

BID FORM

FOR: FALKIRK APARTMENTS SITE AND SEISMIC IMPROVEMENT

PROJECT NUMBER: 956390

CONTRACT NUMBER: 956390-LF-2019-139 UNIVERSITY OF CALIFORNIA, RIVERSIDE

RIVERSIDE, CALIFORNIA

June 18, 2019

BID TO:

Planning, Design & Construction UNIVERSITY OF CALIFORNIA, RIVERSIDE 1223 University Avenue, Suite 240 Riverside, CA 92521

(951) 827-2528

BID FROM:	Blackstone B	suilders Inc.	
-	(Name of	Bidder)	
	William J. Meaney, Jr.		
_	(Contact Name)		
	170 N. Maple Street, Unit 101		
3 	(Address)		
	Corona, CA 92880		
-	(City, State,	Zip Code)	
	(951) 736 - 1600	(951) 736 - 1601	
_	(Telephone Number)	(Facsimile Number)	
:-	office@blackstonebuildersinc.com; bill@blackstonebuildersinc.com		
	(E-ma	ail)	
	07/11/2	2019	
	(Date Bid Su	ubmitted)	

Note: All portions of this Bid Form must be completed and the Bid Form must be signed before the Bid is submitted. Failure to do so will result in the Bid being rejected as non-responsive.



BIDDER'S NAME: Blackstone Builders Inc.

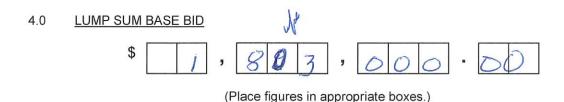
1. 0 BIDDER'S REPRESENTATIONS

Bidder, represents that a) Bidder and all Subcontractors, regardless of tier, has the appropriate current and active Contractor's licenses required by the State of California and the Bidding Documents; b) it has carefully read and examined the Bidding Documents for the proposed Work on this Project; c) it has examined the site of the proposed Work and all Information Available to Bidders; d) it has become familiar with all the conditions related to the proposed Work, including the availability of labor, materials, and equipment; e) Bidder and all Subcontractors, regardless of tier, are currently registered with the California Department of Industrial Relations pursuant to California Labor Code Section 1725.5 and 1771.1. Bidder hereby offers to furnish all labor, materials, equipment, tools, transportation, and services necessary to complete the proposed Work on this Project in accordance with the Contract Documents for the sums quoted. Bidder further agrees that it will not withdraw its Bid within 60 days after the Bid Deadline, and that, if it is selected as the apparent lowest responsive and responsible Bidder, that it will, within 10 days after receipt of notice of selection, sign and deliver to University the Agreement in triplicate and furnish to University all items required by the Bidding Documents. If awarded the Contract, Bidder agrees to complete the proposed Work within 90 calendar days after the date of commencement specified in the Notice to Proceed.

2.0 ADDENDA

Bidder acknowledges that it is Bidder's responsibility to ascertain whether any Addenda have been issued and if so, to obtain copies of such Addenda from University's Facility at the appropriate address stated on Page 1 of this Bid Form. Bidder therefore agrees to be bound by all Addenda that have been issued for this Bid.

3.0 NOT USED



5.0 SELECTION OF APPARENT LOW BIDDER

Refer to the Instructions to Bidders for selection of apparent low bidder.





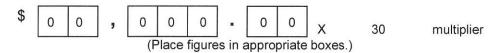


BIDDER'S NAME: Blackstone Builders Inc.

6.0 UNIT PRICES - Not Used

7.0 DAILY RATE OF COMPENSATION FOR COMPENSABLE DELAYS

Bidder shall determine and provide below the daily rate of compensation for any Compensable Delay caused by University at any time during the performance of the Work. A Facility may choose a minimum compensable delay in the best interests of the Project. If so, use the language in parentheticals { } and in grey highlight:



Failure to fill in a dollar figure for the daily rate for Compensable Delay shall render the bid nonresponsive. University will perform the extension of the daily rate times the multiplier.

The daily rate shown above will be the total amount of Contractor entitlement for each day of Compensable Delay caused by University at any time during the performance of the Work and shall constitute payment in full for all delay costs, direct or indirect (including, without limitation, compensation for all extended home office overhead and extended general conditions), of the Contractor and all subcontractors, suppliers, persons, and entities under or claiming through Contractor on the Project. The number of days of Compensable Delay shown as a "multiplier" above is not intended as an estimate of the number of days of Compensable Delay anticipated by the University. The University will pay the daily rate of compensation only for the actual number of days of Compensable Delay, as defined in the General Conditions; the actual number of days of Compensable Delay may be greater or lesser than the "multiplier" shown above.

8.0 ALTERNATES - Not Used



BIDDER'S NAME: Blackstone Builders Inc.		
9.0	LIST OF SUBCONTRACTORS	
Bidder	Bidder will use Subcontractors for the Work:	
	□ No X Yes	

If "yes", provide in the spaces below (a) the name, the location of the place of business, and the California contractor license number of each subcontractor who will perform work or labor or render service to the prime contractor in or about the construction of the work or improvement, or a subcontractor licensed by the state of California who, under subcontract to the prime contractor, specially fabricates and installs a portion of the work or improvement according to detailed drawings contained in the plans and specifications, in an amount in excess of one-half of 1 percent of the prime contractor's total bid, (b) the portion of the work which will be done by each subcontractor. The prime contractor shall list only one subcontractor for each such portion as is defined by the prime contractor in its bid.

	Subcontractor			
Portion of the Work Activity (e.g. electrical, mechanical, concrete)	Name of Business	Location of Business (City)	License No.	DIR Registration No.
Fire Alarm	Johnson Controls	Rancho Cucamonga	986047	1000000576
Electrical	J. Miller Electric, Inc.	Hesperia	730588	1000007878

(Note: Add additional pages if required.)





BIDDER'S NAME: Blackstone Builders Inc. 10.0 **BIDDER INFORMATION** TYPE OF ORGANIZATION S - Corporation (Corporation, Partnership, Individual, Joint Venture, etc.) IF A CORPORATION, THE CORPORATION IS ORGANIZED UNDER THE LAWS OF: California THE STATE OF (State) NAME OF PRESIDENT OF THE CORPORATION: Linda S. Meaney (Insert Name) NAME OF SECRETARY OF THE CORPORATION: Steven P. Winn (Insert Name) IF A PARTNERSHIP, NAMES OF ALL GENERAL PARTNERS: (Insert Name(s)) CALIFORNIA CONTRACTORS LICENSE(S): **B - GENERAL BUILDING CONTRACTOR** 832936 06/30/2021 (Classification(s)) (License Number) (Expiration Date) (For Joint Venture, list Joint Venture's license and licenses for all Joint Venture partners.)



Falkirk Apartments Site & Seismic Improvements Project Number: 956390 Contract Number: 956390-LF-2019-139

BIDDE	ER'S NAME: Blackstor	ie Builders Inc.		
12.0	REQUIRED COMPL	ETED ATTACHMENT	S	
The f	following documents ar	e submitted with and r	nade a condition of this Bid:	
	 Bid Security in the 	ne form of	Bid Bond	h a als)
			(Bid Bond or Certified C	песк)
13.0	DECLARATION			
	Ι,	William J. Mea		, hereby declare that I am the
	Vice President	(Printed Na of	Blackstone Build	ers Inc.
	(Title)	01	(Name of Bidde	
subm	nitting this Bid Form: th	at I am dulv authorize	d to execute this Bid Form on	behalf of Bidder: and that all
	10 VA 00000 10 VA-0-0 WA	February Steel Mark Steel Wiley Co.	ments hereto are, to the best of	
	complete as of its subm		nente herete dre, to the best of	my knowledge, true, accurate,
and c			in the interest of ar an haba	lf of any undicalased assure
			in the interest of, or on beha	
1190		en to the territory and the territory and the	or corporation; that the bid is	Service W
sham; that the bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham				
bid, and has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else				
to put in a sham bid, or that anyone shall refrain from bidding; that the bidder has not in any manner, directly or				
indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or				
any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder, or				
to secure any advantage against the public body awarding the contract of anyone interested in the proposed				
contract; that all statements contained in the bid are true; and, further, that the bidder has not, directly or				
indirectly, submitted his or her bid price or any breakdown thereof, or the contents thereof, or divulged				
information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company				
			y member or agent thereof to	
bid.	siation, organization, b	ia appearery, or to an	y member of agent thereof to	chectate a conderve of sham
oiu.	I de alore under non	عالم المعالم المعالم المعالم المعالم المعالم المعالم	farancian is two and someta	ad that this Declaration
		alty of perjury, that the	foregoing is true and correct ar	id that this Declaration was
execu	uted at:			Califarnia
		orona City, otherwise Name of Coun	, in the State of _	California ,
on	07/11/2019		•1/	(Olulo)
on _	(Date)			
			WL	
				(Signature)



BID BOND

KNOW ALL PERSONS BY THESE PRESENTS:

That we, Blackstone Builders, Inc.

as Principal, and North American Specialty Insurance Company, as Surety, are held and firmly bound unto THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, hereinafter called THE REGENTS, in the sum of 10% of the Lump Sum Base Bid amount for payment of which in lawful money of the United States, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT, WHEREAS, Principal has submitted a Bid for the work described as follows:

Project Name: Falkirk Apartments Site and Seismic Improvement Project

Proiect Number: 956390 Contract Number: 956390-LF-2019-139

Location: University of California, Riverside

NOW. THEREFORE, if Principal shall not withdraw said Bid within the time period specified after the Bid Deadline, as defined in the Bidding Documents, or within 60 days after the Bid Deadline if no time period be specified, and, if selected as the apparent lowest responsible Bidder, Principal shall, within the time period specified in the Bidding Documents, do the following:

- Enter into a written agreement, in the prescribed form, in accordance with the Bid. (1)
- (2)File two (2) bonds with THE REGENTS, one (1) to guarantee faithful performance and the other to guarantee payment for labor and materials, as required by the Bidding Documents.
- (3)Furnish certificates of insurance and all other items as required by the Bidding Documents.

In the event of the withdrawal of said Bid within the time period specified, or within 60 days if no time period be specified, or the disqualification of said Bid due to failure of Principal to enter into such agreement and furnish such bonds, certificates of insurance, and all other items as required by the Bidding Documents, if Principal shall pay to THE REGENTS an amount equal to the difference, not to exceed the amount hereof, between the amount specified in said Bid and such larger amount for which THE REGENTS procure the required work covered by said Bid, if the latter be in excess of the former, then this obligation shall be null and void, otherwise to remain in full force and effect.

In the event suit is brought upon this bond by THE REGENTS, Surety shall pay reasonable attorneys' fees and costs incurred by THE REGENTS in such suit.

IN WITNESS WHEREOF, we have hereunto set our h	ands this <u>28th</u> _{day of} <u>June</u> , 20 <u>19</u> .
PRINCIPAL:	SURETY:
Blackstone Builders, Inc.	North American Specialty Insurance Company
(Name of Company)	(Name of Company)
By:	By: Cheryl L. Thomas
(Signature)	(Signature)
William J. Meaney, Jr.	Cheryl L. Thomas
(Printed Name)	(Printed Name)
Vice President	Attorney-in-Fact
(Title)	(Title)
	Address for Notices:
	6 Hutton Centre Dr. #850
	(Street Address)
	Santa Ana, CA 92707
	(City, State & Zip Code)

NOTE: Notary acknowledgement for Surety and Surety's Power of Attorney must be attached.

ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

2015 Version www.NotaryClasses.com 800-873-9865

State of California	}
County of Orange	}
On before me, _I	Beata A. Sensi, Notary Public (Here insert name and title of the officer)
name(s) is/are subscribed to the within i he/she/they executed the same in his/he	actory evidence to be the person (s) whose instrument and acknowledged to me that extheir authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
the foregoing paragraph is true and corr	BEATA A. SENSI Notary Public – California
WITNESS my hand and official seal. Notary Public Signature (No	Orange County Commission # 2222034 My Comm. Expires Dec 14, 2021
(No	any i done deary
ADDITIONAL OPTIONAL INFORMATION	ON INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgents from
Bid Bond	other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	State and County information must be the State and County where the document
Blackstone Builders, Inc.	signer(s) personally appeared before the notary public for acknowledgment. • Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.
Number of Pages _/_ Document Date _6/28//9	 The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
CAPACITY CLAIMED BY THE SIGNER	notarization. • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.
☐ Individual (s)	he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this
☑ Corporate Officer	 information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible.
Vice President	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
(Title) □ Partner(s)	· Signature of the notary public must match the signature on file with the office of
☐ Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure this
☐ Trustee(s)	acknowledgment is not misused or attached to a different document.
☐ Other	 Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document with a staple.

ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	}
County of Orange	}
On June 28, 2019 before me, _	Susan E. Morales, Notary Public (Here insert name and title of the officer)
personally appeared Cheryl L. Thomas who proved to me on the basis of satisf name(s) is/are subscribed to the within he/she/they executed the same in his/h	factory evidence to be the person (s) whose instrument and acknowledged to me that er/their authorized capacity (ies) , and that by ent the person (s) , or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and cor	under the laws of the State of California that rect.
WITNESS my hand and official seal. Susan & Monday Notary Public Signature (No.	SUSAN E. MORALES COMM. # 2279182 NOTARY PUBLIC - CALIFORNIA ORANGE COUNTY My Comm. Expires March 28, 2023
ADDITIONAL OPTIONAL INFORMAT DESCRIPTION OF THE ATTACHED DOCUMENT Bid Bond	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknolwedgents from other states may be completed for documents being sent to that state so long as the
Bid Bond (Title or description of attached document) North American Specialty Insurance Co. (Title or description of attached document continued) Number of Pages 1 Document Date 6/28/19	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.

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Other _

- Indicate title or type of attached document, number of pages and date.
- Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

SWISS RE CORPORATE SOLUTIONS

NORTH AMERICAN SPECIALTY INSURANCE COMPANY WASHINGTON INTERNATIONAL INSURANCE COMPANY

GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, THAT North American Specialty Insurance Company, a corporation duly organized and existing under laws of the State of New Hampshire, and having its principal office in the City of Overland Park, Kansas, and Washington International Insurance Company, a corporation organized and existing under the laws of the State of New Hampshire and having its principal office in the City of Overland Park, Kansas, each does hereby make, constitute and appoint:

Park, Kansas, each does hereby make, constitute and appoint:
TODD M. ROHM, CATHY S. KENNEDY, BEATA A. SENSI, CHERYL L. THOMAS AND SHANE WOLF
JOINTLY OR SEVERALLY
Its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its act and deed, bonds or other writings obligatory in the nature of a bond on behalf of each of said Companies, as surety, on contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract or suretyship executed under this authority shall exceed the amount of: FIFTY MILLION (\$50,000,000.00) DOLLARS
This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of both North American Specialty Insurance Company and Washington International Insurance Company at meetings duly called and held on the 9 th of May, 2012:
"RESOLVED, that any two of the Presidents, any Managing Director, any Senior Vice President, any Vice President, any Assistant Vice President the Secretary or any Assistant Secretary be, and each or any of them hereby is authorized to execute a Power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings and all contracts of surety, and that each or any of them hereby is authorized to attest to the execution of any such Power of Attorney and to attach therein the seal of the Company; and it is
FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be binding upon the Company when so affixed and in the future with regard to any bond, undertaking or contract of surety to which it is attached."
By Steven F. Anderson, Senior Vice President of Washington International Insurance Company & Senior Vice President of North American Specialty Insurance Company Wichael A. Ito, Senior Vice President of North American Specialty Insurance Company & Senior Vice President of North American Specialty Insurance Company
IN WITNESS WHEREOF, North American Specialty Insurance Company and Washington International Insurance Company have caused their official seals to be hereunto affixed, and these presents to be signed by their authorized officers this 12 day of JANUARY, 2018.
North American Specialty Insurance Company Washington International Insurance Company
State of Illinois County of Cook ss:
On this 12 day of JANUARY, 2018, before me, a Notary Public personally appeared Steven P. Anderson, Senior Vice President of Washington International Insurance Company and Senior Vice President of North American Specialty Insurance Company and Michael A. Ito, Senior Vice President of Washington International Insurance Company and Senior Vice President of North American Specialty Insurance Company, personally known to me, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as officers of and acknowledged said instrument to be the voluntary act and deed of their respective companies.
OFFICIAL SEAL M. KENNY Notary Public - State of Illinois My Commission Expires
I, <u>Jeffrey Goldberg</u> , the duly elected <u>Assistant Secretary</u> of North American Specialty Insurance Company and Washington International Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney given by said North American Specialty Insurance Company and Washington International Insurance Company, which is still in full force and effect.
IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Companies this 28 day of JUNE , 20 19 .
left Delle-

Jeffrey Goldberg, Vice President & Assistant Secretary of Washington International Insurance Company & North American Specialty Insurance Company