



University of District of Columbia
www.udc.edu

Date: 05/01/19

PURCHASE ORDER NO. **P0010873**

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: Joanna Edwards
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

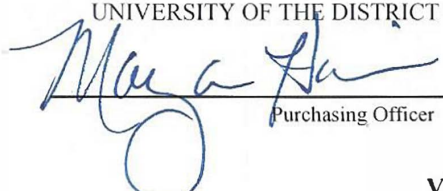
DELIVER BY: 05/01/19

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 "Construction for the Relocation of the Van Ness Data Center". The scope of work and independent government estimate is attached. GF-2019-C-0048 9092400 Contractual Services - GC	1.00 EA	1,997,786.0000	1,997,786.00
BUYER: Michiko D. Gadson		PO Total \$1,997,786.00		

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

Purchasing Officer
5/1/2019
VENDOR COPY

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

CONSTRUCTION CONTRACT		CONTRACT NO. GF-2018-C-0048
		DATE OF CONTRACT
NAME AND ADDRESS OF CONTRACTOR 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 type="checkbox"/> CORPORATION STATE OF INCORPORATION Washington, DC	
CONTRACT FOR (work to be performed) Consys, Inc., hereinafter referred to as "the Contractor", and The Board of Trustees for the University of the District of Columbia, hereinafter referred to as the "University," mutually agree as follows: The University, in consideration of the bid price in the amount of one million nine hundred ninety-seven thousand seven hundred eighty-six dollars and zero cents (\$1,997,466.00) enters into this firm fixed price contract with Consys, Inc., for the Construction Renovation for the Van Ness Data Center. 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 bid, 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. The following addition to the contract is hereby stipulated and agreed to by the parties hereto: A. <u>General Provisions</u> 1. <u>Time for Completion</u> 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 Two hundred (200) calendar days after such notice. 2. <u>Liquidated Damages</u> The Contractor shall pay to the University the sum of one thousand ninety dollars and zero cents (\$1,090.00) 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.		

3. Wage Rates

General Decision Number: DC180002 dated 05/11/2018 DC2 is the wage determination applicable to this Contract.

B. Order Of Precedence And Documents Incorporated By Reference

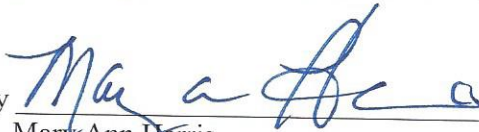
The following documents are hereby incorporated into and made a part of this Contract. Any inconsistency in this contract shall be resolved by giving precedence in the following order:

- (1) Sections A and B of this contract;
- (2) IFB No. GF-2018-B-0048 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


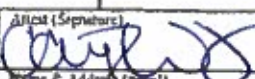
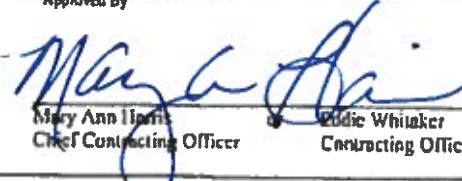
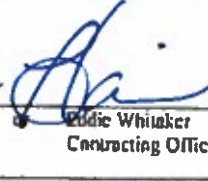
In witness whereof, the parties hereto have executed this Contract as of the date entered on the first page hereof.

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

By

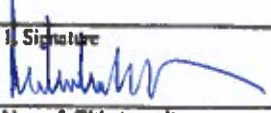
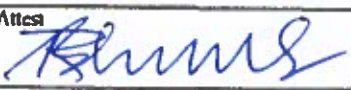



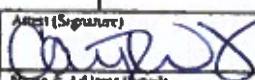
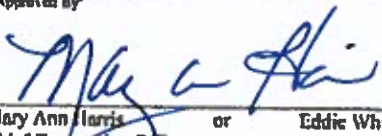
Mary Ann Harris
Chief Contracting Officer
Office of Strategic Sourcing and Procurement

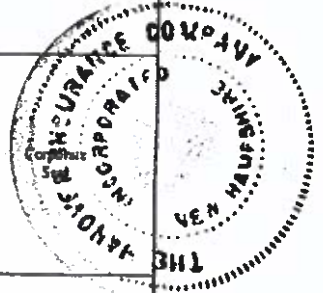
SURETY (IES)			
Name & Address (typed) Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653		State of Inc. NH	Subsidiary License \$1,997,786.00
Signature of Attorney-in-Fact 		Attest (Signature) 	
Name & Address (typed) Laura E. Scholze, Attorney-In-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030		Name & Address (typed) Courtney W. Judge, Assitant 303 International Circle, Suite 160 Hunt Valley, MD 21030	
Signature of Attorney-in-Fact		Attest (Signature)	
Name & Address (typed)		Name & Address (typed)	
BOND PREMIUM			
Rate Per Thousand 12.10/9.90	Total Premium 20,878.00	Name & Address of Agency or Agent Receiving Commission Delmarva Surety 303 International Circle, Suite 160, Hunt Valley, MD 21030	
Approved By <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Mary Ann Hantz Chief Contracting Officer </div> <div style="text-align: center;">  Eddie Whiakcr Contracting Officer </div> </div> <div style="text-align: right; margin-top: -50px;">5/1/2019</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-Authority 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 performance bond shall be typed in the space provided. 			



Bond No. 1031698

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 ("a") <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"> <tr> <th>MILLION(S)</th> <th>THOUSAND(S)</th> <th>HUNDRED(S)</th> <th>CENTS</th> </tr> <tr> <td>1</td> <td>997</td> <td>786</td> <td>00</td> </tr> </table>		MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS	1	997	786	00
MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS								
1	997	786	00								
		CONTRACT DATE CONTRACT NUMBER GF-2018-B-0048									
<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 said 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>											
PRINCIPAL											
1. Signature  (Seal)		1. Attest 									
Name & Title (typed) VIJAY KARMSETTY, VP		Name & Title (typed) RAJ SHUKLA, SECRETARY/VP									
2. Signature (Seal)		2. Attest									
Name & Title (typed)		Corporate Seal									

SURETY (IES)			
Name & Address (typed) Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653		State of Inc. NH	Liability Limit \$1,997,786.00
Signature of Attorney-in-Fact 		Attest (Signature) 	
Name & Address (typed) Laura E. Scholze, Attorney-in-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030		Name & Address (typed) Courtney W. Judge, Assistant 303 International Circle, Suite 160 Hunt Valley, MD 21030	
Name & Address (typed)		State of Inc.	Liability Limit
Signature of Attorney-in-Fact		Attest (Signature)	
Name & Address (typed)		Name & Address (typed)	
BOND PREMIUM			
Rate Per Thousand 12.10/9.90	Total Premium 20,878.00	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: 10px;">  </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Mary Ann Harris Chief Contracting Officer or Eddie Whitaker Contracting Officer </div>			
<p style="text-align: center;">INSTRUCTIONS</p> <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


Mary 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 12 day of October 2018.

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


John Margosian, Vice President

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 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-0048

Solicitation Due Date: 07/25/2018

Agency : University of the District of Columbia

Total Dollar Amount of Contract: \$ 1,997,786.00

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

35% of Total Dollar Amount of Contract: \$ 699,225.10

Total Amount of All SBE/CBE subcontracts: \$ 342,621.00
(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)

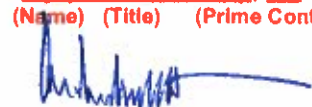
SBE/ CBE SUBCONTRACTORS (FOR EACH TIER):

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 <i>including total design and build costs</i>) 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
DOMINION ELECTRIC	22 Kstreet, NE Washington, DC 20002	1 st	Eletrical Gear Supplier
Period of subcontract: 200 days from NTP Price to be paid to the SBE/CBE Subcontractor: \$198,400.00 <i>✓all that applies, Subcontractor is:</i> <input type="checkbox"/> a SBE <input checked="" type="checkbox"/> a CBE <input type="checkbox"/> CBE Certification #: LZ87972052021 <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: Gerald Jackson Title: Representative Telephone Number: (202) 789-0500 Email Address: gjacks@descowashington.com

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 <i>including total design and build costs</i>) 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
United General Contractors	1232 4th Street, NW Washington, DC 20002	1 st	Equipment
Period of subcontract: 200 days from NTP Price to be paid to the SBE/CBE Subcontractor: \$149,300.00 <i>✓all that applies, Subcontractor is:</i> <input checked="" type="checkbox"/> a SBE <input type="checkbox"/> a CBE <input checked="" type="checkbox"/> CBE Certification #LSDZR38610082019 <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: Nathaniel lewis Title: Owner Telephone Number: (202) 526-2101 Email Address: natelewis@unitedgc.net

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

swear or affirm the above is true and accurate


 (Signature)

07/25/2018
 (Date)

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>UOC - Office of Strategic Sourcing and Procurement</u> Prime Contractor: <u>CONSUS, INC</u> Contract Number: <u>GE-2018-G-0048</u> Date SBE Subcontracting Plan Accepted: <u>5/1/19</u> Date agency contract signed: <u>5/1/19</u> Anticipated Start Date of Contract: <u>MAY 1, 2019</u> Anticipated End Date of Contract: <u>NOVEMBER 16, 2019</u> Total Dollar Amount of Contract: \$ <u>1,997,786.00</u> *Design-Build must include total contract amount for both design and build phase of project. 35% of Total Contract Amount: \$ <u>669,225.10</u> Total Amount of All SBE/CBE subcontracts: \$ <u>342,621.00</u> (include every tier) <input checked="" type="checkbox"/> (✓ 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.	Agency Providing Subsidy: _____ District Subsidy: _____ Developer: _____ Amount of District Subsidy: _____ Date District Subsidy Provided/ contract signed: _____ Anticipated Start Date of Project: _____ Anticipated End Date of Project: _____ 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) <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

Chief CO and Director
Title of Agency Contracting Officer or Agency Project Manager

Mary Ann Harris
Signature

5/1/2019
Date

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. Exp): 410-923-7100 FAX (A/C No.): 410-923-7199 E-MAIL ADDRESS: Eric@insurewitholson.com														
INSURED Conesa, 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:	
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INSURER A: Harleysville Mutual Insurance Company	26182														
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INSURER E:															
INSURER F:															

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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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 LTR)	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		MPA00000075576D	10/04/2018	10/04/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 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 (Per 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"/> DEF <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? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> 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 - BA 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-0048 Construction Renovation of the New Van Ness Data Center; 4200 Connecticut Ave, NW, Washington, DC 20008

See Attached 101 Form 1 of 2

CERTIFICATE HOLDER University of the District of Columbia Office of Contracting and Procurement 4200 Connecticut Ave NW Washington, DC 20008	CANCELLATION 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>
---	---

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														
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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.

DECLARATION AND CERTIFICATION OF COVERAGE: POLICY NUMBER, LIMITS AND DEDUCTIBLE HAVE BEEN REVIEWED BY THIS PROGRAM.										
INSR LTR	TYPE OF INSURANCE			ADDITIONAL INSR LTR/D	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY				MPA00000075576D	10/04/2018	10/04/2019	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Per occurrence)	\$ 100,000	
	<input type="checkbox"/>	CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person)	\$ 5,000	
	<input type="checkbox"/>							PERSONAL & ADV INJURY	\$ 1,000,000	
	<input type="checkbox"/>							GENERAL AGGREGATE	\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMPROP AGG	\$ 2,000,000	
	<input type="checkbox"/>	POLICY	<input checked="" type="checkbox"/> PROJECT	<input type="checkbox"/> LOC					\$	
A	AUTOMOBILE LIABILITY				BA00000062452D	10/04/2018	10/04/2019	COMBINED SINGLE LIMIT (Per accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/>	ANY AUTO						BODILY INJURY (Per person)	\$	
	<input checked="" type="checkbox"/>	ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/>	HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/>								\$	
A	<input checked="" type="checkbox"/>	UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR		CMB64793D-Follows Form	10/04/2018	10/04/2019	EACH OCCURRENCE	\$ 8,000,000	
	<input type="checkbox"/>	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$ 8,000,000	
	<input type="checkbox"/>	DED	<input checked="" type="checkbox"/> RETENTION \$0						\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			N/A	WC00000064792D	10/04/2018	10/04/2019	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							<input checked="" type="checkbox"/> Y/N	E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							<input type="checkbox"/> N	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-0048 Construction Renovation of the New Van Ness Data Center; 4200 Connecticut Ave, NW, Washington, DC 20008

See Attached 101 Form 1 of 2

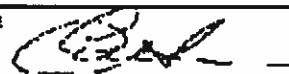
CERTIFICATE HOLDER

University of the District of Columbia
 Office of Contracting and Procurement
 4200 Connecticut Ave NW
 Washington, DC 20008

CANCELLATION

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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ACORD 25 (2010/05)

The ACORD name and logo are registered marks of ACORD

AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULEPage 2 of 2

AGENCY Olson, Inc.		NAMED INSURED Consys, Inc.	
POLICY NUMBER MPA00000078576D		732 Kennedy Street N.W.	
CARRIER	NAIC CODE	Washington DC 20011	
		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.

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.



BID DOCUMENT

INVITATION NO. GF-2018-B-0048

AGENCY: University of the District of Columbia

PROJECT: Construction Renovation for New Van Ness Data Center


LOCATION: 4200 Connecticut Avenue, NW
Washington, DC 20008

To access our website, please go to:

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



ORIGINAL

 SOLICITATION, OFFER AND AWARD	1. Solicitation No.: GF-2018-B-0048	2. Type: <input checked="" type="checkbox"/> Sealed Bid (IFB) <input type="checkbox"/> Negotiated (RFP)	3. Date Issued: June 1, 2018	Page 1 of 102																																													
4. Contract Number GF-2018-B-0048	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%;">(Area Code) 202</td> <td style="width: 33%;">(Number) 274-5191</td> <td style="width: 33%;">(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 Tuesday June 26, 2018.																																																	
(Hour) (Date)																																																	
11. The University requires performance of the work described in strict accordance with the following:																																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">DESCRIPTION</th> <th style="text-align: center;">SECTION</th> <th style="text-align: center;">PAGES</th> </tr> </thead> <tbody> <tr><td>Solicitation/Offer/Award Form</td><td style="text-align: center;">A</td><td style="text-align: center;">2-3</td></tr> <tr><td>Schedule for Construction, Alterations, Repair, Price</td><td style="text-align: center;">B</td><td style="text-align: center;">4-5</td></tr> <tr><td>Scope/University Specifications/Drawings</td><td style="text-align: center;">C</td><td style="text-align: center;">6-9</td></tr> <tr><td>Packaging and Markings</td><td style="text-align: center;">D</td><td style="text-align: center;">10</td></tr> <tr><td>Inspection and Acceptance</td><td style="text-align: center;">E</td><td style="text-align: center;">11</td></tr> <tr><td>Deliveries and Performances</td><td style="text-align: center;">F</td><td style="text-align: center;">12</td></tr> <tr><td>Contract Administration Data</td><td style="text-align: center;">G</td><td style="text-align: center;">13-49</td></tr> <tr><td>Special Contract Requirements</td><td style="text-align: center;">H</td><td style="text-align: center;">50-57</td></tr> <tr><td>Contract Clauses</td><td style="text-align: center;">I</td><td style="text-align: center;">58-74</td></tr> <tr><td>List of Attachments</td><td style="text-align: center;">J</td><td style="text-align: center;">75</td></tr> <tr><td>Representations, Certifications and Other Statements of Bidders</td><td style="text-align: center;">K</td><td style="text-align: center;">76-87</td></tr> <tr><td>Instructions, Conditions and other Notices to Bidders</td><td style="text-align: center;">L</td><td style="text-align: center;">88-95</td></tr> <tr><td>Evaluation Factors for Award</td><td style="text-align: center;">M</td><td style="text-align: center;">96-100</td></tr> <tr><td colspan="3">The Standard Contract Provisions for Use with Specifications for University Government Construction Projects, dated January 2007</td></tr> </tbody> </table>					DESCRIPTION	SECTION	PAGES	Solicitation/Offer/Award Form	A	2-3	Schedule for Construction, Alterations, Repair, Price	B	4-5	Scope/University Specifications/Drawings	C	6-9	Packaging and Markings	D	10	Inspection and Acceptance	E	11	Deliveries and Performances	F	12	Contract Administration Data	G	13-49	Special Contract Requirements	H	50-57	Contract Clauses	I	58-74	List of Attachments	J	75	Representations, Certifications and Other Statements of Bidders	K	76-87	Instructions, Conditions and other Notices to Bidders	L	88-95	Evaluation Factors for Award	M	96-100	The Standard Contract Provisions for Use with Specifications for University Government Construction Projects, dated January 2007		
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12. The Contractor shall begin performance and complete all the work within 100 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																																															

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


19. The offeror agrees to perform the work required at the prices specified herein and according to the BID SCHEDULE (Section B) and in strict accordance with the terms of this solicitation, if this offer is accepted by the University in writing within 90 calendar days after the date offers are due.

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

21. ACKNOWLEDGEMENT OF AMENDMENTS

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

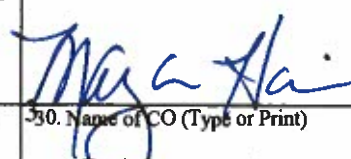
Amendment Number	1	2	3	4						
Date	6/6/18	6/26/18	6/29/18	7/16/18						


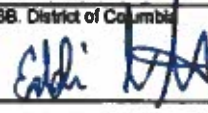
22. Name and Title of person authorized to sign offer (Type or Print) Vijay Kasimsetty, Vice President	22A. Signature 	22B. Offer \$1,997,786.00
---	--	------------------------------


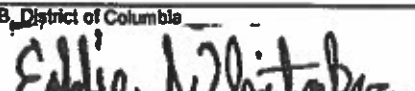
AWARD (To be completed by the University)



23. 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)


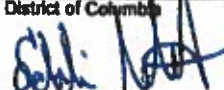
CO WILL COMPLETE ITEM 27 OR 28 AS APPLICABLE

27. <input type="checkbox"/> NEGOTIATED AGREEMENT (The Contractor is required to 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.	28. <input type="checkbox"/> 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.  5/1/2019
29. Name and Title of Contractor or Person Authorized to Sign (Type or Print) Vijay Kasimsetty, Vice President	30. Name of CO (Type or Print)

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. Contract Number	Page of Pages	
2. Amendment/Modification Number		3. Effective Date	4. Requisition/Purchase Request No.	1	1
GF-2018-B-0048-001		June 6, 2018		5. Solicitation Caption Construction Renovation of the Van Ness Data Center	
6. Issued By: University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW, Room C/04 Building 38 Washington, DC 20008		Code	7. Administered By (If other than line 6) University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW Building 38 Washington, DC 20008		
8. Name and Address of Contractor (No. Street, city, country, state and ZIP Code) Consys, Inc. 732 Kennedy Strewet, NW Washington, DC 20011			<input checked="" type="checkbox"/> 9A. Amendment of Solicitation No. GF-2018-B-0048 9B. Dated (See Item 11) June 1, 2018 10A. Modification of Contract/Order No. 10B. Dated (See Item 13)		
Code		Facility			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers <input checked="" type="checkbox"/> is extended <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing items 8 and 15, and returning <u>5</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.					
12. Accounting and Appropriation Data (If Required)					
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14					
A. This change order is issued pursuant to: (Specify Authority) The changes set forth in item 14 are made in the contract/order no. in item 10A.					
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation date, etc.) set forth in item 14, pursuant to the authority of 27 DCMR, Chapter 36, Section 3601.2					
C. This supplemental agreement is entered into pursuant to authority of:					
D. Other (Specify type of modification and authority)					
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return <u>5</u> copy to the issuing office.					
14. Description of amendment/modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible)					
Announcement No. GF-2018-B-0048 for "Conststruction Renovation of the Van Ness Data Center" at the University of the District of Columbia is hereby amended as follows: 1) The is extended from Thursday, June 7, 2018 to Tuesday, June 12, 2018. 2) The closing date for submission of bids is extended from Tuesday, June 26, 2018 to Monday, July 2, 2018 by 2:00PM. 3) The purchase price for the Drawings and Specifications is in the amount of \$50.00. 4) All other Terms and Conditions remain the same.					
Except as provided herein, all terms and conditions of the document referenced in item (9A or 10A) remain unchanged and in full force and effect					
15A. Name and Title of Signer (Type or print) Vijay Kasimsetty, Vice President			16A. Name of Contracting Officer Eddie Whitaker		
15B. Name of Contractor 		15C. Date Signed 06/27/18	16B. District of Columbia 		16C. Date Signed 6/6/18
(Signature of person authorized to sign)			(Signature of Contracting Officer)		

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. Contract Number	Page of Pages 1 6	
2. Amendment/Modification Number GF-2018-B-0048-002	3. Effective Date June 26, 2018	4. Requisition/Purchase Request No.	5. Solicitation Caption Construction Renovation of the Van Ness Data Center			
6. Issued By: University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW, Room C/04 Building 38 Washington, DC 20008		7. Administered By (If other than line 6) University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW Building 38 Washington, DC 20008				
8. Name and Address of Contractor (No. Street, city, country, state and ZIP Code) Consys, Inc. 732 Kennedy St, NW Washington, DC 20011			<div style="display: flex; justify-content: space-between;"> <div> (X) 9A. Amendment of Solicitation No. GF-2018-B-0048 9B. Dated (See Item 11) June 1, 2018 10A. Modification of Contract/Order No. 10B. Dated (See Item 13) </div> </div>			
Code	Facility					
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS						
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input checked="" type="checkbox"/> is extended, <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>5</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.						
12. Accounting and Appropriation Data (If Required)						
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14						
A. This change order is issued pursuant to: (Specify Authority) The changes set forth in Item 14 are made in the contract/order no. in item 10A.						
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation date, etc.) set forth in item 14, pursuant to the authority of 27 DCMR, Chapter 38, Section 3601.2						
C. This supplemental agreement is entered into pursuant to authority of:						
D. Other (Specify type of modification and authority)						
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return <u>5</u> copy to the issuing office.						
14. Description of amendment/modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)						
Announcement No. GF-2018-B-0052 for "Conststruction Renovation of the Van Ness Data Center" at the University of the District of Columbia is hereby amended as follows: 1) Pre-bid sign in sheet & Plan holders list (Attachment A) 2) Questions & Responses (Attachment B) 3) A second walk through is scheduled at 10:00 AM Wednesday, June 26, 2018. 4) All other Terms and Conditions remain the same.						
Except as provided herein, all terms and conditions of the document referenced in Item (9A or 10A) remain unchanged and in full force and effect						
15A. Name and Title of Signer (Type or print) Vijay Kasimsetty, Vice President			16A. Name of Contracting Officer Eddie Whitaker			
15B. Name of Contractor  (Signature of person authorized to sign)		15C. Date Signed 06/27/18	16B. District of Columbia  (Signature of Contracting Officer)		16C. Date Signed 6/26/18	

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. Contract Number	Page of Pages	
2. Amendment/Modification Number		3. Effective Date	4. Requisition/Purchase Request No.		5. Solicitation Caption	
GF-2018-B-0048-003		June 28, 2018			Construction Renovation of the Van Ness Data Center	
6. Issued By: University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW, Room C/04 Building 38 Washington, DC 20008			7. Administered By (If other than line 6) University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW Building 38 Washington, DC 20008			
8. Name and Address of Contractor (No. Street, city, country, state and ZIP Code) Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011				(X) 9A. Amendment of Solicitation No. GF-2018-B-0048 9B. Dated (See item 11) June 1, 2018 10A. Modification of Contract/Order No. 10B. Dated (See item 13)		
Code		Facility				
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS						
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers <input checked="" type="checkbox"/> is extended, <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing items 8 and 15, and returning <u>5</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.						
12. Accounting and Appropriation Data (If Required)						
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14						
A. This change order is issued pursuant to: (Specify Authority) The changes set forth in item 14 are made in the contract/order no. in item 10A.						
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation date, etc.) set forth in item 14, pursuant to the authority of 27 DCMR, Chapter 36, Section 3601.2.						
C. This supplemental agreement is entered into pursuant to authority of:						
D. Other (Specify type of modification and authority)						
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return <u>5</u> copy to the issuing office.						
14. Description of amendment/modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.) Announcement No. GF-2018-B-0048 for "Conststruction Renovation of the Van Ness Data Center" at the University of the District of Columbia is hereby amended as follows: 1) Submission of bids are due is extended from Monday, July 2, 2018 to Wednesday July 18, 2018 by 2:00PM. 2) All other Terms and Conditions remain the same.						
Except as provided herein, all terms and conditions of the document referenced in item (9A or 10A) remain unchanged and in full force and effect						
15A. Name and Title of Signer (Type or print) Vijay Kasimsetty, Vice President				16A. Name of Contracting Officer Eddie Whitaker		
15B. Name of Contractor 		15C. Date Signed 07/05/18		16B. District of Columbia 		16C. Date Signed 6/6/18
<small>(Signature of person authorized to sign)</small>				<small>(Signature of Contracting Officer)</small>		

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. Contract Number	Page of Pages	
2. Amendment/Modification Number			3. Effective Date	4. Requisition/Purchase Request No.	5. Solicitation Caption
GF-2018-B-0048-004			July 16, 2018	Construction Renovation of the Van Ness Data Center	
6. Issued By: University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW, Room C/04 Building 38 Washington, DC 20008			Code	7. Administered By (If other than line 6) University of the District of Columbia Office of Strategic Sourcing and Procurement 4200 Connecticut Avenue, NW Building 38 Washington, DC 20008	
8. Name and Address of Contractor (No. Street, city, country, state and ZIP Code) Consys, Inc. 732 Kennedy St, NW Washington, DC 20011			<input checked="" type="checkbox"/> 9A. Amendment of Solicitation No. GF-2018-B-0048 <input type="checkbox"/> 9B. Dated (See Item 11) June 1, 2018 <input type="checkbox"/> 10A. Modification of Contract/Order No. <input type="checkbox"/> 10B. Dated (See Item 13)		
Code			Facility		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input checked="" type="checkbox"/> is extended <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>5</u> copies of the amendment (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.					
12. Accounting and Appropriation Data (If Required)					
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14					
A. This change order is issued pursuant to: (Specify Authority) The changes set forth in Item 14 are made in the contract/order no. in Item 10A.					
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation date, etc.) set forth in Item 14, pursuant to the authority of 27 DCMR, Chapter 36, Section 3601.2.					
C. This supplemental agreement is entered into pursuant to authority of:					
D. Other (Specify type of modification and authority)					
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return <u>5</u> copy to the issuing office.					
14. Description of amendment/modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)					
Announcement No. GF-2018-B-0048 for "Construction Renovation of the Van Ness Data Center" at the University of the District of Columbia is hereby amended as follows: 1) Submission of bids are due is extended from Monday, July 18, 2018, to Wednesday, July 25, 2018, by 2:00 PM. 2) Questions & Responses (Attachment A) 3) All other Terms and Conditions remain the same.					
Except as provided herein, all terms and conditions of the document referenced in Item (9A or 10A) remain unchanged and in full force and effect					
15A. Name and Title of Signer (Type or print) Vijay Kasimsetty, Vice President			16A. Name of Contracting Officer Eddie Whitaker		
15B. Name of Contractor 		15C. Date Signed 07/25/18	16B. District of Columbia 		16C. Date Signed 7/16/18
(Signature of person authorized to sign)			(Signature of Contracting Officer)		

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

B.1 The University of the District of Columbia, Strategic Sourcing & Procurement is seeking a Contractor to provide all labor, materials, equipment, and supervision for demolition and replacement of the Construction Renovation for the New Van Ness Data Center located at 4200 Connecticut Avenue N.W., Washington DC 20008 Van Ness Campus. The work includes renovation of existing storage space to house a new server room and office over a raised floor system. The project also includes computer room specific fire suppression and mechanical systems, a new generator and a redundant building electrical feeder and information technology infrastructure equipment and infrastructure work in accordance with the University's Specifications and Drawings titled "Relocation of the Van Ness Data Center."

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 \$1,300,000.00 - \$1,800,000.00.

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	Construction Renovation for the New Van Ness Data Center, as shown in the Drawings, Specifications and Scope of Work as described in Section C of this solicitation package.	\$ 1,997,786.00

LUMP SUM PRICE (CLIN 0001) IN WORDS

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

B.6 PRICE BREAKDOWN FORM

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.

- * 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.

DIVISION NO. *	DESCRIPTION	TOTAL PRICE BREAKDOWN
Div. 01	General Requirements	\$182,526.00
Div. 02	Existing Conditions	\$0.00
Div. 03	Concrete	\$10,402.00
Div. 04	Masonry	\$0.00
Div. 05	Metals	\$1,500.00
Div. 06	Wood, Plastic, & Composites	\$0.00
Div. 07	Thermal and Moisture Protection	\$4,400.00
Div. 08	Openings	\$10,650.00
Div. 09	Finishes	\$84,000.00
Div. 10	Specialties	\$1,100.00
Div. 11	Equipment	\$0.00
Div. 12	Furnishings	\$0.00
Div. 21	Fire Suppression	\$120,000.00
Div. 22	Plumbing	\$0.00
Div. 23	Heating, Ventilating & Air Conditioning	\$360,000.00
Div. 26	Electrical	\$1,123,808.00
Div. 27	Communications	\$76,400.00
Div. 28	Electronic Safety & Security	\$15,300.00
Div. 29	Exterior Improvements	\$7,700.00
Lump Sum Bid Price	Lump Sum Bid Price (copy from CLIN 0001, Section B.5, Part I of IFB)	\$1,997,786.00



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

INCORPORATED ATTACHMENTS

J.2.1 E.E.O. Compliance Documents

J.2.2 Tax Certification Affidavit

J.2.3 First Source Employment Agreement



EQUAL EMPLOYMENT OPPORTUNITY (EEO) POLICY STATEMENT

Consys, Inc. SHALL NOT DISCRIMINATE AGAINST ANY EMPLOYEE OR APPLICANT FOR EMPLOYMENT BECAUSE OF ACTUAL OR PERCEIVED: RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, PERSONAL APPEARANCE, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, FAMILIAL STATUS, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, DISABILITY, SOURCE OF INCOME, OR PLACE OF RESIDENCE OR BUSINESS.

Consys, Inc. AGREES TO AFFIRMATIVE ACTION TO ENSURE THAT APPLICANTS ARE EMPLOYED, AND THAT EMPLOYEES ARE TREATED 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, FAMILIAL STATUS, FAMILY RESPONSIBILITIES, MATRICULATION, POLITICAL AFFILIATION, GENETIC INFORMATION, DISABILITY, SOURCE OF INCOME, OR PLACE OF RESIDENCE OR BUSINESS. THE AFFIRMATIVE ACTION 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 OR COMPENSATION; AND (E) SELECTION FOR TRAINING AND APPRENTICESHIP.

Consys, Inc. AGREES TO POST IN CONSPICUOUS PLACES THE PROVISIONS CONCERNING NON-DISCRIMINATION AND AFFIRMATIVE ACTION.


Consys, Inc. SHALL STATE THAT ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION FOR EMPLOYMENT PURSUANT TO SUBSECTION 1103.2 THROUGH 1103.10 OF MAYOR'S ORDER 85-85: "EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS IN CONTRACTS."

Consys, Inc. AGREES TO PERMIT ACCESS TO ALL BOOKS PERTAINING TO ITS EMPLOYMENT PRACTICES, AND TO REQUIRE EACH SUBCONTRACTOR TO PERMIT ACCESS TO BOOKS AND RECORDS.

Consys, Inc. AGREES TO COMPLY WITH ALL GUIDELINES FOR EQUAL EMPLOYMENT OPPORTUNITY APPLICABLE IN THE DISTRICT OF COLUMBIA.

Consys, Inc. SHALL INCLUDE IN EVERY SUBCONTRACT THE EQUAL OPPORTUNITY CLAUSES, SUBSECTION 1103.2 THROUGH 1103.10 SO THAT SUCH PROVISIONS SHALL BE BINDING UPON EACH SUBCONTRACTOR OR VENDOR.

Vijay Kasimsetty, Vice President

AUTHORIZED OFFICIAL AND TITLE


AUTHORIZED SIGNATURE
NAME

07/01/18

DATE
Consys, Inc.

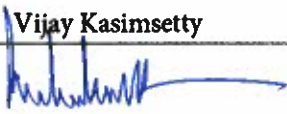
FIRM/ORGANIZATION



ASSURANCE OF COMPLIANCE WITH EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS

MAYOR'S ORDER 85-85, EFFECTIVE JUNE 10, 1985, AND THE RULES IMPLEMENTING MAYOR'S ORDER 85-85, 33 DCR 4952, (PUBLISHED AUGUST 15, 1986), "ON COMPLIANCE WITH EQUAL OPPORTUNITY REQUIREMENTS IN DISTRICT GOVERNMENT CONTRACTS," 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 AND THE IMPLEMENTING RULES. FAILURE TO COMPLY WITH THE SUBJECT MAYOR'S ORDER AND THE IMPLEMENTING RULES SHALL RESULT IN REJECTION OF THE RESPECTIVE BID/PROPOSAL.

I, Vijay Kasimsetty, THE AUTHORIZED REPRESENTATIVE OF Consys, Inc., 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, AND OF THE RULES IMPLEMENTING MAYOR'S ORDER 85-85, 33 DCR 4952. I FURTHER CERTIFY AND ASSURE THAT THE CONTRACTOR WILL FULLY COMPLY WITH ALL APPLICABLE PROVISIONS OF THE MAYOR'S ORDER AND IMPLEMENTING RULES IF AWARDED THE D.C. GOVERNMENT 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 ORDER AND RULES.

Consys, Inc.
CONTRACTOR
Vijay Kasimsetty
NAME

SIGNATURE
Vice President
TITLE
GF-2018-B-0048
CONTRACT NUMBER
07/01/18
DATE

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 4 th Street, NW, Suite 700 South Washington, DC 20001
Instructions: Two (2) copies of DAS 84-404 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)	
Single Establishment Employer (1) <input checked="" type="checkbox"/> Single-establishment Employer Report	Multi-establishment Employer: (2) <input type="checkbox"/> Consolidated Report (3) <input type="checkbox"/> Headquarters Report (4) <input type="checkbox"/> Individual Establishment Report (submit one for each establishment with 25 or more employees) (5) <input type="checkbox"/> Special Report
1. Total number of reports being filed by this Company. _____	
Section B – COMPANY IDENTIFICATION (To be answered by all employers)	
1. Name of Company which owns or controls the establishment for which this report is filed <div style="text-align: center;">Consys, Inc.</div>	
a.	
Address (Number and street) <div style="text-align: center;">732 Kennedy Street, NW</div>	City or Town <div style="text-align: center;">Washington</div>
Country <div style="text-align: center;">DC</div>	Zip Code <div style="text-align: center;">20011</div>
b.	
b. Employer Identification No. 5 2 2 3 1 8 6 3 6	
2. Establishment for which this report is filed. <div style="text-align: center;">University of the District of Columbia</div>	
c.	
a. Name of establishment <div style="text-align: center;">University of the District of Columbia</div>	
d.	
Address (Number and street) <div style="text-align: center;">4200 Connecticut Avenue, NW</div>	City or Town <div style="text-align: center;">Washington</div>
Country <div style="text-align: center;">DC</div>	Zip Code <div style="text-align: center;">20008</div>
d.	
b. Employer Identification No.	
3. Parent of affiliated Company <div style="text-align: center;">N/A</div>	
e.	
a. Name of parent or affiliated Company <div style="text-align: center;">N/A</div>	b. Employer Identification No.
Address (Number and Street)	City or Town
Country	State
Zip Code	
Section C - ESTABLISHMENT INFORMATION	
1. Is the location of the establishment the same as that reported last year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Did not report last year <input type="checkbox"/> Report on combined basis	
2. Is the major business activity at this establishment the same as that reported last year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> No report last year <input type="checkbox"/> Reported on combined basis	
OFFICIAL USE ONLY	
2. 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.) <div style="text-align: center;">General Contractors</div>	
c.	
3. MINORITY GROUP MEMBERS: Indicate if you are a minority business enterprise (50% owned or 51% controlled by minority members). <div style="text-align: center;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	

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 trainee 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 payroll period used

3. Pay period of last report submitted for this establishment, June 15, 2018

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 composition or reporting units, and other pertinent information.

Section F - CERTIFICATION

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

Name of Authorized Official Vijay Kasimsetty	Title Vice President	Signature 	Date 07/01/18
Name of person contact regarding This report (Type of print) Vijay Kasimsetty, VP	Address 732 Kennedy St, NW (Number and street) Washington, DC	20011	202-545-1333
Title	City and State	Zip Code	Telephone Number Extension

INFORMATION CITED HEREIN SHALL BE HELD IN CONFIDENCE.

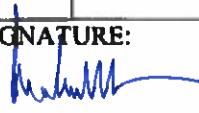
DEPARTMENT OF SMALL AND LOCAL BUSINESS DEVELOPMENT
CONTRACT COMPLIANCE DIVISION

SUBCONTRACT SUMMARY FORM

This SUMMARY form is to be completed by the PRIME contractor			
BID NO.		CCB NUMBER	
*NOTE: The standard for minority subcontracting is 25% of the TOTAL contract dollar amount to be subcontracted		AMOUNT OF PRIME CONTRACT \$ _____ AMOUNT OF ALL SUBCONTRACTS \$ _____ equals _____ % OF THE PRIME CONTRACT	
NAME OF PRIME CONTRACTOR Consys, Inc. TELEPHONE NO. 202-545-1333 PROJECT NAME Construction Renovation for New Van Ness ADDRESS Data Center 4200 Connecticut Avenue, NW WDC 20009		ADDRESS 732 Kennedy Street, NW Washington, DC 20011 PROJECT DESCRIPTIONS	
SECTION II LIST ALL SUBCONTRACTORS THAT WILL BE UTILIZED ON THE ABOVE PROJECT			
1. NAME OF SUBCONTRACTOR	2. ADDRESS	3. CONTACT PERSON	4. MBOC CERT. NO.
5. PHONE NO.	1. IS THIS A *MINORITY SUB?	2. TRADE OR BUSINESS PRODUCT THAT SUB WILL PROVIDE.	3. \$ AMOUNT OF SUBCONTRACT equals (=)
	YES NO		% (percent) OF TOTAL PRIME CONTRACT
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
	1. MINORITY SUBCONTRACTOR	1. \$	equals (=)
	2. YES NO	2. %	
TOTAL DOLLAR AMOUNT SUBCONTRACTED TO *MINORITY BUSINESS ENTERPRISES. \$ _____			
PERCENT OF PRIME CONTRACT. _____ %			

SOLICITATION NO: GF-2018-B-0048

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 & MANAGERS									
PROFESSIONALS									
TECHNICIANS									
SALES WORKERS									
OFFICE AND CLERICAL									
CRAFTSMANS (SKILLELD)									
OPERATIVE (SEMI-SKILLED)									
LABORERS (UNSKILLED)									
SERVICE WORKERS									
TOTALS									
NAME OF AUTHORIZED OFFICIAL: Vijay Kasimisetty				TITLE: Vice President			SIGNATURE: 		
FIRM NAME: Consys, Inc.					TELEPHONE NO: 202-545-1333		DATE: 07/01/18		
<p>INDICATE IF THE PRIME UTILIZES A "<u>MINORITY FINANCIAL INSTITUTION</u>"</p> <p>_____ Yes <u> x </u> No</p> <p>NAME:</p> <p>ADDRESS:</p> <p>TYPE OF ACCOUNT/S:</p>									

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 07/01/18

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

Consys, Inc.
732 Kennedy Street. 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-0048
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

:



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



I. REVISED FIRST SOURCE EMPLOYMENT PLAN

GOVERNMENT-ASSISTED PROJECT/CONTRACT INFORMATION

DISTRICT CONTRACTING AGENCY: University of the District of Columbia

CONTRACTING OFFICER: Michiko Gadson

TELEPHONE NUMBER: 202-274-5191

TOTAL CONTRACT AMOUNT: _____

EMPLOYER CONTRACT AMOUNT: _____

PROJECT NAME: Construction Renovation for New Van Ness Data Center

PROJECT ADDRESS: 4200 Connecticut Avenue, NW

CITY: Washington

STATE: DC ZIP CODE: 20008

PROJECT DESCRIPTION OF WORK:

Demolition and Replacement of the Construction Renovation for the New Van Ness Data Center

PROJECT START DATE: Issue of NTP PROJECT END DATE: 100 days from NTP

EMPLOYER START DATE: Issue of NTP EMPLOYER END DATE: 100 days from NTP

EMPLOYER INFORMATION

EMPLOYER NAME: Vijay Kasimsetty

COMPANY NAME: Consys, Inc.

EMPLOYER ADDRESS: 732 Kennedy St, NW

CITY: Washington

STATE: DC

ZIP CODE: 20011

TELEPHONE NUMBER: 202-545-1333

FEDERAL IDENTIFICATION NO.: 52-2318636

CONTACT PERSON: Vijay Kasimsetty

TITLE: Vice President

E-MAIL: vijay@consys-inc.net

TELEPHONE NUMBER: 202-439-4123

EMPLOYER DESCRIPTION OF WORK: _____

ARE YOU A SUBCONTRACTOR YES ☐ NO ☒

IF YES, NAME OF PRIME CONTRACTOR: _____

PRIME CONTRACTOR WILL MEET HOURS WORKED PERCENTAGES REQUIREMENTS
FOR ENTIRE PROJECT ☐ OR PER EACH SUBCONTRACTOR ☐

II. EMPLOYMENT HOURS TO BE WORKED PROJECTIONS

First Source law requires EMPLOYERS (winning bidders) to submit a revised Employment Plan.

A. For construction projects receiving \$5 million or more in government assistance, Employers to provide projection of the total number of hours to be worked on the project by trade.

JOURNEYWORKER

Provide a projection of the total number of journey worker hours, by trade, to be worked on the project or contract and the total number of journey worker hours, by trade, to be worked by District residents.

This page to be completed by Employer

VK

Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



Projection of Total Number of Journey Worker Hours	Trade	Projection of Total Number of Journey Worker Hours by DC Residents (First Source Law requires 20%)
N/A		

APPRENTICE

Provide a projection of the total number of apprentice hours, by trade, to be worked on the project or contract and the total number of apprentice hours, by trade, to be worked by District residents.

Projection of Total Number of Apprentice Hours	Trade	Projection of Total Number of Apprentice Hours by DC Residents (First Source Law requires 60%)
N/A		

SKILLED WORKER

Provide a projection of the total number of skilled laborer hours, by trade, to be worked on the project or contract and the total number of skilled laborer hours, by trade, to be worked by District residents.

Projection of Total Number of Skilled Labor Hours	Trade	Projection of Total Number of Skilled Labor Hours by DC Residents (First Source Law requires 51%)
N/A		

COMMON LABORER

Provide a projection of the total number of common laborer hours to be worked on the project or contract and the total number of common laborer hours to be worked by District residents.

Projection of Total Number of Common Laborer Hours	Trade	Projection of Total Number of Common Laborer Hours by DC Residents (First Source Law requires 70%)
Duration of Project	Laborer	80%

This page to be completed by Employer

VK

Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



B. EMPLOYMENT HIRING PROJECTIONS

ALL EMPLOYERS:

Please indicate ALL new position(s) you will create as a result of the project. If you WILL NOT be creating any new employment opportunities, please complete the attached justification sheet with an explanation. Attach additional sheets as needed.

JOB TITLE		# OF JOBS F/T P/T	SALARY RANGE	UNION MEMBERSHIP REQUIRED NAME LOCAL#	PROJECTE D HIRE
A	Common Laborer	(1) Full Time	17.00	None	Issue of NTP
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					

This page to be completed by Employer

VK

Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



C. JUSTIFICATION SHEET: Please provide a detailed explanation of why the Employer will not have any new hires on the project.

This page to be completed by Employer

VK
Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



D. EMPLOYMENT PROJECTIONS

- I. Provide a timetable outlining the total hours worked by trade over the life of the project or contract and an associated hiring schedule.

N/A

- II. Provide descriptions of the skill requirements by job title or position, including industry-recognized certifications required for the different positions.

N/A

- III. Provide a strategy to fill the hours required to be worked by District residents, including a component on communicating these requirements to contractors and subcontractors and a component on potential community outreach partnerships with the University of the District of Columbia, the University of the District of Columbia Community College, the Department of Employment Services, Jointly Funded Apprenticeship Programs, the District of Columbia Workforce Intermediary, or other government-approved, community-based job training providers.

N/A

This page to be completed by Employer

VK
Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



D. EMPLOYMENT PROJECTIONS (Continued)

- IV. A remediation strategy to ameliorate any problems associated with meeting these worked hours percentage requirements, including any problems encountered with contractors and subcontractors.

N/A

- V. The designation of a senior official from the general contractor who will be responsible for implementing the hours worked percentages and reporting requirements.

Jay Narain

- VI. Provide descriptions of the health and retirement benefits that will be provided to District residents working on the project or contract.

TBD

- VII. Provide a strategy to ensure that District residents who work on the project or contract receive ongoing employment and training opportunities after they complete work on the job for which they were initially hired and a review of past practices in continuing to employ District residents from one project or contract to the next.

TBD

This page to be completed by Employer

VK
Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



D. EMPLOYMENT PROJECTIONS (continued)

- VIII. Provide a strategy to hire graduates of District of Columbia Public Schools, District of Columbia Public Charter Schools, community-based job training providers, and hard-to-employ residents.

As Needed

- IX. Please disclose past compliance with the First Source Employment Agreement Act of 1984 or the Workforce Intermediary Establishment and Reform of First Source Amendment Act of 2011 and the Davis-Bacon Act, where applicable, and the bidder or offeror's general District-resident hiring practices on projects or contracts completed within the last two (2) years.

N/A

- X. Please note that EMPLOYERS on construction projects must submit weekly certified payrolls from all subcontractors at any tier working on the project or contract, as well as make such payroll and personnel records available upon request at job sites to the contracting District of Columbia agency.

This page to be completed by Employer

VK
Employer Initials



GOVERNMENT OF THE DISTRICT OF COLUMBIA
REVISED EMPLOYMENT PLAN



Once approved, this revised employment plan shall not be amended except with the approval of Department of Employment Services.

By:

Vijay Kasinsetty

EMPLOYER Senior Official (Print)

EMPLOYER Senior Official (Signature)

Consys, Inc.

Name of Company

732 Kennedy St, NW

Washington, DC 20011

Address

202-545-1333

Telephone

vijay@consys-inc.net

Email

07/18/18

Date

Signature Department of Employment Services

Date

K.1

CERTIFICATION OF ELIGIBILITY

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

07/01/18

Date

President or Authorized Official

Vice President

Title

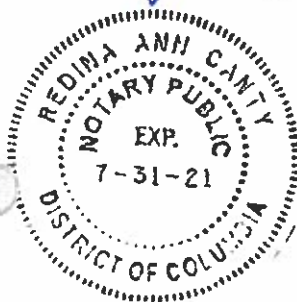
The penalties for making false statements are prescribed in the Program Fraud Civil Remedies Act of 1986 (Public Law 99-509, 31 U.S.C. 3801-3812).

Subscribed and sworn before me this 1st day of JULY 2018

At District of Columbia
City and State

July 31, 2021
Notary Seal

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

07/01/18

Date

President or Authorized Official

Vice President

Title

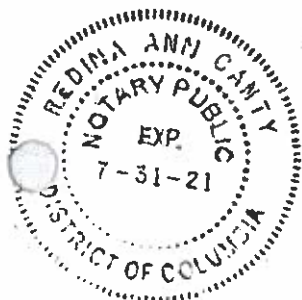
The penalties for making false statements are prescribed in the Program Fraud Civil Remedies Act of 1986 (Public Law 99-509, 31 U.S.C. 3801-3812).

Subscribed and sworn before me this 1st day JULY 2018

At District of Columbia
City and State

July 31, 2021
Notary Seal

[Signature]
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.

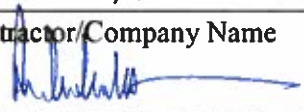
The certification must be accompanied by a list of all subcontractors and suppliers who will receive payment from the invoice and the dollar amount. Payment will not be made until the Prime Contractor submits this information.

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.

<u>07/01/18</u> Date	<u>Consys, Inc.</u> 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 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-0048

Solicitation Due Date: 07/25/2018

Agency : University of the District of Columbia

Total Dollar Amount of Contract: \$ 1,997,786.00

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

35% of Total Dollar Amount of Contract: \$699,225.10

Total Amount of All SBE/CBE subcontracts: \$342,621.00
(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)

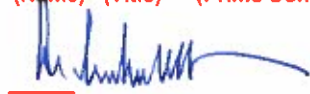
SBE/ CBE SUBCONTRACTORS (FOR EACH TIER):

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
DOMINION ELECTRIC	22 Kstreet, NE Washington, DC 20002	1 st	Eletrical Gear Supplier
Period of subcontract: 200 days from NTP Price to be paid to the SBE/CBE Subcontractor: \$198,400.00 ✓all that applies, Subcontractor is: <input type="checkbox"/> a SBE <input checked="" type="checkbox"/> a CBE <input type="checkbox"/> CBE Certification #:LZ87972052021 <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: Gerald Jackson Title: Representative Telephone Number:(202) 789-0500 Email Address:gjacks@descowashington.com

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
United General Contractors	1232 4th Street, NW Washington, DC 20002	1 st	Equipment
Period of subcontract: 200 days from NTP Price to be paid to the SBE/CBE Subcontractor: \$149,300.00 ✓all that applies, Subcontractor is: <input checked="" type="checkbox"/> a SBE <input type="checkbox"/> a CBE <input checked="" type="checkbox"/> CBE Certification #LSDZR38610082019 <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: Nathaniel lewis Title: Owner Telephone Number:(202) 526-2101 Email Address:natelewis@unitedgc.net

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

swear or affirm the above is true and accurate


(Signature)

07/25/2018
(Date)



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: _____ Prime Contractor: _____ Contract Number: _____ Date SBE Subcontracting Plan Accepted: _____ Date agency contract signed: _____ Anticipated Start Date of Contract: _____ Anticipated End Date of Contract: _____ Total Dollar Amount of Contract: \$ _____ <i>*Design-Build must include total contract amount for both design and build phase of project.</i> 35% of Total Contract Amount: \$ _____ Total Amount of All SBE/CBE subcontracts: \$ _____ (include every 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.	Agency Providing Subsidy: _____ District Subsidy: _____ Developer: _____ Amount of District Subsidy: _____ Date District Subsidy Provided/ contract signed: _____ Anticipated Start Date of Project: _____ Anticipated End Date of Project: _____ 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) <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.

Name of Agency Contracting Officer or Agency Project Manager

Title of Agency Contracting Officer or Agency Project Manager

Signature

Date

K.5

GOVERNMENT OF THE DISTRICT OF COLUMBIA


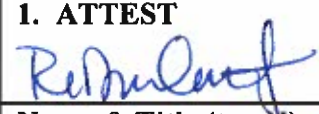
BID BOND (See Instructions on 2 nd page)	Date Bond Executed: June 26, 2018 (Must Not be Later Than Bid Opening Date)			
PRINCIPAL (Legal Name and Address) Consys, Inc. 732 Kennedy Street, NW Washington, DC 20011	TYPE OF ORGANIZATION ("X")			
	<input type="checkbox"/> INDIVIDUAL		<input type="checkbox"/> 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 Five Percent of Bid Amount			
	AMOUNT NOT TO EXCEED			5% OF BID
	MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS
				X
BID IDENTIFICATION				
BID OPENING DATE June 26, 2018			INVITATION NO. GF-2018-B-0048	

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 bonds 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.

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.

IN WITNESS WHEREOF, the Principal and Surety (ies) have executed this bid bond and have affixed their seals on the date set forth above.

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, RAT SHUKLA, certify that I am CORPORATE
 Secretary of the Corporation, named as Principal herein, that VITAY R. KASINSKITTY, 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.

[Signature]
 Secretary of Corporation

SURETY(IES)

1. Name & Address (typed) Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653	State of Inc. NH	Liability Limit \$136,648,000	Corporate Seal
Signature of Attorney-in-Fact <u>[Signature]</u>	Attest (Signature) <u>[Signature]</u>		
Name & Address (typed) Laura E. Scholze, Attorney-In-Fact 303 International Circle, Suite 160 Hunt Valley, MD 21030	Name & Address (typed) Courtney W. Judge, Assistant 303 International Circle, Suite 160 Hunt Valley, MD 21030		
1. Name & Address (typed)	State of Inc.	Liability Limit	Corporate Seal
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 26 day of June 2018.

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

Glenn Margosian, 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.

07/01/18

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 USA
(Country)

K.10

Bidder/Offeror Certification Form

BIDDER/OFFEROR CERTIFICATION FORM

COMPLETION			
The person(s) completing this form must be knowledgeable about the bidder's/offeree's business and operations.			
RESPONSES			
Every question must be answered. Each response must provide all relevant information that can be obtained within the limits of the law. Individuals and sole proprietors may use a Social Security number but are encouraged to obtain and use a federal Employer Identification Number (EIN). Provide any explanation at the end of the section or attach additional sheets with numbered responses. Include the bidder's/offeree's name at the top of each attached page.			
GENERAL INSTRUCTIONS			
This form contains four (4) sections. Section I concerns the bidder's/offeree's responsibility; Section II includes additional required certifications; Section III relates to the Buy American Act (if applicable); and Section IV requires the bidder's/offeree's signature. Please note, a determination that a prospective contract is found to be "not responsible" is final and not appealable.			
SECTION I: BIDDER/OFFEROR RESPONSIBILITY CERTIFICATION			
Instructions for Section I: Section I consists of eight (8) parts. Part 1 requests information concerning the bidder's/offeree's business entity. Part 2 requires about current or former owners, partners, directors, officers or principals. Part 3 relates to the responsibility of the bidder's/offeree's business. Part 4 concerns the bidder's/offeree's business certifications and licenses. Part 5 requires about legal proceedings. Part 6 relates to the bidder's/offeree's financial and organizational status. Part 7 requires the bidder's/offeree to agree to update the information provided. Part 8 relates to disclosures under the District of Columbia Freedom of Information Act (FOIA).			
PART I: BIDDER/OFFEROR INFORMATION			
Legal Business Entity Name: Consys, Inc.		Solicitation #: GF-2018-B-0048	
Address of the Principal Place of Business (street, city, state, zip code) 732 Kennedy St, NW Washington, DC 20011		Telephone # and ext.: 202-545-1333	Fax #: 202-545-1339
Email Address: vijay@consys-inc.net		Website: www.consys-inc.net	
Additional Legal Business Entity Identities: If applicable, list any other DBA, Trade Name, Former Name, Other Identity and EIN used in the last five (5) years and the status (active or inactive).			
Type:	Name:	EIN:	Status:
N/A	N/A	N/A	
1.1 Business Type (Please check the appropriate box and provide additional information if necessary):			
<input checked="" type="checkbox"/> Corporation (including PC)		Date of Incorporation: 2001	
<input type="checkbox"/> Joint Venture		Date of Organization:	
<input type="checkbox"/> Limited Liability Company (LLC or PLLC)		Date of Organization:	
<input type="checkbox"/> Nonprofit Organization		Date of Organization:	
<input type="checkbox"/> Partnership (including LLP, LP or General)		Date of Registration or Establishment:	
<input type="checkbox"/> Sole Proprietor		How many years in business?:	
<input type="checkbox"/> Other		Date established?:	
If "Other," please explain:			
1.2 Was the bidder's/offeree's business formed or incorporated in the District of Columbia?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No" to Subpart 1.2, provide the jurisdiction where the bidder's/offeree's business was formed or incorporated. Attach a Certificate or Letter of Good Standing from the applicable jurisdiction and a certified Application for Authority from the District, or provide an explanation if the documents are not available.			
State _____		Country _____	
1.3 Please provide a copy of each District of Columbia license, registration or certification that the bidder/offeree is required by law to obtain (other than those provided in Subpart 1.2). If the bidder/offeree is not providing a copy of its license, registration or certification to transact business in the District of Columbia, it shall either:			
(a) Certify its intent to obtain the necessary license, registration or certification prior to contract award, or			
(b) Explain its exemption from the requirement.			

1.4 If your company, its principals, shareholders, directors, or employees own an interest or have a position in another entity in the same or similar line of business as the Bidder/Officer, please describe the affiliation in detail.	
1.5 If any officer, director, shareholder or anyone holding a financial interest in the Bidder/Officer has a relationship with an employee of the Department or any District agency for whom the Department is procuring goods or services, please describe the nature of the relationship in detail.	
PART 2: INDIVIDUAL RESPONSIBILITY	
<i>Additional Instructions for Section 1, Part 2 through 8: Provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s).</i>	
Within the past five (5) years, has any current or former owner, partner, director, officer, principal or any person in a position involved in the administration of funds, or currently, or formerly having the authority to sign, execute or approve bids, proposals, contracts or supporting documentation on behalf of the bidder/officer with any government entity.	
2.1 Been sanctioned or proposed for sanction relative to any business or professional permit or license?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.2 Been under suspension, debarment, voluntary exclusion or determined ineligible under any federal, District or state statutes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.3 Been proposed for suspension or debarment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.4 Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation for any business-related conduct?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.5 Been charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime, or subject to a judgment or a plea bargain for:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(a) Any business-related activity; or	
(b) Any crime the underlying conduct of which was related to truthfulness?	
2.6 Been suspended, cancelled, terminated or found non-responsible on any government contract, or had a surety called upon to complete an awarded contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Please provide an explanation for each "Yes" in Part 2.	
2.7 In the past ten (10) years has the Bidder/Officer had a contract terminated, in whole or in part, for any reason? If so, describe each such determination in detail.	
2.8 In the past ten (10) years has the Bidder/Officer ever been assessed liquidated damages, costs to re-procure, costs to complete, or any other monetary damages under a contract? If so, describe each such assessment in detail.	
PART 3: BUSINESS RESPONSIBILITY	
Within the past five (5) years, has the bidder/officer	
3.1 Been under suspension, debarment, voluntary exclusion or determined ineligible under any federal, District or state statutes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A
3.2 Been proposed for suspension or debarment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.3 Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation for any	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.4 Been charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime, or subject to a judgment or plea bargain for:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(a) Any business-related activity; or	
(b) Any crime the underlying conduct of which was related to truthfulness?	
3.5 Been disqualified or proposed for disqualification on any government permit or license?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A
3.6 Been denied a contract award (in whole or in part, for any reason) or had a bid or proposal rejected based upon a non-responsibility finding by a government entity? If so, describe each such occurrence in detail.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.7 Had a low bid or proposal rejected on a government contract for failing to make good faith efforts on any Certified Business Enterprise goal or statutory affirmative action requirements on a previously held contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

3.8 Been suspended, cancelled, terminated or found non-responsible on any government contract, or had a surety called upon to complete an awarded contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Please provide an explanation for each "Yes" in Part 3.	
PART 4: CERTIFICATES AND LICENSES	
Has the bidder/offeree:	
4.1 Had a denial, decertification, revocation or forfeiture of District of Columbia certification of any Certified Business	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A
Please provide an explanation for "Yes" in Subpart 4.1.	
4.2 Please provide a copy of the bidder's/offeree's District of Columbia Office of Tax and Revenue Tax Certification Affidavit	
PART 5: LEGAL PROCEEDINGS	
Within the past five (5) years, has the bidder/offeree:	
5.1 Had any liens or judgments (not including UCC filings) filed against it which remain undischarged?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A
If "Yes" to Subpart 5.1, provide an explanation of the issue(s), relevant dates, the Lien Holder or Claimant's name, the amount of the lien(s) and the current status of the issue(s).	
5.2 Had a government entity find a willful violation of District of Columbia compensation or prevailing wage laws, the Service Contract Act or the Davis-Bacon Act?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.3 Received any OSHA citation and Notification of Penalty containing a violation classified as serious or willful?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Please provide an explanation for each "Yes" in Part 5.	
5.4 Engaged in litigation with any governmental entity. If so, please identify and/or describe all threatened and pending litigation and/or claims, including but not limited to matters pending before any Boards of Contracts Appeals.	
PART 6: FINANCIAL AND ORGANIZATIONAL INFORMATION	
6.1 Within the past five (5) years, has the Bidder/Offeree received any formal unsatisfactory performance assessment(s) from any government entity on any contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes" to Subpart 6.1, provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s).	
6.2 Has the Bidder/Offeree ever been assessed liquidated damages, costs to re-procure, costs to complete, or any other monetary damages under a contract? If so, describe each such assessment in detail.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes" to Subpart 6.2, provide an explanation of the issue(s), relevant dates, the government entity involved, the amount assessed and the current status of the issue(s).	
6.3 Within the last seven (7) years, has the bidder/offeree initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes" to Subpart 6.3, provide the bankruptcy chapter number, the court name and the docket number. Indicate the current status of the proceedings as "initiated," "pending" or "closed".	
6.4 During the past three (3) years, has the bidder/offeree failed to file a tax return or pay taxes required by federal, state, District of Columbia or local laws?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes" to Subpart 6.4, provide the taxing jurisdiction, the type of tax, the liability year(s), the tax liability amount the bidder/offeree failed to file/pay and the current status of the tax liability.	
6.5 During the past three (3) years, has the bidder/offeree failed to file a District of Columbia unemployment insurance return or failed to pay District of Columbia unemployment insurance?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "Yes" to Subpart 6.5, provide the years the bidder/offeree failed to file the return or pay the insurance, explain the situation and any remedial or corrective action(s) taken and the current status of the issue(s).	

Revised for DGS Contracts and Procurement 4-25-2018

- 2.1 The signature of the bidder/offeree is considered to be a certification by the signatory that:
- (a) The contract prices have been arrived at independently without, for the purpose of restricting competition, any consultation, communication or agreement
 - (i) Those prices;
 - (ii) The intention to submit a bid/proposal, or
 - (iii) The methods or factors used to calculate the prices in the contract
 - (b) The prices in this contract have not been and will not be knowingly disclosed by the bidder/offeree, directly or indirectly, to any other bidder/offeree or competitor before bid/proposal opening unless otherwise required by law; and
 - (c) No attempt has been made or will be made by the bidder/offeree to induce any other concern to submit or not to submit a contract for the purpose of restricting competition
- 2.2 The signature on the bid/proposal is considered to be a certification by the signatory that the signatory:
- (a) Is the person in the bidder's/offeree's organization responsible for determining the prices being offered in this contract, and that the signatory has not participated and will not participate in any action contrary to subparagraphs 2.1(a)(i) through (a)(iii) above; or
 - (b) Has been authorized, in writing, to act as an agent for the following principal in certifying that the principal has not participated, and will not participate, in any action contrary to subparagraphs 2.1(a)(i) through (a)(iii) 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/offeree's organization]

- (i) As an authorized agent, certifies that the principals named in subparagraph 2.2(b) above have not participated, and will not participate, in any action contrary to subparagraphs 2.1(a)(i) through (a)(iii) above; and
 - (ii) As an agent, has not participated and will not participate in any action contrary to subparagraphs 2.1(a)(i) through (a)(iii) above
- 2.3 If the bidder/offeree deletes or modifies subparagraph 2.1(b) above, the bidder/offeree must furnish with its bid a signed statement setting forth in detail the circumstances of the disclosure.

2.4 The Bidder/Offeree certifies that:

- (a) There are no other entities related to it that are responding to or bidding on the subject solicitation or invitation to bid. Related entities include, but are not limited to, any entity that shares management positions, board positions, shareholders, or persons with a financial interest in the Bidder/Offeree
- (b) There are no current or former owners, partners, officers, directors, principals, managers, employees or any persons with a financial interest in the Bidder/Offeree who have a financial interest in the request for proposal or invitation for bid or any asset, tangible or intangible, arising out of any contract or scope of work related to the request for proposal or invitation for bid.

With regards to 2.4 (b), if the Bidder/Offeree has knowledge of such a financial interest, please provide a detailed explanation.

PART 3: DONALD OPPORTUNITY OBLIGATIONS

3.1 I hereby certify that I am fully aware of the contents of Mayor's Order 85-85 and the Office of Human Rights' regulations in Chapter 11 of the DCMR, and agree to comply with them while performing this contract.

PART 4: FIRST SOURCE OBLIGATIONS

4.1 I hereby certify that I am fully aware of the requirements of the Workforce Intermediary Establishment and Reform of the First Source Amendment Act of 2011 (D.C. Law 19-84), and agree to enter into a First Source Employment Agreement with the Department of Employment Services if awarded any contract valued at \$300,000 or more which receives funds or resources from the District, or funds or resources which, in accordance with a federal grant or otherwise, is administered by the District government.

4.2 I certify that the Initial Employment Plan submitted with my bid or proposal is true and accurate.

SECTION III: BUY AMERICAN ACT CERTIFICATION

Instructions for Section III: Section III contains one (1) part which should only be completed if goods are being provided that are subject to the requirements of the Buy American Act.

PART I: BUY AMERICAN ACT COMPLIANCE

1.1 The bidder/offeree certifies that each end product, except the end products listed below, is a domestic end product (as defined in Paragraph 23 of the Standard Contract Provisions, "Buy American Act"), 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

SECTION IV. CERTIFICATION		
<i>Instruction for Section IV: This section must be completed by all bidders/suppliers.</i>		
I, Vijay Kasimsetty , as the person authorized to sign these certifications, hereby certify that the information provided in this form is true and accurate.		
Name (Print and sign): Vijay Kasimsetty	Telephone # 202-439-4123	Fax # 202-545-1339
Title: Vice President	Email Address: Vijay@consys-inc.net	
DUNS Number (if Applicable): 102341489		
Date: 07-18-18		
<p><i>The District of Columbia is hereby authorized to verify the above information with appropriate government authorities. Penalty for making false statements is a fine of not more than \$1,000.00, imprisonment for not more than 180 days, or both, as prescribed in D.C. Official Code § 22-2403. Penalty for false swearing is a fine of not more than \$2,500.00, imprisonment for not more than three (3) years, or both, as prescribed in D.C. Official Code § 22-2404</i></p>		