

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: 7550394A1
Solicitation Title: GENERATOR REPLACEMENT AT THE WARWICK CAMPUS - CCRI(10PGS)

**Bid Proposal Submission
Deadline Date & Time:** 4/11/2016 10:00 AM

RIVIP Vendor ID #: 496
Bidder Name: Robert F. Audet, Inc.
Address: 2883 South County Trail

East Greenwich , RI 02818
USA

Telephone: (401) 884-3310
Fax: (401) 884-3316
Contact Name: John Miguel
Contact Title: Vice President
Contact Email: estimating@rfaudet.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

- 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.

Disclosure details (continue on additional sheet if necessary):

Corporation: Robert F. Audet, Inc.		Phone: 401-884-3310	Electrical License - A-004713
2883 South County Trail			Contractors Registration - 32696
East Greenwich, RI 02818			
Officers	Name	Occupation	% Ownership
President	John Miguel	Owner	100 %
Vice President	Stephen Landry	Project Manager	0%
Vice President	Ross Berthiaume	Project Manager	0%
Treasurer/Secretary	Lynn Kent	Controller	0%

SECTION 3 - OWNERSHIP DISCLOSURE

Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed nonresponsive.

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; otherwise, complete ownership disclosure is required.

List each officer, director, manager, stockholder, member, partner, or other owner or principle 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.

SECTION 4 - 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



State of Rhode Island
Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Tel: (401) 574-8100 Fax: (401) 574-8387

ADDENDUM # 1

3/30/2016

Solicitation #7550394

*Title: Generator Replacement at the Warwick Campus – Community
College of Rhode Island*

Submission Deadline: April 11, 2016 @ 10:00 AM (ET)

Per the issuance of ADDENDUM #1 the following are noted:

See Attached Addendum No. 1

Interested Parties should monitor this website on a regular basis, for any additional information that may be posted.

**Gary P. Mosca
Senior Buyer**

Solicitation #: 7550394

Solicitation Title: Generator Replacement at the Warwick Campus - CCRI

BID FORM

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

Project: Emergency Generator Replacement
Community College of Rhode Island
Knight Campus

Bidder:

Robert F. Audet, Inc.

Legal name of entity

2883 South County Trail, East Greenwich, RI 02818

Address

Raymond Patnaude

rpatnaude@rfaudet.com

Contact name

Contact email

Raymond Patnaude

401-886-4246

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):

\$ 275,600.00

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

Two Hundred Seventy Five Thousand Six Hundred Dollars

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

Solicitation #: 7550394

Solicitation Title: Generator Replacement at the Warwick Campus - CCRI

- **ALLOWANCES**

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

1. **Concealed Conditions Allowance** **\$15,000.00**

Total Allowances: **\$15,000.00**

- **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 March 30, 2016
Addendum No. , dated
Addendum No. , dated
Addendum No. , dated
Addendum No. , dated

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. Install wires in the conduit to the present generator for future use.

Add/Deduct ADD: Twenty Two hundred Dollars (\$ 2,200.00)

3. **UNIT PRICES**

The Bidder submits these predetermined Unit Prices as the Basis for any change orders approved in advance by the State. These Unit Prices include all costs, including labor, materials, services, regulatory compliance, overhead, and profit.

Solicitation #: 7550394

Solicitation Title: Generator Replacement at the Warwick Campus - CCRI

N/A

4. CONTRACT TIME

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

- Start of Submittals 10 calendar days after receipt of CCRI PO
- Start of Construction 30 calendar days after receipt of CCRI PO or sooner
- Substantial Completion August 20, 2016
- Final Completion August 30, 2016

No work can occur on site - May 19th thru May 22nd, 2016.

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 (\$1000) 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.

Solicitation #: 7550394

Solicitation Title: Generator Replacement at the Warwick Campus - CCRI

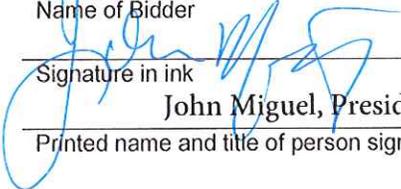
BIDDER

Date: April 11, 2016

Robert F. Audet, Inc.

Name of Bidder

Signature in ink



John Miguel, President

Printed name and title of person signing on behalf of Bidder

32696

Bidder's Contractor Registration Number

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we **ROBERT F. AUDET, INC.**, of 2883 South County Trail, East Greenwich, 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 **STATE OF RHODE ISLAND**

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.

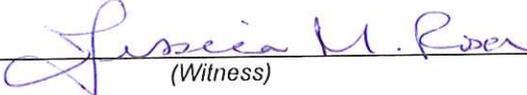
WHEREAS, the Principal has submitted a bid for **Generator Replacement at the Warwick Campus - CCRI**

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 11th day of April, 2016.

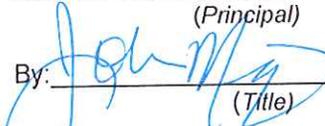


(Witness)



(Witness)

ROBERT F. AUDET, INC.
(Principal) (Seal)

By: 

(Title)

HARTFORD CASUALTY INSURANCE COMPANY
(Surety) (Seal)

By: 

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

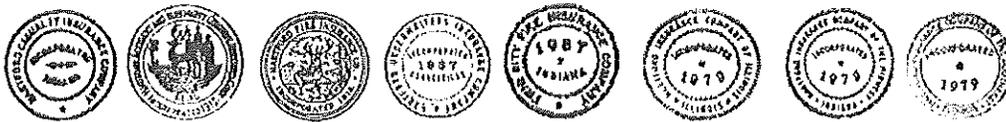
- Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- Hartford Accident and Indemnity Company, a corporation duly organized under the laws 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

Wesley W. Cowling, Assistant Secretary

M. Ross Fisher

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.



CERTIFICATE

Kathleen T. Maynard

Kathleen T. Maynard
 Notary Public

My Commission Expires July 31, 2016

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 April 11, 2016

Signed and sealed at the City of Hartford.



Gary W. Stumper

Gary W. Stumper, Vice President



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

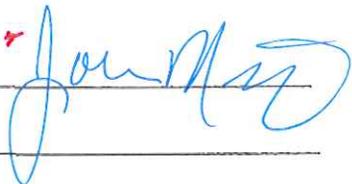
Lincoln D. Chafee
Governor
Charles J. Fogarty
Director

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

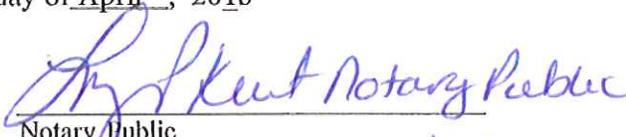
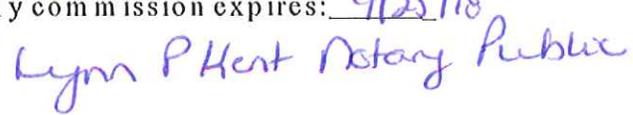
Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at www.dlt.ri.gov/pw.

CERTIFICATION

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

By: John Miguel 
Title: President

Subscribed and sworn before me this 11 day of April, 2016


Notary Public
My commission expires: 9/25/18


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

TTY via RI Relay 711



STATE OF RHODE ISLAND 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 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

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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 journeyperson ratio for each trade approved by the apprenticeship council of the Department of Labor and Training in compliance with RIGL §37-13-3.1;
12. Assure that all prevailing wage employees who perform work which requires a Rhode Island trade license possess the appropriate Rhode Island trade license in compliance with Rhode Island law; and

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TTY via Rf Relay 711



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 0450812

NAME Robert F. Audet, Inc.

ADDRESS _____

CITY, STATE AND ZIP CODE _____

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 _____ TITLE President DATE 04/11/2016 TEL NO 401-884-3310
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 _____

Apprentice Qualification: AGE 18

EDUCATION 12

Supervisor of Apprentices: Robert Audet

LICENSE#: B-4623

WAGE SCHEDULE PERIODS- (Months, Hours, Years) 8 1000hr.
(No.) (Period)

1st 6mo., 50% 5th 6mo., 70% 9th _____ 13th _____

2nd 6mo., 55% 6th 6mo., 75% 10th _____ 14th _____

3rd 6mo., 60% 7th 6mo., 85% 11th _____ 15th _____

4th 6mo., 65% 8th 6mo., 90% 12th _____ 16th _____

Minimum journey person's wage rate as of 1-19-93 is 13.00 Per Hour
is _____

Normal Work Week 40 Hours, Premium Rates 14

(IF UNION IS INVOLVED)

FOR THE UNION

Union N/A

By _____

Title _____

Date _____

Approved for: 2 Apprentice(s)

Term 8000 4
(Hours) (Years)

Howard T. Carney
(Field Representative)

FOR THE COMPANY

Company Robert F. Audet, Inc.

By Robert F. Audet

Title President

Date 1/6/93

Date 1/19/93
[Signature]

Department of Labor
APPRENTICESHIP COUNCIL
220 Elmwood Avenue
Providence, R.I. 02907



State of Rhode Island Apprenticeship Council

Department of Labor

220 Elmwood Avenue
Providence, Rhode Island 02907

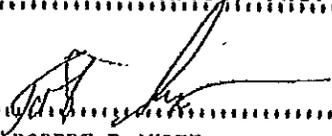
INFORMATIONAL DATA

1. Name of Company Robert F. Audet, Inc.
2. Address 2883 South County Trail, East Greenwich, RI 02818
(Street) (city) (zip code) (phone)
3. Present number of Employees 12
4. Products made or services rendered Electricalian
5. Trade/s in which training is to be given Electrician
6. Term of Apprenticeship 8000 hours
7. No. of skilled mechanics (Journeyworkers) now employed in the trade 9
8. Potential number of apprentices 2
9. Wage rate of skilled mechanics: Per hour \$13.00 Per week \$520.00
10. Approximate starting rate to be paid apprentices:
Per hour \$6.50 Per week \$260.00 Premium rate 1 1/2
11. Hours of work: Per day 8 Per week 40
12. Rate to be paid upon Completion of Apprenticeship \$13.00
13. Do you have a bargaining agreement with your employees? N/A
If so, give name and number of employee organization _____
14. Have you Veterans now employed who desire Apprenticeship? N/A
15. Have you adequate equipment and type of work and personnel to train in all the required skills of the trade? Yes
16. Apprentices shall be required to attend classes of related instruction for approximately 150 hours each year of apprenticeship.
17. Related instruction will take place R.I. Construction Academy

APPROVED BY:

APPROVED AND ACCEPTED

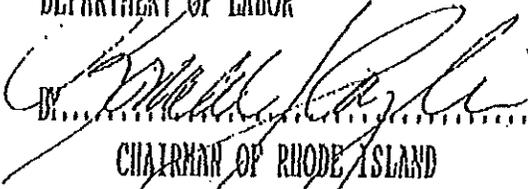
Robert F. Audet, Inc.

BY: 
ROBERT F. AUDET

TITLE: President

DATE: 1/11/83

APPROVED BY AND FILED WITH
RHODE ISLAND APPRENTICESHIP COUNCIL
DEPARTMENT OF LABOR

BY: 
CHAIRMAN OF RHODE ISLAND
STATE APPRENTICESHIP COUNCIL

DATE: 1/19/83

SECTION XVII. CHANGES IN STANDARDS

These Standards of Apprenticeship may at any time be amended by the employer provided such amendments are approved by the Rhode Island Apprenticeship Council Department of Labor. A copy of all such changes shall be furnished each apprentice.

SECTION XVIII. GENERAL PROVISIONS

Every apprenticeship agreement entered into under these Standards of Apprenticeship shall contain a clause making the Standards a part of the agreement with the same effect as if expressly written therein. For this reason, every applicant (and the parent or guardian, if the applicant is a minor) shall be given a copy of the Standards of Apprenticeship and an opportunity to read them before any signature is affixed thereto.

SECTION XII. SCHEDULE OF WORK PROCESSES

The apprentice shall receive instruction and work experience in all branches of the trade as listed in the Work Processes attached hereto. The work experiences need not be in the precise order as listed, nor do the scheduled hours on any operation need be continuous, to permit the flexibility necessary to the normal shop production schedule.

SECTION XIII. RELATED INSTRUCTION

The apprentice shall be required to attend classes in related trade subjects for approximately 144 hours per year, each year of the term of apprenticeship. The recommended subjects are on the attached list.

SECTION XIV. RECORDS

Records of the apprentice's work experience and related class instruction shall be kept by the employer. The apprentice shall submit weekly reports to the employer, showing work completed and classes attended, and those shall be noted upon Master Record Cards under control of the employer.

SECTION XV. REGISTRATION OF PROGRAM

These standards shall be submitted to the Rhode Island Apprenticeship Council Department of Labor for approval and will become effective upon the date of approval.

SECTION XVI. CERTIFICATE OF COMPLETION

Upon satisfactory completion of the term of apprenticeship, the employer shall recommend to the Approval Agency that a State Certificate of Completion be awarded.

SECTION V. SUPERVISION OF APPRENTICES

The Apprentice shall be under the general supervision of the journeyman with whom the apprentice will work, and the direct supervision of the Employer or Master Supervisor whose duty it shall be to see that the Apprentice receives the work experience outlined in these Standards.

SECTION VI. PERIODIC EXAMINATION

The apprentice shall be given an examination before each period of advancement by his supervisor to determine his progress.

SECTION VII. RATIO OF APPRENTICES

The number of Apprentices to be employed shall not exceed one apprentice for every five journeyman regularly employed, or fraction thereof, except that the number of apprentices may be changed as agreed to between the employer and the Approving Agency, as per the Regulations for Apprenticeship Programs.

SECTION VIII. APPRENTICE AGREEMENT

Each apprentice, and if a minor, the parent or guardian, shall sign an apprentice agreement on the form attached to and made part of these Standards. The agreement shall also be signed by the employer and approved by and filed with the Approving Agency. All parties to the agreement shall receive an approved copy of the agreement. Each applicant will be given a copy of these Standards and an opportunity to read them before signing the apprentice agreement.

SECTION I. TERM OF APPRENTICESHIP

The term of apprenticeship in the Designated Trade shall be as noted on Page 1 (Cover Sheet) of these Standards, each year of which shall consist of 2000 hours of work experience and approximately 144 hours of instruction in related subjects.

SECTION II. PROBATIONARY PERIOD

The first 1000 hours or six months of employment for the apprentice, shall be a probationary period. During this probationary period the agreement may be cancelled by either party to the agreement by notifying the other. The Approving Agency shall be notified of all such cancellations.

In the event either party desires to cancel the agreement after the probationary period, the approving Agency shall be notified with the reasons therefore and requested to cancel the agreement.

SECTION III. CREDIT FOR PREVIOUS EXPERIENCE

Applicants who have previous training in the trade may receive such credit as the employer decides after checking the records of such training. Apprentices granted credit shall receive the wage of the period to which the credit advances them.

SECTION IV. CONTINUOUS EMPLOYMENT

The employer intends and expects to give the apprentice continuous employment and will use its best efforts to keep the apprentice employed during the full term of apprenticeship.

If any apprentice is temporarily released due to business conditions, that apprentice shall be given the opportunity to be reinstated before any additional apprentice is employed in the same trade.

DEFINITIONS

"APPRENTICE" shall mean a person who has agreed, and signed an apprentice agreement, with the employer to acquire the trade as outlined in these Standards.

"EMPLOYER" shall mean Training Program Sponsor as identified on page 1 (Cover Sheet).

"APPROVING AGENCY" shall mean State of Rhode Island Apprenticeship Council, Department of Labor.

"SUPERVISOR OF APPRENTICES" shall mean the person designated to perform the duties as outlined in these Standards.

"APPRENTICESHIP AGREEMENT" shall mean a written agreement between the employer and the person employed as an apprentice, which agreement shall be signed by the employer and the apprentice, and if the apprentice is a minor, by the parent or guardian. Every agreement shall be approved by and filed with the Rhode Island Apprenticeship Council Department of Labor.

"PARTIES TO THE APPRENTICE AGREEMENT" shall mean the apprentice and the parent or guardian, if the apprentice is a minor, and a duly authorized representative of the company, each of whom shall sign the agreement.

"STANDARDS OF APPRENTICESHIP" shall mean this entire document, including these definitions.

FOREWORD

It has been recognized by this sponsor that to train skilled mechanics there must be a well developed plan of work experience supplemented with related instruction. This recognition has resulted in the development of this Apprenticeship Program in accordance with the Standards of Apprenticeship as recommended by the Rhode Island State Apprenticeship Council Department of Labor.

It is the desire of this sponsor to cooperate with the Rhode Island State Apprenticeship Council in the training of apprentices and to assure said apprentices that if they will diligently apply themselves to the learning of a trade, they will be afforded an opportunity to become a skilled craftworker.



STANDARDS OF APPRENTICESHIP

For the Trade(s)	Term(s)
<i>Electrician</i>	<i>8000 Hours</i>

FORMULATED
BY

Robert F. Aulet, Inc.
TRAINING PROGRAM SPONSOR

2883 South County Trail, East Greenwich, RI 02818
ADDRESS

WITH THE ASSISTANCE
of the
State of Rhode Island
Apprenticeship Council

Department of Labor
220 Elmwood Avenue
Providence, Rhode Island 02907

- 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).

John Miguel, President
Printed Name and Title of Authorized Representative

3 February 2016
Date


Signature of Authorized Representative



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.dlhrri.gov, under Workforce Regulation and Safety, Prevailing Wage, Publications and Forms.

Bid/RFP Number: 7550173A3

Bid/RFP Title: Electrical Upgrades - Rhode Island College - Phase II

RIVIP Vendor ID#: 496

Vendor Name: Robert F. Audet, Inc.

Address: 2883 South County Trail East Greenwich, RI 02818

Telephone: 401-884-3310

Fax: 401-884-3316

E-Mail: lkent@rfaudet.com

Contact Person and Title: Lynn Kent, Controller

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

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





STATE OF RHODE ISLAND
CONTRACTORS' REGISTRATION
AND LICENSING BOARD

REGISTRATION NO

EXP. DATE

32696

08/1/17

REGISTRAR SIGNATURE

ROBERT F. MURPHY, JR.

AUTHORIZED REPRESENTATIVE

JOHN HIGUEL

OWNER LICENSE #

RI 761320

PAULINE BRADY

Pauline Brady

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

ELECTRICAL CORP. AC004713

A-004713 B-010707

ROBERT F AUDET, INC.

ROSS E BERTHIAUME
2883 SOUTH COUNTY TRAIL
EAST GREENWICH RI 02818

JOHN SHAW
Administrator

09/30/2017
Expiration Date

**PHOTO I.D. REQUIRED
WITH THIS LICENSE**



Not valid without signature.

If found, please return to:

DLT, 1511 Pontiac Avenue, Cranston, RI 02920-0943

Ph: (401) 462-8580

www.dlt.ri.gov/profregs