

Nassau County Office of Purchasing

A-7-20

# Staff Summary A-07-2020

Subject: Mobile Command Center
(RQEM19000005)
Department: Department of Shared Services/
Office of Purchasing
Department Head Name:
Melissa Gallucci
Department Head Signature
MOLINA MALVILLA

Date:	
October 16, 2019	
Vendor Name:	
LDV, Inc	
Contract Number:	
A-07-2020	
Contract Manager Name:	
Anette Sullivan, Buyer	

Propo	sed Leg	gislative Act	ion	
То	Date	Approval	Info	Other
 Assgn Comm				
 Rules Comm				
Full Leg				

Internal Approvals			
Date & Init.	Approval	Date & Init.	Approval
0	Dept. Head		
Af	Budget	ofrefront &	County Atty.
	Deputy C.E.	1645020t	County Exec.

### Narrative

<u>Purpose:</u> To authorize and award a purchase order for a mobile command center for the Nassau County Office of Emergency Management. A mobile command center is an extension of the County's Emergency Operation Center, allowing the direction of people, resources, and information, and controls events to avert a crisis/emergency and minimize/avoid impacts should an incident occur.

**Discussion:** The mobile command center is being purchased through the GSA 1122 Program, in accordance with General Municipal Law 104(2). The New York State Office of General Services has certified the County as a qualified participant in the 1122 Program and has approved the purchase of this mobile command center from LDV, Inc. at a cost of \$214,373. After certification from New York State Office of General Services, to further ensure that the County is receiving competitive pricing, the Department of Shared Services, Office of Purchasing, conducted a mini-bid through the GSA Advantage platform, soliciting quotes from 23 vendors. The County received two bids, with LDV, Inc. being the lowest responsive bidder after the mini-bid process. LDV, Inc. is not a MWBE, veteran, or service disabled veteran owned business.

<u>Impact on Funding:</u> The maximum amount authorized under this purchase order is Two Hundred Fourteen Thousand Three Hundred Seventy-Three Dollars (\$214,373) from grant funds, EMGRTGUX7FED, SUBOBJ BB207.

Recommendation: Office of Purchasing recommends an award be given to LDV. Inc. through the GSA 1122 Program, in accordance with General Municipal Law 104(2).

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# RULES RESOLUTION

A RESOLUTION AUTHORIZING THE COMMISIONER OF SHARED SERVICES TO

AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU,

ACTING ON BEHALF OF THE NASSAU COUNTY OFFICE OF EMERGENCY

MANAGEMENT, AND LDV, INC.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING desires to purchase a Mobile Command Center through the GSA 1122 Program, in accordance with General Municipal Law 104(2); and

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with <u>LDV</u>, <u>Inc.</u>

# COUNTY OF NASSAU

### INTER - DEPARTMENTAL MEMO

TO:

CLERK OF THE COUNTY LEGISLATURE

A-07-2020

FROM:

MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE:

October 16, 2019

SUBJECT: RESOLUTION - THE NASSAU COUNTY OFFICE OF EMERGENCY MANAGEMENT.

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF TWO HUNDRED FOURTEEN THOUSAND THREE HUNDRED SEVENTY-THREE DOLLARS (\$214,373.00) ON BEHALF OF THE NASSAU COUNTY OFFICE OF EMERGENCY MANAGEMENT TO LDV, INC., WHO IS THE LOWEST RESPONSIBLE BIDDER MEETING SPECIFICATIONS TO PROVIDE FOR THE NASSAU COUNTY OFFICE OF EMERGENCY MANAGEMENT. THIS PURCHASE IS BEING MADE THROUGH THE GSA 1122 PROGRAM, IN ACCORDANCE WITH GENERAL MUNICIPAL LAW 104(2).

THE ABOVE DESCRIBED RESOLUTION AND SUPPORTING DOCUMENTATION ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW, APPROVAL, AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

MELISSA GALLUCCI

COMMISSIONER OF SHARED SERVICES

MS: br

ENCL:

- (1) STAFF SUMMARY
- (2) DISCLOSURE STATEMENT
- (3) RESOLUTION
- (4) BID SUMMARY
- (5) BID PROPOSAL
- (6) CERTIFICATE OF LIABILITY INSURANCE
- (7) RECOMMENDATION OF AWARD
- (8) POLITICAL CONTRIBUTION FORM





# COUNTY OF NASSAU

# POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES		ON	Х	If yes, to what campaigr	n committee?	
				on must be signed by a purpose of executing Contr	•	consultant, contractor or Vendor authorized as a
	_			so swears that he/she ha ccurate.	s read and und	derstood the foregoing statements and they are, to
<u>made f</u>	The undersigned further certifies and affirms that the contribution(s) to the campaign committees identified above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.					
	•	•		ified at the date and time ID@LDVUSA.COM]	indicated by:	
Dated:	01/2	21/2020	05:06:2	2 PM	Vendor:	LDV, Inc.
					Title:	Sales Coordinator

Page 1 of 1 Rev. 3-2016



# COUNTY OF NASSAU

### LOBBYIST REGISTRATION AND DISCLOSURE FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization. The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

None
2. List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):
N/A
3. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated:
N/A
4. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed. See the last page for a complete description of lobbying activities.
N/A
5. The name of persons, organizations or governmental entities before whom the lobbyist expects to lobby:
N/A

6. If such lobbyist is retained or employed pursuant to a written agreement of retainer or employment, you must attach a copy of such document; and if agreement of retainer or employment is oral, attach a written statement of the substance thereof. If the written agreement of retainer or employment does not contain a signed authorization from the client by whom you have been authorized to lobby. separately attach such a written authorization from the client.

Page 1 of 3 Rev. 3-2016

ng April 1, 2016 and e rs prior to the date of following Nassau Cou ssau County elected o y Legislator?	ed campaign contributions pursuant to ending on the date of this disclosure, or this disclosure and ending on the date of unty elected officials or to the campaign offices: the County Executive, the County must so state:			
	2			
	:			
assau County Departn	nent of Information Technology ("IT") to			
yment or designation	I must give written notice to the County			
VERIFICATION: The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.				
	paign committees listed above were fit or in exchange for any benefit or			
dicated by:				
Vendor:	LDV, Inc.			
Title:	Sales Coordinator			
i a :	ing April 1, 2016 and ears prior to the date of following Nassau Coussau County elected of Legislator?  mmittee? If none, you assau County Department or designation that he/she has read accurate.  tribution(s) to the came a governmental bene dicated by:  Vendor:			

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

The term "lobbying" or "lobbying activities" does not include: Persons engaged in drafting legislation, rules, regulations or rates; persons advising clients and rendering opinions on proposed legislation, rules, regulations or rates, where such professional services are not otherwise connected with legislative or executive action on such legislation or administrative action on such rules, regulations or rates; newspapers and other periodicals and radio and television stations and owners and employees thereof, provided that their activities in connection with proposed legislation, rules, regulations or rates are limited to the publication or broadcast of news items, editorials or other comment, or paid advertisements; persons who participate as witnesses, attorneys or other representatives in public rule-making or ratemaking proceedings of a County agency, with respect to all participation by such persons which is part of the public record thereof and all preparation by such persons for such participation; persons who attempt to influence a County agency in an adjudicatory proceeding, as defined by § 102 of the New York State Administrative Procedure Act.

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# PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1.	Principal Name Mary Lynch
	Date of birth 05 / 23 / 1974
	Home address 2819 S Browns Lake Drive
	Chy/state/zip Burlington, WI 53105
	Business address 180 Industrial Drive
	City/state/zip Burlington, WI 53105
	Telephone 262-757-2474
	Other present address(es)
	City/state/zip
	Telephone
	List of other addresses and telephone numbers attached
2.	Positions held in submitting business and starting date of each (check all applicable)
	President/
	Chairman of Board/Shareholder/Shareholder/
	Chief Exec. Officer/Secretary/
	Chief Financial Officer/ Partner//
	Vice President Of joly 2013
	(Other)
3,	Do you have an equity interest in the business submitting the questionnaire?  YES X NO _ If Yes, provide details. 13% of the against the
4.	Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire? YES NO _X if Yes, provide details.
5.	Within the past 3 years, have you been a principal owner or officer of any business or not-for-profit organization other than the one submitting the questionnaire? YESNOX If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency.  Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.
7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
Been debarred by any government agency from entering into contracts with that agency?  NO X YES If Yes, provide details for each such instance.
b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? NOXYES If Yes, provide details for each such instance.
c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? NO $\underline{X}$ YES $\underline{X}$ If Yes, provide detail for each such instance.
d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? NO $\underline{\hspace{1cm}}$ YES $\underline{\hspace{1cm}}$ If Yes, provide details for each such instance.
8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated? If 'Yes', provide details for each such instance. (Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.)
a) Is there any felony charge pending against you? NO $\underline{X}$ YES $\underline{\hspace{1cm}}$ If Yes, provide details for each such charge.
b) Is there any misdemeanor charge pending against you? NO $\underline{X}$ YES $\underline{\hspace{0.5cm}}$ If Yes, provide details for each such charge.
c) Is there any administrative charge pending against you? NO X YES If Yes, provide details for each such charge.
d) In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? NOX YES If Yes, provide details for each such conviction.
e) In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? NO X YES If Yes, provide details for each such conviction.
f) In the past 5 years, have you been found in violation of any administrative or statutory charges?

been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? NOX YES If Yes, provide details for each such investigation.
10. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? NO X YES If Yes; provide details for each such investigation.
11. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? NO $\underline{X}$ YES $\underline{X}$ If Yes; provide details for each such instance.
12. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? NOX YES If Yes, provide details for each such year.

TITLE

BIDDER SIGN HERE

CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN C THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINE RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARC	IN ADDITION, MAY
being duly sworn, state that I have read and und contained in the foregoing pages of this questionnaire and the following pages of atta full and complete answers to each item therein to the best of my knowledge, informat notify the County in writing of any change in circumstances occurring after the submiss and before the execution of the contract; and that all information supplied by me is truknowledge, information and belief. I understand that the County will rely on the informationnaire as additional inducement to enter into a contract with the submitting but	esion of this questionnaire to the best of my nation supplied in this
Sworn to before me this 17 day of Sopt 2019	
Notary Public PUBLIC	
Name of súbmitting business	
MARY LYNCH Print name	
Signature	
Vice President	
09 /17 / 19 Date	
·	
	:
ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHER	WISE SPECIFIED.

BIDDER

# PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY, FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

١,	Principal Name Patrick D. Lynch
	Date of birth 04 / 02 /1972
	Home address 30715 Cedar Drive
	City/state/zip_Burlington, WI 53105
	Business address 180 Industrial Drive
	City/state/zip_Burlington, WI 53105
	Telephone n/a 800.558.5986
	Other present address(es)
	City/state/zip
	Telephone
	List of other addresses and telephone numbers attached
2,	Positions held in submitting business and starting date of each (check all applicable)
	President/
	Chairman of Board / / Shareholder / /
	Chief Exec. Officer/_ / Secretary / /
	Chief Financial Officer /_ / Pariner / /
	Vice President / / / / / / / /
	(Other)
-	
3,	Do you have an equity interest in the business submitting the questionnaire?  YES X NO If Yes, provide details. 13%
4.	Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire? YES $\underline{\hspace{1cm}}$ NO $\underline{\hspace{1cm}}^{\times}$ If Yes, provide details.
5.	Within the past 3 years, have you been a principal owner or officer of any business or not-for-profit organization other than the one submitting the questionnaire? YES NO $\underline{x}$ ; If Yes, provide details.
3.	Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer? YES NO $\frac{\times}{}$ If Yes, provide details.
	ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
	* * * * * * * * * * * * * * * * * * *
	BIDDER
	26

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7.	In the ( Section	past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in n 5 in which you have been a principal owner or officer:
	a.	Been debarred by any government agency from entering into contracts with that agency?  YES NO _X If Yes, provide details for each such instance.
	b.	Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES NO _x If Yes, provide details for each such instance.
	C.	Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO $\underline{x}$ If Yes, provide details for each such instance.
	đ.	Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO $\underline{x}$ If Yes, provide details for each such instance.
8.	and/or portion initiate procee respon	any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings d more than 7 years ago and/or is any such business now the subject of any pending bankruptcy edings, whenever initiated? If 'Yes', provide details for each such instance. (Provide a detailed use to all questions checked "YES". If you need more space, photocopy the appropriate page and it to the questionnaire.)
	a)	is there any felony charge pending against you? YES NO $\underline{x}$ If Yes, provide details for each such charge.
	b)	Is there any misdemeanor charge pending against you? YES NO $\underline{x}$ If Yes, provide details for each such charge.
	c)	Is there any administrative charge pending against you? YES NO _x If Yes, provide details for each such charge.
	d)	In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES NO _X If Yes, provide details for each such conviction.
	e)	In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?  YES NO _x If Yes, provide details for each such conviction.
	f)	In the past 5 years, have you been found in violation of any administrative or statutory charges?  YES NO _x If Yes, provide details for each such occurrence.
		A 1
4	ALL BIDS	MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
	BIDDER 9	Shareholder / Treasurer
		CEPODER TITLE
		27

- 9. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? YES \_\_\_\_\_ NO X\_\_\_ if Yes, provide details for each such investigation.
- 10. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? YES \_\_\_\_\_ NO x \_\_\_ If Yes; provide details for each such investigation.
- 11. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES \_\_\_\_\_ NO \_x\_\_\_ If Yes; provide details for each such instance.
- 12. For the past 5 tax years, have you falled to file any required tax returns or falled to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES \_\_\_\_\_ NO x \_\_\_ If Yes, provide details for each such year.

ALL BIDS MUST BE FO.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

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Shareholder / Treasurer

TITLE

CERTIFICATION  A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULT THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUB- RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUT SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO  I DITTOLA LYNCIA being duly sworn, state that I contained in the foregoing pages of this questionnaire and the folio full and complete answers to each item therein to the best of my knowledge, information of the contract; and that all information submoviedge, information and belief. I understand that the County will questionnaire as additional inducement to enter into a contract with	TURE BIDS, AND, IN ADDITION, MAY CRIMINAL CHARGES.  have read and understand all the items wing pages of attachments; that I supplied nowledge, information and belief; that I will ng after the submission of this questionnaire upplied by me is true to the best of my it rely on the information supplied in this
Sworn to before me this 2 day of System to 20_(9	
Notary Public  LDU, Inc.  Name of submitting business  Patroly 4 nc.  Print name  Signature  Tocasuses  Title  9,2519	HOTARY PARTY OF WISCORD
Date	
	, ;
	4
ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN	DOORS UNLESS OTHERWISE SPECIFIED.
BIDDER SIGN HERE	TITLE

BIDDER

# PRINCIPAL QUESTIONNAIRE FORM

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-		1. Principal Name Rick Guerra
		Date of birth 03 / 21 /1978
		Home address 1533 Rarbana 61
		City/state/zip Burlington, WI 53105 Business address 180 Industrial Ave.
	-	PUSINESS Address 100 T.
		City/state/zin Burlington mr rota
		releptions 462-757-2429
		Other present address(es)
		City/state/zip
		City/state/zip Telephone
		Telephone List of other addresses and telephone numbers attached
	2.	Positions half to the principle of the p
	••	Positions held in submitting business and starting date of each (check all applicable)  President/Treasurer//
		President / / Treasurer / / Chairman of Board /
		Sharohalda
		who rulancial Officer / /
		Vice President / / Partner / / (Other)
	3.	Do you have an equity interest in the business submitting the questionnaire?  YES NO _X If Yes, provide details.
	4.	Are there any makes the
		Are there any outstanding loans, guarantees or any other form of security or lease or any other type of YES NO X If Yes, provide details.
	5.	Militarian dia x a
	$\circ$ .	CIME SOU COMMENT 11 LES DECLARA MALAIL
	ALL:	e past 3 years while you were a principal owner or officer? YES NO X If Yes, provide details.
	BTO	ELDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
	******	BIDDER Secretary
		26 Time

TITLE

or Pri	as a res ovide a	affirmative answer is required below whether the sanction arose automatically, by operation of law, suit of any action taken by a government agency.  detailed response to all questions checked "YES". If you need more space, photocopy the e page and attach it to the questionnaire.	
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	b.	Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES NO $\frac{x}{}$ If Yes, provide details for each such instance.	
	C,	Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO $\underline{\times}$ If Yes, provide details for each such instance.	
	d.	Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO $\underline{X}$ If Yes, provide details for each such instance.	
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	a)	Is there any felony charge pending against you? YES NO $\underline{x}$ If Yes, provide details for each such charge.	
	b)	Is there any misdemeanor charge pending against you? YESNO _X If Yes, provide details for each such charge.	
	c)	Is there any administrative charge pending against you? YES NO $\underline{\times}$ If Yes, provide details for each such charge.	
	d)	In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES NO $\underline{\times}$ _ If Yes, provide details for each such conviction.	
	е)	In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO _x if Yes, provide details for each such conviction.	
	f)	In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO _X If Yes, provide details for each such occurrence.	
	ALL BIDS	MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.	
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OFFICE OF PURCHASING COUNTY OF NASSAU STATE OF NEW YORK	FORMAL SEALED BID PROPOSAL
9. In addition to the information provided in response to the previous been the subject of a criminal investigation and/or a civil anti-true local prosecuting or investigative agency and/or the subject of an was related to activities performed at, for, or on behalf of the subbusiness listed in response to Question 5? YESNO _x investigation.	st investigation by any federal, state or n investigation where such investigation brilling business entity and/or an affiliated
10. In addition to the information provided, in the past 5 years has a response to Question 5, been the subject of a criminal investigation and/or any other type of investigation by any government agence and local regulatory agencies while you were a principal owner of provide details for each such investigation.	tion and/or a civil anti-trust investigation
11. In the past 5 years, have you or this business, or any other affiliated Question 5 had any sanction imposed as a result of judicial or any professional license held? YES NO _x If Yes; professional license held?	dministrative proceedings with respect to
12. For the past 5 tax years, have you falled to file any required tax federal, state or local taxes or other assessed charges, including charges? YES NO _x If Yes, provide details for each state of the s	but not limited to water and sewer

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CERTIFICATION

Date

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Such poling duly sworn, state that I have read and understand all the items contained in the foregoing pages of this questionnaire and the following pages of attachments; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this questionnaire and before the execution of the contract; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this questionnaire as additional inducement to enter into a contract with the submitting business entity.

day of Sworn to before me this Print name Signature Title

ALL BYDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED. BIDDER SIGN HERE TITLE BIDDER

# PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY, FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

١.	Findpai Name Nutt Fetrie
	Date of birth 07 / 28 / 1961
	Home address 30518 Durand Ave.
	City/state/zip_Burlington, WI 53105
	Business address 180 Industrial Drive
	City/state/zip_Burlington, WI 53105
	Telephone 262-757-2502
	Other present address(es)
	City/state/zip
	Telephone
	List of other addresses and telephone numbers attached
2.	Positions held in submitting business and starting date of each (check all applicable)  President $\frac{6/3/2010}{f}$ Treasurer
	Chairman of Board// Shareholder//
	Chief Exec. Officer / / Secretary / /
	Chief Financial Officer / / Partner / /
	Vice President / /
	(Other)
3.	Do you have an equity interest in the business submitting the questionnaire?  YES NO _x If Yes, provide details.
1.	Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire? YES NO _x If Yes, provide details.
5.	Within the past 3 years, have you been a principal owner or officer of any business or not-for-profit organization other than the one submitting the questionnaire? YES NO $\underline{x}$ ; If Yes, provide details,
3.	Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer? YES NO _x If Yes, provide details.
	ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
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# OFFICE OF PURCHASING COUNTY OF NASSAU STATE OF NEW YORK

## FORMAL SEALED BID PROPOSAL

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire. 7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer: a. Been debarred by any government agency from entering into contracts with that agency? YES \_\_\_\_\_ NO x If Yes, provide details for each such instance. b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES \_\_\_\_ NO  $\underline{x}$  If Yes, provide details for each such instance. c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO x If Yes, provide details for each such instance, d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES \_\_\_\_ NO  $\underline{x}$  If Yes, provide details for each such instance. 8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated? If 'Yes', provide details for each such instance. (Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.) a) Is there any felony charge pending against you? YES \_\_\_\_ NO \_x \_\_ If Yes, provide details for each such charge. b) Is there any misdemeanor charge pending against you? YES \_\_\_\_ NO x \_\_\_ If Yes, provide details for each such charge. c) Is there any administrative charge pending against you? YES \_\_\_\_\_NO x \_\_ If Yes, provide details for each such charge, d) In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES \_\_\_\_ NO X \_\_ If Yes, provide details for each such conviction. e) In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO x If Yes, provide details for each such conviction.

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f) In the past 5 years, have you been found in violation of any administrative or statutory charges?

YES \_\_\_\_ NO x \_\_ If Yes, provide details for each such occurrence.

# ÓFFICE OF PURCHASING COUNTY OF NASSAU STATE OF NEW YORK

# FORMAL SEALED BID PROPOSAL

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federal, state or local tax	es or other assessed charge $\frac{x}{x}$ If Yes, provide de	aes, includina but not lim	nited to water and sewer	
12. For the past 5 tax years,	have you falled to file any	required tax returns or f	alled to pay any applicable	
Question 5 had any sand	otion imposed as a result of held? YES NO _X_	of judicial or administrativ	e proceedings with respect	to
11. In the past 5 years, have	. Vall ar this huminans are	nu něhom official hamba	D-1 1	
response to Question 5, and/or any other type of i	been the subject of a crim investigation by any gover noles while you were a pri	lnal investigation and/or mment agency, including	a civil anti-trust investigation but not limited to federal, si	tate
10. In addition to the informa	ition provided, in the past	5 vears has anv business	s or omanization listed in	
been the subject of a crir local prosecuting or inve- was related to activities p	minal investigation and/or stigative agency and/or th performed at, for, or on be	a civil anti-trust investiga e subject of an investigat half of the submitting bus	tion by any federal, state or ion where such investigation siness entity and/or an affilia byide details for each such	n
9. In addition to the Informa	ation provided in response	to the previous questions	s, in the past 5 years, have	you
	NAME OF STATE			

CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.
being duly swom, state that I have read and understand all the items contained in the foregoing pages of this questionnaire and the following pages of attachments; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this questionnaire and before the execution of the contract; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this questionnaire as additional inducement to enter into a contract with the submitting business entity.
Sworn to before me this /7 day of Sept 20_19
Dearna Wetzel  Notary Public  Notary Public  Notary Public
Name of submitting business
Kurt Petrie Print name
Signature
President Title
9 / 17 / 2019 Date

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# PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE GAREFULLY AND COMPLETELY, FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1.	Principal Name Michael J. Lynch	
	Date of birth <u>06 / 13 / 1970</u>	•
	Home address 1084 LaGrange	w
	City/state/zip_Lake Geneva, WI 53147	
	Business address 180 Industrial Drive	
	City/state/zip_Burlington, WI 53105	
	Telephone n/a 800.558.5986	,
	Other present address(es)	•
	City/state/zip	
	Telephone	
بحرر	List of other addresses and telephone numbers attached	
2.	Positions held in submitting business and starting date of each (check all applicable)	
	President/Treasurer/_/	
	Chairman of Board / / Shareholder 01 / 01 / 2007	
	Chief Exec. Officer / / Secretary / /	
	Chief Financial Officer / / Partner / /	
	Vice President//	
	(Other)	
3.	Do you have an equity interest in the business submitting the questionnaire? YES $\times$ NO If Yes, provide details, $^{13\%}$	
- 4.	Are there any outstanding loans, guarantees or any other form of security or lease or an contribution made in whole or in part between you and the business submitting the ques YES NO _x If Yes, provide details.	y other type of tionnaire?
5.	Within the past 3 years, have you been a principal owner or officer of any business or no organization other than the one submitting the questionnaire? YES NO $\underline{x}$ ; If Yes	ot-for-profit , provide details.
6.	Has any governmental entity awarded any contracts to a business or organization listed the past 3 years while you were a principal owner or officer? YES NO $\underline{x}$ _ if Yes,	in Section 5 in provide details.
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	BIDDER SIGN HERE Shareholder	
	BIDDER TITLE	# # #

### FORMAL SEALED BID PROPOSAL

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency.

Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

a. Been debarred by any government agency from entering into contracts with that agency?

YES \_\_\_\_\_\_ NO \_x \_\_\_\_ if Yes, provide details for each such instance.

b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES \_\_\_\_\_\_ NO \_x \_\_\_\_ if Yes, provide details for each such instance.

c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES \_\_\_\_\_\_ NO \_x \_\_\_\_ if Yes, provide details for each such instance.

action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO x If Yes, provide details for each such instance.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any

d. Been suspended by any government agency from entering into any contract with it; and/or is any

- and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated? If 'Yes', provide details for each such instance. (Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.)
  - a) Is there any felony charge pending against you? YES \_\_\_ NO  $\frac{x}{x}$  If Yes, provide details for each such charge.
  - b) Is there any misdemeanor charge pending against you? YES \_\_\_\_ NO  $\underline{x}$  If Yes, provide details for each such charge.
  - c) Is there any administrative charge pending against you? YES \_\_\_\_ NO X \_\_ If Yes, provide details for each such charge.
  - d) In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other orime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES \_\_\_\_ NO \_x \_\_ If Yes, provide details for each such conviction.
  - e) In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES \_\_\_\_ NO \_X \_\_\_ If Yes, provide details for each such conviction.

f) In the past 5 years, have you been found in YES NO _X If Yes, provide details	n violation of any administrative or statutory charges? sor each such occurrence.
ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIV	RY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
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# OFFICE OF PURCHASING COUNTY OF NASSAU STATE OF NEW YORK

# FORMAL SEALED BID PROPOSAL

	been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? YES NO _X If Yes, provide details for each such investigation.
10.	In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? YES NO $\times$ If Yes; provide details for each such investigation.
11.	In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES NO $\underline{\times}$ _ If Yes; provide details for each such instance.
12.	For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO x If Yes, provide details for each such year.

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CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.
I. Michtellynch, being duly swom, state that I have read and understand all the Items contained in the foregoing pages of this questionnaire and the following pages of attachments; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this questionnaire and before the execution of the contract; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this questionnaire as additional inducement to enter into a contract with the submitting business entity.
Sworn to before me this $34$ day of $69$ 2019
Notary Public Public & Public &
Name of submitting business  Michael Lynch  Print name
Signature Signature
Share holder
9 12 41 19 Date

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

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# **Business History Form**

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none". No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS). Date: 10/18/2019 1) Proposer's Legal Name: LDV, Inc. 2) Address of Place of Business: 180 Industrial Drive, Burlington, WI 53105 List all other business addresses used within last five years: 3) Mailing Address (if different): Same as above Phone: 262-757-2476 Does the business own or rent its facilities? Owns 4) Dun and Bradstreet number: 089845598 5) Federal I.D. Number: 39-1281237 6) The proposer is a (check one): \_\_\_\_ Sole Proprietorship \_\_\_ Partnership \_\_\_ Corporation X Other (Describe) 7) Does this business share office space, staff, or equipment expenses with any other business? Yes \_\_\_ No \_X If Yes, please provide details: \_\_\_\_ 8) Does this business control one or more other businesses? Yes \_\_\_ No X\_\_ If Yes, please provide details: \_ 9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business? Yes No X If Yes, provide details. ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

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President

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# OFFICE OF PURCHASING . COUNTY OF NASSAU STATE OF NEW YORK

# FORMAL SEALED BID PROPOSAL

other gov bond), da	proposer ever had a bond or surety cancell vernment entity terminated? Yes No _ate, amount of bond and reason for such cancel (if a contract).	X If Yes, state the name of tencelation or forfeiture: or detail	oonding agency, (if a is regarding the
11) Has the p	proposer, during the past seven years, bee irt jurisdiction, amount of liabilities and amo	n declared bankrupt? Yes ount of assets	No X If Yes, state
business state or k officer of investiga was relat	st five years, has this business and/or any, been the subject of a criminal investigation ocal prosecuting or investigative agency? A any affiliated business been the subject of tion by any federal, state or local prosecution by any federal, state or local prosecution to activities performed at, for, or on behalon.	n and/or a civil anti-trust investi And/or, in the past 5 years, have a criminal investigation and/or ng or investigative agency, whe alf of an affiliated business.	gation by any federal, e any owner and/or a civil anti-trust re such investigation
been the and local business federal, s relationsh investigated.  14) Has any obefore or that alleg	st 5 years, has this business and/or any of subject of an investigation by any governmoregulatory agencies? And/or, in the past 5 been the subject of an investigation by an state and local regulatory agencies, for mathip to an affiliated business. Yes X Notion. There was an OSHA Violation in 2017 was completed, it was determined the OSHA investigation there was a LDV, Inc. responded by immediately current or former director, owner or officer during such person's employment, or since edly occurred during the time of employment of that business:	nent agency, including but not lift years, has any owner and/or or y government agency, including ters pertaining to that individual of the second of the se	mited to federal, state fficer of an affiliated plut not limited to so position at or each such fter the OSHA investigation he incident. However, duringer it did not have a guard. ises. business had, either les pertained to events
	a) Any felony charge pending? Yes charge	_ No _x _ If Yes, provide deta	ails for each such
	b) Any misdemeanor charge pending? charge.	Yes No X If Yes, provi	ide details for each such
	c) In the past 10 years, you been convice crime, an element of which relates to tru conduct of business? Yes No _x	ted, after trial or by plea, of any thfulness or the underlying factor If Yes, provide details for each	s of which related to the h such conviction
	d) In the past 5 years, been convicted, a Yes No _x If Yes, provide details	after trial or by plea, of a misder	
	IST BE F.O.B. DESTINATION AND INCLUDE DELIVER	RY WITHIN DOORS UNLESS OTHERWI	SE SPECIFIED.
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	e) In the past 5 years, been found in violations? Yes No _X If Yes, pro	ation of any administrative, statutory, or regulatory byide details for each such occurrence.
any sanc	tion imposed as a result of ludicial or admini	wners or officers, or any other affillated business had strative proceedings with respect to any professional letails for each such instance.
applicable sewer cha response	e federal, state or local taxes or other asses arges? Yes No X If Yes, provide o	file any required tax returns or failed to pay any sed charges, including but not limited to water and letails for each such year. Provide a detailed it more space, photocopy the appropriate page and
	tailed response to all questions checked "Yl page and attach it to the questionnaire.	ES". If you need more space, photocopy the
	Please disclose any conflicts of interest a ase expressly state "No conflict exists."  (i) Any material financial relationships the conflict of interest or the appearance of a	s outlined below. NOTE: If no conflicts exist, at your firm or any firm employee has that may create a conflict of interest in acting on behalf of Nassau
	(ii) Any family relationship that any employed that may create a conflict of interest or the behalf of Nassau County.  No conflict exists	byee of your firm has with any County public servant appearance of a conflict of interest in acting on
	(iii) Any other matter that your firm believ of a conflict of interest in acting on behalf No conflict exists	es may create a conflict of interest or the appearance of Nassau County.
b)	conflict of interest would not exist for your LDV, Inc. has no employees or est should be no conflict of interest occur, we would immediately contains	has, or would adopt, to assure the County that a firm in the future. ablishments in Nassau County, therefore there . However, if a conflict of interest were to ct Nassau County and make them aware or the nce in handling the conflict of interest.
extensive		ser's professional qualifications, demonstrating
*	•	Proposal MUST include: See Attached Doc
	ate of formation;	•
•	ST BE F.O.B. DESTINATION AND INCLUDE DELIVER	Y WITHIN DOORS UNLESS OTHERWISE SPECIFIED.
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	BIDDER	TITLE

# OFFICE OF PURCHASING COUNTY OF NASSAU STATE OF NEW YORK

### FORMAL SEALED BID PROPOSAL

- ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner;
- III) Name, address and position of all officers and directors of the company;
- iv) State of incorporation (if applicable);
- v) The number of employees in the firm;
- vi) Annual revenue of firm;
- vii) Summary of relevant accomplishments
- vili) Copies of all state and local licenses and permits.
- B. Indicate number of years in business.
- C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.
- D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company Southold Town Police Department		
Contact Person Chief Martin Flatley		
Address 41405 Route 25, PO BOX 911		
City/State Peconic, NY 11958		
Telephone 631-765-3115		
Fax#_631-765-2715		
E-Mail Address mfaltely@town.southold.ny.us		

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Company Elmira Police Department
Contact Person Amy Taft
Address 317 E. Church Street
City/State Elmira, NY 14901
Telephone 607-737-5626
Fax# n/a
E-Mail Address n/a
HOLD TO SECTION OF THE SECTION OF TH
Company Gloucester Township Police Department
Company Gloucester Township Police Department  Contact Person Captain Brian McKendry
Company Gloucester Township Police Department
Company Gloucester Township Police Department  Contact Person Captain Brian McKendry  Address 1261 Chews Landing Rd.  Clty/State Laurel Springs, NJ 08021
Company Gloucester Township Police Department  Contact Person Captain Brian McKendry  Address 1261 Chews Landing Rd.

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# CERTIFICATION

Date

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.
I, <u>Kurt Petrie</u> , being duly sworn, state that I have read and understand all the items contained in the foregoing pages of this questionnaire and the following pages of attachments; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this questionnaire and before the execution of the contract; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this questionnaire as additional inducement to enter into a contract with the submitting business entity.
Sworn to before me this 2nd day of December 2019  Deanna Wetzel  Notary Public
Notary Public
EQ. TOBLIC SE
OF WECOLING
Name of submitting business: LDV, Inc.
By: Kurt Petrie
Print name
Signature
President
Title
12

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.		
BIDDER SIGN HERE	President	
BIDDER	TITLE	



- i) Date of Formation: 9/29/1977
- ii) Name, Addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner;
  - a. Mary E Lynch 2819 S Browns Lake Drive, Burlington, WI 53105 Vice President
  - b. Patrick D Lynch 30715 Cedar Drive, Burlington, WI 53105 Director / Shareholder
  - c. Michael J Lynch 1084 LaGrange, Lake Geneva, WI 53147 Director / Shareholder
- iii) Name, Address and position of all officers and directors of the company;
  - a. Mary E Lynch 2819 S Browns Lake Drive, Burlington, WI 53105 Vice President
  - b. Patrick D Lynch 30715 Cedar Drive, Burlington, WI 53105 Director / Shareholder
  - c. Michael J Lynch 1084 LaGrange, Lake Geneva, WI 53147 Director / Shareholder
  - d. Kurt B Petrie 30518 Durand Ave, Burlington, WI 53105 President
  - e. Rick Guerra 1533 Barbara St, Burlington, WI 53105 Secretary
- iv) State of Corporation;
  - a. Wisconsin
- v) The number of employees in the firm;
  - a. 270
- vi) Annual Revenue of the firm;
  - a. Approximately \$30,000,000.00
- vii) Summary of relevant accomplishments
  - a. LDV, Inc. was established on September 29, 1977 initially as a Snap-on mobile tool store manufacturer and began building specialty service vehicles in other markets in 1986. LDV, Inc. is the global leading manufacturer of emergency response, mobile medical, bookmobiles, library outreach and commercial specialty vehicles. Our long-standing reputation for unmatched quality, performance and vehicle reliability makes us the most trusted resource in the industry.
    - As one of the most innovative companies in the world, we were the first-to-market with a number of industry innovations and the only supplier that utilizes Intel-I-Touch™, a single-touch activation panel that controls all operating and power management systems on the vehicle. Not surprisingly, LDV is the chosen vendor for the most prestigious corporations, U.S. and international government agencies and builds 9 out of every 10 Snap-on Mobile Tool Stores.
- viii) Copies of all state and local licenses and permits. (See attached)
- ix) Indicate number of years in business: 42 years



# DEPARTMENT OF TRANSPORTATION DIVISION OF MOTOR VEHICLES STATE OF ESCOSSE

SALES FINANCE - MANUFACTURER - DISTRIBUTOR

MOTOR VEHICLE DEALER RECREATIONAL VEHICLE DEALER

LICENSE CERTIFICATE

NOTATAON AVAILABLE TO AVAILABLE DIVISION OF MOTOR VEHICLES

The person, firm or corporation whose name appears on this license has compiled with the requirements of Wisconsin statutes and is hereby licensed to engage in business as a motor vehicle dealer sales finance company and / or as a motor vehicle dealer recreational vehicle dealer manufacture of distributor to sell, manufacture of distribute the makes of vehicles printed below.

This license and your license plates cannot be assigned or transferred.

If there is a change of ownership or if licensee discontinues business at this location this certificate and all dealer's license plates of the number shown hereon must be returned immediately for cancellation

LICENSE NUMBER

ISSUED 12/01/2018

BRANCH / SUBLOT

**EXPIRES** 11/30/2020

MAKES

MILD

180 INDUSTRIAL DR BURLINGTON WI 53105-2307

Mailing addr exists 53105



# STATE OF WISCONSIN DEPARTMENT OF TRANSPORTATION DIVISION OF MOTOR VEHICLES

MOTOR VEHICLE DEALER - RECREATIONAL VEHICLE DEALER
SALES FINANCE - MANUFACTURER - DISTRIBUTOR:
LICENSE CERTIFICATE



The person, firm or corporation whose name appears on this license has compiled with the requirements of Wisconsin statutes and is hereby licensed to engage in business as a motor vehicle dealer sales finance company and / or as a motor vehicle dealer, recreational vehicle dealer, manufacturer, or distribute the makes of vehicles printed below.

This license and your license plates cannot be assigned on transferred.

If there is a change of ownership or if licensee discontinues business authoriocation this certificate and at dealer's license plates of the number shown hereon must be returned immediately for cancellation.

LICENSE NUMBER
MV-3961

ISSUED 12/01/2016

EXPIRES 11/30/2018

RANCH / SUBLOT

MAKES

ROX \*

WIEGO

LDV INC 180 INDUSTRIAL DR BURLINGTON WI 53(05)

Mailing addrexists 53:105



# PERRY JOHNSON REGISTRARS, INC.

## Certificate of Registration

Perry Johnson Registrars, Inc., has audited the Quality Management System of:

LDV, Inc.

180 Industrial Drive, Burlington, WI 53105 United States.
(This is a campus scheme, See Appendix for site specific details.)

(Hereinafter called the Organization) and hereby declares that Organization is in conformance with:

ISO 9001:2015

This Registration is in respect to the following soope:

Design, Fabrication, Integration, Upfit and Retrofit of Emergency Response and Commercial Specialty Vehicles

This Registration is granted subject to the system rules governing the Registration referred to above, and the Organization hereby covenants with the Assessment body duty to observe and comply with the said rules.







Terry Boboige, President

Perry Johnson Registrars, Inc. (PJR) 755 West Big Beaver Road, Suite 1340 Troy, Michigan 48084 (248) 358-3388

The use of the UKAS accreditation symbol is in respect to the activities covered by the Accreditation Certificate Number 0105.

The validity of this certificate is dependent upon angoing surveillance.

Effective Date: July 20, 2018 Expiration Date: July 1, 2021 Certificate No.: C2018-02952 Page 1 of 2



## PERRY JOHNSON REGISTRARS, INC.

## Αρρεndix

180 Industrial Drive, Burlington, WI 53105 United States

170 Industrial Drive, Burlington, WI 53105 United States

800 Krift, Burlington, WI 53105 United States Design, Fabrication, Integration, Upfit and Retrofit of Emergency Response and Commercial Specialty Vehicles

Metal Fabrication

Quality Control

Terry Boboige President

Perry Johnson Registrars, Inc. (PJR) 755 West Big Beaver Road, Suite 1340 Troy, Michigan 48084 (248) 358-3388 Certificate No.: C2018-02952 Page 2 of 2

#### COUNTY OF NASSAU

#### CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: LDV, Inc.					
Address: 180 Industrial Drive					
City: Burlington	State: WI Zip Code: 53105				
2. Entity's Vendor Identification Number: 391281237					
3. Type of Business: Public Corp	(specify)				
4. List names and addresses of all principals; that is, all in body, all partners and limited partners, all corporate office officers of limited liability companies (attach additional she					
3 File(s) uploaded					
No principals have been attached to this form.					
5. List names and addresses of all shareholders, member individual; list the individual shareholders/partners/member 10K in lieu of completing this section.	ers. If a Publicly held Corporation, include a copy of the				
If none, explain.	nextpage				
As of January 1 2019 Dennis LYNCH and David LYNCH are no longer shareholders. 51% is owned by trusts owned by Mary LYNCH, Michael LYNCH and Patrick LYNCH. The remaining 49% is owned by Mary LYNCH, Michael LYNCH and Patrick LYNCH personally. For proof/verification you can email rguerra@shoplynch.com which is Rick Guerra's email address who is our					
Secretary.					
"No shareholders, members, or partners have been attached to					
6)List all affiliated and related companies and their relation"None"). Attach a separate disclosure form for each affiliated performance of this contract. Such disclosure shall be upon previously disclosed that participate in the performance of the performa	ted or subsidiary company that may take part in the dated to include affiliated or subsidiary companies not				
NONE					
"None." The term "lobbyist" means any and every person to influence - or promote a matter before - Nassau County legislators or committees, including but not limited to the Commission. Such matters include, but are not limited to, property subject to County regulation, procurements. The	age in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter or organization retained, employed or designated by any client y, its agencies, boards, commissions, department heads, Open Space and Parks Advisory Committee and Planning requests for proposals, development or improvement of real term "lobbylst" does not include any officer, director, trustee, State of New York, when discharging his or her official duties.				
Are there lobbyists involved in this matter? YES NO X					
(a) Name, title, business address and lelep	obone number of lobbyist(s):				

14-14

THE RESIDENCE OF THE PARTY OF T

	(b) Describe lobbying activity of	each lobbyist. See below for	a complete description of lobb	ying activities.
	N/A			
	(c) List whether and where the p	person/organization is registe	ered as a lobbyist (e.g., Nassau	ı County, New
	N/A			
			e <del>.</del>	
	ATION: This section must be signe the firm for the purpose of executi		ıltant, contractor or Vendor auth	norized as a
	gned affirms and so swears that h vledge, true and accurate.	e/she has read and understo	ood the foregoing statements a	nd they are, to
	y signed and certified at the date a hwind [MSCHWIND@LDVUSA.Co			
Dated:	10/08/2019 02:19:13 PM			
Citlo:	Salos Coordinator			

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

Michael J Lynch –1084 LaGrange, Lake Geneva WI 53147 Corp address: 23000 Sharon Lane, Waterford WI 53185

Patrick D Lynch –30715 Cedar Drive, Burlington WI 53105 Corp address: 2300 Browns Lake Drive, Burlington WI 53105

Mary E Lynch –2819 S Browns Lake Drive, Burlington WI 53105 Corp address: 180 Industrial Drive, Burlington WI 53105



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/27/2019

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 have ADDITIONAL INSURED provisions or 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 and remove (1).

this certificate does not confer r	ights to the certificate holder in lieu of s	uch endorsement/s)		atoment on
PRODUCER Associated Benefits and Risk Co 100 N Corporate Dr, Suite 100 Brookfield WI 53045	· · · · · · · · · · · · · · · · · · ·	CONTACT NAME: Andrew Thompson PHONE IA/C, No, Ext); 262-446-5426 E-MAIL ADDRESS: DivCerts@AssociatedBRC.com	FAX (A/C, No); 262-54	2-9750
		INSURER(S) AFFORDING COVERAGE		NAIC#
INSURED	LYNCMOT-01	INSURER A: Travelers Indemnity Company of Ame		25666
LDV, Inc.	LINOWOT-01	INSURER B: Travelers Property Casualty Company		25674
180 Industrial Drive   Burlington WI 53105		INSURER C: Travelers Indemnity Company of Con	necticut	25682
		INSURER D :	_	
		INSURER E:		
COVEDACEO		INSURER F:		
COVERAGES	CERTIFICATE NUMBER: 1555962140	REVISION NU	MDED.	

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	TYPE OF INSURANCE	ADDL	SUBR		POLICY EFF			
A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER	(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	· · · · · · · · · · · · · · · · · · ·
	CLAIMS-MADE X OCCUR			Y-630-3E821958-TIA-19	4/11/2019	4/11/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 500,000
							MED EXP (Any one person)	\$5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$1,000,000
İ	POLICY PRO- X LOC						GENERAL AGGREGATE	\$2,000,000
	OTHER:	]					PRODUCTS - COMP/OF AGG	\$2,000,000
В	AUTOMOBILE LIABILITY  X ANY AUTO			AD-3E857470-19-CAG	4/11/2019	4/11/2020	COMBINED SINGLE LIMIT (Ea accident)	\$ \$ 1,000,000
	X ANY AUTO OWNED SCHEDULED						BODILY INJURY (Per person)	\$
	AUTOS ONLY AUTOS HIRED NON-OWNED	- 1	Ì				BODILY INJURY (Per accident)	\$
	AUTOS ONLY AUTOS ONLY	1	}		}		PROPERTY DAMAGE (Per accident)	\$
В.	X UMBRELLA LIAB X OCCUP	-+		7117				\$
-	EXCESSIVE			ZUP-15S3202A-19-NF	4/11/2019	4/11/2020	EACH OCCURRENCE	\$ 25,000,000
	DED X RETENTION \$ 10,000	1	İ				AGGREGATE	\$25,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE			UB-4K056340-19-14-V (WI)	4/11/2019	4/11/2020	X PER OTH-	\$
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
В	Garagekeepers	$\neg +$	<b>-</b> -+	AD 25057470 40 04 0	-		E.L. DISEASE - POLICY LIMIT	\$ 500,000
В	Auto Dealers Professional Liability			AD-3E857470-19-CAG ZPL-15S8783A-19-43	4/11/2019 4/11/2019	4/11/2020	Comp & Coll Physical Damage Aggregate & Ea Act	\$5Mil/\$1000 Ded \$14Mil/\$1000 Ded 1,000,000
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICLE	ER /AC		Int A Live				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 161, Additional Remarks Schedule, may be attached if more space is required)
FOLLOWING ENDORSEMENTS APPLY TO THE NAMES/PROJECTS/EVENTS LISTED BELOW ONLY IF REQUIRED BY WRITTEN CONTRACT OR
AGREEMENT: General Liability: Blanket Additional Insured Including Ongoing and Completed Operations per Form CG D2 46 04 19; Primary And
Non-Contributory per Form CG T1 00 02 19; Blanket Waiver of Subrogation per Form CG D4 58 02 19. Automobile Liability: Customer as Insured Primary
Coverage per form CA 00 25 10 13; Blanket Waiver of Subrogation per Form CA T4 25 02 15. Umbrella: Excess Follows per Form EU 00 01 07 16. The
additional insured and waiver of subrogation coverages indicated by the box(es) checked above are provided by the listed endorsements that only extend

NC 1 West Street Mineola, N.Y. 11501 is included per the forms Isited

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



## FORMAL BID RECOMMENDATION

BID NUMBER GSA E BUY OPEN August 2019 TITLE: Command Center DATE: 10/22/19 TO: BUYER -Anette Sullivan FROM: ADMINISTRATION

PLEASE REVIEW ATTACHED BID RESULT. NOTE YOUR RECOMMENDATION FOR AWARD.

FORWARD THIS TRANSMITTAL SHEET TOGETHER WITH BID FILE. RETAIN REQUISITION.

Date: 10/22/19		Bid Results
To: Supervisor From: Buyer Anette Sulliv	van Item	Bidder
List of recommended awards in accordance with tattached summary is shown in column at right. The reason for award to other than low bidder is indication the reverse side of this page.  Buyer	ihe he	Recommend an award be made to LDV, Inc. as the lowest responsible bidder meeting specifications.  Bid was processed through GSA E BUY by Claudia Colasaurdo
Date:		
To: Director From: Supervisor  Concur Disagree (See Reverse	e)	Bed
Date: /0/12//		utachea -
To: Buyer From: Director Approved for Award Hold award pending discussion		
Subject to Legislature Approval		
and the second		

RFQ ID: RFQ1380753S

✓ Active

Quote ID: RFQ1380753S-

OSF

Vendor

LDV, INC. (§

DUNS:

Contact

089845598

Mary Lynch 262-757-2429

mlynch@ldvusa.com

Contract# GS-30F-0009L

Contract End Date 07/11/2021

Source/Category 23 V/190 05

Total Quote Price:

\$214,373.00

Pending Response

This quote is good until: 09/27/2019 01:00 PM

EDT

Vendor Comments & Attachments

Vendor Comments

No Comments

Vendor Attachments

LDV Cover Letter

LDV References

LDV Bid Specifications

LDV Drawings

Add Delete Price Sheet

Capability Statement

ISO Certification

Line Items

Product/Service Total Price Unit Price Unit Oty Name Manufacturer Mfr. Part/Item # \$211,717.00 \$211,717.00 EΑ Mobile LDV, Inc. EODMCC181637 Command Center / HNT UNIT

Prompt Pay:

FOB:

30 Days 0.0%

Origin/GBL

Total Line

\$211,717.00

Total Dollar Amount in Attachments:

FOB Transportation Cost:

Total Quote:

\$0.00 \$2,656.00

\$214,373.00

Pending Response

EDT

This quote is good until:

09/27/2019 01:00 PM

RFQ ID: RFQ1380753S

✓ Active

Quote ID: RFQ1380753S-

DQH

Vendor

EMI TECHNOLOGIES, INC. 5

DUNS:

147268825

Contract #

47QMCA19D000F

Prompt Pay: 0 Days 0.0%

Destination

FOB:

Contact Jose Alvarez

575-532-9190

Contract End Date

01/28/2024

joea@emitechnologie

s.com

Source/Category

23 V/190 05

Vendor Comments & Attachments

Vendor Comments

Vendor Attachments

EMI is offering product currently on our GSA schedule

EMI Response

Total Quote Price:

\$272,873.58

Mati list

Line Items

Product/Service Manufacturer Qty Unit Unit Price Total Price Mfr. Part/Item # Name EMISHLTR14FT EMI EMISHLTR14FT EΑ \$272,873,58 \$272,873,58 Technologies, inc.

Total Line Items:

\$272,873.58

Total Dollar Amount in Attachments:

\$0.00

FOB Transportation Cost:

\$0.00

Total Quote:

\$272,873.58

**Buyer Notes** 

Comments

30	"Autos" Left With You For Service, Repair, Storage Or Safekeeping	Any land motor vehicle, trailer or semitrailer lawfully within your possession for service, repair, storage or safekeeping, with or without the vehicle owner's knowledge or consent. This also includes "autos" left in your care by your "employees" and members of their households who pay for the services performed.
31	"Auto" Dealers' "Autos" (Physical Damage Coverages)	Any "autos" and the interests in these "autos" described in Item Six of the Declarations.

## B. Owned Autos You Acquire After The Policy Begins

- If Symbols 21, 22, 23, 24, 25 or 26 are entered next to a coverage in Item Two of the Declarations, then you have coverage for "autos" that you acquire of the type described for the remainder of the policy period.
- 2. But, if Symbol 27 is entered next to a coverage in item Two of the Declarations, an "auto" you acquire will be a covered "auto" for that coverage only if:
  - a. We already cover all "autos" that you own for that coverage or it replaces an "auto" you previously owned that had that coverage; and
  - **b.** You tell us within 30 days after you acquire it that you want us to cover it for that coverage.

## C. Certain Trailers And Temporary Substitute Autos

If Covered Autos Liability Coverage is provided by this Coverage Form, the following types of vehicles are also covered "autos" for Covered Autos Liability Coverage:

- "Trailers" with a load capacity of 2,000 pounds or less designed primarily for travel on public roads.
- 2. Any "auto" you do not own while used with the permission of its owner as a temporary substitute for a covered "auto" you own that is out of service because of its:
  - a. Breakdown;
  - b. Repair;
  - c. Servicing:
  - d. "Loss"; or
  - e. Destruction.

#### D. Covered Autos Liability Coverage

#### 1. Coverage

We will pay all sums an "insured" legally must pay as damages because of "bodily injury" or "property damage" to which this insurance applies, caused by an "accident" and resulting from the ownership, maintenance or use of covered "autos".

We will also pay all sums an "insured" legally must pay as a "covered pollution cost or expense" to which this insurance applies, caused by an "accident" and resulting from the ownership, maintenance or use of covered "autos". However, we will only pay for the "covered pollution cost or expense" if there is either "bodily injury" or "property damage" to which this insurance applies that is caused by the same "accident".

We have the right and duty to defend any "insured" against a "suit" asking for such damages or a "covered pollution cost or expense". However, we have no duty to defend any "insured" against a "suit" seeking damages for "bodily injury" or "property damage" or a "covered pollution cost or expense" to which this insurance does not apply. We may investigate and settle any claim or "suit" as we consider appropriate. Our duty to defend or settle ends when the Covered "Autos" Liability Coverage Limit of Insurance has been exhausted by payment of judgments or settlements.

#### 2. Who is An insured

The following are "insureds" for covered "autos":

- a. You for any covered "auto".
- Anyone else while using with your permission a covered "auto" you own, hire or borrow except:

(1) The owner or anyone else from whom you hire or borrow a covered "auto".

This exception does not apply if the covered "auto" is a "trailer" connected to a covered "auto" you own.

- (2) Your "employee" if the covered "auto" is owned by that "employee" or a member of his or her household.
- (3) Someone using a covered "auto" while he or she is working in a business of selling, servicing or repairing "autos" unless that business is yours.
- (4) Your customers. However, if a customer of yours:
  - (a) Has no other available insurance (whether primary, excess or contingent), they are an "insured" but only up to the compulsory or financial responsibility law limits where the covered "auto" is principally garaged.
  - (b) Has other available insurance (whether primary, excess or contingent) less than the compulsory or financial responsibility law limits where the covered "auto" is principally garaged, they are an "insured" only for the amount by which the compulsory or financial responsibility law limits exceed the limit of their other insurance.
- (5) A partner (if you are a partnership), or a member (if you are a limited liability company), for a covered "auto" owned by him or her or a member of his or her household.
- **c.** Anyone liable for the conduct of an "insured" described above but only to the extent of that liability.
- d. Your "employee" while using a covered "auto" you do not own, hire or borrow in your business or your personal affairs.

#### 3. Coverage Extensions

#### a. Supplementary Payments

We will pay for the "insured":

- (1) All expenses we incur.
- (2) Up to \$2,000 for the cost of bail bonds (including bonds for related traffic law violations) required be-

- cause of an "accident" we cover. We do not have to furnish these bonds.
- (3) The cost of bonds to release attachments in any "suit" against the "insured" we defend, but only for bond amounts within our Limit of Insurance.
- (4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to \$250 a day because of time off from work.
- (5) All court costs taxed against the "insured" in any "suit" against the "insured" we defend. However, these payments do not include attorneys' fees or attorneys' expenses taxed against the "insured".
- (6) All interest on the full amount of any judgment that accrues after entry of the judgment in any "suit" against the "insured" we defend; but our duty to pay interest ends when we have paid, offered to pay or deposited in court the part of the judgment that is within our Limit of Insurance.

These payments will not reduce the Limit of Insurance.

#### b. Out-of-state Coverage Extensions

While a covered "auto" is away from the state where it is licensed, we will:

- (1) Increase the Limit of Insurance for Covered Autos Liability Coverage to meet the limits specified by a compulsory or financial responsibility law of the jurisdiction where the covered "auto" is being used. This extension does not apply to the limit or limits specified by any law governing motor carriers of passengers or property.
- (2) Provide the minimum amounts and types of other coverages, such as nofault, required of out-of-state vehicles by the jurisdiction where the covered "auto" is being used.

We will not pay anyone more than once for the same elements of loss because of these extensions.

#### 4. Exclusions

This insurance does not apply to any of the following:

The following is added to Paragraph D., Who
Is An Insured, of SECTION II - GENERAL
LIABILITY COVERAGES:

Any person who, with your expressed or implied consent, uses or is responsible for the use of a watercraft you do not own that is:

- a. Fifty feet long or less, and is not being used to carry any person or property for a charge; or
- b. Ashore on premises where you conduct "auto dealer operations".
- The following is added to Paragraph 5., Other Insurance, in Paragraph B., General Conditions, of SECTION IV – CONDITIONS;

This Coverage Form's Bodily Injury And Property Damage Liability Coverage for non-owned watercraft is not applicable, and we will not make any payment, if there is other applicable insurance covering such watercraft.

## J. NEWLY ACQUIRED OR FORMED AUTO DEALERSHIP - 180 DAYS

The following replaces Paragraph 6.a. in Paragraph D., Who Is An Insured, in Paragraph A., Bodily Injury And Property Damage Liability, of SECTION II — GENERAL LIABILITY COVERAGES:

- a. Coverage under this provision is afforded only until the 180th day after you acquire or form the "auto" dealership or the end of the policy period, whichever is earlier; and
- K. NOTICE AND KNOWLEDGE OF ACCIDENT, OFFENSE, LOSS OR ACT, ERROR OR OMIS-SION

The following is added to Paragraph A.2.a., Duties In The Event Of Accident, Claim, Suit, Loss Or Acts, Errors Or Omissions, of SECTION IV - CONDITIONS:

Your duty to give us or our authorized representative prompt notice of the "accident", offense, "loss" or "act error or omission" applies only when the "accident", offense, "loss" or "act error or omission" is known to:

- (5) You (if you are an individual):
- (6) A partner (if you are a partnership);
- (7) A member (if you are a limited liability company):
- (8) An executive officer, director or insurance manager (if you are a corporation or other organization); or

(9) Any "employee" authorized by you to give such notice.

However, if this Coverage Part includes an endorsement that provides limited coverage for "bodily injury" or "property damage" or pollution costs arising out of a discharge, release or escape of "pollutants" which contains a requirement that the discharge, release or escape of "pollutants" must be reported to us within a specific number of days after its abrupt commencement, this Paragraph a. does not affect that requirement.

#### L. BLANKET WAIVER OF SUBROGATION

The following replaces the first paragraph of Paragraph A.5., Transfer Of Rights Of Recovery Against Others To Us, of SECTION IV — CONDITIONS:

We waive any right of recovery we may have against any person or organization to the extent required of you by a written contract signed and executed prior to any "accident" or "loss", provided that the "accident" or "loss" arises out of operations contemplated by such contract. The waiver applies only to the person or organization designated in such contract.

#### M. UNINTENTIONAL ERRORS OR OMISSIONS

The following is added to Paragraph B.2., Concealment, Misrepresentation, Or Fraud, of SECTION IV – CONDITIONS:

The unintentional omission of, or unintentional error in, any information given by you will not prejudice your rights under this insurance. However, this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

## N. LIMITED WORLDWIDE LIABILITY COVERAGE - INDEMNITY BASIS

 The following is added to Paragraph B.7., Policy Period, Coverage Territory, of SEC-TION IV — CONDITIONS:

The coverage territory described in Paragraph (5)(a) also applies with respect to any claim made or "suit" brought outside the United States of America, the territories or possessions of the United States of America, Puerto Rico or Canada. However, for such claim or "suit":

- (a) The following apply:
  - (i) You must arrange to defend the "insured" against, and investigate or settle any such claim or "suit" and keep

#### c. Method Of Sharing

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

## d. Primary And Non-Contributory Insurance If Required By Written Contract

If you specifically agree in a written contract or agreement that the insurance afforded to an insured under this Coverage Part must apply on a primary basis, or a primary and non-contributory basis, this insurance is primary to other insurance that is available to such insured which covers such insured as a named insured, and we will not share with that other insurance, provided that:

- (1) The "bodily injury" or "property damage" for which coverage is sought occurs; and
- (2) The "personal and advertising injury" for which coverage is sought is caused by an offense that is committed;

subsequent to the signing of that contract or agreement by you.

#### 5. Premium Audit

- We will compute all premiums for this Coverage Part in accordance with our rules and rates.
- b. Premium shown in this Coverage Part as advance premium is a deposit premium only. At the close of each audit period we will compute the earned premium for that period and send notice to the first Named Insured. The due date for audit and retrospective premiums is the date shown as the due date on the bill. If the sum of the advance and audit premiums paid for the policy period is greater than the earned premium, we will return the excess to the first Named Insured.
- c. The first Named Insured must keep records of the information we need for premium computation, and send us copies at such times as we may request.

#### 6. Representations

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- **b.** Those statements are based upon representations you made to us; and
- **c.** We have issued this policy in reliance upon your representations.

The unintentional omission of, or unintentional error in, any information provided by you which we relied upon in issuing this policy will not prejudice your rights under this insurance. However, this provision does not affect our right to collect additional premium or to exercise our rights of cancellation or nonrenewal in accordance with applicable insurance laws or regulations.

#### 7. Separation Of Insureds

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this Coverage Part to the first Named Insured, this insurance applies:

- As if each Named Insured were the only Named Insured; and
- Separately to each insured against whom claimis made or "suit" is brought.

#### Transfer Of Rights Of Recovery Against Others To Us

If the insured has rights to recover all or part of any payment we have made under this Coverage Part, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.

#### 9. When We Do Not Renew

If we decide not to renew this Coverage Part, we will mail or deliver to the first Named Insured shown in the Declarations written notice of the nonrenewal not less than 30 days before the expiration date.

If notice is mailed, proof of mailing will be sufficient proof of notice.

#### SECTION V - DEFINITIONS

- "Advertisement" means a notice that is broadcast or published to the general public or specific market segments about your goods, products or services for the purpose of attracting customers or supporters. For the purposes of this definition:
  - Notices that are published include material placed on the internet or on similar electronic means of communication; and
  - b. Regarding websites, only that part of a website that is about your goods, products or services for the purposes of attracting customers or supporters is considered an advertisement.

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### **BLANKET ADDITIONAL INSURED**

(Includes Products-Completed Operations If Required By Contract)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **PROVISIONS**

The following is added to **SECTION II – WHO IS AN INSURED:** 

Any person or organization that you agree in a written contract or agreement to include as an additional insured on this Coverage Part is an insured, but only:

- a. With respect to liability for "bodily injury" or "property damage" that occurs, or for "personal injury" caused by an offense that is committed, subsequent to the signing of that contract or agreement and while that part of the contract or agreement is in effect; and
- b. If, and only to the extent that, such injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" to which the written contract or agreement applies. Such person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.

The insurance provided to such additional insured is subject to the following provisions:

- a. If the Limits of Insurance of this Coverage Part shown in the Declarations exceed the minimum limits required by the written contract or agreement, the insurance provided to the additional insured will be limited to such minimum required limits. For the purposes of determining whether this limitation applies, the minimum limits required by the written contract or agreement will be considered to include the minimum limits of any Umbrella or Excess liability coverage required for the additional insured by that written contract or agreement. This provision will not increase the limits of insurance described in Section III Limits Of Insurance.
- **b.** The insurance provided to such additional insured does not apply to:

- (1) Any "bodily injury", "property damage" or "personal injury" arising out of the providing, or failure to provide, any professional architectural, engineering or surveying services, including:
  - (a) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
  - (b) Supervisory, inspection, architectural or engineering activities.
- (2) Any "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless the written contract or agreement specifically requires you to provide such coverage for that additional insured during the policy period.
- **c.** The additional insured must comply with the following duties:
  - (1) Give us written notice as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, such notice should include:
    - (a) How, when and where the "occurrence" or offense took place;
    - (b) The names and addresses of any injured persons and witnesses; and
    - (c) The nature and location of any injury or damage arising out of the "occurrence" or offense.
  - (2) If a claim is made or "suit" is brought against the additional insured:

#### COMMERCIAL GENERAL LIABILITY

- (a) Immediately record the specifics of the claim or "suit" and the date received; and
- (b) Notify us as soon as practicable and see to it that we receive written notice of the claim or "suit" as soon as practicable.
- (3) Immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- (4) Tender the defense and indemnity of any claim or "suit" to any provider of other insurance which would cover such additional insured for a loss we cover. However, this condition does not affect whether the insurance provided to such additional insured is primary to other insurance available to such additional insured which covers that person or organization as a named insured as described in Paragraph 4., Other Insurance, of Section IV Commercial General Liability Conditions.

The following is added to the **DEFINITIONS** Section:

"Incidental medical services" means:

- Medical, surgical, dental, laboratory, x-ray or nursing service or treatment, advice or instruction, or the related furnishing of food or beverages; or
- b. The furnishing or dispensing of drugs or medical, dental, or surgical supplies or appliances.
- 6. The following is added to Paragraph 4.b., Excess Insurance of SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS:

This insurance is excess over any valid and collectible other insurance, whether primary, excess, contingent or on any other basis, that is available to any of your "employees" for "bodily injury" that arises out of providing or failing to provide "incidental medical services" to any person to the extent not subject to Paragraph 2.a.(1) of Section II — Who is An Insured.

#### K. MEDICAL PAYMENTS - INCREASED LIMIT

The following replaces Paragraph 7. of SECTION III – LIMITS OF INSURANCE:

7. Subject to Paragraph 5. above, the Medical Expense Limit is the most we will pay under Coverage C for all medical expenses because of "bodily injury" sustained by any one person, and will be the higher of:

- **a.** \$10,000; or
- b. The amount shown in the Declarations of this Coverage Part for Medical Expense Limit.

#### L. BLANKET WAIVER OF SUBROGATION

The following is added to Paragraph 8., Transfer Of Rights Of Recovery Against Others To Us, of SECTION IV — COMMERCIAL GENERAL LIABILITY CONDITIONS:

If the insured has agreed in a contract or agreement to waive that insured's right of recovery against any person or organization, we waive our right of recovery against such person or organization, but only for payments we make because of:

- a. "Bodily injury" or "property damage" that occurs; or
- **b.** "Personal and advertising injury" caused by an offense that is committed;

subsequent to the execution of the contract or agreement.

#### M. CONTRACTUAL LIABILITY - RAILROADS

- The following replaces Paragraph c. of the definition of "insured contract" in the DEFINITIONS Section:
  - c. Any easement or license agreement;
- Paragraph f.(1) of the definition of "insured contract" in the DEFINITIONS Section is deleted.