

COUNTY OF ALBANY

BID FORM

BID IDENTIFICATION:

Title: Elevator Preventative Maintenance
Bid Number: 2025-039

THIS BID IS SUBMITTED TO:

Pamela O Neill, Purchasing Agent
Albany County Department of General Services
Purchasing Division
112 State Street, Room 820
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	Number
11/12/25	# 1
11/17/25	# 2

(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;

BF1

(c) 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.

4. BIDDER will complete the Work for the following prices(s): (Attach Bid Proposal)

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 completed within the number of Calendar days or by the specific date indicated in the contract.

6. The 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) If applicable

7. Communication concerning this Bid shall be addressed to:

ANDREW N. DI NOVO - RONE
25 POST RD.
ALBANY, N.Y. 12205
Phone: 518-229-0069

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

Harold L. Joyce Albany County Office Building			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 288.50		\$ 10,386.00
Elevator#2	\$ 288.50		\$ 10,386.00
Elevator#3	\$ 288.50		\$ 10,386.00
Elevator#4	\$ 288.50		\$ 10,386.00
Elevator#5	\$ 288.50		\$ 10,386.00
Elevator#6	\$ 288.50		\$ 10,386.00
		Total of Section A	\$ 62,316.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		
B2	Prevailing Wage for Helper		\$ 57.73
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 40.41
			\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5		Total of Section B
			\$ 2944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2		Total of Section C
			\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 65,500.20

Albany County Department of Social Services 162 Washington			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 250.00		\$ 9,000.00
Elevator#2	\$ 250.00		\$ 9,000.00
		Total of Section A	\$ 18,000.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		\$ 57.73
B2	Prevailing Wage for Helper		\$ 40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 21,184.20

Albany County Department of Health 175 Green Street			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 110.00		\$ 3,960.00
		Total of Section A	\$ 3,960.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		\$ 57.73
B2	Prevailing Wage for Helper		\$ 40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 7,144.20

Albany County Department of Mental Health 260 South Pearl Street			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 110.00		\$ 3,960.00
		Total of Section A	\$ 3,960.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		\$ 57.73
B2	Prevailing Wage for Helper		\$ 40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 7,144.20

Albany County Court House 16 Eagle Street			
CONTRACT#1			
A: Montly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 310.00		\$ 11,160.00
Elevator#2	\$ 310.00		\$ 11,160.00
Elevator#3	\$ 310.00		\$ 11,160.00
Elevator#4	\$ 310.00		\$ 11,160.00
		Total of Section A	\$ 44,640.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic	\$	57.73
B2	Prevailing Wage for Helper	\$	40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)	\$	98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 46,824.20

Albany County Judicial Center 6 Lodge Street			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 315.75		\$ 11,367.00
Elevator#2	\$ 315.75		\$ 11,367.00
Elevator#3	\$ 315.75		\$ 11,367.00
Elevator#4	\$ 315.75		\$ 11,367.00
		Total of Section A	\$ 45,468.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		\$ 57.73
B2	Prevailing Wage for Helper		\$ 40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 48,652.20

Albany County Family Court 30 Clinton Ave			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 310.00		\$ 11,160.00
Elevator#2	\$ 310.00		\$ 11,160.00
Elevator#3	\$ 310.00		\$ 11,160.00
Elevator#4	\$ 310.00		\$ 11,160.00
Elevator #5	\$ 310.00		\$ 11,160.00
		Total of Section A	\$55,800.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic	\$	57.73
B2	Prevailing Wage for Helper	\$	40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)	\$	98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 58,984.20

Mercantile 60 South Pearl			
CONTRACT#1			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 138.00		\$ 4,968.00
Elevator#2	\$ 138.00		\$ 4,968.00
		Total of Section A	\$ 9,936.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		\$ 57.73
B2	Prevailing Wage for Helper		\$ 40.41
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$ 2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$ 13,120.20

Albany County Correctional Facility			
840 Albany Shaker Road			
CONTRACT#2			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 132.50		\$ 4,770.00
Elevator#2	\$ 132.50		\$ 4,770.00
Elevator#3	\$ 132.50		\$ 4,770.00
Elevator#4	\$ 132.50		\$ 4,770.00
Elevator#5	\$ 132.50		\$ 4,770.00
		Total of Section A	\$23,850.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		
B2	Prevailing Wage for Helper		\$ 57.73
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 40.41
			\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5		Total of Section B
			\$2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2		Total of Section C
			\$240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$27,034.20

Shaker Place Nursing and Rehabilitation Center			
100 Heritage Lane			
CONTRACT#3			
A: Monthly Maintenance			
	Monthly Maintenance Fee Per Month	36 Months	Total
Elevator#1	\$ 230.00		\$ 8,280.00
Elevator#2	\$ 230.00		\$ 8,280.00
Elevator#3	\$ 250.00		\$ 9,000.00
		Total of Section A	\$25,560.00
B: Repairs not defined by Maintenance Specifications			
B1	Prevailing Wage Rate for Mechanic		
B2	Prevailing Wage for Helper		\$ 57.73
B3	Prevailing Wage Rate for Mechanic Team (B1 + B2)		\$ 40.41
			\$ 98.14
B4	Percent Markup over Prevailing Wage Rate for team		200 %
B5	Estimated Total Repair Hours for contract		10 Hours
B6	Total bid for Repairs not defined by maintenance specifications		
	(B3xB4) + B3) x B5	Total of Section B	\$2,944.20
C: Parts/Materials not Defined by Maintenance Specifications			
C1	Percent Mark up Bid over Documented Cost from Manufacturer		20 %
C2	Estimated Total of Parts/Materials Cost for contract		\$200.00
C3	Total bid for Parts/Materials not Defined by Maintenance Specifications		
	(C1 x C2) + C2	Total of Section C	\$ 240.00
D: Grand Total Bid for Contract (Sum Totals for A + B+ C)			\$28,744.20

COUNTY OF ALBANY

BID FORM

BID IDENTIFICATION:

Title: Elevator Preventative Maintenance
Bid Number: 2025-039

COMPANY: KONE, Inc.
ADDRESS: 25 POST RD.
CITY, STATE, ZIP: ALBANY, N.Y. 12205
TEL. NO.: 518-229-0069
FAX NO.: 518-464-0014
FEDERAL TAX ID NO.: 36-2357423

CERTIFICATE OF REGISTRATION NUMBER
(ARTICLE 8 PUBLIC WORK CONTRACTOR REGISTRY)

25-64V74-CR (COPY ATTACHED)

REPRESENTATIVE: ANDREW N. DiNOVO

E-MAIL: ANDREW.DINOVO@KONE.COM

SIGNATURE AND TITLE Andrew N. DiNovo, SR. SALES EXECUTIVE

DATE 11/18/25

WE ARE YOUR DOL



DIVISION OF SAFETY AND HEALTH LICENSE AND CERTIFICATE UNIT, STATE OFFICE CAMPUS, BUILDING 12, ALBANY, NY 12226

CERTIFICATE OF CONTRACTOR REGISTRATION

This Certificate Entitles the Holder to Perform and Bid on Public Work and Covered Private Construction Projects in the State of New York, Subject to the Prevailing Wage Requirements of NYS Labor Law Article 8

KONE Inc.
One KONE Court
MOLINE, Illinois 61265
Phone Number: 3097435574
Registration Number: 25-64V74-CR
Date of Issue: 2025-01-08
Expiration Date: 2027-01-08

(This license is valid only for the contractor named above)

A handwritten signature in cursive script that reads "Roberta Reardon".

Roberta Reardon
Commissioner
New York State Department of Labor



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

SR. Sales EXECUTIVE

Title

Wong, Inc.

Company Name

11/18/25

Date

ATTACHMENT "B"
ACKNOWLEDGMENT BY BIDDER

If Individual or Individuals:

STATE OF _____)
 COUNTY OF _____) SS.:

On this _____ day of _____, 200__, before me personally appeared _____ 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 same.

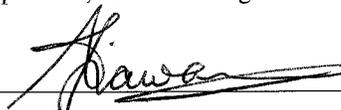
 Notary Public, State of _____
 Qualified in _____
 Commission Expires _____

If Corporation:

STATE OF New York)
 COUNTY OF Albany) SS.:

On this 20th day of November, 2025, before me personally appeared Andrew N. Dinovo to me known, who, being by me sworn, did say that he resides at (give address) 16 LEACT, Schenectady, N.Y. 12309; that he is the (give title) SR. SALES EXECUTIVE of the (name of corporation) KONE, INC., 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.

Anoeska Nandenle Jlawan
 Notary Public, State of New York
 Qualified in Schenectady County
 No. 01J10041744
 Commission Expires Sept. 18, 2029



 Notary Public, State of _____
 Qualified in _____
 Commission Expires _____

If Partnership:

STATE OF _____)
 COUNTY OF _____) SS.:

On the _____ day of _____, 200__, before me personally came _____ 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 _____ and that he / 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: <input checked="" type="checkbox"/> PRIME CONTRACTOR			
2. VENDOR'S LEGAL BUSINESS NAME KONE, Inc.		3. IDENTIFICATION NUMBERS a) FEIN # 36-2357423 b) DUNS # 00-526-2308	
4. D/B/A - Doing Business As (if applicable) & COUNTY FIELD: N/A		5. WEBSITE ADDRESS (if applicable) WWW.KONE.COM	
6. ADDRESS OF PRIMARY PLACE OF BUSINESS/EXECUTIVE OFFICE 25 Post Rd. Albany, N.Y. 12205		7. TELEPHONE NUMBER 518-464-0002	8. FAX NUMBER 518-464-0014
9. ADDRESS OF PRIMARY PLACE OF BUSINESS/EXECUTIVE OFFICE <i>IN NEW YORK STATE, if different from above</i> SAME AS ABOVE		10. TELEPHONE NUMBER —	11. FAX NUMBER —
12. AUTHORIZED CONTACT FOR THE QUESTIONNAIRE Name ANDREW DiNOVO Title Sr. Sales Executive Telephone Number 518-229-0069 Fax Number 518-464-0014 e-mail ANDREW.DINOVO@KONE.COM			
13. LIST ALL OF THE VENDOR'S PRINCIPAL OWNERS.			
a) NAME CORPORATION	TITLE	b) NAME	TITLE
c) NAME	TITLE	d) NAME	TITLE
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.		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
15. ARE THERE ANY INDIVIDUALS NOW SERVING IN A MANAGERIAL OR CONSULTING CAPACITY TO THE VENDOR, INCLUDING PRICIPAL OWNERS AND OFFICERS, WHO NOW SERVE OR IN THE PAST ONE (1) YEARS HAVE SERVED AS:		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
a) An elected or appointed public official or officer? <i>List each individual's name, business title, the name of the organization and position elected or appointed to, and dates of service</i>		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) An officer of any political party organization in Albany County, whether paid or unpaid? <i>List each individuals name, business title or consulting capacity and the official political position held with applicable service dates.</i>		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

16.	<p>WITHIN THE PAST (5) YEARS, HAS THE VENDOR, ANY INDIVIDUALS SERVING IN MANAGERIAL OR CONSULTING CAPACITY, PRINCIPAL OWNERS, OFFICERS, MAJOR STOCKHOLDER(S) (10% OR MORE OF THE VOTING SHARES FOR PUBLICLY TRADED COMPANIES, 25% OR MORE OF THE SHARES FOR ALL OTHER COMPANIES), AFFILIATE OR ANY PERSON INVOLVED IN THE BIDDING OR CONTRACTING PROCESS:</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<p>a) 1. been suspended, debarred or terminated by a local, state or federal authority in connection with a contract or contracting process;</p> <p>2. been disqualified for cause as a bidder on any permit, license, concession franchise or lease;</p> <p>3. entered into an agreement to a voluntary exclusion from bidding/contracting;</p> <p>4. had a bid rejected on an Albany County contract for failure to comply with the MacBride Fair Employment Principles;</p> <p>5. 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;</p> <p>6. had status as a Women's Business Enterprise, Minority Business Enterprise or Disadvantaged Business Enterprise, de-certified, revoked or forfeited;</p> <p>7. been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any local, state or federal government contract;</p> <p>8. 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</p> <p>9. had a local, state or federal government contract suspended or terminated for cause prior to the completion of the term of the contract.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<p>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?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<p>c) been issued a citation, notice, violation order, or are pending an administrative hearing or proceeding or determination of violations of:</p> <p>1. federal, state or local health laws, rules or regulations.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.	<p>IN THE PAST THREE (3) YEARS, HAS THE VENDOR OR ITS AFFILIATES 1 HAD ANY CLAIMS, JUDGMENTS, INJUNCTIONS, LIENS, FINES OR PENALTIES SECURED BY ANY GOVERNMENTAL AGENCY?</p> <p>Indicate if this is applicable to the submitting vendor or affiliate. State whether the situation(s) was a claim, judgment, injunction, lien or other with an explanation. Provide the name(s) and address(es) of the agency, the amount of the original obligation and outstanding balance. If any of these items are open, unsatisfied, indicate the status of each item as "open" or "unsatisfied."</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
18.	<p>DURING THE PAST THREE (3) YEARS, HAS THE VENDOR FAILED TO:</p> <p>a) file returns or pay any applicable federal, state or city taxes? <i>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.</i></p> <p>b) file returns or pay New York State unemployment insurance? <i>Indicate the years the vendor failed to file/pay the insurance and the current status of the liability.</i></p> <p>c) Property Tax <i>Indicate the years the vendor failed to file.</i></p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19.	<p>HAVE ANY BANKRUPTCY PROCEEDINGS BEEN INITIATED BY OR AGAINST THE VENDOR OR ITS AFFILIATES 1 WITHIN THE PAST SEVEN (7) YEARS (WHETHER OR NOT CLOSED) OR IS ANY BANKRUPTCY PROCEEDING PENDING BY OR AGAINST THE VENDOR OR ITS AFFILIATES REGARDLESS OR THE DATE OF FILING?</p> <p>Indicate if this is applicable to the submitting vendor or affiliate. If it is an affiliate, include the affiliate's name and FEIN. Provide the court name, address and docket number. Indicate if the proceedings have been initiated, remain pending or have been closed. If closed, provide the date closed.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20.	<p>IS THE VENDOR CURRENTLY INSOLVENT, OR DOES VENDOR CURRENTLY HAVE REASON TO BELIEVE THAT AN INVOLUNTARY BANKRUPTCY PROCEEDING MAY BE BROUGHT AGAINST IT? Provide financial information to support the vendor's current position, for example, Current Ration, Debt Ration, Age of Accounts Payable, Cash Flow and any documents that will provide the agency with an understanding of the vendor's situation.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

21. IN THE PAST FIVE (5) YEARS, HAS THE VENDOR OR ANY AFFILIATES¹ :

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.

COUNTY OF ALBANY
DEPARTMENT OF GENERAL SERVICES PURCHASING DIVISION
112 STATE STREET, ROOM 820, ALBANY, NY 12207
TELEPHONE: 518-447-7140/ FAX: 518-447-5588
Pamela.oneill@albanycountyny.gov

TITLE: ELEVATOR PREVENTATIVE MAINTENANCE AND
REPAIR SERVICES RFB NUMBER: 2025-039

Receipt Confirmation Form

Please complete and return this confirmation form as soon as possible:

Pamela O Neill
Purchasing Agent
County of Albany
112 State Street, Room 820
Albany, NY 12207

**IF YOU PLAN TO SUBMIT A BID, YOU MUST RETURN
THIS FORM TO ENSURE THAT YOU WILL RECEIVE ALL
FURTHER COMMUNICATION REGARDING THIS RFB.**

Company Name: KONE, INC.
Address: 25 POST Rd.
City: ALBANY State: N.Y. Zip Code: 12205
Contact Person: ANDREW N. DINOVO
Title: SR. SALES EXECUTIVE
Phone Number: 518-229-0069 Fax Number: 518-464-0014 E-Mail: ANDREW.DINOVO@KONE.COM

If a Bidders/Proposers meeting has been arranged for this Bid/RFP, please indicate if you plan to attend:
 Yes / No

I authorize the County of Albany to send further correspondence that the County deems to be of an urgent nature by the following method (check):

Fax Number: _____ E-Mail: ANDREW.DINOVO@KONE.COM

COUNTY OF ALBANY

**ELEVATOR PREVENTATIVE MAINTENANCE AND REPAIR
SERVICES**

RFP#2025-039

ADDENDUM #1

John J. C. [Signature]
11/18/25

November 12, 2025

The following Addendum No. 01 consisting of two (2) pages (including this cover page) is hereby issued on the 12th day of November 2025, in connection with the Request for Elevator Preventative Maintenance and Repair as requested by the Albany County Department of General Services, Albany County Correctional Facility, and the Albany County Shaker Place Nursing and Rehabilitation Center.

COUNTY OF ALBANY

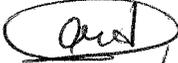
**RFB-2025-039
Elevator Preventative Maintenance and Repair Services**

ADDENDUM #1

The following information is provided as a result of a question(s) posed by vendor(s):

ITEM #1: Bid due date has been extended to 11:00am Thursday November 20, 2025.

End of Addendum #1


11/18/25

COUNTY OF ALBANY

**ELEVATOR PREVENTATIVE MAINTENANCE AND REPAIR
SERVICES**

RFP#2025-039

ADDENDUM #2

Arthur J. Leone
11/18/25

November 17, 2025

The following Addendum No. 02 consisting of four (4) pages (including this cover page) is hereby issued on the 17th day of November 2025, in connection with the Request for Elevator Preventative Maintenance and Repair as requested by the Albany County Department of General Services, Albany County Correctional Facility, and the Albany County Shaker Place Nursing and Rehabilitation Center.

COUNTY OF ALBANY

RFB-2025-039
Elevator Preventative Maintenance and Repair Services

ADDENDUM #2

The following information is provided as a result of a question(s) posed by vendor(s):

ITEM #1: Question for clarification: Section 4d calls for the bid to be full maintenance, but the specs call out for lamps to be replaced when they burn out. There is also a vague mention of the packing being replaced in part O. Can you confirm if we can invoice for additional repairs found during service calls? The bid tabulation section also has estimated repair hours for each building. Can we invoice if we exceed those hours?

Answer: Please see attached clarification and expectations of Full Service Contracts.

ITEM#2: The bid tabulation section also has estimated repair hours for each building. Can we invoice if we exceed those hours?

Answer: Posted estimated repair hours are for bid tabulation only. Please see attached clarification and expectations of Full Service Contracts.

ITEM#3: Question: Section 4b requires the vendor to take a sample of oil in to be tested for viscosity, color, and contamination. This feels excessive. If required, are we to include that cost in the base maintenance fee for the lab fees?

Answer: All annual hydraulic testing for viscosity, color, and contamination should be included in the base maintenance bid for associated facilities.

ITEM#4: Question: While going through the RFB-2025-039 we came across the section for MBE/WBE would you accept SDVOB participation in place of MBE/WBE?

Answer: At this time we do not accept SDVOB participation in place of MBE or WBE. We still encourage the use of SDVOB's but they will not count in place of a MBE or WBE.

End of Addendum #2

and 11/18/25

D) This is a full service contract. For the purposes of this contract, full service shall mean that the Contractor's bid price includes, but is not necessarily limited to: all labor, all material and supplies, all emergency work and special requests; all administrative, reporting or other requirements, all overhead costs and profit. It shall also include all travel costs, parking fees, and any other ancillary fees and costs including permits, licenses, insurance, etc. Details of services not explicitly stated in these specifications, but necessarily attendant is deemed to be understood by the Contractor and included herein.

Further clarification and expectations of Full Service Contract,

Along With Scheduled Preventive Maintenance Services:

1) Service Calls and Emergency Repair Services -

The Contractor shall provide 24-hour-a-day, 7 days-a-week, callback service, as part of the monthly maintenance fee and at no added cost to the County. The Contractor may only bill for callback service if the work performed is not the responsibility of the Contractor (e.g. repairs for vandalism, fire, acts of God, negligence by the State, or other unusual circumstances). In the event of callback service, a journeyman elevator mechanic will report to the site of the call when requested by the Agency Representative or those persons designated by the Agency Representative, in accordance with the following schedule:

1. Within one (1) hour after receipt of request for any stalled elevator(s) containing trapped passenger or any elevator designated in the bid contract as being essential. An attachment titled, "Elevators To Be Serviced", will be attached to each project definition to designate if an elevator is classified as essential or non-essential.
2. Within the first two (2) regular work hours of the next regular working day for any of the other elevator(s) covered by the bid contract.

2) GENERAL REQUIREMENTS -

a. The intent of the specifications detailed in RFB# 2025-039, is to ensure the provision of complete elevator maintenance services, in every respect. Details of service not explicitly stated in RFB# 2025-039 but necessarily attendant thereto, is deemed understood by the contractor and included herein. The contractor shall furnish all material and equipment usually furnished with elevator services, in accordance with the latest adopted editions of ASME A17.1, Safety Code for Elevators and Escalators, A17.2 Inspectors Guide for Elevator and Escalators and A17.3 Safety Code for Existing Elevators and Escalators (including supplements).

b. All material and equipment furnished shall be new and in excellent working condition. All replacement parts shall be new as specified by the original manufacturer or new after-market parts that are accepted by the elevator industry as equal or better (see II.4 Statement of Work).

c. The Contractor is completely responsible for their work, including any damages or breakdowns caused by their failure to take appropriate action.

The Contractor shall give immediate notice to the Agency Representative of any apparent damage to the equipment covered under this contract. The Contractor shall notify the Agency Representative, verbally on the day of discovery, and shall follow-up in writing no later than three (3) days thereof, informing of the existence or development of any defects in, or repairs

required to, the elevator equipment which the Contractor does not consider to be its responsibility under the terms of the contract. Failure to do so will render the Contractor responsible for those repairs at no additional cost to the Authorized User. The Contractor shall furnish the Agency Representative with a written estimate of the cost to correct the defects or make the required repairs. The Contractor's estimate shall be itemized into labor and material costs not to exceed the labor and material rates as bid in the Project Definition. The Agency Representative reserves the right to make final decision concerning the responsibility for such corrections or repairs. In those instances when the Authorized User determines that the Authorized User is responsible for such corrections or repairs, the County may enter into negotiations with the Contractor to affect the repairs. If the County and Contractor reach agreement over the price and conduct of the repair, the County will issue an Authorization Letter that will authorize the repair and serve as the Contractor's notice to proceed. However, the Authorized User reserves the right to solicit offers from, and have corrections or repairs made by, other sources.

3) WORK NOT INCLUDED IN CONTRACT

The following items of work are specifically not included as work which the Contractor is responsible to perform:

1. Refinishing of the elevator car interior walls, elevator car interior ceiling, elevator car floor covering, and escalator balustrades, trim and moldings
2. Elevator equipment room lighting ballasts and light fixtures (except bulb replacement is included).
3. Hoist way enclosure walls, and hoist way door frames and sills.
4. Telephone Company lines (except elevator telephone or intercommunication systems are included).
5. Main line power switches.
6. Emergency power plants and associated supplies.

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

SR. Sales Executive

Title

WONE, INC.

Company Name

11/18/25

Date

ATTACHMENT "E"

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

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: Kone, Inc.

Address: 25 Post Rd.
Albany, N.Y. 12205

Phone Number(s): 518-229-0069

Description of activities to be performed by your firm or organization within Albany County are related to the Albany County Storm Water Management Program (SWMP) (include any activities that have the potential to generate or prevent pollution and/or affect water quality):

ELEVATOR PREVENTATIVE MAINTENANCE

Description of where the work is to be performed within Albany County facilities:

ELEVATOR'S machine rooms

Andrew N. DiNovo

Signature

ANDREW N. DiNOVO

Printed Name

SR. Sales Executive

Title

11/18/25

Date

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

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? 69 years

2. List up to three (3) projects of this nature that you have completed in the last three (3) years, and 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. Albany County Office of General Services (existing)
Commissioner LATINA

2. Albany Internal Airport (Airport Authority)
KEVIN HEHIR
518-281-0609

3. STATE OF NEW YORK OFFICE OF GENERAL SERVICES
EMPIRE STATE PLAZA.
MATT QUACKENBUSH, 518-488-1769

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

3. List projects presently under contract by your firm, the dollar volume of the contract and the percentage completion of the contract.

1.) STATE OF NEW YORK DGS - HARRISMAN CAMPUS
\$ 6M

2) ALBANY COUNTY
\$ 2M

4. Has your firm ever failed to complete work awarded to it, if so, state where and why.

Not Applicable (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.

Not Applicable (NO)

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

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, applicable (no)

7. Do you plan to sublet any part of this work? If so, give details.

No

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.

Vicki Lafayette

Dove

1 HOME COURT

Moline, IL 61265

(563) 320-3311

BQ3

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

9. Give a summary of your financial statement. (List assets and liabilities, use an insert sheet, if needed).

SEE ATTACHED PreQualification Package

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.

KONE, INC.

Correct Name of Bidder

(a) The business is a: CORPORATION

(b) The address of principal place of business is: ONE KONE COURT
Moline, IL 61265

(c) The names of the corporate officers, or partners, or individuals doing business under a trade name, are as follows:

SEE ATTACHED Pre-Qualification Packet

ATTACHMENT "F"
BIDDER QUALIFICATION QUESTIONNAIRE

11. Is your firm qualified to do business in the State of New York? Yes No .
If No, signing this qualification statement constitutes agreement to obtain such qualification prior to award of contract immediately upon owner's request.

KONE, INC.
Firm

Dated: 11/18/25

By ANDREW W. DI NOVO

Andrew W. DiNovo

(Typed)

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: KONE, Inc -

By: Andrew N. DiNovo
(Signature)

ANDREW N. DiNOVO
(Typed)

Title: SO. SALES EXECUTIVE

Date: 11/18/25

Dedicated to People Flow™



Submitted to:
Albany County
112 State Street
Albany, New York 12207

Submitted by:
Drew DiNovo

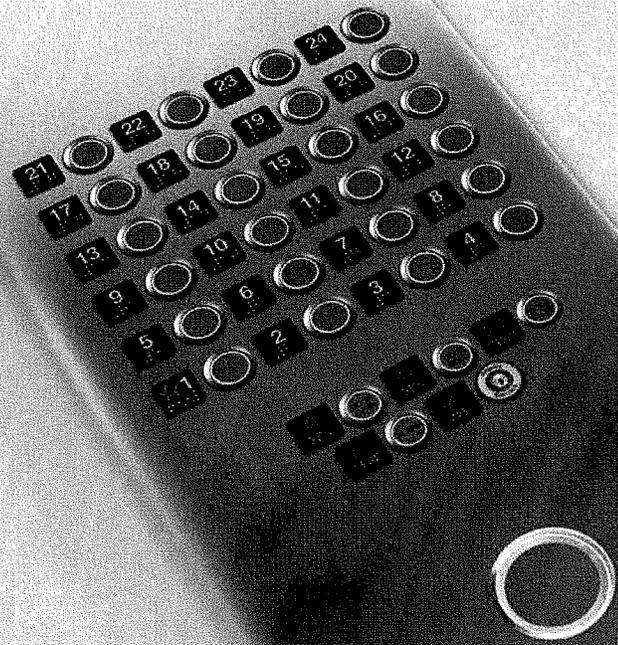
Contact: Drew DiNovo
Phone: 518-229-0069
E-mail: andrew.dinovo@kone.com

This information is up-to-date and accurate to the best of our knowledge.

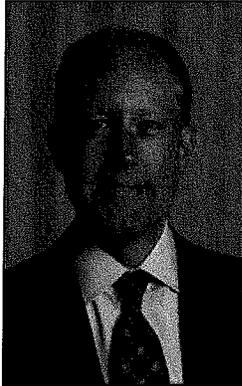
Date: November 18, 2025

CONFIDENTIALITY STATEMENT

The information contained herein is being disclosed to you in connection with a bid or prequalification. KONE Inc. requests that you keep this information in confidence not disclose such information to any third party and use such information only in connection with the bid or prequalification.



Thank you for considering KONE Inc.
as a partner for your project!



KONE, one of the global leaders in the elevator and escalator industry, was founded in 1910. The company's objective is to offer the best People Flow experience by developing and delivering solutions that enable people to move smoothly, safely, comfortably and quickly through buildings in an increasingly urbanizing environment.

Our solutions are known for their industry leading eco-efficiency, design and innovative technology. Additionally, we offer a portfolio of services to support our customers and partners – architects, consultants, builders, developers, building owners and facility managers – at every step of their building's lifecycle; from design and construction to maintenance and modernization of their buildings.

KONE delivers a performance edge with a strong focus on Safety and Quality. In addition, we are proud to have engaged employees who are focused on providing the best Customer Experience possible.

The detail you will find throughout this Qualification Package provides KONE information and responses to the most commonly asked questions we see from customers when selecting KONE – and these are the same types of questions we ask of our partners! I trust you will find this package informative and helpful in your vendor qualification process. Please feel free to contact your local sales representatives for any further detail needed.

Thank you for considering KONE to work on your project. We look forward to doing business with you in the future.

A handwritten signature in black ink, which appears to read "Kenneth E. Schmid Jr.".

Kenneth E. Schmid Jr.
President, CEO and Chairman of the Board; Director
KONE Americas

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Organization



KONE Inc.'s objective is to offer the best People Flow experience by developing and delivering solutions that enable people to move smoothly, safely, comfortably and without waiting in buildings in an increasingly urbanizing environment.

Legal Name:	KONE Inc.
Principal Office:	One KONE Court Moline, IL 61265
Type of Entity:	Corporation
State of Incorporation:	Delaware
Date of Incorporation:	12/31/1956
FEIN:	36-2357423
Website:	www.kone.us
Parent Company:	KONE Holdings Inc.
Address:	One KONE Court Moline, IL 61265
History:	Founded in 1892*
Former names:	Moline Elevator Company (1892 –1913) Montgomery Elevator (1913 –1994) Montgomery KONE Inc. (1994 – 2000) KONE Inc. (2000 – present)
Nature of Business:	Design, manufacture, install, service, repair, maintain and modernize elevators, escalators and autowalks.
Licensing:	KONE Inc. is authorized to do business in all 50 states, U.S. Virgin Islands and Puerto Rico and holds current contractor licenses and business registrations where applicable.
NAICS Codes	238290 & 333921
SIC Codes	1796 & 3534
Subcontractor Scope of Work	Division 14
DUNS#:	00-526-2308
Unique Entity ID (SAMS)	RR4DVMQCVAS5
CAGE Code:	1LZ56

* KONE Inc. is an indirect subsidiary of KONE Corporation, a Finnish company founded in 1910.



General Workforce Summary

The America's Workforce Summary as of January 1, 2025*:

US	5,713
Mexico.....	1,148
Canada	1,126

US Workforce Summary by:

Job Category	Employee Count
Exec/Sr Officials & Managers	17
First/Mid-Level Officials and Managers	646
Professionals.....	321
Technicians.....	6
Sales Workers	307
Admin Support Workers.....	361
Craft Workers	3,910
Operatives	145
.....	
Grand Total.....	5,713

* Workforce demographic data for specific locations is available upon request.

KONE Inc. Directors and Officers

First Name	Last Name	Title	Business Address
Kenneth E.	Schmid, Jr.	President, CEO & Chairman of the Board; Director	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Johannes	Frände	Exec VP	KONE Corp: Keilasatama 3, FIN-02150 Espoo, Finland
Kenneth	Lindgren	SVP Finance	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Steve	Gonzalez	SVP US New Building Solutions	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Aaron	Ites	SVP US East and Mexico	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Roberts	Brad	SVP US West and Mexico	450 Century Parkway, Allen, TX 75013
Vinay	Kapur	SVP Service	1488 Cliveden Ave, Delta, BC V3m 6L9 Canada
Nicole	Manzo	SVP People and communications	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Divya R.	Mehta	SVP Legal; Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Dennis	Viehweg	SVP Modernization	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Corey	Ward	SVP Safety, Quality and Environment	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Bryce	Warren	SVP Supply Chain	450 Century Parkway, Allen, TX 75013
Donny	Keller	VP Service Operations	One KONE Court, Moline, IL 61265
Margot	Taylor	VP Strategy and M&A	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Rangarajan	Krishnamurthy	Treasurer	3333 Warrenville Road, Suite 700, Lisle, IL 60532
John	Dahlquist, Jr.	Assistant Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Mary	Damitio	Assistant Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Cheryl	Gabriel	Assistant Secretary	One KONE Court, Moline, IL 61265
Diana	Himes	Assistant Secretary	One KONE Court, Moline, IL 61265
Sandeep	Kumar	Assistant Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Lorraine	Pelzer	Assistant Secretary	One KONE Court, Moline, IL 61265
Kim	Thompson	Assistant Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Matthew	Swanstrom	Assistant Secretary	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Meggan	Zobrist	Assistant Secretary	One KONE Court, Moline, IL 61265
Beth	Forret	Assistant Treasurer	One KONE Court, Moline, IL 61265
Jennifer	Olson	Assistant Treasurer	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Carrie	Rolfes	Assistant Treasurer	3333 Warrenville Road, Suite 700, Lisle, IL 60532
Adam	Winger	Assistant Treasurer	One KONE Court, Moline, IL 61265

Insurance and Bonding



Bonding Company: **Fidelity and Deposit Company of Maryland (Zurich)**
1299 Zurich Way, 10th Floor, Schaumburg, IL 60196
Underwriter: Lindy Serio

State Incorporated: IL
Bonding Capacity: \$700,000,000
Best Key Rating: A+ / XV
Relationship Duration: 07/01/2002

Bonding Company: **Travelers Casualty and Surety Company of America**
One Tower Square, Hartford, CT 06183
Underwriter: Trey Kolenda

State Incorporated: CT
Bonding Capacity: \$700,000,000
Best Rating: A++ / XV
Relationship Duration: 05/01/2009

Bonding Company: **Federal Insurance Company (Chubb Insurance Group)**
202B Hall's Mills Rd, Whitehouse Station, NJ 08889
Underwriter: Jacob Ahn

State Incorporated: IN
Bond Capacity: \$450,000,000
Best Rating: A++ / XV
Relationship Duration: 06/01/2009

Agent/Broker for All: **Aon Surety**
Jean Torres
Surety Analyst/Aon Construction Services Group
Phone: 312-381-5214

Mariano Viale
Managing Director/Global Surety – Aon Commercial Risk Solutions
Phone: 305-961-5921

200 East Randolph Street, 4th Floor, Chicago, IL 60601
Email: kone.bonds@aon.com
Relationship Duration: 07/17/2007

KONE Inc.'s Surety program has been able to furnish all Performance and Payment Bonds required to date. Additional Surety capacity is available should the need arise. There have been no claims paid to date by our Surety program. Current bond rate is \$2.75 per thousand dollars of total contract amount for contracts 2 years or less.

Insurance and Bonding



Sample Certificate of Insurance

ACORD		CERTIFICATE OF LIABILITY INSURANCE			DATE (MM/DD/YYYY)	
					1/3/2025	
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).						
PRODUCER Aon Risk Services Central, Inc. Chicago IL Office 200 East Randolph Chicago, IL 60601				CONTACT NAME: Aon Client Services PHONE (A/C. No. Ext): 866-283-7122 FAX (A/C. No.): 800-363-0106 EMAIL: Acs.chicago@aon.com ADDRESS:		
INSURED KONE Inc. Attn: insurancerequests@kone.com One KONE Court Moline IL 61265				INSURER(S) AFFORDING COVERAGE		
				NAIC # 24147		
				INSURER A: Old Republic Insurance Company INSURER B: Pohjola Insurance Ltd INSURER C: AXIS Surplus Insurance Company INSURER D: INSURER E: INSURER F:		
				N/A 26620		
COVERAGES		CERTIFICATE NUMBER: 83434751		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.						
INSTR LTR	TYPE OF INSURANCE	ADDITIONAL SUBR (IND. VOID)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER POLICY <input checked="" type="checkbox"/> PER <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		MWZY 57732	1/1/2025	1/1/2026	EACH OCCURRENCE \$10,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$10,000,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$10,000,000 GENERAL AGGREGATE \$10,000,000 PRODUCTS - COMP/OP AGG \$10,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		MWTB 20016	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DEF <input type="checkbox"/> RETENTION \$		16-663-331-6	1/1/2025	1/1/2026	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in WA) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	MWC 115397 17 (AOS) MWXS 822 17 (OH)	1/1/2025 1/1/2025	1/1/2026 1/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$5,000,000 E.L. DISEASE - EA EMPLOYEE \$5,000,000 E.L. DISEASE - POLICY LIMIT \$5,000,000
C	Excess Auto & Employer's Liability		P-001-001066181-03	1/1/2025	1/1/2026	\$5M Ea. Occurrence / \$5M Aggregate
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Contract No. Sample - Project/Location: Sample - 12345 Street Moline IL. As respects Excess Liability, if evidenced above, Aon Risk Solutions U.S. is generating & distributing this COI in an administrative capacity.						
CERTIFICATE HOLDER				CANCELLATION		
SAMPLE COI One KONE Court Moline IL 61265				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS, AUTHORIZED REPRESENTATIVE <i>Aon Risk Services Central, Inc.</i> Aon Risk Services Central, Inc.		

ACORD 25 (2016/03) The ACORD name and logo are registered marks of ACORD © 1988-2015 ACORD CORPORATION. All rights reserved.

83434751 : 020-2.5. | 25/26 CL AQ XS WC | Gabriel Gonzalez | 1/3/2025 3:02:02 PM (GMT) | Page 1 of 2
 This certificate cancels and supersedes ALL previously issued certificates.

Insurance and Bonding



One Tower Square, Bond/SPB
Hartford, CT 06183

September 18, 2025

RE: KONE Inc.

To Whom It May Concern:

Since 2007, Aon Risk Services Central, Inc. and the Travelers Casualty and Surety Company of America have had the continuing privilege of providing surety bonds for KONE INC. KONE INC. has a bonding capacity on individual projects of \$25,000,000.00 and a total program capacity of \$700,000,000.00, sufficient capacity is available to support the above referenced project. Travelers Casualty and Surety Company of America is rated "A++" (Superior) with a financial size category of XV (\$2 billion +) by AM Best and has a US Treasury Limit of \$225,563,000.00.

If KONE Inc. is awarded a contract for an upcoming project and requests that we provide the necessary Performance and/or Payment Bonds, we will be prepared to execute the bonds subject to our acceptable review of the contract terms and conditions, bond forms, appropriate contract funding and any other underwriting considerations at the time of the request.

Our consideration and issuance of bonds is a matter solely between KONE Inc. and ourselves, and we assume no liability to third parties or to you by the issuance of this letter. KONE Inc. is represented by Aon Risk Services Central, Inc. at 200 East Randolph St., Chicago, IL 60601, Attn: Ann Mullins, 312-520-1294. We trust that this information meets with your satisfaction.

Sincerely,

Travelers Casualty and Surety Company of America

Jean Torres
Attorney-in-Fact



Insurance and Bonding



**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 **JEAN TORRES** of **CHICAGO**, Illinois, their true and lawful Attorney(s)-in-Fact to sign, 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 **21st** day of **April**, 2021.



State of Connecticut

City of Hartford ss.

By:
Robert L. Raney, Senior Vice President

On this the **21st** day of **April**, 2021, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies 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**, 2026



Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, 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 appointees 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, any Assistant 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 each of the Companies, 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 **18th** day of **September**, 2025 .



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(s)-in-Fact and the details of the bond to which this Power of Attorney is attached.*

At KONE, safety is a high priority area. We strongly believe that each employee has the right to return home injury-free after each workday; therefore, we have zero tolerance towards unsafe behavior and attitudes and our ultimate goal is to have zero incidents. To minimize incidents, we ensure that all our employees have the right set of competencies they need in order to perform their work in a safe manner. We have the same level of requirements for the safety of our subcontractors' employees as our own employees.

KONE continually strives to improve the safety of its equipment and work methods to realize the zero-incident expectation. To improve KONE's safety culture, incidents and near-misses are continuously monitored and investigated. The lessons learned are discussed with the entire organization on a regular basis.

KONE trains employees on safety

The minimum requirement for all KONE employees is to have a general level of training in health and safety, which must be regularly refreshed. Additional training relating to respective work roles and tasks must be completed in order to develop and maintain the needed competencies.

KONE's steps to achieving world-class EHS performance

KONE Inc. is committed to becoming a world-class leader of Environment, Health, and Safety (EHS) excellence in everything we do and everywhere we conduct business. The actions below demonstrate KONE Inc.'s steps towards achieving world-class EHS performance:

- Employs full time safety-trained and health personnel.
- In place procedures for investigating, reporting, and follow-up of accidents and occupational injuries. Action items are documented to completion.
- Written Safety and Health program addressing management's commitment and expectations, employee participation, accountability, and responsibility, as well as work best practices and procedures.
- Serious injury and Fatality (SIF) prevention program for field operations to address high risk safety areas.
- Personnel trained in first aid and CPR, where applicable.
- Maintain inspection and maintenance certification for operating equipment.
- Safety field inspections are conducted on a quarterly basis, while safety and health audits of company policies and procedures are conducted annually.
- Trained employees in appropriate job skills. Understanding is verified through written and oral exams, performance testing, and job monitoring.
- Conduct safety and health orientation for new hires and personnel promotions.

Safety



Safety Team

Corey Ward
 Senior Vice President, SQE
 Phone: 630-955-4220
 E-mail: Corey.Ward@kone.com

Vern Kellow
 Sr. S&E Manager - Pacific
 Phone: 778-919-1697
 Email: Vern.kellow@kone.com

Valdez Hails
 S&E Director – Northeast, NY Metro and USK
 Phone: 240-743-8175
 E-mail: Valdez.Hails@kone.com

Matthew Walsh
 S&E Manager
 Phone: 331-202-8848
 E-mail: Matthew.Walsh@kone.com

Jacob Osterman
 Sr. S&E Manager – Great Plains and Central West
 Phone: 816-804-9435
 E-mail: Jacob.osterman@kone.com

Lena Velluso
 S&E Process Development Director
 Phone: 425-260-1359
 E-mail: Lena.Velluso@kone.com

Robert Whitaker
 Sr. S&E Manager – Central and Southeast
 Phone: 678-290-4100
 E-mail: Robert.Whitaker@kone.com

Corporate Safety Statistics

Interstate (National) EMR	2024	2023	2022	2021	2020
# Total OSHA Recordable Cases	73	70	67	85	87
# Restricted Work Activity Cases	39	46	42	51	63
# Restricted Workdays	3,017	2,366	3,077	3,076	4,216
# Lost Workday Cases	10	7	6	13	9
# Lost Workdays	501	332	244	371	340
# Fatalities	0	0	0	0	0
Employees Hours Worked	12,493,024	11,833,749	11,211,553	11,325,646	11,414,417
# Employees	6,247	5,662	5,606	5,662	5,707
Total Recordable Rate	1.17	1.18	1.20	1.50	1.52
Lost Workday Incident Rate (Lost Time Only)	0.16	0.12	0.11	0.22	0.16
DART Rate (Lost Time and Restricted Time)	0.78	0.90	0.86	1.13	1.26

Safety



Experience Modification Rate (EMR) Verification



OLD REPUBLIC RISK MANAGEMENT

445 South Moorland Road, Suite 300, Brookfield, Wisconsin 53005 | T: 262.797.3400

December 16, 2024

Kristin Kahn
AON Risk Services Central, Inc.
200 East Randolph Street
Chicago, IL 60601

Re: KONE, Inc.
Effective 1/1/25 – 1/1/26

Dear Kristin:

According to your request, below are the NCCI Experience Modification Factors for the last five years.

0.76 eff 1/1/2025
0.80 eff 1/1/2024
0.75 eff 1/1/2023
0.70 eff 1/1/2022
0.74 eff 1/1/2021

These modification factors are true and correct as per the National Council on Compensation Insurance, Inc. (NCCI).

Sincerely,

OLD REPUBLIC RISK MANAGEMENT, INC.

Maria Egle
Account Manager

Workers' Compensation Rates

Class Code 5160
Rates Effective 1/1/25

Rate per \$100 payroll

State	2025 Rate	State	2025 Rate
AK	upon request	MT	2.17
AL	1.45	NC	1.55
AR	0.91	ND	upon request
AZ	1.23	NE	1.78
CA	2.16	NH	upon request
CO	1.68	NJ	3.52
CT	2.85	NM	1.52
DC	upon request	NV	1.93
DE	upon request	NY	5.31
FL	1.59	OH	1.46
GA	1.66	OK	1.78
HI	2.06	OR	1.18
IA	2.75	PA	2.59
ID	upon request	RI	upon request
IL	3.60	SC	upon request
IN	0.99	SD	2.11
KS	1.23	TN	0.97
KY	1.41	TX	1.63
LA	2.33	UT	1.18
MA	2.67	VA	1.42
MD	1.71	VT	upon request
ME	1.49	WA	upon request
MI	0.96	WI	2.58
MN	1.88	WV	upon request
MO	1.90	WY	upon request
MS	upon request		

*For DE and PA, class code 675 is equivalent to 5160. For WA, class code is 0602-03.

KONE Quality Objectives are to improve customer loyalty, reduce call outs and minimize the cost of poor quality. To achieve our objectives, our established Quality Strategy is to provide superior service experience by strengthening involvement of people and continuously improve the quality of our solutions and processes. A copy of the KONE Quality Manual describing the KONE Management System focused on Quality and Environment is available upon request.

KONE uses the ISO 9001:2015, ISO 14001:2015, and ISO 45001:2018 for selected units to provide benchmarks against which entire global operations can be measured. KONE Americas Supply Line is certified under the global Certification Process. Certificates are available upon request.

Supply Chain America Locations
450 & 500 Century Parkway, Allen, TX
2266 US Highway 6, Coal Valley, IL

Activities
ISO 9001:2015, ISO 14001:2015
ISO 9001:2015, ISO 14001:2015, ISO 45001:2018

KONE ISO 9001, 1400, & 45001 Certificate Number:

Certificate identity number: 10633815
Expires June 30, 2027
Issued by Lloyd's Register Quality Assurance Limited

Supplier Quality Management

KONE has created one KONE Sourcing organization to continuously improve customer value with the aim of reducing total cost of ownership. Supplier Quality Management, as a part of the KONE Sourcing organization, is responsible to set up and implement a harmonized supplier qualification process across the organization and assure an effective supplier development system.

Cross functional teams take into account the sensitivity of the goods/services purchased. We maintain a list of supplier profiles to achieve quality targets and competitiveness when changing products and/or suppliers.

A "Quality Annex" is a part of the supply agreement. The Quality Annex contains all the Quality targets and the Quality control plan agreed with supplier, in line with KONE targets and processes.

Supplier Quality Management monitors the performance of suppliers using KONE Process (Preventative and Corrective Action System, Feedback Process and KPI measurements). Regular performance reporting between KONE and key suppliers are conducted in order to motivate both parties to improve continuously toward the agreed quality targets.

KONE Inc. is an indirect subsidiary of KONE Corporation located in Espoo, Finland. KONE operates on a calendar year end (December 31). The KONE Annual Report and audited financial statements are prepared globally on a consolidated basis only, and reflect KONE worldwide operations. A condensed income statement and balance sheet are attached for your reference. Please visit the KONE Investor page for a complete copy of the current and past interim and annual reports.

<http://www.kone.com/en/investors/>

The audited financials and annual reports are prepared by:
Ernst & Young Oy
Finland

KONE Inc. has never filed for Bankruptcy or Reorganization. A copy of the *Letter of Support* from KONE Corporation is included.

Key Figures

Currency = MEUR (Million Euros)	2024	2023	2022	2021	2020
Sales	11,098	10,952	10,907	10,514	9,939
Orders received	8,759	8,578	9,131	8,853	8,185
Order book	9,059	8,716	9,026	8,564	7,729
Total Assets	9,284	8,731	9,090	9,720	8,792
Total Liabilities	6,391	5,945	6,224	6,521	5,595
Equity / Net Worth (Total Assets - Total Liabilities)	2,893	2,786	2,866	3,199	3,197
Leverage (Total Liab / Equity)	2.21	2.13	2.17	2.03	1.75
Current Assets	5,963	5,764	6,309	6,922	6,126
Current Liabilities	5,276	5,090	5,404	5,652	4,918
Working Capital (Current Assets - Current Liabilities)	687	674	905	1,270	1,208
Current Ratio (Current Assets / Current Liabilities)	1.13	1.13	1.17	1.22	1.25

KONE Consolidated Balance Sheet

Assets MEUR (Million Euros)	Dec 31, 2024	Dec 31, 2023
Non-current assets		
Goodwill	1,558.4	1,469.0
Other intangible assets	333.3	287.2
Property, plant and equipment	898.5	779.7
Employee Benefits	15.0	9.2
Deferred tax assets	365.7	320.2
Shares and other non-current assets	150.3	101.5
Total non-current assets	3,321.2	2,966.8
Current assets		
Inventories	856.7	820.9
Accounts receivable	2,494.8	2,495.1
Deferred assets	693.6	641.0
Income tax receivables	119.0	118.7
Current deposits and loans receivable	1,223.0	1,263.9
Cash and cash equivalents	576.0	424.5
Total current assets	5,963.1	5,764.0
Total assets	9,284.3	8,730.8
Equity and liabilities MEUR (Million Euros)	Dec 31, 2024	Dec 31, 2023
Capital and reserves attributable to the shareholders of the parent company		
Share capital	66.2	66.2
Share premium account	100.3	100.3
Paid-up unrestricted equity reserve	245.7	245.7
Fair value and other reserves	-25.3	-20.0
Translation differences	135.3	69.7
Remeasurements of employee benefits	-105.2	-96.5
Treasury Shares	-217.5	-230.2
Retained earnings	2,667.2	2,616.9
Total shareholders' equity	2,866.7	2,752.1
Non-controlling interests	26.3	33.9
Total equity	2,893.1	2,786.0
Non-current liabilities		
Loans	700.5	438.7
Employee benefits	141.4	132.9
Deferred tax liabilities	87.3	86.3
Total non-current liabilities	929.3	657.9
Provisions	185.9	196.9
Current liabilities		
Current Portion of Long-term loans	145.1	116.1
Advance payments received	2,016.9	1,915.7
Accounts payable	982.9	927.0
Accruals	1,986.6	1,993.4
Income tax payables	144.4	137.7
Total current liabilities	5,275.9	5,090.0
Total equity and liabilities	9,284.3	8,730.8

KONE Consolidated Statement of Income

Currency = MEUR (Million Euros)	Jan 1 - Dec 31, 2024	%	Jan 1 - Dec 31, 2023	%
Sales	11,098.4		10,952.3	
Costs and expenses	-9,557.3		-9,482.8	
Depreciation and amortization	-292.2		-269.4	
Operating income	1,249.0	11.3	1,200.1	11.0
Financing income	48.3		50.0	
Financing expenses	-43.1		-43.9	
Income before taxes	1,254.1	11.3	1,206.1	11.0
Taxes	-293.1		-274.6	
Net income	961.0	8.7	931.6	8.5
Net income attributable to:				
Shareholders of the parent company	951.3		925.8	
Non-controlling interests	9.7		5.8	
Total	961.0		931.6	
Earnings per share for profit attributable to the shareholders of the parent company, EUR				
Basic earnings per share, EUR	1.84		1.79	
Diluted earnings per share, EUR	1.84		1.79	

Form **W-9**
 (Rev. March 2024)
 Department of the Treasury
 Internal Revenue Service

**Request for Taxpayer
 Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) KONE INC.	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3): Exempt payee code (if any) <u>5</u> Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) <u>N/A</u> (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See Instructions _____ <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. ONE KONE COURT	Requester's name and address (optional)
	6 City, state, and ZIP code MOLINE, IL 61265	
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.

Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.

Social security number									
			-						
or									
Employer identification number									
3	6	-	2	3	5	7	4	2	3

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person *Brian Jarret* Date 5/8/2025

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Corporate Financial Letter of Support



29 January 2025

To whom it may concern

LETTER OF SUPPORT

KONE Inc, One KONE Court, Moline, IL 61625, USA, is a solely, indirectly 100 % owned subsidiary of KONE Corporation.

We confirm that it is our business policy to closely follow all units of our group companies to ensure they are able to fulfill their obligations. We further confirm that we intend to adhere to this policy also with respect to KONE Inc.

IN WITNESS THEREOF, we have caused this letter of confirmation to be executed by our duly authorized representatives on this 29th day of January 2025 and confirm that this letter shall be valid until 31 December 2025 after which it will automatically become void.

Yours faithfully

KONE CORPORATION

Camilla Orko
Vice President, Global Compliance

Johannes Frände
EVP, General Counsel



Dedicated to
People Flow™

References and Experience



Our customers' success is our goal. We work for and with them to identify and deliver solutions that exceed expectations. We keep our promises. We drive new ideas to realization with speed and an obsession for customer-driven quality.

Bank References

Main Operating Account

Citibank N.A.
111 Wall Street
New York, NY 10043
Contact: Kewen Xie
Phone: 212-816-9936
Account: 30915201
ABA(Routing): 021000089

Trade References

Giese Companies

Attn: Marvin Heiderscheit

7025 Chavenelle Road

Dubuque, IA 52002

Tel: 563-588-8772

Email: Mark@gieseco.com

DRAKA Elevator Products

Attn: Wynne Ellis, Global
Director of Operations

2151 North Church Street, PO B

Rocky Mount, NC 27802-0400

Tel: 877-372-5237

Email: Wynne.Ellis@prysmiangroup.com

Innovation Industries, Inc.

Attn: Accounts Receivable

3500 East Main Street, PO Box 29

Russellville, AR 72802

Tel: 800-843-1004

Email: Innovation-AR@innovationind.com

Wurtec

Attn: Kelly Rucki

6200 Brent Dr

Toledo, OH 43611

Tel: 419-726-1066

Email: kelly.rucki@wurtec.com

References and Experience



Citibank Reference Letter (Credit Facility)



10/1/2025

TO: Kone Inc
One Kone Court
Moline, IL 61265

RE: Bank Reference Letter

This letter confirms that Kone Inc. is a customer of Citibank, N.A. ("Citibank"). Kone Inc. currently has a credit facility of \$2.5 million with Citibank. The facility currently has a zero utilization. Kone Inc has maintained Demand Deposit Accounts with Citibank since 2013. We confirm that this relationship has been maintained in a satisfactory manner.

If you need any additional information, please contact Kewen Xie, Relationship Manager at (212) 816-9936.

Sincerely,

Kewen Xie
Relationship Manager
Citi | Banking, Capital Markets, Advisory
Global Subsidiaries Group (GSG)
388 Greenwich Street
New York, NY 10013

References and Experience



Construction Volume (past 5 years)

2024 – 6.595 Billion Euros
2023 – 6.825 Billion Euros
2022 – 7.016 Billion Euros
2021 – 7.064 Billion Euros
2020 – 6.723 Billion Euros

KONE Inc. subcontracts <2% of all construction work. On occasion, KONE may need to retain the service of qualified hole drillers.

Certified LEED Buildings

KONE has successfully helped projects across the United States earn LEED credits in the Energy & Atmosphere and Innovation in Design categories through the installation of KONE's Machine Room-Less elevator solutions. We fully support the needs of our customers and their projects and will work to gather all necessary quantitative data needed for your projects.

Building Name	Location	Level of Certification
110 North Wacker	Chicago, IL	Gold
320 South Canal	Chicago, IL	Gold
1900 Lawrence	Denver, CO	Gold
Hyatt Regency Tower & Convention Center (808 Howell	Seattle, WA	Gold
Arrivé-Potala Tower (2116 4th Ave)	Seattle, WA	Silver
Kinects Tower (1823 Minor Ave)	Seattle, WA	Silver
University Town Center (6515 Belcrest Rd)	Hyattsville, MD	Silver
F5 Tower (801 5th Ave & Columbia)	Seattle, WA	Silver
Helios Tower (1600 2nd Ave & Pine)	Seattle, WA	Gold
The Bower (1300 4th St SE)	Washington, DC	Silver
Stratus Tower (820 Lenora St)	Seattle, WA	Silver
Tower 12 Apartments (2015 2nd Ave)	Seattle, WA	Silver
River Point (2121 First St. SW)	Washington, DC	Gold
University of Washington (Denny Hall)	Seattle, WA	Gold
University of Washington (Maple and Terry Halls)	Seattle, WA	Gold

References and Experience



Top 10 Completed Projects within the last 5 years by Quantity of Units *

Project Name	Location	Quantity	Project End Date
WMATA – Phase 1	Washington DC	139	February 2020
LaGuardia Redevelopment	New York	75	December 2022
Raiders Stadium	Las Vegas	73	October 2020
SEATAC IAF	Seattle	34	August 2022
Wildflower Studios	New York	33	July 2024
110 N WACKER	Chicago	30	November 2020
320 S CANAL	Chicago	28	February 2022
Signia by Hilton Atlanta	Atlanta	22	June 2024
First National Center	Oklahoma City	20	October 2022
Nike Merchandising	Beaverton	18	March 2022

Top 10 Projects in Progress by Quantity of Units*

Project Name	Location	Quantity	Project End Date
WMATA – Phase 3	Washington DC	139	December 2027
JFK Terminal One New Terminal	New York	127	March 2026
IAD Tier 2 Concourse	Sterling	43	September 2026
Harry Reid Airport	Las Vegas	41	October 2026
Bellevue 600	Bellevue	40	December 2025
TSMC	Phoenix	39	March 2025
HJAIA	Atlanta	33	June 2026
Eppley Airfield	Omaha	32	March 2028
CMH Airport	Columbus	29	June 2026
North Shore Towers	New York	24	March 2026

* KONE is publicly listed on the NASDAQ OMX Helsinki exchange. Due to KONE Disclosure Guidelines, we are unable to release specific contract dollar amounts. Disclosure guidelines also prevent release of specific customer information without customer approval.

References and Experience



Litigation, Arbitration, Mediation and Claims

Like other large American corporations, at any given time KONE has a variety of claims and lawsuits filed against it. KONE can state with confidence that there are no outstanding judgments against KONE, and that no known claims now existing, nor aggregate of known claims now pending, in any manner impinge on the financial strength of the company or in any manner limit the ability of KONE to perform any contract or project. KONE is seldom, if ever, subject to a judgment against it in a contractual dispute. KONE takes its contractual obligations very seriously and is committed to meeting all its obligations in a timely, professional and satisfactory manner. We take pride in being able to resolve disputes with or against our customers in a non-litigious manner to the satisfaction of both parties.