

RHODE ISLAND COLLEGE

PURCHASING DEPARTMENT

600 Mt. Pleasant Avenue, Building #5 Providence, Rhode Island 02908

Phone: 401-456-8047 Fax: 401-456-8528

INVITATION TO BID

SOLICITATION NUMBER:

44643

SOLICITATION TITLE: SWEET HALL INTERIOR PAINTING PROJECT—RIC

BID PROPOSAL SUBMISSION DEADLINE: January 12, 2022 at 2:00 PM

NOTICE TO VENDORS:

This solicitation shall be subject to Procurement Regulation 220-RICR-30-00-4

Per Section 4.6 A(1)c,vendors who are not prequalified may bid on a public works project, but the vendor must be prequalified prior to the issuance of the award.

Please follow instructions provided at https://www.ridop.ri.gov/prequalification/

Note, Prequalification Packet Form should be submitted in a separate sealed envelope at time of bid submission. This packet should not be included within the Public Copy.

PREBID	CONFERENCE:	YES
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NONMANDATORY

MANDATORY

Location: Via zoom

Join Zoom Meeting

https://ri-college.zoom.us/j/81893837602?pwd=Ymhid1hzVDRWRHBxZFVRVjVBd2duQT09&from=addon

Meeting ID: 818 9383 7602 Passcode: b9QE4Yxz

One tap mobile

+19292056099,81893837602#,,,,*40284177# US (New York)

+13017158592,,81893837602#,,,,*40284177# US (Washington DC)

Dial by your location

+1 929 205 6099 US (New York)

+1 301 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

#1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Meeting ID: 818 9383 7602

Passcode: 40284177

Find your local number: https://ri-college.zoom.us/u/kdBErLi9fl

Join by SIP

81893837602@zoomerc.com

Join by H.323

162.255.37.11 (US West)

162.255.36.11 (US East)

Meeting ID: 818 9383 7602 Passcode: 40284177

Date:

Monday, December 20, 2021

Time:

10:00 AM

Note to Bidders: Questions concerning this solicitation may be emailed to <u>JCIMORELLI@ric.edu</u> no later than <u>January 3, 2022 @ 4:00 PM (EST)</u>. Please reference the Bid # on all correspondence. Questions received if any, will be posted on the internet as an addendum to this solicitation. It is the responsibility of all interested parties to download the information.

PAYMENT AND PERFORMANCE BOND REQUIRED: Yes

BID BOND REQUIRED: Yes

FEIN:	42-1758371
VENDOR NAME:	Scholar Painting, LLC
ADDRESS:	2 Klarides Village Dr. #145 Seymour CT 06483
TELEPHONE:	(877)447-246S
FAX:	(877) 737- SS43
CONTACT PERSON:	Vauahn Butler
EMAIL:	scholar painting egmail.com itrujillo@scholurpainting.com
TITLE:	Company Swner

NOTICE TO VENDORS: BIDDER CERTIFICATION COVER FORM

Each bid proposal for a public works project must include a "public copy" to be available for public inspection upon the opening of bids. Bid proposals that do not include a copy for public inspection will be deemed nonresponsive. For further information on how to comply with this statutory requirement, see R.I. Gen. Laws §§ 37-2-18(b) and (j). Also see Procurement Regulations 5.11, and in addition, for highway and bridge projects, also see Procurement Regulations 5.13, accessible at www.ridop.ri.gov.

SECTION 2 — DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below

- 1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

- ✓ 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasi-public corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.

Disclosure details (continue on additional sheet if necessary):					
N/A					
SECTION 3 – OWNERSHIP DISCLOSURE					
Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed nonresponsive.					
If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other owners that hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is required.					
List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the bidder.					
Vaughn Butter CEO, 60% Ownership 2 Klarides Village Dr. #145 Seymour CT08483					
Vaughn Butter CEO, 60% Ownership 2 Klarides Village Dr. #145 Seymour CT 06483 Matthew Burke CFO 40% ownership 2 Klarides Village Dr. #145 Seymour CT 06483					
SECTION 4—CERTIFICATIONS Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive. Indicate Yes (Y) or No (N) and if No, provide details below: THE BIDDER CERTIFIES THAT:					
1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to the solicitation. 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements any contract awarded pursuant to this solicitations and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.					
3. The Bidder will maintain all required licenses during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.					
4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in the Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud. 5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or Official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.					
6. This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principles, directors, mangers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.					

7. The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws 37-2.5-3 as a person or entity engaging in investment activities in Iran described in 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.
8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.
Certification details (continue on additional sheet if necessary): RE Commercial Contractor Certification (attached in packet) RI MBE Certification (attached in packet)
Submission by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the State of Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation and the bid proposal. The Bidder certifies that: (1) the Bidder has reviews this solicitation and agrees to comply with its terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted in the bid proposal

(including this Bidder Certification Form) is accurate and complete. The Bidder acknowledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any contract awarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below represents, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of this bid proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

BIDDER

Date: 1/6/2022

Scholar Painting

Name of Blader

Vaugh Fisher, Owner

Printed almost of Butter, Owner

RETURN OF BID INVITATION - Bids must be mailed/delivered to RHODE ISLAND COLLEGE PURCHASING DEPARTMENT, BUILDING #5 in a sealed envelope furnished, by the time and date specified for the opening of responses. Bids misdirected to other locations or which are not present at the time of opening for whatever cause will be considered to be late, and will be returned unopened. For the purposes of this requirement the official time and date shall be that of the date/time stamp in the reception area.

Solicitation # Solicitation 1	t: <u>44643</u> Fitle: <u>Sweet Hall Interior Paint Renovations</u>
BID FORM	
То:	Rhode Island College Purchasing Office, Building #5 – East Campus 600 Mt. Pleasant Avenue, Providence, RI 02908
Bidder:	Scholar Painting LLC Legal name of entity 2 klarides Village Dr. #145 Seymour CT 06485 Address (street/city/state/zip) Vaughn Butler itruiilo@scholarpainting. Co) Contact mane Contact mane
	Contact telephone Contact telephone Contact fax
materiais) e all Allowan	r submits this bid proposal to perform all of the work (including labor and described in the solicitation for this Base Bid Price (including the costs for ces, Bonds, and Addenda):
(base) (base)	158,320.00 bid price in figures printed electronically, typed, or handwritten legibly in ink) nundred & & + eight thousand three hundred twenty dollars bid price in words printed electronically, typed, or handwritten legibly in ink)
Allowance The Base	
Bonds The Base	Bid Price <u>includes</u> the costs for all Bid and Payment and Performance quired by the solicitation.
Addenda The Bidde	er has examined the entire solicitation (including the following Addenda),

2014-12 (Bid Form)

Addenda.

All Addenda must be acknowledged.

Addendum No. 1 dated: | |2/23/2|

and the Base Bid Price includes the costs of any modifications required by the

Solicitation #: 44643 Solicitation Title: Sweet Hall Interior Pain	t Renovations
Addendum No. 2 dated:	
Addendum No. 3 dated:	1/5/22
Addendum No. 4 dated:	
2. ALTERNATES (Additions/Subtractions	s to Base Bid Price)
the State in the order of priority specified	described in these Alternates as selected by below, based on the availability of funds and crease or reduce the Base Bid Price by the selected.
 Alternate 1: Amount added to the B cove base on the entire 1st, 2nd, 3rd, in all locations where removed. 	ase Bid Price to remove and dispose of all and 4th floors and to install new cove base
Add: X Subtract:	
\$ 17,320	
(price in figures printed electronically, type	
Seventeen thousan	d three hundred twenty
(price in words printed electronically, typ	ed, or handwritten legibly in ink)
3. UNIT PRICES	
including labor, materials, services, regula	Unit Prices as the basis for any change ate. These Unit Prices include all costs, atory compliance, overhead, and profit. Unit of the work included in the base bid (or a
Unit Price No. 1:	
Prep and Paint concrete wall:	\$/Square Yard
Unit Price No. 2:	
Prep and Paint brick wall:	\$/Square Yard
Unit Price No. 3:	
Remove existing and install new cove base:	\$ 1.1.5 /Linear Foot

4. CONTRACT TIME

The Bidder offers to perform the work in accordance with the timeline specified below:

Solicitation #: 44643

Solicitation Title: Sweet Hall Interior Paint Renovations

Start of construction:

Within 14 days of issued PO.

Substantial completion:

April 15, 2022

Final completion:

April 29, 2022

5. LIQUIDATED DAMAGES

The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for <u>each</u> calendar day of delay beyond the date for substantial completion, as determined in the sole discretion of the State: \$500/day.

Five Hundred dollars per calendar day.

This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the Bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

Date: 1/6/2022

BIDDER

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Signature III IIIk

Vaughn Butler, Owner

Printed name and title of person signing on behalf of Bidder

GC-41358

Bidder's Contractor Registration Number

STATE CONTRACT ADDENDUM

RHODE ISLAND DEPARTMENT OF LABOR AND TRAINING

PREVAILING WAGE REQUIREMENTS (37-13-1 ET SEQ.)

The prevailing wage requirements are generally set forth in RIGL 37-13-1 et seq. These requirements refer to the prevailing rate of pay for regular, holiday, and overtime wages to be paid to each craftsmen, mechanic, teamster, laborer, or other type of worker performing work on public works projects when state or municipal funds exceed one thousand dollars (\$1,000).

All Prevailing Wage Contractors and Subcontractors are required to:

- 1. Submit to the Awarding Authority a list of the contractor's subcontractors for any part or all of the prevailing wage work in accordance with RIGL § 37-13-4;
- 2. Pay all prevailing wage employees at least once per week and in accordance with RIGL §37-13-7;
- 3. Post the prevailing wage rate scale and the Department of Labor and Training's prevailing wage poster in a prominent and easily accessible place on the work site in accordance with RIGL §37-13-11; posters may be downloaded at https://dlt.ri.gov/requiredposters/ or obtained from the Department of Labor and Training, Center General Complex, 1511 Pontiac Avenue, Cranston, Rhode Island;
- 4. Access the Department of Labor and Training website, at https://dlt.ri.gov on or before July 1st of each year, until such time as the contract is completed, to ascertain the current prevailing wage rates and the amount of payment or contributions for each covered prevailing wage employee and make any necessary adjustments to the covered employee's prevailing wage rates effective July 1st of each year in compliance with RIGL §37-13-8;
- Attach a copy of this CONTRACT ADDENDUM and its attachments as a binding obligation to any and all contracts between the contractor and any subcontractors and their assignees for prevailing wage work performed pursuant to this contract;
- 6. Provide for the payment of overtime for prevailing wage employees who work in excess of eight (8) hours in any one day or forty (40) hours in any one week as provided by RIGL §37-13-10;

Last Revised on: 5/4/2021

- 7. Maintain accurate prevailing wage employee payroll records on a Rhode Island Certified Weekly Payroll form available for download at https://dlt.ri.gov/wrs/prevailingwage/ as required by RIGL §37-13-13, and make those records available to the Department of Labor and Training upon request;
- 8. Furnish the fully executed RI Certified Weekly Payroll Form to the awarding authority on a monthly basis for all work completed in the preceding month.
- 9. For general or primary contracts one million dollars (\$1,000,000) or more, shall maintain on the work site a fully executed RI Certified Prevailing Wage Daily Log listing the contractor's employees employed each day on the public works site; the RI Certified Prevailing Wage Daily Log shall be available for inspection on the public works site at all times; this rule shall not apply to road, highway, or bridge public works projects. Where applicable, furnish both the Rhode Island Certified Prevailing Wage Daily Log together with the Rhode Island Weekly Certified Payroll to the awarding authority.
- 10. Any violation of RIGL 37-13-13 of Certified Weekly Payroll Forms and Daily Logs will result in the department imposing a penalty on the contractor of a minimum of one hundred dollars (\$100) for each calendar day of noncompliance.
- 11. Assure that all covered prevailing wage employees on construction projects with a total project cost of one hundred thousand dollars (\$100,000) or more has a OSHA ten (10) hour construction safety certification in compliance with RIGL § 37-23-1;
- 12. Employ apprentices for the performance of the awarded contract when the contract is valued at one million dollars (\$1,000,000) or more, and comply with the apprentice to journey-person ratio for each trade approved by the apprenticeship council of the Department of Labor and Training in compliance with RIGL §37-13-3.1;
- 13. Assure that all prevailing wage employees who perform work which requires a Rhode Island trade license possess the appropriate Rhode Island trade license in compliance with Rhode Island law; and
- 14. Comply with all applicable provisions of RIGL §37-13-1, et. seq;

Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at https://dlt.ri.gov/wrs/prevailingwage/.

CERTIFICATION

I hereby certify that I have reviewed this CONTRACT ADDENDUM and understand my obligations as stated above.

Subscribed and sworn before me this 6 day of January 2022

Debra Cassidy Notary Public, State of Connecticut My Commission Expires 12/31/2025

My commission expires: 12-/31/2-025

State of Rhode Island PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpayer Identification Number (T.I.N.)
Enter your taxpayer identification number in the appropriate box. For most Social Security No. (SSN) Employer ID No. (EIN)
individuale this is your social country
number. 42 1758371
NAME Scholur Painting, LLC ADDRESS 2 Klarides Village Dr. #145
ADDRESS 2 Klarides Village Dr. #145
(REMITTANCE ADDRESS, IF DIFFERENT)
CITY, STATE AND ZIP CODE Seymour CT 08483
CERTIFICATION: Under penalties of perjury, I certify that:
(1) The number shown on this form is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to
me), and (2) I am not subject to backup withholding because either: (A) I have not been notified by the Internal Revenue Service (IRS)
that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (B) the IRS has notified me that I am no longer subject to backup withholding.
Certification Instructions You must cross out item (2) above if you have been notified by the IRS that you are subject to backup
withholding because of under-reporting interest or dividends on your tax return. However, if after being notified by IRS that you
were subject to backup withholding you received another notification from IRS that you are no longer subject to backup withholding, do not cross out item (2).
PLEASE SIGN HERE
SIGNATURE Vaught 7/3M TITLE President DATE 1/6/22 TEL NO. 8774472
BUSINESS DESIGNATION:
Please Check One: Individual Medical Services Corporation Government/Nonprofit Corporation
Partnership Corporation Trust/Estate Legal Services Corporation
NAME: Be sure to enter your full and correct name as listed in the IRS file for you or your business.
ADDRESS, CITY, STATE AND ZIP CODE: Enter your primary business address and remittance address if different from your
primary address). If you operate a business at more than one location, adhere to the following:
1) Same T.I.N. with more than one location — attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.
 Different T.I.N. for each different location – submit a completed W-9 form for each T.I.N. and location. (One year-end tax information return will be reported for each T.I.N. and remittance address.)
CERTIFICATION — Sign the certification, enter your title, date, and your telephone number (including area code and extension).
BUSINESS TYPE CHECK-OFF — Check the appropriate box for the type of business ownership.

Mail to: Rhode Island College, Purchasing Department, Building #5 600 Mt. Pleasant Avenue, Providence, RI 02908