EXHIBITS & APPENDICES

Albany Port District Commission 106 Smith Boulevard Albany NY 12202

ALL ENCLOSED FORMS MUST BE COMPLETED, SIGNED AND INCLUDED WITH THE BID PROPOSAL

Failure to Complete ALL forms and ALL Insurance Certificates may result in rejection of bid proposal.

		✓
EXHIBIT A	Bid Proposal Response Form	
EXHIBIT B	Bidder's Questionnaire	
EXHIBIT C	Corporate Partnership Or Individual Acknowledgement	
EXHIBIT D	APDC Permissible Contacts	
EXHIBIT E	Offerer Certification	
EXHIBIT F	Non-Collusive Bidding Certification	
EXHIBIT G	Disclosure Of Prior Non-Responsibility Determination	
EXHIBIT H	Iran Energy Sector Divestment Compliance	
EXHIBIT I	Certification Regarding Sexual Harassment	
EXHIBIT J	Encouraging Use Of NYS Businesses In Contract Performance	
EXHIBIT K	EO177 Certification Harassment and Discrimination	
EXHIBIT L	Workers Compensation Insurance Certification	
APPENDIX A	NYS Clauses For Government Contracts	
APPENDIX B	APDC Construction Contract Service Standards & Project General Conditions	
APPENDIX C (if applicable)	NYS MWBE/SDVOB Goal Reporting Procedures And Regulations	
APPENDIX D	Specifications And Additional Project Information	

PORT OF ALBANY	**APDC RFP/PROJECT #:**_____

Company Name:					
Company Address:					
Company's Federal ID Number or Social Security Number as applicable:				**Firm's NYS SFS Vendor Identification Number:**	
Company Contact:				**Phone/Email:**	
Is your Company? Please submit copy of certification if yes.	**MWBE** ☐	**SDVOB** ☐	**SB** ☐	**DBE** ☐	**NY Business** ☐
MWBE Goal % Expected to Achieve:	**SDVOB Goal % Expected to Achieve:**			**Is a Waiver/Partial Waiver Being Requested?**	
Reference #1:	**Name, Title Company**			**Contact #:**	
Reference #2:	**Name, Title Company**			**Contact #:**	
Reference #3:	**Name, Title Company**			**Contact #:**	

1. The Vendor hereby declares that it has carefully examined all Bidding and Contract Documents therein, including any Addendum(s), and has satisfied itself to all conditions, and understands that in signing this Proposal, it waives all right to plead any misunderstanding regarding the same.
2. The Vendor further understands and agrees that it is to perform and complete all work in accordance with the Contract Documents and to accept in full compensation in the amount and rates listed in this document with no further compensation.
3. BID CALCULATION: Please use the attached Contract Sum Analysis form to define your lump sum proposal.
4. The bidder agrees that if awarded the Contract, it will commence work upon receipt of the Notice to Proceed and that it will fully complete the work by the date stated or within the duration herein, as applicable.
5. The bidder acknowledges the receipt of the following addenda but agrees that it is bound by all addenda whether or not listed herein.
   Addendum # Date:
6. JUDGEMENTS/LEGAL FINDINGS: By submitting this bid for consideration, the vendor affirms that they currently have no judgements or other legal findings nor have any pending judgements or other legal findings against the company, its executives or any other person that will be employed in any fashion as a part of this contract, with any federal, state, or local government entities that in any way could impact or have the potential to impact their ability to legally complete any contract awarded them as a result of this bid. Failure to disclose any such judgments and or findings will result in the termination of any contracts and other penalties as deemed legal and appropriate by the APDC.
7. The bidder certifies that all information provided or to be provided to Albany Port District Commission in connection with this procurement is, as required by Section 139-k of the State Finance Law, complete, true and accurate.

(Legal name of person, partnership, joint venture, corporation, or LLC) (If corporation, affix corporate seal)

Company Authorized Representative:_____ **Title:**_____

SIGNATURE:_____ **Date:**_____

PORT OF ALBANY

Item #	Description	Unit	Price Per Unit
1	Complete Project Price (all 3 sites inclusive)		$
	UNIT PRICING		
2	Saw Cutting, removal & Repair using NYSDOT #3F (2") Binder (minimum of 25 square feet). Includes sealing of edges	Per Square Foot	$
3	Saw Cutting, removal & Repair using NYSDOT #6F (2") Asphalt (minimum of 25 square feet). Includes tack coating and sealing of edges.	Per Square Foot	$
4	NEW Asphalt Placement over appropriate and approved sub-base 2" using NYSDOT #3F)	Per Square Foot	$
5	NEW Asphalt Placement over appropriate and approved sub-base 2" (using NYSDOT #6F)	Per Square Foot	$
6	Crack filling, NYS approved sealant per linear foot.	Per Linear Foot	$
7	Price per square foot to prepare for, supply and install 6" sub-base of NYSDOT Item #4.	Per Square Foot	$
8	Saw cutting of asphalt, per ft using handheld or wheel driven cutting machine	Per Linear Foot	$
9	Appropriate Paint Color Line Striping of Parking Lot (green, yellow, white)as needed for parking spaces and any additional markings.	Per Square Foot	$
10	Estimated Completion Date		

All Vendors submitting proposals shall agree that their pricing will remain firm for 60 days from proposal submission and throughout the duration of the contract.

1. Are you a New York State resident business?	Yes	No
2. Total number of people employed by your firm?		
4. Is your company independently owned and operated?	Yes	No
5. Is your firm at least 51% owned and controlled by women, or 51% owned and controlled by minority group members, i.e., Black, Hispanic, Asian, Pacific Islander, American Indian, and Alaskan Native?	Yes	No
If yes>>	# of Minority Owned	# of Women Owned
If yes, have you been certified or registered?	Yes	No
If yes, List certificate or registration authority:		
6. Within the past five years has your firm, any affiliate, any predecessor company or entity, owner, director, officer, partner, or proprietor been the subject of:	**Circle any that apply.** If "Yes", describe using additional pages.	
a. An indictment, judgment, conviction, or a grant of immunity, including pending actions, for any business-related conduct constituting a crime under local, state, or federal law?	Yes	No
b. A federal, state, or local government suspension or debarment, rejection of any bid or disapproval of any bid or disapproval of any proposed subcontract, including pending actions, for lack of responsibility, denial, or revocation, of pre-qualification or a voluntary exclusion agreement?	Yes	No
c. Any federal or state determination of a violation of any public works law or regulation, or labor law or regulation, or any OSHA violation deemed "serious or willful"?	Yes	No
d. A consent order with NYS Department of Environmental Conservation, or a federal or state enforcement determination involving a violation of federal or state environmental laws?	Yes	No
7.Is your firm owned by a service-disabled veteran?	Yes	No
If yes, have you been certified or registered?	Yes	No
If yes, List certificate or registration authority:		
Signature____ Title____ Print Name____	Date:________________ Federal ID#__________________	

PORT OF ALBANY

CORPORATE PARTNERSHIP OR INDIVIDUAL

CORPORATE, PARTNERSHIP OR INDIVIDUAL

ACKNOWLEDGMENT STATE OF)

) SS;

COUNTY OF)

On the _____day of _____in the year 20 ____, before me personally appeared: _____, known to me to be the person who executed the foregoing instrument, who, being duly sworn by me did depose and say that _____he resides at _____, City/Town of _____, County of _____, State of _____; and further that:

(Check One)

☐ (If an individual): ___he executed the foregoing instrument in His/her name and on his/her behalf.

☐ (If a corporation): ____he is the _____of _____, the corporation described in said instrument; that, by authority of the Board of Directors of said corporation, _____he is authorized to execute the foregoing instrument on behalf of the corporation for purpose set forth therein; and that, pursuant to that authority, _he executed the foregoing instrument in the name of and on behalf of said corporation as the act and deed of said corporation.

☐ (If a partnership): ___he is the _____of _____, the corporation described in said instrument; that, by the terms of said partnership, ____he is authorized to execute the foregoing instrument on behalf of the partnership for the purpose set forth therein; and that, pursuant to that authority, _____he executed the foregoing instrument in the name and on behalf of said partnership as the act and deed of said partnership.

Notary Public

PERMISSIBLE CONTACTS AFFIRMATION OF UNDERSTANDING

New York State Finance Law §139-j(6)(b) provides that:

Every Governmental Entity shall seek written affirmations from all Offerers as to the Offerer's understanding of and agreement to comply with the Governmental Entity's procedures relating to permissible contacts during a Governmental Procurement pursuant to subdivision three of this section

Bidder/Vendor affirms that it understands and agrees to comply with the procedures of the APDC concerning permissible contacts as required by State Finance Law §139-j(3) and §139-j(6)(b).
By (Signature) Date
Name (Print)
Title
Bidder/Vendor Name
Bidder/Vendor Address

OFFERER'S CERTIFICATION OF COMPLIANCE WITH STATE FINANCE LAW

New York State Finance Law §139-k(5) requires that every Procurement Contract award subject to the provisions of State Finance Law §§139-k or 139-j shall contain a certification by the Offerer that all information provided to the procuring Governmental Entity with respect to State Finance Law §139-k is complete, true and accurate.

Bidder/Vendor affirms that it understands and agrees to comply with the procedures of the APDC concerning permissible contacts as required by State Finance Law §139-k
By (Signature) Date
Name (Print)
Title
Bidder/Vendor Name
Bidder/Vendor Address

NON-COLLUSIVE BIDDING CERTIFICATION

(Reference: Public Authorities Law Section 2878)

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in 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 and terms in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;

2. Unless otherwise required by law, the price and term which have been quoted in this bid have not been knowing 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 submit a bid for the purpose of restricting competition.

Signature: _____ Date: _____

Title:_____

Name of Bidder: _____

Adress of Bidder: _____

DISCLOSURE OF PRIOR NON-RESPONSIBILITY DETERMINATIONS

NAME OF INDIVIDUAL OR ENTITY SEEKING TO ENTER INTO THE PROCUREMENT CONTRACT:
ADDRESS:
CONTRACT PROCUREMENT NUMBER:

1. Has any Governmental Entity made a finding of non-responsibility pursuant to State Finance Law Section 163-(9)(f) regarding the individual or entity seeking to enter into the Procurement Contract in the previous four years?	☐ Yes	☐ No
If you answered Yes to question number 1, please answer questions 2 and 3. If not, skip to question 4.		
2. Was the basis for the finding of non-responsibility due to a violation of State Finance Law §139-j?	☐ Yes	☐ No
3. Was the basis for the finding of non-responsibility due to the intentional provision of false or incomplete information to a Governmental Entity?	☐ Yes	☐ No
4. Has any Governmental Entity or other Government agency terminated or withheld a Procurement Contract with the above-named individual or entity due to the intentional provision of false or incomplete information?	☐ Yes	☐ No
5. If you answered yes to any of the questions above, please provide the following details regarding the finding of non-responsibility, termination, or withholding of a contract.		

Government Entity:

Date of Finding of Non-Responsibility, Termination or Withholding of Contract:

Basis of Finding of Non-Responsibility, Termination or Withholding of Contract (Add additional pages if/as necessary):

Offerer affirms that he/she understands and agrees to comply with the New York State procedures relative to permissible contacts as required by State Finance Law §139-j.

Offerer certifies that all information provided to the Governmental Entity with respect to State Finance Law §139-k is complete, true and accurate.

By: _____ Date: _____

(Signature)

PRINT NAME:

PRINT TITLE:

IRAN ENERGY SECTOR DIVESTMENT COMPLIANCE

Project Number: _____

Printed Name of Entity Seeking to Enter into the Contract:_____

Address:_____

Printed Name and Title of Person Executing _____

Pursuant to New York State Finance Law §165-a, Iran Divestment Act of 2012 (Act), the Office of General Services is required to post on its web site a list of persons who have been determined to engage in investment activities in Iran ("prohibited entities list"), as defined by the Act. New York State Public Authorities Law § 2879-c, with certain exceptions, prohibits Albany Port District Commission from entering into or awarding a Contract with persons identified on the prohibited entities list.

CERTIFICATION:

By submission of this bid or proposal, each person (as defined in paragraph (e) of subdivision one of section one hundred sixty five-a of the state finance law) and each person signing on behalf of any other party certifies, and in the case of a joint bid or proposal or partnership each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each person is not on the list created pursuant to paragraph (b) of subdivision 3 of section 165-a of the State finance law.

STATE OF)

)ss.:

COUNTY OF)

The undersigned, being duly sworn, says (a) I am duly authorized to execute this Certification and (b) I hereby certify, under penalty of perjury, that the forgoing Certification is in all respects true and accurate.

Signature of Person Executing Certification:

Subscribed and sworn to before me this day of ,20 .

Notary Public

Submit form with original signatures

Certification Regarding Sexual Harassment Prevention Policies Pursuant to State Finance Law §139-l

By submission of this proposal, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint proposal each party thereto certifies as to its own organization, under penalty of perjury, that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law.

I,_____, hereby affirm, under penalty of perjury, that

Printed Name of Person Executing Certification

I am _____of the above-named bidder, that I am

Printed Title of Person Executing Certification

authorized to make this certification on behalf of such bidder, and I further certify that this certification is true, accurate and complete to the best of my knowledge and belief.

The undersigned, being duly sworn, says (a) I am duly authorized to execute this Certification and (b) I hereby certify, under penalty of perjury, that the forgoing Certification is in all respects true and accurate.

_____

signature

STATE OF)
) ss.:
COUNTY OF)

On this _____day of _____, 20____, before me personally came

_____, to me known and known to me to be the person(s) described in and who executed the foregoing instrument and acknowledged that he/she executed the same.

_____

Notary Public

Submit form with original signatures

ENCOURAGING USE OF NEW YORK STATE BUSINESSES IN CONTRACT PERFORMANCE

New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles.

Bidders/proposers need to be aware that all authorized users of this contract will be strongly encouraged, to the maximum extent practical and consistent with legal requirements, to use responsible and responsive New York State businesses in purchasing commodities that are of equal quality and functionality and in utilizing services and technology. Furthermore, bidders/proposers are reminded that they must continue to utilize small, minority and women-owned businesses, consistent with current State law.

Utilizing New York State businesses in State contracts will help create more private sector jobs, rebuild New York's infrastructure, and maximize economic activity to the mutual benefit of the vendor and its New York State business partners. New York State businesses will promote the vendor's optimal performance under the contract, thereby fully benefiting the public sector programs that are supported by associated procurements.

Public procurements can drive and improve the State's economic engine through promotion of the use of New York businesses by its vendors. The State therefore expects bidders/proposers to provide maximum assistance to New York businesses in their use of the contract. The potential participation by all kinds of New York businesses will deliver great value to the State and its taxpayers.

Bidders/proposers can demonstrate their commitment to the use of New York State businesses by responding to the question below:

Will New York State Businesses be used in the performance of this contract? ☐ Yes ☐ No

Project Number:_____

If yes, identify New York State Business(es) that will be used; (list identifying information below).

Attach additional identifying information as required.

By: _____Date: _____

Signature: _____

Print Name and Title:_____

Vendor Name: _____

Vendor Address: _____

EO 177 Certification

The New York State Human Rights Law, Article 15 of the Executive Law, prohibits discrimination and harassment based on age, race, creed, color, national origin, sex, pregnancy or pregnancy-related conditions, sexual orientation, gender identity, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military status or predisposing genetic characteristics.

The Human Rights Law may also require reasonable accommodation for persons with disabilities and pregnancy-related conditions. A reasonable accommodation is an adjustment to a job or work environment that enables a person with a disability to perform the essential functions of a job in a reasonable manner. The Human Rights Law may also require reasonable accommodation in employment on the basis of Sabbath observance or religious practices.

Generally, the Human Rights Law applies to:

- all employers of four or more people, employment agencies, labor organizations and apprenticeship training programs in all instances of discrimination or harassment;
- employers with fewer than four employees in all cases involving sexual harassment; and,
- any employer of domestic workers in cases involving sexual harassment or harassment based on gender, race, religion or national origin.

In accordance with Executive Order No. 177, the Bidder hereby certifies that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

Executive Order No. 177 and this certification do not affect institutional policies or practices that are protected by existing law, including but not limited to the First Amendment of the United States Constitution, Article 1, Section 3 of the New York State Constitution, and Section 296(11) of the New York State Human Rights Law.

Vendor Name: _____

Signature: _____ Date: _____

Print Name and Title:_____

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

The Workers' Compensation Law requires that a New York State or municipal agency, department, board, commission, or office issues any permit or license, the applicant must submit to such agency or department, proof that he or she has obtained the required workers' compensation and disability benefits coverage, or that he or she is not required to provide coverage under these Laws. (See attached copies of Section 57 of the Workers' Compensation Law and Section 220, subd. 8 of the Disability Benefits Law.) These requirements also apply to the renewal of an application for a permit or license, and any and all work covered by the permit or license, whether or not a governmental agency is involved.

In addition, effective April 7, 1993, Chapter 213 amended the above Laws to require that before a New York State or municipal agency, department, board, commission, or office enters into any contract, the contractor must also submit proof that he or she has obtained the required workers' compensation and disability benefits coverage, or that he or she is not required to provide coverage. These requirements also apply to the renewal of such contracts.

This is to certify that

_____

(Name of individual, partnership, or corporation)

is insured with

_____

(Name of insurance provider)

under Policy No.

_____

covering the entire obligation of this employer for workers' compensation under the New York Workers' Compensation Law with respect to the locations named in the foregoing application.

The policy term covers the period from

_____

To_____. If said policy is changed or cancelled during its term in such manner as to affect this Certificate, thirty (30) days written notice of such change or cancellation shall be provided to the Owner, and ten (10) days written notice in the event of cancellation for non-payment of premiums.

Signature:_____

_____

(Print, Name, Title, Date)

Telephone No.:_____

THE WORKERS' COMPENSATION BOARD EMPLOYS AND SERVES PEOPLE WITH DISABILITIES WITHOUT DISCRIMINATION

C-105.2(10-94)