



**THE CITY OF NEW YORK
DEPARTMENT OF DESIGN AND CONSTRUCTION
DIVISION OF INFRASTRUCTURE**

30-30 THOMSON AVENUE
LONG ISLAND CITY, NEW YORK 11101-3045
TELEPHONE (718) 391-1000
WEBSITE www.nyc.gov/buildnyc

LAW

VOLUME 1 OF 3

BID BOOKLET

FOR FURNISHING ALL LABOR AND MATERIALS NECESSARY AND REQUIRED FOR:

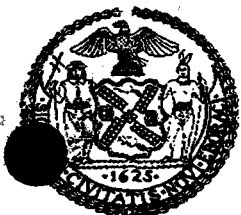
PROJECT ID: MEDA001

**FOR THE CONSTRUCTION OF ACCELERATED WATER MAIN
REPLACEMENT AND SEWER REHABILITATION AND REPLACEMENT**

Together With All Work Incidental Thereto
**BOROUGH OF MANHATTAN
CITY OF NEW YORK**

FOR THE DEPARTMENT OF ENVIRONMENTAL PROTECTION
PREPARED BY
IN-HOUSE DESIGN

DECEMBER 24, 2014



5-090



**Department of
Design and
Construction**

Dr. Feniosky Peña-Mora
Commissioner

Andrea Glick
Deputy Commissioner
Administration

John Goddard
Agency Chief
Contracting Officer

Lorraine Holley
Deputy ACCO
Competitive Sealed
Bid Contracts

June 04, 2015

CERTIFIED MAIL - RETURN RECEIPT REQUEST

P & T II Contracting Corp.
2417 Jericho Turnpike Suite 315
Garden City Park, NY 11040

RE: FMS ID: MEDA-001
E-PIN: 85015B0089001
DDC PIN: 8502015WM0006C
Construction of Accelerated Water Main
Replacement and Sewer Rehabilitation and
Replacement – Borough of Manhattan
NOTICE OF AWARD

Dear Contractor:

You are hereby awarded the above referenced contract based upon your bid in the amount of \$11,924,126.76 submitted at the bid opening on March 18, 2015. Within ten (10) days of your receipt of this notice of award, you are required to take the actions set forth in Paragraphs (1) through (3) below. For your convenience, attached please find a copy of Schedule A of the General Conditions to the Contract, which sets forth the types and amounts of insurance coverage required for this contract.

- (1) Execute four copies of the Agreement in the Contracts Unit, 30-30 Thomson Avenue, 1st Floor, Long Island City, New York (IDCNY Building). A Commissioner of Deeds will be available to witness and notarize your signature. The Agreement must be signed by an officer of the corporation or a partner of the firm.
- (2) Submit to the Contracts Unit four properly executed performance and payment bonds. If required for this contract, copies of performance and payment bonds are attached.
- (3) Submit to the Contracts Unit the following insurance documentation: (a) original certificate of insurance for general liability in the amount required by Schedule A, and (b) original certificates of insurance or other proof of coverage for workers' compensation and disability benefits, as required by New York State Law. The insurance documentation specified in this paragraph is required for registration of the contract with the Comptroller's Office.



Department of
Design and
Construction

On or before the contract commencement date, you are required to submit all other certificates of insurance and/or policies in the types and amounts required by Schedule A. Such certificates of insurance and/or policies must be submitted to the Agency Chief Contracting Office, Attention: Risk Manager, Fourth Floor at the above indicated department address.

Your attention is directed to the section of the Information for Bidders entitled "Failure to Execute Contract". As indicated in this section, in the event you fail to execute the contract and furnish the required bonds within the (10) days of your receipt of this notice of award, your bid security will be retained by the City and you will be liable for the difference between your bid price and the price for which the contract is subsequently awarded, less the amount of the bid security retained.

Sincerely,

A handwritten signature in cursive script that reads "Lorraine Holley".

Lorraine Holley



NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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BID SCHEDULE

- NOTE:** (1) The Agency may reject a bid if it contains unbalanced bid prices. An unbalanced bid is considered to be one containing lump sum or unit items which do not reflect reasonable actual costs plus a reasonable proportionate share of the Bidder's anticipated profit, overhead costs, and other indirect costs, anticipated for the performance of the items in question.
- (2) The following bid prices on Unit Price Contracts are to be paid for the actual quantities of the item numbers in the completed work or structure, and they cover the cost of all work, labor, material, tools, plant and appliances of every description necessary to complete the entire work, as specified, and the removal of all debris, temporary work and appliances.
- (3) PLEASE BE SURE A LEGIBLE BID IS ENTERED, IN INK, FOR EACH ITEM.
Alterations must be Initialed in ink by the bidder.
- (4) The Extended Amount entered in Column 6 shall be the product of the Estimated Quantity in Column 3, times the Unit Price Bid in Column 5.
- (5) Prospective bidders must examine the Bid Schedule carefully and, before bidding, must advise the Commissioner, in writing, if any pages are missing, and must request that such missing pages be furnished them. The pages of this Bid Schedule are numbered consecutively, as follows:
B - 3 [REVISION # 1] Through B - 29 [REVISION # 1]

PLEASE BE SURE A LEGIBLE BID IS ENTERED FOR EACH ITEM.
THE BIDDER SHALL INSERT THE TOTAL BID PRICE IN
THE BID FORM ON PAGE C-4 OF THIS BID BOOKLET.



2/18/2015 12:00 AM

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
001	1.A50.31PC08 8" E.S.V.P. SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS)	30.00	L.F.	650 -	19,500 -
002	1.AA50.21P3C048D 48" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$55.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	30.00	L.F.	705 -	21,150 -
003	1.B50.31PC08 8" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET) (FIXED UNIT PRICE TO BE 70% OF UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	55.00	L.F.	455 -	25,025 -
004	1.BB50.21P3C048D 48" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$50.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	55.00	L.F.	505 -	27,775 -
005	1.C50.31PC10 10" E.S.V.P. SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$5.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	20.00	L.F.	655 -	13,100 -

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006	1.CC50.21P3C048D 48" T.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$50.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	105.00	L.F.	464 -	48,720 -
007	1.D50.31PC10 10" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$5.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	50.00	L.F.	460 -	23000 -
008	1.E50.31PC10 10" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE 90% OF UNIT PRICE BID FOR ITEM NO. 1.D50.31PC10)	110.00	L.F.	414 -	45,540 -
009	1.F50.31PC12 12" E.S.V.P. SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$10.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	30.00	L.F.	660 -	19,800 -
010	1.G50.31PC12 12" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$10.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	150.00	L.F.	465 -	69,750 -

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011	1.H50.31PC12 12" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$10.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	180.00	L.F.	424	-	76,320	-
012	1.I50.31PC15 15" E.S.V.P. SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$15.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	20.00	L.F.	665	-	13,300	-
013	1.J50.31PC15 15" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$15.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	50.00	L.F.	470	-	23,500	-
014	1.K50.31PC15 15" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$15.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	180.00	L.F.	429	-	77,220	-
015	1.L50.31PC18 18" E.S.V.P. SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$25.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	15.00	L.F.	675	-	10,125	-
				475	-	23,750	-

31,715

31,715

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COL 1 SEQ NO	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
016	1.M50.31PC18 18" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$20.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC08)	50.00	L.F.	475 - 434 31,715 435	23,750 - 56,420
017	1.N50.31PC18 18" E.S.V.P. SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$20.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	130.00	L.F.	31,715 434 - 685	56,420 -
018	1.O50.21P3C024D 24" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$35.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	15.00	L.F.	31,715 685 -	10,275 -
019	1.P50.21P3C024D 24" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$30.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	50.00	L.F.	485 -	24,250 -
020	1.Q50.21P3C024D 24" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$30.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	110.00	L.F.	444 -	48,840 -

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COL 1 SEQ NO	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
021	1.R50.21P3C030D 30" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$40.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	15.00	L.F.	690 -	10,350 -
022	1.S50.21P3C030D 30" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$35.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	50.00	L.F.	490 -	24,500 -
023	1.T50.21P3C030D 30" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$35.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10)	100.00	L.F.	449 -	44,900 -
024	1.U50.21P3C036D 36" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (MINIMUM 15 FEET LENGTHS) (FIXED UNIT PRICE TO BE \$45.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.A50.31PC08)	15.00	L.F.	695 -	10,425 -
025	1.V50.21P3C036D 36" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND THE MINIMUM 15 FEET TO A MAXIMUM OF 100 FEET) (FIXED UNIT PRICE TO BE \$40.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.B50.31PC08)	45.00	L.F.	495 -	22,275 -

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026	1.W50.21P3C036D 36" R.C.P. CLASS III SEWER, ON CONCRETE CRADLE (ADDITIONAL LENGTH BEYOND 100 FEET) (FIXED UNIT PRICE TO BE \$40.00 PLUS UNIT PRICE BID FOR ITEM NO. 1.E50.31PC10).	100.00	L.F.	454	-	45,400	-
027	10.32A PHOTOGRAPHS	1,250.00	SETS	25	-	31,250	-
028	4.02 AB-R ASPHALTIC CONCRETE WEARING COURSE, 1-1/2" THICK	11,800.00	S.Y.	35	-	413,000	-
029	4.02 CA BINDER MIXTURE	1,950.00	TONS	150	-	292,500	-
030	4.02 CB ASPHALTIC CONCRETE MIXTURE	760.00	TONS	150	-	114,000	-
031	4.04 H CONCRETE BASE FOR PAVEMENT, VARIABLE THICKNESS FOR TRENCH RESTORATION, (HIGH-EARLY STRENGTH)	1,400.00	C.Y.	350	-	490,000	-

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032	4.13 AAS 4" CONCRETE SIDEWALK (UNPIGMENTED)	500.00	S.F.	6 -	3,000 -
033	4.13 BAS 7" CONCRETE SIDEWALK (UNPIGMENTED)	1,250.00	S.F.	8 -	10,000 -
034	4.16 AA TREES REMOVED (4" TO UNDER 12" CALIPER)	2.00	EACH	1 -	2 -
035	4.16 AB TREES REMOVED (12" TO UNDER 18" CALIPER)	2.00	EACH	1 -	2 -
036	4.16 AC TREES REMOVED (18" TO UNDER 24" CALIPER)	2.00	EACH	1 -	2 -
037	4.16 AD TREES REMOVED (24" CALIPER AND OVER)	2.00	EACH	1 -	2 -

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038	4.16 CA405 TREES PLANTED, 3" TO 3-1/2" CALIPER, ALL TYPES, IN 4' X 5' TREE PITS	2.00	EACH				
				1	-	2	-
039	4.18 A MAINTENANCE TREE PRUNING (UNDER 12" CAL.)	16.00	EACH				
				1	-	16	-
040	4.18 B MAINTENANCE TREE PRUNING (12" TO UNDER 18" CAL.)	11.00	EACH				
				1	-	11	-
041	4.18 C MAINTENANCE TREE PRUNING (18" TO UNDER 24" CAL.)	9.00	EACH				
				1	-	9	-
042	4.18 D MAINTENANCE TREE PRUNING (24" CAL. AND OVER)	4.00	EACH				
				1	-	4	-
043	4.21 TREE CONSULTANT	160.00	P/HR				
				90	-	14,400	-

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044	50.21C3C042D 42" R.C.P. CLASS III COMBINED SEWER, ON CONCRETE CRADLE	290.00	L.F.	450 -	130,500 -
045	50.21C3C048D 48" R.C.P. CLASS III COMBINED SEWER, ON CONCRETE CRADLE	290.00	L.F.	550 -	159,500 -
046	50.21M3C042D 42" R.C.P. CLASS III STORM SEWER, ON CONCRETE CRADLE	290.00	L.F.	450 -	130,500 -
047	50.21M3C048D 48" R.C.P. CLASS III STORM SEWER, ON CONCRETE CRADLE	290.00	L.F.	550 -	159,500 -
048	51.21S0A1000V STANDARD MANHOLE TYPE A-1	25.00	EACH	2500 -	62,500 -
049	51.21S0B1000V STANDARD MANHOLE TYPE B-1	2.00	EACH	2500 -	5000 -

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050	51.41S001 STANDARD CATCH BASIN, TYPE 1	25.00	EACH	3500 -	87,500 -
051	52.11D12 12" DUCTILE IRON PIPE BASIN CONNECTION	200.00	L.F.	200 -	40,000 -
052	52.21V08 8" E.S.V.P. RISER FOR HOUSE CONNECTION	2.00	V.F.	100 -	200 -
053	52.21V10 10" E.S.V.P. RISER FOR HOUSE CONNECTION	2.00	V.F.	100 -	200 -
054	52.31V06P00 6" E.S.V.P. SPUR FOR HOUSE CONNECTION ON E.S.V.P. SEWER	10.00	EACH	500 -	5,000 -
055	52.31V08P00 8" E.S.V.P. SPUR FOR HOUSE CONNECTION ON E.S.V.P. SEWER	4.00	EACH	750 -	3,000 -

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056	53.11DR TELEVISION INSPECTION AND DIGITAL AUDIO-VISUAL RECORDING OF SEWERS	3,260.00	L.F.	5 -	16,300 -
057	6.02 AAN UNCLASSIFIED EXCAVATION	1,050.00	C.Y.	100 -	105,000 -
058	6.25 RS TEMPORARY SIGNS	11,209.00	S.F.	0 01	112 09
059	6.26 TIMBER CURB	4,996.00	L.F.	0 01	49 96
060	6.28 AA LIGHTED TIMBER BARRICADES	600.00	L.F.	0 01	6 -
061	6.44 THERMOPLASTIC REFLECTORIZED PAVEMENT MARKINGS (4" WIDE)	800.00	L.F.	2 -	1,600 -

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062	6.52 CG CROSSING GUARD	3,750.00	P/HR	0 01	37 50
063	6.55 SAWCUTTING EXISTING PAVEMENT	48,400.00	L.F.	0 01	484 -
064	6.87 PLASTIC BARRELS	6,710.00	EACH	0 01	67 10
065	60.11R520 FURNISHING AND DELIVERING 20-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 55)	3,300.00	L.F.	100 -	330,000 -
066	60.11R606 FURNISHING AND DELIVERING 6-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 56)	1,150.00	L.F.	50 -	57,500 -
067	60.11R608 FURNISHING AND DELIVERING 8-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 56)	150.00	L.F.	60 -	9,000 -

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[REVISION # 1]

Feb 19 2015 01:17pm P019/033

Fax: 718-391-2615

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2/18/2015 12:00 AM

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COL 1 SEQ. NO.	COL 2 ITEM/NUMBER DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
068	60.11R612 FURNISHING AND DELIVERING 12-INCH DUCTILE IRON RESTRAINED JOINT PIPE (CLASS 66)	17,400.00	L.F.	75 -	1,305,000 -
069	60.12D06-IM LAYING 6-INCH DUCTILE IRON PIPE AND FITTINGS IN MANHATTAN (IN IMPROVED ROADWAY AND/OR SIDEWALK LOCATIONS)	1,265.00	L.F.	140 -	177,100 -
070	60.12D08-IM LAYING 8-INCH DUCTILE IRON PIPE AND FITTINGS IN MANHATTAN (IN IMPROVED ROADWAY AND/OR SIDEWALK LOCATIONS)	165.00	L.F.	145 -	23,925 -
071	60.12D12-IM LAYING 12-INCH DUCTILE IRON PIPE AND FITTINGS IN MANHATTAN (IN IMPROVED ROADWAY AND/OR SIDEWALK LOCATIONS)	19,140.00	L.F.	150 -	2,871,000 -
072	60.12D20-IM LAYING 20-INCH DUCTILE IRON PIPE AND FITTINGS IN MANHATTAN (IN IMPROVED ROADWAY AND/OR SIDEWALK LOCATIONS)	3,630.00	L.F.	225 -	816,750 -
073	60.13M0A24 FURNISHING AND DELIVERING DUCTILE IRON MECHANICAL JOINT 24-INCH DIAMETER AND SMALLER FITTINGS, INCLUDING WEDGE TYPE RETAINER GLANDS	66.00 68.0 3127.15	TONS	1 -	68 -

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

PROJECT ID: MEDA001
CONTRACT PIN: 8502015WM0006C

BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS	COL 7 GTS
074	61.11DMM06 FURNISHING AND DELIVERING 6-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	60.00	EACH	1000 -	60,000 -	-
075	61.11DMM08 FURNISHING AND DELIVERING 8-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	1.00	EACH	1500 -	1,500 -	-
076	61.11DMM12 FURNISHING AND DELIVERING 12-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	70.00	EACH	3000 -	210,000 -	-
077	61.11DMM20 FURNISHING AND DELIVERING 20-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	13.00	EACH	16000 -	208,000 -	-
078	61.11TWC03 FURNISHING AND DELIVERING 3-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	20.00	EACH	1 -	20 -	-

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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PROJECT ID: MEDA001
CONTRACT PIN: 8502015WM0006C

BID SCHEDULE FORM

COL. 1 SEQ. NO.	COL. 2 ITEM NUMBER and DESCRIPTION	COL. 3 ENGINEER'S ESTIMATE OF QUANTITY	COL. 4 UNIT	COL. 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL. 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
079	61.11TWC04 FURNISHING AND DELIVERING 4-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	13.00	EACH	1 -	13 -
080	61.11TWC06 FURNISHING AND DELIVERING 6-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	10.00	EACH	1 -	10 -
081	61.11TWC08 FURNISHING AND DELIVERING 8-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	10.00	EACH	1 -	10 -
082	61.11TWC12 FURNISHING AND DELIVERING 12-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	7.00	EACH	1 -	7 -
083	61.12DMM06 SETTING 6-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	60.00	EACH	500 -	30,000 -
084	61.12DMM08 SETTING 8-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	1.00	EACH	700 -	700 -

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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS - CENTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS - CENTS
085	61.12DMM12 SETTING 12-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	70.00	EACH	1000 -	70,000 -
086	61.12DMM20 SETTING 20-INCH MECHANICAL JOINT DUCTILE IRON GATE VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	13.00	EACH	5000 -	65,000 -
087	61.12TWC03 SETTING 3-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	20.00	EACH	1 -	20 -
088	61.12TWC04 SETTING 4-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	13.00	EACH	1 -	13 -
089	61.12TWC06 SETTING 6-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	10.00	EACH	1 -	10 -
090	61.12TWC08 SETTING 8-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	10.00	EACH	1 -	10 -

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2/18/2015 12:00 AM

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
DIVISION OF INFRASTRUCTURE - BUREAU OF DESIGN

PROJECT ID: MEDA001
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BID SCHEDULE FORM

COL. 1 SEQ. NO.	COL. 2 ITEM NUMBER AND DESCRIPTION	COL. 3 ESTIMATE OF QUANTITY	COL. 4 UNIT	COL. 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL. 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
091	61.12TWC12 SETTING 12-INCH WET CONNECTION TAPPING VALVE COMPLETE WITH WEDGE TYPE RETAINER GLANDS	7.00	EACH	1 -	7 -
092	62.11SD FURNISHING AND DELIVERING HYDRANTS	60.00	EACH	3000 -	180,000 -
093	62.12SG SETTING HYDRANTS COMPLETE WITH WEDGE TYPE RETAINER GLANDS	60.00	EACH	4000 -	240,000 -
094	62.13RH REMOVING HYDRANTS	45.00	EACH	1 -	45 -
095	62.14FS FURNISHING, DELIVERING AND INSTALLING HYDRANT FENDERS	120.00	EACH	145 -	17,400 -
096	63.11VC FURNISHING AND DELIVERING VARIOUS CASTINGS	205.00	TONS	1 -	205 -

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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COL 1 SEQ. NO.	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CENTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CENTS
097	64.11EL WITHDRAWING AND REPLACING HOUSE SERVICES USING 1-1/2- INCH OR LARGER SCREW TAPS	60.00	EACH	250 -	15,000 -
098	64.11ST WITHDRAWING AND REPLACING HOUSE SERVICES USING SMALLER THAN 1-1/2-INCH SCREW TAPS	400.00	EACH	180 -	72,000 -
099	64.12ESEG EXTENDING HOUSE SERVICE WATER CONNECTIONS (EQUAL TO OR GREATER THAN 3-INCH DIAMETER)	65.00	L.F.	150 -	9,750 -
100	64.12ESLT EXTENDING HOUSE SERVICE WATER CONNECTIONS (LESS THAN 3- INCH DIAMETER)	390.00	L.F.	100 -	39,000 -
101	64.13WC08 FURNISHING, DELIVERING AND INSTALLING WET CONNECTION SLEEVE ON 8-INCH WATER MAIN PIPE WITH VARIOUS OUTLETS	17.00	EACH	1 -	17 -
102	64.13WC12 FURNISHING, DELIVERING AND INSTALLING WET CONNECTION SLEEVE ON 12-INCH WATER MAIN PIPE WITH VARIOUS OUTLETS	17.00	EACH	1 -	17 -

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
103	64.13WC20 FURNISHING, DELIVERING AND INSTALLING WET CONNECTION SLEEVE ON 20-INCH WATER MAIN PIPE WITH VARIOUS OUTLETS	10.00	EACH	1 -	10 -
104	65.11BR FURNISHING, DELIVERING AND INSTALLING BANDS, RODS, WASHERS, ETC., COMPLETE, FOR RESTRAINING JOINTS	1,300.00	LBS.	1 -	1300 -
105	65.21PS FURNISHING AND PLACING POLYETHYLENE SLEEVE Unit price bid shall not be less than: \$ 0.50	1,000.00	L.F.	0 50	500 -
106	65.31FF FURNISHING, DELIVERING AND PLACING FILTER FABRIC Unit price bid shall not be less than: \$ 0.15	16,050.00	S.F.	0 15	2407 50
107	65.71SG FURNISHING, DELIVERING AND PLACING SCREENED GRAVEL OR SCREENED BROKEN STONE BEDDING	165.00	C.Y.	0 01	1 65
108	7.13 B MAINTENANCE OF SITE Unit price bid shall not be less than: \$ 4,000.00	18.00 12.00	MONTH	4000 -	48,000 -

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITIES	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CENTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CENTS
109	7.36 PEDESTRIAN STEEL BARRICADES	21,900.00	L.F.	0 01	219 -
110	70.21DK DECKING	100.00	S.Y.	50 -	5000 -
111	70.31FN FENCING Unit price bid shall not be less than: \$ 1.75	3,522.00	L.F.	1 75	6163 50
112	70.51EO EXCAVATION OF BOULDERS IN OPEN CUT Unit price bid shall not be less than: \$ 100.00	50.00	C.Y.	100 -	5000 -
113	70.61RE ROCK EXCAVATION	50.00	C.Y.	1500 -	75,000 -
114	70.71SB STONE BALLAST Unit price bid shall not be less than: \$ 15.00	55.00	C.Y.	15 -	825 -

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NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
115	70.91SW12 FURNISHING AND PLACING SHEETING AND BRACING IN TRENCH FOR WATER MAIN PIPE 12-INCH IN DIAMETER AND LESS	510.00	S.F.	0 01	510 -
116	70.91SW20 FURNISHING AND PLACING SHEETING AND BRACING IN TRENCH FOR WATER MAIN PIPE 20-INCH IN DIAMETER	1,110.00	S.F.	0 01	11 10
117	73.11AB ADDITIONAL BRICK MASONRY Unit price bid shall not be less than: \$ 62.50	2.00	C.Y.	62 50	125 -
118	73.21AC ADDITIONAL CONCRETE Unit price bid shall not be less than: \$ 87.50	30.00	C.Y.	87 50	2625 -
119	73.31AE0 ADDITIONAL EARTH EXCAVATION INCLUDING TEST PITS (ALL DEPTHS) Unit price bid shall not be less than: \$ 30.00	900.00	C.Y.	30 -	27,000 -
120	73.31AE2 ADDITIONAL EARTH EXCAVATION INCLUDING TEST PITS (OVER 12' TO 16' DEPTH) Unit price bid shall not be less than: \$ 15.00	340.00	C.Y.	15 -	5100 -

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COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CENTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CENTS
121	73.31AE3 ADDITIONAL EARTH EXCAVATION INCLUDING TEST PITS (OVER 16' TO 20' DEPTH) Unit price bid shall not be less than: \$ 20.00	80.00	C.Y.	20 -	1,600 -
122	73.41AG ADDITIONAL SELECT GRANULAR BACKFILL Unit price bid shall not be less than: \$ 15.00	5,250.00	C.Y.	15 -	78,750 -
123	73.51AS ADDITIONAL STEEL REINFORCING BARS Unit price bid shall not be less than: \$ 1.00	220.00	LBS.	2 -	440 -
124	9.32 REINFORCED SILT FENCE WITH STAKED HAY BALES	900.00	L.F.	1 -	900 -
125	DSS014A1 CLEANING OF SEWER (LESS THAN 24" DIAMETER).	2,000.00	L.F.	20 -	40000 -
126	DSS014A2 CLEANING OF SEWER (24" TO 48" DIAMETER).	1,160.00	L.F.	30 -	34,800 -

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BID SCHEDULE FORM

COL 1 SEQ. NO.	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
127	DSS014B CLEANING OF MANHOLE	10.00	EACH	2500 -	25,000 -
128	UTL-6.01.1 GAS MAIN CROSSING SEWER UP TO 24" IN DIAMETER (S6.01) Unit price bid shall not be less than: \$ 1,040.00	10.00	EACH	1040 -	10,400 -
129	UTL-6.01.2 GAS MAIN CROSSING SEWER 30" IN DIAMETER (S6.01) Unit price bid shall not be less than: \$ 1,770.00	2.00	EACH	1770 -	3540 -
130	UTL-6.01.3 GAS MAIN CROSSING SEWER 36" THRU 42" IN DIAMETER (S6.01) Unit price bid shall not be less than: \$ 2,040.00	2.00	EACH	2040 -	4080 -
131	UTL-6.01.4 GAS MAIN CROSSING SEWER 48" THRU 54" IN DIAMETER (S6.01) Unit price bid shall not be less than: \$ 2,120.00	2.00	EACH	2120 -	4240 -
132	UTL-6.01.8 GAS SERVICES CROSSING TRENCHES AND/OR EXCAVATIONS (S6.01) Unit price bid shall not be less than: \$ 465.00	150.00	EACH	465 -	69,750 -

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COL 1 SEQ. NO.	COL 2 ITEM NUMBER and DESCRIPTION	COL 3 ENGINEER'S ESTIMATE QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
133	UTL-6.01.9 GAS MAIN CROSSING WATER MAIN UP TO 20" IN DIAMETER (\$6.01) Unit price bid shall not be less than: \$ 485.00	100.00	EACH	485 -	48,500 -
134	UTL-6.02 EXTRA EXCAVATION FOR THE INSTALLATION OF CATCH BASIN SEWER DRAIN PIPES WITH GAS INTERFERENCES (\$6.02) Unit price bid shall not be less than: \$ 715.00	10.00	EACH	715 -	7,150 -
135	UTL-6.03 REMOVAL OF ABANDONED GAS FACILITIES, ALL SIZES. (\$6.03) Unit price bid shall not be less than: \$ 15.00	4,000.00	L.F.	15 -	60,000 -
136	UTL-6.03.1A REMOVAL OF ABANDONED GAS FACILITIES WITH POSSIBLE COAL TAR WRAP, ALL SIZES. (\$6.03) Unit price bid shall not be less than: \$ 25.00	500.00	L.F.	25 -	12,500 -
137	UTL-6.04 ADJUST HARDWARE TO GRADE USING SPACER RINGS/ADAPTORS. (STREET REPAVING.) (\$6.04) Unit price bid shall not be less than: \$ 35.00	150.00	EACH	35 -	5,250 -
138	UTL-6.05 ADJUST HARDWARE TO GRADE BY RESETTING. (ROAD RECONSTRUCTION.) (\$6.05) Unit price bid shall not be less than: \$ 65.00	150.00	EACH	65 -	9,750 -

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COL 1 SEQ. NO.	COL 2 ITEM NUMBER AND DESCRIPTION	COL 3 ENGINEER'S ESTIMATE OF QUANTITY	COL 4 UNIT	COL 5 UNIT PRICE (IN FIGURES) DOLLARS CTS	COL 6 EXTENDED AMOUNT (IN FIGURES) DOLLARS CTS
139	UTL-6.06 SPECIAL CARE EXCAVATION AND BACKFILLING (S6.06) Unit price bid shall not be less than: \$ 180.00	2,500.00	C.Y.	180 -	450,000 -
140	UTL-6.07 TEST PITS FOR GAS FACILITIES (S6.07) Unit price bid shall not be less than: \$ 100.00	200.00	C.Y.	100 -	20,000 -
141	UTL-6.09 TRENCH EXCAVATION AND BACKFILL FOR GAS MAINS AND SERVICES, GAS INSTALLED BY OTHERS. Unit price bid shall not be less than: \$ 190.00	2,000.00	C.Y.	190 -	380,000 -
142	UTL-GCS-2WS GAS INTERFERENCES AND ACCOMMODATIONS PRICE BID SHALL BE FOR THE FIXED SUM OF \$ 100,000.00	1.00	F.S.	100,000 00	100,000 00

2/18/2015 12:00 AM

NEW YORK CITY DEPARTMENT OF DESIGN AND CONSTRUCTION
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SUB-TOTAL: \$ 11,465,506.50

143	6.39 A MOBILIZATION BID PRICE OF MOBILIZATION SHALL NOT EXCEED 4% OF THE ABOVE SUB-TOTAL PRICE.	1.00	L.S.		458,620 26
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TOTAL BID PRICE: \$ 11,924,126.76

PLEASE BE SURE A LEGIBLE BID IS ENTERED FOR EACH ITEM.
THE BIDDER SHALL INSERT THE TOTAL BID PRICE IN
THE BID FORM ON PAGE C-4 OF THIS BID BOOKLET.

**BID FORM
THE CITY OF NEW YORK
DEPARTMENT OF DESIGN AND CONSTRUCTION
DIVISION OF INFRASTRUCTURE**

**BID FOR FURNISHING ALL LABOR AND
MATERIAL NECESSARY AND REQUIRED FOR:**

PROJECT ID: MEDA001

**FOR THE CONSTRUCTION OF ACCELERATED WATER MAIN REPLACEMENT AND SEWER
REHABILITATION AND REPLACEMENT**

**Together With All Work Incidental Thereto
BOROUGH OF MANHATTAN**

Name of Bidder: PTI Contracting Corp.

Date of Bid Opening: March 5th, 2015

Bidder is: (Check one, whichever applies) Individual () Partnership () Corporation (X)

Place of Business of Bidder: 2417 Seivichs tple #315 Garden City Park, NY 11040

Bidder's Telephone Number: 718.206.0245 Fax Number: 718.206.0083

Bidder's E-Mail Address: pticontracting@gmail.com

Residence of Bidder (If Individual): _____

If Bidder is a Partnership, fill in the following blanks:

Names of Partners

Residence of Partners

If Bidder is a Corporation, fill in the following blanks:

Organized under the laws of the State of New York

Name and Home Address of President: Lenny Pereira

57 Ledgewood DR Smithtown, N.Y.

Name and Home Address of Secretary: Dan McCallan

1023 Friendly Rd. Upper Brookville, N.Y.

Name and Home Address of Treasurer: _____

BID FORM

The above-named Bidder affirms and declares:

1. The said bidder is of lawful age and the only one interested in this bid; and no person, firm or corporation other than hereinbefore named has any interest in this bid, or in the Contract proposed to be taken.
2. By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its 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 quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and (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.
3. No councilman or other officer or employee or person whose salary is payable in whole or in part from the City Treasury is directly or indirectly interested in this bid, or in the supplies, materials, equipment, work or labor to which it relates, or in any of the profits thereof.
4. The bidder is not in arrears to the City of New York upon debt or contract or taxes, and is not a defaulter, as surety or otherwise, upon any obligation of the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York or State of New York, nor is there any proceeding pending relating to the responsibility or qualification of the bidder to receive public contracts except as set forth on the Affirmation included as page C-6 of this Bid Booklet.

The bidder hereby affirms that it has paid all applicable City income, excise and other taxes for all years it has conducted business activities in New York City.

5. The bidder, as an individual, or as a member, partner, director or officer of the bidder, if the same be a firm, partnership or corporation, executes this document expressly warranting and representing that should this bid be accepted by the City and the Contract awarded to him, he and his subcontractors engaged in the performance: (1) will comply with the provisions of Section 6-108 of the Administrative Code of the City of New York and the non-discrimination provisions of Section 220a of the New York State Labor Law, as more expressly and in detail set forth in the Agreement; (2) will comply with Section 6-109 of the Administrative Code of the City of New York in relation to minimum wages and other stipulations as more expressly and in detail set forth in the Agreement; (3) have complied with the provisions of the aforesaid laws since their respective effective dates, and (4) will post notices to be furnished by the City, setting forth the requirements of the aforesaid laws in prominent and conspicuous places in each and every plant, factory, building and structure where employees engaged in the performance of the Contract can readily view it, and will continue to keep such notices posted until the supplies, materials and equipment, or work labor and services required to be furnished or rendered by the Contractor have been finally accepted by the City. In the event of any breach or violation of the foregoing, the Contractor may be subject to damages, liquidated or otherwise, cancellation of the Contract and suspension as a bidder for a period of three years. (The words, "the bidder", "he", "his", and "him" where used herein shall mean the individual bidder, firm, partnership or corporation executing the bid).

6. **Compliance Report**

The bidder, as an individual, or as a member, partner, director, or officer of the bidder, if the same be a firm, partnership, or corporation, (1) represents that his attention has been specifically drawn to Executive Order No. 50, dated, April 25, 1980, on Equal Employment Compliance of the contract, and (2) warrants that he will comply with the provisions of Executive Order No. 50. The Employment Report must be submitted as part of the bid.

The bidder, as an individual, or as a member, partner, director, or officer of the bidder, if the same be a firm, partnership, or corporation, executes this document expressly warranting that he will comply with: (1) the provision of the contract on providing records, Chapter 8.

7. By submission of this bid, the bidder certifies that it now has and will continue to have the financial capability to fully perform the work required for this contract. Any award of this contract will be made in reliance upon such certification. Upon request therefor, the bidder will submit written verification of such financial capability in a form that is acceptable to the department.

8. In accordance with Section 165 of the State Finance Law, the bidder agrees that tropical hardwoods, as defined in Section 165 of the State Finance Law, shall not be utilized in the performance of this Contract, except as the same are permitted by the foregoing provision of law.

9. The bidder has visited and examined the site of the work and has carefully examined the Contract in the form approved by the Corporation Counsel, and will execute the Contract and perform all its items, covenants and conditions, and will provide, furnish and deliver all the work, materials, supplies, tools and appliances for all labor and materials necessary or required for the hereinafter named work, all in strict conformity with the Contract, for the prices set forth in the Bid Schedule:

10. **M/WBE UTILIZATION PLAN:** By signing its bid, the bidder agrees to the Vendor Certification and Required Affirmations set forth below, unless a full waiver of the Participation Goals is granted. The Vendor Certification and Required Affirmations will be deemed to satisfy the requirement to complete Section V of Part II of Schedule B: M/WBE Utilization Plan.

Section V: Vendor Certification and Required Affirmations:

I hereby:

- 1) acknowledge my understanding of the M/WBE participation requirements as set forth in this Contract and the pertinent provisions of Section 6-129 of the Administrative Code of the City of New York and the rules promulgated thereunder;
- 2) affirm that the information supplied in support of the M/WBE Utilization Plan is true and correct;
- 3) agree, if awarded this Contract, to comply with the M/WBE participation requirements of this Contract, the pertinent provisions of Section 6-129, and the rules promulgated thereunder, all of which shall be deemed to be material terms of this Contract;
- 4) agree and affirm that it is a material term of this Contract that the Vendor will award the total dollar value of the M/WBE Participation Goals to certified MBEs and/or WBEs, unless a full waiver is obtained or such goals are modified by the Agency; and
- 5) agree and affirm, if awarded this Contract, to make all reasonable, good faith efforts to meet the M/WBE Participation Goals, or If a partial waiver is obtained or such goals are modified by the Agency, to meet the modified Participation Goals by soliciting and obtaining the participation of certified MBE and/or WBE firms.

(NO TEXT ON THIS PAGE)

BID FORM

PROJECT ID: MEDA001

TOTAL BID PRICE: In the space provided below, the Bidder shall indicate its Total Bid Price in figures. Such Total Bid Price is set forth on the final page of the Bid Schedule.

TOTAL BID PRICE:
(a/k/a BID PROPOSAL)

\$ 11,924,126.⁷⁶
BB 3/18/15

BIDDER'S SIGNATURE AND AFFIDAVIT

Bidder: PAT II Contracting Corp.

By: [Signature]
(Signature of Partner or corporate officer)

[Signature]

Attest:
(Corporate Seal)

Secretary of Corporate Bidder

Affidavit on the following page should be subscribed
and sworn to before a Notary Public

BID FORM (TO BE NOTARIZED)

AFFIDAVIT WHERE BIDDER IS AN INDIVIDUAL

STATE OF NEW YORK, COUNTY OF _____ ss:

being duly sworn says:

I am the person described in and who executed the foregoing bid, and the several matters therein stated are in all respects true.

(Signature of the person who signed the Bid)

Subscribed and sworn to before me this

_____ day of _____,

Notary Public

AFFIDAVIT WHERE BIDDER IS A PARTNERSHIP

STATE OF NEW YORK, COUNTY OF _____ ss:

being duly sworn says:

I am a member of _____ the firm described in and which executed the foregoing bid. I subscribed the name of the firm thereto on behalf of the firm, and the several matters therein stated are in all respects true.

(Signature of Partner who signed the Bid)

Subscribed and sworn to before me this

_____ day of _____,

Notary Public

AFFIDAVIT WHERE BIDDER IS A CORPORATION

STATE OF NEW YORK, COUNTY OF Queens ss:

being duly sworn says:

I am the Lenny Pereira President of the above named corporation whose name is subscribed to and which executed the foregoing bid. I reside at 57 Ledgewood DR. Smithtown, N.Y.

I have knowledge of the several matters therein stated, and they are in all respects true.

(Signature of Partner who signed the Bid)

Subscribed and sworn to before me this

5th day of March, 2015

Notary Public

AFFIRMATION

PROJECT ID: MEDA001

The undersigned bidder affirms and declares that said bidder is not in arrears to the City of New York upon debt, contract or taxes and is not a defaulter, as surety or otherwise, upon obligation to the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York, nor is there any proceeding pending relating to the responsibility or qualification of the bidder to receive public contracts except:

NONE

(If none, the bidder shall insert the word "None" in the space provided above.)

Full Name of Bidder: P&T II Contracting Corp.
Address: 2417 Jericho tpke # 315
City Garden City Park State N.Y. Zip Code 11040

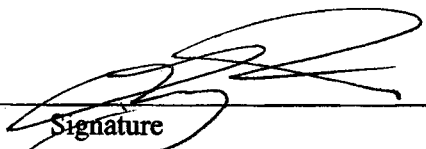
CHECK ONE BOX AND INCLUDE APPROPRIATE NUMBER:

☐ A - Individual or Sole Proprietorship*
SOCIAL SECURITY NUMBER

☐ B - Partnership, Joint Venture or other unincorporated organization
EMPLOYER IDENTIFICATION NUMBER

☒ C - Corporation
EMPLOYER IDENTIFICATION NUMBER

20-4708892

By: 
Signature

Title: President

If a corporation, place seal here

This affirmation must be signed by an officer or duly authorized representative.

*Under the Federal Privacy Act the furnishing of Social Security Numbers by bidders on City contracts is voluntary. Failure to provide a Social Security Number will not result in a bidder's disqualification. Social Security Numbers will be used to identify bidders, proposers or vendors to ensure their compliance with laws, to assist the City in enforcement of laws, as well as to provide the City a means of identifying of businesses which seek City contracts.

(NO TEXT ON THIS PAGE)

BID BOND 1
FORM OF BID BOND

KNOW ALL MEN BY THESE PRESENTS. That we, P & T II Contracting Corp.
2417 Jericho Turnpike, Garden City Park, NY 11040

hereinafter referred to as the "Principal", and Liberty Mutual Insurance Company
1200 MacArthur Blvd., Mahwah, NJ 07043

hereinafter referred to as the "Surety" are held and firmly bound to THE CITY OF NEW YORK,
hereinafter referred to as the "CITY", or to its successors and assigns in the penal sum of _____

TEN PERCENT OF AMOUNT BID

(10% Amt Bid), Dollars lawful money of the United States, for the payment of which said sum of money well and truly to be made, we, and each of us, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Whereas, the Principal is about to submit (or has submitted) to the City the accompanying proposal, hereby made a part hereof, to enter into a contract in writing for _____

Cont. #MEDA001 - Construction of Accelerated Water Main Replacement and Sewer Rehabilitation and
Replacement - Boro of Manhattan

NOW, THEREFORE, the conditions of this obligation are such that if the Principal shall not withdraw said Proposal without the consent of the City for a period of forty-five (45) days after the opening of bids and in the event of acceptance of the Principal's Proposal by the City, if the Principal shall:

- (a) Within ten (10) days after notification by the City, execute in quadruplicate and deliver to the City all the executed counterparts of the Contract in the form set forth in the Contract Documents, in accordance with the proposal as accepted, and
- (b) Furnish a performance bond and separate payment bond, as may be required by the City, for the faithful performance and proper fulfillment of such Contract, which bonds shall be satisfactory in all respects to the City and shall be executed by good and sufficient sureties, and
- (c) In all respects perform the agreement created by the acceptance of said Proposal as provided in the Information for Bidders, bound herewith and made a part hereof, or if the City shall reject the aforesaid Proposal, then this obligation shall be null and void; otherwise to remain in full force and effect.

BID BOND 2

In the event that the Proposal of the Principal shall be accepted and the Contract be awarded to him the Surety hereunder agrees subject only to the payment by the Principal of the premium therefore, if requested by the City, to write the aforementioned performance and payment bonds in the form set forth in the Contract Documents.

It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall in no event exceed the penal amount of this obligation as herein stated.

There shall be no liability under this bond if, in the event of the acceptance of the Principal's Proposal by the City, either a performance bond or payment bond, or both, shall not be required by the City on or before the 30th day after the date on which the City signs the Contract.

The surety, for the value received, hereby stipulates and agrees that the obligations of the Surety and its bond shall in no way be impaired or affected by any postponements of the date upon which the City will receive or open bids, or by any extensions of the time within which the City may accept the Principal's Proposal, or by any waiver by the City of any of the requirements of the Information for Bidders, and the Surety hereby waives notice of any such postponements, extensions, or waivers.

IN WITNESS WHEREOF, the Principal and the Surety have hereunto set their hands and seals and such of them as are corporations have caused their corporate seals to be hereto affixed and these presents to be signed by their proper officers the 18th day of February, 2015.

(Seal)

P & T II Contracting Corp.

(L.S.)

Principal

By: 

(Seal)

Liberty Mutual Insurance Company

Surety

By: 

Robert Kempner, Attorney-in-Fact

BID BOND 3

ACKNOWLEDGMENT OF PRINCIPAL, IF A CORPORATION

State of _____ County of _____ ss:
On this _____ day of _____, _____, before me personally came
_____ to me known, who, being by me duly sworn, did depose and say
that he resides at _____
that he is the _____ of _____
the corporation described in and which executed the foregoing instrument; that he knows the seal of said
corporation; that one of the seals affixed to said instrument is such seal; that it was so affixed by order of
the directors of said corporation, and that he signed his name thereto by like order.

Notary Public

ACKNOWLEDGMENT OF PRINCIPAL, IF A PARTNERSHIP

State of _____ County of _____ ss:
On this _____ day of _____, _____, before me personally appeared
_____ to me known and known to me to be one of the members of the
firm of _____ described in and who executed the foregoing
instrument, and he acknowledged to me that he executed the same as and for the act and deed of said
firm.

Notary Public

ACKNOWLEDGMENT OF PRINCIPAL, IF AN INDIVIDUAL

State of _____ County of _____ ss:
On this _____ day of _____, _____, before me personally appeared
_____ to me known and known to me to be the person described in
and who executed the foregoing instrument and acknowledged that he executed the same.

Notary Public

AFFIX ACKNOWLEDGMENTS AND JUSTIFICATION OF SURETIES

ACKNOWLEDGEMENT OF PRINCIPAL, OF A CORPORATION

STATE OF New York

SS:

COUNTY OF Queens

On this 17th day of March, 2015 before me personally came Lenny Pereira to me known, who, being by me duly sworn did depose and say that he resides at Smithtown, NY that he is the President of P-T II Contracting Corp the corporation described in and which executed the foregoing instrument; that he knows the seal of said corporation; that one of the seals affixed to the foregoing instrument is such seal; that it was an affixed by order of the board of directors of said corporation; and that he signed his name thereto by like order.

CLAUDIA J WHITFIELD
NOTARY PUBLIC-STATE OF NEW YORK
No. 01WH5004514
Qualified in Queens County
My Commission Expires November 16, 2018


Notary Public 3/17/15

ACKNOWLEDGEMENT OF SURETY

STATE OF New York

SS:

COUNTY OF Nassau

On this 18th day of February, 2015, before me personally came Robert Kempner to me known, who, being by me duly sworn, did depose and say that he is an Attorney-In-Fact of Liberty Mutual Insurance Company the corporation described in and which executed the within instrument; that he knows the corporate seal of said corporation; that the seal affixed to the within instrument is such corporate seal, and that he signed and said instrument and affixed the said seal as Attorney-In-Fact by authority of the Board of Directors of said corporation and by authority of this office under the Standing Resolutions thereof.

LYNN ANN INFANTI
Notary Public, State of New York
No. 01IN6004351
Qualified in Suffolk County 2018
Commission Expires March 23, 2018

My commission expires _____



Notary Public

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Certificate No. 6777288

American Fire and Casualty Company
The Ohio Casualty Insurance Company

Liberty Mutual Insurance Company
West American Insurance Company

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That American Fire & Casualty Company and The Ohio Casualty Insurance Company are corporations duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Joseph Sforzo; Robert Kempner; Robert W. O'Kane; Susan P. Hammel

all of the city of Plainview, state of NY each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 10th day of November, 2014.



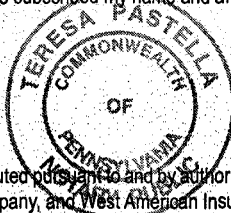
American Fire and Casualty Company
The Ohio Casualty Insurance Company
Liberty Mutual Insurance Company
West American Insurance Company

By: David M. Carey
David M. Carey, Assistant Secretary

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 10th day of November, 2014, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of American Fire and Casualty Company, Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute 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 have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public
Plymouth Twp., Montgomery County
My Commission Expires March 28, 2017
Member, Pennsylvania Association of Notaries

By: Teresa Pastella
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS - Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts - SECTION 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Gregory W. Davenport, the undersigned, Assistant Secretary, of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 18th day of February, 2015.



By: Gregory W. Davenport
Gregory W. Davenport, Assistant Secretary

NOT valid for mortgage, note, loan, letter of credit,
currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call
1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.



LIBERTY MUTUAL INSURANCE COMPANY
FINANCIAL STATEMENT — DECEMBER 31, 2013

Assets		Liabilities	
Cash and Bank Deposits.....	\$1,118,180,550	Unearned Premiums.....	\$5,940,431,054
*Bonds — U.S. Government.....	1,888,225,943	Reserve for Claims and Claims Expense.....	17,305,063,560
*Other Bonds.....	12,039,490,815	Funds Held Under Reinsurance Treaties.....	212,659,311
*Stocks.....	9,030,962,112	Reserve for Dividends to Policyholders.....	1,226,236
Real Estate.....	251,301,907	Additional Statutory Reserve.....	63,343,987
Agents' Balances or Uncollected Premiums.....	4,781,042,931	Reserve for Commissions, Taxes and	
Accrued Interest and Rents.....	149,855,386	Other Liabilities.....	5,826,683,629
Other Admitted Assets.....	15,216,749,451	Total.....	\$29,349,412,770
Total Admitted Assets.....	\$44,475,809,095	Special Surplus Funds.....	\$55,686,852
		Capital Stock.....	11,250,000
		Paid in Surplus.....	7,895,285,167
		Unassigned Surplus.....	7,161,171,306
		Surplus to Policyholders.....	15,126,396,325
		Total Liabilities and Surplus.....	\$44,475,809,095



* Bonds are stated at amortized or investment value. Stocks at Association Market Values.
The foregoing financial information is taken from Liberty Mutual Insurance Company's financial statement filed with the state of Massachusetts Department of Insurance.

I, TIM MIKOLAJEWSKI, Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the foregoing is a true and correct statement of the Assets and Liabilities of said Corporation, as of December 31, 2013, to the best of my knowledge and belief.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Corporation at Seattle, Washington, this 20th day of March, 2014.

Tim Mikolajewski

Assistant Secretary

Tax ID #: 20.4708892

APT E-
PIN #: 85015B0089

SCHEDULE B – M/WBE Utilization Plan
Part I: M/WBE Participation Goals

Part I to be completed by contracting agency

Contract Overview

APT E- Pin # 85015B0089 FMS Project ID#: MEDA-001

Project Title/ Agency
PIN # CONSTRUCTION OF ACCELERATED WATER MAIN REPLACEMENT AND SEWER
REHABILITATION AND REPLACEMENT/8502015WM0006C

Bid/Proposal
Response Date MARCH 5, 2015

Contracting Agency Department of Design and Construction

Agency Address 30-30 Thomson Avenue City Long Island City State NY Zip Code 11101

Contact Person Monika Beci Title MWBE Liaison & Compliance Analyst

Telephone # (718) 391-1128 Email BeciMo@ddc.nyc.gov

Project Description (attach additional pages if necessary)

PROJECT ID: MEDA001

**FOR THE CONSTRUCTION OF ACCELERATED WATER MAIN REPLACEMENT AND SEWER
REHABILITATION AND REPLACEMENT**

**Together With All Work Incidental Thereto
BOROUGH OF MANHATTAN
CITY OF NEW YORK**

M/WBE Participation Goals for Services

Enter the percentage amount for each group or for an unspecified goal. Please note that there are no goals for Asian Americans in Professional Services.

Prime Contract Industry: Construction

Group	Percentage
<u>Unspecified*</u>	<u>5%</u>
or	
<u>Black American</u>	<u>UNSPECIFIED*</u>
<u>Hispanic American</u>	<u>UNSPECIFIED*</u>
<u>Asian American</u>	<u>UNSPECIFIED*</u>
<u>Women</u>	<u>UNSPECIFIED*</u>
Total Participation Goals	5% Line 1

**Note: For this procurement, individual ethnicity and gender goals are not specified. The Total Participation Goal for construction contracts may be met by using either Black-American, Hispanic-American, Asian American, or Women certified firms or any combination of such firms.*

Tax ID #: 20-4708892APT E-
PIN #:85015B0089**SCHEDULE B - Part II: M/WBE Participation Plan**

Part II to be completed by the bidder/proposer.

Please note: For Non-M/WBE Prime Contractors who will NOT subcontract any services and will self-perform the entire contract, you must obtain a FULL waiver by completing the Waiver Application on pages 17 and 18 and timely submitting it to the contracting agency pursuant to the Notice to Prospective Contractors. Once a FULL WAIVER is granted, it must be included with your bid or proposal and you do not have to complete or submit this form with your bid or proposal.

Section I: Prime Contractor Contact Information

Tax ID # 20-4708892 FMS Vendor ID # _____
 Business Name PT II Contracting Corp Contact Person Lenny Pereira
 Address 2417 Jericho Tpke #315, Garden City Park 11040
 Telephone # 718 206-0245 Email pt2contracting@gmail.com

Section II: M/WBE Utilization Goal Calculation: Check the applicable box and complete subsection**PRIME CONTRACTOR ADOPTING AGENCY M/WBE PARTICIPATION GOALS**

☒ For Prime Contractors (including Qualified Joint Ventures and M/WBE firms) adopting Agency M/WBE Participation Goals.

Calculate the total dollar value of your total bid that you agree will be awarded to M/WBE subcontractors for services and/or credited to an M/WBE prime contractor or Qualified Joint Venture.

Please review the Notice to Prospective Contractors for more information on how to obtain credit for M/WBE participation.

Total
Bid/Proposal
Value

\$ 11,924,126.76 X

Agency Total
Participation Goals
(Line 1, Page 13)

5%

Calculated M/WBE
Participation
Amount

\$596,206.34
Line 2

PRIME CONTRACTOR OBTAINED PARTIAL WAIVER APPROVAL: ADOPTING MODIFIED M/WBE PARTICIPATION GOALS

☐ For Prime Contractors (including Qualified Joint Ventures and M/WBE firms) adopting Modified M/WBE Participation Goals.

Calculate the total dollar value of your total bid that you agree will be awarded to M/WBE subcontractors for services and/or credited to an M/WBE prime contractor or Qualified Joint Venture.

Please review the Notice to Prospective Contractors for more information on how to obtain credit for M/WBE participation.

Total
Bid/Proposal
Value

\$

Adjusted
Participation Goal
(From Partial Waiver)

X

Calculated M/WBE
Participation
Amount

\$
Line 3

APPRENTICESHIP PROGRAM REQUIREMENTS

Bidders are advised that the Apprenticeship Program Requirements set forth below apply to each contract for which a check mark is indicated before the word "Yes". Compliance with these requirements will be determined solely by the City.

☒ YES

☐ NO

(1) Apprenticeship Program Requirements

Notice to Bidders: Please be advised that, pursuant to the authority granted to the City under Labor Law Section 816-b, the Department of Design and Construction hereby requires that the contractor awarded a contract as a result of this Invitation for Bids, and any of its subcontractors with subcontracts worth one million dollars or over, have, prior to entering into such contract or subcontract, apprenticeship agreements appropriate for the type and scope of work to be performed that have been registered with, and approved by, the New York State Commissioner of Labor. In addition, the contractor and its subcontractors will be required to show that such apprenticeship programs have three years of current, successful experience in providing career opportunities.

The failure to prove, upon request, that these requirements have been met shall result in the contract not being awarded to the contractor or the subcontract not being approved.

Please be further advised that, pursuant to Labor Law Section 220, the allowable ratio of apprentices to journeypersons in any craft classification shall not be greater than the ratio permitted to the contractor as to its workforce on any job under the registered apprenticeship program.

(2) Apprenticeship Program Questionnaire

The bidder must submit a completed and signed Apprenticeship Program Questionnaire. The Questionnaire is set forth on the following page of the Bid Booklet.

PROJECT ID: MEDA001

1. Does the bidder have an Apprenticeship Program appropriate for the type and scope of work to be performed?
[Note: Participation may be by either direct sponsorship or through collective bargaining agreement(s).]

 YES ☒ NO

2. **Has the bidder's Apprenticeship Program been registered with, and approved by, the New York State Commissioner of Labor?**

 YES ✓ NO

3. Has the bidder's Apprenticeship Program had three years of successful experience in providing career opportunities?

 YES ✓ NO

Bidder: PTI Contracting Corp.
By: [Signature] Title: President
(Signature of Partner or Corporate Officer)
Date: 3/5/15

Agreement, effective this 26 day of February 7, 20 by and between Local Union 14-14B and Local Union 15, 15A, 15C and 15D, International Union of Operation Engineers, AFL-CIO ("the UNION") and P & T II CONTRACTING CORP. 718-206-0245

2417 JERICHO TURNPIKE SUITE 315, GARDEN CITY PARK (NEW HOLLAND)

WHEREAS, the parties hereto acknowledge that there are presently Collective Bargaining Agreements between the Union and the Cement League, the General Contractors Association of New York, the Contractors Association of Greater New York, the Building Contractors Association, Allied Building Metal Industries, Inc., Association of Concrete Contractors of New York, Inc., the Construction Industry Council of Westchester and Hudson Valley, the Associated Brick Mason Contractors of Greater New York, the Association of New York City Concrete Producers, Inc. and the Asbestos Abatement Contractors Association. In addition, the **EMPLOYER** recognizes there are or will be certain amendments, extensions and renewals to the various Association Agreements (hereinafter referred to as the "Association Collective Bargaining Agreements") to be negotiated on behalf of the Employer by the various Employer Associations; and **WHEREAS**, the Employer Acknowledges receipt of a copy of each of the Association Collective Bargaining Agreement; and **WHEREAS**, the Employer performs work from time to time which is covered by all or some of the above-mentioned Agreements and recognizes the Union as a source for the procurement of skilled workmen for the work described in the applicable Association Collective Bargaining Agreement.

NOW, THEREFORE, the parties agree as follows:

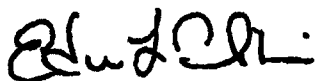
1. The Employer is bound to all of the terms and conditions as are applicable from time to time by the nature of the work performed for each of the Association Collective Bargaining Agreements which are incorporated herein by reference as if fully set forth in this Agreement, except as specifically set forth hereinafter in paragraphs "2" and "3".
2. The grievance and arbitration procedure described in each Association Collective Bargaining Agreement shall not apply in this Agreement and the procedures shall be as follows:

Any complaint, dispute or difference arising out of this Agreement shall be referred to the Union Business Agent and a representative of the Employer for a job site meeting within three (3) days notice to them of the occurrence giving rise to such complaint, dispute or difference. If the matter is not resolved within seven (7) days of such meeting, then the aggrieved party may submit the matter for arbitration to one (1) of the two (2) arbitrators named hereinafter. These arbitrators shall be Ben Falcigno and John Crotty.
3. The Employer agrees that the operation of Scissor-Lift Trucks is the jurisdiction of the Operating Engineers. Scissor-Lift Trucks used solely as scaffolds or welding platforms will not be manned by an Operating Engineer. Scissor-Lift Trucks used for hoisting any material will be manned by an Operating Engineer. Occasional use of a Scissor-Lift Truck is the jurisdiction of the Operating Engineers, and the computation of the time used as a hoisting machine will be agreed upon by both the Employer and the Business Agent.
4. The parties further agree to be bound to all the agreements and declarations of trusts, amendments and regulations, thereto, referenced in the applicable Association Collective Bargaining Agreements and to remit all contributions as set forth under the applicable Association Collective Bargaining Agreements and all amendments, renewals and/or extensions thereto, as adopted by the aforesaid Association and the aforesaid Local Union or their designated trustees.

ANY FUTURE ORDER OF FRINGE BENEFIT STAMPS MUST BE MADE BY CERTIFIED CHECK

5. The Employer agrees to be responsible for the payment of fringe benefit contributions on the stamps reported for each of the three (3) reporting periods which occur every year in March, July and November. Further, the Employer agrees that for every period in which an individual is reported as being employed as an Operating Engineer, the Employer shall be responsible for the payment of fringe benefit contributions for a minimum of forty (40) hours per week for every week in such period. This requirement shall apply to any and all individuals employed as Operating Engineers for any length of time during any given period, regardless of whether they are also employed by the Employer during such period in some other capacity and/or hold a different title with said Employer's company, including but not limited to owner, shareholder, officer, director, etc.
6. The Employer agrees that the applicable Association shall, on behalf of the Employer, negotiate successor Collective Bargaining Agreements, amendments, renewals and extensions of the applicable Collective Bargaining Agreements and the Employer agrees to be bound by any and all amendments, renewals and/or extensions of the above referenced Association Collective Bargaining Agreements unless and until this Agreement is properly terminated by either the Employer or the Union in accordance with the renewal and/or Termination Provisions of the applicable Association Collective Bargaining Agreements.

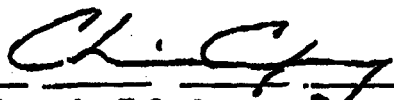
IN WITNESS WHEREOF, the parties have caused this agreement to be executed by their duly authorized representatives.



Edwin L. Christian
President and Business Manager
International Union of Operating Engineers,
Local 14-14B

P+T II Contracting Corp
Company Name

2417 Jericho Tpke Suite 315
Address



Christopher T. Confrey
Recording Corresponding Secretary
International Union of Operating Engineers,
Local 14-14B

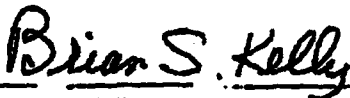
Garden City Park NY 11040
City, State, Zip Code



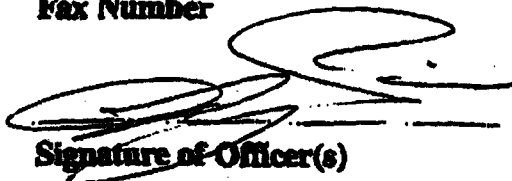
James T. Callahan
President and Business Manager
International Union of Operating Engineers,
Local 15, 15A, 15C and 15D

718 206-0210
Telephone Number

718 206-0083
Fax Number



Brian S. Kelly
Recording Corresponding Secretary
International Union of Operating Engineers,
Local 15, 15A, 15C and 15D



Signature of Officer(s)

Lenny Pereira Pres
Name and Title of Officer(s)
(PLEASE PRINT)

ANY FUTURE ORDER OF FRINGE BENEFIT STAMPS MUST BE MADE BY CERTIFIED CHECK

**BUILDING, CONCRETE,
EXCAVATING &
COMMON LABORERS' UNION
LOCAL No. 731**

of

**GREATER NEW YORK,
LONG ISLAND AND VICINITY
of the**

**LABORERS' INTERNATIONAL
UNION OF NORTH AMERICA**

INDEPENDENT AGREEMENT

JULY 1, 2012 to JUNE 30, 2016



AGREEMENT

BETWEEN

**THE HIGHWAY ROAD AND STREET
CONSTRUCTION LABORERS**

LOCAL UNION 1010

OF

**THE DISTRICT COUNCIL OF PAVERS
AND ROAD BUILDERS OF THE
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA AFL-CIO**

AND

THE EMPLOYER

JULY 1, 2012– JUNE 30, 2015

SAFETY QUESTIONNAIRE

The bidder must include, with its bid, all information requested on this Safety Questionnaire. Failure to provide a completed and signed Safety Questionnaire at the time of bid opening may result in disqualification of the bid as non-responsive.

1. Bidder Information:Company Name: P&T II Contracting Corp.DDC Project Number: MEDA001

Company Size: _____ Ten (10) employees or less
☒ Greater than ten (10) employees

Company has previously worked for DDC ☒ YES _____ NO

2. Type(s) of Construction Work

TYPE OF WORK	LAST 3 YEARS	THIS PROJECT
General Building Construction	_____	_____
Residential Building Construction	_____	_____
Nonresidential Building Construction	_____	_____
Heavy Construction, except building	_____	_____
Highway and Street Construction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Heavy Construction, except highways	_____	_____
Plumbing, Heating, HVAC	_____	_____
Painting and Paper Hanging	_____	_____
Electrical Work	_____	_____
Masonry, Stonework and Plastering	_____	_____
Carpentry and Floor Work	_____	_____
Roofing, Siding, and Sheet Metal	_____	_____
Concrete Work	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Specialty Trade Contracting	_____	_____
Asbestos Abatement	_____	_____
Other (specify)	_____	_____

3. Experience Modification Rate:

The Experience Modification Rate (EMR) is a rating generated by the National Council of Compensation Insurance (NCCI). This rating is used to determine the contractor's premium for worker's compensation insurance. The contractor may obtain its EMR by contacting its insurance broker or the NCCI. If the contractor cannot obtain its EMR, it must submit a written explanation as to why.

Project ID. MEDACOL

The Contractor must indicate its Intrastate and Interstate EMR for the past three years. [Note: For contractors with less than three years of experience, the EMR will be considered to be 1.00].

YEAR	INTRASTATE RATE	INTERSTATE RATE
<u>2013</u>	<u>.80</u>	<u>.80</u>
<u>2012</u>	<u>.81</u>	<u>.81</u>
<u>2011</u>	<u>.97</u>	<u>.97</u>

If the Intrastate and/or Interstate EMR for any of the past three years is greater than 1.00, the contractor must attach, to this questionnaire, a written explanation for the rating and identify what corrective action was taken to correct the situation resulting in that rating.

4. OSHA Information:

- ☐ YES ☐ NO Contractor has received a willful violation issued by OSHA or New York City Department of Buildings (NYCDOB) within the last three years.
- ☐ YES ☐ NO Contractor has had an incident requiring OSHA notification within 8 hours (i.e., fatality, or hospitalization of three or more employees).

The Occupational Safety and Health Act (OSHA) of 1970 requires employers with ten or more employees, on a yearly basis to complete and maintain on file the form entitled "Log of Work-related Injuries and Illnesses". This form is commonly referred to as the OSHA 300 Log (OSHA 200 Log for 2001 and earlier).

The OSHA 300 Log must be submitted for the last three years for contractors with more than ten employees.

The Contractor must indicate the total number of hours worked by its employees, as reflected in payroll records for the past three years.

The contractor must submit the Incident Rate for Lost Time Injuries (the Incident Rate) for the past three years. The Incident Rate is calculated in accordance with the formula set forth below. For each given year, the total number of incidents is the total number of non-fatal injuries and illnesses reported on the OSHA 300 Log. The 200,000 hours represents the equivalent of 100 employees working forty hours a week, fifty weeks per year.

$$\text{Incident Rate} = \frac{\text{Total Number of Incidents} \times 200,000}{\text{Total Number of Hours Worked by Employees}}$$

YEAR	TOTAL NUMBERS OF HOURS WORKED BY EMPLOYEES	INCIDENT RATE
<u>2013</u>	<u>128,633</u>	<u>1.6</u>
<u>2012</u>	<u>74,820</u>	<u>0</u>
<u>2011</u>	<u>71,694</u>	<u>2.79</u>

If the contractor's Incident Rate for any of the past three years is one point higher than the Incident Rate for the type of construction it performs (listed below), the contractor must attach, to this questionnaire, a written explanation for the relatively high rate.

General Building Construction	8.5
Residential Building Construction	7.0
Nonresidential Building Construction	10.2
Heavy Construction, except building	8.7
Highway and Street Construction	9.7
Heavy Construction, except highways	8.3
Plumbing, Heating, HVAC	11.3
Painting and Paper Hanging	6.9
Electrical Work	9.5
Masonry, Stonework and Plastering	10.5
Carpentry and Floor Work	12.2
Roofing, Siding, and Sheet Metal	10.3
Concrete Work	8.6
Specialty Trade Contracting	8.6

5. Safety Performance on Previous DDC Project(s)

☒ YES ☐ NO Contractor previously audited by the DDC Office of Site Safety.

DDC Project Number(s): HWP2009Q, _____, _____

☒ YES ☐ NO Accident on previous DDC Project(s).

DDC Project Number(s): HWP200R, _____, _____

☐ YES ☒ NO Fatality or Life-altering Injury on DDC Project(s) within the last three years.
[Examples of a life-altering injury include loss of limb, loss of a sense (e.g., sight, hearing), or loss of neurological function].

DDC Project Number(s): _____, _____, _____

Date: 3/5/15

By: 
(Signature of Owner, Partner, Corporate Officer)

Title: President

(NO TEXT ON THIS PAGE)

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 20 \ \



U.S. Department of Labor
Occupational Safety and Health Administration
Form approved OMB no. 1218-0178

Establishment name P4T II Contracting Corp
at Garden City Park, N.Y.

Identify the person		Describe the case			Classify the case				Enter the number of days the injured or ill worker was		Check the "Injury" column across one type of illness						
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Classify the case CHECK ONLY ONE box for each case based on the most serious outcome for that case				Enter the number of days the injured or ill worker was		Check the "Injury" column across one type of illness					
						Remained at Work											
						Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	Away from work (K)	On job transfer or restriction (L)						
												(1)	(2)	(3)	(4)	(5)	(6)
	Diaz, Enrique	Laborer	2/15	Brielle Ave	cut leg - 14 stitches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	0	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	days	days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	days	days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>											

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

Year 20 11



U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OSHA no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	1
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of ... (M)			
(1) Injuries	1	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss	0
(3) Respiratory conditions	0	(6) All other illnesses	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name P&T II Contracting Corp

Street 2417 Jericho Tpke

City Garden City Park State NY Zip 11040

Industry description (e.g., *Manufacture of motor truck trailers*)

Heavy Construction

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 52

Total hours worked by all employees last year 71694

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

[Signature] President
Company executive Title
Phone 718-206-0210 Date 1/22/15

Save Input

Log of Work-Related Injuries and Illnesses

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 20 12U.S. Department of Labor
Occupational Safety and Health Administration

Form approved (10/15) am. 1218-0116

Establishment name

PTC Contracting Co
on Garden City Rd
City AK

Describe the person

(B) Employee's name

None

(C) Job title
(e.g., Welder)(D) Date of injury
or onset
of illness(E) Where the event occurred
(e.g., Loading dock north end)(F) Describe injury or illness, parts of body affected,
and object/substance that directly injured
or made person ill (e.g., Second degree burns on
right forearm from airborne torch)

Classify the case

CHECK ONLY ONE box for each case
based on the most serious outcome for
that case:

Deaths

(G)

(H)

(I)

(J)

(K)

(L)

(M)

(N)

(O)

(P)

(Q)

(R)

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(

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Form approved OMB no. 1218-0176

Establishment name **P&T II CONTRACTING CORP**

City **GARDEN CITY PARK** State **NY**

[illegible]

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Page totals ▶ 0 1 0 0

2 1 0 0 0 0 0

Page 1 of 1

(1)	Injury	(2)	Skin disorder	(3)	Respiratory condition	(4)	Poisoning	(5)	Hearing loss	(6)	All other illnesses
-----	--------	-----	---------------	-----	-----------------------	-----	-----------	-----	--------------	-----	---------------------

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

Year 20 13

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	1	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
2	
(K)	(L)

Injury and Illness Types

Total number of ...			
(M)			
(1) Injuries	1	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss	0
(3) Respiratory conditions	0	(6) All other illnesses	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name P&T II CONTRACTING CORP

Street 2417 JERICHO TPKE - 315

City GARDEN CITY PARK State NY Zip 11040

Industry description (e.g., Manufacture of motor truck trailers)

Heavy Construction

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 65

Total hours worked by all employees last year 128633

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

[Signature] Title President

Company Executive

Phone 718-206-0210 Date 1/20/14

Save Input

L

P&T II Contracting Corp.*2417 Jericho Turnpike Suite 315**Garden City Park, NY 11040**718-206-0245**Fax - 718-206-0083*

<u>Projects Completed</u>	<u>Contract Amount</u>	<u>NYC Agency</u>
SEK002337	\$ 694,835.	NYC DDC
HWBUSPAD2	\$ 984,473.	NYC DDC
HWP2008R	\$4,672,387.	NYC DDC
HWM1165	\$10,183,335.	NYC DDC
SECBK1	\$ 2,032,784.	NYC DDC
HWP2010R	\$ 5,165,495.	NYC DDC
RED368	\$ 3,621,759.	NYC DDC
SECBRPQ02	\$ 1,784,995.	NYC DDC

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

<u>Projects Completed</u>	<u>Contract Amount</u>	<u>NYC Agency</u>
SEQ200475	\$ 6,985,751.	NYC DDC
HWQ232H	\$ 985,983.	NYC DDC
HWC988M1	\$ 3,587,879.	NYC DDC
SEQ200500	\$ 1,993,547.	NYC DDC
SEQ200506	\$ 2,121,162.	NYC DDC

P&T II Contracting Corp.

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Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

DEVELOPMENT

<u>Project</u>	<u>Description</u>
Client: DDC	
Ped Ramps - Queens	Contractor
Sewer Trenches	Contractor
Ped Ramps Queens	Contractor
Ped Ramps Bronx	Contractor
Sidewalk & Ped Ramps Bronx	Contractor
Pedestrian Ramps Bronx	Contractor
Pedestrian Ramps Queens	Contractor
Installation of Sidewalks Queens	Contractor
Installation of Sidewalks Queens	Contractor
Installation of Sidewalks Bronx	Contractor
Pedestrian Ramps Queens	Contractor
Restoration of Sewer Trenches Bklyn	Contractor
Client:	
East NY Homes Inc.	Contractor
Client: Atlas Construction Corp.	
Morgan Related CT.	Subcontractor Concrete Foundation Slabs & Site Work
Client: Leon De Mattes	
St. Johns Hospital Queens	Subcontractor Concrete Foundation Slab & Site Work
Client: Delux	
Byrant Avenue Project Bronx	Subcontractor Concrete Foundation Slab & Site Work

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

Daniel B. McCallan's Profile

Address & Telephone #

99 Huntington Road
Garden City, NY 11530

Date of Birth -

3/21/67

Education -

Smithtown East High School 1985

St. Johns University 1986-1989
A.A. Business Management

US Marine Corp Reserves 1986-1989

Positions Held -

Utility Consultant/Supervisor

Contractors -

Willeys Point
1986-1990

Sette/Juliano Contracting Corp
1990-1994

Trocom Construction Corp.
1994-2003

Demicco Bros. Inc
2003-2006

Position Held -

DBM Inspection Inc.
President/Owner
1999-Present

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

Companies Worked with:

P&T Contracting Corp.

2006-Present

2 Catch Basin Project for DDC

SECB06Q1 & SECB06Q2

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

Gil P. Gomes's Profile

Address & Telephone #

21 Hillvale Road
Albertson, NY 11507
#646-938-7096

Date of Birth -

9/17/68

Position Held -

Foreman Trocom Construction Corp.
1986-2006

Projects Worked On:

HWK701A Manhattan Avenue
HWM207DR 6th Avenue
SECB04K Brooklyn Catch Basin
SECB04QB Queens Catch Basin
SEK002271 Rockaway Avenue
QED972 Eddy Hydrants Queens
QED985 Distribution WM Queens
HWQ983 45th Avenue Queens

Position Held

Super P&T Contracting
2006 - Present

Projects Worked On:

SECB06Q1 Catch Basin Queens
SECB06Q2 Catch Basin Queens

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

Lenny J. Pereira Profile

Address & Telephone #

57 Ledgewood Drive
Smithtown, NY 11787
Cell #646-852-2945

Date of Birth:

5/19/76

Education:

Hauppauge H.S. 1994

Suffolk Community College 1997
A.S. Accounting

Plattsburgh State University 1999
B.S. Accounting

Experience:

Monahan & Company CPA; PC
2000 -2004

Position Held:

Accountant

P&T Contracting Corp.
2004 – Present

Position Held:

Supervisor

DDC Projects Worked:

HWS2003 Q1, HWS2003Q3
HWP2004Q, HWP2005X,
SECBO6Q1, SECB06Q2
SEK002337, HWBUSPAD2
HWP2008R, HWS2008R-R

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

SECB07Q2, SECB08Q

Coordinating office and field with communication to keep work flow at its topmost. Working from bid preparation to final approval of all bills for each project. Ordering of all supplies for constant work flow. Coordinating with the R.E. to survey each task order, and preparing photos to reports along with code 53 references for all utilities. Contact with Foremen on a daily basis along with yard supervision.

P&T II Contracting Corp.

2417 Jericho Turnpike Suite 315

Garden City Park, NY 11040

718-206-0245

Fax - 718-206-0083

List of Key Material Suppliers

Afco Precast

112 Rocky Point Road

Middle Island, NY 11953

#631-924-7400

Iron Pipe

T-Mina Supply, Inc.

126-53 36th Avenue

Flushing, NY 11368

#718-397-5200

Pipe

American Cast Iron Product Inc.

P.O.Box 610081

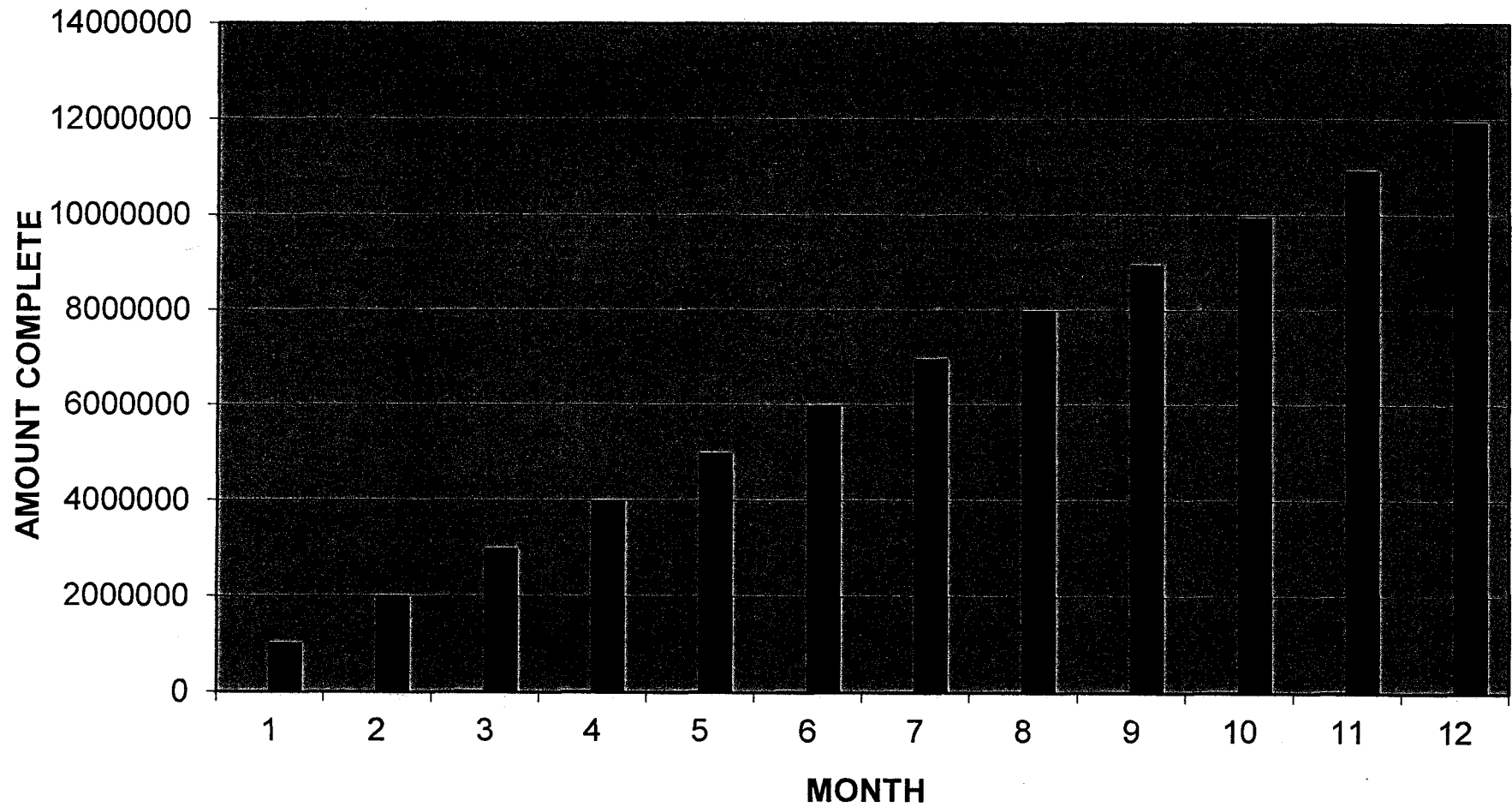
Bayside, NY 11361

#718-461-2346

Type II Catch Basins

Frames & Covers

CONTRACT MEDA001



VENDEX COMPLIANCE

(A) **Vendex Fees:** Pursuant to Procurement Policy Board Rule 2-08(f)(2), the contractor will be charged a fee for the administration of the VENDEX system, including the Vendor Name Check process, if a Vendor Name Check review is required to be conducted by the Department of Investigation. The contractor shall also be required to pay the applicable required fees for any of its subcontractors for which Vendor Name Check reviews are required. The fee(s) will be deducted from payments made to the contractor under the contract. For contracts with an estimated value of less than or equal to \$1,000,000, the fee will be \$175 per Vendor Name Check review. For contracts with an estimated value of greater than \$1,000,000, the fee will be \$350 per Vendor Name Check review.

(B) **Confirmation of Vendex Compliance:** The Bidder shall submit this Confirmation of Vendex Compliance to the Department of Design and Construction, Contracts Section, 30-30 Thomson Avenue – First Floor, Long Island City, NY 11101.

Bid Information: The Bidder shall complete the bid information set forth below.

Name of Bidder: P&T II Contracting Corp.
Bidder's Address: 2417 Seicho Lake #316 Garden City Pk. NY 11040
Bidder's Telephone Number: 718.206.0245
Bidder's Fax Number: 718.206.0083
Date of Bid Opening: MARCH 5th, 2015
Project ID: MEDA001

Vendex Compliance: To demonstrate compliance with Vendex requirements, the Bidder shall complete either Section (1) or Section (2) below, whichever applies.

- (1) **Submission of Vendex Questionnaires to MOCS:** By signing in the space provided below, the Bidder certifies that as of the date specified below, the Bidder has submitted Vendex Questionnaires to the Mayor's Office of Contract Services, Attn: VENDEX, 253 Broadway, 9th Floor, New York, New York 10007.

Date of Submission: 9.27.12

By: 

(Signature of Partner or corporate officer)

Print Name: Lenny Pereira

- (2) **Submission of Certification of No Change to DDC:** By signing in the space provided below, the Bidder certifies that it has read the instructions in a "Vendor's Guide to Vendex" and that such instructions do not require the Bidder to submit Vendex Questionnaires. The Bidder has completed **TWO ORIGINALS** of the Certification of No Change set forth on the next page of this Bid Booklet.

By: 

(Signature of Partner or corporate officer)

Print Name: Lenny Pereira

(NO TEXT ON THIS PAGE)

Certificate of No Change Form



- Please submit two completed forms. Copies will not be accepted.
- Please send both copies to the agency that requested it, unless you are advised to send it directly to the Mayor's Office of Contract Services (MOCS).
- A materially false statement willfully or fraudulently made in connection with this certification, and/or the failure to conduct appropriate due diligence in verifying the information that is the subject of this certification, may result in rendering the submitting entity non-responsible for the purpose of contract award.
- A materially false statement willfully or fraudulently made in connection with this certification may subject the person making the false statement to criminal charges

I, Lenny Pereira, being duly sworn, state that I have read
Enter Your Name

and understand all the items contained in the vendor questionnaire and any submission of change as identified on page one of this form and certify that as of this date, these items have not changed. I further certify that, to the best of my knowledge, information and belief, those answers are full, complete, and accurate; and that, to the best of my knowledge, information, and belief, those answers continue to be full, complete, and accurate.

In addition, I further certify on behalf of the submitting vendor that the information contained in the principal questionnaire(s) and any submission of change identified on page two of this form have not changed and have been verified and continue, to the best of my knowledge, to be full, complete and accurate.

I understand that the City of New York will rely on the information supplied in this certification as additional inducement to enter into a contract with the submitting entity.

Vendor Questionnaire *This section is required.*

This refers to the vendor questionnaire(s) submitted for the vendor doing business with the City.

Name of Submitting Entity: P&T II Contracting Corp

Vendor's Address: 2417 Seidho tpke #315 Garden City Pk. NY 11040

Vendor's EIN or TIN: 20-4708892 Requesting Agency: DDC

Are you submitting this Certification as a parent? (Please circle one) Yes No

Signature date on the last full vendor questionnaire signed for the submitting vendor: 9.27.12

Signature date on change submission for the submitting vendor: _____

Principal Questionnaire

This section refers to the most recent principal questionnaire submissions.



	Principal Name	Date of signature on last full Principal Questionnaire	Date(s) of signature on submission of change
1	Lenny Pereira	9.27.12	
2	Daniel McCallan	9.27.12	
3	Gil Gomes	9.27.12	
4	Lenny J. Pereira	9.27.12	
5			
6			

☐ Check if additional changes were submitted and attach a document with the date of additional submissions.

Certification This section is required.

This form must be signed and notarized. Please complete this twice. Copies will not be accepted.

Certified By:

Lenny Pereira
Name (Print)

President
Title

P&T II Contracting Corp.
Name of Submitting Entity

[Signature]
Signature

3/5/15
Date

Notarized By:

[Signature]
Notary Public

CLAUDIA J WHITFIELD
NOTARY PUBLIC-STATE OF NEW YORK
No. 01WH5004514
Qualified in Queens County
My Commission Expires November 16, 2018
County License Issued License Number

Sworn to before me on: 3-5-15
Date

IRAN DIVESTMENT ACT COMPLIANCE RIDER

FOR NEW YORK CITY CONTRACTORS

The Iran Divestment Act of 2012, effective as of April 12, 2012, is codified at State Finance Law ("SFL") §165-a and General Municipal Law ("GML") §103-g. The Iran Divestment Act, with certain exceptions, prohibits municipalities, including the City, from entering into contracts with persons engaged in investment activities in the energy sector of Iran. Pursuant to the terms set forth in SFL §165-a and GML §103-g, a person engages in investment activities in the energy sector of Iran if:

- (a) The person provides goods or services of twenty million dollars or more in the energy sector of Iran, including a person that provides oil or liquefied natural gas tankers, or products used to construct or maintain pipelines used to transport oil or liquefied natural gas, for the energy sector of Iran; or
- (b) The person is a financial institution that extends twenty million dollars or more in credit to another person, for forty-five days or more, if that person will use the credit to provide goods or services in the energy sector in Iran and is identified on a list created pursuant to paragraph (b) of subdivision three of Section 165-a of the State Finance Law and maintained by the Commissioner of the Office of General Services.

A bid or proposal shall not be considered for award nor shall any award be made where the bidder or proposer fails to submit a signed and verified bidder's certification.

Each bidder or proposer must certify that it is not on the list of entities engaged in investment activities in Iran created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. In any case where the bidder or proposer cannot certify that they are not on such list, the bidder or proposer shall so state and shall furnish with the bid or proposal a signed statement which sets forth in detail the reasons why such statement cannot be made. The City of New York may award a bid to a bidder who cannot make the certification on a case by case basis if:

- (1) The investment activities in Iran were made before the effective date of this section (i.e., April 12, 2012), the investment activities in Iran have not been expanded or renewed after the effective date of this section and the person 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 City makes a determination that the goods or services are necessary for the City to perform its functions and that, absent such an exemption, the City 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.

**BIDDER'S CERTIFICATION OF COMPLIANCE WITH
IRAN DIVESTMENT ACT**


Pursuant to General Municipal Law §103-g, which generally prohibits the City from entering into contracts with persons engaged in investment activities in the energy sector of Iran, the bidder/proposer submits the following certification:

[Please Check One]

BIDDER'S CERTIFICATION

- ☒ By submission of this bid or 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/proposer is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law.
- ☐ I am unable to certify that my name and the name of the bidder/proposer does not appear on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. I have attached a signed statement setting forth in detail why I cannot so certify.

Dated: Queens, New York
March 5th, 2015

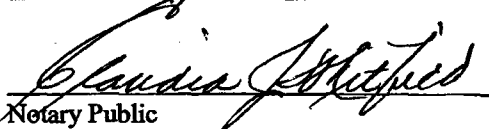


SIGNATURE
Lenny Pereira

PRINTED NAME
President

TITLE

Sworn to before me this
5th day of March, 2015



Notary Public

Dated: 3-5-15

CLAUDIA J WHITFIELD
NOTARY PUBLIC-STATE OF NEW YORK
No. 01WH5004514
Qualified in Queens County
My Commission Expires November 16, 2018

CONSTRUCTION EMPLOYMENT REPORT

1. Your contractual relationship in this contract is: Prime contractor x Subcontractor

1a. Are M/WBE goals attached to this project? Yes ✓ No

___ Minority Owned Business Enterprise
 ___ Women Owned Business Enterprise
 ___ Disadvantaged Business Enterprise

☐ Locally Based Business Enterprise
☐ Emerging Business Enterprise

2a. If you are certified as an **MBE, WBE, LBE, EBE** or **DBE**, what city/state agency are you certified with? _____ Are you DBE certified? Yes _____ No ✓

3. Please indicate if you would like assistance from SBS in identifying certified M/WBEs for contracting opportunities: Yes ___ No ✓

4. Is this project subject to a project labor agreement? Yes _____ No _____

5. Are you a Union contractor? Yes ☒ No ☐ If yes, please list which local(s) you affiliated with 1010, 731, 15

6. Are you a Veteran owned company? Yes ☐ No ☒

7. 20.4708892 pt2contracting@gmail.com
Employer Identification Number or Federal Tax I.D. Email Address

8. P&T II Contracting Corp.
Company Name

9. 2417 Sericho Trk # 315 Garden City Park, N.Y. 11040
Company Address and Zip Code

10. Lenny Pereira 718.206.0245
Chief Operating Officer Telephone Number

11.	<u>SAME</u>	
	Designated Equal Opportunity Compliance Officer (If same as Item #10, write "same")	Telephone Number

12. SAME
Name of Prime Contractor and Contact Person
(If same as Item #8, write "same")

13. Number of employees in your company: 40

14. Contract information:

(a) NYCDDC
Contracting Agency (City Agency)

(b) 11,924,126.76
Contract Amount

(c) _____
Procurement Identification Number (PIN)

(d) _____
Contract Registration Number (CT#)

(e) _____
Projected Commencement Date

(f) _____
Projected Completion Date

(g) Description and location of proposed contract:

15. Has your firm been reviewed by the Division of Labor Services (DLS) within the past 36 months and issued a Certificate of Approval? Yes ___ No ✓

If yes, attach a copy of certificate.

16. Has DLS within the past month reviewed an Employment Report submission for your company and issued a Conditional Certificate of Approval? Yes ___ No ✓

If yes, attach a copy of certificate.

NOTE: DLS WILL NOT ISSUE A CONTINUED CERTIFICATE OF APPROVAL IN CONNECTION WITH THIS CONTRACT UNLESS THE REQUIRED CORRECTIVE ACTIONS IN PRIOR CONDITIONAL CERTIFICATES OF APPROVAL HAVE BEEN TAKEN.

17. Has an Employment Report already been submitted for a different contract (not covered by this Employment Report) for which you have not yet received compliance certificate?

Yes ___ No ✓ If yes,

Date submitted: _____

Agency to which submitted: _____

Name of Agency Person: _____

Contract No: _____

Telephone: _____

18. Has your company in the past 36 months been audited by the United States Department of Labor, Office of Federal Contract Compliance Programs (OFCCP)? Yes ___ No ✓

If yes,

(a) Name and address of OFCCP office.

(b) Was a Certificate of Equal Employment Compliance issued within the past 36 months?

Yes___ No___

If yes, attach a copy of such certificate.

(c) Were any corrective actions required or agreed to? Yes___ No___

If yes, attach a copy of such requirements or agreements.

(d) Were any deficiencies found? Yes___ No___

If yes, attach a copy of such findings.

19. Is your company or its affiliates a member or members of an employers' trade association which is responsible for negotiating collective bargaining agreements (CBA) which affect construction site hiring? Yes___ No ☒

If yes, attach a list of such associations and all applicable CBA's.

PART II: DOCUMENTS REQUIRED

20. For the following policies or practices, attach the relevant documents (e.g., printed booklets, brochures, manuals, memoranda, etc.). If the policy(ies) are unwritten, attach a full explanation of the practices. See instructions.

☒ (a) Health benefit coverage/description(s) for all management, nonunion and union employees (whether company or union administered)

☒ (b) Disability, life, other insurance coverage/description

☒ (c) Employee Policy/Handbook

☒ (d) Personnel Policy/Manual

☒ (e) Supervisor's Policy/Manual

☒ (f) Pension plan or 401k coverage/description for all management, nonunion and union employees, whether company or union administered

☒ (g) Collective bargaining agreement(s).

☒ (h) Employment Application(s)

☒ (i) Employee evaluation policy/form(s).

☒ (j) Does your firm have medical and/or non-medical (i.e. education, military, personal, pregnancy, child care) leave policy?

21. To comply with the Immigration Reform and Control Act of 1986 when and of whom does your firm require the completion of an I-9 Form?

- | | |
|--|---|
| (a) Prior to job offer | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| (b) After a conditional job offer | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (c) After a job offer | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (d) Within the first three days on the job | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (e) To some applicants | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (f) To all applicants | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (g) To some employees | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (h) To all employees | Yes <input type="checkbox"/> No <input type="checkbox"/> |

22. Explain where and how completed I-9 Forms, with their supportive documentation, are maintained and made accessible.

filed by year

23. Does your firm or any of its collective bargaining agreements require job applicants to take a medical examination? Yes ☐ No ☒

If yes, is the medical examination given:

- | | |
|-----------------------------------|--|
| (a) Prior to a job offer | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (b) After a conditional job offer | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (c) After a job offer | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (d) To all applicants | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (e) Only to some applicants | Yes <input type="checkbox"/> No <input type="checkbox"/> |

If yes, list for which applicants below and attach copies of all medical examination or questionnaire forms and instructions utilized for these examinations.

24. Do you have a written equal employment opportunity (EEO) policy? Yes ☒ No ☐

If yes, list the document(s) and page number(s) where these written policies are located.

25. Does the company have a current affirmative action plan(s) (AAP)

- ☐ Minorities and Women
☐ Individuals with handicaps
☐ Other. Please specify _____

26. Does your firm or collective bargaining agreement(s) have an internal grievance procedure with respect to EEO complaints? Yes ☐ No ☒

If yes, please attach a copy of this policy.

If no, attach a report detailing your firm's unwritten procedure for handling EEO complaints.

27. Has any employee, within the past three years, filed a complaint pursuant to an internal grievance procedure or with any official of your firm with respect to equal employment opportunity? Yes___ No ☒

If yes, attach an internal complaint log. See instructions.

28. Has your firm, within the past three years, been named as a defendant (or respondent) in any administrative or judicial action where the complainant (plaintiff) alleged violation of any anti-discrimination or affirmative action laws? Yes___ No ☒

If yes, attach a log. See instructions.

29. Are there any jobs for which there are physical qualifications? Yes___ No ☒

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

30. Are there any jobs for which there are age, race, color, national origin, sex, creed, disability, marital status, sexual orientation, or citizenship qualifications? Yes___ No ☒

If yes, list the job(s), submit a job description and state the reason(s) for the qualification(s).

SIGNATURE PAGE

I, (print name of authorized official signing) Lenny Pereira hereby certify that the information submitted herewith is true and complete to the best of my knowledge and belief and submitted with the understanding that compliance with New York City's equal employment requirements, as contained in Chapter 56 of the City Charter, Executive Order No. 50 (1980), as amended, and the implementing Rules and Regulations, is a contractual obligation. I also agree on behalf of the company to submit a certified copy of payroll records to the Division of Labor Services on a monthly basis.

PET II Contracting Corp.
Contractor's Name

Lenny Pereira President
Name of person who prepared this Employment Report Title

Lenny Pereira President
Name of official authorized to sign on behalf of the contractor Title

718.206.0245
Telephone Number

Signature of authorized official Date 3/5/15

If contractors are found to be underutilizing minorities and females in any given trade based on Chapter 56 Section 3H, the Division of Labor Services reserves the right to request the contractor's workforce data and to implement an employment program.

Contractors who fail to comply with the above mentioned requirements or are found to be in noncompliance may be subject to the withholding of final payment.

Willful or fraudulent falsifications of any data or information submitted herewith may result in the termination of the contract between the City and the bidder or contractor and in disapproval of future contracts for a period of up to five years. Further, such falsification may result in civil and/or criminal prosecution.

To the extent permitted by law and consistent with the proper discharge of DLS' responsibilities under Chapter 56 of the City Charter and Executive Order No. 50 (1980) and the implementing Rules and Regulations, all information provided by a contractor to DLS shall be confidential.

Only original signatures accepted.

Sworn to before me this 5th day of March 20 15

Claudia J Whitfield [Signature] 3-5-15
Notary Public Authorized Signature Date

CLAUDIA J WHITFIELD
NOTARY PUBLIC-STATE OF NEW YORK
No. 01WH5004514

Qualified in Queens County

My Commission Expires November 16, 2018

FORM A. CONTRACT BID INFORMATION: USE OF SUBCONTRACTORS/TRADES

1. Do you plan to subcontractor work on this contract? Yes___ No___
2. If yes, complete the chart below.

NOTE: All proposed subcontractors with a subcontract in excess of \$750,000 must complete an Employment Report for review and approval before the contract may be awarded and work commences.

SUBCONTRACTOR'S NAME*	OWNERSHIP (ENTER APPROPRIATE CODE LETTERS BELOW)	WORK TO BE PERFORMED BY SUBCONTRACTOR	TRADE PROJECTED FOR USE BY SUBCONTRACTOR	PROJECTED DOLLAR VALUE OF SUBCONTRACT
Unknown	Unknown	MBE Trucking	Labor	300,000
Unknown	Unknown	MBE Tree Work	Labor	20,000
Unknown	Unknown	MBE Labs + Compaction	Tech	50,000
Unknown	Unknown	MBE Sewer Cleaning	Labor	100,000
Unknown	Unknown	MBE Paving	Labor	130,000
Unknown	Unknown	Non MBE Photos	Labor	15,000
Unknown	Unknown	Non MBE Tree Consultant	Labor	13,000

*If subcontractor is presently unknown, please enter the trade (craft name).

OWNERSHIP CODES

W: White
 B: Black
 H: Hispanic
 A: Asian
 N: Native American
 F: Female

FORM B: PROJECTED WORKFORCE

TRADE CLASSIFICATION CODES

(J) Journeylevel Workers
(H) Helper
(TOT) Total by Column

(A) Apprentice
(TRN) Trainee

For each trade to be engaged by your company for this project, enter the projected workforce for Males and Females by trade classification on the charts below.

Trade:

LABORER

Union Affiliation, if applicable

Total (Col. #1-10):

Total Minority, Male & Female
Col. #2,3,4,5,7,8,9, & 10):

Total Female
Col. #6 - 10):

MALES

	(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.
J			7		
H					
A					
TRN					
TOT			7		

FEMALES

	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.
J					
H					
A					
TRN					
TOT					

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

UNION

FORM B: PROJECTED WORKFORCE

Trade:

15

Union Affiliation, if applicable

Total (Col. #1-10):

Total Minority, Male & Female
(Col. #2,3,4,5,7,8,9, & 10):

Total Female
(Col. #6 - 10):

MALES

	(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.
J			2		
H					
A					
TRN					
TOT			2		

FEMALES

	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.
J					
H					
A					
TRN					
TOT					

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

UNION

FORM C: CURRENT WORKFORCE

TRADE CLASSIFICATION CODES

(J) Journeylevel Workers
(H) Helper
(TOT) Total by Column

(A) Apprentice
(TRN) Trainee

For each trade currently engaged by your company for all work performed in New York City, enter the current workforce for Males and Females by trade classification on the charts below.

Trade:

LABORER

Union Affiliation, if applicable

Total (Col. #1-10):

Total Minority, Male & Female
(Col. #2,3,4,5,7,8,9, & 10):

Total Female
(Col. #6 - 10):

MALES

	(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.
J			7		
H					
A					
TRN					
TOT			7		

FEMALES

	(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.
J					
H					
A					
TRN					
TOT					

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

UNION

FORM C: CURRENT WORKFORCE

Trade: 15

Union Affiliation, if applicable

Total (Col. #1-10):

Total Minority, Male & Female
(Col. #2,3,4,5,7,8,9, & 10):

Total Female
(Col. #6 – 10):

	MALES				
	(1) White Non Hisp.	(2) Black Non Hisp.	(3) Hisp.	(4) Asian	(5) Native Amer.
J			2		
H					
A					
TRN					
TOT			2		

FEMALES				
(6) White Non Hisp.	(7) Black Non Hisp.	(8) Hisp.	(9) Asian	(10) Native Amer.

What are the recruitment sources for you projected hires (i.e., unions, government employment office, job tap center, community outreach)?

Union

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**INFRASTRUCTURE DIVISION
BUREAU OF DESIGN**

VOLUME 1 OF 3

PROJECT ID: MEDA001

FOR THE CONSTRUCTION OF ACCELERATED WATER MAIN REPLACEMENT AND SEWER
REHABILITATION AND REPLACEMENT

Together With All Work Incidental Thereto
BOROUGH OF MANHATTAN
CITY OF NEW YORK

Contractor

Dated _____, 20____
