BID BOND

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA

Hartford, Connecticut 06183

CONTRACTOR:

(Name, legal status and address)
C3 Mechanical 210 Hahn Drive - Frankfort, KY
40601

SURETY:

(Name, legal status and principal place of business)
Travelers Casualty & Surety Company of America

OWNER:

- 4

(Name, legal status and address)

Lexington Fayette Urban Co. Government 200 E. MainStreet - 3rd Floor - Lexington, KY 40507

BOND AMOUNT: \$Five Percent of Bid Sum

PROJECT:

(Name, location or address, and Project number, if any)

HVAC Upgrades - Fan Coil Replacement - Bell House @ 545 Sayre Avenue - Lexington, KY 40508

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner 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. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

1

Signed and sealed this 6TH day of March, 2019

(Witness)

Deboi Hisle
(Witness)

C3 Mechanical

(Principal)

Jim Coomes

(Title)

Travelers Casualty & Surety Company of America

(Seal)

(Seal)

2

(Surety)

Judy L. Thomas - Attorney In Fact

(Title)



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company Travelers Casualty and Surety Company Travelers Casualty and Surety Company of America United States Fidelity and Guaranty Company

Attorney-In Fact No.

228625

Certificate No. 007403048

KNOW ALL MEN BY THESE PRESENTS: That Farmington Casualty Company, St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company are corporations duly organized under the laws of the State of Connecticut, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint

Judy L. Thomas, Deborah Hisle, Patricia A. Bruner, Susan H. Johnston, L. N. Strong, and Mark Howard

of the City ofLexington each in their separate capacity if n other writings obligatory in the n	nore than one is named above, ature thereof on behalf of the	to sign, execute, seal a Companies in their bu	siness of guaranteeing	and all bonds, recog	gnizances, conditio	Attorney(s)-in-Fact, nal undertakings and g the performance of
contracts and executing or guaran	teeing bonds and undertakings	required or permitted i	n any actions or proce	edings allowed by	law.	
IN WITNESS WHEREOF, the Oday ofOctober	Companies have caused this in,2017	strument to be signed a	nd their corporate sea	Is to be hereto affix	xed, this	6th
	Farmington Casualty Comp Fidelity and Guaranty Insu Fidelity and Guaranty Insu St. Paul Fire and Marine In St. Paul Guardian Insurance	rance Company rance Underwriters, l Isurance Company	nc. Trav	elers Casualty and	rance Company d Surety Compan d Surety Compan and Guaranty Co	y of America
1982 S	RICORPORATED 1951	SEAL S	SEAL O	HARTFORD, AND SERVICE OF THE PROPERTY OF THE P	HARTFORD S CONN	HICOPORNIED TANK
State of Connecticut City of Hartford ss.			Ву:	Robert L. Raney,	Senior Vice Presiden	ıt
On this the 6th do be the Senior Vice President of Far Fire and Marine Insurance Compar Casualty and Surety Company of A instrument for the purposes therein	ny, St. Paul Guardian Insuranc America, and United States Fic	Fidelity and Guaranty In e Company, St. Paul M delity and Guaranty Co	ercury Insurance Commpany, and that he, as	delity and Guaranty pany, Travelers Ca s such, being autho	y Insurance Underv	vriters, Inc., St. Paul
In Witness Whereof, I hereunto so My Commission expires the 30th of		SUDTARY E		Man	A. C. J. ie C. Tetreault, Notary	theoult y Public

58440-5-16 Printed in U.S.A.



TODD SLATIN DIRECTOR CENTRAL PURCHASING

ADDENDUM #1

Bid Number: #21-2019 Date: March 5, 2019

Subject: Replacement of Hydronic Fan Coil Units at Bell House Address inquiries to:

Sondra Stone 859.258.3320

TO ALL PROSPECTIVE SUBMITTERS:

Please be advised of the following clarifications to the above referenced Bid:

- 1. No chemicals are being used in current units.
- 2. The Contractor does not have to pay for inspections.
- 3. There are no known environmental issues.
- 4. Work should be completed April 1-15, 2019.
- The technical specifications contain references to drawings. The only drawing is the attached diagram with model numbers of existing units. Units in the basement do not need cooling capability.



6. Pre-bid sign-in sheet is attached.

Todd Slatin, Director Division of Central Purchasing

John Slatin

All other terms and conditions of the Bid and specifications are unchanged.

This letter should be signed, attached to and become a part of your Bid.

COMPANY NAME: C3 Mechanical

ADDRESS: 210 B. Hahn Dr. Frankfort, KY 40601

SIGNATURE OF BIDDER: Z



PART III

Invitation to Bid No. 21-2019

Replacement of Hydronic Fan Coil Units at Bell House

1. FORM OF PROPOSAL

		Place:	Lexingto	on, Kentucky		_	
		Date:	3/12	/19		_	
The following	g Form of Proposal shall be fol	lowed exa	ctly in submittin	ıg a proposal fo	or this	Work.	
This Proposal	Submitted by <u>C3 W</u>	Techai	nical		ě		
			ss of Bidding Co				
(Hereinaster Kentucky	called "Bidder"), organized, doing business as a corporation," "a p	partne	ership			State	of
То:	Lexington-Fayette Urban Co (Hereinafter called "OWNER Office of the Director of Pure 200 East Main Street, 3rd Flo Lexington, KY 40507	R") chasing	ernment				

Gentlemen:

The Bidder, in compliance with your Invitation for Bids for Replacement of Hydronic Fan Coil Units at Bell House having examined the Plans and Specifications with related documents, having examined the site for proposed Work, and being familiar with all of the conditions surrounding the construction of the proposed Project, including the availability of materials and labor, hereby proposes to furnish all labor, materials, and supplies, and to construct the Project in accordance with the Contract Documents, within the time set forth therein, and at the lump sum and/or unit prices stated hereinafter. These prices are to cover all expenses incurred in performing the Work required under the Contract Documents, of which this proposal is a part. The OWNER will issue work orders for work to be performed under this Contract.

The Ridde	r hereby	acknowledg	es receint	of the f	allowing	addenda:
THE DIGUE	1 HOLOUY	ackiic wicuz	co receipt	or ure r	OHO WILLS	addellaa.

Addendum No.	Date 3/5/19
Addendum No	Date
Addendum No.	Date

Insert above the number and the date of any Addendum issued and received. If none has been issued and received, the word "NONE" should be inserted.

2. **LEGAL STATUS OF BIDDER**

Bidder	C3 Mechanical
Date_	3/12/19
* 1.	A corporation duly organized and doing business under the laws of the State of the official title of, for whom, whose signature is affixed to this Bid/Proposal, is duly authorized to execute contracts.
* 2.	A Partnership, all of the members of which, with addresses are: (Designate general partners as such)
	Jim Coomes, Chad Hill, Chris Blevins
	210 B. Hann Dr. Frankfort, KI 40601
* 3.	An individual, whose signature is affixed to this Bid/Proposal (please print name)
	*(The Ridder shall fill out the appropriate form and strike out the other two.)

3. <u>BIDDERS AFFIDAVIT</u>

	s the Affiant, Jim 600m65, and after being first duly sworn, states penalty of perjury as follows:
1.	His/her name is and he/she is the individual submitting the bid or is the authorized representative of and he/she is the individual submitting the bid or is the authorized representative of , the entity submitting the bid (hereinafter
	referred to as "Bidder").
2.	Bidder will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the bid is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3.	Bidder will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.
4.	Bidder has authorized the Division of Central Purchasing to verify the above-mentioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.
5.	Bidder has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Bidder will not violate any provision of the campaign finance laws of the Commonwealth.
6.	Bidder has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as the "Ethics Act."
7.	Bidder acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists. Further, Affiant sayeth naught.
	In language
	(Affiant)
STATE OF	Kentucky
COUNTY OF	Franklin
The foregoing	instrument was subscribed, sworn to and acknowledged before me by
Jin	1 Coomes on this the 12 day of March , 20 19.
My Commission	on expires: 8/22/20
	Marena & Comes NOTARY PUBLIC, STATE AT LARGE

4. BID SCHEDULE - SCHEDULE OF VALUES

The Bidder agrees to perform all the Work described in the Specifications and shown on the Plans for the following proposed lump sum and/or unit prices, if applicable, which shall include the furnishing of all labor, materials, supplies, equipment and/or vehicle usage, services, all items of cost, overhead, taxes (federal, state, local), and profit for the Contractor and any Subcontractor involved, within the time set forth herein. If unit prices are applicable, Bidder must make the extensions and additions showing the total amount of bid.

Form of proposal must include unit bid prices written in words, unit price written in numbers and total amount bid (unit price x quantity) per line item OR bid may be considered non-responsive. In case of price discrepancy, unit bid price written in words will prevail followed by unit price written in numbers then total amount bid per line item.

If a discrepancy between the unit price and the item total exists, the unit price prevails except:

If the unit price is illegible, omitted, or the same as the item total, item total prevails and the unit price is the quotient of the item total and the quantity.

If the unit price and the item total are illegible or are omitted, the bid may be determined nonresponsive. If a lump sum total price is illegible or is omitted, the bid may be determined nonresponsive.

For a lump sum based bid, the item total is the bid amount the Division uses for bid comparison.

For a unit price based bid, the sum of the item totals is the bid amount the Division uses for bid comparison.

The LFUCG's decision on the bid amount is final.

Item No.	Description w/Unit Bid Price Written in Words	Unit	Total Bid Amount
1.	Replacement of hydronic units as per specs for Seventy One Thousand Four Hundred Fire Dollars Zero Cents	LS	<u>\$_71,450.00</u>
2.	Alternate 1. Three-year preventive maintenance agreement as per specs for Five Thousand Seven Hundred Sixty Dollars 2 Cents	LS	\$ 5,760.00

Submitted by:	C3 Mechanical
	210 B. Hahn Dr.
	Frankfort, Kt 40601 City, State & Zip
Bid must be signed: (original signature)	Signature of Authorized Company Representative – Title
	Jim Coomes Representative/s Name (Typed or Printed)
	502-352 - 2303 Area Code - Phone - Extension Fax #
	Emil Address
OFFICIAL ADDRESS:	
210 B. Hahn Dr.	

By signing this form you agree to ALL terms, conditions, and associated forms in this bid package

_____(Seal if Bid is by Corporation)

Frankfort, KY 40601

5. STATEMENT OF BIDDER'S QUALIFICATIONS

7.

8.

The following statement of the Bidder's qualifications is required to be filled in, executed, and submitted with the Proposal: C3 Mechanical Name of Bidder: 1. Permanent Place of Business: 210 B. Hahn Dr. Frankfort, KY 40601 2. 3. When Organized: Rentucky Where Incorporated: 4. 5. Construction Plant and Equipment Available for this Project: (Attach Separate Sheet If Necessary) 6. Financial Condition: If specifically requested by the OWNER, the apparent low Bidder is required to submit its latest three (3) years audited financial statements to the OWNER'S Division of Central Purchasing within seven (7) calendar days following the bid opening.

(Surety)

In the event the Contract is awarded to the undersigned, surety bonds will be furnished by:

US Department of Housing and Urban Development Office of Housing/Federal Housing Commissioner

US Department of Agriculture Farmers Home Administration

Part I to be completed by Principals of Multifamily Projects (See instructions)	Multifamily Projects (See instructions)	For HUD HQ/FmHA use only	λ	
Reason for submission:				
1. Agency name and City where the application is filed	pe	2. Project Name, Project Number, City and Zip Code	and Zip Code	
3. Loan or Contract amount \$	4. Number of Units or Beds	5. Section of Act	6. Type of Project (check one) Existing Theoposed (New)	Proposed (New)
7. List all proposed Principals and attach organization chart for all organizations	reanization chart for all organizations			

Name and address of Principals and Affiliates (Name: Last, First, Middle Initial) proposing to participate	8 Role of Each Principal in Project 9. SSN or IRS Employer Number	9. SSN or IRS Employer Number	9
Coomes, James P. 210 B. Hahn Dr. Frankfort, KY 40601	General Manager/Member	81-1175876	
Hill, Larry C.	Member	81-1175876	
Blevins. Christopher L.	Member	81-1175876	

Certifications: The principal(s) listed above hereby apply to HUD or USDA FmHA, as the case maybe, for approval to participate as principal(s) in the role(s) and project listed above. The principal(s) each certify that all the statements. Conviction may result in criminal and/or civil penalties. The principal(s) further certify that to the best of their knowledge and belief.

1. Schedule A contains a listing, for the last ten years, of every project assisted or insured by HUD, USDA FmHA and/or State and local government housing finance agencies in which the principal(s) have participated or are statements made on this form are true, complete and correct to the best of their knowledge and belief and are made in good faith, including any Exhibits attached to this form. Warning: HUD will prosecute false claims and

No mortgage on a project listed has ever been in default, assigned to the Government or foreclosed, nor has it received mortgage relief from the mortgagee; For the period beginning 10 years prior to the date of this certification, and except as shown on the certification:

b. The principals have no defaults or noncompliance under any Conventional Contract or Turnkey Contract of Sale in connection with a public housing project,

There are no known unresolved findings as a result of HUD audits, management reviews or other Governmental investigations concerning the principals or their projects, d. There has not been a suspension or termination of payments under any HUD assistance contract due to the principal's fault or negligence;

e. The principals have not been convicted of a felony and are not presently the subject of a complaint or indictment charging a felony. (A felony is defined as any offense punishable by imprisonment for a term exceeding one year, but does not include any offense classified as a misdemeanor under the laws of a State and punishable by imprisonment of two years or less);

f. The principals have not been suspended, debarred or otherwise restricted by any Department or Agency of the Federal Government or of a State Government from doing business with such Department or Agency, g. The principals have not defaulted on an obligation covered by a surety or performance bond and have not been the subject of a claim under an employee fidelity bond;
3. All the names of the principals who propose to narricinate in this principal are listed above.

All the names of the principals who propose to participate in this project are listed above.

None of the principals is a HUD/FmHA employee or a member of a HUD/FmHA employee's immediate household as defined in Standards of Ethical Conduct for Employees of the Executive Branch in 5 C.F.R. Part 2635 (57 FR 35006) and HUD's Standard of Conduct in 24 C.F.R. Part 0 and USDA's Standard of Conduct in 7 C.F.R. Part 0 Subpart B.

None of the principals is a participant in an assisted or insured project as of this date on which construction has stopped for a period in excess of 20 days or which has been substantially completed for more than 90 days and 6. None of the principals have been found by HUD or FmHA to be in noncompliance with any applicable fair housing and civil rights requirements in 24 CFR 5.105(a). (If any principals or affiliates have been found to be in documents for closing, including final cost certification, have not been filed with HUD or FmHA.

noncompliance with any requirements, attach a signed statement explaining the relevant facts, circumstances, and resolution, if any)

7. None of the principals is a Member of Congress or a Resident Commissioner nor otherwise prohibited or limited by law from contracting with the Government of the United States of America.

8. Statements above (if any) to which the principal(s) cannot certify have been deleted by striking through the words with a pen, and the relevant principal(s) have initialed each deletion (if any) and have attached a true and accurate signed statement (if applicable) to explain the facts and circumstances.

Name of Principal	Signature of Principal	Certification Date(mm/dd/yyyy Area Code and Tel, No.	Area Code and Tel. No.
Jim Coomes	Cim (somes		(502)352_2303
			1007
	5		
This form prepared by (print name) Charessa Coomes	Area	Area Code and Tel. No. (502) 352-2303	2303

ref Handbook 4065.1 Form HUD-2530 (2/2013)

Schedule A: List of Previous Projects and Section 8 Contracts. Below is a complete list of the principals' previous participation projects and participation history in multifamily Housing programs of HUD/FmHA, State and local Housing Finance Agencies. Note: Read and follow the instruction sheet carefully. Make full disclosure. Add extra sheets if you

need more space. Double check for accuracy. If no previous projects, write by your name, "No previous participation, First Experience"	cy. If no previous projects, w	rite by your	name, "No previous participa	tion, First Experie	nce".		
1. Principals Name (Last, First)	2. List of previous projects (Project name,	t name,	3.List Principals' Role(s)	4. Status of loan	5. Was the Project ever	6. Last MOR rating and	
	project ID and, Govt. agency involved)	lved)	(indicate dates participated, and if	(current, defaulted,	in default during your	Physical Insp. Score and	
			fee or identity of interest	assigned, foreclosed)	participation	date	
			participant)		Yes No If yes, explain		
	ALCO Scottsville	(\$282,548.60)	02/2016 HVAC Subcontractor				
Coomes, James	(KY Housing Corp.)		(Complete)		*		
	Russellville Housing Ath.	(\$150,250)	06/2016 HVAC Subcontractor				
			(Complete)		*		
	e Housing Ath.	(\$165,500)	06/2016 HVAC Subcontractor				
			(Complete)		*		
	eld Housing Ath.	(\$26.335)	09/2016 HVAC Subcontractor				
			(Complete)		*		
	Maysville Housing Ath.	(\$62.525)	03/2017 HVAC Subcontractor				
	(HID)		(Complete)		*		
	Columbia Housing 4th	(6348 448 80)	01/2017 HVAC Prime Contractor				
	Columbia Housing Ami.	(9346,446.60)	(Complete)		-14		
	(400)		03/2017 HVAC Subcontractor				
	ALCO Columbia	(\$420,288)	(Camplata)		4		
	(KY Housing Corp.)		(Complete)		k		
	Irvine Housing Ath.	(\$206 635)	04/2017 HVAC Subcontractor				
		(211/112)	(Complete)		*		
	(MOH)		08/2017 HVAC Subcontractor				
	Cynthiana Housing Ath.	(\$24,850)	(Complete)		*		
	(HUD)		03/2016 HVAC Subcontractor				
	KDVA Briar Hill	(\$100,211)	(Complete)		4		
	(The Housing Partnership Inc.)		03/2016 HVAC Subcontractor		:		
	KDVA Mackenzie	(\$47,910)	(Complete)		4		
	(The Housing Partnership Inc.)		03/2016 HV AC Subcontractor		3		
	KDVA Cambridge	(\$30,474)	(Complete)		*		
	(The Housing Partnership Inc.)		01/2017 HVAC Prime Contractor				
	LFUCG- Lexington Fayette Urban Co. Gov't	(\$356,748.33)	(Complete)		4		
	Frankfort Adult Daycare	(\$60,795)	07/2017 HVAC Subcontractor		:		
	(Privately Funded)		(Complete)		*		
	AT&T Henderson	(\$44,750)	04/2016 HVAC Subconfractor				
	(Privately Funded)		(Complete)		*		
	AT&T Somerset	(\$40,500)	07/2016 HVAC Subcontractor				
	(Privately Funded)		(Complete)		*		

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Date (mm/dd/yyyy)	Tel No. and area code	A No adverse information: form HHD-2530 and adverse	9) Disclosure or Certification problem	
Staff	Processing and Control	recommended.		
		B. Name match in system	D. Other (attach memorandum)	
Supervisor	Director of Housing/Director, Multifamily Division	r, Multifamily Division	Approved Date (mm/dd/yyyy)	Τ
			☐ Yes ☐ No	

Previous editions are obsolete

ref Handbook 4065,1 Form HUD-2530 (2/2013)

Schedule A: List of Previous Projects and Section 8 Contracts. Below is a complete list of the principals' previous participation projects and participation history in multifamily Housing programs of HUD/FmHA, State and local Housing Finance Agencies. Note: Read and follow the instruction sheet carefully. Make full disclosure. Add extra sheets if you

=					_			_	_	_	_	_	_		_			_		_									_
Aud extra sneets II yo	6. Last MOR rating and Physical Incn. Score and	date																											
rane iuii disciosure. (ce".	5. Was the Project ever in default during your	participation	Yes No If yes, explain		*		*		*		*		*	4	+	*		*		*		*	*		*		*		*
tion succe calciumy. In	4. Status of loan	G.																											
incad and follow the instruc-	3.List Principals' Role(s) (indicate dates narticinated and if	fee or identity of interest	participant)	12/2017 HVAC Prime Contractor	(Complete)	01/2018 HVAC Prime Contractor	(Ongoing)	01/2018 HVAC Subcontractor	(Complete)	01/2018 HVAC Subcontractor	(Complete)	03/2018 HVAC Subcontractor	(Ongoing)	11/201/ HVAC Frime Contractor	(Complete) 05/2018 HVAC Prime Contractor	(Ongoing)	07/2018 HVAC Prime Contractor	(Complete)	10/2018 HVAC Prime Contractor	(Complete)	10/2018 HVAC Prime Contractor	(Ungoing)	10/2018 HVAC Frime Contractor	Complete) 10/2018 HVAC Prime Contractor	(Under Contract)	10/2018 HVAC Prime Contractor	(Ongoing)		
write by your r	ect name,			(\$117,654)		(\$218,238)		(\$829,100)	<u> </u>	(\$714,642) C		(\$262,400)		(\$102,500)		(\$347,390)		(\$144,586)		(\$132,500)			(\$246,785)		(\$340,000)		(\$222,888)	(\$306,603)	
y. If no previous projects, '	2. List of previous projects (Project name, project ID and Govt, agency involved.)			Springfield Housing Ath.	(HUD)	Harrodsburg Housing Ath.	(HUD)	ALCO Tompkinsville	(KY Housing Corp.)	ALCO Edmonton	(KY Houisng Corp.)	High Grove at Tates Creek	(Privately Funded)	Cynthiana Housing Ath.	(HUD)	Shelbyville Housing Ath,	(HUD)	Corbin State Office Building	(Commonwealth of Kentucky)	Harlan Housing Authority	(duh)	Fulton Housing Authority	(duh)	Oakwood Services Somerset	(Commonwealth of Kentucky)	West Hickman WWTP Solids Processing	(LFUCG)	Harrodsburg Housing Ath.	(HUD)
need more space. Double check for accuracy. If no previous projects, write by your name, "No previous participation, First Experience".	1. Principals Name (Last, First)			,	Coomes, James	,	C3 Mechanical																						

Part II- For HUD Internal Processing Only Received and checked by me for accuracy and completeness; recommend approval or refer to Headquarters after checking appropriate box.

Date (mm/dd/yyyy)	Tel No. and area code			,
		A. No adverse information; form HUD-2530 approval	val C. Disclosure or Certification problem	_
Staff	Processing and Control	recommended.		_
				_
		B. Name match in system	D. Other (attach memorandum)	_
				_
Supervisor	Director of Ho	virector of Housing/Director, Multifamily Division	Approved Date (mm/dd/yyyy)	-
			☐ Yes ☐ No	

ref Handbook 4065.1 Form HUD-2530 (2/2013)

Schedule A: List of Previous Projects and Section 8 Contracts. Below is a complete list of the principals' previous participation projects and participation history in multifamily Housing programs of HUD/FmHA, State and local Housing Finance Agencies. Note: Read and follow the instruction sheet carefully. Make full disclosure. Add extra sheets if you

Auu exira siieeis ii you	6. Last MOR rating and Physical Insp. Score and date	
viane juii disclosure. nee".	5. Was the Project ever in default during your participation	
ation. First Experie	4. Status of loan (current, defaulted, assigned, foreclosed)	
name, "No previous participa	3.List Principals' Role(s) (indicate dates participated, and if fee or identity of interest participant)	(\$189,189) 01/2019 HVAC Prime Contractor (Under Contract) 01/2019 HVAC Subcontractor (Ongoing) 01/2019 HVAC Subcontractor (Dinder Contract) 03/2019 HVAC Prime Contractor (Under Contract)
V. If no previous projects, write by your name, "No previous participation, First Experience".	2. List of previous projects (Project name, project ID and, Govt. agency involved)	Morgantown Housing Ath. (\$189,189) (HUD) ALCO Horse Cave (\$559,450) (KY Housing Corp) KCDAV Hazard (\$118,000) (The Housing Partnership Inc.) Danville Employment Building (\$101,850) (Commonwealth of Kentucky)
need more space. Double check for accuracy. If no previous projects, write by your name, "No previous participation, First Experience"	1. Principals Name (Last, First)	Coomes, James C3 Mechanical

Part II- For HUD Internal Processing Only Received and checked by me for accuracy and completeness; recommend approval or refer to Headquarters after checking appropriate box.

oblem		yyy)	
C. Disclosure or Certification problem	D. Other (attach memorandum)	Date (mm/dd/yyyy)	
	D. Othe	Approved	☐ Yes ☐ No
A. No adverse information; form HUD-2530 approval recommended.	B. Name match in system	or, Multifamily Division	
Tel No. and area code Processing and Control		Director of Housing/Director, Multifamily Division	
Date (mm/dd/yyyy) Staff		Supervisor	

Previous editions are obsolete

ref Handbook 4065.1 Form HUD-2530 (2/2013)

NAME	LOCATION	CONTRACT SUM
See attached		
The Bidder has now under co	ontract and bonded the following	projects:
<u>NAME</u>	LOCATION	CONTRACT SUM
Futon Housing Authority	Fulton, Ky	247,660
Shellyville Housing Autropi	ty Shelbyville, KY	300,000
Hamodsburg Housing 19th	Harrolsburg, KY	306,603
West Hickman wmp	Micholasville, KY	232,888
Mongantown Housing 1977	Morgantoun, KY	189,900
List Key Bidder Personnel w	ho will work on this Project.	
	DO SAME ON DAYS OF THE TOP	NO. OF YEARS
NAME NAME	POSITION DESCRIPTION	WITH BIDDER
MILLIANCE)	Deneral Manager	
Noppy Byrge	Project Hoministrate	
Charlsta Comes	Office Manager	
Dan Shelton	Head Boiler Installe	W 3
Derek Shelton	Laborer	_ 3
Beb Bruin	Laborer	2

9.

10.

DBE Participation on current bonded projects under contract:

SUBCONTRACTORS
PROJECT
DBE
% of WORK
(LIST)
(SPECIFIC TYPE)

(USE ADDITIONAL SHEETS IF NECESSARY)

12. We acknowledge that, if we are the apparent low Bidder, we may be required to submit to the OWNER within 7 calendar days following the Bid Opening, a sworn statement regarding all current work on hand and under contract, and a statement on the OWNER'S form of the experience of our officers, office management and field management personnel. Additionally, if requested by the OWNER, we will within 7 days following the request submit audited financial statements and loss history for insurance claims for the 3 most recent years for a lesser period stipulated by the OWNER).

fin former

6. <u>LIST OF PROPOSED SUBCONTRACTORS</u>

The following list of proposed subcontractors is required by the OWNER to be executed, completed and submitted with the BIDDER'S FORM OF PROPOSAL. All subcontractors are subject to approval of the Lexington-Fayette Urban County Government. Failure to submit this list completely filled out may be cause for rejection of bid.

BRANCH OF WORK - LIST EACH MAJOR ITEM Such as: Grading, bituminous paving, concrete, seeding and protection, construction staking, etc.	SUBCONTRACTOR DBE % of Work Yes/No
1. N/A	Name:
	Address:
2	Name:
	Address:
3	Name:
	Address:
4	Name:
	Address:
LIST OF PROPOSED MATERIALS/MA	NUFACTURER
	MANUFACTURER'S REPRESENTATIVE FIRM
1. International Environmental	Name: _ HIr Equipment Company
Corp.	Name: _Air Equipment Company Address: _997 Floyd Dr. St. 140 Lexington, KY 40505

(Attach additional sheet(s) if necessary.)

7. Lexington-Fayette Urban County Government MWDBE PARTICIPATION GOALS

A. GENERAL

- 1) The LFUCG request all potential contractors to make a concerted effort to include Minority-Owned (MBE), Woman-Owned (WBE), Disadvantaged (DBE) Business Enterprises and Veteran-Owned Small Businesses (VOSB) as subcontractors or suppliers in their bids.
- 2) Toward that end, the LFUCG has established 10% of total procurement costs as a Goal for participation of Minority-Owned, Woman-Owned and Disadvantaged Businesses on this contract.
- 3) It is therefore a request of each Bidder to include in its bid, the same goal (10%) for MWDBE participation and other requirements as outlined in this section.
- 4) The LFUCG has also established a 3% of total procurement costs as a Goal for participation for of Veteran-Owned Businesses.
- 5) It is therefore a request of each Bidder to include in its bid, the same goal (3%) for Veteran-Owned participation and other requirements as outlined in this section.

B. PROCEDURES

- 1) The successful bidder will be required to report to the LFUCG, the dollar amounts of all payments submitted to Minority-Owned, Woman-Owned or Veteran-Owned subcontractors and suppliers for work done or materials purchased for this contract. (See Subcontractor Monthly Payment Report)
- 2) Replacement of a Minority-Owned, Woman-Owned or Veteran-Owned subcontractor or supplier listed in the original submittal must be requested in writing and must be accompanied by documentation of Good Faith Efforts to replace the subcontractor / supplier with another MWDBE Firm; this is subject to approval by the LFUCG. (See LFUCG MWDBE Substitution Form)
- 3) For assistance in identifying qualified, certified businesses to solicit for potential contracting opportunities, bidders may contact:
 - a) The Lexington-Fayette Urban County Government, Division of Central Purchasing (859-258-3320)
- 4) The LFUCG will make every effort to notify interested MWDBE and Veteran-Owned subcontractors and suppliers of each Bid Package, including information on the scope of work, the pre-bid meeting time and location, the bid date, and all other pertinent information regarding the project.

C. DEFINITIONS

- 1) A Minority-Owned Business Enterprise (MBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by persons of African American, Hispanic, Asian, Pacific Islander, American Indian or Alaskan Native Heritage.
- 2) A Woman-Owned Business Enterprise (WBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by one or more women.

- 3) A Disadvantaged Business (DBE) is defined as a business which is certified as being at least 51% owned, managed and controlled by a person(s) that are economically and socially disadvantaged.
- 4) A Veteran-Owned Small Business (VOSB) is defined as a business which is certified as being at least 51% owned, managed and controlled by a veteran and/or a service disabled veteran.
- 5) Good Faith Efforts are efforts that, given all relevant circumstances, a bidder or proposer actively and aggressively seeking to meet the goals, can reasonably be expected to make. In evaluating good faith efforts made toward achieving the goals, whether the bidder or proposer has performed the efforts outlined in the Obligations of Bidder for Good Faith Efforts outlined in this document will be considered, along with any other relevant factors.

D. OBLIGATION OF BIDDER FOR GOOD FAITH EFFORTS

- 1) The bidder shall make a Good Faith Effort to achieve the Participation Goal for MWDBE and Veteran-Owned subcontractors/suppliers. The failure to meet the goal shall not necessarily be cause for disqualification of the bidder; however, bidders not meeting the goal are required to furnish with their bids written documentation of their Good Faith Efforts to do so.
- 2) Award of Contract shall be conditioned upon satisfaction of the requirements set forth herein.
- 3) The Form of Proposal includes a section entitled "MWDBE Participation Form". The applicable information must be completed and submitted as outlined below.
- 4) Failure to submit this information as requested may be cause for rejection of bid or delay in contract award.

E. DOCUMENTATION REQUIRED FOR GOOD FAITH EFFORTS

- 1) Bidders reaching the Goal are required to submit only the MWDBE Participation Form."

 The form must be fully completed including names and telephone number of participating MWDBE firm(s); type of work to be performed; estimated value of the contract and value expressed as a percentage of the total Lump Sum Bid Price. The form must be signed and dated, and is to be submitted with the bid.
- 2) Bidders not reaching the Goal must submit the "MWDBE Participation Form", the "Quote Summary Form" and a written statement documenting their Good Faith Effort to do so. If bid includes no MWDBE and/or Veteran participation, bidder shall enter "None" on the subcontractor / supplier form). In addition, the bidder must submit written proof of their Good Faith Efforts to meet the Participation Goal:
 - a. Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate.
 - b. Included documentation of advertising in the above publications with the bidders good faith efforts package

- c. Attended LFUCG Central Purchasing Economic Inclusion Outreach event
- d. Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned businesses of subcontracting opportunities
- e. Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses.
- f. Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s).
- g. Contacted organizations that work with MWDBE companies for assistance in finding certified MWBDE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation.
- h. Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs and/or Veteran-Owned businesses soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively.
- i. Followed up initial solicitations by contacting MWDBEs and Veteran-Owned Businesses to determine their level of interest.
- j. Provided the interested MWBDE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract.
- k. Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work items with its own workforce
- I. Negotiated in good faith with interested MWDBE firms and Veteran-Owned businesses not rejecting them as unqualified without sound reasons based on a thorough investigation of their capabilities. Any rejection should be so noted in writing with a description as to why an agreement could not be reached.
- m. Included documentation of quotations received from interested MWDBE firms and Veteran-Owned businesses which were not used due to uncompetitive pricing or were rejected as unacceptable and/or copies of responses from firms indicating that they would not be submitting a bid.
- n. Bidder has to submit sound reasons why the quotations were considered unacceptable. The fact that the bidder has the ability and/or desire to perform the contract work with its own forces will not be considered a sound reason for rejecting a MWDBE and/or Veteran-Owned business's quote. Nothing in this provision shall be construed to require the bidder to accept unreasonable quotes in order to satisfy MWDBE and Veteran goals.

- o. Made an effort to offer assistance to or refer interested MWDBE firms and Veteran-Owned businesses to obtain the necessary equipment, supplies, materials, insurance and/or bonding to satisfy the work requirements of the bid proposal
- p. Made efforts to expand the search for MWBE firms and Veteran-Owned businesses beyond the usual geographic boundaries.
- q. Other--any other evidence that the bidder submits which may show that the bidder has made reasonable good faith efforts to include MWDBE and Veteran participation.

<u>Note</u>: Failure to submit any of the documentation requested in this section may be cause for rejection of bid. Bidders may include any other documentation deemed relevant to this requirement which is subject to review by the MBE Liaison. Documentation of Good Faith Efforts must be submitted with the Bid, if the participation Goal is not met.



MINORITY BUSINESS ENTERPRISE PROGRAM

Sherita Miller, MPA
Minority Business Enterprise Liaison
Division of Central Purchasing
Lexington-Fayette Urban County Government
200 East Main Street
Lexington, KY 40507
smiller@lexingtonky.gov
859-258-3323

OUR MISSION: The mission of the Minority Business Enterprise Program is to facilitate the full participation of minority and women owned businesses in the procurement process and to promote economic inclusion as a business imperative essential to the long term economic viability of Lexington-Fayette Urban County Government.

To that end the city council adopted and implemented Resolution 484-2017 – A Certified Minority, Women and Disadvantaged Business Enterprise ten percent (10%) minimum goal and a three (3%) minimum goal for Certified Veteran-Owned Small Businesses and Certified Service Disabled Veteran – Owned Businesses for government contracts.

The resolution states the following definitions shall be used for the purposes of reaching these goals (a full copy is available in Central Purchasing):

Certified Disadvantaged Business Enterprise (DBE) — a business in which at least fifty-one percent (51%) is owned, managed and controlled by a person(s) who is socially and economically disadvantaged as define by 49 CFR subpart 26.

Certified Minority Business Enterprise (MBE) — a business in which at least fifty-one percent (51%) is owned, managed and controlled by an ethnic minority (i.e. African American, Asian American/Pacific Islander, Hispanic Islander, Native American/Native Alaskan Indian) as defined in federal law or regulation as it may be amended from time-to-time.

Certified Women Business Enterprise (WBE) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a woman.

Certified Veteran-Owned Small Business (VOSB) – a business in which at least fifty-one percent (51%) is owned, managed and controlled by a veteran who served on active duty with the U.S. Army, Air Force, Navy, Marines or Coast Guard.

Certified Service Disabled Veteran Owned Small Business (SDVOSB) — a business in which at least fifty-one percent (51%) is owned, managed and controlled by a disabled veteran who served on active duty with the U.S. Army, Air Force, Navy, Marines or Coast Guard.

The term "Certified" shall mean the business is appropriately certified, licensed, verified, or validated by an organization or entity recognized by the Division of Purchasing as having the appropriate credentials to make a determination as to the status of the business.

To comply with Resolution 484-2017, prime contractors and minority, women and veteran owned businesses must enroll in the new Diverse Business Management Compliance system, https://lexingtonky.diversitycompliance.com/

We have compiled the list below to help you locate certified MBE, WBE and DBE certified businesses. Below is a listing of contacts for LFUCG Certified MWDBEs and Veteran-Owned Small Businesses in (https://lexingtonky.ionwave.net)

Business	Contact	Email Address	Phone
LFUCG	Sherita Miller	smiller@lexingtonky.gov	859-258-3323
Commerce Lexington – Minority Business Development	Tyrone Tyra	ttyra@commercelexington.com	859-226-1625
Tri-State Minority Supplier Diversity Council	Susan Marston	smarston@tsmsdc.com	502-365-9762
Small Business Development Council	Shawn Rogers UK SBDC	shawn.rogers@uky.edu	859-257-7666
Community Ventures Corporation	Phyllis Alcorn	palcorn@cvky.org	859-231-0054
KY Transportation Cabinet (KYTC)	Melvin Bynes	Melvin.bynes2@ky.gov	502-564-3601
KYTC Pre-Qualification	Shella Eagle	Shella.Eagle@ky.gov	502-782-4815
Ohio River Valley Women's Business Council (WBENC)	Sheila Mixon	smixon@orvwbc.org	513-487-6537
Kentucky MWBE Certification Program	Yvette Smith, Kentucky Finance Cabinet	Yvette.Smith@ky.gov	502-564-8099
National Women Business Owner's Council (NWBOC)	Janet Harris-Lange	janet@nwboc.org	800-675-5066
Small Business Administration	Robert Coffey	robertcoffey@sba.gov	502-582-5971
LaVoz de Kentucky	Andres Cruz	lavozdeky@yahoo.com	859-621-2106
The Key News Journal	Patrice Muhammad	production@keynewsjournal.com	859-685-8488



LFUCG MWDBE PARTICIPATION FORM Bid/RFP/Quote Reference #____2 | - 2 | 0 | 9

The MWDBE and/or veteran subcontractors listed have agreed to participate on this Bid/RFP/Quote. If any substitution is made or the total value of the work is changed prior to or after the job is in progress, it is understood that those substitutions must be submitted to Central Purchasing for approval immediately. Failure to submit a completed form may cause rejection of the bid.

MWDBE Company, Name, Address, Phone, Email	MBE WBE or DBE	Work to be Performed	Total Dollar Value of the Work	% Value of Total Contract
1. N/A				
2.				
3.				
4.				

The undersigned company representative submits the above list of MWDBE firms to be used in accomplishing the work contained in this Bid/RFP/Quote. Any misrepresentation may result in the termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

C3 Mechanical	Llin (money
Company	Company Representative
3/17/19	Géneral Manager
Date	Title



LFUCG MWDBE SUBSTITUTION FORM Bid/RFP/Quote Reference # 7 - 2019

The substituted MWDBE and/or veteran subcontractors listed below have agreed to participate on this Bid/RFP/Quote. These substitutions were made prior to or after the job was in progress. These substitutions were made for reasons stated below and are now being submitted to Central Purchasing for approval. By the authorized signature of a representative of our company, we understand that this information will be entered into our file for this project.

SUBSTITUTED MWDBE Company Name, Address, Phone, Email	MWDBE Formally Contracted/Name, Address, Phone, Email	Work to Be Performed	Reason for the Substitution	Total Dollar Value of the Work	% Value of Total Contract
1. N/A					
2.					
3.					
4.					

The undersigned acknowledges that any misrepresentation may result in termination of the contract and/or be subject to applicable Federal and State laws concerning false statements and false claims.

C3 Mechanical	Shin fromer
Company	Company Representative
3/12/19	General Manager
Date	Title



MWDBE QUOTE SUMMARY FORM Bid/RFP/Quote Reference # 21-2019

The undersigned acknowledges that the minority and/or veteran subcontractors listed on this form did submit a quote to participate on this project. Failure to submit this form may cause rejection of the bid.

Company Name	Hills	Electric	,	Contact Person Chard Hill							
Address/Phone/				Bid Package / Bid Date							
2545 Law	renceb	urg Kd.		21-2019							
Address/Phone/ 2545 Law Frankfort K	140601				3/13	5/19					
MWDBE	Contact	Contact	Date	Services	Method of	Total dollars \$\$	MBE *	Veteran			
Company Address	Person	Information	Contacted		Communication		AA				
		(work phone, Email, cell)		performed	(email, phone meeting, ad,	Blank (Attach	HA AS				
		Eman, ceny			event etc)	Documentation)	NA NA				
						,	Female				
2545 Lawrenabury Rd. Frankfort	Ehad	502-803- 5607	3/9/19	Electric	meeting	30,000 -	Female	NO			
					they declined						
					nork, due to	<u> </u>					
					numerous other						
					jobs under						
					contract						
					presently	3					
					8						
		1									
			erican / H	A= Hispani	c American/AS	= Asian America	n/Pacific I	slander/			
NA= Native	American	a)									
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Company				$\overline{\mathbf{c}}$	ompany Repres						
3/12	119				(General)	Managa	V				
Date	, , ,			T	itle	The state of	2				



LFUCG SUBCONTRACTOR MONTHLY PAYMENT REPORT

The LFUCG has a 10% goal plan adopted by city council to increase the participation of minority and women owned businesses in the procurement process. The LFUCG also has a 3% goal plan adopted by cited council to increase the participation of veteran owned businesses in the procurement process. In order to measure that goal LFUCG will track spending with MWDBE and Veteran contractors on a monthly basis. By the signature below of an authorized company representative, you certify that the information is correct, and that each of the representations set forth below is true. Any misrepresentation may result in termination of the contract and/or prosecution under applicable Federal and State laws concerning false statements and false claims. Please submit this form monthly to the Division of Central Purchasing/ 200 East Main Street / Room 338 / Lexington, KY 40507.

East Main Street / Room 338 / Lexington, KY 4050/.												
Bid/RFP/Quot												
Total Contract	Amount Awa	rded to Prime	Contra	ctor for this Pr	oject							
Project Name/ C	Contract #			Work Period/	From:		То:					
Company Name:												
Federal Tax ID:	ı:											
Subcontractor Vendor ID (name, address, phone, email	Description of Work	Total Subcontract Amount	% of Total Contrac Awarde to Prim for this Project	this Period	Purchase Order number for subcontractor work (please attach PO)	Scheduled Project Start Date	Scheduled Project End Date					
N/A												
By the signature be of the representati	ions set forth l	below is true.	Any misi	representations m	nay result in the	termination of						
and/or prosecution C3 MUS Company 3/12 Date	n under applicat MANICAN	ble Federal and S		Company Repre	~ /com	1						

LFUCG STATEMENT OF GOOD FAITH EFFORTS Bid/RFP/Quote #___2|-20|9

By the signature below of an authorized company representative, we certify that we have utilized the following Good Faith Efforts to obtain the maximum participation by MWDBE and Veteran-Owned business enterprises on the project and can supply the appropriate documentation. Advertised opportunities to participate in the contract in at least two (2) publications of general circulation media; trade and professional association publications; small and minority business or trade publications; and publications or trades targeting minority, women and disadvantaged businesses not less than fifteen (15) days prior to the deadline for submission of bids to allow MWDBE firms and Veteran-Owned businesses to participate. _ Included documentation of advertising in the above publications with the bidders good faith efforts package Attended LFUCG Central Purchasing Economic Inclusion Outreach event ✓ Attended pre-bid meetings that were scheduled by LFUCG to inform MWDBEs and/or Veteran-Owned Businesses of subcontracting opportunities ____ Sponsored Economic Inclusion event to provide networking opportunities for prime contractors and MWDBE firms and Veteran-Owned businesses Requested a list of MWDBE and/or Veteran subcontractors or suppliers from LFUCG and showed evidence of contacting the companies on the list(s). Contacted organizations that work with MWDBE companies for assistance in finding certified MWBDE firms and Veteran-Owned businesses to work on this project. Those contacted and their responses should be a part of the bidder's good faith efforts documentation. Sent written notices, by certified mail, email or facsimile, to qualified, certified MWDBEs soliciting their participation in the contract not less than seven (7) days prior to the deadline for submission of bids to allow them to participate effectively. Followed up initial solicitations by contacting MWDBEs and Veteran-Owned businesses to determine their level of interest. Provided the interested MWBDE firm and/or Veteran-Owned business with adequate and timely information about the plans, specifications, and requirements of the contract. A/ Selected portions of the work to be performed by MWDBE firms and/or Veteran-Owned businesses in order to increase the likelihood of meeting the contract goals. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate MWDBE and Veteran participation, even when the prime contractor may otherwise perform these work

items wit	its own workforce
Owned by on a thore	egotiated in good faith with interested MWDBE firms and Veteran- usinesses not rejecting them as unqualified without sound reasons based ough investigation of their capabilities. Any rejection should be so noted with a description as to why an agreement could not be reached.
firms and pricing or	eluded documentation of quotations received from interested MWDBE Veteran-Owned businesses which were not used due to uncompetitive were rejected as unacceptable and/or copies of responses from firms that they would not be submitting a bid.
unaccepta contract v rejecting provision	dder has to submit sound reasons why the quotations were considered ble. The fact that the bidder has the ability and/or desire to perform the work with its own forces will not be considered a sound reason for a MWDBE and/or Veteran-Owned business's quote. Nothing in this shall be construed to require the bidder to accept unreasonable quotes in this MWDBE and Veteran goals.
Veteran-C	de an effort to offer assistance to or refer interested MWDBE firms and waned businesses to obtain the necessary equipment, supplies, materials, and/or bonding to satisfy the work requirements of the bid proposal
	de efforts to expand the search for MWBE firms and Veteran-Owned beyond the usual geographic boundaries.
	terany other evidence that the bidder submits which may show that the made reasonable good faith efforts to include MWDBE and Veteran ion.
cause for relevant t Document	ilure to submit any of the documentation requested in this section may be rejection of bid. Bidders may include any other documentation deemed of this requirement which is subject to approval by the MBE Liaison. ation of Good Faith Efforts must be submitted with the Bid, if the on Goal is not met.
0	edges that all information is accurate. Any misrepresentations may result ract and/or be subject to applicable Federal and State laws concerning s.
Company 3/12/10	Company Representative
Date	Title

Date

8. <u>AUTHENTICATION OF BID AND STATEMENT OF NON-COLLUSION, NON-CONFLICT OF INTEREST</u>

I hereby swear (or affirm) under the penalty for false swearing:

- 1. That I am the Bidder (if the Bidder is an individual), a partner of the Bidder (if the Bidder is a partnership), or an officer or employee of the bidding corporation having authority to sign on its behalf (if the Bidder is a corporation);
- 2. That the attached bid has been arrived at by the Bidder independently, and has been submitted without collusion with, and without any agreement, understanding or planned common course of action, with any other contractor, vendor of materials, supplies, equipment or services described in the Invitation to Bid, designed to limit independent bidding or competition;
- 3. That the contents of the bid or bids have not been communicated by the Bidder or its employees or agents to any person not an employee or agent of the Bidder or its surety on any bond furnished, with the bid or bids, and will not be communicated to any such person, prior to the official opening of the bid or bids;
- 4. That the Bidder is legally entitled to enter into the contracts with the Lexington-Fayette Urban County Government, and is not in violation of any prohibited conflict of interest;
- 5. (Applicable to corporation only) That as a foreign corporation, we are registered with the Secretary of State, Commonwealth of Kentucky, and authorized to do business in the State _____ or, that as a domestic corporation, we are in good standing with the Secretary of State, Commonwealth of Kentucky _____. Check the statement applicable.
- 6. This offer is for 60 calendar days from the date this bid is opened. In submitting the above, it is expressly agreed that, upon proper acceptance by the Lexington-Fayette Urban County Government of any or all items bid above, a contract shall thereby be created with respect to the items accepted.
- 7. That I have fully informed myself regarding the accuracy of the statements made in this statement.
- 8. That I certify that Subcontractors have not and will not be awarded to any firm(s) that have been debarred from noncompliance with the Federal Labor Standards, Title VI of the Civil Rights Act of 1964 As Amended, Executive Order 11246 As Amended or any other Federal Law.

9. STATEMENT OF EXPERIENCE

NAME OF INDIVIDUAL: Dan Shelton
POSITION/TITLE: Head Boiler Installer
STATEMENT OF EXPERIENCE: 30+ years of HVAC + Boiler
experience
NAME OF INDIVIDUAL: Derek Shelton
POSITION/TITLE:
STATEMENT OF EXPERIENCE: 5+ Years of HVAC + Boiler
NAME OF INDIVIDUAL: BOB Bruin
POSITION/TITLE: Nabover
STATEMENT OF EXPERIENCE: 10 + years of HVAC experience
NAME OF INDIVIDUAL: Vim Coomes
POSITION/TITLE: General Manager
STATEMENT OF EXPERIENCE: 30 + years HMC, Boiler +
P-25 Managenac
U) PUNCOU

NAME OF INDIVIDUAL: RObby Byrge
POSITION/TITLE: Project Administrator
STATEMENT OF EXPERIENCE: 30 T Wars experience in AVAC
construction, etc.
NAME OF INDIVIDUAL: CHAPPESSA COOPLES
POSITION/TITLE: Office Manager
STATEMENT OF EXPERIENCE: 3 WARS EXPERIENCE

^{*} Include all officers, office management's, Affirmative Action officials, and field management personnel. (Attach separate sheets if necessary.)

10. EQUAL OPPORTUNITY AGREEMENT

Standard Title VI Assurance

The Lexington Fayette-Urban County Government, (hereinafter referred to as the "Recipient") hereby agrees that as a condition to receiving any Federal financial assistance from the U.S. Department of Transportation, it will comply with Title VI of the Civil Rights Act of 1964, 78Stat.252, 42 U.S.C. 2000d-4 (hereinafter referred to as the "Act"), and all requirements imposed by or pursuant to Title 49, Code of Federal Regulations, U.S. Department of Transportation, Subtitle A, Office of the Secretary, (49 CFR, Part 21) Nondiscrimination in Federally Assisted Program of the Department of Transportation – Effectuation of Title VI of the Civil Rights Act of 1964 (hereinafter referred to as the "Regulations") and other pertinent directives, no person in the United States shall, on the grounds of race, color, national origin, sex, age (over 40), religion, sexual orientation, gender identity, veteran status, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Recipient receives Federal financial assistance from the U.S. Department of Transportation, including the Federal Highway Administration, and hereby gives assurance that will promptly take any necessary measures to effectuate this agreement. This assurance is required by subsection 21.7(a) (1) of the Regulations.

The Law

- * Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- * Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and subcontractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
- Section 503 of the Rehabilitation Act of 1973 States:

The Contractor will not discriminate against any employee or applicant for employment because of physical or mental handicap.

- * Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal Contracts.
- * Section 206 (A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment Opportunity, states:

The Secretary of Labor may investigate the employment practices of any Government contractor or sub-contractor to determine whether or not the contractual provisions specified in Section 202 of this order have been violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors, and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is

the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractor may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

Bidders

I/We agree to comply with the Civil Rights Laws listed above that govern employment rights of minorities, women. Vietnam veterans, handicapped, and aged persons.

Signature Comey

Name of Business

The Entity (regardless of whether construction contractor, non-construction contractor or supplier) agrees to provide equal opportunity in employment for all qualified persons, to prohibit discrimination in employment because of race, color, creed, national origin, sex or age, and to promote equal employment through a positive, continuing program from itself and each of its subcontracting agents. This program of equal employment opportunity shall apply to every aspect of its employment policies and practices.

The Kentucky equal Employment Opportunity Act of 1978 (KRS 45.560-45.640) requires that any count, city, town, school district, water district, hospital district, or other political subdivision of the state shall include in directly or indirectly publicly funded contracts for supplies, materials, services, or equipment hereinafter entered into the following provisions:

During the performance of this contract, the contractor agrees as follows:

- (1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age or national origin;
- (2) The contractor will state in all solicitations or advertisements for employees placed by or on behalf of the contractors that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age or national origin;
- (3) The contract will post notices in conspicuous places, available to employees and applicants for employment, setting forth the provisions of the non-discrimination clauses required by this section; and
- (4) The contractor will send a notice to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding advising the labor union or workers' representative of the contractor's commitments under the nondiscrimination clauses.

The Act further provides:

KRS 45.610. Hiring minorities – Information required

- (1) For the length of the contract, each contractor shall hire minorities from other sources within the drawing area, should the union with which he has collective bargaining agreements be unwilling to supply sufficient minorities to satisfy the agreed upon goals and timetable.
- (2) Each contractor shall, for the length of the contract, furnish such information as required by KRS 45.560 to KRS 45.640 and by such rules, regulations and orders issued pursuant thereto and will permit access to all books and records pertaining to his employment practices and work sites by the contracting agency and the department for purposes of investigation to ascertain compliance with KRS 45.560 to 45.640 and such rules, regulations and orders issued pursuant thereto.

KRS 45.620. Action against contractor – Hiring of minority contractor or subcontractor

- (1) If any contractor is found by the department to have engaged in an unlawful practice under this chapter during the course of performing under a contract or subcontract covered under KRS 45.560 to 45.640, the department shall so certify to the contracting agency and such certification shall be binding upon the contracting agency unless it is reversed in the course of judicial review.
- (2) If the contractor is found to have committed an unlawful practice under KRS 45.560 to 45.640, the contracting agency may cancel or terminate the contract, conditioned upon a program for future compliance approved by the contracting agency and the department. The contracting agency may declare such a contractor ineligible to bid on further contracts with that agency until such time as the contractor complies in full with the requirements of KRS 45.560 45.640.
- (3) The equal employment provisions of KRS 45.560 to 45.640 may be met in part by a contractor by subcontracting to a minority contractor or subcontractor. For the provisions of KRS 45.560 to 45.640, a minority contractor or subcontractor shall mean a business that is owned and controlled by one or more persons disadvantaged by racial or ethnic circumstances.

KRS 45.630 Termination of existing employee not required, when

Any provision of KRS 45.560 to 45.640 notwithstanding, no contractor shall be required to terminate an existing employee upon proof that that employee was employed prior to the date of the contract.

KRS 45.640 Minimum skills

Nothing in KRS 45.560 to 45.640 shall require a contractor to hire anyone who fails to demonstrate the minimum skills required to perform a particular job.

It is recommended that all of the provisions quoted above to be included as <u>special conditions</u> in each contract. In the case of a contract exceeding \$250,000, the contractor is required to furnish evidence that his work-force in Kentucky is representative of the available work-force in the area from which he draws employees, or to supply an Affirmative Action plan which will achieve such representation during the life of the contract.

11. EQUAL EMPLOYMENT OPPORTUNITY AFFIRMATIVE ACTION POLICY

It is the policy of <u>C3 MChanical</u>
sure that all applicants for employment and all employees are treated on a fair and equitable

to assure that all applicants for employment and all employees are treated on a fair and equitable basis without regard to their race, religion, sex, color, handicap, natural origin or age.

Such action shall include employment, promotion, demotion, recruitment or recruitment advertising, layoff or termination, rates of pay and other forms of compensation, and selection for training, whether apprenticeship and/or on-the-job-training.

Furthermore, this company agrees to make special recruitment efforts to hire the protected class whenever feasible. This company also agrees to adhere to all applicable federal, state, and local laws relating to Equal Employment Opportunity for all individuals.

12.	WORKFORCE	ANAL	YSIS	FORM

C3 Mechanicae Name of Organization:

F	M	F	M	F	М	F	M	F	М	F	М	F	M 2	F
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CO	One	es	2	101								7		
	200	Coom Office	Cooner "Office n	Comer Office Manager	Comes Office Manager P-32	2 Comes Office Manager P-32	Comer Office Manager P-32	Comes Office Manager P-32	Comer Office Manager P-32	Date:_ P-32	Date: <u>0311</u> Revised 201 P-32	Date: <u>03/17/1</u> P-32 Date: <u>03/17/1</u> Revised 2015-Dec-15	Date: <u>03/17/19</u> Revised 2015-Dec-15 P-32	2 Date: 03/12/19 Revised 2015-Dec-15 P-32

14. DEBARRED FIRMS

PROJECT NAME:	Replacement of Hydronic Fan Coil Units at Bell House
BID NUMBER:	21-2019
LEXINGTON-FAYI LEXINGTON, KY	ETTE URBAN COUNTY GOVERNMENT
firms that has been de	shall certify that Subcontractors have not and will not be awarded to any parred for noncompliance with the Federal Labor Standards, Title VI of the 64 As Amended, Executive Order 11246 As Amended or any other
Owner with the bid pr	elete the attached certification in duplicate and submit both copies to the oposal. The Owner (grantee) shall transmit one copy to the Lexington-Government, Division of Community Development, within fourteen (14)
not and will not award this bid, to any firm th	has a subcontract, in connection with any contract award to it as the result of at has been debarred for noncompliance with the Federal labor Standards, ghts Act of 1964, Executive Order 11246 as amended or any Federal Law.
C3 Must Name of Firm Submitt	ing Bid
Signature of Authorize	d Official
General n	Manager
$\frac{3/12/19}{\text{Date}}$	7

15. DEBARMENT CERTIFICATION

All contractors/subcontractors shall complete the following certification and submit it with the bid proposal.

The contractor/subcontractor certifies in accordance with Executive Order 12549 (Debarment and Suspension 2/18/86) that to the best of its knowledge and belief, that it and its principals:

- Are not presently debarred, suspended, proposed for debarment, declared negligible, or voluntarily excluded from covered transactions or contract by any Federal department or agency for noncompliance with the Federal Labor Standards, Title VI of the Civil Rights Act of 1964 as amended, Executive Order 11246 as amended or any other Federal law;
 - a) Have not within a three year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - b) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(a) of this certification; and
 - c) Have not within a three year period preceding this bid has one or more public (Federal, State or local) transactions or contracts terminated for cause or default.
- 2) Where the contractor is unable to certify to any of the statements in this certification, such prospective contractors shall attach an explanation to this certification form.

Firm Name:	C3 Mechanical		
Project:	Replacement of Hydronic Fan Co Bell Ho and Title of Authorized Representative:	il Units at Suse RFB 21-201	19
Printed Name	and Title of Authorized Representative:	Jim Coomes	General Manager
Signature:	Sin fromer		
Date:	3/12/19		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/12/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

-	is certificate does not confer rights to	the c	certifi	icate holder in lieu of such						
	DUCER				CONTACT Account Executive					
ı	Insurance Solutions				PHONE (A/C, No, Ext): (615) 371-5400 FAX (A/C, No): (615) 224-8645					
189	4 General George Patton Dr				E-MAIL ADDRE	ss: info@mye	eliteis.com_			
Suit	e 100				INSURER(S) AFFORDING COVERAGE				NAIC#	
Fran	ıklin			TN 37067	INSURER A: Erie Insurance Exchange				26271	
INSU	RED				INSURER B: Flagship City Insurance Company					35585
	C3 MECHANICAL LLC		INSURER C:							
	210B HAHN DR				INSURER D:					
					INSURER E:					
	FRANKFORT			KY 40601-8440	INSURE	RF:				
CO	/ERAGES CER	TIFIC	ATE	NUMBER: CL193121072	0			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										
INSR LTR	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CCCUR							EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000 \$ 1,000	0,000
								MED EXP (Any one person)	\$ 5,000)
Α				Q37-2950840		01/29/2019	01/29/2020	PERSONAL & ADV INJURY	\$ 1,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	OTHER:								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	0,000
	ANY AUTO					01/29/2019	01/29/2020	BODILY INJURY (Per person)	\$	
A	AUTOS ONLY AUTOS	AUTOS		Q01-2930815	2930815			BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
								PIP-Basic	\$	
	➤ UMBRELLA LIAB OCCUR						01/29/2020	EACH OCCURRENCE	\$ 1,000	
A	EXCESS LIAB CLAIMS-MADE			Q25-2970284		01/29/2019		AGGREGATE	\$ 1,000	000,0
	DED RETENTION \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
В	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		Q85-7900221		01/29/2019	01/29/2020		\$ 500,0	
	(Mandatory in NH)		400-7000221						\$ 500,0	
	if yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 500,0	000
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									
CER	TIFICATE HOLDER				CANC	ELLATION				
					THE	EXPIRATION D	ATE THEREOF	SCRIBED POLICIES BE CANG NOTICE WILL BE DELIVERE PROVISIONS.		BEFORE
				ĺ	AUTHOR	RIZED REPRESEN	ITATIVE			
					Rough How					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/12/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

tl	nis certificate does not confer rights to	the	certifi	icate holder in lieu of sucl						
PRC	DUCER				CONTA NAME:	CT Account l	Executive			
Elit	e Insurance Solutions				PHONE (A/C, No, Ext): (615) 371-5400 FAX (A/C, No): (615) 224-8645					
189	4 General George Patton Dr				E-MAIL ADDRESS: info@myeliteis.com					
Sui	te 100									
Fra	nklin			TN 37067	INSURE	pa	rance Exchan			NAIC # 26271
INSU	JRED				INSURE	Florida.	City Insurance			35585
C3 MECHANICAL LLC						.KD. 9 .		- Company		
	210B HAHN DR				INSURE				_	
	E TOD TWO IN DIX			INSURE				-		
	FRANKFORT		KY 40601-8440	INSURE						
						RF:				
_							REVISION NUMBI			
	HIS IS TO CERTIFY THAT THE POLICIES OF I IDICATED. NOTWITHSTANDING ANY REQUI									
	ERTIFICATE MAY BE ISSUED OR MAY PERTA									
E	XCLUSIONS AND CONDITIONS OF SUCH PO	LICIE	S. LIM			CED BY PAID C	LAIMS.			
INSR LTR	TYPE OF INSURANCE	INSD	SUBR	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)			
	COMMERCIAL GENERAL LIABILITY					- 11		EACH OCCURRENCE	s 1,00	0,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurre	(nce) \$ 1,000	0,000
						01/29/2019		MED EXP (Any one person) \$ 5,000		5
Α				Q37-2950840			01/29/2020	PERSONAL & ADV INJU	1.00	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATI	E \$ 2,000	0,000
	POLICY PRO- JECT LOC						İ	PRODUCTS - COMP/OI	2.00	
	OTHER:							THOUSEN COMMING	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIN	MIT \$ 1,000	0,000
	ANY AUTO							(Ea accident) BOD(LY INJURY (Per pe	erson) \$	
Α	OWNED SCHEDULED			Q01-2930815	01/29/2019	01/29/2020	BODILY INJURY (Per ac			
	AUTOS ONLY AUTOS NON-OWNED						PROPERTY DAMAGE	s		
	AUTOS ONLY AUTOS ONLY							(Per accident) PIP-Basic	\$	
	X UMBRELLA LIAB OCCUR	-							s 1,000	1,000
Α	EVCESSIAR			Q25-2970284		01/29/2019	01/29/2020	EACH OCCURRENCE	\$ 1,000	
•	CLAIMS-MADE			QLO-LOT OLD-		01/23/2013	01/25/2020	AGGREGATE	\$ 1,000	7,000
_	DED RETENTION \$ WORKERS COMPENSATION	-			-			✓ PER	OTH-	
	AND EMPLOYERS' LIABILITY Y/N							➤ PER STATUTE	OTH- ER	200
В	ANY PROPRIETOR/PARTNER/EXECUTIVE N OFFICER/MEMBER EXCLUDED?	N/A		Q85-7900221		01/29/2019	01/29/2020	E.L. EACH ACCIDENT	\$ 500,0	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMP		
	DÉSCRIPTION OF OPERATIONS below	_						E.L. DISEASE - POLICY	LIMIT \$ 500,0	100
										- 1
										- 1
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 10	J1, Additional Remarks Schedule, i	may be at	tached If more sp	ace is required)			
CEF	RTIFICATE HOLDER				CANC	ELLATION				
								SCRIBED POLICIES I		BEFORE
	For insurance purposes-Bid					ORDANCE WIT		, NOTICE WILL BE D PROVISIONS.	ELIVERED IN	
	i or madrance purposes-old									
				1	AUTHOR	RIZED REPRESEN	ITATIVE			
								Rank How		
								March Mint		1

13. EVIDENCE OF INSURABILITY

LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT CONSTRUCTION PROJECT (Use separate form for each Agency or Brokerage agreeing to provide coverage)

Ted: C3 MUhanical Employee ID: 910 B. Hann Dr. Frankfokt, ky 40001 Phone: 502-352-2303

Address:	Dr. 114	11 Plat 1 P C 100	<u> </u>	none:		
Project to be insured: LFUCA	Bell Hor	use				
In lieu of obtaining certificates of insurance at and Risk Management of Part V (Special Cond			med Insured with the minimum o	coverage listed below. The	ese are outlined in	the Insurance
Section		Minimum Limits and	Limits Provided	Name of	A.M. Be	est's
Items	Coverage	Policy Requirements	To Insured	Insurer	Code	Rating
SC-3, Section 2, Part 4.1 – see provisions	CGL	\$1,000,000 per occ. And \$2,000,000 aggregate	\$			
SC-3, Section 2, Part 4.1 – see provisions	AUTO	\$1,000,000/per occ.	\$			
SC-3, Section 2, Part 4.1 – see provisions	WC	Statutory w /endorsement as noted	\$			
Section 2 includes required provisions, stateme when submitting. Eite Insummee Agency or Brokerage	ents regarding insuran	nce requirements, and the undersigne	Name of Authorized F	omes	ted above unless s	tated otherwise
Street Address Lexington Ky City State		Zip	Title Authorized Signature	12/19	ur	
Telephone Number			Date			

NOTE: Authorized signatures may be the agent's if agent has placed insurance through an agency agreement with the insurer. If insurance is brokered, authorized signature must be that of authorized representative of insurer.

IMPORTANT: Contract may not be awarded if a completed and signed copy of this form for all coverage's listed above is not provided with the bid.