Legal Services Corporation ☐

LLC Tax Classification: Single Member (Individual) ☐ Partnership ☐ Corporation ☐

**TIPS:**

**NAME:** Be sure to enter your full and correct legal name as shown on your income tax return for the SSN or EIN provided.

**ADDRESS, CITY, STATE AND ZIP CODE:** If you operate a business at more than one location, adhere to the following:

1) Same EIN 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 EIN for each different location -- submit a completed W-9 form for each EIN and location. (One year-end tax information return will be reported for each EIN and remittance address.)

**Mail Completed Form To:**
**Supplier Coordinator**
**Purchasing Department**
**One Capitol Hill, 2nd Floor**
**Providence RI 02908**

**Or Email To: doa.pursuppliercoordinator@purchasing.ri.gov**

For State Use Only:

IRS____ RI SOS____ FED____ Other_____

RI Supplier # _____ Approved _____

Date Entered _____ Entered By_____