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: 7550595
Solicitation Title: IMPROVEMENTS TO THE EMERGENCY POWER, PASTORE CENTER, REGAN BUILDING-DOA(20 PGS) 1 ZIP FILE

Bid Proposal Submission Deadline Date & Time: 6/14/2016 01:30 PM
RIVIP Vendor ID #: 9950
Bidder Name: Commercial Electric, Inc.
Address: 491 Waterman Avenue

East Providence, RI 02914
USA

Telephone: (401) 438-0707
Fax: 401 438-0709
Contact Name: Roy Dalley
Contact Title: Vice President
Contact Email: ROY@COMMERCIALELECTRICINC.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.

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.

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.

3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than $5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If “Yes,” provide details below.

4. 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):

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.

Frank Blanco, 491 Waterman Avenue, East Providence, RI 02914, President, 50%
LeRoy Daler, 491 Waterman Avenue, East Providence, RI 02914, Vice President, 50%

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
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.

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.

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.

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.

Date: June 13, 2018

Commercial Electric, Inc.

Name of Bidder

Signature in ink:

LeRoy Dailey, Vice President

Printed name and title of person signing on behalf of Bidder
Solicitation #: 7550595
Solicitation Title: Improvements to the Emergency Power, Pastore Center, Regan Building, DOA

BID FORM

To: The State of Rhode Island Department of Administration
Division of Purchases, 2nd Floor
One Capitol Hill, Providence, RI 02908-5855

Bidder: COMMERCIAL ELECTRIC, INC.
Legal name of entity
491 Waterman Avenue, East Providence, RI 02914
Address (street/city/state/zip)
LeRoy Dailey roy@commercialelectricinc.com
Contact name Contact email 401 438-0707 401 438-0709
Contact telephone Contact fax

1. BASE BID PRICE

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

$ 584,746.00

(base bid price in figures printed electronically, typed, or handwritten legibly in ink)
Five Hundred Eighty Four Thousand Seven Hundred Forty Six Dollars
(base bid price in words printed electronically, typed, or handwritten legibly in ink)

• Allowances

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

No. 1: __________________________ $____________________
No. 2: __________________________ $____________________

Total Allowances: $____________________
Solicitation #: 7550595
Solicitation Title: Improvements to the Emergency Power, Pastore Center, Regan Building, DOA

- **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: __May 27, 2016_________

  Addendum No. 2 dated: __June 2, 2016_________

  Addendum No. 3 dated: __June 7, 2016_________

  Addendum No. 4 dated: ________________________

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

   *Check "Add" or "Subtract."*

   _____ Add _____ Subtract  Alternate No. 1: ____________________________

   ________________

   $________________

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

   ____________________________

   (amount *in words* printed electronically, typed, or handwritten legibly in ink)
Solicitation #: 7550595  
Solicitation Title: Improvements to the Emergency Power, Pastore Center, Regan Building, DOA

____ Add ____ Subtract  Alternate No. 2: ____________________________

$__________________________
(amount in figures printed electronically, typed, or handwritten legibly in ink)

__________________________
(amount in words printed electronically, typed, or handwritten legibly in ink)

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.

Unit Price No. 1: __________________ $________________

Unit Price No. 2: __________________ $________________

Unit Price No. 3: __________________ $________________

4. **CONTRACT TIME**

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

- Start of construction: __________________  July 2016
- Substantial completion: __________________  December 2016
- Final completion: __________________  January 2016

5. **LIQUIDATED DAMAGES**

The successful bidder awarded a contract pursuant to this solicitation shall be liable for
Solicitation #: 7550595
Solicitation Title: Improvements to the Emergency Power, Pastore Center, Regan Building, DOA

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: $ 0.00.

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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: June 13, 2016

Commercial Electric, Inc.
Name of Bidder

Signature In Ink
LeRoy Dalley, Vice President

Printed name and title of person signing on behalf of Bidder # 9950

Bidder's Contractor Registration Number

General Contractor Lic. #: 19576
Electrical Contractor Lic. #: AC3043
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 0445946

NAME  
Commercial Electric, Inc.

ADDRESS  
491 Waterman Avenue

CITY, STATE AND ZIP CODE  
East Providence, RI 02914

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  
[Signature]

TITLE  
V.P.

DATE  
6-13-16

TEL NO  
438-0707

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 02905

Or Email To: doe.pursuppliercoordinator@purchasing.ri.gov

For State Use Only:
IRS  
RI SOS  
FED  
Other

RI Supplier #  
Approved

Date Entered  
Entered By

RIFANS Supplier Registration Package  
Page 6 of 13  
09/15/2015
KNOW ALL MEN BY THESE PRESENTS, that we COMMERCIAL ELECTRIC, INC. of 491 Waterman Avenue East Providence, Rhode Island as Principal, hereinafter called the Principal, and NGM INSURANCE COMPANY a corporation duly organized under the laws of the state of Florida as Surety, hereinafter called the Surety, are held and firmly bound unto the 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 Emergency Power Improvements to the Regan Building Project Number: 7550595

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 8th day of June, 2016

COMMERCIAL ELECTRIC, INC. (Principal) (Seal)

By: __________________________
(Title)

NGM INSURANCE COMPANY

(Surety) (Seal)

By: __________________________
Charles A. Byrne (Title) Attorney-in-Fact
KNOW ALL MEN BY THESE PRESENTS: That NGM Insurance Company, a Florida corporation having its principal office in the City of Jacksonville, State of Florida, pursuant to Article IV, Section 2 of the By-Laws of said Company, to wit:

"Article IV. Section 2. The board of directors, the president, any vice president, secretary, or the treasurer shall have the power and authority to appoint attorneys-in-fact and to authorize them to execute on behalf of the company and affix the seal of the company thereto, bonds, recognizances, contracts of indemnity or writings obligatory in the nature of a bond, recognizance or conditional undertaking and to remove any such attorneys-in-fact at any time and revoke the power and authority given to them."

does hereby make, constitute and appoint David J. Byrne III, Denise A. Chinatose, Charles A. Byrne its true and lawful Attorneys-in-fact, to make, execute, seal and deliver for and on its behalf, and as its act and deed, bonds, undertakings, recognizances, contracts of indemnity, or other writings obligatory in nature of a bond subject to the following limitation:

1. No one bond to exceed Seven Million Five Hundred Thousand Dollars ($7,500,000.00)

and to bind NGM Insurance Company thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of NGM Insurance Company, the acts of said Attorney are hereby ratified and confirmed.

This power of attorney is signed and sealed by facsimile under and by the authority of the following resolution adopted by the Directors of NGM Insurance Company at a meeting duly called and held on the 2nd day of December 1977.

Note: That the signature of any officer authorized by the By-Laws and the company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof, such signature and seal, when so used being hereby adopted by the company as the original signature of such office and the original seal of the company, to be valid and binding upon the company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, NGM Insurance Company has caused these presents to be signed by its Vice President, General Counsel and Secretary and its corporate seal to be hereeto affixed this 8th day of January, 2016.

NGM INSURANCE COMPANY BY:

Bruce R Fox
Vice President, General Counsel and Secretary

NGM INSURANCE COMPANY

State of Florida, County of Duval.

On this January 8, 2016, before the subscriber a Notary Public of State of Florida in and for the County of Duval duly commissioned and qualified, came Bruce R Fox of NGM Insurance Company, to me personally known to be the officer described herein who executed the preceding instrument, and he acknowledged the execution of same, and being by me fully sworn, deposed and said that he is an officer of said Company, aforesaid: that the seal affixed to the preceding instrument is the corporate seal of said Company, and the said corporate seal and her signature as officer were duly affixed and subscribed to said instrument by the authority and direction of the said Company, that Article IV, Section 2 of the By-Laws of said Company is now in force.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Jacksonville, Florida this 8th day of January, 2016.

I, Nancy Giordano-Ramos, Vice President of NGM Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by said Company which is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Company at Jacksonville, Florida this 8th day of June 2016 .

WARNING: Any unauthorized reproduction or alteration of this document is prohibited.

TO CONFIRM VALIDITY of the attached bond please call 1-800-225-5546.

TO SUBMIT A CLAIM: Send all correspondence to 55 West Street, Kelens, NH 03431. An Bond Claims.