



University of District of Columbia
www.udc.edu

Date: 05/01/19

PURCHASE ORDER NO. **P0010872**

This purchase order number must appear on all invoices, packages, lading and correspondence.

CONDITIONS OF PURCHASE:

1. In accepting this order, Seller acknowledges and agrees to abide by the Conditions of Purchase set forth here and as set forth in further detail on the University's website <http://www.udc.edu>.

2. All invoices shall be submitted to the 'Bill to' address indicated on this purchase order. Invoices shall include the purchase order number, contract number (if applicable), contractor's name and address, invoice date, quantity and description of good(s) or service(s) for which payment is being requested, remittance address, and contract person name and phone number if there is a problem with the invoice. Invoices for quantities or amounts greater than what is stated on the purchase order will be rejected. Failure to follow these instructions may result in delays in payment.

**** Government of the District of Columbia standard contract provisions for use with the District of Columbia Government supply and services contracts are here by incorporated by reference, www.udc.edu/procurement ****

3. FOB Destination. Prices shall include all packing, handling and shipping charges FOB destination, freight prepaid and allowed unless otherwise specified herein.

4. Payment Terms. Net 30 days.

Seller: Consys
732 Kennedy St NW
Washington DC 20011

Ship To: Alan Walsh
UDC - Facilities Mgmt.
Washington DC 20008

Invoice To: UDC - Accounts Payable
4200 Connecticut Ave, NW Building 39 Suite 200-B
Washington, DC 20008
Phone: (202)274-5088 Fax: (202) 274-7448
Email: udcacctspay@udc.edu

DELIVER BY: 05/01/19

DELIVERY: 8:30 a.m. - 5 p.m. Mon.-Fri. 24 hour notice for large deliveries is recommended. Please call 202-274-6150 to make arrangements.

Item	Description	Quantity	Unit Price	Total
1	This PO is for the procurement of Construction Services for the "Building 46E Theater Lighting Upgrades" project. The scope of work and independent government estimate is attached. GF-2019-C-0037 9092400 Contractual Services - GC	1.00 EA	497,786.0000	1,497,786.00

BUYER: Michiko D. Gadson

PO Total **\$1,497,786.00**

The University is a tax-exempt public educational institution.

Seller: Please send acknowledgement of this order and all inquiries concerning this order to:

Office of Contracting and Procurement
4200 Connecticut Ave, NW Building 39 Suite 200-C
Washington, DC 20008
Phone: 202-274-5181; Fax: 202-274-5432

UNIVERSITY OF THE DISTRICT OF COLUMBIA

Mary Ann 5/1/2019
Purchasing Officer

VENDOR COPY

GOVERNMENT OF THE DISTRICT OF COLUMBIA
University of the District of Columbia

CONSTRUCTION CONTRACT		<small>CONTRACT NO.</small> GF-2018-C-0037
		<small>DATE OF CONTRACT</small>
<small>NAME AND ADDRESS OF CONTRACTOR</small> Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011	<small>TYPE OF ORGANIZATION ("x")</small> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> INDIVIDUAL</div><div><input type="checkbox"/> PARTNERSHIP</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> JOINT VENTURE</div><div><input type="checkbox"/> CORPORATION</div></div> <div style="display: flex; justify-content: space-between;"><div><small>STATE OF INCORPORATION</small></div><div>Washington, DC</div></div>	
<small>CONTRACT FOR (work to be performed)</small> <p>Consys, Inc., hereinafter referred to as "the Contractor", and The Board of Trustees of the University of the District of Columbia, hereinafter referred to as the "University," mutually agree as follows:</p> <p>The University, in consideration of the proposal price in the amount of one million four hundred ninety-seven thousand seven hundred eighty six dollars and zero cents (\$1,497,786.00) enters into this firm fixed price contract with Consys, Inc., for the Building 46E, Theater Lighting Upgrades.</p> <p>The University, represented by the Office of Strategic Sourcing and Procurement executing this contract, and the Contractor, mutually agree to perform this contract in strict accordance with the contract document, including the Solicitation, the Contractor's proposal, and the District of Columbia Standard Contract Provisions for use with District of Columbia Government Construction Projects, March 2011. These documents are incorporated herein by reference and made a part hereof.</p> <p>The following addition to the contract is hereby stipulated and agreed to by the parties hereto:</p> <p>A. <u>General Provisions</u></p> <p style="padding-left: 20px;">1. <u>Time for Completion</u></p> <p style="padding-left: 40px;">Work shall commence on the date specified in a written Notice to Proceed to be issued by the Office of Strategic Sourcing and Procurement and shall continue <u>WITHOUT INTERRUPTION</u> until completion and acceptance. The contract shall be completed within one hundred and twenty (120) calendar days after such notice.</p> <p style="padding-left: 20px;">2. <u>Liquidated Damages</u></p> <p style="padding-left: 40px;">The Contractor shall pay to the District the sum of four thousand one hundred forty-five dollars and zero cents (\$4,145.00) as agreed liquidated damages for each calendar day of delay in completion of the work for this project, within the time limits set forth, subject to provisions of Article 5, DELAYS, of the General Provisions of the Standard Contract Provisions for Construction Projects, March 2011.</p>		

3. Wage Rates

General Decision Number: DC180002 dated 02/09/2018 DC2 is the wage determination applicable to this Contract.

B. Order Of Precedence And Documents Incorporated By Reference

The following documents are hereby incorporated into and made a part of this Contract. Any inconsistency in this contract shall be resolved by giving precedence in the following order:

- (1) Sections A and B of this contract;
- (2) IFB No. GF-2018-B-0037 all attachments and amendments;
- (3) Standard Contract Provisions (SCP) For Use With Specifications for the District of Columbia Government Construction Projects, March 2011;
- (4) The Contractor's bid

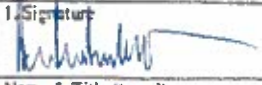
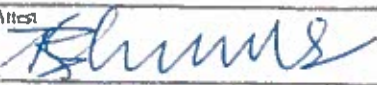

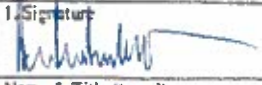
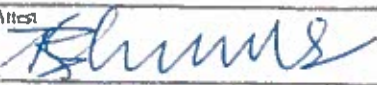

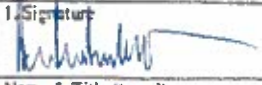
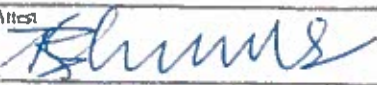

In witness whereof, the parties hereto have executed this Contract as of the date entered on the first page hereof.

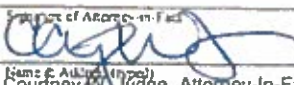
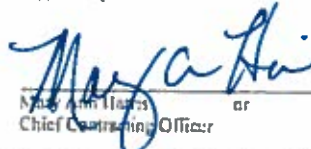
AWARD (The Contractor is not required to sign this document). Your bid on this solicitation is hereby accepted.

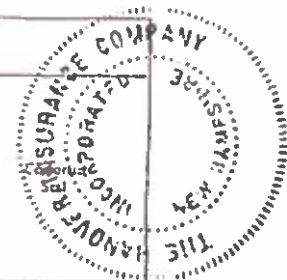
By

 5/1/2019
Mary Ann Harris
Chief Contracting Officer
Office of Strategic Sourcing and Procurement

Bond No 1031700

PAYMENT BOND (CONSTRUCTION) (See Instructions on Reverse)		Date Bond Executed (Must be same or later than date of Contract)											
PRINCIPAL (Legal Name and Address) Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011		TYPE OF ORGANIZATION () <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT VENTURE <input checked="" type="checkbox"/> CORPORATION STATE OF INCORPORATION DC											
SURETY (IES) (Name(s) and Address(es)) Hanover Insurance Company 440 Lincoln Street Worcester, MA 01653		PENAL SUM OF BOND <table border="1"> <thead> <tr> <th>MILLION(S)</th> <th>THOUSAND(S)</th> <th>HUNDRED(S)</th> <th>CENTS</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>497</td> <td>786</td> <td>00</td> </tr> </tbody> </table>		MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS	1	497	786	00		
MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS										
1	497	786	00										
		CONTRACT DATE CONTRACT NUMBER GF-2018-B-0037											
<p>KNOW ALL MEN BY THESE PRESENTS. That we, the Principal and Surety(ies) hereto are firmly bounds to the District of Columbia Government, a municipal corporation, hereinafter called the District, in the above penal sum for the payment of which we bind ourselves, our heirs, executors, and successors, bind ourselves in such sum "jointly" and "severally" only for the purpose of allowing a joint action or actions against any or all of us, and for all other purposes each Surety binds itself, jointly and severally with the Principal, for the payment of such sum only as is set forth opposite the name of such Surety, but if no limit of liability is indicated, the limit of liability shall be the full amount of the penal sum.</p> <p>THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal entered into the Contract identified above.</p> <p>NOW THEREFORE, if the Principal shall well and truly perform and fulfill all undertakings, covenants, terms and condition, and agreements of the Contract during the original term of the Contract and any extension thereof that may be granted by the District with or without notice to the Surety, and during the life of guaranty required under the Contract, and shall also well and truly perform and fulfill all the undertakings, covenants, terms, conditions and agreements of any duly authorized modifications of the Contract that may hereafter be made, notice of which modifications to the Surety being hereby waived, and shall save harmless and indemnify the District from any and all claims, delays, suits, costs, charges, damages, counsel fees, judgments and decrees to which the District may be subjected at any time on account of any infringement by the Principal of letters, patents, or copyrights, unless otherwise specifically stipulated in the Contract or on account of any injury to persons or damage to property or premises that occur as a result of any act or omission of Principal in connection with the prosecution of the work under the Contract and shall pay the same, then the above obligation shall be void; otherwise to remain in full force and virtue.</p> <p>IN WITNESS WHEREOF, the Principal and Surety (ies) have executed this payment bond and have affixed their seals on the date set forth above.</p>													
<p align="center">PRINCIPAL</p> <table border="1"> <tr> <td> 1. Signature  (Seal) </td> <td> 1. Attest  </td> <td rowspan="2">  </td> </tr> <tr> <td> Name & Title (typed) VIJAY KASIMETTY, VP </td> <td> Name & Title (typed) RAJ SHUKLA, Sec'y/VP </td> </tr> <tr> <td> 2. Signature (Seal) </td> <td> 2. Attest </td> <td rowspan="2"> Corporate Seal </td> </tr> <tr> <td> Name & Title (typed) </td> <td> </td> </tr> </table>				1. Signature  (Seal)	1. Attest 		Name & Title (typed) VIJAY KASIMETTY, VP	Name & Title (typed) RAJ SHUKLA, Sec'y/VP	2. Signature (Seal)	2. Attest	Corporate Seal	Name & Title (typed)	
1. Signature  (Seal)	1. Attest 												
Name & Title (typed) VIJAY KASIMETTY, VP	Name & Title (typed) RAJ SHUKLA, Sec'y/VP												
2. Signature (Seal)	2. Attest	Corporate Seal											
Name & Title (typed)													

SURETY (IES)			
Name & Address (typical) Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653		State NH	Liability Limit \$1,497,786.00
Signature of Attorney-in-Fact 		Attest (Signature) 	
Name & Address (typical) Courtney W. Judge, Attorney-In-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030		Name & Address (typical) Mai-Ling Rodriguez, Assistant 303 International Circle, Suite 160 Hunt Valley, MD 21030	
Name & Address (typical) 		State of Inc. 	Liability Limit
Signature of Attorney-in-Fact 		Attest (Signature) 	
Name & Address (typical) 		Name & Address (typical) 	
BOND PREMIUM			
Rate Per Thousand 12.10/90/9.90	Total Premium \$15,928.00	Name & Address of Agency or Agent Receiving Commission Delmarva Surety 303 International Circle, Suite 160, Hunt Valley, MD 21030	
Approved By <div style="text-align: center; margin-top: 20px;">  5/1/2019 </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> Mayra Ruiz Chief Contracting Officer or Eddie Whitaker Contracting Officer </div>			
INSTRUCTIONS <ol style="list-style-type: none"> 1. The full legal name and business address of the Principal shall be inserted in the space designated "Principal" on the face of this form. The bond shall be signed by the authorized person signing the Contract. When such person signing is other than the President or Vice-President of a corporation, evidence of authority shall be furnished. Such evidence shall be in the form of either an Extract of Minutes of a meeting of the Board of Directors, or Extract of Bylaws, certified by the Corporate Secretary, or Assistant Secretary and with Corporate Seal affixed thereto. 2. Corporations executing the bond as sureties shall be among those appearing on the U.S. Treasury Department's list of approved sureties and shall be acting within the limitations set forth therein, and shall also be licensed by the Insurance Administration, Department of Consumer and Regulatory Affairs, to do business in the District of Columbia. The surety shall (1) insert on the bond form the name and addresses of the agency receiving the commission; and (2) attach an adequate Power-of-Attorney for each representative signing the bond. 3. Corporations executing the bond shall affix their Corporate Seals. Individuals shall sign full first name, middle initial and last name opposite the word "seal"; two witnesses shall sign and include their addresses, under the word "witness". If executed in Maine or New Hampshire, an adhesive seal shall be affixed. 4. The name of each person signing this payment bond shall be typed in the space provided. 			



THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

POWERS OF ATTORNEY
CERTIFIED COPY

KNOW ALL MEN BY THESE PRESENTS: That THE HANOVER INSURANCE COMPANY and MASSACHUSETTS BAY INSURANCE COMPANY, both being corporations organized and existing under the laws of the State of New Hampshire, and CITIZENS INSURANCE COMPANY OF AMERICA, a corporation organized and existing under the laws of the State of Michigan, do hereby constitute and appoint

Thomas A. Whipple, Douglas J. Dixon, Laura E. Scholze, Courtney W. Judge and/or Brian S. McCoog

of Timonium, MD and each is a true and lawful Attorney(s)-in-fact to sign, execute, seal, acknowledge and deliver for, and on its behalf, and as its act and deed any place within the United States, or, if the following line be filled in, only within the area therein designated any and all bonds, recognizances, undertakings, contracts of indemnity or other writings obligatory in the nature thereof, as follows:

Any such obligations in the United States, not to exceed Twenty Million and No/100 (\$20,000,000) in any single instance

and said companies hereby ratify and confirm all and whatsoever said Attorney(s)-in-fact may lawfully do in the premises by virtue of these presents. These appointments are made under and by authority of the following Resolution passed by the Board of Directors of said Companies which resolutions are still in effect:

"RESOLVED, That the President or any Vice President, in conjunction with any Vice President, be and they are hereby authorized and empowered to appoint Attorneys-in-fact of the Company, in its name and as its acts, to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company in their own proper persons." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

IN WITNESS WHEREOF, THE HANOVER INSURANCE COMPANY, MASSACHUSETTS BAY INSURANCE COMPANY and CITIZENS INSURANCE COMPANY OF AMERICA have caused these presents to be sealed with their respective corporate seals, duly attested by two Vice Presidents, this 14th day of November 2011.



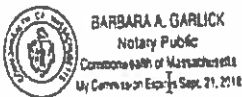
THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

Robert Thomas, Vice President

Mark Fitzgerald, Vice President

THE COMMONWEALTH OF MASSACHUSETTS)
COUNTY OF WORCESTER) ss.

On this 14th day of November 2011 before me came the above named Vice Presidents of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, to me personally known to be the individuals and officers described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, respectively, and that the said corporate seals and their signatures as officers were duly affixed and subscribed to said instrument by the authority and direction of said Corporations.



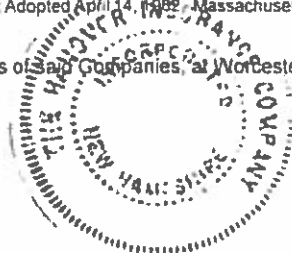
Barbara A. Garlick, Notary Public
My Commission Expires September 21, 2018

I, the undersigned Vice President of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, hereby certify that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Powers of Attorney are still in force and effect.

This Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America.

"RESOLVED, That any and all Powers of Attorney and Certified Copies of such Powers of Attorney and certification in respect thereto, granted and executed by the President or any Vice President in conjunction with any Vice President of the Company, shall be binding on the Company to the same extent as if all signatures therein were manually affixed, even though one or more of any such signatures thereon may be facsimile." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

GIVEN under my hand and the seals of said Companies, at Worcester, Massachusetts, this 15 day of October 2018.

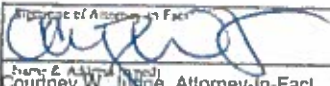
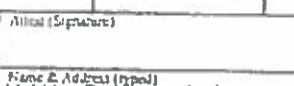
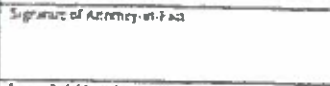

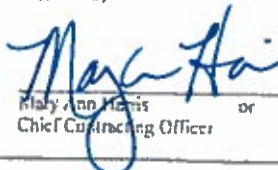


THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

John Margosian, Vice President

Bond No 1031700

PERFORMANCE BOND (CONSTRUCTION) <small>(See Instructions on Reverse)</small>		<small>(Use Bond Executed (Must be same or later than date of Contract))</small>									
PRINCIPAL (Legal Name and Address) Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011		TYPE OF ORGANIZATION () <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> JOINT VENTURE </div> <div> <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> CORPORATION </div> </div>									
SURETY (IES) (Name(s) and Address(es)) Hanover Insurance Company 440 Lincoln Street Worcester, MA 01653		STATE OF INCORPORATION DC PENAL SUM OF BOND <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <th style="width: 25%;">MILLION(S)</th> <th style="width: 25%;">THOUSAND(S)</th> <th style="width: 25%;">HUNDRED(S)</th> <th style="width: 25%;">CENTS</th> </tr> <tr> <td>1</td> <td>497</td> <td>786</td> <td>00</td> </tr> </table>		MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS	1	497	786	00
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	GF-2018-B-0037										
<p>KNOW ALL MEN BY THESE PRESENTS. That we, the Principal and Surety(ies) hereto are firmly bounds to the District of Columbia Government, a municipal corporation, hereinafter called the District, in the above penal sum for the payment of which we bind ourselves, our heirs, executors, and successors, bind ourselves in such sum "jointly" and "severally" only for the purpose of allowing a joint action or actions against any or all of us, and for all other purposes each Surety binds itself, jointly and severally with the Principal, for the payment of such sum only as is set forth opposite the name of such Surety, but if no limit of liability is indicated, the limit of liability shall be the full amount of the penal sum.</p> <p>THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal entered into the Contract identified above,</p> <p>NOW THEREFORE, if the Principal shall well and truly perform and fulfill all undertakings, covenants, terms and condition, and agreements of the Contract during the original term of the Contract and any extension thereof that may be granted by the District with or without notice to the Surety, and during the life of guaranty required under the Contract, and shall also well and truly perform and fulfill all the undertakings, covenants, terms, conditions and agreements of any duly authorized modifications of the Contract that may hereafter be made, notice of which modifications to the Surety being hereby waived, and shall save harmless and indemnify the District from any and all claims, delays, suits, costs, charges, damages, counsel fees, judgments and decrees to which the District may be subjected at any time on account of any infringement by the Principal of letters, patents, or copyrights, unless otherwise specifically stipulated in the Contract or on account of any injury to persons or damage to property or premises that occur as a result of any act or omission of Principal in connection with the prosecution of the work under the Contract and shall pay the same, then the above obligation shall be void; otherwise to remain in full force and virtue.</p> <p>IN WITNESS WHEREOF, the Principal and Surety(ies) have executed this performance bond and have affixed their seals on the date set forth above.</p>											
PRINCIPAL											
1. Signature <small>(Seal)</small>		1. Attest <small>(Seal)</small>									
Name & Title (typed) VIJAY KASIMKETHY, VP		Name & Title (typed) RAJ SHUKLA, SECT 4/VP									
2. Signature <small>(Seal)</small>		2. Attest 									
Name & Title (typed) 		Name & Title (typed) 									

SURETY (IES)			
Name & Address (typed) Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653		State of Inc NH	Bond & P. Limit \$1,497,786.00
Signature of Attorney-in-Fact 		Attest (Signature) 	
Name & Address (typed) Courtney W. Judge, Attorney-in-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030		Name & Address (typed) Mai-Ling Rodriguez, Assistant 303 International Circle, Suite 160 Hunt Valley, MD 21030	
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BOND PREMIUM			
Rate Per Thousand 12 10/9.90/9.90	Total Premium \$15,928	Name & Address of Agency or Agent Receiving Commission Delmarva Surety 303 International Circle, Suite 160, Hunt Valley, MD 21030	
Approved By <div style="text-align: center;">  5/1/2019 </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Mary Ann Harris Chief Contracting Officer or Eddie Whitaker Contracting Officer </div>			
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BID DOCUMENT

INVITATION NO. GF-2018-B-0037

AGENCY: University of the District of Columbia

PROJECT: Building 46E Theater Lighting Upgrades


LOCATION: 4200 Connecticut Avenue, NW
Washington, DC 20008

**To access our website,
please go to:**

- www.udc.edu
- Select About UDC
- Select Administrative
- Finance and Procurement
- Select Capital Procurement



ORIGINAL

 SOLICITATION, OFFER AND AWARD	1. Solicitation No.: GF-2018-B-0037	2. Type: <input checked="" type="checkbox"/> <u>Sealed Bid (IFB)</u> <input type="checkbox"/> <u>Negotiated (RFP)</u>	3. Date Issued: March 5, 2018	Page 1 of 102																																													
4. Contract Number GF-2018-B-0037	5. Requisition/Purchase Request No.		6. <input type="checkbox"/> Open Market with set aside for SBE subcontracting (see Section M.1.6) <input checked="" type="checkbox"/> SBE Set-Aside (see Sec-B.2 & Sec-M) Mandatory 35% CBE subcontracting requirement in accordance with Section M.1.5 & M.1.6																																														
7. Issued By: University of the District of Columbia Capital Procurements Division 4200 Connecticut Avenue, NW Building 39, Room 200C Washington, DC 20008		8. Address Offer To: University of the District of Columbia Capital Procurements Division 4200 Connecticut Avenue, NW Building 39, Room 200C Washington, DC 20008																																															
9. For information contact:	A. Name: Michiko Gadson	B. Telephone (No collect calls) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">(Area Code) 202</td> <td style="width: 33%; text-align: center;">(Number) 274-5191</td> <td style="width: 33%; text-align: center;">(Ext)</td> </tr> </table>		(Area Code) 202	(Number) 274-5191	(Ext)	C. E-mail Address mgadson@udc.edu																																										
(Area Code) 202	(Number) 274-5191	(Ext)																																															
IMPORTANT - The "offer" section of this form must be fully completed by offeror.																																																	
SOLICITATION																																																	
NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder"																																																	
10. Sealed offers in "original" plus 2 copies to perform the work required will be received at the place specified in Item 8, or if hand carried, to the bid counter located at address shown in Item 8 until 2:00 PM local time on March 29, 2018.																																																	
(Hour) (Date)																																																	
11. The University requires performance of the work described in strict accordance with the following:																																																	
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12. The Contractor shall begin performance and complete all the work within 120 calendar days from the date specified in the written <input type="checkbox"/> Award <input checked="" type="checkbox"/> NTP This performance period is <input checked="" type="checkbox"/> Mandatory <input type="checkbox"/> Negotiable																																																	
13. The Contractor must furnish the required performance and payment bonds. <input checked="" type="checkbox"/> yes, within ten (10) calendar days after receiving the Notice of Intent to Award <input type="checkbox"/> no																																																	
14. Additional Solicitation Considerations A. All bids are subject to the work requirements, provisions and clauses incorporated in this solicitation in full text or by reference B. A BID GUARANTEE <input checked="" type="checkbox"/> is required <input type="checkbox"/> is not required																																																	
Government of the University			Office of Contracting and Procurement																																														


OFFER (Must be fully completed by offeror)

<p>15. Name, Company Name and Address of Offeror (with zip code)</p> <p>CONSYS, Inc</p> <p>732Kennedy Street, NW</p> <p>Washington, DC 20011</p>	<p>16. Telephone No.</p> <p>(202) 545 1333</p>	<p>18. Remittance Address (if different than item 15).</p>
	<p>17. E-mail address</p> <p>vijay@consys-inc.net</p>	

20. The offeror agrees to furnish any required performance and payment bonds.

The offeror acknowledges receipt of amendments to the solicitation (number and date each) See Section L.11

Amendment	1								
Number									
Date	3/23/18								

22. Name and Title of person authorized to sign offer (Type or Print) VIJAY R. KASIMSETTY VP	22A. Signature 	22B. Offer 1,497,786.00
--	---	----------------------------

3. Amount	24. Accounting and Appropriation data
25. PAYMENT WILL BE MADE BY: Office of the Chief Financial Officer 4200 Connecticut Avenue, NW Washington, D.C. 20008	26. Submit invoices as instructed in Section G of this solicitation (Contract Administration Data)

<p>27. [] NEGOTIATED AGREEMENT (The Contractor shall sign this document and return__ copies to the issuing office). The Contractor agrees to furnish and deliver all items or perform all work requirements for the consideration stated in this contract. The rights and obligations of the parties of this contract shall be governed by (a) this contract award, (b) the solicitation, and (c) the clauses, representations, certifications and specifications incorporated by reference in or attached to this contract.</p>		<p>28. [] AWARD (The Contractor is not required to sign this document). Your offer on this solicitation is hereby accepted. This award consummates the contract which consists of (a) the solicitation and your offer, and (b) this contract award. No further contractual document is necessary.</p>	
<p>29. Name and Title of Contractor or Person Authorized to Sign (Type or Print)</p>		<p>30. Name of CO (Type or Print)</p> <p>Mary Ann Harris, Contracting Officer</p>	
<p>29A. Signature</p>	<p>29B. Date</p>	<p>30A. Signature</p> <p><i>Mary Ann Harris</i></p>	<p>30B. Date</p> <p>5/1/2019</p>

PART I**SECTION B: SCHEDULE FOR CONSTRUCTION, ALTERATIONS, REPAIRS PRICE**

B.1 The University of the District of Columbia, Office of Strategic Sourcing & Procurement is seeking a Contractor to provide all labor, materials, equipment and supervision for demolition and replacement of Building 46E Theater Lighting Upgrades, located at 4200 Connecticut Avenue N.W., Washington DC 20008 Van Ness Campus in accordance with the University's Specifications and Drawings titled "Van Ness Campus Theatre Lighting Upgrade".

B.2 **Designation of Solicitation for the Certified Business Enterprise Set-Aside Market Only**

This Invitation for Bids is designated for Certified Business Enterprise (CBE) bidders only under the provisions of the "Small, Local, and Disadvantaged Business Enterprise and Assistance Act of 2005", as amended, D.C. Official Code § 2-218.01 *et seq.* (the Act).

A CBE must be certified in the procurement category of Building Construction (General Including Maintenance and Repair Services) in order to be eligible to submit a bid in response to this solicitation.

B.3 **SUBCONTRACTING PLAN**

The bidder shall submit a statement detailing its subcontracting plan pursuant to approval by the CO. This plan shall meet the requirements described under Section M.1.9 of this solicitation. A Contractor cannot make any changes to its subcontracting plan without prior written approval by the CO. The approved plan will be incorporated into and become part of the contract.

B.4 The University contemplates award of a firm fixed-price contract. The estimated price range for this requirement is between \$500,000.00 - \$1,300,000.00.

B.5 The Contractor must bid lump sum firm fixed price for the following Contract Line Item Number (CLIN) as described below.

<u>CLIN</u>	<u>DESCRIPTION</u>	<u>LUMP SUM PRICE</u>
01	Demolition and replacement of Building 46E Theater Lighting Upgrades as detailed in the Construction Drawings, Specifications and Scope of Work as described in this solicitation package.	\$ <u>1,497,786.00</u>

LUMP SUM PRICE (CLIN 0001) IN WORDS

One Million Four Hundred Ninety Seven Thousand Seven Hundred Eighty Six & 00/100

6 PRICE BREAKDOWN FORM**CONSYS, Inc. - BAFO (05/21/18)**

The bidder must complete this breakdown of prices and submit it with its bid. In case of any discrepancy in the total bid price entered here and the lump sum price in B.5 shall govern. All bidders must submit line item costs for the deductive option as specified in the construction documents to qualify the submitted Lump Sum Bid Price on CLIN 0001, Section B.5, Part I of IFB.

DIVISION NO. *	DESCRIPTION	TOTAL PRICE BREAKDOWN
Div. 01	General Requirements	\$ 93,257.00
Div. 02	Existing Conditions	\$ 3,500.00
Div. 03	Concrete - None	\$ 0.00
Div. 04	Masonry - None	\$ 0.00
Div. 05	Metals	\$ 0.00
Div. 06	Wood, Plastic, & Composites	\$ 0.00
Div. 07	Thermal and Moisture Protection	\$ 3,500.00
Div. 08	Openings - None	\$ 0.00
Div. 09	Finishes	\$ 3,500.00
Div. 10	Specialties	\$ 0.00
Div. 11	Electrical	\$ 958,243.00
Div. 12	Furnishings - None	\$ 0.00
Div. 21	Fire Suppression	\$ 0.00
Div. 22	Plumbing	\$ 0.00
Div. 23	Heating, Ventilating & Air Conditioning	\$ 0.00
Div. 26	Electrical	\$ 435,786.00
Div. 27	Communications	\$ 0.00
Div. 28	Electronic Safety & Security	\$ 0.00
Lump Sum Bid Price	Lump Sum Bid Price (copy from CLIN 0001, Section B.5, Part I of IFB)	\$ 1,497,786.00
Deductive option	Architectural House Lighting	\$ 50,214.00
Deductive option	Stage Lighting Fixtures	\$ 497,786.00

* DIVISION means a discrete component of the work for which a separate price is requested. The "Total Price Breakdown" is the sum total of all components, and must equal the Lump Sum Bid Price of CLIN 0001.



DEPT. OF SMALL & LOCAL BUSINESS DEVELOPMENT

441 4th Street NW, Suite 850N
Washington, DC 20001
202.727.3900 | 202.724.3786 fax
<http://dslbd.dc.gov>

March 5, 2018

Vijay R Kasimsetty
Consys, Inc.
732 KENNEDY STREET NW
WASHINGTON, DC 20011
Re: LSDZX74025032021

Dear Kasimsetty:

The District of Columbia Department of Small and Local Business Development (DSLBD) on 3/5/2018, approved your application for Recertification and registered your business in the Certified Business Enterprise (CBE) Program as established by the Small and Certified Business Enterprise Development and Assistance Act of 2005 (D.C. Law 20-0108; 52 DCR 7503), as amended. Please view your business profile on our website, <http://dslbd.dc.gov>. To view the profile, click, "Business Opportunities", "Find Certified Companies" and "Search for a certified company". In the CBE Certified Contractors page, you will be able to enter the first word of your business name using the "Business Name" field and click "Search" to locate your business. Click on the link for your business name to view your profile. The profile outlines your approved certification categories and NIGP codes. As of May 1, 2010, DSLBD sends paperless approval notices. This is the only notice you will receive. **PLEASE BE ADVISED, D.C. LAW 20-0108 MANDATES THE FOLLOWING REQUIREMENTS FOR CERTIFIED BUSINESSES:**

- This certification, pursuant to D.C. Law 20-0234, will expire three (3) years from the date of approval.
- Your application for re-certification should be submitted ninety (90) days prior to your expiration date. All certified businesses must comply with all provisions of D.C. Law 20-0108.
- Pursuant to D.C. Law 20-0108, DSLBD may revoke or suspend the certificate of registration of a business enterprise that is engaged in fraud or deceit in obtaining registration; furnished substantially inaccurate or incomplete ownership or financial

information; acted in gross negligence, incompetence, financial irresponsibility or misconduct in the practice or trade or profession.

- If there are any changes to your business that may affect your eligibility in the CBE program (e.g. change or address or ownership change), you must notify DSLBD within thirty (30) days of the date of the change. Notification of any changes can be sent to cbe.info@dc.gov.

CERTIFICATION NUMBER: LSDZX74025032021

DATE OF APPROVAL: 3/5/2018

DATE OF EXPIRATION: 3/5/2021

If you have any questions, please do not hesitate to contact the certification division on 202-727-3900 or at cbe.info@dc.gov.

Kristi C. Whitfield

Director

DC Department of Small and Local Business Development
441 4th Street, NW, Suite 850N, Washington, DC 20001

Phone: 202-727-3900

Email: Kristi.Whitfield@dc.gov

Web: <http://dslbd.dc.gov>

J.2.1

E.E.O. Compliance Documents



EEO POLICY COMMITMENT

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) SHALL NOT DISCRIMINATE AGAINST ANY EMPLOYEE OR APPLICANT FOR EMPLOYMENT BECAUSE OF THEIR ACTUAL OR PERCEIVED: RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PERSONAL APPEARANCE, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, OR DISABILITY.^{1,2}

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) AGREES TO EQUAL EMPLOYMENT OPPORTUNITY FOR ALL APPLICANTS AND THAT ALL EMPLOYEES ARE TREATED EQUALLY DURING EMPLOYMENT, WITHOUT REGARD TO THEIR ACTUAL OR PERCEIVED: RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PERSONAL APPEARANCE, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, OR DISABILITY. THE EQUAL EMPLOYMENT OPPORTUNITY SHALL INCLUDE, BUT NOT BE LIMITED TO THE FOLLOWING: (A) EMPLOYMENT, UPGRADING, OR TRANSFER; (B) RECRUITMENT OR RECRUITMENT ADVERTISING; (C) DEMOTION, LAYOFF, OR TERMINATION; (D) RATES OF PAY, OR OTHER FORMS OF COMPENSATION; AND (E) SELECTION FOR TRAINING AND APPRENTICESHIP.

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) AGREES TO POST IN CONSPICUOUS PLACES THE ABOVE PROVISIONS CONCERNING NON-DISCRIMINATION AND EQUAL EMPLOYMENT OPPORTUNITY.

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) SHALL STATE THAT ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION FOR EMPLOYMENT PURSUANT TO MAYOR'S ORDER 85-85, "COMPLIANCE WITH EQUAL EMPLOYMENT OPPORTUNITY OBLIGATIONS IN CONTRACTS" AND THE RULES IMPLEMENTING MAYORS ORDER 85-85, SUBSECTIONS 1103.2 THROUGH 1103.10 OF 33 DCR 4952 (PUBLISHED AUGUST 15, 1986).

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) AGREES TO PERMIT ACCESS TO ALL BOOKS, RECORDS, AND ACCOUNTS PERTAINING TO ITS EMPLOYMENT PRACTICES, AND TO REQUIRE EACH SUBCONTRACTOR TO PERMIT ACCESS TO BOOKS AND RECORDS.

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) AGREES TO COMPLY WITH ALL GUIDELINES FOR EQUAL EMPLOYMENT OPPORTUNITY APPLICABLE IN THE DISTRICT OF COLUMBIA, INCLUDING

¹ Familial status, source of income, place of residence, and place of business are not currently protected under the employment section of the D.C. Human Rights Act, D.C. Code §2-1402.11.

² D.C. Code § 2-1401.03(b) does not prohibit any religious organization, from limiting employment, admission or giving preference to persons of the same religion if such act is calculated to promote religious principles for which the organization is established or maintained. This shall not be construed to exempt such organizations from the general anti-discrimination provision under the D.C. Human Rights Act and Chapter 11 - Equal Employment Opportunity Requirements in DC Government Contracts, § 1103.2.



ASSURANCE OF COMPLIANCE WITH EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS

MAYOR'S ORDER 85-85, "COMPLIANCE WITH EQUAL OPPORTUNITY REQUIREMENTS IN CONTRACTS," EFFECTIVE JUNE 10, 1985, THE RULES IMPLEMENTING MAYOR'S ORDER 85-85, 33 DCR 4952 (PUBLISHED AUGUST 15, 1986), AND THE DC HUMAN RIGHTS ACT OF 1977, AS AMENDED, D.C. OFFICIAL CODE § 2-1401.01, ET SEQ. ("D.C. HUMAN RIGHTS ACT") ARE HEREBY INCLUDED AS PART OF THIS BID/PROPOSAL. THEREFORE, EACH BIDDER/OFFEROR SHALL INDICATE BELOW THEIR WRITTEN COMMITMENT TO ASSURE COMPLIANCE WITH MAYOR'S ORDER 85-85, THE IMPLEMENTING RULES, AND THE D.C. HUMAN RIGHTS ACT. FAILURE TO COMPLY WITH THESE PROVISIONS SHALL RESULT IN REJECTION OF THE RESPECTIVE BID/PROPOSAL.

I, Vijay Kasimsetty, THE AUTHORIZED REPRESENTATIVE OF

Consys, Inc.

(VENDER/COMPANY), HEREINAFTER REFERRED TO AS "THE CONTRACTOR," CERTIFY THAT THE CONTRACTOR IS FULLY AWARE OF ALL OF THE PROVISIONS OF MAYOR'S ORDER 85-85, EFFECTIVE JUNE 10, 1985, THE RULES IMPLEMENTING MAYOR'S ORDER 85-85, AND THE D.C. HUMAN RIGHTS ACT. I FURTHER CERTIFY AND ASSURE THAT THE CONTRACTOR WILL FULLY COMPLY WITH ALL APPLICABLE PROVISIONS REFERENCED HEREIN IF AWARDED THE D.C. GOVERNMENT CONTRACT REFERENCED BY THE CONTRACT NUMBER ENTERED BELOW. FURTHER, THE CONTRACTOR ACKNOWLEDGES AND UNDERSTANDS THAT THE AWARD OF SAID CONTRACT AND ITS CONTINUATION ARE SPECIFICALLY CONDITIONED UPON THE CONTRACTOR'S COMPLIANCE WITH THE ABOVE-CITED PROVISIONS.

Consys, Inc.

NAME OF CONTRACTOR

Vijay Kasimsetty

NAME OF AUTHORIZED REPRESENTATIVE


SIGNATURE OF AUTHORIZED REPRESENTATIVE

GF-2018-B-0037

CONTRACT NUMBER/SOLICITATION NUMBER/BID NUMBER

03/23/18

DATE

732 Kennedy Street, NW Washington, DC 20011
Office: (202) 545-1333; Fax: (202) 545-1339; e-mail: consys@consys-inc.net
www.consys-inc.net



MAYOR'S ORDER 85-85, THE RULES IMPLEMENTING MAYORS ORDER 85-85, AND THE DC HUMAN RIGHTS ACT OF 1977, AS AMENDED, D.C. OFFICIAL CODE § 2-1401.01, ET SEQ.

Consys, Inc.

(NAME OF CONTRACTOR/BUSINESS) SHALL INCLUDE AS EXPRESS CONTRACTUAL PROVISIONS THE LANGUAGE CONTAINED IN SUBSECTIONS 1103.2 THROUGH 1103.10 OF 33 DCR 4952 (PUBLISHED AUGUST 15, 1986), SO THAT SUCH PROVISIONS SHALL BE BINDING UPON EACH SUBCONTRACTOR OR VENDOR.

Vijay Kasimsetty Vice President

NAME OF AUTHORIZED OFFICIAL AND TITLE

SIGNATURE OF AUTHORIZED OFFICIAL

03/23/18

DATE

Consys, Inc.

FIRM/ORGANIZATION

732 Kennedy Street, NW Washington, DC 20011
Office: (202) 545-1333; Fax: (202) 545-1339; e-mail: consys@consys-inc.net
www.consys-inc.net

**EQUAL EMPLOYMENT OPPORTUNITY
EMPLOYER INFORMATION REPORT**

GOVERNMENT OF THE DISTRICT OF COLUMBIA DC Office of Contracting and Procurement Employer Information Report (EEO)	Reply to Office of Contracting and Procurement 441 4th Street, NW, Suite 700 South Washington, DC 20001
Instructions Two (2) copies of DAS 84-104 or Federal Form EEO-1 shall be submitted to the Office of Contracting and Procurement. One copy shall be retained by the Contractor.	
Section A - TYPE OF REPORT	
1. Indicate by marking in the appropriate box the type of reporting unit for which this copy of the form is submitted (MARK ONLY ONE BOX)	
<input type="checkbox"/> Single Establishment Employer <input checked="" type="checkbox"/> (1) Single-establishment Employer Report	<input type="checkbox"/> Main-establishment Employer <input type="checkbox"/> (2) Consolidated Report <input type="checkbox"/> (3) Headquarters Report <input type="checkbox"/> (4) Individual Establishment Report (submit one for each establishment with 25 or more employees) <input type="checkbox"/> (5) Special Report
2. Total number of reports being filed by this Company: _____	
Section B - COMPANY IDENTIFICATION (To be completed by all reporters) OFFICIAL	
1. Name of Company which owns or controls the establishment for which this report is filed Consys, Inc.	
OFFICIAL USE ONLY	
Address (Number and street) 732 Kennedy St, NW	
City or Town Washington	Country DC
State DC	Zip Code 20011
b. Employer Identification No. 52-2318636	
2. Establishment for which this report is filed. 732 Kennedy St, NW Washington, DC 20011	
OFFICIAL USE ONLY	
a. Name of establishment Address (Number and street) _____	
City or Town _____	Country _____
State _____	Zip Code _____
b. Employer Identification No. _____	
3. Parent or affiliated Company _____	
a. Name of parent or affiliated Company _____	
b. Employer Identification No. _____	
Address (Number and street) _____	
City or Town _____	Country _____
State _____	Zip Code _____
Section C - ESTABLISHMENT INFORMATION	
1. Is the business of the establishment the same as that reported last year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did not report last year Report on combined basis	
2. Is the major business activity at this establishment the same as that reported last year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No No report last year Report on combined basis	
OFFICIAL USE ONLY	
3. What is the major activity of this establishment? (Be specific, i.e., manufacturing steel castings, retail grocer, wholesale plumbing supplies, title insurance, etc. Include the specific type of product or service provided, as well as the principal business or industrial activity.) _____	
OFFICIAL USE ONLY	
4. MINORITY GROUP MEMBERS Indicate if you are a minority business enterprise (50% owned or 51% controlled by minority members) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION D - EMPLOYMENT DATA

Employment at this establishment - Report all permanent, temporary, or part-time employees including apprentices and on-the-job trainees unless specifically excluded as set forth in the instructions. Enter the appropriate figures on all lines and in all columns. Blank spaces will be considered as zero. In columns 1, 2, and 3, include ALL employees in the establishment including those in minority groups.

JOB CATEGORIES	TOTAL EMPLOYEES IN ESTABLISHMENT			MINORITY GROUP EMPLOYEES							
	Total Employees Including Minorities (1)	Total Male Including Minorities (2)	Total Female Including Minorities (3)	MALE				FEMALE			
				Black (4)	Asian (5)	American Indian (6)	Hispanic (7)	Black (8)	Asian (9)	American Indian (10)	Hispanic (11)
Officials and Managers	03	03				03					
Professionals											
Technicians											
Sales Workers											
Office and Clerical	03		03					03			
Craftsman (Skilled)	02	02		01			01				
Operative (Semi-Skilled)	02	01		01			01				
Laborers (Unskilled)	01			01							
Service Workers											
TOTAL	11	06	03	03		03	02	03			
Total employ reported in previous report	11	06	03	03		03	02	03			

(The trainees below should also be included in the figures for the appropriate occupation categories above)

Formal On The-Job Trainee	White collar (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Production											

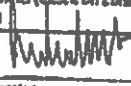
1 How was information as to race or ethnic group in Section D obtained?
 a. Visual Survey
 b. Employment Record
 c. Other Specify _____

2 Dates of report period used
 3 Pay period of last report submitted for this establishment

Section E - REMARKS Use this item to give any identification data appearing on last report which differs from that given above, explain major changes in classification or reporting units, and other pertinent information.

Section F - CERTIFICATION

Check 1 - All reports are accurate and were prepared in accordance with the instructions (check on consolidated only)
 One 2 - This report is accurate and was prepared in accordance with the instructions

Vijay Kasimsetty Vice President  03/23/18

Name of Authorized Official Title Signature Date

Name of person contact regarding this report (Type of print) Address (Number and street) City and State Zip Code Telephone Number Extension

Vijay Kasimsetty, VP 732 Kennedy St, NW Washington, DC 20011 202-545-1333


INFORMATION CITED HEREIN SHALL BE HELD IN CONFIDENCE.

SUBCONTRACT SUMMARY FORM

TOTAL DOLLAR AMOUNT SUBCONTRACTED TO MINORITY BUSINESS ENTERPRISES \$ _____
PERCENT OF PRIME CONTRACT. _____ %

PROJECTED GOALS AND TIMETABLES FOR FUTURE HIRING

MINORITY GROUP EMPLOYEES GOALS					TIMETABLES			
JOB CATEGORIES	MALE				FEMALE			
	Black	Asian	American Indian	Hispanic	Black	Asian	American Indian	Hispanic
Officials and Managers								
Professionals								
Technicians								
Sales Workers								
Office and Clerical								
Craftsman (Skilled)								
Operator (Semi-Skilled)								
Laborers (Unskilled)								
Service Workers								
TOTAL								

NAME OF AUTHORIZED OFFICIAL: Vijay Kasimsetty		TITLE: Vice President		SIGNATURE: 
FIRM NAME:	Consys, Inc.		TELEPHONE NO: 202-545-1333	DATE: 03/23/18

INDICATE IF THE PRIME UTILIZES A "MINORITY FINANCIAL INSTITUTION"

____ Yes ☒ No

NAME:

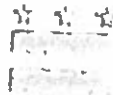
ADDRESS:

TYPE OF ACCOUNT/S:

J.2.2

Tax Certification Affidavit

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Chief Financial Officer
Office of Tax and Revenue



TAX CERTIFICATION AFFIDAVIT

THIS AFFIDAVIT IS TO BE COMPLETED ONLY BY THOSE WHO ARE REGISTERED TO CONDUCT BUSINESS IN THE DISTRICT OF COLUMBIA.

Date **03/23/18**

**Authorized Agent
Name of Organization/Entity
Business Address (include zip code)
Business Phone Number**

Consys, Inc.
732 Kennedy St, NW Washington, DC 20011
(202) 545-1333

**Authorized Agent
Principal Officer Name and Title
Square and Lot Information
Federal Identification Number
Contract Number
Unemployment Insurance Account No.**

Vijay Kasimsetty, Vice President

52-2318636
GF-2018-B-0007
132071

I hereby authorize the District of Columbia, Office of the Chief Financial Officer, Office of Tax and Revenue to release my tax information to an authorized representative of the District of Columbia agency with which I am seeking to enter into a contractual relationship. I understand that the information released will be limited to whether or not I am in compliance with the District of Columbia tax laws and regulations solely for the purpose of determining my eligibility to enter into a contractual relationship with a District of Columbia agency. I further authorize that this consent be valid for one year from the date of this authorization.

I hereby certify that I am in compliance with the applicable tax filing and payment requirements of the District of Columbia. The Office of Tax and Revenue is hereby authorized to verify the above information with the appropriate government authorities.

Signature of Authorizing Agent

Title

Vice President

The penalty for making false statement is a fine not to exceed \$5,000.00, imprisonment for not more than 180 days, or both, as prescribed by D.C. Official Code §47-4106.

J.2.3

First Source Employment Agreement

K.1

CERTIFICATION OF ELIGIBILITY

Vijay Kasimsetty
(President or Authorized Official of Bidder), being duly sworn (or

under penalty of perjury under the laws of the United States), certifies that, except as noted below, (the Company) or any person associated therewith in the capacity of (owner, partner, director, officer, principal investigator, project director, manager, auditor, or any position involving the administration of federal funds):

is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility under any Federal, University or State statutes;

has not been suspended, debarred, voluntarily excluded or determined ineligible by an Federal, University or state agency within the past three (3) years;

does not have a proposed debarment pending; and

has not been indicted, convicted, or had a civil judgment rendered against (it) by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.

Exceptions will not necessarily result in denial of award, but will be considered in determining acceptability of offeror. For any exception noted, indicate below to whom it applies, initiating agency, and dates of action. Providing false information may result in criminal prosecution or administrative sanctions.

Consys, Inc.

Contractor

03/23/18

Date

[Signature]
President or Authorized Official

Vice President

Title

The penalties for making false statements are prescribed in the Program Fraud Civil Remedies Act of 1986 (Public Law 99-509, 31 U.S.C. 3801-3812).

Subscribed and sworn before me this 23rd day of MARCH, 2018

At Washington DC
City and State

[Signature]
Notary Seal

[Signature]
Notary Public



K.2

**CERTIFICATION REGARDING DEBARMENT
SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION
LOWER TIER COVERED TRANSACTION**

Vijay Kasimsetty

_____, being duly sworn (or
(President or Authorized Official of Bidder)
under penalty of perjury under the laws of the United States), certifies that, except as noted below, (the
Company) or any person associated therewith in the capacity of (owner, partner, director, officer, principal
investigator, project director, manager, auditor, or any position involving the administration of federal
funds):

is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility under
any Federal, University or State statutes;

has not been suspended, debarred, voluntarily excluded or determined ineligible by an Federal, University
or state agency within the past three (3) years;

does not have a proposed debarment pending; and

has not been indicted, convicted, or had a civil judgment rendered against (it) by a court of competent
jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.

Exceptions will not necessarily result in denial of award, but will be considered in determining acceptability
of offeror. For any exception noted, indicate below to whom it applies, initiating agency, and dates of
action. Providing false information may result in criminal prosecution or administrative sanctions.

Consys, Inc.

Contractor

03/23/18

Date

President or Authorized Official

Vice President

Title

The penalties for making false statements are prescribed in the Program Fraud Civil Remedies Act of 1986
(Public Law 99-509, 31 U.S.C. 3801-3812).

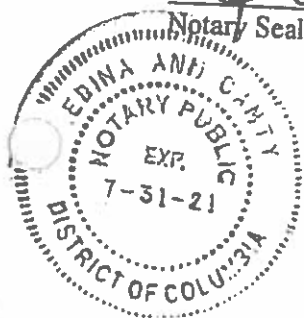
Subscribed and sworn before me this 23rd day March 2018

At Washington DC
City and State

Notary Seal

July 31, 2021

Notary Public



K.3

PAYMENT TO SUBCONTRACTOR AND SUPPLIERS CERTIFICATE

The Contractor, prior to receiving a progress payment, shall submit to the CA, certification that the Contractor has made and will make timely payments to his/her subcontractor and suppliers per his/her contractual arrangements with them.

The certification must be accompanied by a list of all subcontractors and suppliers who will receive payment from the invoice and the dollar amount. Payment will not be made until the Prime Contractor submits this information.

Certification shall be made on the following standard form.

Mary Ann Harris
Chief Contracting Officer
University of the District of Columbia
4200 Connecticut Avenue, NW
Washington, DC 20008
Phone: (202) 274-5752

I hereby certify:

I have made and/or will make timely payments to all my subcontractors and suppliers per my contractual arrangements with them.

03/23/18

Date

Consys, Inc.
Contractor/Company Name

Signature of Official

Vice President

Title



SBE SUBCONTRACTING PLAN

INSTRUCTIONS: All construction & non-construction contracts for **government-assisted projects (agency contracts & private project with District subsidy)** over \$250,000, shall require at least 35% of the amount of the contract (total amount of agency contract or total private project development costs) be subcontracted to Small Business Enterprises (SBE), if insufficient qualified SBEs to Certified Business Enterprises (CBE). The SBE Subcontracting Plan must list all SBE and CBE subcontracts at every tier. Once the SBE Subcontracting Plan is submitted for agency contracts, options & extensions, it can only be amended with DSLBD's consent.

SUBMISSION OF SBE SUBCONTRACTING PLAN:

^ For agency solicitations - submit to agency with bid/proposal.

^ For agency options & extensions - submit to agency before option or extension exercised.

^ For private projects - submit to DSLBD, agency project manager and District of Columbia Auditor, with each quarterly report. As private projects may not have awarded all contracts at the time the District subsidy is granted, the SBE Subcontracting Plan may be submitted simultaneously with each quarterly report and list all SBE/CBE subcontracts executed by the time of submission.

CREDIT: For each subcontract listed on the SBE Subcontracting Plan, credit will only be given for the portion of the subcontract performed, at every tier, by a SBE/CBE using *its own organization and resources*. **COPIES OF EACH FULLY EXECUTED SUBCONTRACT WITH SBEs and CBEs (AT EVERY TIER) MUST BE PROVIDED TO RECEIVE CREDIT.**

EXEMPTION: If the Beneficiary (Prime Contractor or Developer) is a CBE and will perform the ENTIRE government-assisted project with its *own organization and resources* and will NOT subcontract any portion of the services and goods, then the CBE is not required to subcontract 35% to SBEs.

BENEFICIARY (✓ which applies ☒ Prime Contractor or ☐ Developer) INFORMATION:

Company: CONSYS, Inc. Contact # (202) 545-1333 Email address: vijay@consys-inc.net

Street Address: 732 Kennedy Street, NW Washington DC 20011

✓ all that applies, Company is:

☒ a SBE ☒ a CBE ☒ CBE Certification Number: LSDZX74025032021

☐ WILL perform the ENTIRE agency contract or private project with its own organization and resources

☒ WILL subcontract a portion of the agency contract or private project

Company's point of contact for agency contract or private project:

Point of Contact: Vijay R. Kasimsetty

Title: VP

Contact # (202) 439-4123

Email address: vijay@consys-inc.net

Street Address: 732 Kennedy Street, NW Washington DC 20011

GOVERNMENT-ASSISTED PROJECT (✓ which applies ☒ Agency Contract or ☐ Private Project) INFORMATION:

AGENCY SOLICITATION

Solicitation Number GF-2018-B-0037

Solicitation Due Date: 03/29/2018

Agency : University of the District of Columbia

Total Dollar Amount of Contract: \$ 1,497,786.00

*Design-Build must include total contract amount for both design and build phase of project.

35% of Total Dollar Amount of Contract: \$ 524,225.10

Total Amount of All SBE/CBE subcontracts: \$ 190,450.00
(include every lower tier)

PRIVATE PROJECT

District Subsidy: _____
Agency Providing Subsidy: _____
Amount of District Subsidy: _____
Date District Subsidy Provided: _____

Project Name: _____

Project Address: _____

Total Development Project Budget: \$ _____
(include pre-construction and construction costs)

35% of Total Development Project Budget: \$ _____

Total Amount of All SBE/CBE subcontracts: \$ _____
(include every lower tier)



SBE/ CBE SUBCONTRACTORS (FOR EACH TIER):

SBE/ CBE SUBCONTRACTOR INFORMATION: (For design-build projects, the SBE Subcontracting Plan is not required to be submitted for preconstruction services; however, a full SBE Subcontracting Plan (35% of the contract amount including total design and build costs) is required to be submitted before entering into a guaranteed maximum price or contract authorizing construction.)			
SBE/ CBE Company	Address/Telephone No./ Email	Subcontractor Tier (1 st , 2 nd , 3 rd , etc.)	Description of Subcontract scope of work to be PERFORMED WITH SBE/CBEs OWN ORGANIZATION & RESOURCES
Domion Electrical	22 K Street, NE Washington, DC 20002	1 st	Electrical Equipment
Period of subcontract: <u>120 days from NTP</u> Price to be paid to the SBE/CBE Subcontractor: \$ <u>190,450.00</u> ✓all that applies, Subcontractor is: <input checked="" type="checkbox"/> a SBE <input checked="" type="checkbox"/> a CBE <input checked="" type="checkbox"/> CBE Certification #: <u>LZ85063062018</u> <input checked="" type="checkbox"/> SBE/CBE will perform the ENTIRE subcontract with its own organization and resources <input type="checkbox"/> SBE/CBE will subcontract a portion of the subcontract (MUST LIST EACH LOWER TIER SBE/ CBE SUBCONTRACTS)			SBE/ CBE Point of Contact Name: <u>Gerald Jackson</u> Title: <u>Owner</u> Telephone Number: <u>(202) 789-0500</u> Email Address: <u>gjacks@descowashington.com</u>

SBE/ CBE SUBCONTRACTOR INFORMATION: (For design-build projects, the SBE Subcontracting Plan is not required to be submitted for preconstruction services; however, a full SBE Subcontracting Plan (35% of the contract amount including total design and build costs) is required to be submitted before entering into a guaranteed maximum price or contract authorizing construction.)			
SBE/ CBE Company	Address/Telephone No./ Email	Subcontractor Tier (1 st , 2 nd , 3 rd , etc.)	Description of Subcontract scope of work to be PERFORMED WITH SBE/CBEs OWN ORGANIZATION & RESOURCES
_____	_____	<u>Select Tier</u>	_____
Period of subcontract: _____ Price to be paid to the SBE/CBE Subcontractor: \$ _____ ✓all that applies, Subcontractor is: <input type="checkbox"/> a SBE <input type="checkbox"/> a CBE <input type="checkbox"/> CBE Certification # _____ <input type="checkbox"/> SBE/CBE will perform the ENTIRE subcontract with its own organization and resources <input type="checkbox"/> SBE/CBE will subcontract a portion of the subcontract (MUST LIST EACH LOWER TIER SBE/ CBE SUBCONTRACTS)			SBE/ CBE Point of Contact Name: _____ Title: _____ Telephone Number: _____ Email Address: _____

I Vijay R. Kasimsetty, VP of CONSYS, Inc.,
(Name) (Title) (Prime Contractor/ Developer)

Vijay
Kasimsetty
(Signature)
Digitally signed by Vijay Kasimsetty
DN: cn=Vijay Kasimsetty,
o=Consys, Inc., ou=Vice President,
email=vijay@consys-inc.net, c=US
Date: 2018.10.16 (Date) 04:00'

swear or affirm the above is true and accurate

Complete additional copies as needed.



☐ AGENCY CONTRACTING OFFICER'S USE ONLY OR ☐ AGENCY PROJECT MANAGER'S USE ONLY
(✓ which applies. Only one option should be selected.)

AGENCY CONTRACT AWARD	PRIVATE PROJECT SUBSIDY AWARD
Agency: <u>UDC - Office of Strategic Sourcing + Procurement</u>	Agency Providing Subsidy: _____
Prime Contractor: <u>CONSUS, INC</u>	District Subsidy: _____
Contract Number: <u>GE-2018-C-0037</u>	Developer: _____
Date SBE Subcontracting Plan Accepted: _____	Amount of District Subsidy: _____
Date agency contract signed: _____	Date District Subsidy Provided/ contract signed: _____
Anticipated Start Date of Contract: <u>JUNE 3, 2019</u>	Anticipated Start Date of Project: _____
Anticipated End Date of Contract: <u>JANUARY 31, 2020</u>	Anticipated End Date of Project: _____
Total Dollar Amount of Contract: <u>\$1,497,786.00</u>	Project Name: _____
	Project Address: _____
*Design-Build must include total contract amount for both design and build phase of project.	Total Development Project Budget: \$ _____ (include pre-construction and construction costs)
35% of Total Contract Amount: <u>\$524,225.10</u>	35% of Total Development Project Budget: \$ _____
Total Amount of All SBE/CBE subcontracts: <u>\$190,450.00</u> (include every tier)	Total Amount of All SBE/CBE subcontracts: \$ _____ (include every lower tier)
(✓ if applies) <input type="checkbox"/> Base Period Contract -- Option/Extension Period: _____ <input type="checkbox"/> Multi-year Contract First year (period) of Contract: _____ Current year (period) of Contract: _____ <input type="checkbox"/> Design-Build --Date of Guaranteed Contract: _____ <input type="checkbox"/> Check if prime contractor is a CBE and will perform the ENTIRE government-assisted project (agency contract) with its own organization and resources and NOT subcontract any portion of services or goods.	<input type="checkbox"/> Check if developer is a CBE and will perform the ENTIRE government-assisted project (private project) with its own organization and resources and NOT subcontract any portion of services or goods.

☒ AGENCY CONTRACTING OFFICER'S AFFIRMATION OR ☐ AGENCY PROJECT MANAGER'S AFFIRMATION
(✓ which applies)

The Below Agency Contracting Officer or Agency Project Manager Affirms the following (✓ to affirm):

- ☐ If the Beneficiary is a CBE, DSLBD was contacted to confirm Beneficiary's CBE certification;
- ☐ The fully executed Contract (Base or Option or Extension or Multi-Year) or subsidy document, between the Beneficiary and Agency, was emailed to DSLBD @ Compliance.Enforcement@dc.gov within five (5) days of signing;
- ☒ **FOR AGENCY CONTRACT** the SBE Subcontracting Plan, submitted by Beneficiary, was emailed to DSLBD @ Compliance.Enforcement@dc.gov within five (5) days of signing the contract between the Beneficiary and Agency.

Mary Ann Harris
Name of Agency Contracting Officer or Agency Project Manager


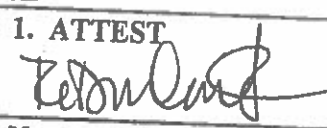
Director, CCO
Title of Agency Contracting Officer or Agency Project Manager

Mary Ann Harris
Signature

5/1/2019
Date


K.5

GOVERNMENT OF THE DISTRICT OF COLUMBIA

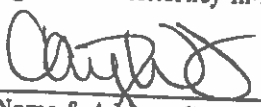
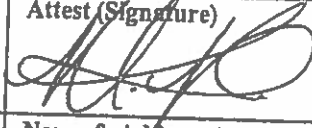
BID BOND (See Instructions on 2 nd page)		Date Bond Executed: March 28, 2018 (Must Not be Later Than Bid Opening Date)		
PRINCIPAL (Legal Name and Address) Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011		TYPE OF ORGANIZATION ("X")		
		<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT VENTURE <input checked="" type="checkbox"/> CORPORATION		
		STATE OF INCORPORATION DC		
SURETY(IES) (Name(s) and Address(es)) Hanover Insurance Company 440 Lincoln Street Worcester, MA 01653		PENAL SUM OF BOND		
		AMOUNT NOT TO EXCEED		
		MILLION(S)	THOUSAND(S)	HUNDRED(S)
		BID IDENTIFICATION		
		BID OPENING DATE INVITATION NO.		
		March 28, 2018 GF-2018-B-0037		
<p>KNOW ALL MEN BY THESE PRESENTS, that we, the Principal and Surety(ies) hereto are firmly bound to the University Government, a municipal corporation, hereinafter called "the University", in the above penal sum for the payment of which we bind ourselves, our heirs, executors, and successors, jointly and severally; Provided that, where the Surety(ies) are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly" and "severally" only for the purpose of allowing a joint action against any or all of us, and for all other purposes each Surety binds itself, jointly and severally with the Principal, for the payment of such sum only as is set forth opposite the name of such Surety, but if no limit of liability is indicated, the limit of liability shall be the full amount of the penal sum.</p> <p>THE CONDITION OF THIS OBLIGATION IS SUCH that whereas the Principal has submitted the bid identified above. NOW THEREFORE, if the Principal shall not withdraw said bid within the period specified therein after the receipt of the same, or, no period be specified, within ninety (90) calendar days after said receipt, and shall within the period specified therefore, or, if no period be specified, within ten (10) calendar days after being called upon to do so, furnish Performance & Payment Bonds with good and sufficient surety, as may be required, for the faithful performance and proper fulfillment of the Contract, and for the protection of all persons supplying labor and material in the prosecution of the work provided for in such Contract or, in the event of withdrawal of said bid, within the period specified, or the failure to furnish such bond within the time specified, if the Principal shall pay the University the difference between the amount specified in said bid and the amount for which the University may procure the required work and/or supplies, if the latter amount be in excess of the former, then the above obligations shall be void and of no effect, otherwise to remain in full force and virtue. Each Surety executing this bond hereby agrees that its obligation shall not be impaired by extension(s) of time for acceptance of the bid that the Principal may grant to the University, notice of which extension(s) to Surety (ies) being hereby waived: Provided that such waiver of notice shall apply only with respect to extensions aggregating not more than sixty (60) calendar days in addition to the period originally allowed for acceptance of the bid.</p> <p>IN WITNESS WHEREOF, the Principal and Surety (ies) have executed this bid bond and have affixed their seals on the date set forth above.</p>				
PRINCIPAL				
1. SIGNATURE Seal 		1. ATTEST 		Corporate Seal
Name & Title (typed) VIJAY R. KASIMSETTY /VP		Name & Title (typed) REDINA CANTY OFFICE MANAGER		
2. SIGNATURE Seal		2. ATTEST		Corporate Seal
Name & Title (typed)		Name & Title (typed)		

CERTIFICATE AS TO CORPORATION

I, Hemanchal J Narain, certify that I am Hemanchal J Narain, Secretary of the Corporation, named as Principal herein, that Vijay R. Kasimsetty, who signed this bond, on behalf of the Principal, was then of said Corporation; that I know his signature, and his signature thereto is genuine; that said bond was duly signed and sealed for and in behalf of said Corporation by authority of its governing body, and is within the scope of its corporate powers.


Secretary of Corporation

SURETY(IES)

1. Name & Address (typed) Hanover Insurance Company 440 Lincoln Street Worcester, MA 01653	State of Inc. NH	Liability Limit \$136,684,000	Corporate Seal
Signature of Attorney-in-Fact 	Attest (Signature) 		
Name & Address (typed) Courtney W. Judge, Attorney-In-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030	Name & Address (typed) Mal-Ling Rodriguez, Assistant 303 International Circle, Suite 160 Hunt Valley, MD 21030		Corporate Seal
1. Name & Address (typed)	State of Inc.	Liability Limit	
Signature of Attorney-in-Fact	Attest (Signature)		
Name & Address (typed)	Name & Address (typed)		

INSTRUCTIONS

1. This form shall be used whenever a bid guaranty is required in connection with construction, alteration and repair work.
2. Corporations name should appear exactly as it does on Corporate Seal and inserted in the space designated "Principal" on the face of this form. If practicable, bond should be signed by the President or Vice President; if signed by other official, evidence of authority must be furnished. Such evidence should be in the form of an Extract or Minutes of a Meeting of the Board of Directors, or Extract of Bylaws, certified by the Corporate Secretary, or Assistant Secretary and Corporate Seal affixed thereto. CERTIFICATE AS TO CORPORATION must be executed by Corporate Secretary or Assistant Secretary.
3. Corporations executing the bond as sureties must be among those appearing on the U. S. Treasury Department's List of approved sureties and must be acting within the limitations set forth therein, and shall be licensed by the Insurance Administration, Department of Consumer and Regulatory Affairs, to do business in the District. The surety shall attach hereto an adequate Power-Of-Attorney for each representative signing the bond.
4. Corporations executing the bond shall affix their Corporate Seals. Individuals shall sign full first name, middle initial and last name opposite the word "seal", two witnesses must be supplied, and their addresses, under the word "attest". If executed in Maine or New Hampshire, an adhesive seal shall be affixed.
5. Names of all partners must be set out in body of bond form, with the recital that they are partners composing a firm, naming it, and all members of the firm shall execute the bond as individuals. Each signature must be witnessed by two persons and addresses supplied.

THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

POWERS OF ATTORNEY
CERTIFIED COPY

KNOW ALL MEN BY THESE PRESENTS: That THE HANOVER INSURANCE COMPANY and MASSACHUSETTS BAY INSURANCE COMPANY, both being corporations organized and existing under the laws of the State of New Hampshire, and CITIZENS INSURANCE COMPANY OF AMERICA, a corporation organized and existing under the laws of the State of Michigan, do hereby constitute and appoint

Thomas A. Whipple, Douglas J. Dixon, Laura E. Scholze, Courtney W. Judge and/or Brian S. McCoog

of Timonium, MD and each is a true and lawful Attorney(s)-in-fact to sign, execute, seal, acknowledge and deliver for, and on its behalf, and as its act and deed any place within the United States, or, if the following line be filled in, only within the area therein designated any and all bonds, recognizances, undertakings, contracts of indemnity or other writings obligatory in the nature thereof, as follows:

Any such obligations in the United States, not to exceed Twenty Million and No/100 (\$20,000,000) in any single instance

and said companies hereby ratify and confirm all and whatsoever said Attorney(s)-in-fact may lawfully do in the premises by virtue of these presents. These appointments are made under and by authority of the following Resolution passed by the Board of Directors of said Companies which resolutions are still in effect:

"RESOLVED, That the President or any Vice President, in conjunction with any Vice President, be and they are hereby authorized and empowered to appoint Attorneys-in-fact of the Company, in its name and as its acts, to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company in their own proper persons." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

IN WITNESS WHEREOF, THE HANOVER INSURANCE COMPANY, MASSACHUSETTS BAY INSURANCE COMPANY and CITIZENS INSURANCE COMPANY OF AMERICA have caused these presents to be sealed with their respective corporate seals, duly attested by two Vice Presidents, this 14th day of November 2011.

THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

Robert Thomas, Vice President

Mark Fitzgerald, Vice President

THE COMMONWEALTH OF MASSACHUSETTS)
COUNTY OF WORCESTER) ss.

On this 14th day of November 2011 before me came the above named Vice Presidents of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, to me personally known to be the individuals and officers described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, respectively, and that the said corporate seals and their signatures as officers were duly affixed and subscribed to said instrument by the authority and direction of said Corporations.

BARBARA A. GARLICK
Notary Public
Commonwealth of Massachusetts
My Commission Expires Sept. 21, 2018

Barbara A. Garlick, Notary Public
My Commission Expires September 21, 2018

I, the undersigned Vice President of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, hereby certify that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Powers of Attorney are still in force and effect.

This Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America.

"RESOLVED, That any and all Powers of Attorney and Certified Copies of such Powers of Attorney and certification in respect thereto, granted and executed by the President or any Vice President in conjunction with any Vice President of the Company, shall be binding on the Company to the same extent as if all signatures therein were manually affixed, even though one or more of any such signatures thereon may be facsimile." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

GIVEN under my hand and the seals of said Companies, at Worcester, Massachusetts, this 28 day of March 2018.

THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA

Glenn Margolian, Vice President

K.6

CERTIFICATION OF INDEPENDENT PRICE DETERMINATION

- A. Each signature of the Bidder is considered to be a certification by the signatory that:
- (a) The prices in this Bid have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any Bidder or competitor relating to:
 - (i) those prices
 - (ii) the intention to submit a Bid, or
 - (iii) the methods or factors used to calculate the prices in the Bid;
 - (b) The prices in this Contract have not been and will not be knowingly disclosed by the Bidder, directly, to any other Bidder or competitor before Contract opening unless otherwise required by law; and
 - (c) No attempt has been made or will be made by the Bidder to induce any other concern to submit or not to submit a Bid for the purpose of restricting competition.
- B. Each signature on the bid is considered to be a certification by the signatory that the signatory;
- (a) Is the person in the Bidder's organization responsible for determining the prices being offered in this Bid, and that the signatory has not participated and will not participate in any action contrary to subparagraphs A(a) through A(c) above; or
 - (i) Has been authorized, in writing, to act as agent for the following principals in certifying that those principals have not participated, and will not participate in any action contrary to subparagraphs A(a) through A(c) above:

Vijay Kasimsetty
 - (insert full name of person(s) in the organization responsible for determining the prices offered in this Contract and the title of his or her position in the Bidder's organization);
 - (ii) As an authorized agent, does certify that the principals named in subsection B (2)(i) above have not participated, and will not participate, in any action contrary to subparagraphs A(a) through A(c) above; and
 - (iii) As an agent, has not participated, and will not participate, in any action contrary to subparagraphs A(a) through A(c) above.
- C. If the Bidder deletes or modifies subparagraph A(b) above, the Bidder must furnish with its offer a signed statement setting forth in detail the circumstances of the disclosure.

K.7

EMPLOYMENT AGREEMENT

For all new employment resulting from this contract or subcontracts hereto, as defined in Mayor's Order 83-265 and implementing instructions, the Contractor shall use its best efforts to comply with the following basic goal and objectives for utilization of bona fide residents of the University in each project's labor force:

at least fifty-one (51) percent of apprentices and trainees employed shall be residents of the District registered in programs approved by the University Apprenticeship Council.

The Contractor shall negotiate an Employment Agreement with the DOES for jobs created as a result of this contract. The DOES shall be the Contractor's first source of referral for qualified apprentices and trainees in the implementation of employment goals contained in this clause.

03/23/18

Date



Authorized Signature

K.8

BUY AMERICAN CERTIFICATION

The Bidder hereby certifies that each end product, except the end products listed below, is a domestic end product, and that components of unknown origin are considered to have been mined, produced, or manufactured outside the United States.

N/A

EXCLUDED END PRODUCTS

N/A

COUNTRY OF ORIGIN

K.9

TYPE OF BUSINESS ORGANIZATION

The Bidder, by checking the applicable box, represents that

(1) It operates as:

a corporation incorporated under the laws of the State of District of Columbia
an individual,
a partnership,
a nonprofit organization, or
a joint venture; or

(2) If the Bidder is a foreign entity, it operates as:

an individual,
a joint venture, or
a corporation registered for business in N/A
(Country)

L.17 ACCEPTANCE PERIOD:

The bidder agrees that its bid remains valid for a period of 90 calendar days from the opening date/time of the bid opening. However, if for administrative reasons, the University is unable to make an award within this time period, the CO will request the Contractor and his/her surety to extend the bid bond for an additional sixty (60) days.

L.18 LEGAL STATUS OF BIDDER:

L.18.1 Each bid must provide the following information:

L.18.2 Name, Address, Telephone Number, Federal Tax Identification Number and DUNS Number of Bidder;

L.18.3 District license, registration or certification, if required by law to obtain such license, registration or certification. If the bidder is a corporation or partnership and does not provide a copy of its license, registration or certification to transact business in the District, the bid shall certify its intent to obtain the necessary license, registration or certification prior to contract award or its exemption from such requirements;

L.18.4 If the Bidder is a partnership or joint venture, names of general partners or joint ventures and copies of any joint venture or teaming agreements; and

L.18.5 The University reserves the right to request additional information regarding the Bidder's organizational status.

L.19 LOCAL OPERATING FACILITIES:

The Contractor shall provide and maintain its own operating quarters. Such quarters shall be of sufficient size and capacity and have the necessary facilities to adequately carry out the work to be performed under the contract.

732 Kennedy St, NW Washington, DC 20011

202-545-1333/202-545-1339

LOCAL ADDRESS

LOCAL TELEPHONE NUMBER/FAX

202-439-4123

CELLULAR NUMBER

EMERGENCY NUMBER

EMERGENCY CONTACT PERSON

L.20 TECHNICAL INFORMATION:

For technical information concerning this solicitation, please contact:

Alan D. Walsh
Project Manager
Capital Construction Division
4200 Connecticut Avenue, NW
Washington, DC 20008

★ ★ ★

GOVERNMENT
OF THE
DISTRICT OF COLUMBIA
Muriel Bowser, Mayor

Department of Consumer and Regulatory Affairs

Business License Division
1100 4th Street S.W.
Washington DC 20024

Date Issued: 2/7/2018
Category: 4105
License#: 70102015
License Period: 3/1/2018 - 2/28/2020

BASIC BUSINESS LICENSE

Billing Name and Address:
CONSYS, INC.
C/O RAJ SHUKLA

Premise/Application's Name and Address:
CONSYS, INC.

Registered Agent's Name and Address:
HEMANCHAL NARAIN

732 KENNEDY ST NW
WASHINGTON, DC 20011

732 KENNEDY ST NW
WASHINGTON, DC 20011

1427 PARKWOOD PL NW
WASHINGTON DC 20010

Owner's Name
Corp. Name CONSYS, INC.
Trade Name

CofO/HOP#:87522	SSL: 3152 0841	Zone: C-2-A	Ward: 4	ANC:	PERM NO.
CLASS: A		UNITS: 0			

General Service and Repair - Gen Contr/Construction Mngr

— THE LAW REQUIRES THIS LICENSE TO BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES —

*License Effective from the later of Issued or Start of License-Period Date

Melinda Bolling
Director:
Melinda Bolling

DISCLAIMER

This is to confirm that the contractor listed below has no legal claim(s) against the District of Columbia. If the contractor does have legal claim(s) against the District of Columbia, please list them below:

Contractor: Consys, Inc.

Address: 732 Kennedy Street, NW

Washington, DC 20011

Vijay R.
Kasimsetty

Digitally signed by Vijay R. Kasimsetty,
DN: cn = Vijay R. Kasimsetty, o = CONSYS,
inc., ou, email = vijay@consysinc.net,
c = US
Date: 2018.08.02 18:03:29 -0400

08/02/2018

Signature

Date

Vice President

Title

Claim(s) against the District:

1. NONE
2. NONE
3. NONE
4. NONE

- No multiyear contracts or extended contracts which are not in compliance with the subcontracting requirements at the time of the contemplated exercise of the option or extension, shall be renewed or extended, and any such option or extension shall be void.
- **For Private Projects** - submit revised SBE Subcontracting Plans to DSLBD, agency project manager and Office of the District of Columbia Auditor (ODCA), with each quarterly report.
- **For Agency Contracts for Design-Build Projects** - the SBE Subcontracting Plan is not required to be submitted for preconstruction services; however, a full SBE Subcontracting Plan (35% of the amount of the contract including total design and build costs) is required before entering into a guaranteed maximum price or contract authorizing construction.

Special Requirements

- Each construction and non-construction Government-assisted project for which a CBE is selected as a Beneficiary, shall require the CBE perform at least 35% of the contracting effort with its own organization and resources and, if it subcontracts, 35% of the subcontracted effort shall be with CBEs.
- Each construction and non-construction Government-assisted project for which a CBE is utilized to meet the 35% subcontracting requirement, shall require the CBE perform at least 35% of the contracting effort with its own organization and resources.
- Each construction and non-construction Government-assisted project of **\$1 million or less** for which a CBE is selected as a Beneficiary shall include a requirement that the CBE perform at least 50% of the on-site work with its own workforce.

Special Exemption

- If the Beneficiary is a CBE and will perform the *ENTIRE* government-assisted project with its own organization and resources and NOT subcontract any portion of the government-assisted project, then the CBE is not required to subcontract 35% to SBEs.

Special Requirements for Certified Joint Venture Beneficiaries

- Each construction and non-construction Government-assisted project for which a certified joint venture is selected as a Beneficiary shall include a requirement that the CBE member of the joint venture perform at least 50% of the contracting

effort with its own organization and resources and, if it subcontracts, 35% of the subcontracted effort shall be with CBEs.

Mandatory Meetings

- The Beneficiary of a Government-assisted project **shall meet with DSLBD and ODCA within 10 days of the execution of this Acknowledgment Form.**
- Thereafter, the Beneficiary of a Government-assisted project shall meet on an annual basis with DSLBD and ODCA to provide an update of the subcontracting plan for utilization of SBEs and CBEs.

Compliance Reporting Requirements

- The Beneficiary of a Government-assisted project shall submit the following reports to DSLBD, the agency contracting officer, project manager, and ODCA:
 - SBE Subcontracting Plan;
 - Completed Quarterly Reports;
 - Completed Vendor Verification Forms; and
 - Each fully executed subcontract with each subcontractor listed on the SBE Subcontracting Plan (required to receive credit towards the 35% SBE subcontracting requirement).
- The Beneficiary can receive the vendor verification forms, and any other compliance forms at the initial meeting with DSLBD.

Enforcement and Penalties

- If a CBE Beneficiary that received points or a price reduction performs less than 35% of the total contracting effort with its own organization and resources, then the CBE shall be subject to the penalties and fines of section 2-218.63 of the Act.
- If the CBE member of a certified joint venture Beneficiary that received points or a price reduction, performs less than 50% of the total contracting effort with its own organization and resources, then the joint venture and the CBE shall be subject to the penalties and fines of section 2-218.63 of the Act.
- For any subcontracting plan required by law, the Beneficiary shall be deemed to have breached the subcontracting plan for utilization of SBEs or CBEs in the performance of a contract if the Beneficiary:

- Fails to submit subcontracting plan monitoring or compliance reports or other required subcontracting information in a reasonably timely manner;
 - Submits a monitoring or compliance report, or other required subcontracting information containing a materially false statement; or
 - Fails to meet the subcontracting requirements of section 2-218.46 of the Act.
- A Beneficiary that is found to have breached a subcontracting plan for utilization of certified business enterprises shall be subject to the imposition of penalties, including monetary fines, pursuant to section 2-218.63 of the Act.
 - If DSLBD determines that a Beneficiary has failed to use commercially reasonable best efforts to meet the subcontracting requirements of section 2-218.46 of the Act, DSLBD shall assess a civil penalty equal to 10% of the dollar volume of the contract that the Beneficiary was required but failed to subcontract. The civil penalty will be in addition to any other penalties or causes of action that may be available.

Pertinent DEFINITIONS in the Act

Agency means: an agency, department, office, board, commission, authority, or other instrumentality of the District government, with or without legal existence separate from that of the District government.

Beneficiary means: a business enterprise that is the **prime contractor or developer** on a government-assisted project.

Government-assisted project means:

- (A) A *contract* executed by an agency on behalf of the District or pursuant to statutory authority that involves District funds or, to the extent not prohibited by federal law, funds that the District administers in accordance with a federal grant or otherwise;
- (B) A *project* funded in whole or in part by District funds;
- (C) A *project* that receives a loan or grant from a District agency;
- (D) A *project* that receives bonds or notes or the proceeds thereof issued by a District agency, including tax increment financing or payment in lieu of tax bonds and notes;
- (E) A *project* that receives District tax exemptions or abatements that are specific to the project and not to the nature of the entity undertaking the project, such as a religious institution or nonprofit corporation; or
- (F) A *development project* conducted pursuant to a disposition under section 1 of An Act Authorizing the sale of certain real estate in the District of Columbia no longer required for public purposes, approved August 5, 1939 (53 Stat. 1211; D.C. Official Code § 10-801).

I acknowledge receipt of this Acknowledgement Form, and understand that a Beneficiary, CBE, or Certified Joint Venture that fails to comply with all of the relevant requirements of the Small and Certified Business Enterprise Development and Assistance Amendment Act of 2014 (D.C. Law 20-108) (the "Act"), which include, but are not limited to the provisions above, shall be subject to penalties as outlined in the Act. I further acknowledge that I am authorized to sign on behalf of the entity listed below.

(Print Name)

(Date)

(Signature)

(E-mail)

(Title)

(Company)

**SBE SUBCONTRACTING STATUTORY REQUIREMENTS ACKNOWLEDGEMENT
FORM**

I, [Name], [Title] Of [Company Name of Prime Contractor/Developer] acknowledge that the [Project Name &/or Contract Number] project is subject to the SBE subcontracting requirements of the Small and Certified Business Enterprise Development and Assistance Amendment Act of 2014 (the "Act") (D.C. Law 20-108; D.C. Official Code § 2-218.01 et seq.). I further acknowledge that this form is just a summary of the Act, and that the project must comply with all relevant sections of the Act, and not just the provisions outlined below.

SBE Subcontracting Requirements

- Pursuant to section 2-218.46 of the Act, all construction & non-construction Government-assisted projects (agency issued contracts & private projects that received any type of District subsidy) over \$250,000, shall require 35% subcontracting to Small Business Enterprises (SBE) certified by the Department of Small and Local Business Development (DSLBD), unless waived by DSLBD.
- **Agency Issued Contracts** – 35% of the total amount of the agency issued contract shall be subcontracted to SBEs.
- **Private Projects with District Subsidy** – 35% of the total project costs (development costs) shall be subcontracted to SBEs. The 35% requirement is not limited to the amount of the District subsidy.
- If there are insufficient qualified SBEs to fulfill the 35% subcontracting requirement, the requirement may be satisfied by subcontracting 35% to Certified Business Enterprises (CBE) certified by DSLBD; provided, that all reasonable efforts shall be made to ensure that qualified SBEs are significant participants in the overall subcontract work.

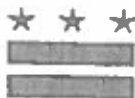
SBE Subcontracting Plan

- A SBE Subcontracting Plan listing all subcontracts, between the **Beneficiary** and SBEs/CBEs; and between SBE/CBE and Non-CBE Subcontractors and all lower tier SBE/CBE Subcontractors must be submitted for this project.
- **For Agency Solicitations** - the SBE Subcontracting Plan must be submitted to the agency with the bid/proposal for the bid/proposal to be considered responsive.
- **For Agency Multi-year/ Options/ Extensions** - submit SBE Subcontracting Plan to agency before next year/ option/ extension exercised.

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Employment Services

MURIEL BOWSER
MAYOR



DR. UNIQUE MORRIS-HUGHES
INTERIM DIRECTOR

August 23, 2018

Michiko Gadson
Contract Specialist
The University of District of Columbia
Office of Strategic Sourcing & Procurement
4200 Connecticut Ave., N.W.
Bldg. 39 Suite 200C, Room 250
Washington DC, 20008

Re: First Source Employment Agreement

Dear Ms. Gadson:

Enclosed is your copy of the signed First Source Employment Agreement between the D.C. Department of Employment Services (DOES) and Consys, Inc. Developer ☒ or General Contractor ☐ or Subcontractor ☐. Under the terms of the Agreement, you are required to use DOES as the first source to fill all new jobs created as a result of Project: Bldg. 37- Theater Lighting Upgrades.


You must register and post your job vacancies to the Department of Employment Services' Virtual One-Stop (VOS) at www.dcnetworks.org.

In addition, you are required to have the following percentage of hours worked by District residents: 20% of journey worker hours; 60% of apprentice hours; 51% of skilled laborer hours; and 70% of common laborer hours. Further, District residents registered in programs approved by the District of Columbia Apprenticeship Council shall work 35% of all apprenticeship hours worked in connection with the Project or 60% where applicable.

Reminder: All General Contractors must invite their subcontractors that are subject to the First Source Employment Agreement requirements, to join the project using the First Source Online Registration & Reporting System (FORRS), website <http://firstsource.dc.gov>. Additionally, contractors are required to report hours worked percentages throughout the duration of your contract. Contact the monitor listed below regarding LCP Tracker submission.


If you have any questions or need additional information please contact Omar R. Chambers, (202) 698-6278, R.Chambers@dc.gov.

Sincerely,


Michael I. Watts
Associate Director
Office of First Source Compliance
Enclosure

MEMORANDUM

TO: Michiko Gadson/UDC

FROM: Monica Palacio, Director 

DATE: May 7, 2018

SUBJECT: Affirmative Action Program, (CB-1) Consys, Inc.

Contract/CCB: GF-2018-B-0005

We have reviewed the above-referenced contractor's EEO Employer Information Report and agreement to comply with the requirements of Mayor's Order 85-85, submitted by UDC on May 3, 2018. We find the forms are in conformity with the Mayor's Order.

If your Agency has any questions, contact OHR at 202-727-4559. **ALL QUESTIONS FROM THE CONTRACTOR SHOULD BE DIRECTED TO THE APPROPRIATE AGENCY REPRESENTATIVE, WHO MAY THEN CONTACT OHR.**

OCP/LBN/05072018

Gadson, Michiko

From: Vijay R Kasimsetty <vjay@consys-inc.net>
Sent: Monday, August 20, 2018 11:38 AM
To: Gadson, Michiko
Cc: Whitaker, Eddie M.; Harris, Mary A.; Raj Shukla; Jay Narain
Subject: CONSYS Apprenticeship
Attachments: image001.jpg

GM Michiko:

Please see e-mail below confirming our apprenticeship program.

Feel free to call or e-mail me if needed.

Thank You,

Vijay R. Kasimsetty
Vice President
CONSYS, Inc.

P: (202) 545-1333
F: (202) 545-1339
E: viay@consys-inc.net

egin forwarded message:

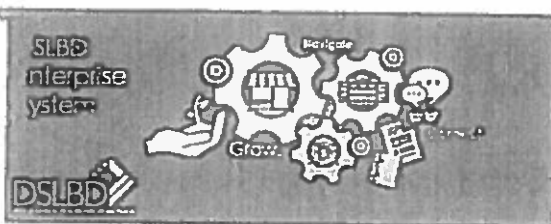
From: "Barnes, Larry (DOES)" <larry.barnes@dc.gov>
Date: August 20, 2018 at 11:31:24 AM EDT
To: "Vijay@consys-inc.net" <Vijay@consys-inc.net>
Subject: FW: CONSYS Apprenticeship

Vijay Kasimsetty:

This e-mail is to confirm that Consys, Incorporated has met with Mr. Jason Roberts of the Associated Builders and Contractors to receive information in applying for registration with them. With that said, this is a requirement of the D.C. Apprenticeship Council that contractors have a registered apprenticeship program if they are performing work in the city using District funds. Therefore, Consys, Incorporated has met the

requirement in establishing a registered apprenticeship program with our office. This company is in compliance with our office and if you have any further questions regarding their status, please call me on (202) 698-3531 and I will be able to answer any of your questions. I am the Apprenticeship Training Representative for the Office of Apprenticeship Information and Training.





[DSLBD HOME \(http://dslbd.dc.gov\)](http://dslbd.dc.gov)

Business Certification Information

[Previous Page](#)

Consys, Inc.

Description: Construction and Business Services

Principal Owner: H Jay Narain Ra Shukla Vijay Kasimsetty

Contact Name: H Jay Narain

Address: 732 KENNEDY STREET NW WASHINGTON DC 20011

Phone: 2025451333

Fax: 2025451339

Email: raj@consysinc.net

Website: www.consysinc.net

Date Established: June 1, 2001

Organization Type: Corporation

Web: [www.consysinc.net](#)

Certification Information

Certification No: ISO 9001:2008 321

Expiration Date: 11/15/2011

Reference Points: 12

Cost Price Reduction:

NIGP Codes

Showing 10 of 32 entries

CODE	DESCRIPTION	Set It
909010	Administration of Contracts, Supply of Work, Quality Control, Project Completion	
909210	Building Construction, Industrial (Warehouse, etc.)	
909220	Building Construction, Non-Residential (Office Bldg., etc.)	
909230	Building Construction, Residential (Apartments, etc.)	
909240	Building Construction, Commercial and Institutional	
909270	Building Construction, Educational	
909340	Conveying Systems, Elevators, Lifts, etc.	
909370	Doors and Windows	
909450	Finishes, Flooring, Wall and Ceiling, etc.	
909760	Site Work (incl. Site Clean Up)	

Showing 1 to 10 of 32 entries

Primary Business Services

Consultant Professional Service Provider: 20%

Construction Contracting: 80%

Additional Information

Previous or Current Contracts with the District Government

Other Certifications



District News

Mayor's Public Schedule (<http://mayor.dc.gov/newsroom>)
 City of News (<http://newsroom.dc.gov/>)
 Citywide Calendar (<http://calendar.dc.gov/>)
 Subscribe to Resale Ema's
 (<http://service.govdelivery.com/service/user.html?code=DCWASH>)
 Subscribe to Text Alerts (<https://textalert.ema.dc.gov/index.php?C=Check=1>)
 Subscribe to Notifications
 (<https://public.govdelivery.com/accounts/DCWASH/subscribers/new?i>)



District Initiatives

Green DC
<http://green.dc.gov/>
 Grade DC
<http://grade.dc.gov/>
 Age-Friendly DC
<http://agefriendly.dc.gov/>
 Sustainable DC
<http://sustainable.dc.gov/>
 Connect DC
<http://connect.dc.gov/>
 Great Streets
<http://greatstreets.dc.gov/>
 Ready DC
<http://ready.dc.gov/>



About DC

Open DC
<https://open.dc.gov/>
 Budget
<http://dcf.dg.gov/budget/>
 Emancipation
<http://emancipation.dc.gov/>
 Consumer Protection
<http://consumer.dc.gov/>
 Contracts
<http://dc.gov/contracts/>
 Property Quest
<http://propertyquest.dc.gov/>
 Track DC
<http://track.dc.gov/>



Contact Us

Agency Directory (<http://directory.dc.gov/>)
 Call 311 (<http://311.dc.gov/>)
 Contact the Mayor
<http://dc.gov/mayor/about.asp?page=ad2?type=staff&ref=ref>
 505F SERVER NAMES (agency info)
<https://dsbdc.gov/page/contact-a-directory>
 FOIA Requests (<http://foia.dc.gov/>)
 Report Website Problems
<http://dcforms.dc.gov/webform/proc-dc-government-website>
 Send Feedback (<http://feedback.dc.gov>)
 Service Request Center (<http://311.dc.gov/>)

Accessibility (<http://dc.gov/accessibility>) Library and Security (<http://dc.gov/libraryandsecurity>) Internal Documents
<http://dc.gov/internaldocumentsandcommunications> About DC Gov (<http://dc.gov/about>) District Government Websites

WEB WEB

AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULEPage 2 of 2

AGENCY Olson, Inc.		NAMED INSURED Consys, Inc.	
POLICY NUMBER MPA00000075576D		732 Kennedy Street N.W. Washington DC 20011	
CARRIER	NAIC CODE	EFFECTIVE DATE: 10/04/2018	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

University of the District of Columbia is Additional Insured with respect to work or services performed under the contract. Policies are primary and non-contributory. No other insurance from any other entity shall apply before the above insurance coverage and limits of liability are exhausted. A Waiver of Subrogation applies in favor of the University of the District of Columbia for all claims made against the District, it's officers, directors, agents, and employees, except with respect to Workers' Compensation.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/04/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Olson, Inc. 882 Annapolis Road P.O. Box # 187 Gambrills, MD. 21054-0187	CONTACT NAME: Eric C. Olson PHONE (A/C No. Ext): 410-923-7100 FAX (A/C No.): 410-923-7199 E-MAIL ADDRESS: Eric@insurewitholson.com														
INSURED Consys, Inc. 732 Kennedy Street N.W. Washington DC 20011	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Harleysville Mutual Insurance Company</td> <td>26182</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Harleysville Mutual Insurance Company	26182	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Harleysville Mutual Insurance Company	26182														
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		MPA00000075576D	10/04/2018	10/04/2019	EACH OCCURRENCE \$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000
						MED EXP (Any one person) \$5,000
						PERSONAL & ADV INJURY \$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$2,000,000
						PRODUCTS - COMP/OP AGG \$2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		BA00000052452D	10/04/2018	10/04/2019	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0		CMB64793D-Follows Form	10/04/2018	10/04/2019	EACH OCCURRENCE \$8,000,000
						AGGREGATE \$8,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC00000064792D	10/04/2018	10/04/2019	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
						E.L. EACH ACCIDENT \$1,000,000
						E.L. DISEASE - EA EMPLOYEE \$1,000,000
						E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RE: GF-2018-B-0037 Building 48E Theater Lighting Upgrades; 4200 Connecticut Ave, NW, Washington, DC 20008

See Attached 101 Form 1 of 2

CERTIFICATE HOLDER

CANCELLATION

University of the District of Columbia Office of Contracting and Procurement 4200 Connecticut Ave NW Washington, DC 20008	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <RRO>
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AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULEPage 2 of 2

AGENCY Olson, Inc.		NAMED INSURED Consys, Inc.	
POLICY NUMBER MPA00000075576D		732 Kennedy Street N.W. Washington DC 20011	
CARRIER	NAIC CODE	EFFECTIVE DATE: 10/04/2018	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

University of the District of Columbia is Additional Insured with respect to work or services performed under the contract. Policies are primary and non-contributory. No other insurance from any other entity shall apply before the above insurance coverage and limits of liability are exhausted. A Waiver of Subrogation applies in favor of the University of the District of Columbia for all claims made against the District, it's officers, directors, agents, and employees, except with respect to Workers' Compensation.

DISCLAIMER

Solicitation No.: GF-2018-B-0037

Caption: Building 46E Theater Lighting Upgrades

This is to confirm that the contractor listed below has no legal claim(s) against the District of Columbia. If the contractor does have legal claim(s) against the District of Columbia, please list them below.

Contractor: Consys, Inc.

Address: 732 Kennedy Street, NW

Washington, DC 20011

**Vijay R.
Kasimsetty**

Digitally signed by Vijay R. Kasimsetty
DN: cn=Vijay R. Kasimsetty, o=CONSYS,
inc., ou, email=vijay@consys-inc.net,
c=US
Date: 2018.08.02 18:03:29 -0400

08/02/2018

Signature

Date

Vice President

Title

Claim(s) against the District:

1. NONE
2. NONE
3. NONE
4. NONE

Redina Ann Canty
REDINA ANN CANTY
NOTARY PUBLIC DISTRICT OF COLUMBIA
My Commission Expires July 31, 2021

