

Boston Public Health Commission Division of Property Management Mattapan Campus 205 River Street Mattapan MA 02126

HVAC Emergency Repairs Pre-Selection Contract February 1, 2023 – January 31, 2025

Project # PM-2B-2325

II. RFP Timeline

December 11, 2022	Legal Notice Publication in the Boston Globe
December 12, 2022	RFP available online at www.bphc.org/RFP by 10:00 AM EST. RFP will also be disseminated via e-mail to relevant networks.
December 30, 2022	Questions due in writing by 5:00 PM EST to sbarry@bphc.org
January 2, 2023	Responses to questions available for viewing on www.bphc.org/RFP
January 5, 2023	Proposal due via mail/courier January 5, 2023, by 2:00 PM EST: Subject – Emergency Repairs Plumbing, HVAC, and Electric Send to:
	BPHC Property Management
	205 River St.
	Mattapan MA 02126
	Attn: Steven Barry
	NO EXCEPTIONS TO THIS DEADLINE
January 10, 2023	Eligible candidates will be notified

BOSTON PUBLIC HEALTH COMMISSION PROPERTY MANAGEMENT DIVISION

ADVERTISEMENT

EMERGENCY REPAIRS PRESELECTION CONTRACT February 1, 2023 – January 31, 2025

INVITATION TO INTERESTED, RESPONSIBLE AND COMPETENT PERSONS OR FIRMS ENGAGED IN HVAC WORK OR BUSINESS TO APPLY AND QUALIFY FOR CONTRACTS WITH THE BOSTON PUBLIC HEALTH COMMISSION

The Boston Public Health Commission, acting through its Property Management Division invites competent persons, firms or corporations to apply for pre-qualification on a bidder's list and thereafter enter into a contract or contracts as may be requested from time to time by the Official for the performance of HVAC general work, repairs, and/or preventive maintenance, and to perform such work when and as it may be required by the Official.

Copies of the application and related may be obtained via e-mail at: sbarry@bphc.org and ktejada@bphc.org on December 13th, 2022.

APPLICATIONS MUST BE SUBMITTED DIRECTLY TO: PROPERTY MANAGEMENT DIVISION OF THE BOSTON PUBLIC HEALTH COMMISSION – 205 River Street, Mattapan Campus. Applications must be in a sealed envelope. The front of the envelope must be labeled:

"HVAC PRESELECTION CONTRACTS / EMERGENCY REPAIRS – February 1, 2023 – January 31, 2025.

Applications to pre-qualify for contracts for such work will be accepted until 2:00PM on January 5th, 2023. <u>LATE PROPOSALS WILL NOT BE ACCEPTED.</u>

The attention of all applicants is directed to the provision of the contract documents, and particularly to the requirements for insurance and security for performance as may be applicable.

The Boston Public Health Commission and the Awarding Authority reserve the right to contract only in those cases and in accordance with those applications as the Awarding Authority determines to be in the best interest of the Boston Public Health Commission. Except in case of emergency, contracts for regular upgrades, repairs / works will be awarded to the lowest responsive and responsible bidder after a solicitation of bids from qualified applicants.

INSTRUCTIONS TO APPLICANTS

A fully completed Contract Proposal must be submitted directly to the Property Management Division Office, 205 River Street, Mattapan; no later than 2:00PM on January 5, 2023; with the following items below: Applications must be in a sealed envelope. The front of the envelope must be labeled "HVAC - Emergency Repairs Pre-Selection – February 1, 2023 – January 31, 2025". LATE PROPOSALS WILL NOT BE ACCEPTED.

- (1) If your company is considered a corporation, a Certificate of Authority is required. It must <u>name</u> the person who is your company's authorized signatory and must be signed and sealed by the clerk or secretary of your corporation. If no seal is obtained, the Certificate of Authority must be signed by two (2) company officials. This document must be original (no photocopies).
- (2) If your company is classified as incorporation, a copy of the Articles of Organization must be provided.
- (3) An ORIGINAL, CURRENT INSURANCE CERTIFICATE (S) is required.
- (4) The vendor <u>must</u> fill out all the forms enclosed.
- (5) Proof of OSHA training
- (6) 5% Bid Bond
- (7) All services shall be in compliance with current state and city ordinances

Please be sure to review all sheets and completely fill out all forms with original signatures. Return the entire application. Do not discard any part of the package. THE PROPERTY MANAGEMENT DEPARTMENT RESERVES THE RIGHT TO REJECT ANY PROPOSALS SUBMITTED WITH INCOMPLETE DOCUMENTS. Any questions regarding this package may be directed to Steven Barry at sbarry@bphc.org and Keren Tejada at ktejada@bphc.org.

BOSTON PUBLIC HEALTH COMMISSION

Notice to applicants

1. INVITATION

The Boston Public Health Commission, acting by its Property Management Department, invites applications for a pre-selection of qualified electricians, HVAC & plumbers to provide services and to perform the work under emergency situations. *EMERGENCY WORK IS DEFINED AS ANY WORK REQUIRED TO BE PERFORMED WITHIN ONE HOUR OF NOTICE (AS DETERMINED BY THE BOSTON PUBLIC HEALTH COMMISSION), AND AFTER REGULAR BUSINESS HOURS AND ON HOLIDAYS – EMERGENCY WORK IS ANY WORK REQUIRED TO PREVENT OR MINIMAZE DAMAGE TO THE FACILITIES, BUILDING USERS AND RESTORE OR MAINTAIN CONTUNUITY OF GENERAL PUBLIC SAFETY.*

2. SUBMISSION OF APPLICATIONS

Applications shall be filed at the place and time designated in the Advertisement. Applications shall bear the original signature of the applicant and be submitted in a sealed envelope, plainly marked with a description of the goods or services to be provided subsequent to telephone or written price quotations, which may from time to time be solicited by the Official.

3. SPECIFICATIONS

Applicants shall fully inform themselves in regard to all conditions pertaining to carrying out the contract as executed. Such contract shall be signed as part of their application but shall only be binding upon the written authorization. Any estimates, plans or other information relating to the goods, services, labor or materials or work required by the contract documents are to be considered solely for the purpose of qualifying for a contract that may be entered into by the Commission and comparing the several applications. The BPHC, nor its officers, agents nor employees shall be responsible for the accuracy of, or bound by, such estimates, plans or information.

4. TAXES

The Boston Public Health Commission is exempt from federal excise taxes (Federal Exemption No. E-043-316-655). Exemption Certificates will be provided, if requested, following award to the successful applicant.

5. BASIS FOR ACCEPTANCE/CONFLICT OF INTEREST

Any application will be accepted only on the basis that the applicant, by filing its application, represents that it is made in good faith without fraud, collusion, or connection of any kind with any other applicant for the same work; that the applicant is competing solely in its own behalf without connection with, or obligation to, any undisclosed person, firm or corporation; that no other person, firm or corporation has any interest in the contract; that no other officer, agent or employee of the Boston Public Health Commission is financially interested in the contract; that the applicant is fully informed in regard to all provisions of the contract documents, including, without limitation, the specifications and

drawings, if any, the time of performance, and the provisions for liquidated damages, if any.

6. QUESTIONS

All questions as to the interpretation of the correct documents shall be submitted in writing to the Official. The Official will send written answers to such relevant and material questions to everyone on record as having taken a set of the application and contract documents. No questions will be answered unless received by the Official at least seventy-two hours prior to the expiration of the time set for filing applications.

7. NON-EMERGENCY CONTRACT AWARD

Qualified contractors, resulting from this process, are pre-selected to conduct emergency work. This contract is not exclusive for regular maintenance or repairs, preventive maintenance and facilities upgrades. Contractors are required and encouraged to participate in the competitive public bidding process in place to procure additional services.

8. HARMONIOUS LABOR RELATIONS

The submission of an application shall constitute the certification of the applicant that it is able to and will furnish labor that can work in harmony with all other elements of labor employed on the work.

9. QUALIFICATION OF APPLICANTS

It is the purpose of the Official not to award a contract to any applicant who does not furnish evidence, when requested, satisfactory to the Official that he has ability and experience in the pertinent class of work.

BOSTON PUBLIC HEALTH COMMISSION

<u>Insurance requirements</u>

- 1. The Contractor shall take out and maintain during the life of the contract such public liability, property damage, and Workmen's Compensation as shall protect him/her and any subcontractor or person performing work covered by this contract from claims for personal injury, including wrongful death, as well as from claims for property damage, which may arise from operations under this contract, whether such operations be by him/herself or by any sub-contractor or by anyone directly or indirectly employed by either of them at and/or away from the Contractor's place of business and the amounts of insurance shall be as follows with the exception of Purchase Orders for furniture and/or equipment.
 - (A) Public Liability Insurance in an amount not less than ONE MILLION (\$1,000,000.00) DOLLARS for injuries, including wrongful death, to any person and subject to the same limit for each person in an amount not less than ONE MILLION (\$1,000,000.00) DOLLARS, on account of one (1) accident, and,
 - (B) Property Damage Insurance in an amount of no less than ONE MILLION (\$1,000,000.00) DOLLARS for damages on account of anyone (1) accident and in an amount not less than ONE MILLION (\$1,000,000.00) DOLLARS, for damages on account of all accidents.
 - (C) The Contractor shall, before commencing performance of the work, provide by insurance for the payment of compensation and the furnishing of other benefits under Chapter 152 of the General Laws (The Workman's Compensation Law so-called) to all persons to be employed under this contract and shall continue such insurance in full force and effect during the term of the contract.

NOTE: Do not submit a Certificate of Insurance with only partial coverage. Full coverage of the above three categories is required by time the contractual documents are required. Late or partial coverage will disqualify your application. An original current Certificate of Insurance with an original signature is required. NO COPIES.

Boston Public Health Commission

Contract general conditions

- 1. During the term of this contract, the Contractor shall, upon the written request of the Official, provide a written offer (quotation or estimate) of the cost of the goods or services to be supplied or the work to be done on forms authorized or provided by the Official. If the Official accepts such offer, The Contractor shall do the work in question in accordance with the specifications provided.
- 2. The Contractor shall furnish and supply all labor, parts and materials and shall do everything necessary to complete the work to the satisfaction of the Official and within the time set forth in the terms of the accepted offer.
- 3. The form written to the Official shall contain, at a minimum, the following information:

Date
Description of work to be performed or goods to be supplied
Total labor time an hours and cost per man-hour
Date of completion of the work
Total cost of the work

- 4. The Boston Public Health Commission shall not be required to pay in excess of an accepted offer unless the Official first approves both the additional work and the cost in writing. All such requests for additional compensation shall be submitted to the Official in the form described above. Additional payments will be approved only on the basis of a mutually unforeseen defect or other condition not apparent to the official and contractor at the time of the submission of a written offer.
- 5. This agreement does not bind the Contractor to submit bids or quotations, nor does it bind the Boston Public Health Commission to accept, in whole or in part, any bid or quotation submitted by the Contractor. It is agreed and understood that in each instance in which bids or quotations are submitted by more than one Contractor, the Official shall accept the written offer of the Contractor submitting the lowest most responsive bidder, who is eligible and capable to do the work or, in emergency situations, the offer specifying the earliest date of completion of the work.
- 6. It is understood that any contract for goods or services entered into by the Boston Public Health Commission pursuant to these contract provisions is intended to cover the procurement of goods or services estimated to cost less than \$25,000.
- 7. The contractor shall submit a final invoice for finished work within 5 days of completion.

SCOPE shall include but not limited to the following:

Furnish all labor, materials and equipment necessary to perform various alternations, repairs and other related work in accordance with Standard Specifications on file at the Department or as specified on work orders in the category listed as follows:

HVAC SPECIFICATIONS

Please note: Contractor must hold valid license to be listed in this category,

CONTRACTORS MUST FURNISH ALL LABOR, MATERIALS AND EQUIPMENT NECESSARY TO PERFORM HEATING AND VENTILATION, AIR CONDITIONING, GAS FITTING REPAIRS AND OTHER RELATED WORK IN ACCORDANCE WITH STANDARD SPECIFICATIONS ON FILE AT THE DEPARTMENT OR AS SPECIFIED ON INVITED BIDS OR WORK ORDERS LISTED BELOW:

REPAIRING OR REPLACEMENT OF ALL TYPES OF BOILERS AND ALL ASSOCIATED HEATING EOUIPMENT.

SERVICE AND REPAIR ALL TYPES OF AIR CONDITIONERS AND ALL ASSOCIATED EQUIPMENT.

REPAIR, REMOVAL AND REPLACEMENT OF ALL TYPES OF PUMPS SUCH AS SUMP PUMPS, CIRCULATING PUMPS, BOOSTER PUMPS, WATER EJECTOR PUMPS AND SPECIAL WASTE PUMP.

REPAIR AND REPLACEMENT OF THE PIPING SYSTEM, RELATED VALVES AND SAFETY ITEMS FOR SPRINKLER AND STANDPIPE HOSE SYSTEMS. (SHALL INCLUDE HOSES AND DRY VALVES AND PUMPS)

GAS WORK SHALL INCLUDE THE REPAIR OR REPLACEMENT OF NAY PART OF THE ENTIRE BUILDING GAS FIT FROM METER TO AND INCLUDING ALL FIXTURES AND APPLIANCES. GAS HEATERS OF ALL TYPES, MULTI-COIL INSTANTANEOUS, STORAGE BOOSTER.

ALL GAS WORK PERFORMED UNDER THE CONTRACTOR SHALL BE DONE BY LICENSED JOURNEYMEN, GASFITTER OR PLUMBERS UNDER THE DIRECTION AND SUPERVISION OF A MASTER PLUMBER OR GASFITTER, LICENSED BY THE MASSACHUSETTS STATE GAS REGULATORY BOARD, CHAPTER 737 OR THE MASSACHUSETTS STATE BOARD OF PLUMBER EXAMINERS UNDER CHAPTER 142.

IN ADDITION, CONTRACTORS WILL BE CALLED UPON TO MAKE ANY AND ALL OTHER HEATING, VENTILATING AND AIR CONDITIONING REPAIRS NOT SPECIFICALLY MENTIONED.

EMERGENCY REPAIRS PRESELECTION CONTRACT

CONTRACTOR SELECTION PROCEDURE

Contractors who have applied and are approved/selected will be placed on alphabetical lists.

For Emergency Work, contractors will be notified on a rotating basis, subject to responsiveness.

Campuses will have their own respective lists.

For routine work, all contractors will be invited to bid.

The Boston Public Health Commission will have six active lists for each category:

- Northampton Square 785 Albany Street; South End Fitness Center; Three level Parking Garage and, 721-727 Mass Ave
- Long Island Campus access is via maritime transportation provided by BPHC.
- Mattapan Campus
- Albany St. Campus 774 Albany Street (Finland Bldg.) and 794 Mass Ave (Woods Mullen Female Shelter)
- 112 Southampton Street Entrance via Atkinson St. (Men Shelter) and, Engagement Center at 26 Atkinson St
- EMS various satellite locations throughout Boston.

EMERGENCY REPAIRS PRESELECTION CONTRACT

CONTRACTOR TERMINATION PROCEDURE

- 1) As per General Conditions, contractors shall 1) do the work in question in accordance with the specific requirements or specifications provided; 2) furnish and supply all labor, parts and materials; and 3) do everything necessary to complete the work to the satisfaction of the Official and complete the work within the time set forth in the terms of the accepted offer.
- 2) Contractors may be terminated from further eligibility to furnish services for the following reasons, and under the following procedures:

Reasons for Termination:

A Contractor will be terminated from further eligibility to furnish services under the contact if:

- a) Contractor does not perform services or.
- b) Contractor provides services which are not satisfactory; see
 [Boston Public Health Commission Standard Contract General Conditions Article 8, Section 8.1]
- c) Contractor engages in unprofessional behavior, illegal activity, or violation of any policy or procedure as determined by the awarding Authority. (e.g., lapse of insurance, failure to pay police details, illegal dumping, operating without permits or licenses, etc.)
- d) Contractor fails to show up for three or more consecutive calls for Emergency Work
- e) <u>Contractor fails to respond to request for EMERGENCY WORK within time</u> <u>specified (answers call but fails to show at scene within time specified)</u>

A) General Procedure for termination:

- i) Upon first occurrence of one of reasons a, b, or c, the Project Manager will complete a Contractor Non-Compliance Form. The Contractor will receive a Notice of Termination of Eligibility to Provide Services by certified mail. The Contractor will no longer be considered for work in the applicable category(ies).
- ii) Within 30 days of receipt of Notice of Termination, the Contractor may appeal, in writing, for reinstatement of eligibility to the Director of Property Management.
- iii) The Director shall uphold the termination, or restore eligibility to the Contractor with additional requirements, where deemed necessary.

B) Failure to Respond or show to Emergencies

i) Upon failure to show up for three consecutive bid viewings, a failure to accept three calls for Requests for Emergency Work, any combination of the above, or upon acceptance of a call for Request for Emergency Work and a failure to show at scene

- within time specified, the Project Manager will complete a Contractor Non-Compliance Form. The Contractor will no longer be considered for work in the applicable category(ies). The Contractor will receive a Notice of Termination of Eligibility to Provide Services by certified mail.
- ii) Within 30 days of receipt of Notice of Termination, the Contractor may appeal, in writing, for reinstatement of eligibility to the Director of Property Management.
- iii) The Director shall uphold the termination, or restore eligibility to the Contractor with additional requirements, where deemed necessary.

EMERGENCY REPAIRS PRE-SELECTION CONTRACT BOSTON PUBLIC HEALTH COMMISSION

PRICING FORM

VEN	DOR NAME:		
Add	RESS:		
	Ем	AIL	
	Рн	Fax	
	TA	X ID#	
A.	LICENSE HOLD	ER	
			Date
B.	LICENSE HOLD	ER	
	Comm. Of Mass	License #	Date
C.	LICENSE HOLD	ER	
		License #	
A.	February 1, 2023	– January 31, 2024	
	1 ST SHIFT (Mon-	SAT) 8:00 AM – 5:00 PM \$	/ Hour
	2 ND SHIFT (Mon-	- SAT) 5:00 PM – 1:00 AM \$	/ Hour
	3 RD SHIFT (MON-	SAT) 1:00 AM - 8:00 AM \$	/ Hour
	SUNDAY \$_	/ Hour	
	HOLIDAY \$_	/ Hour	

EMERGENCY REPAIRS PRE-SELECTION CONTRACT BOSTON PUBLIC HEALTH COMMISSION PRICING FORM

•	February 1	, 2024 – Janua	ary 31, 2025	
	1 ST SHIFT (Mon– Sat) 8:0	00 AM – 5:00 PM \$	/ Hour
	2 ND SHIFT	(MON– SAT) 5:	00 PM – 1:00 AM \$	/Hour
	3 RD SHIFT ((MON–SAT) 1:	00 AM - 8:00 AM \$	/Hour
	SUNDAY	\$	/Hour	
	HOLIDAY	\$	/ Hour	

BOSTON PUBLIC HEALTH COMMISSION VENDOR PROFILE

EMERGENCY REPAIRS PRESELECTION CONTRACT

Please fill out and return this form with your bid submission, proposal, submission, CM/10 form or Purchase Contract. (If returned with your bid proposal do not submit a duplicate with your CM/10 or Purchasing Contract.) The Boston Public Health Commission is using this information to develop a master vendor list. Submission of this form does not constitute approval of your firm as a BPHC contractor.

IDENTIFIC	CATION:				
CEO Name	:	Co	ontact Person: _		
Business Na	ame:		FIN or S	SN:	
Primary He	adquarters Address	::			
Number	Street	City	State	Zip	Phone
Local Branc	ch Address: (if diffe	erent)			
Number	Street	City	State	Zip	Phone
1. Type	PROFILE – Pleas e of Business: n Profession ing Retail	onal Mai	ntenance Service	ee Serv	ice
OWNERSH	r business establish HP: (Check all app at least 51% owne	licable boxes)		-	d
Hand Whit Ame	nan/Women licapped Persons le / Not Hispanic O rican Indian/Alask n or Pacific Islande k / Not Hispanic O anic	an er	Othe	r (Please Speci	fy)

If you are describing yourself as a minority or women owned business, please check one of the following:
1) Certified by the City of Boston as an M/WBE
2) Certified by SOMBWA as a M/WBE
3) Certified by another organization which4) Not Certified
If your business is not certified by the City of Boston or SOMBWA and you would like
more information, please call the Minority/Women Business Enterprise Office 635-4084.
ASSURANCE OF EQUAL EMPLOYMENT OPPORTUNITY
Staff Employed by Contractor (Please Indicate Number):
Black White Hispanic Asian American Indian Other
Staff Servicing this Contract:
Black White Hispanic Asian American Indian Other
Responsibility for Equal Opportunity:
Name: Title:
Date:
Signature

Contractor is an equal opportunity employer and does not discriminate on the basis of race, color, sex, religion, national origin, sexual orientation, age or handicap.

THIS FORM MUST BE COMPLETED

EMERGENCY WORK RESPONSIVENESS

Work, which in the opinion of the Property Management Department, is of an emergency nature requires that the contractor selected respond within a reasonable time. Contractors receiving Work Orders to perform emergency services should be prepared to respond at any hour to any building in the inventory. Requirements for response times will be determined on a case-by-case basis by the Property Management Department, and the time will be noted whenever possible. When times are not explicitly mentioned, contractors should assume that they must respond within one hour of the call.

The following questions must be answers if any material, equipment, or parts are an integral part of the services to be performed:

Do you have a material storage facility within five (5) miles of the City of Boston?

1.

	NO	YES
2.	Do you have available nemergency service?	aterial, trucks, equipment or parts stored for 24-hour
	NO	YES
3.	Does your company reg	larly employ Comm. of Mass. Certified apprentices?
	NO	YES
4.	Does your company hav	e voice mail / answering service?
	NO	YES
Corno	rate Official Signature	Title Date

BOSTON PUBLIC HEALTH COMMISSION

Application

The undersigned hereby makes applications to furnish all goods and services and all labor

To the Official, acting in the name of and on behalf of the Boston Public Health Commission:

and materials to perform all work required for: **Boston Public Health Commission** in accordance with the terms of the accompanying specifications and other contract documents, and with special reference to the Notice to Applicants and the Contract General Conditions, the terms of which are incorporated herein and made a part thereof, and a copy of which has been provided by the Official, for prices to be established for purchases or tasks, as may be required by the Official from time to time and documented by the Boston Public Health Commission. The names and addresses of all persons interested in this application as principals other В. than the undersigned are: The applicant is a/an: (Individual-Partnership-Corporation-Joint Venture-Trust) If applicant is a Partnership, state name and residential address of all general and limited 1. partners (or attach listing): 2. If applicant is a corporation, state the following: Corporation is incorporated in the State of President is _____ Place of Business is ______(Street)

- 0		(City, State and Zip Code)	
	plicant is a <u>Joint Venture</u> , st or company that is party to	ate the names and business ad the joint venture:	dresses of each person,
		J	
	A Copy of the joint venture a	agreement is on file at	
	And will be delivered to	the Official on request.	
f ap	plicant is a <u>Trust</u> , state the n	ame and residential address of	f all Trustees:
	The Trust documents are	on file at	
Refe	rence(s):		
List	three (3) or more contracts of	on which you served as vendor	c/contractor within the past
		character as required for the	
WU	(2) Jeans for work of similar	1	assive named contract.
WU	Work of	Business or	Amount of
.vv O		_	
, vv U	Work of	Business or	Amount of
, vv O	Work of	Business or	Amount of
,w0	Work of	Business or	Amount of
wo	Work of	Business or	Amount of
	Work of	Business or	Amount of
	Work of Contract: Bank Reference(s)	Business or Govt. Entity:	Amount of
	Work of Contract:	Business or	Amount of
	Work of Contract: Bank Reference(s)	Business or Govt. Entity:	Amount of
2.	Work of Contract: Bank Reference(s)	Business or Govt. Entity:	Amount of
2.	Work of Contract: Bank Reference(s) Name of Bank:	Business or Govt. Entity: Telephone No.:	Amount of Contract:
2.	Work of Contract: Bank Reference(s) Name of Bank: business is conducted under the when, and place where,	Business or Govt. Entity:	Amount of Contract:

* If individual, use Social Security Nun	lber:	
Have been is business under present bus	iness name	years.
Ever failed to complete any work award circumstances)	ed?(if	f answer is yes, state
Pursuant to M.G.L. c62C, t49A, the un that to the best of his/her knowledge and that all state taxes required under law has Identification Number will be furnished determine compliance with the above-r The undersigned certifies under penaltic and submitted in good faith and without	I belief all state tax ave been paid. (NC to the Massachuse eferenced law.) as of perjury that the	x returns have been filed a OTE: The Taxpayer etts Department of Reven his application has been m
that to the best of his/her knowledge and that all state taxes required under law has Identification Number will be furnished determine compliance with the above-	I belief all state tax ave been paid. (NC to the Massachuse eferenced law.) es of perjury that the collusion or fraud hall mean any nation	x returns have been filed a DTE: The Taxpayer etts Department of Reven his application has been many other person. A bural person, business,
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that to the best of his/her knowledge and that all state taxes required under law had Identification Number will be furnished determine compliance with the above-rather undersigned certifies under penaltic and submitted in good faith and without in this certification, the word "person" spartnership, corporation, union, commit individuals. Bidder: By:	d belief all state tax ave been paid. (NC to the Massachuse eferenced law.) es of perjury that the collusion or fraud hall mean any natu tee, club or other of	x returns have been filed a DTE: The Taxpayer etts Department of Reven his application has been mand with any other person. A sural person, business, corganization, entity, or group

NOTE: This application must bear the written signature of the applicant.

If the applicant is an individual doing business under a name other than his own name, the application must so state, giving the address of the individual.

If the applicant is a partnership, a general partner designated as such must sign the application.

If the applicant is a corporation, trust or joint venture, a duly authorized officer or agent of such corporation, trust or joint venture must sign the application.