



# General Construction Community Minor Maintenance

## Bidding Documents and Information

### **CORPORATE HEADQUARTERS**

515 Broadway  
Albany, New York  
12207-2964

**T** 518.257.3000  
**F** 518.257.3100

### **NEW YORK OFFICE**

One Penn Plaza, 52nd Fl.  
New York, New York  
10119-0098

**T** 212.273.5000  
**F** 212.273.5121

### **BUFFALO OFFICE**

539 Franklin Street  
Buffalo, New York  
14202-1109

**T** 716.884.9780  
**F** 716.884.9787

[www.dasny.org](http://www.dasny.org)

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**NOTICE TO BIDDERS**  
**Dormitory Authority – State of New York (“DASNY”)**  
**GENERAL CONSTRUCTION MINOR MAINTENANCE**  
**ALL NY REGIONS 1, 2, 3 4, 5, 6, 7, 8, 9, 10**  
**DASNY Project # 3111209999**

**Bid Date: March 25, 2020**

Sealed bids for the below work located in the counties listed below will be received by DASNY at its office located at 515 Broadway, Albany, NY 12207. Each bid must be identified, on the outside of the envelope, with the name and address of the bidder and designated as a bid for the project titled above. When a sealed bid is placed inside another delivery jacket, the bid delivery jacket must be clearly marked on the outside **“BID ENCLOSED”** and **“ATTENTION: CONSTRUCTION CONTRACTS UNIT – DAWN BYRNES”** DASNY will not be responsible for receipt of bids which do not comply with these instructions.

Description of Contract	Region Number	Region Name	Counties	Project Number	Change Request Number	Bid Security	Max Contract Value Per Contract Term
General Construction	1	New York City	New York (Manhattan), Bronx, Queens, Kings (Brooklyn), Richmond (Staten)	3111209999	28	\$5,000	\$1,000,000
General Construction	2	Long Island	Nassau, and Suffolk	3111209999	29	\$5,000	\$1,000,000
General Construction	3	Hudson Valley	Ulster, Dutchess, Sullivan, Orange	3111209999	30	\$5,000	\$1,000,000
General Construction	4	Rockland	Westchester, Rockland, and Putnam	3111209999	31	\$5,000	\$1,000,000
General Construction	5	Capital District/ Mohawk Valley	Albany, Fulton, Herkimer, Montgomery, Oneida, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and	3111209999	32	\$5,000	\$1,000,000
General Construction	6	North Country	Jefferson, Lewis, St Lawrence, Franklin, Clinton, Essex, Hamilton	3111209999	33	\$5,000	\$1,000,000
General Construction	7	Binghamton/ Southern	Steuben, Schuyler Tompkins, Tioga, Broome, Chenango, Delaware	3111209999	34	\$5,000	\$1,000,000
General Construction	8	Syracuse /Central	Oswego, Onondaga, Cortland, Cayuga, Madison	3111209999	35	\$5,000	\$1,000,000
General Construction	9	Rochester/Finger Lakes	Genesee, Wyoming, Livingston, Yates, Seneca, Ontario, Wayne, Monroe, Orleans	3111209999	36	\$5,000	\$1,000,000
General Construction	10	Buffalo/ Western	Chautauqua, Allegheny, Cattaraugus, Erie, Niagara	3111209999	37	\$5,000	\$1,000,000

**Notwithstanding the foregoing, DASNY reserves the right, at its sole discretion, to assign Work to any contractor in any geographic area or region.**

Individuals submitting bids in person or by private delivery services should allow sufficient time for processing through building security to assure that bids are received prior to the deadline for submitting bids. All individuals who plan to attend bid openings will be required to present government-issued picture identification to building security officials and obtain a visitors pass prior to attending the bid opening. Only those bids in the hands of DASNY, available to be read at **2:00 PM** local time on **March 25, 2020** will be considered. Bids shall be publicly

opened and read aloud. Bid results can be viewed at the DASNY website: <http://www.dasny.org>, forty-eight (48) hours after the Bid Opening.

In accordance with State Finance Law § 139-j and § 139-k, this solicitation includes and imposes certain restrictions on communications between DASNY personnel and a prospective bidder during the procurement process. Designated staff for this solicitation is: **Dawn Byrnes, Sr. Contract Administrator at DASNY Contracts at [ccontracts@dasny.org](mailto:ccontracts@dasny.org)**. Contacts made to other DASNY personnel regarding this procurement may disqualify the prospective bidder and affect future procurements with governmental entities in the State of New York. For more information, pursuant to this law, refer to the DASNY website; <http://www.dasny.org> or the OGS website; <http://www.ogs.ny.gov>

A Complete Sets of all Contract Documents shall be posted to DASNY's website: <http://www.dasny.org/rfp-bidopportunities-solicitations/constructionservices/joc-opportunities/new.aspx>.

Reuben McDaniel, Acting President & CEO  
February 12, 2020

BIDDING REQUIREMENTS FOR CONSTRUCTION  
GENERAL CONSTRUCTION MINOR MAINTENANCE CONTRACTING  
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**Section 1.0 - Pre-Bid Meetings**

A. A pre-bid meeting will be held on March 10, 2020. Prospective bidders are strongly encouraged to attend. The purpose is to observe actual Site conditions and review Contract Document requirements.

**Section 2.0 - Examination of the Contract Documents and Site**

A. Prospective bidders shall examine the Contract Documents carefully and, before bidding, shall make a written request to the Owner and Design Professional, for an interpretation or correction of any ambiguity, inconsistency, or error therein which should be discovered by a reasonably prudent bidder. Every request for such interpretation must be received at least ten (10) days prior to the date fixed for the opening of the bid. Such interpretation or correction, as well as additional Contract provisions the Owner shall decide to include, shall be issued in writing by the Owner as an addendum, which shall be available on the DASNY website ([www.dasny.org](http://www.dasny.org)) where the Contract Documents are available for inspection by prospective bidders. Such addendum shall become a part of the Contract Documents and shall be binding on prospective bidders whether or not the bidder receives or acknowledges the actual notice of such addendum. Requirements of the Contract Documents shall apply to addenda.

1. **Deadline for written requests for interpretation or correction of bid documents shall be Wednesday, March 17, 2020 at 2:00 pm. Please submit all written requests for interpretation or correction of bid documents to Dawn Byrnes, Sr. Contract Administrator, [dbyrnes@dasny.org](mailto:dbyrnes@dasny.org) and Construction Contracts at [ccontracts@dasny.org](mailto:ccontracts@dasny.org).**

B. Only interpretations, corrections or additional Contract provisions issued in writing by the Owner as addenda shall be binding. No officer, agent or employee of the Owner is authorized to explain or interpret the Contract Documents by any other method and any such explanation or interpretation, if given, must not be relied upon by the bidder.

C. At the time of the opening of bids, each bidder shall be presumed to have read and to be familiar with the Contract Documents. The failure or omission of any bidder to receive or to examine any Contract Document shall in no way relieve any bidder from any obligation in respect to the bid of such bidder.

**Section 3.0 - Qualifications of Bidder**

A. The Owner may make such investigation as the Owner deems necessary to determine the responsibility of any bidder or to determine the ability of any bidder to perform the Work. Bidders shall furnish to the Owner all information and data required by the Owner, including complete financial data, within the time and in the form and manner required by the Owner. The Owner reserves the right to reject any bid if the evidence required by the Owner is not submitted as required or if the evidence submitted by or the investigation of any bidder fails to satisfy the Owner that the bidder is responsible, or is able or qualified to carry out the obligations of the Contract or to complete the Work as contemplated.

B. Contract Experience Requirements for General Contractor (GC):

1. The Bidder or its Principals for the contract shall meet the following minimum requirements:

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- a. The Bidder shall have completed or substantially completed in each of the last two years at least five (5) projects each with a contract value of at least \$100,000. The projects used for qualification listed above must be where the Bidder was the prime contractor for the specific trade on which they are bidding.
- b. Experience will be viewed from both the perspective of completed projects of comparable scope and magnitude as well as the experience and depth of the bidder's personnel. The determination of relevant contract experience in terms of size, scope and complexity will be at the sole discretion of the Owner.

**Section 4.0 - Executive Order No 170.1 – Uniform Guidelines for Responsibility Determinations**

The criteria contained in Executive Order No. 170.1 will also be applied in the bid review process. In the event of any conflict between the criteria in Executive Order No. 170.1 and the criteria in the Contract Documents, the stricter criteria shall apply.

**Section 5.0 - Executive Order No 125 – NYS Vendor Responsibility Questionnaire**

- A. For any contract \$10,000 or more, the New York State Vendor Responsibility Questionnaire For-Profit Construction (CCA-2) shall be submitted by the apparent low bidder to the Owner. Executive Order No. 125 dated May 22, 1989 is found at 9 NYCRR §4.125.
- B. The bidder shall submit a New York State Vendor Responsibility Questionnaire For-Profit Construction (CCA-2) to the Owner for any subcontractor proposed for the Work upon request of the Owner.
- C. The Owner recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System (the "System"). To enroll in and use the System, see the System Instructions at [http://www.osc.state.ny.us/vendrep/vendor\\_index.htm](http://www.osc.state.ny.us/vendrep/vendor_index.htm) or go directly to the VendRep System online at <https://portal.osc.state.ny.us>. Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for System assistance, contact the Office of the State Comptroller's ("OSC") Help Desk at 866-370-4672 or 518- 408-4672 or by email at [ciohelpdesk@osc.state.ny.us](mailto:ciohelpdesk@osc.state.ny.us).

**Section 6.0 – 2005 Procurement Lobbying Law**

- A. Pursuant to provisions of the General Conditions, Article 18 – 2005 Procurement Lobbying Law, for any contract \$15,000 or more, the 2005 PROCUREMENT LOBBYING LAW – CERTIFICATION form is to be submitted with the bid.
- B. All bidders, domestic and foreign, must be in compliance with New York State business registration requirements. Contact the NYS Department of State regarding compliance.

**Section 7.0 - Approval of Subcontractors/Subcontract Limits**

**A. Self-Performance Requirements/Subcontracting**

1. The contractors shall subcontract all work of the contract unless otherwise approved to utilize its own forces by the Owner.

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2. The Chief, Procurement may, in writing, modify these requirements where the Chief determines it is in the best interest of the Owner.

**Section 8.0 - Opportunity Programs Requirements**

- A. Pursuant to provisions of the General Conditions, Article 20 – Opportunity Programs and Article 21 – Service-Disabled Veteran Owned Businesses, the Contractor agrees, in addition to any other nondiscrimination provision of the Contract and at no additional cost to the Owner, to fully comply and cooperate with the Owner in the implementation of NYS Executive Law ARTICLE 15-A, PARTICIPATION BY MINORITY GROUP MEMBERS AND WOMEN WITH RESPECT TO STATE CONTRACTS and Article 17-B, SERVICE DISABLED VETERAN OWNED BUSINESSES. These requirements will include: equal employment opportunities for minority group members and women (EEO), plus opportunities for minority and women-owned business enterprises (M/WBE). The Contractor’s demonstration of good faith efforts shall also be a part of these requirements.
- B. The Owner has adopted a goal-oriented approach to ensure employment of EEO & M/WBE at a level commensurate with their capability and availability. The Owner has determined that the goals for EEO & M/WBE participation in the Work of the Contract are follows:

Description	All Region(s)	MBE %	WBE %	SDVOB %	EEO%	
General Contractor	1-10	18 %	12 %	6 %	45 %	

- C. The low bidder shall submit the following as referenced in the Contract Documents, within the specified time frames:
  - 1. Statewide Utilization Management Plan (“Utilization Plan”), Refer to Article 20 – Opportunity Programs, specifically Section 20.03 for Submittal Requirements;
  - 2. Utilization Plan Cover Sheet
  - 3. Standard Equal Employment Opportunity Policy Statement
  - 4. Permanent Employee Distribution
  - 5. Scope Verification Form
  - 6. Monthly Workforce Utilization Report
  - 7. Compliance Report
- D. Failure to provide the above plans and the aforementioned information may be cause for rejection of the bid.
- E. Requests for amended goals should be submitted to Procurement in advance of award of the Contract.

**Section 9.0 - Preparation of Bids**

- A. Bids must be submitted on the Form of Bid supplied by the Owner in the bidder’s full legal name or the bidder’s full legal name plus a registered assumed name. Bids shall be enclosed in a sealed envelope, addressed to the Owner, and marked with the name and address of the bidder, and the name of the Project. All blank spaces for bid prices must be filled in, using both words and figures, words to take precedence over figures. Conditional

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bids shall not be accepted. Bids shall not contain any recapitulation of the Work to be done. No oral, facsimile transmittal, electronic or telephonic bids or modifications of bids shall be considered. Bids shall contain an original signature of the bidder in the space provided on the Form of Bid.

- B. Bids that are illegible or that contain omissions, alterations, additions, or items not called for in the bidding documents may be rejected as not responsive. Any bid which modifies, limits, or restricts all or any part of such bid, other than as expressly provided for in the Contract Documents, may be rejected as not responsive.
- C. The Owner may reject any bid not prepared and submitted in accordance with the provisions of the Contract Documents.
- D. Any bid may be withdrawn prior to the scheduled time for the opening of bids or authorized postponement thereof and any bid received after such time and date shall not be considered.
- E. No bidder may withdraw a bid within sixty (60) days after the actual date of the opening thereof.
- F. No action or proceeding concerning in any way any bid for the Contract or the Contract shall be brought against the Owner in any location other than Albany County unless the Owner specifically consents, in writing, to a change of venue.

**Section 10.0 – Minimum and Maximum Contract Values and Bid Security**

- A. Each bid must be accompanied by a certified check of the bidder made payable to the Dormitory Authority or by a bid bond prepared on the form of bid bond included in the Contract Documents, duly executed by the bidder as principal, and the surety thereon. Bidder failure to provide bid security as prescribed, may result in rejection of the bid. Bid bonds submitted as bid security shall contain an original signature of both the bidder and the surety providing the bid bond in the space provided on the Form of Bid Bond. The surety shall be authorized to do business in the State of New York by the New York State Department of Financial Services, rated at least A- by A. M. Best and Company, or meet such other requirements as are acceptable to the Owner in its sole and exclusive discretion.
  - 1. The Minimum and Maximum Contract Value and Bid Security of each contract to be awarded are stated in the table below.
  - 2. The Minimum Contract Value for all contracts is \$0.
  - 3. A separate Bid Bond is required for each Bid.
  - 4. The Contractor will not be issued Work Orders exceeding the Maximum Contract Value during the contract period. However, the Contractor is not guaranteed to receive this volume of Work.



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Description of Contract	Region Number	Region Name	Counties	Project Number	Change Request Number	Bid Security	Max Contract Value Per Contract Term
General Construction	1	New York City	New York (Manhattan), Bronx, Queens, Kings (Brooklyn), Richmond (Staten	3111209999	28	\$5,000	\$1,000,000
General Construction	2	Long Island	Nassau, and Suffolk	3111209999	29	\$5,000	\$1,000,000
General Construction	3	Hudson Valley	Ulster, Dutchess, Sullivan, Orange	3111209999	30	\$5,000	\$1,000,000
General Construction	4	Rockland	Westchester, Rockland, and Putnam	3111209999	31	\$5,000	\$1,000,000
General Construction	5	Capital District/ Mohawk Valley	Albany, Fulton, Herkimer, Montgomery, Oneida, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and	3111209999	32	\$5,000	\$1,000,000
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General Construction	7	Binghamton/ Southern	Steuben, Schuyler Tompkins, Tioga, Broome, Chenango, Delaware	3111209999	34	\$5,000	\$1,000,000
General Construction	8	Syracuse /Central	Oswego, Onondaga, Cortland, Cayuga, Madison	3111209999	35	\$5,000	\$1,000,000
General Construction	9	Rochester/Finger Lakes	Genesee, Wyoming, Livingston, Yates, Seneca, Ontario, Wayne, Monroe, Orleans	3111209999	36	\$5,000	\$1,000,000
General Construction	10	Buffalo/ Western	Chautauqua, Allegheny, Cattaraugus, Erie, Niagara	3111209999	37	\$5,000	\$1,000,000

- B. Any certified checks submitted as bid security shall be returned to all except the three (3) lowest bidders after the opening of bids, and the remaining checks shall be returned to the three (3) lowest bidders after the Owner and the accepted bidder have executed the Agreement, or if no Agreement has been executed within sixty (60) days after the date of the opening of bids, upon demand of the bidder at any time thereafter so long as such bidder has not been notified of the acceptance of such bid.
- C. Bid Bonds of all but the bidder executing the Agreement shall be destroyed by the Owner either 1) after the Owner and the accepted bidder have executed the Agreement, or 2) if no Agreement has been executed, sixty (60) days after the date of the opening of bids.
- D. Bidders *must* include with their bid a letter from their Surety attesting to their overall and per project bonding limits.**

**Section 11.0 – Compliance with Laws**

The bidder shall sign and submit with the bid the COMPLIANCE WITH LAWS – CERTIFICATION form included in the Contract Documents.

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**Section 12.0 - Bid Designation**

- A. Each bid shall bear on the outside of the envelope the name of the bidder, its address, its telephone number and designated as bid for the following: "**BID ENCLOSED FOR GENERAL CONSTRUCTION MINOR MAINTENANCE (GCMM) CONTRACTING PROGRAM; REGION NUMBER: \_\_\_\_\_ ; CR NUMBER: \_\_\_\_\_**" **(Fill in Appropriate Region Number and CR Number from Table Below).**
- B. *No more than ONE Region/ CR Bid per envelope.*
- C. Notwithstanding the contract designation, the Owner reserves the right, at its sole discretion, to assign Work to any contractor in any county covered by any of the contracts herein bid.

<b>Region Number</b>	<b>Region Name</b>	<b>Counties</b>	<b>Change Request Number</b>
1	New York City	New York (Manhattan), Bronx, Queens, Kings (Brooklyn), Richmond (Staten	28
2	Long Island	Nassau, and Suffolk	29
3	Hudson Valley	Ulster, Dutchess, Sullivan, Orange	30
4	Rockland	Westchester, Rockland, and Putnam	31
5	Capital District/ Mohawk Valley	Albany, Fulton, Herkimer, Montgomery, Oneida, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and	32
6	North Country	Jefferson, Lewis, St Lawrence, Franklin, Clinton, Essex, Hamilton	33
7	Binghamton/ Southern	Steuben, Schuyler Tompkins, Tioga, Broome, Chenango, Delaware	34
8	Syracuse /Central	Oswego, Onondaga, Cortland, Cayuga, Madison	35
9	Rochester/Finger Lakes	Genesee, Wyoming, Livingston, Yates, Seneca, Ontario, Wayne, Monroe, Orleans	36
10	Buffalo/ Western	Chautauqua, Allegheny, Cattaraugus, Erie, Niagara	37

**Section 13.0 - Award of Contract**

- A. Award of the Contract shall be made to the bidder submitting the lowest bid, if:

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1. In the opinion of the Owner, the bid is responsive to the bid solicitation, and such bidder is qualified to perform the Work involved, is responsible and reliable.
  2. The bidder submits required documents as described under Section 17.0 – Forms and Documents.
  3. On all contracts, the bidder furnishes within Seventy-two (72) hours after low bidder notification, documentation of efforts to encourage the participation of New York State enterprises as suppliers and subcontractors. Also, in a post-award compliance report, furnish documentation of efforts to provide notification to New York State residents of employment opportunities, through the New York State Job Service Division, or provide such notification in a manner consistent with existing collective bargaining contracts or agreements.
- B. The Owner reserves the right to reject any bid or all bids, to waive any informalities or irregularities or omissions in any bid received or to afford any bidder an opportunity to remedy any informality or irregularity.
- C. As part of the Work Order Contracting Program, the Owner reserves to itself, in its sole judgment, the right to limit the number of Work Order Contracts awarded to any single bidder or contractor. Subject to the limitations appearing above and elsewhere in this bid package, the contracts will be awarded, if at all, to the combination of bids resulting in the least overall cost to the Owner.
- D. The execution of the Agreement shall not be construed as a guarantee by the Owner that the plant, equipment and the general scheme of proposed operations of a bidder is either adequate or suitable for the satisfactory performance of the Work or that other data supplied by a bidder is accurate.

**Section 14.0 - Required Bonds**

- A. As a condition precedent to the issuance of any Work Order by the Owner, the Contractor must provide and furnish proof of a Payment Bond in the amount of at least equal to 100% of the proposed Work Order amount for the payment of all persons performing labor or providing materials in connection with the Work of the Work Order. .
- B. If at any time the Owner, in its sole and exclusive discretion, shall become dissatisfied with any surety or sureties upon the Payment Bond, or if for any other reason said bonds shall cease to be adequate security to the Owner, the Contractor shall, within five (5) calendar days after written notice from the Owner to do so, substitute an acceptable bond or bonds in such form and sum and signed by such other surety or sureties as may be satisfactory to the Owner. The Contractor shall pay the premiums on said bond or bonds.
- C. The surety company, on all bonds, shall be authorized to do business in the State of New York by the NYS Department of Financial Services and rated at least A- by A.M. Best and Company, or meet such other requirements as are acceptable to the Owner in its sole and exclusive discretion.
- D. Any failure to comply with the requirements of Article 14 will be deemed a material breach of the Agreement.

**Section 15.0 - Damages for Failure to Enter into Agreement**

The successful bidder, upon failure or refusal to sign and deliver the Agreement required within fourteen (14) days after such bidder has received the Letter of Intent, shall forfeit to the Owner as damages for such failure or refusal,

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the bid security or the difference between the bidder's Award Criteria Figure and the next lowest bidder's Award Criteria figure times the Maximum Contract Value, whichever sum shall be higher.

**Section 16.0 - Substantial Completion**

- A. Total time of completion for the Work Order Contracting Program is:
1. Two years from the issuance of a Notice of Contract Award or when the Maximum Contract Value has been ordered, whichever occurs first.
  2. Option Period: Both the Authority and the Contractor must mutually agree to extend the contract for an option period. The term of the option period is two years or when the Maximum Contract Value, or revised Maximum Contract Value, is ordered, whichever occurs first.
- B. Work set forth in individual Work Orders under the contract shall be commenced and completed as stated in the Work Orders.
- C. Liquidated Damages may be assessed on a Work Order by Work Order basis at a rate established in the Work Order.

**Section 17.0 – Forms and Documents**

Each bidder shall complete and submit to the Owner, pursuant to provisions stated in the Information for Bidders, the following forms and documents, which are hereby made a part of the Contract Documents:

Bidding Requirements: each bidder shall submit the following at time of bid:

1. Form of Bid;
2. 2005 Procurement Lobbying Law - Certification
3. Code of Business Ethics - Certification
4. Compliance with Laws - Certification
5. W-9 Form
6. Bid Security
7. Letter from Surety regarding Bonding Capacity

Contract Forms for Construction: the successful bidder shall submit the following for execution of the Contract:

1. Required Insurance Form – within three (3) days after low bidder notification
2. New York State Vendor Responsibility Questionnaire For-Profit Construction (CCA-2)
3. Agreement - within fourteen (14) days after Letter of Intent

As work orders are issued the successful bidder must submit the following:

1. Utilization Plan with written justification if a Request for Waiver is applicable Utilization Plan Cover Sheet
2. Scope Verification Form
3. Monthly Workforce Utilization Report



# General Construction Community Minor Maintenance

## Forms of Bid

### **CORPORATE HEADQUARTERS**

515 Broadway  
Albany, New York  
12207-2964

**T** 518.257.3000  
**F** 518.257.3100

### **NEW YORK OFFICE**

One Penn Plaza, 52nd Fl.  
New York, New York  
10119-0098

**T** 212.273.5000  
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### **BUFFALO OFFICE**

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[www.dasny.org](http://www.dasny.org)

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FORM OF BID

All Regions

(Contract for Total of All Materials and Labor)

TO THE DORMITORY AUTHORITY - STATE OF NEW YORK  
(Owner)

For **General Construction Community Minor Maintenance Program**, Pursuant to and in compliance with the Owner's advertisement for bids dated \_\_\_\_\_ and the Contract Documents relating hereto, the undersigned hereby offers to Provide all Work as required by, and in strict accordance with, the applicable provisions of General Construction Community Minor Maintenance Contract Documents for Region No. \_\_\_\_ (Write In Region # 1-10) CR No. \_\_\_\_\_ (Write in applicable CR number; note one CR per bid form), including written changes thereto, and addenda issued by the Owner and sent to the undersigned or delivered to the bidder prior to the opening of bids, whether received by the undersigned or not, using the following:

1. Contractor shall procure the identified scope of work for a lump sum price multiplied by the following multiplier of:

\_\_\_\_\_. \_\_\_\_\_  
(Specify to two decimal places)

A contract will be awarded to the responsive and responsible bidder with the lowest multiplier.

The bid may be withdrawn at any time prior to the scheduled time for the opening of bids or any authorized postponement thereof.

If the Letter of Intent is sent or delivered to the undersigned within sixty (60) days after the date of opening of the bids, or any time thereafter before the bid is withdrawn, the undersigned shall, within fourteen (14) days after the date of such Letter of Intent, execute and deliver an Agreement in the form included in the Contract Documents.

The undersigned hereby designates as the undersigned's office to which the Letter of Intent may be sent or delivered:

Name: \_\_\_\_\_

Firm's Legal Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

PO Box #: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Submit Bid to:**

**DASNY  
Attn: CONTRACTS UNIT – BID ENCLOSED  
515 Broadway  
Albany, New York 12207**

**NOTE ON OUTSIDE OF ENVELOPE:  
GC CMM PROGRAM, FOR REGION: \_\_\_\_\_ ; CR No. \_\_\_\_\_  
(Fill In Appropriate Region, and CR Number)**

***No more than ONE Bid per envelope***



**Non-collusive Bidding Certification**

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 the bid have been arrived at independently without collusion, consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;
2. Unless otherwise required by law, the prices which have been quoted in the 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.

Dated: \_\_\_\_\_

Firm's Legal Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

By: \_\_\_\_\_  
(Signature of Officer)

Title: \_\_\_\_\_

Officer Name: \_\_\_\_\_  
(Print)

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Taxpayer ID or Social Security Number: \_\_\_\_\_

End of Document

The bidder shall submit this form at time of bid.

#### **A. Ethics Programs**

1. The Dormitory Authority of the State of New York (the “Authority”), a public-benefit corporation, expects the highest degree of ethical business conduct by its employees and the many contractors, consultants and vendors with whom it interacts on behalf of its clients, bondholders and the people of the State of New York. The Authority, by mandate of its Board of Directors, administers a comprehensive corporate integrity program to ensure that, as public officers, Authority employees at all levels perform their official duties consistent with the requirements of the *New York State Public Officers Law*; other applicable laws, rules, and regulations; and policies of the Authority.
2. The Authority encourages and supports a fair, open and honest business relationship with its contractors, consultants and vendors based on quality, service and cost. Moreover, the Authority believes that a “level playing field” in the marketplace can only be achieved through adherence to ethical business practices by all participants involved in the process.
3. To promote a working relationship with the Authority based on ethical business practices, contractors, consultants and vendors are expected to:
  - a. furnish all goods, materials and services to the Authority as contractually required and specified;
  - b. submit complete and accurate reports to the Authority and its representatives as required;
  - c. not seek, solicit, demand or accept any information, verbal or written, from the Authority or its representatives that provides an unfair advantage over a competitor;
  - d. not engage in any activity or course of conduct that restricts open and fair competition on Authority-related projects and transactions;
  - e. not engage in any course of conduct with Authority employees or representatives that constitutes a conflict of interest or creates the appearance of a conflict of interest;
  - f. not offer any unlawful gifts or gratuities to Authority employees or representatives, or engage in bribery or other criminal activity; and
  - g. report to the Authority any activity by an Authority employee or contractor, consultant or vendor of the Authority that is inconsistent with the Authority’s *Code of Business Ethics*.
4. The Authority encourages its contractors, consultants and vendors to advance and support ethical business conduct and practices among their respective directors, officers and employees, preferably through the adoption of corporate ethics awareness training programs and written codes of conduct. In addition to considering technical competence and financial stability, the Authority will consider the *corporate integrity* of all contractors, consultants and vendors prior to the awarding of contracts or issuing of purchase orders.

#### **B. Conduct of Authority Employees**

Authority employees are expected to conduct business with contractors, consultants and vendors in a fair, consistent and professional manner. The Authority’s Code of Business Ethics and Employee Conduct entitled *Serving Responsibly*, and other Authority policies and procedures, guide the manner in which Authority employees are required to interact with contractors, consultants and vendors. Additionally, the New York State Public Officers Law sets forth legal parameters within which Authority employees must perform their official duties with respect to, among other things, conflicts of interest and the acceptance of gifts.

### C. Limits on Gifts to Authority Employees

1. Pursuant to Section 73(5) of the Public Officers Law, no person shall offer any gift having more than a nominal value to an Authority employee under circumstances in which it:
  - a. could be reasonably inferred the gift was intended to influence the employee in the performance of his or her official duties; or
  - b. could reasonably be expected to influence the employee in the performance of his or her official duties; or
  - c. was intended as a reward for any official action on the part of the employee.
2. A gift is anything more than nominal in value, in any form, given to an Authority employee. Gifts include, but are not limited to, money, service, loan, travel, lodging, meals, refreshments, entertainment, discount, forbearance or promise. Any firm or its agents, either doing business or seeking to do business with the Authority (contractors, consultants, vendors, etc.), is prohibited from directly or indirectly offering or giving any gifts, even gifts of nominal value, to Authority employees as such gifts are deemed to be *per se* improper.
3. As is stated in the *Prohibited Interests* section of the Construction and Consultant Contract documents, violations of these gift provisions may be grounds for immediate contract termination and/or referral for civil action or criminal prosecution.

### D. Employing Relatives of Authority Employees

Although contractors, consultants and vendors may employ relatives of Authority employees, the Authority must be made aware of such circumstances as soon as possible, preferably in writing, to ensure a conflict of interest situation does not arise. The Authority reserves the right to request that contractors, consultants and vendors modify the work assignment of an Authority employee's relative where a conflict of interest, or the appearance thereof, is deemed to exist. Please be advised that Authority employees are required to disclose information regarding the hiring of relatives by contractors, consultants and vendors and recuse themselves from matters that may present a conflict of interest. For purposes of this document, the term "relatives" refers to spouses, domestic partners, parents, children, sisters, brothers, sisters-in-law, brothers-in-law, parents-in-law, sons/daughters-in-law, stepparents, stepchildren, aunts, uncles, nieces, nephews, first cousins, grandparents by blood relationship or by marriage, or persons residing in the same household.

### E. Hiring Former Authority Employees

Contractors, consultants and vendors may hire former Authority employees. However, as a general rule, former employees of the Authority may neither appear nor practice before the Authority, nor receive compensation for services rendered on a matter before the Authority, for a period of *two years* following their separation from Authority service. In addition, former Authority employees are subject to a "*lifetime bar*" from appearing before the Authority or receiving compensation for services regarding any transaction in which they personally participated or which was under their active consideration during their tenure with the Authority. Violations will be referred to the New York State Commission on Public Integrity for appropriate action.

**F. Questions**

Questions relating to these guidelines should be directed to the responsible Authority Project Manager or Program Director, Director of Procurement, the Authority’s Ethics Officer or Director of Internal Affairs. To contact any of these individuals please call: (518) 257-3000.

When in doubt, please seek guidance.

**G. Certification**

I have read the foregoing and agree to comply with the Authority’s Code of Business Ethics. I further acknowledge that failure to comply shall justify contract termination by the Authority and may result in the rejection of bids or proposals for future work with the Authority.

\_\_\_\_\_ (Officer’s Signature) \_\_\_\_\_ (Date)

Firm’s Legal Name: \_\_\_\_\_

Print Officer’s Name \_\_\_\_\_

Title \_\_\_\_\_

515 Broadway • Albany, New York 12207-2964

Payment Requisition Date: \_\_/\_\_/\_\_\_\_  
 Payment Requisition Amount: \$ \_\_\_\_\_

**PRIME CONTRACTOR / CONSULTANT / VENDOR INFORMATION**

NAME:	PROJECT#	CONTRACT#	WORK AUTH# (if applicable):
ADDRESS: CITY, STATE ZIP:	FEDERAL ID#	INSTITUTION:	
CONTACT PERSON: (person completing form)	TELEPHONE# - - - EMAIL:	WORK DESCRIPTION:	

<input type="checkbox"/> Please check here if you were granted a Total Waiver of the M/WBE Goals by receipt of letter dated: / /	<input type="checkbox"/> Please check here if you are a Professional Service Consultant & the original contract or Term Work Authorization amount is under \$50,000
<input type="checkbox"/> Please check here if you are a Construction Contractor and the original contract amount is under \$100,000.	<input type="checkbox"/> Please check here if you are a Commodity Vendor & the original purchase order/contract amount is under \$25,000.

**SUBCONTRACTOR/SUBCONSULTANT and SUPPLIER PAYMENT INFORMATION** \* ALL M/WBE and SDVOB Firms must be listed.  
 \* Non-M/WBE Firms with a "Total Value of Subcontract/PO" over \$10,000 must be listed.

<input type="checkbox"/> Please check here if <u>no</u> subcontractors or suppliers are being utilized on this contract	FEDERAL TAX ID NUMBER	CLASSIFICATION (select from both categories)		AMOUNT TO BE PAID OUT OF THE PROCEEDS OF THIS REQUISITION	TOTAL AMOUNT OF ALL PAYMENTS MADE PRIOR TO THIS REQUISITION	TOTAL VALUE OF SUBCONTRACT/PO'S ISSUED
<i>COMPANY INFORMATION</i>						
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$

<b>PRIME CONTRACTOR / CONSULTANT / VENDOR INFORMATION</b>						
NAME:		PROJECT#	CONTRACT#	WORK AUTH# (if applicable):		
<b>SUBCONTRACTOR/SUBCONSULTANT and SUPPLIER PAYMENT INFORMATION</b>		* ALL M/WBE Firms must be listed. * Non-M/WBE Firms with a "Total Value of Subcontract/PO" over \$10,000 must be listed.				
<i>COMPANY INFORMATION</i>	<i>FEDERAL TAX ID NUMBER</i>	<i>CLASSIFICATION (select from both categories)</i>		<i>AMOUNT TO BE PAID OUT OF THE PROCEEDS OF THIS REQUISITION</i>	<i>TOTAL AMOUNT OF ALL PAYMENTS MADE PRIOR TO THIS REQUISITION</i>	<i>TOTAL VALUE OF SUBCONTRACT/PO'S ISSUED</i>
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
Name: Address: Work Description:		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$

<b>Name:</b>  <b>Address:</b>  <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
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**PRIME CONTRACTOR / CONSULTANT / VENDOR INFORMATION**

NAME:	PROJECT#	CONTRACT#	WORK AUTH# (if applicable):
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**SUBCONTRACTOR/SUBCONSULTANT and SUPPLIER PAYMENT INFORMATION**      \* ALL M/WBE Firms must be listed.  
 \* Non-M/WBE Firms with a "Total Value of Subcontract/PO" over \$10,000 must be listed.

COMPANY INFORMATION	FEDERAL TAX ID NUMBER	CLASSIFICATION (select from both categories)	AMOUNT TO BE PAID OUT OF THE PROCEEDS OF THIS REQUISITION	TOTAL AMOUNT OF ALL PAYMENTS MADE PRIOR TO THIS REQUISITION	TOTAL VALUE OF SUBCONTRACT/PO'S ISSUED	
<b>Name:</b> <b>Address:</b>  <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
<b>Name:</b> <b>Address:</b>  <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
<b>Name:</b> <b>Address:</b>  <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
<b>Name:</b> <b>Address:</b>  <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$

<b>Name:</b> <b>Address:</b> <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
<b>Name:</b> <b>Address:</b> <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$
<b>Name:</b> <b>Address:</b> <b>Work Description:</b>		<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Non-M/WBE <input type="checkbox"/> SDVOB	<input type="checkbox"/> Subcontractor <input type="checkbox"/> Subconsultant <input type="checkbox"/> Supplier	\$	\$	\$



**Compliance Report Instructions**

*This report is required with the submittal of each payment requisition. Payment will not be processed without a completed report with an original signature.*

<b>PRIME CONTRACTOR/CONSULTANT /VENDOR INFORMATION</b>	Please provide all of the Prime and Project information as requested.
<b>SUBCONTRACTOR/SUBCONSULTANT and SUPPLIER PAYMENT INFORMATION</b>	<p>If you are not reporting any sub/supplier payments, please check the appropriate box.</p> <p>All of the M/WBE and SDVOB sub/supplier information requested must be provided.</p> <p><b><u>ALL</u></b> M/WBE and SDVOB Firms must be listed.</p> <p>Non-M/WBE Firms with a “Total Value of Subcontract/PO” over \$10,000 must be listed.</p> <p><b>ABOVE FIRMS MUST BE REPORTED EVEN IF THEY ARE NOT RECEIVING A PAYMENT THIS MONTH.</b></p> <p><b><i>** Only firms that have NYS Certification by the Empire State Development Corporation can be counted towards the M/WBE goal achievement for this contract.</i></b></p>

***\*\*Please follow the instructions below carefully.***

<b>AMOUNT TO BE PAID OUT OF THE PROCEEDS OF THIS REQUISITION</b>	<p>Indicate the amount <b><u>TO BE PAID</u></b> to each sub/supplier from the money you will receive from this requisition. If no payment will be made, enter \$0</p> <p><b><i>*This is not the amount that you “intend” to pay over the life of the contract.</i></b></p>
<b>TOTAL AMOUNT OF ALL PAYMENTS MADE PRIOR TO THIS REQUISITION</b>	<p>Indicate the amount that has <b><u>ACTUALLY</u></b> been paid to date.</p> <p><b>Note: DO NOT</b> include the amount to be paid out of the proceeds of this requisition.</p> <p><b><i>*M/WBE amounts will be verified by DASNY’s Office of Opportunity Programs through the receipt of copies of canceled checks. You may attach (please staple!) check copies to the report for expediency.</i></b></p>
<b>TOTAL VALUE OF ALL SUBCONTRACT/PO’s ISSUED</b>	<p>Indicate the total value to date of ALL subcontract agreements issued by your company to the subcontractors/suppliers for this contract. This should be inclusive of any change orders issued to the original contract.</p> <p>-or-</p> <p>Indicate the total amount of ALL purchase orders issued by your company to the subcontractors/suppliers for this contract.</p>

**COMPLIANCE CERTIFICATION\***

\_\_\_\_\_ hereby certifies that for the current payment period: (i) the information in this report regarding MWBE participation on the contract is true and accurate; (ii) the MWBE subcontractors and vendors listed in this report have performed a commercially useful function on the project and have not, other than as allowed in the approved Utilization Plan, subcontracted their assigned scope of work to a non-MWBE entity; and (iii) it is in compliance with the approved Utilization Plan for the contract.

\_\_\_\_\_  
Type Name of Principal or Officer

\_\_\_\_\_  
Type Title of Principal or Officer

\_\_\_\_\_  
Signature of Principal or Officer

\_\_\_\_\_  
Date

Subscribed and sworn to before me in the State of \_\_\_\_\_  
County of \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Public

ID No.: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

*\*False statements, information or data submitted on or with application for payment, may result in one or more of the following actions: Termination of Contract for cause; disapproval of future bids, contracts, or subcontracts; Withholding of final payments on the contract; and Civil and/or criminal prosecution.*

**DASNY REVIEW**

DASNY's review of this report does not relieve the Contractor of its obligation to provide a true and accurate report and strictly comply with its approved Utilization Plan and Article 20 of the Contract General Conditions

**DASNY Project Manager**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

The bidder shall submit this form at time of bid.

The bidder agrees that, except in any instance in which the bidder has obtained identical certifications from proposed Subcontractors for specific time periods, such bidder shall obtain identical certifications from proposed Subcontractors prior to the award of subcontracts exceeding Ten Thousand Dollars (\$10,000), and that such bidder shall retain such certifications in the files of such bidder.

**A. Non Segregated Facilities**

The bidder certifies that such bidder does not, nor shall not, maintain or provide for the employees of such bidder any segregated facilities at any establishments, and that the bidder does not, nor shall not, permit the employees of such bidder to perform the services of such employees at any location under the control of such bidder where segregated facilities are maintained. The bidder agrees that a breach of this certification is a violation of the nondiscrimination clauses of the Contract.

**B. Non-discrimination in Employment in Northern Ireland**

The bidder stipulates that it, and any individual or legal entity in which the bidder holds a ten percent (10%) or greater ownership interest, and any such entity that holds such an interest in the bidder, either:

1. has no business operations in Northern Ireland; or
2. shall take all lawful steps in good faith to conduct any business operations it has or in which it has such an interest in Northern Ireland in accordance with the MacBride Fair Employment Principles as set forth in Chapter 807 of the Laws of 1992 and shall permit any independent monitoring of its compliance with said Principles.

**C. Federal Equal Employment Opportunity Act**

The bidder attests to its compliance with the Federal Equal Employment Opportunity Act of 1972 (P.L. 92-261), as amended.

**D. Commitment to Opportunity Programs**

The bidder agrees to be bound in accordance with NYS Executive Law Article 15-A, and in conformance with Regulations promulgated by the Division of Minority and Women's Business Development of the NYS Department of Economic Development. A list of NYS certified M/WBEs may be obtained from the ESDC directory of certified businesses located at [www.nylovesmwbe.ny.gov](http://www.nylovesmwbe.ny.gov).

**E. Transfer of Offset Credits**

The bidder acknowledges notice that the Dormitory Authority may assign or otherwise transfer offset credits created by this contract to third parties located in New York State.

**F. Certification**

The bidder acknowledges that intentional submission of false or misleading information may constitute a felony under Penal Law Section 210.40 or a misdemeanor under Penal Law Section 210.35 or Section 210.45, and may also be punishable by a fine of up to \$10,000 or imprisonment of up to five years under 18 U.S.C. Section 1001; and states that all information provided to the Dormitory Authority is complete, true and accurate.

\_\_\_\_\_ (Officer's Signature) \_\_\_\_\_ (Date)

Firms Legal Name: \_\_\_\_\_

Print Officer's Name: \_\_\_\_\_

Title: \_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type. See Specific Instructions on page 3.</b>	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.					
	<b>2</b> Business name/disregarded entity name, if different from above					
	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.		<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					
	<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					
	<input type="checkbox"/> Other (see instructions) ▶ _____					Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
<b>5</b> Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)			
<b>6</b> City, state, and ZIP code						
<b>7</b> List account number(s) here (optional)						

## Part I Taxpayer Identification Number (TIN)

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

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

<b>Social security number</b>											
				-			-				
<b>or</b>											
<b>Employer identification number</b>											
				-							

## Part II Certification

Under penalties of perjury, I certify that:

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

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

<b>Sign Here</b>	<b>Signature of U.S. person ▶</b>	<b>Date ▶</b>
------------------	-----------------------------------	---------------

## General Instructions

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

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

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

**Note:** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

## What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note: ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or “doing business as” (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a “disregarded entity.” See Regulations section 301.7701-2(c)(2)(iii). Enter the owner’s name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner’s name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2, “Business name/disregarded entity name.” If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

### Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys’ fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947



The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

### Line 6

Enter your city, state, and ZIP code.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.SSA.gov](http://www.SSA.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/Businesses](http://www.irs.gov/Businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. Go to [www.irs.gov/Forms](http://www.irs.gov/Forms) to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to [www.irs.gov/OrderForms](http://www.irs.gov/OrderForms) to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.**

You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.**

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
6. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

\*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records From Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.**

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at [spam@uce.gov](mailto:spam@uce.gov) or report them at [www.ftc.gov/complaint](http://www.ftc.gov/complaint). You can contact the FTC at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see [www.IdentityTheft.gov](http://www.IdentityTheft.gov) and Pub. 5027.

Visit [www.irs.gov/IdentityTheft](http://www.irs.gov/IdentityTheft) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

KNOW ALL PERSONS BY THESE PRESENTS, that we:

\_\_\_\_\_ as Principal,  
(Legal Title of the Bidder)

and \_\_\_\_\_ as Surety,  
(Legal Title of the Surety)

are hereby held and firmly bound unto the Dormitory Authority - State of New York in the penal sum of:

**Five Thousand Dollars (\$5,000)**

Signed this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Whereas the Principal has submitted to the Dormitory Authority - State of New York a certain bid, made a part hereof, to enter into a Contract in writing for the:

\_\_\_\_\_  
(Title of Project)

NOW, THEREFORE the conditions of this obligation is such that::

A. This obligation shall be void:

1. If said bid shall be rejected or in the alternate.
2. If said bid shall be accepted and the Principal shall execute and deliver the Agreement in the form attached hereto (properly completed; in accordance with said bid) and shall furnish bonds for the faithful performance of said Contract by the Principal, and for the payment of persons performing labor or furnishing materials in connection therewith, and shall in all other respects perform the Contract created by the acceptance of said bid.

Otherwise the same shall remain in force and effect; it being 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.

B. The penal sum of this Bond is in addition to any other Bond furnished by the Contractor and in no way shall be impaired or affected by any other Bond.

C. The Surety, for value received, hereby stipulates and agrees that the obligations of said Surety and said Surety's Bond in no way shall be impaired or affected by any extension of time within which the Owner may accept such bid; and said Surety does hereby waive notice of any such extension.

IN WITNESS WHEREOF:

the parties hereto have executed this Bond the day and year first above written.

IN THE PRESENCE OF:

\_\_\_\_\_  
(Principal)

\_\_\_\_\_  
(Surety)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Phone Number & FAX Number)

\_\_\_\_\_  
(Phone Number & FAX Number)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Email Address)

ACKNOWLEDGEMENT OF CONTRACTOR EXECUTING BID BOND IF A CORPORATION

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On the \_\_\_ day of \_\_\_\_\_ in the year 20 \_\_\_, before me personally came \_\_\_\_\_, to me known, who, being by me duly sworn, did depose and say that he/she resides at:

\_\_\_\_\_ (street, city, state, zip code)

that he/she is the \_\_\_\_\_ of \_\_\_\_\_, the corporation described in and which executed the foregoing instrument; and that he/she signed his/her name thereto by authority of the Board of Directors of said corporation.

\_\_\_\_\_  
Notary Public

ACKNOWLEDGEMENT OF CONTRACTOR EXECUTING BID BOND IF A PARTNERSHIP, LIMITED LIABILITY COMPANY OR INDIVIDUAL

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On the \_\_\_ day of \_\_\_\_\_ in the year 20 \_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, personally known or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public

ACKNOWLEDGEMENT OF SURETY

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On the \_\_\_ day of \_\_\_\_\_ in the year 20 \_\_\_, before me personally came \_\_\_\_\_, to me known, who, being by me duly sworn, did depose and say that he/she resides at:

\_\_\_\_\_ (street, city, state, zip code)

that he/she is the \_\_\_\_\_ of \_\_\_\_\_, the corporation described in and which executed the foregoing instrument; and that he/she signed his/her name thereto by authority of the Board of Directors of said corporation.

\_\_\_\_\_  
Notary Public