COUNTY OF ALBANY

GC - BID FORM

BID IDENTIFICATION:

Title: Albany County Sheriff's Office Public Safety Building Renovations

Bid Number: 2020-044-GC- General Construction

THIS BID IS SUBMITTED TO:

Karen A. Storm, Purchasing Agent Albany County Department of General Services Purchasing Division 112 State Street, Room 1000 Albany, NY 12207

- 1. The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into a Contract with the owner in the form included in the Contract Documents to complete all Work as specified or indicated in the Contract Documents for the Contract Price and within the Contract Time indicated in this Bid and in accordance with the Contract Documents.
- 2. BIDDER accepts all of the terms and conditions of the Instructions to Bidders, including without limitation those dealing with the Disposition of Bid Security. This Bid may remain open for ninety (90) days after the day of Bid opening. BIDDER will sign the Contract and submit the Contract Security and other documents required by the Contract Documents within fifteen days after the date of OWNER'S Notice of Award.
- 3. In submitting this Bid, BIDDER represents, as more fully set forth in this Contract, that:
 - (a) BIDDER has examined copies of all the Contract Documents and of the following addenda: (If none, so state)

Date	August B, 2020 Number	# 1
	August 12, 2020	* -
	August 12,2020	#3
	August 17, 2020	#4
	August 18, 2020	#5

(receipt of all of which is hereby acknowledged) and also copies of the Notice to Bidders and the Instructions to Bidders;

(b) BIDDER has examined the site and locality where the Work is to be performed, the legal requirements (federal, state and local laws, ordinances, rules and regulations) and the conditions affecting cost, progress or performance of the Work and has made such independent investigations as BIDDER deems necessary;

OWNER.		This Bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation BIDDER has not directly or indirectly induced or solicited any other BIDDER to submit a false or sham Bid; BIDDER has not solicited or induced any person firm or a corporation to refrain from bidding; and BIDDER has not sought by collusion to obtain for himself any advantage over any other Bidder or over the owner.
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4. BIDD	ER will	complete the	Work	for the	following	g prices(s):	(Attach Bid P	roposal)
---------	---------	--------------	------	---------	-----------	-----------	-----	---------------	----------

5.	BIDDER agrees to commence the Work within the number of calendar days or	by the
	specific date indicated in the Contract. BIDDER agrees that the Work will be com	
	within the number of Calendar days or by the specific date indicated in the contract.	

6. Th	ne following documents are attached to and made a condition of this Bid:
	(a) Non-Collusive Bidding Certificate (Attachment "A") ✓
	(b) Acknowledgment by Bidder (Attachment "B") ✓
	(c) Vendor Responsibility Questionnaire (Attachment "C") 🗸
	(d) Iranian Energy Divestment Certification (Attachment "D") ✓
	(e) MS-4-1 Certification Statement RE: Stormwater Discharges (Attachment "E")✓
	(f) Bidder Qualification Questionnaire (Attachment "F")
	(g) Non Interruption of Work Agreement (Attachment "G")√
	(h) Required Apprenticeship Training Program Documentation (refer to RFB Section 27) ✓

7. Communication concerning this Bid shall be addressed to:

t, Albany, NY 12206

8. Terms used in this Bid have the meanings assigned to them in the Contract and General Provisions.

COUNTY OF ALBANY

GC - BID FORM

BID IDENTIFICATION:

Title:

Albany County Sheriff's Office Public Safety Building Renovations

Bid Number: 2020-044-GC- General Construction

Conditions:

1. All bid prices must include all materials, labor, equipment, incidentals and other associated costs.

2. Base Bid work shall carry a 10% Base Bid Contingency Allowance for additional work discovered during construction beyond scope of work indicated on drawings and specifications. Contractor shall receive advance approval from the County Engineer prior to performing any additional work.

LUMP SUM BASE BID:

98,000

10 % CONTINGENCY ALLOWANCE:

79, 800 (b)

TOTAL BASE BID (a) + (b): Base Bid + 10% Contingency Allowance)

ALTERNATE #1 (GC-01):

Reconstruct Toilet Rooms 16 and 18

ALTERNATE #2 (GC-02):

Room 40 HVAC

ALTERNATE #3: (GC-03): Front Wing/Office Renovations 147,016

ALTERNATE #5: (G Fence Gate Motor	C-05):	s <u>8184</u>
ALTERNATE #6: (G		s 42,381
Existing Site Feature	Reconstruction	
ALTERNATE #7: (G Entrance Canopy Ar	s 18,693	
ALTERNATE #8: (G Ramp Window Repla		s 51,509
ALTERNATE #9: (G South Window Repla		\$ 105,210
,		
COMPANY:	AOW Associates, Inc.	and the second s
ADDRESS:	30 Essex Street	
CITY, STATE, ZIP:	Albany, NY 12206	
TEL. NO.:	518-482-3400	
FAX NO.:	518-482-3444	
FEDERAL TAX ID NO.:	14-1681183	
REPRESENTATIVE:	James A. Urner, Jr.	
E-MAIL:	jurner@aowassog.com/	
SIGNATURE AND TITLE		Vice President
DATE August 20, 20	20	

ATTACHMENT "A" NON-COLLUSIVE BIDDING CERTIFICATE PURSUANT TO SECTION 103-D OF THE NEW YORK STATE GENERAL MUNICIPAL LAW

- A. 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 organizations, under penalty of perjury, that to the best of knowledge and belief:
- (1) 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 with any competitor.
- (2) Unless otherwise required by law, the prices which have been quoted in this bid have not knowingly been disclosed by the bidder and will not knowingly be disclosed by the bidder, directly or indirectly, prior to opening, to any bidder or to any competitor.
- (3) 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.

A bid shall not be considered for award nor shall any award be made where (1), (2), and (3) above have not been complied with; provided, however, that in any case the bidder cannot make the foregoing certification, the bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons thereof. Where (1), (2), and (3) above have not been complied with, the bid shall not be considered for any award nor shall any award be made unless the head of the Purchasing Unit to the political subdivision, public department, agency or official thereof to which the bid is made, or his designee, determines that such disclosure was not made for the purpose of restricting competition.

The fact that a bidder (a) has published price lists, rates, or tariffs covering items being procured, (b) has informed prospective customer of proposed or pending publication of new or revised price lists for such items, or (c) has sold the same items to other customers at the same prices being bid, does not constitute, without more, a disclosure within the meaning of paragraph "A" above.

B. Any bid hereafter made to any political subdivision of the state or any public department, agency or official thereof by a corporate bidder for work or services performed or to be performed or goods sold or to be sold, where competitive bidding is required by statute, rule, regulation, local law, and where such bid contains the certification referred to in paragraph "A" of this section, shall be deemed to have been authorized by the Board of Directors of the bidder, and such authorization shall be deemed to include the submission of the bid and the inclusion therein of the certificate as to non-collusion as the act and deed of the corporation

Signature

Vice President
Title

August 20, 2020

Date

AOW Assoicates, Inc.

Company Name

ATTACHMENT "B" ACKNOWLEDGMENT BY BIDDER

If Individual or Individuals: STATE OF **COUNTY OF** _____, 20__, before me personally appeared day of to me known and known to me to be the same person(s) described in and who executed the within instrument, and he (or they severally) acknowledged to me that he (or they) executed the Notary Public, State of Qualified in _____ Commission Expires _____ If Corporation: STATE OF New York SS.: COUNTY OF Albany On this **20th** day of **August**, 20**20**, before me personally appeared James A. Urner, Jr. to me known, who, being by me sworn, did say that he resides at (give address) Delmar, NY ; that he is the Vice President
AOW Associates, Inc. the (name of corporation) , the corporation described in and which executed the above instrument; that he knows the seal of the corporation, and that the seal affixed to the instrument is such corporate seal; that it was so affixed by order of the board of directors of the corporation, and that he signed his name thereto by like order. Courtney A Vrabet Notary Public, State of New York Reg. No. 01VR6347773 Notary Public, State of New York alified in Schenectady Cour Commission Expires 09/12/202 Qualified in Schenectady Commission Expires September 20, 2024 If Partnership: STATE OF SS.: COUNTY OF __, 200___, before me personally came____ On the ____day of_ , to me known to be the individual who executed the foregoing, and who, being duly sworn, did depose and say that he / she is a partner of the firm of__ / she has the authority to sign the same, and acknowledged that he / she executed the same as the act and deed of said partnership. Notary Public, State of Qualified in _____ Commission Expires

ATTACHMENT "C" ALBANY COUNTY VENDOR RESPONSIBILITY QUESTIONNAIRE

1. VENDOR IS:						
🛛 PRIME CONTRACTOR						
2. VENDOR'S LEGAL BUSINESS NAM AOW Assocaites, Inc.	3. IDENTIFICATION NUMBERS a) FEIN # 14-1681183 b) DUNS #					
4. D/B/A – Doing Business As (if applicable) & COUNTY FIELD:			5. WEBSITE ADD	RESS (if a	pplicable)	
6. ADDRESS OF PRIMARY PLACE OF 30 Essex Street, Albany, N	CE	7. TELEPHONE NUMBER 518-482-340	00	8. FAX NUMBER 518-482-3444		
9. ADDRESS OF PRIMARY PLACE OF BUSINESS/EXECCUTIVE OFFICE IN NEW YORK STATE, if different from above			10. TELEPHONE NUMBER		11. FAX NU	JMBER
12. AUTHORIZED CONTACT FOR THIE QUESTIONNAIRE Name Nicole Armsby Title CFO Telephone Number 518-482-3400 Fax Number 518-482-3444 e-mail narmsby@aowassoc.com						
13. LIST ALL OF THE VENDOR'S PRI		I				
a) NAME Richard A. Oliver	TITLE President	1	Debra Oliver TITLE Secretary			
c) NAME James A. Urner, Jr	TITLE Vice President	d) NAME	Craig Kennedy	TITLE V	ice Presid	lent
A DETAILED EXPLANATION IS REQUIRED FOR EACH QUESTION ANSWERED WITH A "YES," AND MUST BE PROVIDED AS AN ATTACHMENT TO THE COMPLETED QUESTIONNAIRE. YOU MUST PROVIDE ADEQUATE DETAILS OR DOCUMENTS TO AID THE COUNTY IN MAKING A DETERMINATION OF VENDOR RESPONSIBILITY. PLEASE NUMBER EACH RESPONSE TO MATCH THE QUESTION NUMBER.						
14. DOES THE VENDOR USE, OR HAS IT USED IN THE PAST FIVE (5) YEARS, ANY OTHER BUSINESS NAME, FEIN, or D/B/A OTHER THAN THOSE LISTED IN ITEMS 2-4 ABOVE? List all other business name(s), Federal Employer Identification Number(s) or any D/B/A names and the dates that these names or numbers were/are in use. Explain the relationship to the vendor.						
TO THE VENDOR, INCLUDING PAST ONE (1) YEARS HAVE SE	TO THE VENDOR, INCLUDING PRICIPAL OWNERS AND OFFICERS, WHO NOW SERVE OR IN THE					T No
a) An elected or appointed pub List each individual's name, to, and dates of service	lic official or officer? business title, the name of the or	ganization o	and position elected o	r appointed	☐ Yes ☐ Yes	₩ INO
	arty organization in Albany Coun business title or consulting cape is.			ition held	☐ Yes	M No

16.	OR CO OR MO SHAR	N THE PAST (5) YEARS, HAS THE VENDOR, ANY INDIVIDUALS SERVING IN MANAGERIAL INSULTING CAPACITY, PRINCIPAL OWNERS, OFFICERS, MAJOR STOCKHOLDER(S) (10% ORE OF THE VOTING SHARES FOR PUBLICLY TRADED COMPANIES, 25% OR MORE OF THE SES FOR ALL OTHER COMPANIES), AFFLITIATE OR ANY PERSON INVOLVED IN THE NIGOR CONTRACTING PROCESS:		
	a)	been suspended, debarred or terminated by a local, state or federal authority in connection with a contract or contracting process;	☐ Yes	₩No
		2. been disqualified for cause as a bidder on any permit, license, concession franchise or lease;		
		3. entered into an agreement to a voluntary exclusion from bidding/contracting;		
		 had a bid rejected on an Albany County contract for failure to comply with the MacBride Fair Employment Principles; 		
		had a low bid rejected on a local, state or federal contract for failure to meet statutory affirmative action or M/WBE requirements on a previously held contract;		
		 had status as a Women's Business Enterprise, Minority Business Enterprise or Disadvantaged Business Enterprise, de-certified, revoked or forfeited; 		
		 been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any local, state or federal government contract; 		
		been denied an award of a local, state or federal government contract, had a contract suspended or had a contract terminated for non-responsibility; or		
		had a local, state or federal government contract suspended or terminated for cause prior to the completion of the term of the contract.		
	b)	been indicted, convicted, received a judgment against them or a grant of immunity for any business-related conduct constituting a crime under local, state or federal law including but not limited to, fraud extortion, bribery, racketeering, price-fixing, bid collusion or any crime related to truthfulness and/or business conduct?	☐ Yes	₩No
	c)	been issued a citation, notice, violation order, or are pending an administrative hearing or proceeding or determination of violations of:	☐ Yes	₩ No
		1. federal, state or local health laws, rules or regulations.		
17.	JUDG AGEN Indica judgm	E PAST THREE (3) YEARS, HAS THE VENDOR OR ITS AFFILIATES 1 HAD ANY CLAIMS, MENTS, INJUNCTIONS, LIENS, FINES OR PENALTIES SECURED BY ANY GOVERNMENTAL CY? te if this is applicable to the submitting vendor or affiliate. State whether the situation(s) was a claim, ent, injunction, lien or other with an explanation. Provide the name(s) and address(es) of the agency, the trof the original obligation and outstanding balance. If any of these items are open, unsatisfied, indicate	Yes	No
<u> </u>	the sta	tus of each item as "open" or "unsatisfied."		
18.	DURI	NG THE PAST THREE (3) YEARS, HAS THE VENDOR FAILED TO:		
	a)	file returns or pay any applicable federal, state or city taxes? Identify the taxing jurisdiction, type of tax, liability year(s), and tax liability amount the vendor failed to file/pay and the current status of the liability.	☐ Yes	No
	b)	file returns or pay New York State unemployment insurance? Indicate the years the vendor failed to file/pay the insurance and the current status of the liability.	☐ Yes	No
	c)	Property Tax Indicate the years the vendor failed to file.	Yes	No
19.	ITS A BANI REGA Indica and F	EANY BANKRUPTCY PROCEEDINGS BEEN INITIATED BY OR AGAINST THE VENDOR OR FFILIATES I WITHIN THE PAST SEVEN (7) YEARS (WHETHER OR NOT CLOSED) OR IS ANY KRUPTCY PROCEEDING PENDING BY OR AGAINST THE VENDOR OR ITS AFFILIATES IRDLESS OR THE DATE OF FILING? It if this is applicable to the submitting vendor or affiliate. If it is an affiliate, include the affiliate's name EIN. Provide the court name, address and docket number. Indicate if the proceedings have been initiated, in pending or have been closed. If closed, provide the date closed.	☐ Yes	No
20.	BELI IT? Paragraphics Ration	E VENDOR CURRENTLY INSOLVENT, OR DOES VENDOR CURRENTLY HAVE REASON TO EVE THAT AN INVOLUNTARY BANKRUPTCY PROCEEDING MAY BE BROUGHT AGAINST rovide financial information to support the vendor's current position, for example, Current Ration, Debt n, Age of Accounts Payable, Cash Flow and any documents that will provide the agency with an standing of the vendor's situation.	Yes	No

21.	IN THE PAST FIVE (5) YEARS, HAS THE VENDOR OR ANY AFFILIATES :	☐ Yes	No
	 a) defaulted or been terminated on, or had its surety called upon to complete, any contract (public or private) awarded; 		
	Indicate if this is applicable to the submitting vendor or affiliate. Detail the situation(s) that gave rise to the negative action, any corrective action taken by the vendor and the name of the contracting agency.		

1 "Affiliate" meaning: (a) any entity in which the vendor owns more than 50% of the voting stock; (b) any individual, entity or group of principal owners or officers who own more than 50% of the voting stock of the vendor; or (c) any entity whose voting stock is more than 50% owned by the same individual, entity or group described in clause (b). In addition, if a vendor owns less than 50% of the voting stock of another entity, but directs or has the right to direct such entity's daily operations, that entity will be an "affiliate" for purposes of this questionnaire.

ALBANY COUNTY VENDOR RESPONSIBILITY QUESTIONNAIRE

FEIN#

State of: New York)	
County of: Albany) ss:	
CERTIFICATION:	
Albany in making a determination regarding an awa the County may in its discretion, by means which it made herein; acknowledges that intentional submiss under Penal Law Section 210.40 or a misdemeanor also be punishable by a fine and/or imprisonment of	is submitted for the express purpose of assisting the County of rd of contract or approval of a subcontract; acknowledges that may choose, verify the truth and accuracy of all statements ion of false or misleading information may constitute a felony under Penal Law Section 210.35 or Section 210.45, and may up to five years under 18 USC Section 1001 and may result in submitted in this questionnaire and any attached pages is true,
 submitting vendor; Has supplied full and complete responses information ad belief; Is knowledgeable about the submitting ve Understands that Albany County will rely into a contract with the vendor; 	contained in the questionnaire and any pages attached by the to each item therein to the best of his/her knowledge,
Name of Business AOW Associates, Inc.	Signature of Owner
Address 30 Essex Street	Printed Name of SignatoryJames A. Urner, Jr.
City, State, Zip Albany, NY 12206	Title Vice President
Swom before me this 30th day of AUGUST, 2020; BULTUY AAVABEL Notary Public	
Courtney A Vrabel Notary Public, State of New York Reg. No. 01VR6347773 Qualified in Schenectady County Commission Expires 09/12/2024	Nicole Armsby Printed Name Signature

CFO Date

Attachment "D" Certification Pursuant to Section 103-g Of the New York State General Municipal Law

- A. By submission of this bid/proposal, each bidder/proposer and each person signing on behalf of any bidder/proposer 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 its knowledge and belief that each bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the New York State Finance Law.
- B. A Bid/Proposal shall not be considered for award, nor shall any award be made where the condition set forth in Paragraph A above has not been complied with; provided, however, that in any case the bidder/proposer cannot make the foregoing certification set forth in Paragraph A above, the bidder/proposer shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor. Where Paragraph A above cannot be complied with, the Purchasing Unit to the political subdivision, public department, agency or official thereof to which the bid/proposal is made, or his designee, may award a bid/proposal, on a case by case business under the following circumstances:
 - 1. The investment activities in Iran were made before April 12, 2012, the investment activities in Iran have not been expanded or renewed after April 12, 2012, and the Bidder/Proposer has adopted, publicized and is implementing a formal plan to cease the investment activities in Iran and to refrain from engaging in any new investments in Iran; or
 - 2. The political subdivision makes a determination that the goods or services are necessary for the political subdivision to perform its functions and that, absent such an exemption, the political subdivision would be unable to obtain the goods or services for which the contract is offered. Such determination shall be made in writing and shall be a public document.

Signature

Vice President

Title

August 20, 2020

Date

AOW Associates, Inc.

Company Name

ATTACHMENT "E"

<u>Sheet MS4-1: Bidder/Proposer Certification Statement (to be used with Section 34 Part A – General Contracts)</u>

As a bidder seeking to provide services on behalf of Albany County, I certify under penalty of law that I understand and agree to comply with the terms and conditions of the New York State Pollutant Discharge Elimination System ("SPDES") General Permit for Stormwater Discharges from Municipal Separate Storm Sewer Systems (MS4 Permit) and Albany County Local Law 7 of 2007, and agree to implement any Best Management Practices or corrective actions identified by Albany County or an authorized representative thereof as necessary to maintain compliance. I understand that Albany County must comply with the terms and conditions of the aforementioned MS4 Permit, and that it is unlawful for any person to directly or indirectly cause or contribute to a violation of water quality standards. I am also aware that County Local Law 7 of 2007 prohibits any activities that cause or contribute to a violation of the County's SPDES permit. Further, I understand that any non-compliance by Albany County will not diminish, eliminate or lessen my own liability.

Name of Third Party Entity: AOW Associates, Inc. or their subcontractor [TBD]				
Address: 30 Essex Street				
Albany, NY 12206				
Phone Number(s): <u>518-482-3400</u>				
Description of activities to be performed by your firm to the Albany County Storm Water Management Pro- potential to generate or prevent pollution and/or aff	gram (SWMP) (include any activities that have the			
Minor work for two connecting sidewalks (350sf	f)			
Description of where the work is to be performed w	vithin Albany County facilities:			
Albany County Sheriff's Office, Clarksville, NY	ſ			
	that I			
	Signature			
	James A. Urner, Jr.			
	Printed Name			
	Vice President			
	Title			
	8/20/2020			
	Date			

The undersigned guarantees the accuracy of all statements and answers herein contained. (Please print in ink or type in the spaces provided). Attach additional sheets if necessary. This statement of Bidder's qualifications is required of all Bidders. Additional data on Bidder's qualifications may be requested from selected Bidders after the Bid opening.

1.	How many years has your firm been in business? years	3
2.	List up to three (3) projects of this nature that you have completed in the last three (3) years, are give the name, address and telephone number of a reference from each. Also give the completion date, the original contract bid price and the completed cost of each project listed.	
	1. See Attached	_
		_
	2	_
	3	

3.	List projects presently under contract by your firm, the dollar volume of the contract and the percentage completion of the contract.						
	See Attached						
4.	Has your firm ever failed to complete work awarded to it, if so, state where and why.						
	No						
5.	Is your firm presently or has your firm ever been a party defendant in a lawsuit commenced against your firm alleging failure to properly complete work in accordance with the contract for same; if so, give details.						
	No						

6.	Has your firm received two (2) final determinations within any consecutive six-year period, the second final determination occurring within the past five (5) years, that your firm willfully failed to pay the prevailing rate of wages or to provide supplements with Article 8 of the Labor Law, if so, give details.						
	No						
7.	Do you plan to sublet any part of this work? If so, give details.						
	Asbestos Abatement, Masonry, Structural Steel, Roofing, Aluminum Systems, Flooring,						
	Painting, Paving and Sidewalks						
8.	Give the name, address and telephone number of an individual who represents each of the following and whom the Owner may contact to investigate your financial responsibility: a surety, and a bank.						
	Kevin Garrity; Rose&Kiernan 99 Troy Road; East Greenbush, NY 12061; 518-244-4284						
	Patty Erwin;; NBT Bank, North American; 80 Wolf Road Suite 101, Albany, NY 12205; 518-437-4120						
	Matt Langevin Kamco Supply; 36 Railroad Avenue, Albany, NY 12205; 518-729-1122						

9.	Give a summary of your financial statement. (List assets and liabilities, use an insert sheet, if needed).
	Current Assets - \$11,260,000.00
	NET Assests [to include current] - \$11,710,000.00
	ST Liabilities - \$6,510,000.00
	NET Liabilities [to include ST] - \$6,510,000.00
	Retained Earnings + Equity -\$5,200,000.00
10	State the true, exact, correct and complete name of the partnership, corporation or trade name under which you do business, and the address of the place of business. (If a corporation, state the name and title of all officers. If a partnership, state the name of all partners. If a trade name, state the names of the individuals who do business under the trade name.) It is absolutely necessary that information be furnished.
	AOW Associates, Inc.
	Correct Name of Bidder
	(a) The business is a: Corporation
	(b) The address of principal place of business is: 30 Essex Street, Albany, NY 12206
	(c) The names of the corporate officers, or partners, or individuals doing business under a trade name, are as follows: Richard A. Oliver - President - Malden Bridge, NY
	James A. Urner, Jr Vice President - Delmar, NY
	Craig L. Kennedy - Vice President - Eagle Bridge, NY

11. Is your firm qualified to do business in the St If No, signing this qualification statement of prior to award of contract immediately upon of	constitutes agreement to obtain such qualification
	AOW Associates, Inc. Firm
Dated: August 20, 2020	By
	James A. Urner, Jr. (Typed)





Design-Construct Construction Management General Construction

Major Projects Completed - Last 5 Years - Last Updated 30 June, 2020								
Project Name/Owner/Contact	Contact Phone Number	Contact Email	Architect	Architect Phone Number	Date Completed	Contract Amount	% Complete with Own Forces	
lda Yarbrough Low Rise Development Phase II/ Steve Longo	518-641-7518	SLongo@albanyhousing.org	Dave Sadowsy	518-658-2830	Oct-19	\$20,443,600	10%	
lda Yarbrough Low Rise Development / Steve Longo	518-641-7518	SLongo@albanyhousing.org	Dave Sadowsy	518-658-2830	May-18	\$14,598,156	30%	
Martin Luther King Apartment Renovations Phase I / Tim O'Byrne	518-284-0884	tobyrne@BeaconCommunitiesLLC.com	RIDA Architecture	518-713-4537	Oct-18	\$9,487,154	35%	
AMC M2-M3 Patient Beds / Emilio Genzano	518-262-2897	GenzanE@mail.amc.edu	Hyman Hayes Associates	518-452-3740	Aug-19	\$7,892,197	25%	
St. Peter's Medical Oncology and Breast Center / Jonathan Otterbeck	518-271-5059	Jonalhan,Otterbeck@sphp.com	Envision Architects	518-462-1848	Aug-18	\$6,507,443	25%	
State University of New York, Albany Campus Onondaga & Oneida Reno / Bob Morawski	518-442-3435	rmorawski@uamail.albany.edu	Architecture +	518-272-4481	Dec-17	\$5,777,507	35%	
5 Rivers Environmental Education Center / Aaron Cook (OGS)	518-457-7895	Aaron.Cook@ogs.ny.gov	Envision Architects	518-462-1848	May-17	\$5,289,652	30%	
State University of New York Albany Campus Tower Elevator Reno / Samuel Gleason	518-257-3283	sgleason@dasny.org	Delta Engineers, Architects, and Land Surveyors, PC	315-953-4200	Aug-19	\$5,069,602	10%	
PACE Provincial House / David		Hyman Hayes Associates	518-452-3740	Oct-19	\$4,329,622	15%		
AMC Clara Barton Psychology		Hyman Hayes Associates	518-452-3740	Aug-19	\$3,396,058	25%		
Ortho NY Clifton Park ASC / Dr.		Hyman Hayes Associates	518-452-3740	Mar-19	\$3,279,096	30%		
Wesley Woodlawn Commons Exterior Façade Reno/ Ray Giesel	518-691-1474	RGeisel@thewesleycommunity.org	RIDA Architecture	518-713-4537	Oct-19	\$3,193,035	25%	
AMC D1 Servery Renovation / Emilio Genzano	518-262-2897	<u>GenzanE@mail.amc.edu</u>	Hyman Hayes Associates	518-452-3740	Jan-19	\$2,935,500	20%	
ASC Specialty Eye Surgery and Laser Center / Dr. Robert Schultze	518-475-1515	rlschultze@msn.com	Hyman Hayes Associates	518-452-3740	Dec-17	\$2,755,590	25%	
AMC MS Baseement Vivarium Phase 2 / Emilio Genzano	518-262.2897	<u>GenzanE@mail.amc.edu</u>	Hyman Hayes Associates	518-452-3740	Jul-19	\$2,578,811	20%	
AMC 66 Hackett / Emilio Genzano	518-262-2897	<u>GenzanE@mail.amc.edu</u>	Hyman Hayes Associates	518-452-3740	Nov-17	\$2,517,352	30%	
AMC SCC Second Floor Recovery/ Emilio Genzano	518-262-2897	<u>GenzanE@mail.amc.edu</u>	Hyman Hayes Associates	518-452-3740	May-18	\$2,401,191	30%	
Dolgeville Primary Care Clinic / Kathleen Jones	1-800-227-7388	Michael.Ogden@bassett.org	Morris Switzer Environments for Health	888-781-8841	Dec-20	\$2,389,737	20%	
AMC ED Renovation / Emilio Genzano	518-262-2897	<u>GenzanE@mail.amc.edu</u>	SMRT Architects & Engineers	877-700-7678	Apr-17	\$2,020,840	40%	



Design-Construct
Construction Management
General Construction

Major Projects in Progress - Last Updated 31 March, 2020

Project Name/Owner/Contact Contact Pho Number		Contact Email	Architect Architect Phone Number		Contract Value	% Complete	Date
Albany High School Phase 3 Addition and Renovation(Tumer) /Jon M Dawes Jr.	518-432-0277	jdawes@tcco.com	CS Arch	518-463-0868	\$26,696,300	0%	Sep-22
Martin Luther King Phase II / Tim O'Byrne	518-284-0884	tobyrne@BeaconCommunitiesLLC.com	RIDA Architecture	518-713-4537	\$10,799,100	15%	Nov-20
State University of New York, Albany Campus Building 35 Renovation / John Baldwin	518-442-3874	jbaldwin@albany.edu	JMZ Architects & Planners	518-793-0786	\$8,846,000	0%	Sep-21
Whiteface Mid-Station Lodge (Gilbane) / Bob Hammond (ORDA)	518-302-5332	bhammond@orda.orq	AES Northeast	518-561-1598	\$6,921,800	15%	May-21
Eastern Star Home/Jeffrey French	315-736-9311	ifrench@eshomeny.org	John W Baumgarten Architect PC	516-939-2333	\$6,779,500	65%	w
Fort Hudson Nursing Renovation / Andrew Cruikshank	518-747-2811	acruikshank@forthudson.com	Angerame Architects	518-454-9333	\$4,852,922	94%	Sep-20
SUNY Class Labs Phase VI / Walton Minkler	518-442-3435	wminkler@albany.edu	Architects & Planners PC	518-793-0786	\$3,210,131	60%	Sep-20
SCCC Begley Library Renovation / Tony Ward	518-477-0976	tward@akwconsult.com	Envision Architects	518-462-1848	\$2,868,805	60%	Aug-20

ATTACHMENT "G" NON-INTERRUPTION OF WORK AGREEMENT

By submission of the bid for:

The bidder agrees that if this bid is accepted, he/she will not intentionally engage in any course of conduct or activity, or employ for the purposes of performing the public work, any subcontractors, employees, labor or materials which will or may result in the interruption of the performance of the public work due to labor strife or unrest by workmen employed by the bidder or by any of the trades working in or about the public works and/or premises where the work is being performed.

Firm:	AOW Associates, Inc.
Ву:	The state of the s
_	(Signature)
_	James A. Urner, Jr.
	(Typed)
Title: _	Vice President
Date:	8/20/2020

Thomas J. Flynn Executive Secretary-Treasurer

www.nercc.org



David F. Haines Western NY Regional Manager

William Banfield Eastern NY Regional Manager

UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA

WALSON OF STANK

August 19, 2020

To Whom it May Concern,

This letter is to confirm that AOW Associates, Inc. is signatory to the North Atlantic Regional Council of Carpenters Collective Bargaining Agreement and participates in a registered and approved New York State Apprenticeship Training Program with the North Atlantic Apprenticeship Training Fund.

If you require any additional information, please feel free to contact our office.

Sincerely

James Margiotta

Council Representative

North Atlantic States Regional Council of Carpenters

cc: James Urner



Please send to your regional DOL office: State Campus, Bldg 12, Rm 459, Albany NY 12240

Apprenticeship Agreement

. Apprenti	iceship Agreeme	nt	Sponso	r No. <u>20077</u>		ATP Cod	le <u>1203</u>	7H		
Name of	Apprentice (Last, Fir	st, M.I.)	Social Sec	curity Number	Name of Program Sponsor New England Carpenters Apprenticeship Func				ship Fund	
Address of Apprentice (no. and street)			,		Physical address of Program Sponsor (no. and street) 16 Corporate Circle					
City	County		State	Zip code	City Albany	Count , Albany	,	12203	State	Zip code
A. Ethnic	ooth A and B Group		Not Hispanic or La	atino	SAME					
	☐ Black/African Ar	nerican 🔲 Am	erican Indian/Ala ander	ska Native	City	Count	у		State	Zip code
	Veteran Home & C ☐ Yes H	ell phone numbe	rs Birth date		2. Trade: (☐ Time-based	☐ Com	petency-base	d ☑⊦	lybrid
□F	□ No C		E-mail addre			enter				
Has the a Apprentic	apprentice received a ceship Program? Trade	any Certificate of Yes 🛭 No		a State or Federal ate	3.Start Dat	e 4. Length of (Months) Hybrid		5. DOL Appro Period for Co (Months) 12	ompletion	
	ed and Supplemental England Ca			• •	, Alban	RI Comper Yes ☑ No	nsated	I .		-Worker Rate vage rates
_	for previous training	•	Mon		Points		Sections			
	instatement	cational Education					Points [☐ Sections		
1 1	2	3	4	5	6	7	8	9		10
ļ										
50%	60%	65%	70%	80%			<u> </u>			
		The Spons	or and the App	orentice Agree to	the Terms	on Page 2 o	f this Fo	rm.	,	
Signatu	re of Apprentice and Pa	arent/Guardian if aç	je 16-17	Date	Signature	of Official Sponso	or Represen	tative		Date
Reg	gistered by the New Y	ork State Depar	tment of Labor:					To ATC	State Use Date	
	Cionatus	Now York State	Department of L	ahor	/ / To DLEA Date Rank Verify					
					_			Data Ent		
	THE DEPART	MENT OF LABOR	MUST RECEIVE T	HIS AGREEMENT WI	THIN 30 CALE	NDAR DAYS OF	THE REQU	ESTED START	DATE.	
	te Training Comp : Completed Wor		☐ Terminated f	for Cause Qu	iit 🔲 Lay (Lack of		ram Termi	nation 🔲	Transfer	
•	or Termination Date)	— (Cxpidiii ii i	Commence	(Laut o	110.1.			State Us	
Comments						To ATC	<u> </u>			
								Data En	try	
Signatu	re of Official Sponsor R	•			Print Na					
	THE DEPART	MENT OF LABOR	MUST RECEIVE TH	HIS FORM WITHIN 30	CALENDAR D	AYS OF THE CO	MPLETION	I/TERMINATION	I DATE.	
III. RI Cor	mpletion			STATE USE	ONLY				State Us	
☐ Apprent	tice has satisfied the tice has not satisfied	RI requirements. the RI requirements	Completion datents.	e:				To ATC	Dat ——	e Init. — ———
					Dank!-			To DLEA Data Ent		
Si	onature of DLEA Repre	sentative	Date		Print Na	116				

Apprenticeship Agreement Terms

- 1. The program Sponsor agrees:
 - a. To employ the Apprentice to learn the craft or trade described above. Training and employment must conform to the terms and conditions for this trade in the Sponsor's registered program.
 - b. That equal opportunity applies to all phases of apprenticeship employment and training. There will be no discrimination because of race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status, or arrest record.
 - c. To give reasonable notice to the Apprentice of any proposed adverse action, unless the collective bargaining agreement provides for another process. Layoff for lack of work does not require an advance notice.
- 2. The Apprentice agrees:
 - a. To perform diligently and faithfully the work of the trade or craft as presented in the terms and conditions of this program and as outlined in the Work Processes.
 - b. To maintain a record documenting task rotation.
 - i. The Sponsor agrees to ensure compliance.
 - c. To complete or fulfill a minimum of 144 hours of Related and Supplemental Instruction (RI) per year.
 - i. Participation in RI is mandatory.
 - d. That the Sponsor may arrange for the Intra-Program transfer of the Apprentice from one signatory employer to another. This is to ensure training and reasonably continuous employment.
- 3. The Apprentice and Sponsor agree:
 - a. That the Apprentice has not completed a State/Federal Apprenticeship Program (excluding the Department of Correctional Services) for the trade of indenture or a related trade.
 - b. To comply with the State Labor Law and applicable Regulations, including promptly providing reports and information.
 - c. That a Sponsor that cannot fulfill the obligations under the apprenticeship agreement may (with the consent of the Apprentice) transfer the agreement to another Sponsor of a registered program. The Labor Commissioner must receive written notice of the transfer. The Apprentice must receive full credit for the satisfactory period of the served apprenticeship.
 - d. That the Apprentice is not registered until this form is signed by the authorized New York State Department of Labor representative.
- 4. During the Department of Labor (DOL) Apprentice Probation Period, the Sponsor or the Apprentice may cancel this agreement without adverse impact on the program's completion rate, however Apprentice turnover may be considered when reviewing the quality of a program's performance.
- 5. After the DOL Apprentice Probation Period:
 - a. This agreement may be cancelled at the request of the Apprentice.
 - b. The Sponsor may suspend or cancel for good cause. The Apprentice must receive proper notice and must have a reasonable opportunity for corrective action. There must be written notice to the Apprentice and the Department of the final action taken.
- 6. If a controversy grows from this agreement, it may be submitted to the Apprentice Training Office listed on the front if it is not settled locally or covered by a collective bargaining agreement.

Instructions

I. Apprenticeship Agreement

- 1. Sponsor Information Block: Enter information as it appears on the Apprentice Training Program Registration Agreement, (AT 10).
- 2. Trade: Enter the name of the trade the Apprentice will be trained in, as it appears on the AT 10. Indicate the Training Approach.
- Start Date (Leave blank if submitting with new program application): Enter the requested start date of the proposed Apprentice.
 The Apprentice and Sponsor representative must sign the form either prior to, or on the Apprentice's start date. (Must be received by DOL within 30 days of the start date).
- 4. Length of Program: Enter the term (in months) of the program.
- 5. DOL Apprentice Probation Period for Completion Rates: Enter, in months, 25% of the length of the program, or one year, whatever is shorter.
- 6. RI: Enter the official name of provider and geographic location. Indicate if the Apprentice is compensated while attending RI.
- 7. Minimum Journeyworker Rate: Enter Journeyworker rate as it appears on the AT 10.
- 8. Credit for Previous Training or Experience: When giving credit to an Apprentice, check the correct box, enter the credit in months or points/sections and include a letter of justification. This must have dates, names of previous employers, and a description of the credit acquired.
- Apprentice Wage Progression: Enter the wage rate schedule for the trade as shown on the AT 10.
 Signatures: This form must be signed by the Apprentice, Apprentice's parent/guardian (if applicable), and Sponsor representatives.
 After signing, immediately send it to the Apprentice Training Office indicated in the upper right corner.

II. Worksite Training Completion or Termination

- 1. Completion/Termination: Check the correct box.
 - a. Completed Worksite Training: The Apprentice has satisfactorily completed worksite training.
 - b. **Terminated for Cause**: The Apprentice was terminated for cause. Explain in comments section. Examples: Failure to attend/complete RI; Apprentice misconduct; Failure to maintain proper records; Unable to perform duties.
 - c. Quit: The Apprentice terminated training by resignation.
 - d. Layoff (Lack of Work): The Apprentice was terminated from training by layoff due to lack of work.
 - e. Program Termination: The Apprentice was terminated from training because the program was terminated/deregistered.
 - f. Transfer: The Apprentice is transferred between programs in the same trade. The Apprentice and Sponsors are all in agreement, and the Apprentice is provided with a transcript of RI and On-The-Job Training by the transferring Sponsor.
- 2. Completion or Termination Date: Enter the exact date the Apprentice completed or was terminated.
- 3. Signature: The official Sponsor representative must sign and date this form.

Bid Bond

CONTRACTOR:
Name, legal status and address)
A.O.W. ASSOCIATES, INC.
30 Essex Street
Albany, NY 12206



A I A Document A310™ – 2010

Bond # AOWA8-14-20-2

SURETY:

(Name, legal status and principal place of business)

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA One Tower Square Bond & Financial Products Hartford, CT 06183 This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

OWNER:

(Name, legal status and address)

Albany County 16 Eagle Street Albany, NY 12207

BOND AMOUNT: Five Percent (5.00%) of the Amount Bid

PROJECT: Sheriffs Office Public Safety Building Renovations, RFP#2020-044 (Name, location or address, and Project number, if any)

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 (I) 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.

Signed and sealed this 14th day of August, 2020	
(Witness)	A.O.W ASSOCIATES, FUC. (Principal) (Seal)
(**************************************	James A. Urner, Jr., Vice President TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA
(Witness)	(Surety) (Seal)
	Renee A. Manny, Attorney-in-fact
CAUTION: You should sign an original AIA Contract Document, changes will not be obscured	on which this text appears in RED. An original assures that

STATE OF NEW YORK)
COUNTY OF RENSSELAER)

Bond No. AOWA8-14-20-2

C	On this 14th day of August, 2020 before me personally came
0	James A. Urner, Jr. to me known, being sworn
R	by me, did depose and say that he/she resides in Glenmont, NY
P	that he/she is the Vice President of A.O.W. ASSOCIATES, INC.
0	the corporation described in and which
R	executed the above instrument; that he/she knows the said seal of such
A	corporation; that the seal affixed to said instrument is such corporate
T	seal; and that it was so affixed by the order of the Board of Directors of
I	said corporation, and that he/she signed his/her name thereto by like order.
0	January Vandar
N	Sworn to and acknowledged on the above date,
	JENNIFERS. VANAT Notary Public, State of New York
	Qualified in Columbia County
COUNTY	C OF RENSSELAER) Reg # 01VA6135808 Commission Expires Oct. 24, 20
	Commission Expires Oct. 24, 20 74
S	On this 14th day of August, 2020 before me personally came
U	Renee A. Manny to me known who resides in Rensselaer, NY
R	and duly sworn and says that he/she is the Attorney-in-fact of
E	the TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA
T	and knows the corporate seal and that it was affixed thereto by order of the
Y	Board of Directors by Power of Attorney of said Company; of which a certified
_	copy is attached; and that he/she signed said instrument as an Attorney-in-Fact
	of said Company by like authority.
	Sworn to and acknowledged on the above date,
	// JENNIFER \$. VANAT
	Notary Public, State of New York Qualified in Quambia County
_	Reg # 01VA6135808
I	STATE OF NEW TORK) Commission Expires Oct. 24 200
N	COUNTY OF)
D -	On this day of 20, before me personally came
I	to me known and known to me to be
V	the person described in and who executed the foregoing instrument and
I	he thereupon acknowledged to me that he executed the same.
D D	the chereupon acknownedged to me that he executed the bame.
A	Sworn to and acknowledged on the above date,
_	bwolii to and deinientedged on the above acce,



Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company St. Paul Fire and Marine Insurance Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Kevin Garrity, Christopher Terzian, Stephen J. Donnelly, Renee A. Manny, Judy Tomlinson, Lori Francett, Audrey J. Danielsen, Tanya M. Volk, John F. Murray Jr., Mary Dixon, Diane M. Peligian, and John C. Tickner of East Greenbush, New York their true andlawfulAttorney-in-Facttosign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February, 2017.







State of Connecticut

City of Hartford ss.

On this the **3rd** day of **February**, **2017**, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 14th

day of August

CONR. CONR.



Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880. Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA

HARTFORD, CONNECTICUT 06183

FINANCIAL STATEMENT AS OF DECEMBER 31, 2019

AS FILED IN THE STATE OF NEW YORK

CAPITAL STOCK \$ 6,480,000

ASSETS		LIABILITIES & SURPLUS			
CASH AND INVESTED CASH BONDS STOCKS INVESTMENT INCOME DUE AND ACCRUED OTHER INVESTED ASSETS PREMIUM BALANCES NET DEFERRED TAX ASSET REINSURANCE RECOVERABLE SECURITIES LENDING REINVESTED COLLATERAL ASSETS RECEIVABLES FROM PARENT, SUBSIDIARIES AND AFFILIATES ASSUMED REINSURANCE RECEIVABLE AND PAYABLE OTHER ASSETS	\$ 90,238,215 3,590,884,327 297,933,044 37,250,410 3,986,514 263,364,263 52,134,926 31,203,529 3,732,602 11,831,826 567,396 3,574,988	UNEARNED PREMIUMS LOSSES LOSS ADJUSTMENT EXPENSES COMMISSIONS TAXES, LICENSES AND FEES OTHER EXPENSES CURRENT FEDERAL AND FOREIGN INCOME TAXES REMITTANCES AND ITEMS NOT ALLOCATED AMOUNTS WITHHELD / RETAINED BY COMPANY FOR OTHERS RETROACTIVE REINSURANCE RESERVE ASSUMED POLICYHOLDER DIVIDENDS PROVISION FOR REINSURANCE ADVANCE PREMIUM PAYABLE FOR SECURITIES LENDING CEDED REINSURANCE NET PREMIUMS PAYABLE OTHER ACCRUED EXPENSES AND LIABILITIES TOTAL LIABILITIES	\$ 1,079,715,557 772,047,572 174,714,866 46,970,467 14,728,588 43,134,646 12,674,197 17,964,746 26,565,278 826,255 11,482,845 9,837,205 2,140,883 3,732,602 46,059,812 421,937 \$ 2,263,017,456		
		CAPITAL STOCK PAID IN SURPLUS OTHER SURPLUS TOTAL SURPLUS TO POLICYHOLDERS	433,803,760 1,683,400,804 \$ 2,123,684,564		
TOTAL ASSETS	\$ 4,386,702,020	TOTAL LIABILITIES & SURPLUS	\$ 4,386,702,020		

STATE OF CONNECTICUT

)

COUNTY OF HARTFORD

) SS.)

CITY OF HARTFORD

MICHAEL J. DOODY, BEING DULY SWORN, SAYS THAT HE IS VICE PRESIDENT - FINANCE, OF TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA, AND THAT TO THE BEST OF HIS KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT STATEMENT OF THE FINANCIAL CONDITION OF SAID

COMPANY AS OF THE 31ST DAY OF DECEMBER, 2019.

VICE PRESIDENT - FINANCE

SUBSCRIBED AND SWORN TO BEFORE ME THIS 26TH DAY OF MARCH, 2020

SUSAN M. WEISSLEDER

Notary Public

NOTARY PUBLIC

My Commission Expires November 30, 2022