

BID2018-83 UPGRADE OF AN ARTIRA GARAVENTA WHEELCHAIR LIFT FOR THE CITY OF TRENTON,DEPARTMENT OF PUBLIC WORKS, DIVISION OF PUBLIC PROPERTY BID OPENING 11/1/18 AT 11:00AM

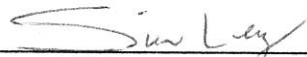
BID2018-83 UPGRADE OF AN ARTIRA GARAVENTA WHEELCHAIR LIFT FOR THE CITY OF TRENTON,DEPARTMENT OF PUBLIC WORKS, DIVISION OF PUBLIC PROPERTY	
NUMBER OF RESPONDENTS:	1
NAME OF BIDDER	LEVY CONSTRUCTION COMPANY, INC.
ADDRESS	135 CUTHBERT BOULEVARD
CITY, STATE, ZIP	AUDUBON, NJ 08106
CONTACT NAME	SIMON LEVY, PRESIDENT
TELEPHONE	856-547-0707
FAX	856-547-2424
E-MAIL	SIMON@LEVYCONSTRUCTION.COM
STATEMENT OF OWNERSHIP DISCLOSURE	INCLUDED
REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONAIRE	INCLUDED
BID GUARANTEE	10% GREAT AMERICAN INSURANCE COMPANY W.P.O.A/PATRICIA M. MCGLONE-MCCALL
PERFORMANCE BOND AND LABOR AND MATERIAL PAYMENT BOND	GREAT AMERICAN INSURANCE COMPANY
CONSENT OF SURETY	REQUIRED FROM AWARDED VENDOR WITH SIGNED CONTRACTS PRIOR TO AWARD
PREVAILING WAGE STATEMENT	INCLUDED
NOTICE OF INTENT TO SUBCONTRACT FORM	INCLUDED
EQUIPMENT CERTIFICATION	INCLUDED
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA	N/A
NJ PUBLIC WORKS CONTRACTOR REGISTRATION	CERT.#62577 EXP..04/08/2020
NJ BUSINESS REGISTRATION CERTIFICATE	INCLUDED
NON-COLLUSION AFFIDAVIT	INCLUDED
AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE	INCLUDED
DISCLOSURE OF INVESTED ACTIVITIES IN IRAN	INCLUDED
DEBAREMENT NOTICE (REQUIRED)	INCLUDED
ETHICS COMPLAINT DISCLOSURE	INCLUDED
CITY OF TRENTON RESIDENT EMPLOYMENT POLICY	INCLUDED
EIC	REQUIRED FROM AWARDED VENDOR PRIOR TO AWARD
60-DAY EXTENSION COMPLIANCE	YES
COMPLIANCE WITH EMERGENCY SERVICES	NO
CERTIFICATE OF INSURANCE	REQUIRED FROM AWARDED VENDOR PRIOR TO AWARD
REFERENCES	N/A
TOTAL COST	\$59,680.00
EXCEPTIONS (IF ANY)	NONE
FATAL FLAW	NONE

BID PROPOSAL FORM
VENDOR MUST COMPLETE

WE THE UNDERSIGNED PROPOSE TO UPGRADE THE EXISTING ARTIRA GARAVENTA WHEELCHAIR LIFT AND DISPOSAL OF DISCARDED PARTS AT WILLIAM TRENT HOUSE, 15 MARKET STREET, TRENTON, NJ 08611 PURSUANT TO THE BID SPECIFICATIONS AND REQUIREMENTS AND MADE PART HEREOF:

UPGRADE THE EXISTING ARTIRA GARAVENTA WHEELCHAIR LIFT AND DISPOSAL OF DISCARDED PARTS

TOTAL COST \$ 59,680.00



(ORIGINAL SIGNATURE BY AUTHORIZED REPRESENTATIVE)

The undersigned is a Corporation, ~~Partnership or Individual~~ under the laws of the State of New Jersey _____ having its principal office at 134 Cuthbert Boulevard, Audubon, NJ 08106

Levy Construction Company, Inc.

COMPANY

134 Cuthbert Boulevard, Audubon, NJ 08106

ADDRESS

ADDRESS

FED. ID #

NAME Simon Levy, President

TELEPHONE

856-547-0707

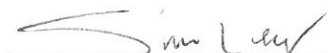
FAX

856-547-2424

EMAIL simon@levyconstruction.com

DATE 11/1/18

SIGNATURE


Simon Levy, President

PROVIDE A LIST SUB-CONTRACTORS
COPY OF LICENSES SUBMITTED WITH BID

(MANDATORY IF APPLICABLE)

NAME Handi-Lift, Inc.
ADDRESS 730 Garden Street
CITY, STATE, ZIP Carlstadt, NJ 07072
TELEPHONE: 201-933-0111
FAX NO. 201-933-0050
TRADE Lifts
LICENSE NO. N/A

NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE: _____
FAX NO. _____
TRADE _____
LICENSE NO. _____

NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE: _____
FAX NO. _____
TRADE _____
LICENSE NO. _____

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TRADE _____
LICENSE NO. _____

NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE: _____
FAX NO. _____
TRADE _____
LICENSE NO. _____

UTILIZATION PLAN

There is only one (1) subcontractor for
this project, HANDI-LIFT.