

Millers Falls Branch Library  
Improvement Project

Proposal Due Date: July 25, 2019 at 3pm

**Required Forms**

- Price Quote and References Form
- Certification of Tax Compliance
- Certification of Non-Collusion
- Federal Disclosures
- OSHA Certification
- Labor Harmony Certification
- Debarment and Suspension Certification

**Millers Falls Branch Library Improvement Project**  
**PRICE QUOTE and REFERENCES FORM**

*Note: The Town has a maximum appropriation value of \$20,000 for this project.  
Bids in excess of that value will not be accepted.*

Please indicate your price for completion of all items and requirements as specified in the RFQ.  
Services must be completed within 90 days after award of contract:

Price for Project as Described in Scope of Work            \$ \_\_\_\_\_

**REFERENCES for at least two similar projects**

1.            Client: \_\_\_\_\_  
                 Location: \_\_\_\_\_  
                 Completion Date: \_\_\_\_\_

2.            Client: \_\_\_\_\_  
                 Location: \_\_\_\_\_  
                 Completion Date: \_\_\_\_\_

**COMPANY Contact Info**

Company Name            \_\_\_\_\_

Address            \_\_\_\_\_

Fax No.            \_\_\_\_\_

Telephone No.            \_\_\_\_\_

Email Address            \_\_\_\_\_

Signature of Authorized Person  \_\_\_\_\_

Printed Name of Above            \_\_\_\_\_

Title of Above            \_\_\_\_\_

Date            \_\_\_\_\_

## CERTIFICATION OF TAX COMPLIANCE

Any person or corporation that fails to date, sign with original signature, and submit the following statements shall not be awarded this contract.

### Tax Compliance

Pursuant to M.G.L. Ch. 62C, Sec. 49A, I certify under the penalties of perjury that, to the best of my knowledge and belief, I am in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.



\_\_\_\_\_  
Authorized Official's Signature

\_\_\_\_\_  
Title of Person Signing

\_\_\_\_\_  
Typed or Printed Name of Person Signing

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

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

**CERTIFICATION OF NON-COLLUSION**

The undersigned certifies under penalties of perjury that this bid has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity, or group of individuals.

Date \_\_\_\_\_



\_\_\_\_\_  
Authorized Official's Signature

\_\_\_\_\_  
Typed or Printed Name of Person Signing

\_\_\_\_\_  
Company or Corporation

## FEDERAL DISCLOSURES

**The Office of the Attorney General, Washington, DC, requires the following information on all bid proposals amounting to \$1,000.00 or more:**

\_\_\_\_\_ Federal Tax ID Number (this number is regularly used by companies when filing their “EMPLOYER’S FEDERAL TAX RETURN, U.S.” Treasury Department Form 941)

**\*IF A CORPORATION, INCLUDE WITH YOUR BID A CORPORATE RESOLUTION LISTING ALL DULY AUTHORIZED SIGNERS ON BEHALF OF THE CORPORATION AND CHECK HERE**

**\*IF A PARTNERSHIP, INCLUDE A LIST OF NAMES/ADDRESSES OF ALL PARTNERS AND CHECK HERE**

**\*IF A PROPRIETORSHIP, COMPLETELY FILL OUT INFORMATION ABOVE ONLY AND CHECK HERE**

## OSHA CERTIFICATION

I hereby certify that the Project Lead or Leads who will be employed and will at all times supervise workers at the work site have successfully passed the OSHA approved 10-hour safety course, and we have proof on file. I also certify that I am able to furnish labor that can work in harmony with all other elements of labor employed or to be employed in the work.

Date \_\_\_\_\_



\_\_\_\_\_  
Authorized Official's Signature

\_\_\_\_\_  
Typed or Printed Name of Person Signing

\_\_\_\_\_  
Company or Corporation

## LABOR HARMONY CERTIFICATION [M.G.L. c. 30, s. 39S].

By executing this contract the Contractor hereby certifies that that Contractor is able to furnish labor that can work in harmony with all other elements of labor employed or to be employed in the work. The Contractor shall procure materials from such sources and shall manage its own forces and the forces of its Subcontractors and any sub-subcontractors in such a manner as will result in harmonious labor relations on the site. The Contractor shall cause persons to be employed in the Work who will work in harmony with others so employed. Should the Work be stopped or materially delayed in the Awarding Authority's reasonable judgment due to a labor dispute, the Awarding Authority shall have the right to require the Contractor to employ substitutes acceptable to the Awarding Authority.

Date \_\_\_\_\_



\_\_\_\_\_  
Authorized Official's Signature

\_\_\_\_\_  
Typed or Printed Name of Person Signing

\_\_\_\_\_  
Company or Corporation

## DEBARMENT AND SUSPENSION CERTIFICATION

Any person or corporation that fails to date, sign with original signature, and submit the following statement shall not be awarded this contract.

1. The undersigned duly authorized contractor representative certifies to the best of his/her knowledge and belief, that the contractor and its principals is not presently debarred, suspended, purposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
2. The undersigned certifies under penalties of perjury that the said undersigned is not presently debarred (Chapter 550, Acts of 1991) from doing public construction work in the Commonwealth of Massachusetts under the provisions of Section 29F of Chapter 29 of the General Laws, or any other applicable debarment provisions of any other Chapter of the General Laws, or any Rule or Regulation promulgated thereunder.

Date Authorized Representative's Signature: \_\_\_\_\_

Typed or Printed Name of Person Signing: \_\_\_\_\_

Company or Corporation: \_\_\_\_\_