BIDDER: _____

BID FORM – BP-04 – ELECTRICAL

Bid to: Erie Canal Harbor Development Corporation

95 Perry Street, 5th Floor

Buffalo, NY 14203

Bid for: **ECHDC Outer Harbor Phase 1A**

Bid From: Name: _____

Address: _____

_____

Phone: _____

Email: _____

PROPOSAL

We have examined and fully understand the requirements and intent of the Bidding and Contract Documents and all subsequent addenda as listed below, and propose to provide all materials, and all plants, labor, supplies, equipment, transportation and other facilities necessary or proper for, or incidental to the Work, to complete all Work in strict accord with the contract documents and as assigned in the Special Conditions for the **Total Lump Sum Base Bid** calculated below:

Total Lump Sum Base Bid Contract $ _____

Total Lump Sum Base Bid in Words: _____

_____

ADDENDA

Addenda Received:

Addendum Number	Date
_____	_____
_____	_____
_____	_____
_____	_____

BIDDER: _____

ADDITIONAL MANDATORY BID FORMS

We have enclosed with this proposal, the following mandatory Bid Forms, fully executed:

1. Contractor Qualifications Statement
2. Non-Collusive Bidding Certificate
3. Certified Corporate Resolution
4. Affirmative Action Agreement
5. Schedule A-1
6. Debarment Certificate B
7. Certification Regarding Lobbying
8. Substitution Sheet

We have used no substitutions except as listed in the Substitution Sheet. We affirm that we are licensed by the City of Buffalo or have an application on file to obtain the minimum required licensing with City Licensing. We affirm that we (and our subcontractors and suppliers) are licensed by governing agencies of jurisdiction to complete the work and possess the requisite capabilities required by the Contract Documents including specific qualifications identified therein,

SIGNATURE: **CORPORATE SEAL**

Firm: _____

By: _____
(Signature)

Title: _____

Date: _____

BIDDER: _____

ATTACHMENT # 1: CONTRACTOR QUALIFICATIONS STATEMENT

Instructions: Please include all requested information. For a Bid to be declared responsive, the contractor must complete all sections of the Contractor Qualifications Statement; all sections of this Contractor Qualifications Statement are mandatory. The content of the Contractor Qualifications Statement submittal shall follow the order presented below and shall include identical headings and questions as presented below. The signatory of this questionnaire guarantees the truth and accuracy of all statements and of all answers to interrogatories hereinafter made. All responses, except signatures, must be typed.

Note the term "you" or "your" and "your firm" indicates the Individual, Corporation, Partnership, Joint Venture (JV) or other entity responding herein.

SECTION 1: GENERAL RESPONDENT INFORMATION

Name of Contractor: _____

Address of Principal Office: _____

Is the responding firm an Individual, Corporation, Partnership, Joint Venture (JV) or Other? If "Other", please specify. _____

Contact Information Principal/Owner:

Name: _____

Address: _____

Telephone (1): _____

Telephone (2): _____

Email: _____

Contact Information for Project Manager/Superintendent who will be directly managing the project:

Name: _____

Address: _____

Telephone (1): _____

Telephone (2): _____

Email: _____

BIDDER: _____

Contact Information for individual responsible for preparation of the Bid:

Name: _____

Address: _____

Telephone (1): _____

Telephone (2): _____

Email: _____

BIDDER: _____

SECTION 2: EXPERIENCE AND BACKGROUND OF THE ORGANIZATION

If your organization is a partnership, list names and address of partners; if a Corporation, list name of officers, directors and State or Province of Incorporation.

_____

_____

_____

_____

How many years has your organization been in business as a Contractor under your present business name?

_____

_____

Do you presently have any outstanding subcontractor/supplier liens filed against you? Yes/ No

_____

If yes, explain:

_____

_____

Is your organization signatory to a collective bargaining agreement? Yes / No

_____

Maximum Bonding Capacity:

_____

Name and Address of Surety:

_____

How many years has your organization had in construction work similar to the work specified as a:

_____

General Contractor? Subcontractor?

_____

_____

BIDDER: _____

List several projects your organization has completed during the last five (5) years that are similar to the specified work. **Project experience should relate to accelerated work schedules, completion of projects under critical deadlines and projects where site work was performed in adverse winter weather conditions. The work listed shall have been completed under the supervision of the individuals included in Section 1 of this questionnaire** (Individuals directly responsible for work under this project): Add additional sheets if necessary:

Client _____

Principal Contact _____ Telephone _____

Location of Work _____

Your organization's role in this work _____

Type of Project and Brief Description _____

_____

_____

_____

_____

Contract Date _____ Final Acceptance Date _____

Value of Work Performed $ _____

Client _____

Principal Contact _____ Telephone _____

Location of Work _____

Your organization's role in this work _____

Type of Project and Brief Description _____

_____

_____

_____

_____

Contract Date _____ Final Acceptance Date _____

Value of Work Performed $ _____

BIDDER: _____

Client _____

Principal Contact _____ Telephone _____

Location of Work _____

Your organization's role in this work _____

Type of Project and Brief Description _____

_____

_____

_____

_____

Contract Date _____ Final Acceptance Date _____

Value of Work Performed $ _____

Client _____

Principal Contact _____ Telephone _____

Location of Work _____

Your organization's role in this work _____

Type of Project and Brief Description _____

_____

_____

_____

_____

Contract Date _____ Final Acceptance Date _____

Value of Work Performed $ _____

BIDDER: _____

Will your organization complete at least 50% of the work with in-house staff and/or labor forces?

Yes / No

Do you intend to use sub-contractors any portions of the work? Yes / No

If so which portions?

_____

_____

Have you ever failed to complete any work awarded to you? Yes / No

Has any officer or partner of your organization ever been an officer or partner of some other organization that failed to complete a construction contract? Yes / No

If so, state name of individual, other organization and reason:

_____

_____

Has any officer or partner of your organization ever failed to complete a construction contract handled in his own name? Yes / No

If so, state name of individual, name of Owner and reason:

_____

_____

For what corporation or individuals have you performed work? Cite reference.

_____

_____

For what cities have you performed work? Cite reference.

_____

_____

For what States or Provinces have you performed work? Cite reference.

_____

_____

For what State Bureaus or Departments have you performed work? Cite reference.

_____

_____

BIDDER: _____

Have you ever performed any work for the U.S. Government? Yes / No

Have you ever performed any work for the Canadian Government? Yes / No

If so, when and to whom do you refer?

_____

_____

How would you classify your record on Affirmative Action, including Minority Subcontracting, Minority Hiring and Minority Training?

_____

_____

Provide a listing of projects (with references) where Affirmative Action requirements were specified.

_____

_____

_____

_____

In what other lines of business do you have a financial interest?

_____

_____

BIDDER: _____

SECTION 3: SAFETY RECORD OF THE ORGANIZATION

Has your organization been cited for any safety violations within the last 5 years? Yes / No

If yes, list the year, citing agency citing, and brief description of each violation:

_____

_____

BIDDER: _____

SECTION 4: CONTRACTOR'S BUSINESS REFERENCES

Provide a list of references: Give only engineers, other contractors, architects, or owners, including public agencies for whom you have done work. Provide references to where mandatory minority participation was included.

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

BIDDER: _____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

Individual or Agency _____

Address _____

_____ Telephone _____

Type of program _____

_____

BIDDER: _____

SECTION 5: CONTRACTOR'S FINANCIAL REFERENCES

Reference is hereby made to the following bank or banks as to the financial responsibility of the Contractor.

Name of Bank:_____

Address:_____

City and State:_____ Phone:_____

Officer familiar with Contractor's account:_____

Name of Bank:_____

Address:_____

City and State:_____ Phone:_____

Officer familiar with Contractor's account:_____

Name of Bank:_____

Address:_____

City and State:_____ Phone:_____

Officer familiar with Contractor's account:_____

Name of Bank:_____

Address:_____

City and State:_____ Phone:_____

Officer familiar with Contractor's account:_____

BIDDER: _____

SECTION 6: ACKNOWLEDGEMENT

By signing this application, it is understood that the above listed individuals will be assigned to the project should we be the successful bidder. In the event a change in the employment status of the listed individuals occurs between the date of this Application and the date of the Contract Award, we acknowledge the Authority retains the full right of personnel approval.

Dated at_____ this _____ day of _____2017

Name of Organization _____

By _____

Printed name of the person signing: _____

STATE OF _____ }

} ss:

COUNTY OF _____ }

_____ being duly sworn deposes and says that s/he is
Print Name of Person Signing

_____ of _____
Title Name of Organization

and that the answers to the foregoing questions and all statements therein contained are true and correct.

Sworn before me this _____ day of _____, 2017__

_____
Notary Public

My commission expires:_____

BIDDER: _____

ATTACHMENT # 2: NON-COLLUSIVE BIDDING CERTIFICATION

No bid will be accepted that does not have this form completely executed.

1. By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of their knowledge and belief:

    a. The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or any competitor;

    b. Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or competitor; and

    c. No attempt has been made or will be made by the bidder to induce any other person, partnership, or corporation to submit or not to submit a bid for the purpose of restricting competition.

    d. If the bidder is a corporation, this certificate is and shall be deemed to have been authorized by the board of directors of the bidder, and such authorization is and shall be deemed to include the signing and submission of the bid and the inclusion therein of this certificate of non-collusion as the act and deed of the corporation.

    e. The attached hereto (if a corporate bidder) is a certified copy of a resolution authorizing the execution of this certification by the signature of this bid or proposal on behalf of the corporate bidder.

2. Pursuant to 103-d, General Municipal Law, a bid shall not be considered for award nor shall any award be made where the above Non-Collusive Certificate, Paragraphs 1, (1), (2), and (3) have not been complied with, unless explained, justified, and legally excused in accordance with said law.

_____
(Individual)

_____
(Corporation)

_____
Dated (Signature of Officer)

This Non-Collusive Bidding Certificate must be submitted with the bid.

BIDDER: _____

ATTACHMENT # 3: CERTIFIED CORPORATE RESOLUTION

RESOLVED THAT _____ be authorized to sign and submit the bid or proposal of this corporation for the following project:

_____

(PROJECT NAME)

and to include in such bid the Non-Collusion Bidding Certification required by section one hundred three - d (103-d) of the General Municipal Law as to the act and deed of such corporation, and for any inaccuracies or misstatements in such certificate this corporate bidder shall be liable under the penalties of perjury.

The foregoing is a true and correct copy of the resolution and adopted by

_____ at a meeting of its board of directors held on

the _____ day of _____, 20____.

_____

(Secretary)

This Certified Corporate Resolution must be submitted with the bid.

BIDDER: _____

ATTACHMENT # 4: AFFIRMATIVE ACTION AGREEMENT

Firm Name: _____
Business Address: _____
Telephone No. _____

Non-discrimination Clauses:

1. The Contractor will not discriminate against any employee or applicant for employment because of race, creed, sex, color or national origin and will take affirmative action to insure that they are afforded equal employment opportunities without discrimination because of race, creed, sex, color or national origin. Such action shall be taken with reference, but not limited to: recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination, rates of pay or other forms of compensation, and selection for training or retraining, including apprenticeship and on-the-job training.

2. The Contractor will send to each labor union or representative of workers with which he has or is bound by a collective bargaining or other agreement or understanding, a notice, to be provided by the State Commission for Human Rights, advising such labor union or representative of the Contractor's agreement under clauses (1) through (7) (hereinafter called "non-discrimination clauses"). If the Contractor was directed to do so by the contracting agency as part of the bid or negotiation of this Contract, the Contractor shall request such labor union or representative to furnish him with a written statement that such labor union or representative will not discriminate because of race, creed, sex, color or national origin and that such labor union or representative either will affirmatively cooperate, within the limits of its legal and contractual authority, in the implementation of the policy and provisions of these non-discrimination clauses or that it consents and agrees that recruitment, employment and the terms and conditions of employment under this Contract shall be in accordance with the purposes and provisions of these non-discrimination clauses. If such labor union or representative fails or refuses to comply with such a request that it furnishes such a statement, the Contractor shall promptly notify the State Commission of Human Rights of such failure or refusal.

3. The Contractor will post and keep posted in conspicuous places, available to employees and applicants for employment, notices to be provided by the State Commission for Human Rights setting forth the substance of the provisions of clauses (1) and (2) and such provisions of the State's laws against discrimination as the State Commission for Human Rights shall determine.

4. The Contractor will state, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, that all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, sex, color or national origin.

5. The Contractor will comply with the provisions of Sections 291-299 of the Executive Law and the Civil Rights Law, will furnish all information and reports deemed necessary by the State Commission for Human Rights under these non-discrimination clauses and such sections of the Executive Law, and will permit access to his books, records and accounts by the State Commission for Human Rights, the Attorney General and the Industrial Commissioner for the purposes of investigation to ascertain compliance with these non-discrimination clauses and such sections of

BIDDER: _____

the Executive Law and Civil Rights Law.

6. This Contract may be forthwith canceled, terminated or suspended, in whole or in part, by the contracting agency upon the basis of a finding made by the State Commission for Human Rights that the Contractor has not complied with these non-discrimination clauses, and the Contractor may be declared ineligible for future contracts made by or on behalf of the State or a public authority or agency of the state, until he satisfies the State Commission for Human Rights that he has established and is carrying out a program in conformity with the provisions of these non-discrimination clauses. Such finding shall be made by the State Commission for Human Rights after conciliation efforts by the Commission have failed to achieve compliance with these non-discrimination clauses and after a verified complaint has been filed with the Commission, notice thereof has been given to the Contractor and an opportunity has been afforded him to be heard publicly before three members of the Commission. Such sanctions may be imposed and remedies invoked dependently of or in addition to sanctions and remedies otherwise provided by law.

7. The Contractor will include the provisions of clauses (1) through (6) in every subcontract or purchase order in such a manner that such provisions will be binding upon each subcontractor or vendor as to operations to be performed within the State of New York. The Contractor will take such action in enforcing such provisions of such subcontract or purchase order as the contracting agency may direct, including sanctions or remedies for non-compliance. If the Contractor becomes involved in or is threatened with litigation with a subcontractor or vendor as a result of such direction by the contracting agency, the Contractor shall promptly so notify the Attorney General, requesting him to intervene and protect the interests of the State of New York.

Signature (Authorized): _____

Title: _____

BIDDER: _____

ATTACHMENT # 5: SCHEDULE A-1

See following attachments.

THIS PAGE INTENTIONALLY LEFT BLANK

A-1

STAFFING PLAN

Project/RFP Title_____Location of Contract
County Zip

Contractor/Firm Name_____Address
City State Zip

Check applicable categories: (1) Staff Estimates include: ( ) Contract/Project Staff ( ) Total Workforce ( ) Subcontractors
(2) Type of Contract: ( ) Construction Consultants ( ) Commodities ( ) Services/Consultants

TOTAL ANTICIPATED WORK FORCE											Total Percent Minority Employees	Total Percent Female Employees
Federal Occupational Category	Total Number of Employees		Black (Not of Hispanic Origin)		Hispanic		Asian or Pacific Islander		Native American Alaskan Native			
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female		
Officials/Admin.												
Professionals												
Technicians												
Sales Workers												
Office & Clerical												
Craft Workers												
Operatives												
Laborers												
Service Workers												
TOTALS												

CERTIFICATION:

I, _____ (Print Name), the _____ (Title), do certify that (i) I have read this Staffing Plan and (ii) to the best of my knowledge, information and belief the information herein is complete and accurate.

Signature _____ Date _____ Telephone Number:

Forward to:

Empire State Development
Affirmative Action Unit – HELEN DANIELS
633 Third Avenue
New York, NY 10017 Email: hdaniels@esd.ny.gov Fax: (212) 803-3223

SCHEDULE A-2

SCHEDULE OF MINORITY/WOMEN OWNED BUSINESS PARTICIPATION

(No substitutions may be made on this submission except by prior written approval from Empire State Development)

_____
Name of Respondent

_____
Address

_____

Project/RFP Title:

Respondent's Contract Amount:

Telephone Number:__(____)

Name/Address/Phone No. of Minority/Women-owned Business	MBE or WBE	Joint Venture, Sub-consultant, or Supplier	Scope of Work to be Performed	Proposed Contract Price or Purchase Amount & Percentage

CERTIFICATION:

I, _____ (Print Name), the _____ (Title), do certify that (i) I have read this Schedule of Minority/Women Owned Business Participation and (ii) to the best of my knowledge, information and belief the information herein is complete and accurate.

Signature _____ Date

Forward to:

Empire State Development
Affirmative Action Unit — Helen Daniels
633 Third Avenue
New York, NY 10017 — Office: (212) 803-3225 — Fax: (212) 803-3223
hdaniels@esd.ny.gov

BIDDER: _____

ATTACHMENT #6: DEBARMENT CERTIFICATE B

THIS FORM MUST BE COMPLETED BY ALL BIDDERS WHOSE TOTAL BID PRICE EXCEEDS $100,000 AND BY ALL SUBCONTRACTORS AT ANY TIER OF BIDDERS WHOSE SUBCONTRACTED WORK WILL EXCEED $100,000.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION-LOWER TIER COVERED TRANSACTIONS

Instructions for Certification:

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible or voluntarily excluded from the covered transaction; unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.

BIDDER: _____

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION-LOWER TIER COVERED TRANSACTIONS

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature: _____

Title: _____

BIDDER: _____

ATTACHMENT #7: CERTIFICATION REGARDING LOBBYING

THIS CERTIFICATE MUST BE COMPLETED IF THE AMOUNT OF THIS AGREEMENT EXCEEDS $100,000.

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the Federal grant funding the work to be performed pursuant to this Agreement, the undersigned shall complete and submit Standard Form --- LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in all subcontracts at all tiers and that all subcontractors shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction, imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Contractor: _____

Dated: _____

Title: _____

BIDDER: _____

ATTACHMENT #8: SUBSTITUTIONS

THE FOLLOWING MATERIALS, PRODUCTS OR EQUIPMENT ARE PROPOSED AS SUBSTITUTIONS FOR SPECIFIED ITEMS INDICATED. REQUIRED BACKUP DATA WILL BE SUBMITTED WITHIN 3 WORKING DAYS OF RECEIPT OF REQUEST FOR SAME. WE AGREE TO ABIDE BY THE ARCHITECT'S DECISION AS TO ACCEPTABILITY OF THE PROPOSED SUBSTITUTIONS.

1. Specification Section No.:_____

   Section Article or Paragraph No.:_____

   Specified Item: _____

   Proposed Substitution:_____

2. Specification Section No.:_____

   Section Article or Paragraph No.:_____

   Specified Item: _____

   Proposed Substitution:_____

3. Specification Section No.:_____

   Section Article or Paragraph No.:_____

   Specified Item: _____

   Proposed Substitution:_____

4. Specification Section No.:_____

   Section Article or Paragraph No.:_____

   Specified Item: _____

   Proposed Substitution:_____

5. Specification Section No.:_____

   Section Article or Paragraph No.:_____

   Specified Item: _____

   Proposed Substitution:_____

ADD SHEETS AS NECESSARY