

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: 7550603A2
Solicitation Title: COMPREHENSIVE MAINTENANCE AND SUPPORT EXISTING DIRECT DIGITAL CONTROLS AUTOMATION SYS-CCRI ADD #2

**Bid Proposal Submission
Deadline Date & Time:** 7/8/2016 10:00 AM

RIVIP Vendor ID #: 79182
Bidder Name: Huntington Controls, Inc.
Address: 60 Glacier Dr
Suite 2000
Westwood , MA 02090
USA

Telephone: 7815356857
Fax: 7815355251
Contact Name: Paul Milano
Contact Title: President
Contact Email: pmilano@huntingtoncontrols.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):

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:

- 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.
- 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.
- 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.
- 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.
- 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

Comprehensive Maintenance and Support Existing Direct Digital Controls Automation Systems - Community College of Rhode Island

Solicitation #7550603

Bid Opening Date & Time: June 17, 2016 @ 10:00 AM (ET)

Vendor Please Type Vendor Name in the yellow shaded box below

Bidders are instructed to provide unit and extended (total) pricing for services in accordance with solicitation 7550603 specifications. It is not mandatory to bid on all Community College Campus Locations, however it is mandatory to bid on all services for the campus location being bid.

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Line	Description	Estimated Qty	Unit	Unit Price	Total
1	FY17 Warwick Maintenance and Support Services	4	quarter	9570	38280
2	FY18 Warwick Maintenance and Support Services	4	quarter	9834	39336
3	FY19 Warwick Maintenance and Support Services	4	quarter	10098	40392
4	FY17 Warwick Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	145	7250
5	FY18 Warwick Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	149	7450
6	FY19 Warwick Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	153	7650
7	FY17 Warwick Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	188	188
8	FY18 Warwick Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	193	193
9	FY19 Warwick Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	199	199
10	FY17 Warwick Call in Service rate/Hr Sunday and Holiday	1	hour	188	188
11	FY18 Warwick Call in Service rate/Hr Sunday and Holiday	1	hour	193	193
12	FY19 Warwick Call in Service rate/Hr Sunday and Holiday	1	hour	199	199
13	FY17 Lincoln Maintenance and Support Services	4	quarter	5800	23200
14	FY18 Lincoln Maintenance and Support Services	4	quarter	5960	23840
15	FY19 Lincoln Maintenance and Support Services	4	quarter	6120	24480
16	FY17 Lincoln Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	145	7250
17	FY18 Lincoln Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	149	7450
18	FY19 Lincoln Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	50	hour	153	7650
19	FY17 Lincoln Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	188	188
20	FY18 Lincoln Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	193	193
21	FY19 Lincoln Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	199	199
22	FY17 Lincoln Call in Service rate/Hr Sunday and Holiday	1	hour	188	188
23	FY18 Lincoln Call in Service rate/Hr Sunday and Holiday	1	hour	193	193
24	FY19 Lincoln Call in Service rate/Hr Sunday and Holiday	1	hour	199	199
25	FY17 Providence Maintenance and Support Services	4	quarter	3480	13920
26	FY18 Providence Maintenance and Support Services	4	quarter	3576	14304
27	FY19 Providence Maintenance and Support Services	4	quarter	3696	14784
28	FY17 Providence Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	145	3480
29	FY18 Providence Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	149	3576
30	FY19 Providence Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	153	3672
31	FY17 Providence Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	188	188
32	FY18 Providence Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	193	193
33	FY19 Providence Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	199	199
34	FY17 Providence Call in Service rate/Hr Sunday and Holiday	1	hour	188	188
35	FY18 Providence Call in Service rate/Hr Sunday and Holiday	1	hour	193	193
36	FY19 Providence Call in Service rate/Hr Sunday and Holiday	1	hour	199	199
37	FY17 Newport Maintenance and Support Services	4	quarter	2320	9280
38	FY18 Newport Maintenance and Support Services	4	quarter	2384	9536
39	FY19 Newport Maintenance and Support Services	4	quarter	2464	9856
40	FY17 Newport Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	145	3480
41	FY18 Newport Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	149	3576

42	FY19 Newport Call in service rate/Hr Standard Time Mon-Fri 7:00am to 3:30pm	24	hour	153	3672		
43	FY17 Newport Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	188	188		
44	FY18 Newport Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	193	193		
45	FY19 Newport Call in service rate/Overtime Time Saturday and Mon-Fri 3:30pm to 7:00am	1	hour	199	199		
46	FY17 Newport Call in Service rate/Hr Sunday and Holiday	1	hour	188	188		
47	FY18 Newport Call in Service rate/Hr Sunday and Holiday	1	hour	193	193		
48	FY19 Newport Call in Service rate/Hr Sunday and Holiday	1	hour	199	199		
	The following line items (A,B,C,D) are for informational purposes only						
A	FY17-FY19 Warwick Call in Service - Provide percentage discount for parts off manufactures list price	%		50%			
B	FY17-FY19 Lincoln Call in Service - Provide percentage discount for parts off manufactures list price	%		50%			
C	FY17-FY19 Providence Call in Service - Provide percentage discount for parts off manufactures list price	%		50%			
D	FY17-FY19 Newport Call in Service - Provide percentage discount for parts off manufactures list price	%		50%			

Certificate of Completion

This is to certify that

Christopher Smith

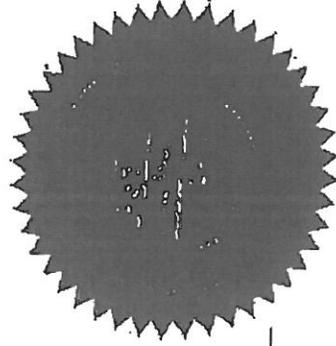
CANDIDATE

Huntington Controls Inc.

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.

TRIDIUM



Elizabeth W. Keenan

AUTHORIZED SIGNATURE

April 20, 2007

DATE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

Michael Follo

CANDIDATE

Huntington Controls

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.



TRIDIUM

December 07, 2007

DATE

AUTHORIZED SIGNATURE

AX Certification Program

NIAGARA^{AX}

Certificate of Completion

This is to certify that

Christian L. Keebe

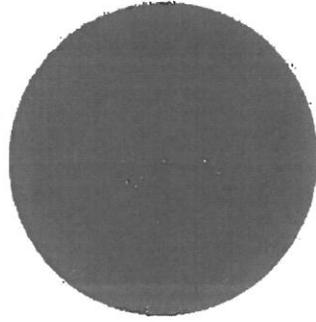
CANDIDATE

Huntington Controls Inc.

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.

TRIDIUM[®]



February 06, 2009

DATE

AUTHORIZED SIGNATURE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

John F. Murphy

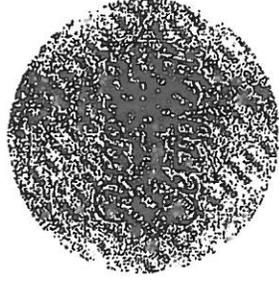
CANDIDATE

Huntington Controls

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.

TRIDIUM



June 12, 2009

DATE

AUTHORIZED SIGNATURE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

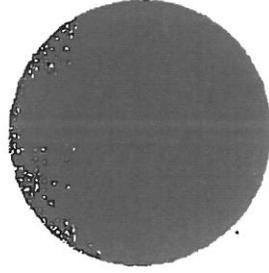
Joseph L. Rabel

CANDIDATE

Huntington Controls Inc.

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.



TRIDIUM

AUTHORIZED SIGNATURE

February 06, 2009

DATE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

Robert Tabares

CANDIDATE

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for

Niagara^{AX} Framework Certification.

TRIDIUM[®]

08/06/2010

DATE



Authentic if holographic seal is affixed above.

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

James A. Weeden

CANDIDATE

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for

Niagara^{AX} Framework Certification.

TRIDIUM[®]

10/28/2011

DATE

AX Certification Program

Niagara^{AX}



Authentic if holographic seal is affixed above.

Certificate of Completion

This is to certify that

Alex Milano

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for:

Niagara 4 Certification

on **February 1, 2016**



TRIDIUM

PHILADELPHIA INDEMNITY INSURANCE COMPANY

Bid Bond

Know all Men by These Presents:

That We, **Huntington Controls, Inc.**
60 Glacier Drive, Suite 2000
Westwood, MA 02090

as Principal, (hereinafter called the "Principal"), and the **Philadelphia Indemnity Insurance Company**, a corporation duly organized under the laws of the State of Pennsylvania, as Surety, (hereinafter called the "Surety") are held and firmly bound unto

State of Rhode Island
Division of Purchases
One Capital Hill, Providence, RI 02908

as Oblige, (hereinafter called the "Oblige"), in the sum of **Five Percent (5%)** of attached 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

Comprehensive Maintenance and Support Existing Direct Digital Controls Automation Systems- Community College of Rhode Island

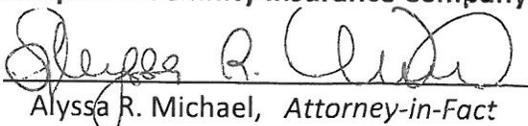
Now, Therefore, if the Oblige shall accept the bid of the Principal and Principal shall enter into a contract with the Oblige in accordance with the terms of such bid and give such bond or bonds as may be specified in the bidding or contract documents with good and sufficient surety for the faithful 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 into such contract and give such bond or bonds, if the Principal shall pay to the Oblige the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Oblige may in good faith contract 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 **July** AD **2016**.

Huntington Controls, Inc

By:  (Seal)
Title **PRESIDENT**

Philadelphia Indemnity Insurance Company

By:  (Seal)
Alyssa R. Michael, Attorney-in-Fact

PHILADELPHIA INDEMNITY INSURANCE COMPANY
231 St. Asaph's Rd., Suite 100
Bala Cynwyd, PA 19004-0950

Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: That PHILADELPHIA INDEMNITY INSURANCE COMPANY (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint William L. Labbe; Alyssa R. Michael; Anne M. Higginbottom; Barry J. Horgan of the City of Fall River, State of Massachusetts its true and lawful Attorney-in-fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed \$25,000,000.00.

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

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

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

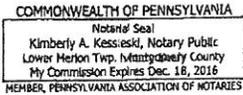
IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEAL TO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 10TH DAY OF JUNE 2013.



Robert D. O'Leary Jr.

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

On this 10th day of June 2013, before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the PHILADELPHIA INDEMNITY INSURANCE COMPANY; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.



Notary Public:

Kimberly A. Kessiesid

residing at:

Bala Cynwyd, PA

(Notary Seal)

My commission expires:

December 18, 2016

I, Edward Sayago, Corporate Secretary of PHILADELPHIA INDEMNITY INSURANCE COMPANY, do hereby certify that the foregoing resolution of the Board of Directors and this Power of Attorney issued pursuant thereto on this 10TH day of June 2013 true and correct and are still in full force and effect. I do further certify that Robert D. O'Leary Jr., who executed the Power of Attorney as President, was on the date of execution of the attached Power of Attorney the duly elected President of PHILADELPHIA INDEMNITY INSURANCE COMPANY,

In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this 8th day of July 2016



Edward Sayago

Edward Sayago, Corporate Secretary
PHILADELPHIA INDEMNITY INSURANCE COMPANY



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)

[] [] []

04 3158580

NAME Huntington Controls Inc

ADDRESS 60 Glacier Drive Suite 2000

CITY, STATE AND ZIP CODE Westwood MA 02090

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 controller DATE 7/6/16 TEL NO 781-535-6857
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.)

Mall 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 ___

Certificate of Completion

This is to certify that

Christopher Smith

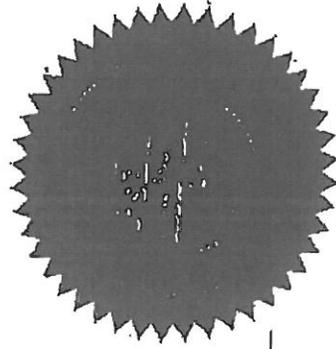
CANDIDATE

Huntington Controls Inc.

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.

TRIDIUM



Elizabeth W. Keenan

AUTHORIZED SIGNATURE

April 20, 2007

DATE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

Michael Follo

CANDIDATE

Huntington Controls

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.



TRIDIUM

December 07, 2007

DATE

AUTHORIZED SIGNATURE

AX Certification Program

NIAGARA^{AX}

Certificate of Completion

This is to certify that

Christian L. Keebe

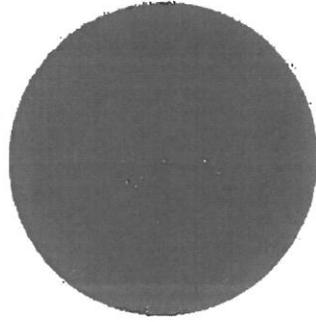
CANDIDATE

Huntington Controls Inc.

COMPANY NAME

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TRIDIUM[®]



February 06, 2009

DATE

AUTHORIZED SIGNATURE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

John F. Murphy

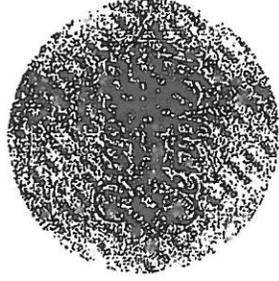
CANDIDATE

Huntington Controls

COMPANY NAME

is awarded this Certificate of Completion signifying that the aforementioned has successfully completed all of the requirements of the Niagara AX Certification Program and is entitled to all the rights and privileges associated with this achievement and full recognition of same.

TRIDIUM



June 12, 2009

DATE

AUTHORIZED SIGNATURE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

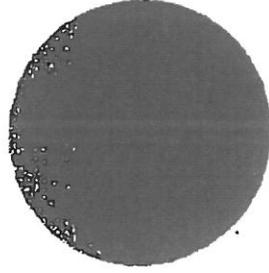
Joseph L. Rabel

CANDIDATE

Huntington Controls Inc.

COMPANY NAME

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TRIDIUM

AUTHORIZED SIGNATURE

February 06, 2009

DATE

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

Robert Tabares

CANDIDATE

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for

Niagara^{AX} Framework Certification.

TRIDIUM[®]

08/06/2010

DATE



Authentic if holographic seal is affixed above.

AX Certification Program

Niagara^{AX}

Certificate of Completion

This is to certify that

James A. Weeden

CANDIDATE

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for

Niagara^{AX} Framework Certification.

TRIDIUM[®]

10/28/2011

DATE

AX Certification Program

Niagara^{AX}



Authentic if holographic seal is affixed above.

Certificate of Completion

This is to certify that

Alex Milano

is awarded this Certificate of Completion signifying that the aforementioned has successfully achieved a baseline level of proficiency, having completed all of the training and testing requirements for:

Niagara 4 Certification

on **February 1, 2016**



TRIDIUM



The Association of Energy Engineers certifies that

Richard A. Bloom

has completed the prescribed standards for certification, has demonstrated a high level of competence and ethical fitness for energy management, and is hereby granted the title of

CERTIFIED ENERGY MANAGER®

Valid
January 1, 2014 to December 31, 2016

CEM
16262



[Signature]
C&E Board Chairman

[Signature]
Helen Johnson
C&E Director

