

1. If doing business under a trade name, partnership or a sole proprietorship, you must submit the bid under exact title of the trade name, partnership, or proprietorship, and the bid must be signed by either the owner or a partner and witnessed by a notary public.
2. If a Corporation, the bid must be signed by the President or Vice President and witnessed by Corporate Secretary, (Corporate title must be exact) and affix corporate seal.
3. Other persons authorized by Corporate Resolution to execute agreements in its behalf may also sign the bid documents (pages).
4. The Person who signs this bid form must also sign the Non-Collusion Affidavit.
5. You cannot witness your own signature.

ELEVATOR MAINTENANCE CORPORATION
NAME OF BIDDER

586 ELI STREET
ADDRESS OF BIDDER

HEARNY NJ 07032

201-991-7133
TELEPHONE:

201-991-0118
FAX:

EMCO1950@nj.com
EMAIL:

BY: Vincent Chianca
SIGNATURE

11/2/18
DATE

VINCENT CHIANCA PRESIDENT
PRINT OR TYPE NAME AND TITLE

AFFIX CORPORATE SEAL

WARNING: FAILURE TO FULLY, ACCURATELY, AND COMPLETELY SUPPLY THE INFORMATION REQUESTED ON THIS PAGE MAY RESULT IN THE REJECTION OF YOUR BID AS NON-RESPONSIVE

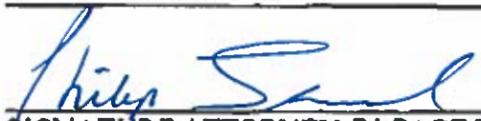
CONSENT OF SURETY

Rev. 5/13/02

Colonial Surety Company (Hereinafter called Surety), organized and existing under the laws of the State of Pennsylvania and duly authorized and qualified to transact business in the State of New Jersey, in consideration of the sum of One Dollar (\$1.00), lawful money of the United States of American, to it in hand paid, receipt whereof is hereby acknowledged, and in consideration, herby certifies and agrees that if the contract for which the attached bid is made be awarded to Elevator Maintenance Corp. (hereinafter called Contractor) for the performance of certain work or the supplying of certain materials, or both, as more particularly set forth in said bid and described for the purposes of this instrument as a bid for Elevator Maintenance & Repairs to the County of Union and if Contractor shall enter into the contract, Surety will become bound as surety for its faithful performance and will provide the Contractor with a bond in the amount of One Hundred Thousand Dollars (\$100,000).

Colonial Surety Company
NAME OF INSURANCE COMPANY

ADDRESS 123 Tice Boulevard, Suite 250
Woodcliff Lake, NJ 07677


SIGNATURE ATTORNEY-IN-FACT FOR INSURANCE CO.
Philip Shepard, Attorney-in-Fact

NOTE: Proof of authority of officers of Surety Company to execute this document must be submitted.

COLONIAL SURETY COMPANY

Duncannon, Pennsylvania
Administrative Office: 123 Tice Blvd., Suite 250, Woodcliff Lake, New Jersey 07677

GENERAL POWER OF ATTORNEY

Know all Men by These Presents, That COLONIAL SURETY COMPANY, a corporation duly organized and existing under the laws of the Commonwealth of Pennsylvania and having an administrative office in Woodcliff Lake, Bergen County, NJ does by these presents make, constitute and appoint

Wayne Nunziata or Phillip Shepard or Audie B. Murphy of Woodcliff Lake and the State of New Jersey its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver.

Any and All Bonds

and to bind the Company thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of the Colonial Surety Company at a meeting held on the 25th day of July, 1950.

Be it Resolved, that the President, any Vice-President, any Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

Section 1. Attorney-in-Fact. Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such Instruments so executed by any such Attorney-in-Fact shall be binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary.

In Witness Whereof, Colonial Surety Company has caused these presents to be signed by its President and its corporate seal to be hereto affixed the 8th day of September, A.D., 2015.

State of New Jersey
County of Bergen } SS.



By [Signature]
Wayne Nunziata, President

On this 8th day of September, in the year 2015, before me Theresa Spinelli, a notary public, personally appeared Wayne Nunziata, personally known to me to be the person who executed the within instrument as President, on behalf of the corporation therein named and acknowledged to me that the corporation executed it.



THERESA SPINELLI
A Notary Public of New Jersey
My Commission Expires September 9, 2020

[Signature]
Theresa Spinelli
Notary Public

I, the undersigned Secretary of Colonial Surety Company, hereby certify that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of Attorney is still in force and effect.

And I do hereby further certify that the Certification of this Power of Attorney is signed and sealed by facsimile under and by the authority of the following resolution adopted by the Board of Directors of the Colonial Surety Company at a meeting duly called and held on the 30th of January 1988, and that said resolution has not been amended or repealed:

RESOLVED, that the signature of the Secretary or any Assistant Secretary of this Corporation, and the seal of Corporation, may be affixed or printed by facsimile to any certificate to a Power of Attorney of this Corporation, and that such printed facsimile signature and seal shall be valid and binding upon this Corporation.

GIVEN under my hand and the seal of said Company, at Woodcliff Lake, New Jersey this 08 day of November, 2018.

Original printed with Blue and/or Black ink. For verification of the authenticity of this Power of Attorney you may call (201) 573-8788 and ask for the Power of Attorney clerk. Please refer to the above named individual(s) and details of the bond to which the power is attached.

[Signature]
Audie B. Murphy, Secretary

State of New Jersey

County of Bergen

On this 8th day of November in the year 2018, before me, Rita Alfano, a Notary Public, personally came Philip Shepard, known to me to be an Attorney-in-Fact of Colonial Surety Company, the corporation described in the within instrument, and I acknowledge that he executed the within instrument as the act of said Colonial Surety Company in accordance with authority duly conferred upon him by said Company.

**Rita Alfano
Notary Public of New Jersey
My Commission Expires October 26, 2022**


Rita Alfano

Notary Public

**BID FORM PAGE
(1 OF 2)**

Having carefully read the notice to bidders, specifications and instructions to bidders the undersigned hereby agrees to provide **ELEVATOR MAINTENANCE & REPAIR SERVICE** for various County buildings for the Division of Facilities Management in accordance with the specifications.

EXHIBIT "B" - CONTRACTOR'S SCHEDULE OF PREVENTATIVE MAINTENANCE UNIT PRICES

TYPE OF UNIT	BUILDING ELEVATOR (DESIGNATION)	(a) MONTHLY MAINTENANCE CHARGE EACH	(b) NUMBER OF UNITS	(c) TOTAL MONTHLY PRICE (a) x (b)	TOTAL CONTRACT PRICE (c) x 24
Passenger Traction	#1 Old Annex Building	400.00	1	400.00	9600.00
Passenger Traction	#2 & 2A Old Jail	400.00	2	800.00	19,200.00
Passenger Traction	#3 Parking Garage	400.00	1	400.00	9600.00
Passenger Traction	#4 Detention Center	400.00	1	400.00	9600.00
Passenger Hydraulic	#5 Ruotolo Justice Center	225.00	2	450.00	10,800.00
Passenger Traction	#6 & 6A Old Courthouse Rotunda	400.00	2	800.00	19,200.00
Passenger Traction	#7 Courthouse High Tower	400.00	1	400.00	9600.00
Passenger Traction	#8 Courthouse Tower	400.00	3	1200.00	28,800.00
Passenger Traction	#9 New Jail - Visitors Side	400.00	2	800.00	19,200.00
Passenger Traction	#10 New Jail - Inmates Side	400.00	3	1200.00	28,800.00
Freight Hydraulic	#11 New Jail - Loading Dock	225.00	1	225.00	5400.00
Passenger Hydraulic	#12 Election/Tax Board	225.00	1	225.00	5400.00
Passenger Hydraulic	#13 Police Academy	225.00	1	225.00	5400.00
Passenger Traction	#14 Administration Building	400.00	2	800.00	19,200.00
Passenger Traction	#15 New Annex Building	400.00	3	1200.00	28,800.00
Passenger Traction	#16 Engineering Building	400.00	1	400.00	9600.00
Passenger Traction	#17 Trailside Nature & Science Center	400.00	1	400.00	9600.00
Passenger & Service Traction	#18 Froehlich Public Safety Building	400.00	2	800.00	19,200.00
Passenger Hydraulic	#19 Union County Performing Arts Center	225.00	1	225.00	5400.00
Passenger Hydraulic	#20 Colleen Fraser Building	225.00	1	225.00	5400.00
Passenger Hydraulic	#21 Child Advocacy Center	225.00	1	225.00	5400.00
Passenger Hydraulic	#22 Galloping Hill Golf Course Clubhouse	225.00	2	450.00	10,800.00
Freight Hydraulic	#23 Galloping Hill Golf Course Clubhouse	225.00	1	225.00	5400.00
Passenger Hydraulic	#24 Cherry Street Annex	225.00	2	450.00	10,800.00
Passenger Hydraulic	#25 Cherry Street Annex	225.00	1	225.00	5400.00
Freight Hydraulic	#26 Cherry Street Annex	225.00	1	225.00	5400.00
Passenger Hydraulic	#27 Cherry Street Annex	225.00	2	450.00	10,800.00
Passenger Hydraulic	#28 Cherry Street Annex	225.00	1	225.00	5400.00
ID	TOTAL PRICE - Scheduled Maintenance - SUM OF #1 - #28		43	\$14,050.00	337,200.00

NAME OF BIDDER: ELEVATOR MAINTENANCE CORPORATION

THE PERIOD OF THE CONTRACT SHALL BE FOR TWENTY-FOUR (24) CONSECUTIVE MONTHS WITH PROVISION FOR ONE (1) TWENTY-FOUR (24) MONTH EXTENSION SUBJECT TO THE FOLLOWING LIMITATIONS: THE EXTENSION CONTRACT SHALL BE AWARDED BY RESOLUTION OF THE GOVERNING BODY (WITHIN 60 DAYS PRIOR TO THE EXPIRATION DATE) UPON A FINDING BY THE GOVERNING BODY THAT THE SERVICES ARE BEING PERFORMED IN AN EFFECTIVE AND EFFICIENT MANNER.

NJSA 40A: 11-15 PROVIDES THAT ANY PRICE CHANGES PURSUANT TO EXTENSIONS OF THE ORIGINAL TERM OF THIS AGREEMENT SHALL BE BASED UPON THE PRICE OF THE ORIGINAL AGREEMENT AS CUMULATIVELY ADJUSTED PURSUANT TO ANY PREVIOUS ADJUSTMENT OR EXTENSIONS AND SHALL NOT EXCEED THE CHANGE IN THE INDEX RATE FOR THE TWELVE (12) MONTHS PRECEDING THE MOST RECENT QUARTERLY CALCULATION AVAILABLE AT THE TIME THIS AGREEMENT IS RENEWED. THE INDEX RATE IS PROMULGATED BI-ANNUALLY BY THE STATE OF NEW JERSEY, DIVISION OF LOCAL GOVERNMENT SERVICES AND IS A BASED ON THE ANNUAL PERCENTAGE INCREASE IN THE IMPLICIT PRICE DEFECTOR FOR STATE AND LOCAL GOVERNMENT SERVICES, COMPUTED QUARTERLY BY THE US DEPT. OF COMMERCE, BUREAU OF ECONOMIC ANALYSIS.

ANY EXTENSION OF THE ORIGINAL TERM OF THIS AGREEMENT SHALL BE SUBJECT TO THE AVAILABILITY AND APPROPRIATION ANNUALLY OF SUFFICIENT FUNDS BY THE COUNTY OF UNION PURSUANT TO NJSA 40A: 11-15.

Union County Cooperative Pricing System Extension Form

BIDDERS MUST CHECK & INITIAL WHERE INDICATED ONE OF THE FOLLOWING SELECTIONS:

Check Here and initial if **WILLING** to provide the goods and services herein bid upon to registered members of the County of Union Cooperative Pricing System (State of New Jersey Identifier #: 8-UCCP) who have submitted estimates, without substitution or deviation from specifications, size, features, quality, price or availability as herein set forth. It is understood that orders will be placed directly by the registered member identified herein by separate contracts, subject to the overall terms of the master contract to be awarded by the County of Union, and that no additional service or delivery charges will be allowed except as permitted by these specifications.

Check Here and initial if **NOT WILLING** to extend prices to registered members of the County of Union Cooperative Pricing System (State of New Jersey Identifier #: 8-UCCP) who have submitted estimates as described above. It is understood that this will not adversely affect consideration of this bid with respect to the needs of County of Union.

In the event that the lowest responsible bidder, in the bid document, declines to extend prices to the registered members who submitted estimates the following procedure will be followed as required by N.J.A.C. 5:34-7.10(a)(2):

The contract for the needs of the lead agency will be awarded to the lowest responsible bidder, and a master contract for the registered members who have submitted estimates will be awarded to the next lowest bidder whose bid agrees to extend.

Bid prices may be extended to registered members who have not submitted estimates prior to the advertisement for bids with the written approval of the lead agency and the contractor.

THE COUNTY RESERVES THE RIGHT TO TERMINATE THIS AGREEMENT WITH WRITTEN NOTICE TO THE CONTRACTOR THIRTY (30) DAYS PRIOR TO SUCH ACTION.



Initial

STATEMENT OF OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: ELEVATOR MAINTENANCE CORPORATION

Organization Address: 180 ELM STREET KENNY NJ 07032

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

Part II

The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. (COMPLETE THE LIST BELOW IN THIS SECTION)

OR

No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. (SKIP TO PART IV)

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address
VINCENT CHIARENZA	25 WEBSTER AVE KENNY NJ 07032 100%

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. Attach additional sheets if more space is needed.

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II other than for any publicly traded parent entities referenced above. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. Attach additional sheets if more space is needed.

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the *County of Union* is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with *County of Union* to notify the *County of Union* in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the *County of Union* to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	VINCENT CHIANCA	Title:	PRESIDENT
Signature:	<i>Vincent Chianca</i>	Date:	11/2/18

NON-COLLUSION AFFIDAVIT

Rev. 1/22/93

STATE OF NEW JERSEY

SS:

COUNTY OF HUDSON

I VINCENT CHIANNA of the ^{TOWN} City of HEARNY, in the County of HUDSON and the State of NEW JERSEY, of full age, being duly sworn according to law, on my oath depose and say that: I am PRESIDENT of the firm of ELEVATOR MAINTENANCE CORP., the bidder making the Proposal for the above named project, and that I executed the said Proposal with full authority to do so; that said bidder has not, directly or indirectly, entered into any agreement, participation in any collusion, or otherwise taken any action in restraint of free, competitive bidding in connection with the above named project; and that all statements contained in said Proposal and in this Affidavit are true and correct, and made with full knowledge that the COUNTY OF UNION, NEW JERSEY relies upon the truth of the statements contained in said Proposal and in the statements contained in the affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by ELEVATOR MAINTENANCE CORP. (N.J.S.A. 52:34-15).
NAME OF CONTRACTOR

Vincent Channa

Sign Name Here

(Original signature only; stamped signature not accepted)

Subscribed and sworn to before Me this 5th day of NOV, 20 18.

Danielle Rodgers
Notary Public of the State of New Jersey

My Commission expires DANIELLE RODGERS
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 1/19/2023

NOTE TO NOTARY: WHEN COMPLETING THIS JURAT, ALL NOTARIES MUST:

- 1. Indicate date. 2. Indicate State. 3. Sign name. 4. Affix name by Printing it, typing it, using a rubber stamp, using an impression seal or using a mechanical stamp.

Note: The person who signed the bid form for the bidder should sign this form also.

WARNING: IF YOU FAIL TO FULLY, ACCURATELY AND COMPLETELY FILL OUT THIS AFFIDAVIT OF NON-COLLUSION, YOUR BID WILL BE REJECTED.

AFFIRMATIVE ACTION REQUIREMENT

Rev. 6/29/93

REQUIRED AFFIRMATIVE ACTION EVIDENCE

General Requirements of P.L. 1975, c. 127: You are hereby put on notice that:

A. Procurement, Professional & Service Contracts

All successful vendors must submit within seven days of the notice of intent to award or the signing of the contract one of the following: **PLEASE CHECK ONE**

A photocopy of your Federal Letter of Affirmative Action Plan Approval

OR

A photocopy of your Certificate of Employee Information Report

OR

A completed Affirmative Action Employee Information Report (AA302)

If successful vendor does not submit the affirmative action document within the seven days the County of Union will declare the vendor as being non-responsive and award the contract to the next lowest bidder.

ELEVATOR MAINTENANCE CORPORATION

Print or type FIRM NAME here

U. Vincent Chismus President

Sign NAME and TITLE here

(Original signature only, stamped signature not accepted)

U. VINCENT CHISMUS PRESIDENT

Print or type NAME and TITLE here

11 2 - 18

Print or type DATE

Certification
CERTIFICATE OF EMPLOYEE INFORMATION REPORT #871

RENEWAL
This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of

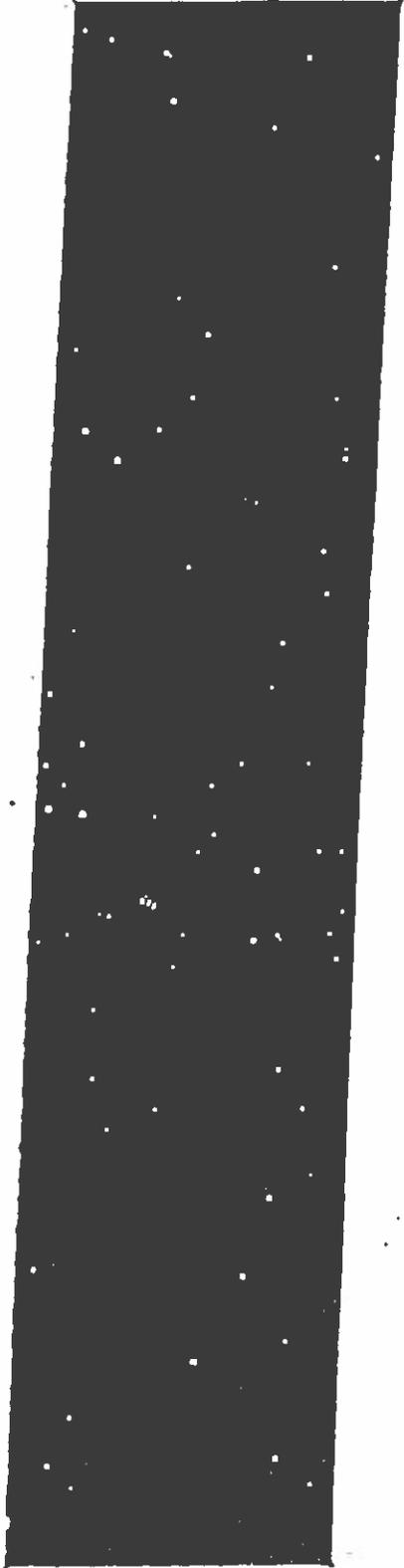
15 FEB 2013 10 15 FEB 2020

ELEVATOR MAINTENANCE CORP.
580 ELM STREET
KEARNY

NJ 07032



Andrew P. Sidamon-Eristoff
State Treasurer



AMERICANS WITH DISABILITIES ACT

EQUAL OPPORTUNITY FOR INDIVIDUALS WITH DISABILITIES

The contractor and the County of Union (hereafter "Owner") do hereby agree that the provisions of Title II of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. S12.101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the Owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the Owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the Owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, any pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the Owner's grievance procedure, the contractor agrees to abide by any decision of the Owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the Owner, or if the Owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The Owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the Owner or any of its agents, servants, and employees, the Owner shall expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the Owner or its representatives.

It is expressly agreed and understood that any approval by the Owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the Owner pursuant to this paragraph.

It is further agreed and understood that the Owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the Owner from taking any other actions available to it under any other provisions of this Agreement or otherwise at law.

Name VINCENT CHIANCA (Please print or type)

Signature Vincent Chianca Date 11-2-18

NAME OF BIDDER: ELEVATOR MAINTENANCE CORPORATION

COUNTY OF UNION NEW JERSEY
Division of Purchasing
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN FORM

Solicitation Number: BA-53-2018 Vendor/Bidder: ELEVATOR MAINTENANCE CORPORATION

PART 1
CERTIFICATION
VENDOR/BIDDER MUST COMPLETE PART 1 BY CHECKING ONE OF THE BOXES
FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person nor entity, nor any of its parents, subsidiaries, or affiliates, is identified on the State of New Jersey, Department of the Treasury's Chapter 25 list as a person or entity engaged in investment activities in Iran. The Chapter 25 list is found on the Department's website at <http://www.state.nj.us/treasury/pdl/Chapter25List.pdf>. Vendors/Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a Vendor's/Bidder's proposal non-responsive. If the Director of the Division of Purchase and Property finds a person or entity to be in violation of the law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

CHECK THE APPROPRIATE BOX

A. I certify, pursuant to Public Law 2012, c.25, that neither the Vendor Bidder listed above nor any of its parents, subsidiaries, or affiliates is listed on the N.J. Department of Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). Disregard Part 2 and complete and sign the Certification below.

OR

B. I am unable to certify as above because the Vendor Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such information will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2

PLEASE PROVIDE ADDITIONAL INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

If you checked Box "B" above, provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in investment activities in Iran by completing the information below.

ENTITY NAME: _____
RELATIONSHIP TO VENDOR/BIDDER: _____
DESCRIPTION OF ACTIVITIES: _____
DURATION OF ENGAGEMENT: _____
ANTICIPATED CESSATION DATE: _____
VENDOR/BIDDER CONTACT NAME: _____
VENDOR/BIDDER CONTACT PHONE#: _____

Attach Additional Sheets If Necessary

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor Bidder, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the County of Union, New Jersey is relying on the information contained herein, and that the Vendor Bidder is under a continuing obligation from the date of this certification through the completion of any contract(s) with the County of Union to notify the County of Union in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to criminal prosecution under the law, and it will constitute a material breach of my agreement(s) with the County of Union, permitting the County of Union to declare any contract(s) resulting from this certification void and unenforceable.

Robert Chianese
Signature

11-2-18
Date

URGENT CHIANESE PRESIDENT
Print Name and Title

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:
ELEVATOR MAINTENANCE CORPORATION

TRADE NAME:

ADDRESS:
580 ELM ST
KEARNY NJ 07032-3698
EFFECTIVE DATE:

SEQUENCE NUMBER:
0064015

ISSUANCE DATE:
03/01/18

02/01/66



Director
New Jersey Division of Revenue

FORM-BRC

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

04-08170205846V

Registration Date: 10/25/2018
Expiration Date: 10/24/2019

Certificate Number
51553



State of New Jersey

Department of Labor and Workforce Development Division of Wage and Hour Compliance

Public Works Contractor Registration Act

Pursuant to N.J.S.A. 34:11-56.48, et seq. of the Public Works Contractor Registration Act, this certificate of registration is issued for purposes of bidding on any contract for public work or for engaging in the performance of any public work to:

Elevator Maintenance Corporation
2018

Responsible Representative(s):

Vincent Chianca, President

Handwritten signature of Robert Asaro-Angelo.

Robert Asaro-Angelo, Commissioner
Department of Labor and Workforce Development

NON TRANSFERABLE

This certificate may not be transferred or assigned and may be revoked for cause by the Commissioner of Labor and Workforce Development.

FACILITY LOCATION

Location of Bidder's Main Office & Facilities

180 ELY STREET

(Address)

KEARNY

(City)

NJ

07032

(Zip Code)

201-991-7133

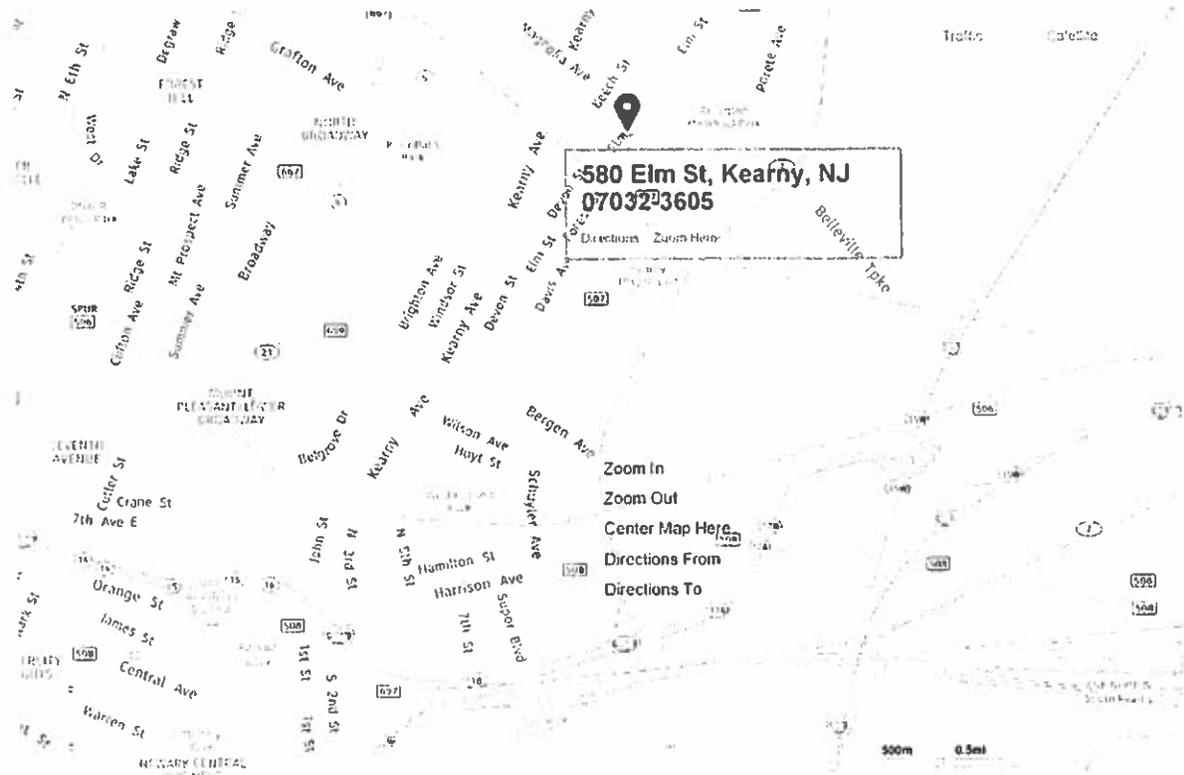
(24-Hour Manned Phone Number)

*ATTACH MAP FROM GOOGLE OR MAPQUEST TO THIS PAGE

NAME OF BIDDER:

ELMATER MAINTENANCE CORPORATION

This Single Family Home is located at 580 Elm Street, Kearny NJ. 580 Elm St is in the 07032 ZIP code in Kearny NJ. 580 Elm St has 2 beds and 1 bath.



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EXPERIENCE STATEMENT

County of Union, Elizabeth, NJ

The vendor must provide references of previous experience. Include names, addresses, phone numbers, types of elevators worked on, and time frames of all the references.

- ① County of Union (43) ELEVATORS
8 ELIZABETH PLAZA
ELIZABETH, NJ 07207
CHARLIE CHIRAFESI (908) 578-2663
- ② County of Essex (60) ELEVATORS
465 MARTIN LUTHER KING BLVD
NEWARK NJ 07101
FRANK POLITO (973) 725-4265
- ③ County of Monmouth (40) ELEVATORS
300 HILLS HILLS ROAD
FREEHOLD, NJ 07728
KEN RIZOVIC (732) 431-7360 EXT 2182

We hereby certify that my company has performed the following private or public work which is relevant to this bid, I further certify that my company has never defaulted under any contract.

Danielle Rodgers
Witness

ELEVATOR MAINTENANCE CORPORATION
Name of Company

11/5/18
Date

580 ELY STREET KENNY NJ
Address

Vincent Chianca
By: VINCENT CHIANCA
PRESIDENT Title



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/01/2018

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

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

PRODUCER Allwood Fortenza Insurance PO Box 11029 Fairfield NJ 07004		CONTACT NAME: Debra Arena PHONE (A/C, No, Ext): (973) 256-5500 E-MAIL ADDRESS: FAX (A/C, No): (973) 882-5601	
INSURED Elevator Maintenance Corp. 580 Elm Street Kearny NJ 07032		INSURER(S) AFFORDING COVERAGE INSURER A: Technology INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 18-19

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/PROP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	TARNJ1015732-00	07/10/2018	07/10/2019	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

INSUREDS COPY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ELEVATOR MAINTENANCE CORP
580 ELM STREET
KEARNY, NJ 07032

State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF PROPERTY MANAGEMENT AND
CONSTRUCTION
33 WEST STATE STREET - P.O. BOX 034
TRENTON, NEW JERSEY 08625-0034

NOTICE OF CLASSIFICATION

In accordance with N.J.S.A. 18A:18A-27 et seq (Department of Education) and N.J.S.A. 52:35-1 (Department of the Treasury) and any rules and regulations issued pursuant hereto, you are hereby notified of your classification to do State work for the Department (s) as previously noted.

Aggregate Amount	Trade(s) & License(s)	Effective Date	Expiration Date
\$510,000	C099 -ELEVATORS	09/19/2014	09/18/2016

- Licenses associated with certain trades are on file with the Division of Property Management & Construction (DPMC).
- Current license information must be verified prior to bid award.
- A copy of the DPMC 701 Form (Total Amount of Uncompleted Projects) may be accessed from the DPMC website at http://www.state.nj.us/treasury/dpmc/Assets/Files/dpmc-27_03_07.pdf.

ANY ATTEMPT BY A CONTRACTOR TO ALTER OR MISREPRESENT ANY INFORMATION CONTAINED IN THIS FORM MAY RESULT IN PROSECUTION AND/OR DEBARMENT, SUSPENSION OR DISQUALIFICATION. INFORMATION ON AGGREGATE AMOUNTS CAN BE VERIFIED ON THE DPMC WEB SITE.

NEW JERSEY MANUFACTURERS INSURANCE COMPANY

301 Sullivan Way
West Trenton, New Jersey 08628-3496
(609) 883-1300

CERTIFICATE OF COMMERCIAL AUTOMOBILE INSURANCE

We certify that we have issued an automobile insurance policy, as described below:

Insured:
ELEVATOR MAINTENANCE CORP
580 ELM ST
KEARNY NJ 07032

Policy No. B 065808-8

Effective 03/23/2018

Expiring 03/23/2019

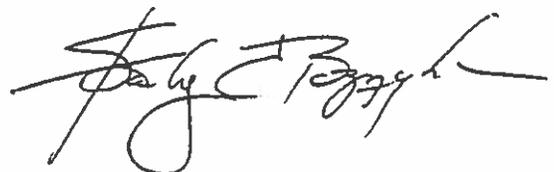
TYPE OF COVERAGE	LIMIT
Covered Autos Liability	\$1,000,000 Combined Single Limit (CSL) Each Accident
Comprehensive	
Specified Causes of Loss	
Fire & Theft	
Collision	

This certificate is issued for the information of:

Project:

SAMPLE
SAMPLE
SAMPLE

- Including hired and non-owned autos
- This certificate imposes no liability on us beyond that stated in the provisions of the policy described above.



Agent



State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF PROPERTY MANAGEMENT AND CONSTRUCTION
33 W. STATE STREET
PO BOX 034
TRENTON, NEW JERSEY 08625-0042

REPLY TO:
TEL: (609) 943-3400
FAX: (609) 984-8495

TOTAL AMOUNT OF UNCOMPLETED CONTRACTS

This form is to be used with the NOTICE OF CLASSIFICATION when submitting bids to the Department of Education.)

Certify that the amount of uncompleted work on contracts is \$ _____.

The amount claimed includes uncompleted portions of all currently held contracts from all sources (public and private) in accordance with N.J.A.C. 17:19-2.13.

further certify that the amount of this bid proposal, including all outstanding incomplete contracts does not exceed my requalification dollar limit.

Respectfully submitted,



By _____
Name of Firm

Signature

Title

Business Address

Phone

Sworn to and subscribed before me
This day of
20

Notary Public



Confined Space Awareness
Certificate of Course Completion

Elevator Maintenance Company



Salvatore Verderame

Authorized OSHA

Outreach Trainer



June 8, 2015

INTEGRITY SAFETY, LLC



COUNTY OF UNION
BID SUBMISSION CHECKLIST

BA# 53-2018 ELEVATOR MAINTENANCE
AND REPAIR SERVICE

CL

CONSENT OF SURETY – The Consent of Surety form signed by a Surety Company stating that if your bid is accepted, the Surety Company that provides the consent shall be required to furnish a Performance Bond in the amount of \$100,000.00. The Bond shall have a term equal to the contract period.

In lieu of the Consent of Surety you may submit a Certified Check for the amount of \$100,000.00.

The County of Union has provided its Consent of Surety form for your use. The use of this form by your Surety Company will expedite the bid review process and eliminate the possibility of having your bid rejected. If, however, you should need to use another form, please use language similar to that used on the Union County form and avoid making any additions or deletions to the Union County form language.

- CL* 2. Bid Form Page(s)
- CL* 3. Bidder Signature Page – fill out completely
- CL* 4. Non-Collusion Affidavit – fill out completely and notarize
- CL* 5. Stockholder Disclosure Certification (2 pages) – fill out completely
- CL* 6. Affirmative Action Requirement
- CL* 7. Disclosure of Investment Activities in Iran
- CL* 8. Americans with Disabilities Form
- CL* 9. Copy of State of NJ Department of Treasury Business Registration Certificate
- CL* 10. Extension Form for Union County Cooperative Pricing System
- CL* 11. Addenda Receipt Form – Only Include If Addendums Were Received
- CL* 12. Facility Location
- CL* 13. Experience Statement

Each bidder should complete this form, initial each entry, sign and date at the bottom and submit with bid.

NAME OF BIDDER

ELEVATOR MAINTENANCE CORP.

DATE

11/2/18