

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](http://www.purchasing.ri.gov) to submit a bid proposal.*

**Solicitation Number:** 7550218A1  
**Solicitation Title:** ASBESTOS REMOVAL TO BUILDING #31 AT RHODE ISLAND COLLEGE (2 PGS)

**Bid Proposal Submission  
Deadline Date & Time:** 2/16/2016 1:30 PM

**RIVIP Vendor ID #:** 3021  
**Bidder Name:** AA Asbestos Abatement Co., Inc.  
**Address:** (R) 1307 Hartford Ave.

Johnston , RI 02919  
USA

**Telephone:** (401) 351-1188  
**Fax:** (401) 331-9095  
**Contact Name:** John Furtado  
**Contact Title:** President  
**Contact Email:** demo@aawrecking.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):

John A. Furlado, Jr. 45 Lindsay Lane Cranston, RI 02921 President  
 Valentinio A. Tirocchi, Jr. 81 Charlotte Drive East Greenwich, RI 02884 Vice President  
 Valerie R. Mooney 16 Elizabeth Ann Drive Johnston, RI 02919 Secretary, Treasurer and Clerk

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### SECTION 3 —CERTIFICATIONS

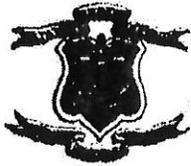
**Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.**

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.





# Request for Quote

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

CREATION DATE: 28-JAN-16  
BID NUMBER: 7550218  
TITLE: ASBESTOS REMOVAL TO BUILDING #31 AT  
RHODE ISLAND COLLEGE  
  
BID CLOSING DATE AND TIME: 16-FEB-2016 01:30:00

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

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RIC-PURCHASING  
600 MOUNT PLEASANT AVENUE  
PROVIDENCE, RI 02908  
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600 MOUNT PLEASANT AVENUE  
PROVIDENCE, RI 02908  
US

Requisition Number: 1447359

Line	Description	Quantity	Unit	Unit Price	Total
1	<p>There will be a Pre-Bid Conference held. Please visit our website: <a href="http://www.purchasing.ri.gov">www.purchasing.ri.gov</a> for the Date, Time and Location. Or see page one (1) of this Invitation to Bid.</p> <p>TOTAL COST FOR THE ASBESTOS REMOVAL TO BUILDING #31 - RIC</p>	1.00	Each	\$58,690.00	\$58,690.00

Delivery: \_\_\_\_\_

Terms of Payment: \_\_\_\_\_

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



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration  
DIVISION OF PURCHASES  
One Capitol Hill  
Providence, RI 02908-5855

Tel: (401) 574-8100  
Fax: (401) 574-8387  
Website: [www.purchasing.ri.gov](http://www.purchasing.ri.gov)

February 11, 2016

**ADDENDUM NUMBER ONE**

**RFQ # 7550218**

**TITLE: Asbestos Removal to Building #31 at Rhode Island College**

**Closing Date and Time: 2/16/16 at 1:30 PM**

**Per the issuance of this ADDENDUM # (2), pages, including this cover sheet.**

**Specification Change /Addition / Clarifications**

Attached is a copy of the Pre-Bid Sign-In sheet.



State of Rhode Island  
 Division of Purchases  
 One Capitol Hill  
 Providence, RI 02903

**"NON-MANDATORY" PRE-BID CONFERENCE SIGN IN SHEET**

**BID NUMBER:** 7550218  
**BID TITLE:** Asbestos Removal to Building #31 Rhode Island College  
**PRE-BID DATE AND TIME:** 2/9/2016 @ 10:30 am

**PROTESTS (FOR REPRESENTATIVE):**  
 Gary P. Mosca  
**PRE-BID START TIME:**  
 10:30 AM  
**PRE-BID END TIME:**  
 11:15 AM

COMPANY NAME	COMPANY REPRESENTATIVE	ADDRESS	CONTACT EMAIL	CONTACT PHONE NUMBER	CONTACT FAX NUMBER	PROPOSAL SUBMITTED (FOR PURCHASING USE ONLY)
1 STATE of RI	Gary P. Mosca	One Capitol Hill, New	gpm@moscaengineering.com	401-574-8124		
2 RIC	Michael Kelle	West Mount Pleasant	mkelle@ric.edu	401-456-8262		
3 SITECOW CORP.	MIKE LEMA	1430 Cranston Street Cranston R.I.	MIKE@SITECOWCORP.COM	(401) 944-2335		
4 RIC	Jessica Cavanaugh	600 NE Pleasant Ave	jc@cavanaugh.com	401-456-8047		
5 ACME	NORM THIM	52 FULLER STREET	NORM@ACME106MIL.COM	774-272-1300		
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**STATE OF RHODE ISLAND**  
CONTRACTORS' REGISTRATION  
AND LICENSING BOARD

REGISTRANT'S NAME  
**A. A. ASBESTOS ABATEMENT CO.**

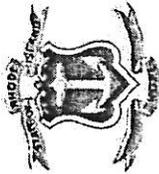
REGISTRATION NO.  
**2166**

EXP. DATE  
**08/1/73**

AUTHORIZED REPRESENTATIVE  
**JOHN A. FURCADO JR.**

DRIVER'S LICENSE #  
**R1 7916592**

EXECUTIVE DIRECTOR  
*[Signature]*



*State of Rhode Island and Providence Plantations*  
**DEPARTMENT OF HEALTH**  
**HEALTHY ENVIRONMENT TEAM – ASBESTOS PROGRAM**  
**ASBESTOS ABATEMENT CONTRACTOR LICENSE**

Pursuant to Title 23, Chapter 24.5 of the General Laws of Rhode Island (the Act) and the Rhode Island Rules and Regulations for Asbestos Control and in reliance on statements and representations heretofore made by the licensee, a license is hereby issued authorizing the licensee to act as an Asbestos Abatement Contractor. This license is subject to all applicable provisions of the Act and all applicable rules, regulations and orders of the Rhode Island Department of Health-Office of Occupational and Radiological Health now or hereafter in effect and to any conditions specified below.

**Licensee:** A A ASBESTOS ABATEMENT COMPANY INC  
**Address:** R-1307 HARTFORD AVENUE  
JOHNSTON RI 02919-7193  
**License Number:** LAC-025  
**Expiration Date:** 01/31/2017

**Asbestos Abatement Activities Authorized:** Removal, encapsulation or enclosure of asbestos containing material in accordance with Part B of the Rhode Island Rules and Regulations

For a listing of site supervisors that are associated with this license please visit our website at the following web address:

<http://www.health.ri.gov/hsr/professions/license.php>

At least one Asbestos Abatement Site Supervisor must be physically present whenever any on-site work is being performed in conjunction with an approved asbestos abatement project. The photo ID issued by the Agency must be clearly displayed by an Asbestos Abatement Site Supervisor at all times while supervising an approved asbestos abatement project. Except as specifically provided otherwise in this license, the licensee shall conduct his program in accordance with statements, procedures and representations contained in the documents, including any enclosures. The Rhode Island Rules and Regulations for Asbestos Control shall govern unless the statements, representations and procedures in the licensee's application and correspondence are more restrictive than the regulations.

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**Raquel Barrera**  
Sr. Community Program Liaison Worker  
Healthy Homes and Environment



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

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](http://www.dlt.ri.gov/pw).

CERTIFICATION

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

By: John A. Furtado, Jr.

Title: President

Subscribed and sworn before me this 16<sup>th</sup> day of Feb, 2016

Judith A. Riccardi  
Notary Public Judith A. Riccardi  
My commission expires: 7/28/17

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

*TTY via RI Relay 711*

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)

Empty boxes for Social Security No. (SSN)

05 0425599

NAME A.A. Asbestos Abatement Co., Inc.

ADDRESS R-1307 Hartford Avenue

CITY, STATE AND ZIP CODE Johnston, RI 02919

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 *[Handwritten Signature]* TITLE President DATE 2/16/2016 TEL NO 401-351-1188  
*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](mailto:doa.pursuppliercoordinator@purchasing.ri.gov)

For State Use Only:  
IRS \_\_\_ RI SOS \_\_\_ FED \_\_\_ Other \_\_\_  
RI Supplier # \_\_\_ Approved \_\_\_  
Date Entered \_\_\_ Entered By \_\_\_

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we A.A. Asbestos Abatement Co., Inc.
R-1307 Hartford Avenue, Johnston, RI 02919 as Principal, hereinafter called the Principal, and International Fidelity Insurance Company
One Newark Center, Newark, NJ 07102-5207 a corporation duly organized under the laws of State of NJ

as Surety, hereinafter called the Surety, are held and firmly bound unto
State of Rhode Island and Providence Plantations
One Capitol Hill, Providence, RI 02908
as Obligee, hereinafter called the Obligee, in the sum of

Five Percent of Amount Bid Dollars (\$ 5% ),

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

Bid #7550218A1 Rhode Island College Building #31 (The Alumni House) Asbestos Removal

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 hereof, 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 16th of February, 2016.

[Signature]
(Witness)

A.A. Asbestos Abatement Co., Inc.
(Principal) (Seal)

BY: [Signature]
(Title)

[Signature]
(Witness)

International Fidelity Insurance Company
(Surety)

BY: Shelly Andrade
(Title) Attorney-in-Fact



**POWER OF ATTORNEY**  
**INTERNATIONAL FIDELITY INSURANCE COMPANY**

HOME OFFICE: ONE NEWARK CENTER, 20TH FLOOR  
NEWARK, NEW JERSEY 07102-5207

**KNOW ALL MEN BY THESE PRESENTS:** That **INTERNATIONAL FIDELITY INSURANCE COMPANY**, a corporation organized and existing laws of the State of New Jersey, and having its principal office in the City of Newark, New Jersey, does hereby constitute and appoint

Shelly Andrade as attorney-in-fact to execute the following Surety bond:  
Surety Bond Number: Bid Bond  
Principal: A.A. Asbestos Abatement Co., Inc.  
Obligee: State of Rhode Island and Providence Plantations

and the execution of such instrument in pursuance of these presents, shall be as binding upon the said **INTERNATIONAL FIDELITY INSURANCE COMPANY**, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of Article 3-Section 3, of the By-Laws adopted by the Board of Directors of **INTERNATIONAL FIDELITY INSURANCE COMPANY** at a meeting called and held on the 7th day of February, 1974.

The President or any Vice President, Executive Vice President, Secretary or Assistant Secretary, shall have power and authority

- (1) To appoint Attorneys-in-fact, and to authorize them to execute on behalf of the Company, and attach the Seal of the Company thereto, bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and,
- (2) To remove, at any time, any such attorney-in-fact and revoke the authority given.

Further, this Power of Attorney is signed and sealed by facsimile pursuant to resolution of the Board of Directors of said Company adopted at a meeting duly called and held on the 29th day of April, 1982 of which the following is a true excerpt:

Now therefore the signatures of such officers and the seal of the Company may be affixed to any such power of attorney or any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.



IN TESTIMONY WHEREOF, **INTERNATIONAL FIDELITY INSURANCE COMPANY** has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 30th day of October, 2015.

STATE OF NEW JERSEY  
County of Essex

**INTERNATIONAL FIDELITY INSURANCE COMPANY**

Robert W. Minster, Chief Executive Officer

On this 30th day of October, 2015, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said the he is the therein described and authorized officer of the **INTERNATIONAL FIDELITY 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 by order of the Board of Directors of said Company.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires November 21st, 2020

**CERTIFICATION**

I, the undersigned officer of **INTERNATIONAL FIDELITY INSURANCE COMPANY** do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the By-Laws of said Company as set forth in said Power of Attorney, with the ORIGINALS ON IN THE HOME OFFICE OF SAID COMPANY, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect

IN TESTIMONY WHEREOF, I have hereunto set my hand this 16th day of February, 2016.

Assistant Secretary