

ADDENDUM # 1: April 5, 2022

Unless explicitly noted herein, all requirements will remain as originally prepared. Any variations or claims of equality or superiority must be demonstrated, proven, and tested to the satisfaction of ABI. A signed copy of "Exhibit Y - Receipt of Addenda" from the ITB shall be submitted with your response as confirmation of your receipt of this Addendum.

Question/Answer

1. **QUESTION:** Due to current market conditions, there is a longer lead time on products that would be normally available same or next day. Some vendors are asking for a deposit on custom products.

Will the client allow the GCs to bill for stored materials and/or deposits to order the products with sufficient time to arrive when need it?

ANSWER: ABI's standard construction contract covers stored materials and advanced payments for materials as follows:

"Except with ABI's prior written approval, the Contractor shall not make advance payments to suppliers for materials or equipment which have not been delivered and stored at the site."

2. **QUESTION:** If a product is delayed due to issues beyond our control, will the project allow additional time?

ANSWER: The contract is based on calendar days that are deemed sufficient for the work to be completed. It becomes incumbent on the successful bidder to adequately perform the work within a timeframe that mitigates delays. After bidding the project, ABI and the Contractor will review a critical path Work Schedule provided by the Contractor. The agreed upon schedule, subject to negotiation during contracting, will be incorporated into the contract. It is ABI's expectation that the contractor will build appropriate float, resource allocation, weather days, and material lead times into the project Work Schedule to allow for successful completion of the work within the agreed upon schedule that has been incorporated into the contract.

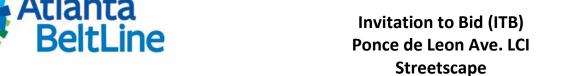
There is an Uncontrollable Forces / Act of God clause in the contract which includes but is not limited to fire, earthquake, epidemics, war, riot, civil disturbance, sabotage, legal challenges, and government actions. Per the contract, the term 'Uncontrollable Forces' shall mean any event which results in the prevention or delay of performance by a party of its obligations under the Agreement and which is beyond the reasonable control of the non-performing party. Uncontrollable forces in the ABI Construction contract specifically excludes weather related occurrences, which should be factored into the Work Schedule.



3. **CLARIFICATION and REPLACEMENT DOCUMENTS:** The Exhibits in the ITB are incomplete. Do not use the forms in the ITB Exhibits. New Exhibits are provided on the following pages.

NEW EXHIBITS ONLY ON THE NEXT PAGE- PLEASE COMPLETE FORMS AS NEEDED.

DISREGARD ONLY EXHIBIT FORMS IN THE ORIGINAL ITB



EXHIBITS AND FORMS

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

EXHIBIT "A"	CERTIFICATION OF NO ORGANIZATIONAL CONFLICT OF INTEREST
EXHIBIT "B"	S.A.V.E. AFFIDAVIT UNDER O.C.G.A. §50-36-1(e)(2)
EXHIBIT "C"	CONTRACTOR AFFIDAVIT UNDER O.C.G.A. §13-10-91
EXHIBIT "D"	SUBCONTRACTOR AFFIDAVIT
EXHIBIT "E"	SUB-SUBCONTRACTOR AFFIDAVIT
EXHIBIT "F"	BIDDER CERTIFICATION FORM
EXHIBIT "G"	AFFIDAVIT OF NON-COLLUSION
EXHIBIT "H"	BIDDER'S AFIDAVIT
EXHIBIT "I"	GEORGIA UTILITY CONTRACTOR'S LICENSE CERTIFICATION
EXHIBIT "J"	BIDDER/CONTRACTOR'S DISCLOSURE AND QUESTIONNAIRE
EXHIBIT "K"	STATEMENT OF BIDDER'S QUALIFICATIONS
EXHIBIT "L"	INSURANCE AND BONDING REQUIREMENTS
EXHIBIT "M"	INSURANCE COVERAGE AND BONDING CAPACITY
EXHIBIT "N"	BID BOND
EXHIBIT "O"	DISADVANTAGED BUSINESS ENTERPRISE PARTICIPATION
EXHIBIT "P"	DISADVANTAGED BUSINESS ENTERPRISE UTILIZATION PLAN
EXHIBIT "Q"	SUB-CONTRACTOR/SUB-CONSULTANT UTILIZATION AND DBE PARTICIPATION CERTIFICATION
EXHIBIT "R"	GOOD FAITH EFFORT AFFIDAVIT
EXHIBIT "S"	GOOD FAITH EFFORT ASSESSMENT
EXHIBIT "T"	BID FORM
EXHIBIT "U"	GA 190247 GEORGIA DEPARTMENT OF LABOR - DAVIS BACON WAGE RATES
EXHIBIT "V"	ATLANTA BELTLINE, INC. CODE OF ETHICS



EXHIBIT "W" BIDDER'S ACKNOWLEDGEMENT

EXHIBIT "X" BID SUBMITTAL CHECKLIST

EXHIBIT "Y" RECEIPT OF ADDENDA



EXHIBIT "A"

CERTIFICATION OF NO ORGANIZATIONAL CONFLICT OF INTEREST

Bidder's Name:	("Bidder")

Bidder's attention is directed to provisions of the Invitation to Bid (ITB) regarding organizational conflicts of interest and the restrictions applicable to such conflicts. Bidders are advised that certain firms will not be allowed to participate on any bidder's team for the Project because of their work with ABI, IA, or the City of Atlanta in connection with the Project or the Project's procurement. Initially capitalized terms not otherwise defined herein shall have the meanings set forth in the ITB for the Project.

1. Required Disclosure of Conflicts

In the space provided below, and on supplemental sheets as necessary, identify all relevant facts relating to past, present, or planned interest(s) of the bidder's team (including the bidder, proposed consultants and proposed subcontractors, and their respective chief executives, directors, and other key personnel for the Project) which may result, or could be viewed as, an organizational conflict of interest in connection with this ITB.

Bidder shall disclose (a) any current contractual relationships with ABI, IA, or the City of Atlanta (b) any past, present, or planned contractual or employment relationships with any officer or employee of ABI, IA, or the City of Atlanta, and (c) any other circumstances that might be considered to create a financial interest in the Contract by any ABI or IA board member, officer, employee, and City of Atlanta elected or appointed official, officer or employee, or any ABI or IA board member, if bidder is awarded the Contract. Bidder shall also disclose matters such as ownership of 10% or more of the stock of, or having directors in common with, any of the individuals or entities involved in preparing the RFP. Bidder shall also disclose contractual relationships (i.e., joint ventures) with any of the individuals or entities involved in preparing the RFP, as well as relationships wherein such individual or entity is a contractor or consultant (or subcontractor or sub-consultant) to bidder or a member of bidder's team. The foregoing is provided by way of example and shall not constitute a limitation on the disclosure obligations.



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2.	Explanation	۱
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In the space provided below, and on supplemental sheets as necessary, identify steps the bidder or other entities have taken or will take to avoid, neutralize, or mitigate any organizational conflicts of interest described herein.

3. Certification

Signature

The undersigned hereby certifies that, to the best of his or her knowledge and belief, no interest exists that is required to be disclosed in this Certification of No Organizational Conflict of Interest, other than as disclosed above. I understand that if the information I provided is determined by ABI to be false or misleading, my bid is subject to disqualification and/or my Contract is subject to termination. I also understand that if ABI determines that an organizational conflict exists, my bid is subject to disqualification and/or my Contract is subject to termination.

Name	
	(Type or print)
Title	
Company Name	
Date	, 202
FOR OFFICIAL AE	I USE ONLY:
•	e response bidder submitted in this certification, it is my determination onal conflict does / does not exist.





EXHIBIT "B"

S.A.V.E. AFFIDAVIT UNDER O.C.G.A §50-36-1(e)(2)

ATLANTA BELTLINE, INC. AFFIDAVIT VERIFYING STATUS FOR RECEIPT OF PUBLIC BENEFIT

By executing this affidavit under oath, as an applicant for a services Contract with Atlanta BeltLine, Inc., or other public benefit as provided by O.C.G.A. §50-36-1, and determined by the Attorney General of Georgia in accordance therewith, I verify one of the following with respect to my application for a public benefit from Atlanta BeltLine, Inc.:

2)I am a legal permanent resident 18 years of age or older.	
I am an otherwise qualified alien or non-immigrant under Federal Immigration and Nationality Act with an alien number issued by the Depart of Homeland Security or other federal immigration agency.	
My alien number issued by the Department of Homeland Security or federal immigration agency is:	other
The undersigned applicant also hereby verifies that he or she is 18 years of age or older at has provided at least one secure and verifiable document as required by O.C.G.A. §50-36-1(e)(1) with this Affidavit. The secure and verifiable document provided with this affidis:	
In making the above representation under oath, I understand that any persor knowingly and willfully makes a false, fictitious, or fraudulent statement or representation affidavit shall be guilty of a violation of O.C.G.A. §16-10-20, and face criminal penalties as all by such criminal statute.	in an
Executed in (city), (state).	



	Signature of Applicant	Date:
	Printed Name of Applicant:	_
Sworn to and subscribed before me This day of, 20)2	
Notary Public		
My commission expires:		
INOTARY	SEAL1	



EXHIBIT "C"

Contractor Affidavit under O.C.G.A. §13-10-91

By executing this affidavit, the undersigned Contractor verifies its compliance with O.C.G.A. §13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of ATLANTA BELTLINE, INC. has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. §13-10-91. Furthermore, the undersigned Contractor will continue to use the federal work authorization program throughout the Contract Term and the undersigned Contractor will Contract for the physical performance of services in satisfaction of such contract only with Subcontractors who present an affidavit to the Contractor with the information required by O.C.G.A. §13-10-91. Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identific	ation Number
Date of Authorization	
Name of Contractor	
Name of Project	
Name of Public Employer	



I hereby declare under penalty of perjury that	the foregoing is	true and correct.	
Executed on, 20 in	(city),	(state).	
By:	-		
Signature of Authorized Officer or Agent			
Printed Name and Title of Authorized Officer	_		
Subscribed and Sworn before me on this the			
, 20			
NOTARY PUBLIC			
My Commission Expires:			
INOTAR	RY SEAL]		



EXHIBIT "D"

Subcontractor Affidavit under O.C.G.A. § 13-10-91

By executing this affidavit, the undersigned Subcontractor verifies its compliance with
O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is
engaged in the physical performance of services under a Contract with
(insert name of Contractor) on behalf of ATLANTA BELTLINE, INC. has
registered with, is authorized to use and uses the federal work authorization program commonly
known as E-Verify, or any subsequent replacement program, in accordance with the applicable
provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned
Subcontractor will continue to use the federal work authorization program throughout the
Contract period and the undersigned subcontractor will Contract for the physical performance
of services in satisfaction of such Contract only with sub-subcontractors who present an affidavit
to the Subcontractor with the information required by O.C.G.A. § 13-10-91. Additionally, the
undersigned Subcontractor will forward notice of the receipt of an affidavit from a sub-
subcontractor to the Contractor within five business days of receipt. If the undersigned
Subcontractor receives notice that a sub-subcontractor has received an affidavit from any other
contracted sub-subcontractor, the undersigned Subcontractor must forward, within five business
days of receipt, a copy of the notice to the Contractor. Subcontractor hereby attests that its
federal work authorization user identification number and date of authorization are as follows:
Federal Work Authorization User Identification Number
Date of Authorization
Name of Subcontractor
Name of Subcontractor
Name of Project



Name of Public Employer		
I hereby declare under penalty of perjury that the	ne foregoing is	true and correct.
Executed on, 20 in	(city),	(state).
Ву:		
Signature of Authorized Officer or Agent		
Printed Name and Title of Authorized Officer or		
Subscribed and Sworn before me on this the		
, 20		
NOTARY PUBLIC		
My Commission Expires:		
INOTARY	SEAL1	



EXHIBIT "E"

Sub-subcontractor Affidavit under O.C.G.A. § 13-10-91

O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a Contract for
engaged in the physical performance of services under a Contract for
engage in the physical performance of controls and a contract
(name of subcontractor or sub-subcontractor with whom such
sub-subcontractor has privity of contract) and (name of
Contractor) on behalf of ATLANTA BELTLINE, INC. has registered with, is authorized to use
and uses the federal work authorization program commonly known as E-Verify, or any
subsequent replacement program, in accordance with the applicable provisions and deadlines
established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will
continue to use the federal work authorization program throughout the contract period and the
undersigned sub-subcontractor will Contract for the physical performance of services in
satisfaction of such Contract only with sub-subcontractors who present an affidavit to the sub-
subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-
subcontractor shall submit, at the time of such Contract, this affidavit to
(name of Subcontractor or sub-subcontractor with whom
such sub-subcontractor has privity of Contract). Additionally, the undersigned sub-
subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to
(name of Subcontractor or sub-subcontractor with whom such
sub-subcontractor has privity of Contract). Sub-subcontractor hereby attests that its federal
work authorization user identification number and date of authorization are as follows:
To donal Moule Authorization Hooriday is a first on Newsborn
Federal Work Authorization User Identification Number
rederal work Authorization User Identification Number
Date of Authorization
Date of Authorization
Date of Authorization
Date of Authorization



Name of Public Employer			
I hereby declare under penalty of perjury the	hat the foregoing is	true and corre	ect.
Executed on, 20 in	(city),	(state).	
Ву:			
Signature of Authorized Officer or Agent			
Printed Name and Title of Authorized Office	er or Agent		
Subscribed and Sworn before me on this t	he		
, 20			
NOTARY PUBLIC			
My Commission Expires:		[1	NOTARY SEAL]



	EXHIBIT "F"
BIDDER C	CERTIFICATION FORM
I,(name of Bidd state that I am(title) hereby duly certify that I have read and un Invitation to Bid (ITB) and any enclosure a	of(business entity) and nderstand the information presented in the attached
I further certify that to the best of my kno full, complete, and truthful.	wledge the information given in response to the ITB is
preceding five (5) years, been convicted o	cipal employee of the bidder has not, in the immediately f any crime of moral turpitude or any felony offense, nor pended, revoked, or been subjected to disciplinary
	he immediately preceding five (5) years been defaulted agency Contract and further, that the bidder is not now y such Contract.
I acknowledge and agree that all the information for the express purpose of inducing ABI to	nation contained in the response to the ITB is submitted a ward a Contract.
suspension or debarment from further Co into based upon this bid thereby precludin for, ABI. In addition, such false statement	made in conjunction with this bid is sufficient cause for intracts, or denial of rescission of any Contract entered by the firm from doing business with, or performing work tor omission may subject the person and entity making laws of the State of Georgia of the United States, 10-20, 18 U.S.C §§1001 or 1341.
Printed Name	Signature
Sworn to and subscribed before me	
thisday of_, 202	
Notary Public	



My commission expires:		
	[NOTARY SEAL]	



EXHIBIT "G"

AFFIDAVIT OF NON-COLLUSION

Project:	PI 0012586 FULTON:	Ponce de Leon A	venue LCI Streetscap	<u>e</u>
STATE OF				
COUNTY OF				
being first dul	y sworn, deposes and s	ays that he/she is		
(sole owner, p	partner, president, secre	etary, etc.)		
that said bidd bidder or pers has not in any or conference overhead, pro advantage ag	er has not colluded, co son, to put in a sham bi manner, directly or indi e, with any person to fi fit, or cost element of s	onspired, connived d, or that such oth rectly, sought by A the bid price of taid bid price, or of person interested	bid is genuine and not on or agreed, directly or it er person shall refrain f greement or collusion, on affiant or any other bidder that of any other bidder d in the proposed Cont	ndirectly, with an from bidding, and recommunication, der, or to fix any r, or to secure an
(Affiant)				
Subscribed ar	nd Sworn to before me	this Dav of	202	



(Notary Public in and for)	
(County)	
My Commission expires, 202_	
[NOTARY SEAL]	



EXHIBIT "H"		
BIDDER'S AFFIDAVIT		
Project Name:		
STATE OF		
COUNTY OF		
peing first duly sworn, deposes and says that he/she resides at		
hat he/she is the		
T:u-)		
Title)		
Name of Bidder)		

who signed the above bid form, that he/she was duly authorized to sign and that the bid is the true offer of the bidder, that the seal attached is the seal of the bidder and that all the declarations and statements contained in the bid are true to the best of his or her knowledge and belief.



(Affiant)			
Subscribed and Sworn to before me this	Day of	202_	
(Notary Public in and for)			
(County)			
My Commission expires [NOTARY SEAL]	, 202_		



Expiration Date of License:

Invitation to Bid (ITB) Ponce de Leon Ave. LCI Streetscape

EXHIBIT "I"

GEORGIA UTILITY CONTRACTOR'S LICENSE CERTIFICATION

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

NOTE: The Utility Contractor's License Number is required

Contractor's Name:

Utility Contractor's License Number:



EXHIBIT "J"

BIDDER/CONTRACTOR'S DISCLOSURE AND QUESTIONNAIRE FORM

1. Please provide the names and business addresses of each of the bidder/contractor's officers, directors, affiliates and other employees, agents or representatives of the business entity responding to this ITB – PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

For purposes of this form, the term "affiliate" of any bidder/contractor shall mean any person or entity which directly or indirectly controls or is controlled by or is under common control with such bidder/contractor. "Control" means the possession, directly or indirectly, of the power to direct or cause the direction of the management and policies of a person or entity, whether through ownership of voting securities, by entreat, or otherwise.

Describe accurately, fully and completely, their respective relationships with said bidder/contractor, including their ownership interests and their anticipated role in the management and operations of said bidder/contractor.

- 2. Please describe the general development of said bidder/contractor's business during the past five (5) years, or such shorter period of time that said bidder/contractor has been in business.
- 3. Please state whether any of the following events have occurred in the last five (5) years with respect to said bidder/contractor. If any answer is yes, explain fully the following:
 - (a) Whether a petition under the federal bankruptcy laws or state insolvency laws was filed by or against said bidder/contractor, or a receiver fiscal agent or similar officer was appointed by a court for the business or property of said bidder/contractor:
 - (b) Whether bidder/contractor was subject of any order, judgment, or decree not subsequently reversed, suspended, or vacated by any court of competent jurisdiction, permanently enjoining said bidder/contractor from engaging in any type of business practice, or otherwise eliminating any type of business practice; and



- (c) Whether said bidder/contractor's business was the subject of any civil or criminal proceeding in which there was a final adjudication adverse to said bidder/contractor which directly arose from activities conducted by business unit or corporate division of said bidder/contractor which submitted a bid or proposal for the subject project, if so please explain.
- 4. Please state whether any employee, agent or representative of said bidder/contractor who is or will be directly involved in the subject project has or had within the last five (5) years; (i) directly or indirectly had a business relationship with the City of Atlanta (City), ABI, or IA (ii) directly or indirectly received revenues from the City, IA or ABI or (iii) directly or indirectly receives revenues from the result of conduction business on City property or pursuant to any Contract with the City, IA or ABI. Please describe any such relationship.
- 5. Please state whether any employee, agent or representative of said bidder/contractor who is or will be directly involved in the subject project has or had within the last five (5) years a direct or indirect business relationship (to the best of your knowledge and belief) with any elected or appointed City official or with any City, IA or ABI employee, and fully describe such business relationship.
- 6. <u>Please provide most current audited financial reports and latest interim "unaudited" financial statement for evaluation of financial capability.</u>

NOTE: If any response to any question set forth in this questionnaire has been disclosed in any other document, a response may be made by attaching a copy of such disclosure. (For example, said bidder/contractor's most recent filings with the Securities and Exchange Commission (SEC) may be provided if they are responsive to certain items within the questionnaire). However, for purposes of clarity, bidder/contractor should correlate its responses with the exhibits by identifying the exhibit and its relevant text.

Disclosures must specifically address, completely respond and comply with all information requested and fully answer all questions requested by ABI. Such disclosure must be submitted at the time of the bid or proposal submission and included as a part of the bid/proposal submitted for this Project. Disclosure is required for bidder/contractors, joint venture partners and first-tier sub-contractors and/or sub-consultants.

Failure to provide required disclosure, submit officially signed and notarized documents or respond to any and all information requested/required by ABI can result in the bid/proposal declared as non-responsive. This document must be completed and included as a part of the



bid/proposal package	along with other required documen	ts.
	the best of my knowledge and belie	this questionnaire and all attachments of, and all statements contained hereto
On this da	ay of	, 202
(Legal Name of Bidder/	Contractor)	
Signature of Authorized	d Representative)	
(Name)		
(Title)		
(Date)		
Sworn to and subscri	bed before me,	
This day o	of	202



(Notary Public)	(Seal)
Commission Expires	(Date)



EXHIBIT "K"

STATEMENT OF BIDDER'S QUALIFICATIONS

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

This Statement is to accompany bids submitted for the Project identified above.

Bidders must meet the minimum qualification criteria set forth under Sections 5, 7, 8, 9, 10 and 11 of this Statement, must provide the organization chart as set forth under item 6 of this section and must complete the project experience forms for qualifying projects to be deemed a "Responsive and Responsible Bidder."

NAME OF BIDDER:
BUSINESS ADDRESS:
TELEPHONE NUMBER:
OFFICIAL REPRESENTATIVE AND TITLE:

5. Using the forms provided in this Section, list previously completed or current projects which are similar in scope and complexity to this Project which were competed or assigned to your business entity or joint venture, including name of project, location of project,



owner's name, address and phone number, description of work performed, initial Contract amount, final Contract amount, start date, scheduled completion date and actual completion date. (if a joint venture or subcontractor that will be awarded a portion of the work exceeding 10% of the total bid amount, list separately for each joint venture partner or subcontractor.).

- a. Bidders must have successfully completed at least two Contracts involving construction of utility systems which include major storm sewer construction, utility relocations/connection to active sewer systems, pavement/concrete demolition, and grading.
- b. Bidders must have successfully completed at least one Contract involving construction of passive park components which include numerous retaining walls with architectural finishes, concrete pavement with architectural finishes, landscaping, water features including multiple fountains and recirculation systems, installation of mechanical equipment, and electrical equipment.
- 6. Using the forms provided in this Section, provide information for key project personnel, project manager, project superintendent, estimator, project engineer, safety engineer and QA/QC manager.
- 7. The bidder must have an established safety program that as a minimum includes those items as listed on the attachment entitled "CONTRACTOR SAFETY PROGRAM."
- 8. The bidder's workers' crating (EMR-Experience Modification Rate) must not exceed an average of 1.0 over the last three (3) years.
- 9. The bidder's OSHA Incidence Rates must not exceed the industry standard published by the US Department of Labor.

a.	Bidder's Recordable Incidence Rates:
b.	Bidder's Lost Time Incidence Rates:

10. If there have been any fatalities during the last five (5) years on any projects performed by the contractor or on any work performed under the direct supervision of a proposed Project Manager and the contractor or proposed Project Manager was cited by OSHA for "Willful" Violation, in performing the work in which the fatality occurred, the Contractor will be disqualified based on the Atlanta Beltline Inc.'s review. The contractor may also be disqualified in the event that a Recordable Incident occurred due to the same condition



that existed when a previous fatality occurred and resulted in an OSHA citation or failure to implement a corrective action plan.

	 a. Fatalities during the last five (5) years where contractor was cited by OSH. "Willful" Violation: b. Fatalities during the last five (5) years where the proposed Project Manager cited by OSHA for "Willful" Violation: 	
ye: dir	there have been any repeat OSHA (state and federal) violations during the last fivers on any projects performed by the contractor or on any work performed underect supervision of a proposed Project Manager and the Contractor or proposed Pranager, the Contractor may be disqualified based on ABI's review.	r the
co Ma Dis or	here have been incidents during the last five (5) years on any projects performed be ntractor or on any work performed under the direct supervision of a proposed Pranager that resulted in the wastewater or water treatment facility failing to meet NP scharge Permit Requirements due to the actions of the contractor or Project Manager to perform work on schedule, ther ntractor will be disqualified based on ABI's review.	oject DES ager
The previous knowledge	ous statements and attachments are true, correct and complete to the best o	f my
Date:		
Firm Nam	e:	
Ву:		
Title:		
Sworn to a	and subscribed before me	



this day of	, 202		
Notary Public			
My commission expires:			
	[NOTARY	SEAL1	



STATEMENT OF BIDDER'S QUALIFICATIONS

COMPANY PROJECT EXPERIENCE

(Complete Form Only for Projects That Meet Minimum Criteria)

Project Name	
Project Location	
Contractor's Project Manager	
Contractor's Project Superintendent	
Owners Representative & Phone	
Number	
Design Engineer Representative	
Name & Phone Number	
Initial Contract Amount	\$
Final Contract Amount	\$
Project Duration	Date Started:
	Date Completed:
	Time Extensions:
Was Project Completed on Time?	



Description of major Project	
Components	

STATEMENT OF BIDDER'S QUALIFICATIONS

PROJECT KEY STAFF EXPERIENCE

(Complete Form Only for Projects That Meet Minimum Criteria)

Project Name	
Project Location	
Contractor's Project Manager	
Owners Representative & Phone	
Number	
Design Engineer Representative	
Name & Phone Number	
Initial Contract Amount	\$
Final Contract Amount	\$
Project Duration	Date Started:
	Date Completed:
	Time Extensions:
Was Project Completed on Time?	



Description of major Project	
Components	



STATEMENT OF BIDDER'S QUALIFICATIONS

PROJECT SUPERINTENDENT'S EXPERIENCE

(Complete Form Only for Projects That Meet Minimum Criteria)

Project Name	
Project Location	
Contractor's Project Manager	
Owners Representative & Phone	
Number	
Design Engineer Representative	
Name & Phone Number	
Initial Contract Amount	\$
Final Contract Amount	\$
Project Duration	Date Started:
	Date Completed:
	Time Extensions:
Was Project Completed on Time?	



Description of major Project	
Components	



STATEMENT OF BIDDER'S QUALIFICATIONS

PROJECT MANAGER'S EXPERIENCE

(Complete Form Only for Projects That Meet Minimum Criteria)

Project Name	
Project Location	
Contractor's Project Manager	
Owners Representative & Phone	
Number	
Design Engineer Representative	
Name & Phone Number	
Initial Contract Amount	\$
Final Contract Amount	\$
Project Duration	Date Started:
	Date Completed:
	Time Extensions:
Was Project Completed on Time?	
Description of major Project	
Components	
	l l



CONTRACTOR SAFETY PROGRAM

A.	Do you have a written Safety Program?	□ Yes	□ No
	(If yes, attach outline; if no, attach explanation)		
В.	Which of the following does your Safety Program Contain?	□ Yes	□ No
-	1. Health and safety training of its subcontractors?	□ Yes	□ No
-	2. Documentation of Health and safety training required?	□ Yes	□ No
-	3. Hazard communication Program?	□ Yes	□ No
	(29 CFR 1910.1200, CCR Title 8 Section 5194)		
-	4. Confined Space Entry and Rescue Program?	□ Yes	□ No
-	(29 CFR1910.146, CCR Title 8 Section 5156-5159)		
-	(If yes, attach explanation)		
-	5. "Hot Work" permit program?	□ Yes	□ No
-	(29 CFR 1910.146, CCR Title 8 Section 5156-5159)		
-	(If yes, attach explanation)		
-	6. Lock-Out/Tag-Out program?	□ Yes	□ No
-	(29 CFR 1910.417)		
-	(If yes, attach explanation)		
C.	Equipment Maintenance Program for the following:	□ Yes	□ No
-	1. Miscellaneous construction tools and equipment	□ Yes	□ No
-	2. Ladders	□ Yes	□ No
-	3. Scaffolds	□ Yes	□ No
-	4. Heavy Equipment	□ Yes	□ No
-	5. Vehicles	□ Yes	□ No
D.	Do you have a new employee safety orientation program?	□ Yes	□ No
-	If yes, does it include the following:		
-	1. Company Safety Policy	□ Yes	□ No
-	2. Company Safety Rules	□ Yes	□ No
-	3. Safety Meeting Attendance	□ Yes	□ No
-	4. Company Safety Record	□ Yes	□ No
-	5. Hazard Recognition	□ Yes	□ No
-	6. Hazard Reporting	□ Yes	□ No
-	7. Injury Reporting	□ Yes	□ No
-	8. Non-Injury Accident Reporting	□ Yes	□ No
-	9. Personal Protective Equipment	□ Yes	□ No
-	10. Respiratory Protection	□ Yes	□ No
-	11. Fire Protection	□ Yes	□ No
-	12. Housekeeping	□ Yes	□ No
-	13. Toxic Substance	□ Yes	□ No
_	14. Electrical Safety	□ Yes	⊓ No



-	15. Fall Protection	□ Yes	□ No	
-	16. First Aid/CPR	□ Yes	□ No	
-	17. Driving Safety	□ Yes	□ No	
-	18. Hearing conservation	□ Yes	□ No	
-	19. Lock-out/Tag-out	□ Yes	□ No	
-	20. Blood-borne Pathogens	□ Yes	□ No	
-	20. Asbestos	□ Yes	□ No	
-	21. Confined Spaces	□ Yes	□ No	
-	22. Hazard communication	□ Yes	□ No	
E.	Do you conduct Safety Meetings for your employees?	□ Yes	□ No	
-	If yes, how often:			
-	Daily Weekly Bi-Weekly Monthly As needed			
F.	Do you conduct health and safety audits of work in progress?	□ Yes	□ No	
-	If yes, who conducts audits?			
- - -	How often are the audits conducted?			
G.	Do you notify all employees of accidents and precautions related	□ Yes	□ No	
	to accidents and near misses?			
-	If yes, how is this notification accomplished?	.,		
-	1. Safety Meetings	□ Yes	□ No	
-	2. Post notification in office	□ Yes	□ No	
-	3. Post notification at the site where incident occurred	□ Yes	□ No	
-	4. Other	□ Yes	□ No	
Н.	Is Safety a criterion in evaluating the performance of?			
-	1. Employees	□ Yes	□ No	
	2. Supervisors	□ Yes	□ No	
	3. Management	□ Yes	□ No	
	Does your firm hold "tailgate" safety meetings?	□ Yes	□ No	
	If yes, how often:			
	Daily Weekly Bi-Weekly Monthly As needed			
	Does your company have a drug and alcohol testing policy?	□ Yes	□ No	
<.	Does your company require that subcontractors participate in a drug surveillance/testing program?	□ Yes	□ No	
L.	Does your company have a method of disseminating safety information?	□ Yes	□ No	
_	If ves, how is information disseminated to employees?			



-	1. Safety Meetings	□ Yes	□ No
-	2. Post notification in office	□ Yes	□ No
-	3. Post notification at the site where incident occurred	□ Yes	□ No
-	4. Other	□ Yes	□ No

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EXHIBIT "L"

INSURANCE & BONDING REQUIREMENTS

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

<u>Insurance.</u> In conjunction with the execution of this Agreement, Contractor shall provide evidence of worker's compensation, general liability, and automobile liability insurance to ABI to cover the acts and omissions of contractors, principals, employees and agents, and any subcontractor in rendering the services within the scope of and in compliance with this Agreement. Contractor shall at all times during the term of this Agreement maintain insurance policies consistent and in full compliance with the following requirements or their equivalent (the "Insurance Requirements"):

- a) Statutory Worker's Compensation Insurance, including waiver of subrogation in favor of Atlanta BeltLine, Inc.
- b) Commercial General Liability Insurance
 - 1. \$1,000,000 limit of liability per occurrence for bodily injury and property damage and \$2,000,000 in the aggregate.

The following additional coverage must apply:

- A. 2013 or later ISO Commercial General Liability Form.
- B. Dedicated Limits per Project Site or Location (CG 25 3 or CG 25

04).

- C. Additional Insured Endorsement CG2010 04 13 and CG2037 04 13
- D. Blanket Contractual Liability (included in 1986 or later forms).
- E. Broad Form Property Damage (included in 1986 or later forms).
- F. Severability of Interest (included in 1986 or later forms).



- G. Underground, explosion, and collapse coverage (included in 1986 or later form).
- H. Personal Injury (deleting both contractual and employee exclusions).
- I. Incidental Medical Malpractice.
- J. Sudden and Accidental Pollution Coverage
- K. Waiver of Subrogation in favor of Atlanta BeltLine, Inc.
- L. Primary and Non-Contributory wording
- c) Automobile Liability Insurance
 - i. \$1,000,000 combined single limit of liability per accident for bodily injury and property damage;
 - ii. Commercial form covering owned, non-owned, leased, hired and borrowed vehicles;
 - iii. Additional Insured Endorsement.
 - iv. Waiver of Subrogation Endorsement.
- d) Environmental Liability with limits of \$1,000,000 per claim.
- e) Contractual Liability, Subject to Policy Term, Conditions and Exclusions.
- f) Insurance company must be authorized to do business in the State of Georgia.



- h) Additional insureds on the Commercial General Liability and Auto Liability Insurance policies shall be shown as: Atlanta BeltLine, Inc., The Atlanta Development Authority d/b/a Invest Atlanta, and the City of Atlanta.
- i) The cancellation provision should provide 30 days' notice of cancellation (10 days' notice for cancellation due to non-payment of premium).
- j) Insurance Company, except Worker's Compensation carrier, must have an A.M. Best Rating of A- VII or higher. Certain Worker's Comp funds may be acceptable by the approval of ABI. European markets including those based in London and domestic surplus lines markets that operate on a non-admitted basis are exempt from this requirement provided that the Contractors' broker/agent can provide financial data to establish that a market is equal to or exceeds the financial strengths associated with the A.M. Best's rating of A- VII or better. Insurance Company must be authorized to do business by the Georgia Department of Insurance.
- k) Certificates of Insurance, and any subsequent renewals, must reference specific bid/Contract by project name and if applicable, project/bid number.
- I) Contractor shall agree to provide redacted copies of current insurance policy (ies) if requested to verify the compliance with these insurance requirements. The General Liability and Auto Liability Insurance policies required to be provided by contractor will be primary over any insurance program carried by ABI.
- m) Contractor shall require all policies of insurance that are in any way related to the services provided and that are secured and maintained by contractor and all subcontractors to include clauses providing that each underwriter shall waive rights of recovery, under subrogation or otherwise, against ABI, IA and the City, and their officers, officials, employees, consultants, separate contractors, and subcontractors.
- n) Contractor waives all rights of recovery against ABI, IA and the City, and their officers, officials, employees, separate consultants, and all subcontractors which contractor may



have or acquire because of deductible clauses in or inadequacy of limits of any policies of insurance that are in any way related to the services provided, and that are secured and maintained by contractor.

o) Contractor shall require all subcontractors to waive their rights of recovery (as aforesaid waiver by Contractor) against ABI, IA and the City, and their officers, officials, employee and volunteers, consultants, separate contractors, and other subcontractors (including subcontractors of separate contractors.)

A. Preamble

The following requirements apply to all work under the Agreement. Compliance is required by all bidder/contractors. To the extent permitted by applicable law, ABI reserves the right to adjust or waive any insurance or bonding requirements contained in this section and applicable to the Agreement.

1. <u>Evidence of Insurance Required Before Work Begins</u>

No work under this Agreement may be commenced until all insurance and bonding requirements contained in this section, or required by applicable law, have been complied with and evidence of such compliance satisfactory to ABI as to form and content has been filed with ABI. Bidder/Contractor must provide ABI with a Certificate of Insurance that clearly and unconditionally indicates that bidder/contractor has complied with all insurance and bonding requirements set forth in this section and applicable to the Agreement. In accordance with the solicitation documents applicable to the Agreement at the time bidder/contractor submits to ABI its executed Agreement, bidder/contractor must satisfy all insurance and bonding requirements required by this section and applicable law



and provide the required written documentation to ABI evidencing such compliance. In the event that bidder/contractor does not comply with such submittal requirements within the time period established by the solicitation documents applicable to the Agreement, ABI may, in addition to any other rights ABI may have under the solicitation documents applicable to the Agreement or under applicable law, make a claim against any bid security provided by bidder/contractor.

2. Minimum Financial Security Requirements

All companies providing insurance required by this section must meet certain minimum financial security requirements. These requirements must conform to the ratings published by A.M. Best & Co. in the current Best's Key Rating Guide — Property-Casualty. The ratings for each company must be indicated on the documentation provided by Contractor/Consultant to ABI certifying that all insurance and bonding requirements set forth in this section and applicable to the Agreement have been unconditionally satisfied.

For all Agreements, regardless of size, companies providing insurance or bonds under the Agreement must meet the following requirements:

- i. Best's Rating not less than A-1;
- ii. Best's Financial Size Category not less than Class IX;
- iii. Companies must be authorized to conduct and transact insurance Contracts by the Insurance Commissioner, State of Georgia; and
- iv. All bid, performance and payment bonds must be underwritten by U.S. Treasury Circular 570 listed company.

If the issuing company does not meet these minimum requirements, or for any other reason is or becomes unsatisfactory to ABI, ABI will notify bidder/contractor in writing. Bidder/Contractor must promptly obtain a new policy or bond issued by an insurer acceptable to ABI and submits to ABI evidence of its compliance with these conditions.

Bidder/Contractor's failure to comply with all insurance and bonding requirements set forth in this section and applicable to the Agreement will not relieve bidder/contractor's obligations to comply with all insurance and bonding requirements set forth in this section and applicable to the Agreement will not be construed to conflict with or limit bidder/contractor's indemnification obligations under the Agreement.



Insurance Required for Duration of Contract

All insurance and bonds required by this section must be maintained during the entire term of the Agreement, including any renewal or extension terms, and until all work has been completed to the satisfaction of ABI.

3. <u>Notices of Cancellation & Renewal</u>

Bidder/Contractor must submit, within 2 business days of receipt, to ABI, at the address listed below by mail, hand-delivery or facsimile transmission, all notices received from all insurance carriers providing insurance coverage under this Agreement and section that concern the proposed cancellation, or termination of coverage of any insurance policies. All notices under this provision shall be sent to:

Atlanta BeltLine, Inc.

Attention: Vice President & General Counsel

100 Peachtree Street NW, Suite 2300

Atlanta, Georgia 30303

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Confirmation of any mailed notices must be evidence by return receipts or registered or certified mail.

Bidder/Contractor shall provide ABI with evidence of required insurance prior to the commencement of this Agreement, and, thereafter, with a certificate evidencing renewals or changes to required policies of insurance at least fifteen (15) days prior to the expiration of previously provided certificates.



4. <u>Certificate Holder</u>

Atlanta BeltLine, Inc. must be named as certificate holder and the name of the project must be listed appropriately on the Certificate of Insurance. All notices may be mailed to the attention of:

Atlanta BeltLine, Inc.

Vice President & General Counsel

100 Peachtree Street NW, Suite 2300

Atlanta, Georgia 30303

5. <u>Additional Insured Endorsements</u>

ABI, IA and the City of Atlanta must be covered as additional insured under all insurance (except worker's compensation) required by this section and such insurance must be primary with respect to the Additional Insured. Confirmation of this must unconditionally appear on any certificate of insurance provided by bidder/contractor as evidence of its compliance with this section.

Bidder/Contractor must also submit to ABI an additional insured endorsement evidencing the rights of ABI, IA, and the COA as an additional insured for each policy of insurance under which it is required to be an additional insured pursuant to this section. ABI, IA and the City of Atlanta shall not have liability for any premiums charged for such coverage.

A. Workers' Compensation and Employer's Liability Insurance

Bidder/Contractor must procure and maintain Worker's Compensation and Employer's Liability Insurance in the following limits to cover each employee who is or may be engaged in work under the agreement.



Worker's Compensation/Employer's Liability Statutory

Bodily Injury by Accident/Disease \$1,000,000 each accident

Bodily Injury by Accident/Disease \$1,000,000 each employee

Bodily Injury by Accident/Disease \$1,000,000 policy limit

B. Commercial General Liability Insurance

Bidder/Contractor must procure and maintain Commercial General Liability Insurance in an amount not less than \$1,000,000 per occurrence subject to a \$2,000,000 general aggregate per project. The following indicated extensions of coverage must be provided:

[X]	Contractual Liability
[X]	Broad Form Property Damage
[X]	Personal Injury
[X]	Advertising Injury
[X]	Fire Legal Liability
[X]	Medical Expense
[X]	Premises Operations
[X]	Independent Contractors/Subcontractors
[X]	Products – Completed Operations
[X]	Additional Insured Endorsement (written on primary, non-contributing basis)
[X]	Sudden and accidental pollution coverage



C. Commercial Automobile Liability Insurance

Bidder/Contractor must procure and maintain Automobile Liability Insurance in an amount not less than **\$1,000,000 Bodily Injury and Property Damaged combined single limit**. The following indicated extensions of coverage must be provided:

- [X] Owned, Non-owned & Hired Vehicles
- [X] Additional Insured Endorsement (written on primary, non-contributing basis)
- [X] Waiver of Subrogation in favor of ABI

If bidder/contractor does not own any automobiles in the corporate name, hired and non-owned vehicles coverage will apply and must be endorsed on either bidder/contractor's personal automobile policy or the Commercial General Liability coverage required under this section.

D. Environmental Liability

Bidder/Contractor shall procure and maintain Environmental Liability Insurance in an amount not less than **\$1,000,000 each occurrence/aggregate**. Self-Insured Retention will be borne by the bidder/contractor. Complete operations coverage shall remain in effect for no less than three (3) years after final completion. The following extensions of coverage must be provided:

- [X] Additional Insured Endorsement (written on primary, non-contributing basis)
- [X] 60-day notice of cancellation to ABI
- [X] Coverage for bodily injury and property damage sustained on site or offsite
- [X] Broadened Coverage for Covered Autos
- [X] Extension included for waste or other material deposited at non-owned disposal sites



E. Performance and Payment Bond

The bidder/contractor shall furnish a Payment Bond and Performance Bond to ABI in an amount equal to **100 percent** of the contract amount.

The person executing the Bonds on behalf of the surety shall file with the bonds a general power of attorney unlimited as to amount and type of bonds covered by such power of attorney and certified by an official of said surety.

BIDDER'S ACKNOWLEDGEMENT

The undersigned bidder acknowledges all requirements outlined in the above "Insurance & Bonding Requirements" and all documents referred to therein. This signed form must accompany the completed Bid Form submitted at the time of bid.

Signature:	Date:
(President, Vice President of	r Corporate Officer)
Printed Name:	Title:
Attested by: (Secretary of Corporation)	Date:
Printed Name	_Title:



SEAL		
(Corporate Seal required if Bidder is Corporation)		
Company Name:		
Address:		
City:	_State:	_Zip:
Telephone Number:		
Email:		

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Exhibit "M"

INSURANCE COVERAGE AND BONDING CAPACITY

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

The bidder shall provide Atlanta BeltLine, Inc. with satisfactory evidence of the bidder's ability to obtain the required insurance and bonds from (a) company(ies) satisfactory to Atlanta BeltLine., Inc. and licensed by the Insurance Commissioners of the State of Georgia to transact Surety business in the State of Georgia. <u>Bidder shall submit this form with Bid.</u>

SURETY:	
Company Name:	
Company Address:	
Contact Name and Phone:	
Bonding Capacity is:	<u> </u>
Available (uncommitted) Bond	ling Capacity is:



INSURER:		
Company Name:		
Company Address:		
Contact Name and Phone:		
	Company Name	
	President/Vice President	
Sworn to and subscribed before me this	day of, 202_	<u>-</u> •
	Secretary/Assistant Secretary	
	Secretary/Assistant Secretary (Affix corporate seal here, if corporate	ition)



EXHIBIT "N"	
BID BOND	
STATE OF	
COUNTY OF	
KNOW ALL MEN BY THESE PRESENTS, that	
(Name of Contractor)	
(Address of Contractor)	
a	
(Corporation, partnership or individual)	
hereinafter called Principal, and	
(Name of Surety)	
(Address of Surety)	



a Corporation of the State of	and a surety	authorized by law to do business in
the State of Georgia, hereinafter calle	ed Surety, are held and	firmly bound unto
Atlanta BeltLine, Inc.	City of Atlanta	Invest Atlanta
100 Peachtree Street NW, Ste 230	55 Trinity Avenue	133 Peachtree Street NE, Ste2900
Atlanta, GA 30303	Atlanta, GA 30303	Atlanta, GA 30303
Thereinafter referred to as Co-Obl		ım ofDollars the United states, for the payment of
which sum will and truly be made, w successors, jointly and severally, firm		heirs, executors, administrators and
WHEREAS, the Principal has subm provide materials, labor and equipme		ne, Inc. (Owner) a Bid Proposal to

PI 0012586 FULTON: Ponce de Leon Avenue LCI Streetscape

WHEREAS the Principal desires to file this Bond in accordance with law in lieu of a certified bidder's check otherwise required to accompany this Proposal.

NOW, THEREFORE, the conditions of this obligation are such that if the bid proposal be accepted, the Principal shall, within ten days after receipt of conformed Agreement, execute an Agreement in accordance with the bid proposal upon the terms, conditions and prices set forth therein, and in the form and manner required by the Agreement and executed sufficient and satisfactory separate Performance and Payment Bonds payable to the Owner each in the amount of 100% of the total contract price, in form and with security satisfactory to said Owner, then this amount of five percent (5%) of the total bid amount in form satisfactory to the Owner, then this obligation shall be void; otherwise, it shall be and remain if full force and effect in law; and the Surety shall, upon failure of the Principal to comply with any and all of the foregoing requirements with the time specified above, immediately pay to the aforesaid Owner, upon demand, the amount hereof in good and lawful money of the United States of America, not as a penalty, but as liquidated damages.



This bond is given pursuant to and in accordance with the provision of O.C.G.A Sections 13-10-1 and 36-82-101 *et. seq.* and all of the provisions of the law referring to this character of bond as set forth in said Sections or as may be hereinafter enacted and these are hereby made a part hereof to the same extent as if set out herein in full.

	pal has hereunder affixed its signature and seal and said its corporate signature and seal, by its duly authorized, 202
ATTEST:	
	(Principal)
(Principal Secretary) (SEAL)	
	By:
	(Address)
(Witness to Principal)	
(Address)	



urety) /: ttorney-in-Fact)
ttorney-in-Fact)
ddress)

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EXHIBIT "O"

DISADVANTAGED BUSINESS ENTERPRISE PARTICIPATION

ABI is committed to the practice of non-discrimination in the selection of team members and relationships with sub-contractors with a desire to reflect diversity in the participation of companies engaged in the Atlanta BeltLine program. ABI strongly encourages participation by Female Business Enterprises ("FBE"), Minority Business Enterprises ("MBE"), Small Disadvantaged Businesses ("SDB"), Women's Business Enterprise (WBE) and Small Business Enterprises ("SBE") in all contracts issued by ABI. These enterprises shall be collectively referred to in herein as DBEs. It is anticipated that as a part of a responsive submittal, DBE participation will be included. This Project has a DBE goal, which has been set at 13%.

However, nothing herein should indicate that an FBE, MBE, SDB WBE, or SBE may not apply and be selected independently, as FBEs, MBEs, SDBs, WBE, and SBEs that meet the qualifications of this ITB are encouraged to submit their qualifications for consideration. In order to participate as an FBE, MBE, SDB, WBE or SBE on the contract, said FBE, MBE, SDB, WBE or SBE must be certified as an FBE, MBE, SDB, WBE or DBE through GDOT, MARTA, the Georgia Minority Supplier Development Council, the U.S. Small Business Administration, the City of Atlanta, or the Women's Business Enterprise National Council. SBEs must be registered with the City of Atlanta and are defined in Section 2-1357 of Division 9 of the City of Atlanta Code of Ordinances, as amended. ABI maintains data on the utilization of DBE entities for all contracts with the utilization of ABI's Subcontractor/Sub-consultant Utilization and DBE Participation Certification form.

Each bidder for ABI shall list any and all Female, Minority, Small Disadvantaged Business, Women Business Enterprise or Small Business Enterprises (FBE, MBE, SDB, WBE, and SBE) that have been or will be utilized on this contract; the amount of revenue received or to be received by the FBE, MBE, SDB, WBE, and SBE; and the percentage of the overall Scope of Services the specific DBE will provide under the contract. All invoices should be in a format approved by the ABI Project Manager and reflect the sums to be received by DBEs, (FBEs, MBEs, SDBs, WBEs and SBEs) from the total payment to be received by the bidder. The invoices should also reflect a total amount of compensation paid to date to the bidder and each DBE participant along with their corresponding percentage of the total compensation received. bidder will also be responsible for submitting lien waivers from each of its DBE participants for all payments received, where necessary, and affirm that the bidder is current with all payment obligations due to the DBE participants at the time of the submission of an invoice for payment. Bidder shall be deemed a constructive trustee of the funds paid to it that are to be disbursed to a specific DBE participant. Failure to pay sums due to DBE participants shall be deemed a material breach of the terms of any agreement to which bidder may become a party as a result of its selection as the bidder.

Persons or firms interested in obtaining applications for certification should contact one or more



of the following organizations:

- City of Atlanta Office of Contract Compliance (FBE/MBE/SBE Certification): 55 Trinity Avenue, Atlanta, Georgia 30303, Tel: (404) 330-6010, Fax: (404) 658-7359.
- U.S. Small Business Administration (SDB certification) acceptable provided certification reflects minority or women-owned status. Requirements are found at www.sba.gov.
- **Georgia Department of Transportation** (DBE Certification): One Georgia Center, 600 West Peachtree NW, Atlanta, GA 30308, Tel: (404) 631-1990. DBE Helpdesk: (404) 631-1273.
- MARTA (DBE Certification): 2424 Piedmont Road NE, Atlanta, GA 30324, Tel: (404) 848-5270 Fax: (404) 848-4302. Web link: itsmarta.com/dbe-program.aspx. Email contact: Antoine Smith, Manager, Supplier Diversity (asmith1@itsmarta.com)
- **Georgia Minority Supplier Development Council, Inc.** (MBE Certification): 759 West Peachtree Street, Suite 107, Atlanta, GA 30308, Tel: (404) 589-4929.
- U.S. Department of Transportation (DBE and ACDBE Certifications): The DBE and Airport Concessions Disadvantaged Business Enterprise (ACDBE) Programs require that all U.S. DOT recipients of federal assistance participate in a statewide Uniform Certification Application (UCP). The UCP is a one-stop certification program that eliminates the need to obtain certification from multiple agencies within the State of Georgia. For more information, go to the USDOT website: https://www.transportation.gov/civil-rights/disadvantaged-business-enterprise/uniform-certification-application-english.
- Women's Business Enterprise National Council (WBENC Certification for Women's Business Enterprises): Go to https://www.wbenc.org/certification-process

A person or firm selected by the bidder can only satisfy one of the three categories. The same person or firm may not, for example, be listed for participation as an MBE organization and an SBE organization even if the level of participation exceeds each category's goal. All bidders/business entities must be registered or certified prior to the submittal of the bid. A bidder is at risk in that there may be an issue of time to certify or register if it intends to use a business entity that is not certified or registered at the time the bid is submitted. Applicants must include copies of MBE, FBE, SDB, WBE, SBE, and/or DBE certifications for the contractors and subcontractors listed in their submittal packages, if any.

In accordance with ABI's DBE participation policy, all bidders shall complete and submit the Good Faith Effort Affidavit attached hereto as Exhibit I.

ABI is an Equal Opportunity Employer.



EXHIBIT "P"

DISADVAN	TAGED BUSINESS	ENTERPRISE UTIL	IZATION PLAN
BID PERCENTAGE %	1		
TOTAL DBE PARTICIP	ATION AS A PERCEN	IT OF TOTAL PROJEC	CT =
DBE Firm	Description of Work	Value	% Of Project
	TOTAL		
Name of Firm:			

Include DBE Certificates of DBE Firms



EXHIBIT "Q"

SUBCONTRACTOR/SUBCONSULTANT UTILIZATION AND

DBE PARTICIPATION CERTIFICATION

Contract:		Date:
Contract	Date:	_
Total Con	ntract Amount:	-
Minority (WBE), Sn ABI is gat contracto Business the amou of the ove	Business Enterprise (MBE), Small Disaderall Business Enterprise (SBE) entities in thering data on the utilization of FBE, Nor or consultant for ABI shall list any attemption (FBE, MBE, SDB, WBE, and ant of revenue received or to be received erall Scope of Services provided under the state of the state o	
Contracto	or/Consultant:	
1.	Female, Minority, Small Disadvanta Enterprise. (Please indicate below amount, that your firm will carry out	ant on the above Contract (is) (is not) a aged, Women Business Enterprise or Small Business the portion of work, including percentage of Contract directly.):
2.		nt Venture, please indicate by checking here () and e Affidavit. ABI will also need to have a copy of the

executed Joint Venture agreement.



3.	All Subcontractors/Sub-consultants (including suppliers) used or performance of this project, if awarded, are:	to	be	utilized	in	the
	ctor/Sub-consultant Name:	_				
Address				-		
Phone	Contact Person			- -		
Email addr	ess:					
Ethnic Gro	up* FBE/MBE/SBE/SDB/WBE Certification from					
(Name of a	gency)					

*Groups: African American Business Enterprise (AABE); Asian Business Enterprise (ABE); Female Business Enterprise (FBE); Hispanic Business Enterprise (HBE); Native American Business Enterprise (NABE); Small Business Enterprise (SBE); Women's Business Enterprise (WBE); Small Disadvantaged Business; as certified by <a href="tel:the-te

Subcontractor/Sub-consultant Na	ame:	
Address		
Phone		
Contact Person		

Work to be Performed _____

Percent of Total Contract Amount______% Percent of Scope of Services_______%

Amount awarded \$_____ Amount received \$_____



Email address:
Email address:
Ethnic Group* FBE/MBE/SBE/SDB/WBE Certification from
(Name of agency)
Work to be Performed
Amount awarded \$ Amount received \$
Percent of Total Contract Amount% Percent of Scope of Services%
Subcontractor/Sub-consultant Name:
Address

Phone
Contact Person
Email address:
Ethnic Group* FBE/MBE/SBE/SDB/WBE Certification from
(Name of agency)
Work to be Performed
Amount awarded \$ Amount received \$
Percent of Total Contract Amount% Percent of Scope of Services%
Subcontractor/Sub-consultant Name:
Address

Phone
Contact Person
Email address:



Ethnic Group* FBE/MBE/SBE/SDB/WBE Certification from
(Name of agency)
Work to be Performed
Amount awarded \$ Amount received \$
Percent of Total Contract Amount% Percent of Scope of Services%
Subcontractor/Sub-consultant Name:
Address
Phone Contact Person
Email address:
Ethnic Group* FBE/MBE/SBE/SDB Certification from (name of agency)
Work to be Performed
Amount awarded \$ Amount received \$
Percent of Total Contract Amount% Percent of Scope of Services%
Total Amount of All DBE Subcontractor/Sub-consultant Agreements \$
Percentage Value of Total Contract
If the contract is completed, please indicate the total amount paid to the above Subcontractors or Sub-consultants. \$
Total Amount of FBE Subcontractor/Sub-consultant Agreements \$
Total Amount of MBE Subcontractor/Sub-consultant Agreements \$
Total Amount of SBE Subcontractor/Sub-consultant Agreements \$
Total Amount of WBE Subcontractor/Sub-consultant Agreements \$
Total Amount of SDB Subcontractor/Sub-consultant Agreements \$

The undersigned certifies that he/she is legally authorized by the Contractor/Consultant to make the statements and representations in this document and that said statements and representations are true and correct to the best of his/her knowledge and belief.



Contractor/Consultant Name:	
Signature:	
Title:	
Address:	
Contact Person for Contract:	
Telephone No.:	
Email Address:	

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EXHIBIT "R"

GOOD FAITH EFFORT AFFIDAVIT

DBE Participation Policy

The ABI DBE Participation Policy establishes subcontracting goals for all prospective bidders (ITB), offerors (RFP), and respondents (RFQ) to ensure a reasonable degree of DBE participation in ABI contracts. It is the goal of ABI that a certain percentage of work under each contract be executed by one or more DBEs.

The Successful Bidder shall agree to meet the established goals or must demonstrate and document a "good faith effort" to include DBEs in subcontracting opportunities. The successful bidder who fails to adequately document good faith efforts to subcontract or purchase significant material supplies from DBEs may be denied award of the Contract by ABI based on the contractor's failure to be a "responsive" respondent, offeror or bidder.

By signing below, I agree to provide ABI with a completed copy of all forms required by the DBE Participation policy. I understand that if I fail to provide all of the required documents within five (5) business days after notification, my submission or proposal may be deemed "non-responsive", and I may be denied award of the contract.

Procurement title:		
Date		
Name of Company		
Printed Name of Certifying Official of Company	Title	



EXHIBIT "S"

GOOD FAITH EFFORT ASSESSMENT

(To be completed immediately following Notice of Award BY THE SELECTED BIDDER)

Contractor Name:		
Data		
Date:		
Contractor Address:		
Contract Name:		
Criteria to be used to determine contractor's good faith effort in achieving the	Meets	Criteria
Agency's DBE goals.		<u>circle</u>
1. Attended any pre-solicitation or pre-bid meetings.	Yes	No
Comments:		
2. Advertised contracting opportunities.	Yes	No
Comments:	_1	



3. Written notice to a reasonable number of specific DBEs.	Yes
Comments:	
4. Followed up with interested firms.	Yes
Comments:	
5. Selected portions of work to be done by DBEs.	Yes
	Yes
	Yes
	Yes
Comments:	Yes
5. Selected portions of work to be done by DBEs. Comments: 6. Provided adequate information about requirements. Comments:	
Comments: 6. Provided adequate information about requirements.	
Comments: 6. Provided adequate information about requirements.	



d the services of available organizations with knowledge of DBE firms.	Yes
nts:	
Contractor's Authorized Signature and Date	
The foregoing assessment from	
contractor/supplier has made/not made (please circle) a good faith effort for this	contract.
contractor/supplier has made/not made (please circle) a good faith effort for this	contract.
	contract.
Signature and Date:	contract.
	contract.
	contract.
Signature and Date:	contract.
	contract.
Signature and Date:	contract.
Signature and Date: DBE Policy Manager	contract.
Signature and Date:	contract.
Signature and Date: DBE Policy Manager	contract.



CVU	דוסו	r " ' T'	
EXH	ЮП		

BID FORM

Projec	t:	PI 0012586	6, Ponce de Leon	Avenue LCI	Streetscape		
То:	Atlanta	BeltLine, Ir	nc.	Submitted D	ate:	,	
	Atlanta,	, Georgia					
Ву:							
	(Bidder	's Name)					
1.	with the (including for the	e instructions in the instruction in the instructio	ons, requirements TICE OF BID, Instru and within requi	s and forms uctions to Bid	included in Bi ders Package), a	with ABI, in accordance of Document Package and to complete all Worl accordance with the Bio	e k
2.		limitation t				ent Package including I and disposition of Bio	
3.		•	Bid, Bidder makes its and represents	•	ions required by	Instructions to Bidders	S
			examined Bid Do to Bidders, and fol		•	NOTICE of BID and	d
	Ne	0		No	_Dated	_	
	No	0	Dated	No	_Dated	_	
	No	0	Dated	No	_Dated	<u> </u>	



 b. Bidder has examined the site and locality where the Work is to be performed and legal requirements (federal, state, and local laws, ordinances, rules and regulations and conditions affecting Work cost, difficulty, progress or performance and has made independent investigations as Bidder deems necessary. c. Bidder has carefully studied reports and drawings indicating subsurface conditions and drawings depicting physical conditions as identified in the Contract Documents and accepts the determinations concerning technical data contained in reports and drawings on which Bidder is entitled to rely. d. Bidder has reviewed and checked Plans and data shown or indicated on the Bid Document Package with respect to existing underground facilities at or contiguous to the site and assumes responsibility for accurately locating underground facilities No additional examinations, investigations, explorations, tests, reports, or similal information or data concerning underground facilities are or will be required by Bidder in order to perform and furnish Work at Contract Price, within Contract Time and in accordance with terms and conditions contained in the Bid Documen Package e. Bidder has correlated results from observations, examinations, investigations explorations, tests, reports, and studies with terms and conditions contained in the Bid Document Package. f. Bidder has given Owner written notice concerning conflicts, errors, or discrepancies discovered in the Bid Document Package and written resolution by Owner is acceptable to Bidder. 							
 legal requirements (federal, state, and local laws, ordinances, rules and regulations and conditions affecting Work cost, difficulty, progress or performance and has made independent investigations as Bidder deems necessary. c. Bidder has carefully studied reports and drawings indicating subsurface conditions and drawings depicting physical conditions as identified in the Contract Documents and accepts the determinations concerning technical data contained in reports and drawings on which Bidder is entitled to rely. d. Bidder has reviewed and checked Plans and data shown or indicated on the Bid Document Package with respect to existing underground facilities No additional examinations, investigations, explorations, tests, reports, or similal information or data concerning underground facilities are or will be required by Bidder in order to perform and furnish Work at Contract Price, within Contract Time and in accordance with terms and conditions contained in the Bid Documen Package e. Bidder has correlated results from observations, examinations, investigations explorations, tests, reports, and studies with terms and conditions contained in the Bid Document Package. f. Bidder has given Owner written notice concerning conflicts, errors, or discrepancies discovered in the Bid Document Package and written resolution by Owner is 		No	Dated	No	Dated	_	
 and drawings depicting physical conditions as identified in the Contract Documents and accepts the determinations concerning technical data contained in reports and drawings on which Bidder is entitled to rely. d. Bidder has reviewed and checked Plans and data shown or indicated on the Bid Document Package with respect to existing underground facilities at or contiguous to the site and assumes responsibility for accurately locating underground facilities No additional examinations, investigations, explorations, tests, reports, or similal information or data concerning underground facilities are or will be required by Bidder in order to perform and furnish Work at Contract Price, within Contract Time and in accordance with terms and conditions contained in the Bid Documen Package e. Bidder has correlated results from observations, examinations, investigations explorations, tests, reports, and studies with terms and conditions contained in the Bid Document Package. f. Bidder has given Owner written notice concerning conflicts, errors, or discrepancies discovered in the Bid Document Package and written resolution by Owner is 	b.	legal red and con	quirements (feder ditions affecting \	ral, state, and lo Work cost, difficu	cal laws, ordinances ulty, progress or perf	s, rules and regulatio	ns
Document Package with respect to existing underground facilities at or contiguous to the site and assumes responsibility for accurately locating underground facilities. No additional examinations, investigations, explorations, tests, reports, or similar information or data concerning underground facilities are or will be required by Bidder in order to perform and furnish Work at Contract Price, within Contract Time and in accordance with terms and conditions contained in the Bid Document Package. e. Bidder has correlated results from observations, examinations, investigations explorations, tests, reports, and studies with terms and conditions contained in the Bid Document Package. f. Bidder has given Owner written notice concerning conflicts, errors, or discrepancies discovered in the Bid Document Package and written resolution by Owner is	C.	and draw	wings depicting pepts the determine	physical condition	ns as identified in thing technical data o	he Contract Docume	ents
explorations, tests, reports, and studies with terms and conditions contained in the Bid Document Package. f. Bidder has given Owner written notice concerning conflicts, errors, or discrepancies discovered in the Bid Document Package and written resolution by Owner is	d.	Docume to the si No addi informat Bidder in and in	ent Package with te and assumes itional examination tion or data con n order to perforr accordance with	respect to exis responsibility foons, investigation cerning undergund and furnish W	ting underground far r accurately locating ons, explorations, to round facilities are fork at Contract Pric	acilities at or contigue g underground facilit ests, reports, or sim or will be required ce, within Contract Ti	ous ies nila by ime
discovered in the Bid Document Package and written resolution by Owner is	e.	explorat	ions, tests, repor				
	f.	discover	red in the Bid I				

The Bid is genuine and not made in the interest of, or for any undisclosed person,

firm or corporation. Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; Bidder has not solicited or induced any person, firm, or corporation to refrain from bidding; and Bidder has not sought by collusion

to obtain for itself any advantage over any other Bidder or over Owner.

h. Bidder cannot withdraw bid within 120 days of opening.

g.



EXHIBIT "U"

GA 190247 GEORGIA DEPARTMENT OF LABOR - DAVIS BACON WAGE RATES

General Decision Number: GA190247 01/04/2019 GA247

Superseded General Decision Number: GA20180259

State: Georgia

Construction Type: Highway

County: Fulton County in Georgia.

HIGHWAY CONSTRUCTION PROJECTS

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.60 for calendar year 2019 applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.60 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2019. If this contract is covered by the EO and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must pay workers in that classification at least the wage rate determined through the conformance process set forth in 29 CFR 5.5(a)(1)(ii) (or the EO minimum wage rate, if it is higher than the conformed wage rate). The EO minimum wage rate will be adjusted annually. Please note that this EO applies to the above-mentioned types of contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but it does not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60). Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

Modification Number Publication Date

0 01/04/2019

SUGA2014-081 10/03/2016

	Rates	Fringes
CARPENTER, Includes Form Work	\$ 15.74	0.00
CEMENT MASON/CONCRETE FINISHER	\$ 15.33	0.00
FENCE ERECTOR	\$ 16.54	0.00



HIGHWAY/PARKING LOT STRIPING:		
Operator (Striping Machine)	\$ 13.25	2.69
INSTALLER – GUARDRAIL	\$ 14.95	0.00
INSTALLER – SIGN	\$ 13.03	0.00
	Rates	Fringes
IRONWORKER, REINFORCING	\$ 14.64	0.00
IRONWORKER, STRUCTURAL	\$ 15.12	0.00
LABORER: Concrete Paving		
Joint Sealer	\$ 17.66	0.00
LABORER: Grade Checker	\$ 11.45	0.00
LABORER: Mason Tender – Brick	\$ 11.61	0.00
LABORER: Mason Tender - Cement/Concret	te \$ 12.32	0.00
LABORER: Pipelayer	\$ 12.34	0.00
LABORER: Asphalt (Includes Distributor,		
Raker, Screed, Shoveler, and Spreader)	\$13.87	0.00
LABORER: Common or General,		
Includes Erosion Control	\$ 11.21	0.00
OPERATOR: Backhoe/Excavator/Track hoe	\$ 17.52	2.70
OPERATOR: Bobcat/Skid Steer/Skid Loader	r \$ 13.38	0.00
OPERATOR: Broom/Sweeper	\$ 14.83	1.38
OPERATOR: Bulldozer	\$ 15.68	1.25
OPERATOR: Compactor	\$ 14.64	0.00
OPERATOR: Concrete Saw	\$ 18.94	0.00
OPERATOR: Crane	\$ 21.08	0.00
OPERATOR: Distributor	\$ 16.69	1.01
OPERATOR: Grader/Blade	\$ 18.48	0.00
OPERATOR: Hydroseeder	\$ 15.20	0.00
OPERATOR: Loader	\$ 13.64	0.94
OPERATOR: Mechanic	\$ 19.01	0.00
OPERATOR: Milling Machine Groundsman	\$ 13.43	1.24



OPERATOR: Milling Machine	\$ 17.02	2.39
OPERATOR: Paver (Asphalt, Aggregate, Concrete)	\$ 17.03	0.00
OPERATOR: Piledriver	\$ 16.70	0.00
OPERATOR: Roller	\$ 13.32	0.84
OPERATOR: Scraper	\$ 12.64	0.00
OPERATOR: Screed	\$ 15.18	1.66
OPERATOR: Shuttle Buggy	\$ 14.06	1.98
PAINTER: Spray	\$ 23.30	0.00
TRAFFIC CONTROL: Flagger	\$ 11.95	0.00
TRAFFIC CONTROL: Laborer-Cones/Barricades/		
Barrels - Setter/Mover/Sweeper	\$ 12.66	0.00
TRAFFIC SIGNALIZATION: Laborer	\$ 14.00	1.08
TRAFFIC SIGNALIZATION: Electrician	\$ 24.72	5.26
TRUCK DRIVER: Dump Truck	\$ 16.41	0.00
TRUCK DRIVER: Flatbed Truck	\$ 14.91	1.07
TRUCK DRIVER: Hydroseeder Truck	\$ 16.74	0.00
TRUCK DRIVER: Lowboy Truck	\$ 18.98	0.00
TRUCK DRIVER: Off the Road Truck	\$ 12.38	0.00
TRUCK DRIVER: Pickup Truck	\$ 13.29	0.00
TRUCK DRIVER: Water Truck	\$ 13.23	0.00
TRUCK DRIVER: Semi/Trailer Truck	\$ 16.26	0.00

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-



related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of "identifiers" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

Union Rate Identifiers

A four- letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than "SU" or "UAVG" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing this classification and rate.

Survey Rate Identifiers

Classifications listed under the "SU" identifier indicate that no one rate prevailed for this classification in the survey and the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

Survey wage rates are not updated and remain in effect until a new survey is conducted.

Union Average Rate Identifiers



Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH, indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

WAGE DETERMINATION APPEALS PROCESS

- 1.) Has there been an initial decision in the matter? This can be:
- * An existing published wage determination * a survey underlying a wage determination * a Wage and Hour Division letter setting forth a position on a wage determination matter * a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations Wage and Hour Division U.S. Department of Labor 200 Constitution Avenue, N.W., Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator U.S. Department of Labor 200 Constitution Avenue, N.W., Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board U.S. Department of Labor 200 Constitution Avenue, N.W., Washington, DC 20210



4.) All decisions by the Administrative Review Board are final.	

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EXHIBIT "V"

ATLANTA BELTLINE, INC. CODE OF ETHICS

Overview

Celebration: closing dinners and program celebrations, ribbon cuttings, grand openings, etc.

- •City: The City of Atlanta
- •Code: this Code of Ethics for the Atlanta BeltLine, Inc.
- •Contractors: all persons and entities that furnish products and/or services to ABI under an agreement
- •Covered Persons: ABI's board members, officers, and employees, both full and part-time
- •Ethics Officer: The General Counsel of the Atlanta BeltLine, Inc.
- •Family Member: A Covered Person's spouse, father, mother, son, daughter, brother, sister, father-in-law, mother-in-law, son-in-law, daughter- in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half-brother, half-sister, domestic partner or a person living in a stable family relationship with any employee. It also includes members of a Covered Person's household, whether they are related to the Covered Person.

State: The State of Georgia

General

CODE OF ETHICS AND CONFLICT OF INTEREST

The following is the Code of Ethics (the "Code") to which employees of the Atlanta BeltLine, Inc. ("ABI") are held accountable. The Code is not intended to serve as a comprehensive rulebook but, rather, as a guide to help an individual make the ethical choice. Each employee should use good business judgment in his/her/their actions to prevent ethical issues.

The purpose of the Code is to protect ABI by prohibiting any employee of ABI from engaging in activities that would hinder the integrity of the organization. The Code establishes the highest standards of honesty and independence. It recognizes that each employee of ABI must avoid even the appearance of impropriety in any business dealings.

Each officer of ABI shall comply with the ethical statutes, rules and regulations of the State of Georgia (O.C.G.A. § 21-5-1 and § 45-10-1) and the City of Atlanta (Code § 2-801 et seq.)



Definitions

It is essential to the proper operation of ABI that Covered Persons be independent, impartial, and, at all times, act to avoid conflict of interest, impropriety or the appearance of impropriety when acting for or on behalf of ABI.

All actions taken and programs administered by ABI shall be transparent to the general public and adhere to established processes and procedures.

Fiduciary Duty

As a fiduciary of ABI, every Covered Person shall exercise good faith when acting on behalf of ABI. Covered Persons owe a duty to ABI to advance ABI's legitimate interests when the opportunity to do so arises. Covered Persons should avoid situations that influence their ability to act solely in the best interests of ABI or interfere with their objectivity.

Conflicting Interest

A Covered Person is deemed to have a conflicting interest in a decision or action if a Covered Person or a Family Member has a personal or financial interest in that decision or action. A personal interest is any interest arising from relationships with Family, business, partnership, or corporate associations. A financial interest is one which shall yield, directly or indirectly, a monetary or other benefit to the Covered Person or Family Member.

Participation in ABI Programs

Covered Persons and Family Members are prohibited from participating in any program of ABI for which the Covered Person has a direct responsibility, oversight, audit or decision-making authority. To the extent a Covered Person is permitted to participate in a program of ABI, ABI will not grant a discount, waive fees or make adjustments from established market rates.

Participation in Celebrations

Covered Persons are allowed to participate in Celebrations where ABI has contributed to the matter being celebrated and participants are customarily invited to attend the Celebration.



Requirement to Disclose

Covered Persons are required to disclose any personal or financial interest and any situations that would reasonably give rise to a conflict of interest. This disclosure must be made in writing prior to participating in any decision or action, unless the disclosure occurs in a public meeting where there is a public record.

A Covered Person shall not vote for or against, discuss, decide, remain present in a meeting during a discussion or otherwise participate in a matter in which the Covered Person has a conflicting personal or financial interest except by express approval of the Ethics Officer.

Improper Influence

No Covered Person shall attempt to use his/her/their position to influence any ABI decision or action relating to an organization, entity or activity in which the Covered Person knows or has reason to know that the Covered Person or a Family Member has a personal or financial interest.

Corporate Opportunity

Covered Persons are prohibited from personally taking opportunities that are discovered through their position with ABI, using ABI's property or information for personal gain, or personally competing with ABI for business opportunities.

Confidential Information

No Covered Person shall disclose confidential information regarding the property, operations, policies, or affairs of ABI, except when authorized or required to do so by state or federal law, court order, or lawful subpoena. No Covered Person shall use confidential information acquired in an official capacity to advance the financial or personal interest of the Covered Person where such interest would conflict with the legitimate interests of ABI.

Employee-Related Matters

Business Gifts

Employees must avoid situations that compromise, or even appear to compromise, ABI's ability to make objective and fair business decisions. Thus, ABI employees are not allowed to accept any gifts or entertainment from any Contractor or potential business vendor.



Employees of ABI may not accept travel and lodging from persons or organizations without the approval of the Ethics Officer and the President and CEO.

Discounts

Discounts on any tickets for admission or other right of entry to any entertainment event shall only be permitted if the discounts are made available to all employees.

Honoraria for Speeches & Articles

Honoraria opportunities for employees of ABI must be conducted on the person's own time; not conflict with the person's responsibilities to ABI; and the Ethics Officer must approve of the opportunity in writing. Honoraria for speeches or articles prepared on behalf of ABI should be declined or remitted to ABI.

No Inducement for Contract or Rates

ABI will not make payments to or receive payments from any party to induce the award of a contract or the extension of favorable rates. These types of payments are deemed to be bribes and may subject the violator to criminal sanctions.

Code of Violations

Ethics Officer

The General Counsel of ABI shall serve as the Ethics Officer. Any violation of this Code must be reported immediately to the General Counsel. The duties of the Ethics Officer shall include:

Reporting Violations

Covered Persons should promptly report any information indicating that another Covered Person is engaged in or plans to engage in prohibited conduct, a person or entity associated with ABI is engaged in or plans to engage in prohibited conduct, or that a Covered Person has been instructed, directed, or requested to engage in prohibited conduct.

If a Covered Person has concerns regarding any ethics or compliance issue, immediately contact the Ethics Officer at (404) 477-3690. All reports regarding an alleged violation or ethics matter will be reviewed and investigated in a timely manner. The Ethics Officer may share ethical matters with the President and CEO and the Executive Team of ABI. The Ethics Officer and President and CEO may consult with outside counsel, as necessary, to address ethics issues and concerns. Any concern regarding conduct of the Ethics Officer should be reported to



the President and CEO of ABI. Neither ABI nor any Covered Persons will retaliate against employees who, in good faith, report any alleged violation or ethics matter.

Investigations and Hearings

The Ethics Officer shall conduct a preliminary investigation of any alleged violation. If the Ethics Officer determines there is probable cause to believe that there is a violation, then the Ethics Officer will recommend action in a written report to the members of the Executive Team, which shall include the COO and the CFO.

If the Executive Team also finds there to be probable cause supporting the complaint, then the Ethics Officer shall notify the complainant and the subject of the complaint. The Executive Team will conduct a hearing on the issues with the parties. At such hearing, the Executive Team shall determine

(1) whether the subject of the complaint has violated the Ethics Policy or other ABI policies and procedures and, if so (2) what disciplinary action should be taken. The Executive Team may take into consideration the recommendation from the Ethics Officer.

The Executive Team's decision shall be governed by the preponderance of the evidence standard. The decision of the Executive Team shall be presented to the President and CEO for approval. The decision of the President and CEO is final except in the event of termination of an employee for violation of this Ethics Policy and/or other ABI policies and procedures.

In the event that the President and CEO recommends termination of an employee for violation of the Ethics Policy and/or other ABI policies and procedures, the employee may appeal said action to the Board of Directors. The appeal will not be a full evidentiary hearing before the Board of Directors, only a review of the process and the disciplinary action. The decision of the Board of Directors shall be final.

Violence in the Workplace

Acts or threats of physical violence, including intimidation, harassment, and/or coercion, which involve an employee or affect the reputation of ABI, and which occur against ABI, employees, partners, customers or client property, will not be tolerated. Violation of this policy will subject the employee to disciplinary action up to and including termination.



Gun Free Workplace

ABI prohibits guns being brought on office premises or to any meeting with a client or public group to avoid any liability arising from the misuse of any weapon while in the corporate office or engaged in ABI business.

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EXHIBIT "W"

Bidder's Acknowledgement

The undersigned bidder acknowledges all requirements outlined in the "Instructions to Bidder's Package" and all documents referred to therein. This signed form must accompany the completed bid form submitted at the time of bid.

Signature:	Date:
(President, Vice President or Corporate Officer)	
Printed Name:	Title:
Attested by:	Date:
(Secretary of Corporation)	
Printed Name	Title:
SEAL	
(Corporate Seal required if Bidder is Corporation)	



Company Name:			
Address:			
City:	State:	Zip:	
Telephone Number:			
Email:			

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EXHIBIT "X" Bid Submittal Check List

Project: PI 0012586 FULTON" Ponce de Leon Avenue LCI Streetscape

The following submittals shall be viewed, completed and submitted with each bid as indicated in the checklist below. Documents required for submittal shall be completed fully, signed and/or notarized as appropriate. The checklist is a guide and may not be inclusive of all forms. It is the bidder's responsibility to submit a responsive and responsible bid in accordance with all requirements as it pertains to this Project.

Item Number	Items Not Required for Submittal	Check (√)
1	Invitation to Bid (View only. Do not submit with bid)	
2	Instructions to Bidders (View only. Do not submit with bid)	
3	Terms and Conditions Section (view, agree and acknowledge. Do not submit with bid)	
4	APPENDIX "A" – Scope of Work Reference Documents (view only.). An addendum will be posted in VR to include scope of work reference documents. Review addendum/addenda	
5	APPENDIX "B" - Sample Agreement (view, agree, and acknowledge. Do not submit with bid)	
6	Federal-Aid Certification (View and agree. Do not submit with bid)	
9	Code of Ethics (view and agree. Do not submit with bid)	
	Documents Required for Submittal	
	Required Bid Contents (Reference Section 6 of ITB)	
	Completed Bid Form submit as page 2 within bid document	



Authorization to Transact Business in State of Georgia (i.e., valid business license, valid Secretary of State, and other valid State of Georgia required license) Financial Statements – Prime Contractor's most current Financial Statement, and latest interim "un-audited financial statement Exhibit A Certification of No Organizational Conflict of Interest Exhibit B S.A.V.E. Affidavit Exhibit C Contractor's Affidavit Exhibit D Subcontractor Affidavit Exhibit E Sub-Subcontractor Affidavit Exhibit F Bidder 's Certification Form Exhibit G Non-Collusion Affidavit Exhibit H Bidder Affidavit Exhibit I Utility Contractors License Number Exhibit J Bidder/Contractor's Disclosure Exhibit K Statement of Bidder's Qualifications – Sub-Contractors Exhibit L Insurance and Bonding Requirements Exhibit N Bid Bond Exhibit N Bid Bond Exhibit O Disadvantaged Business Participation Exhibit Q Sub-Contractor/Sub-Consultant Utilization and DBE Participation Certification Exhibit R Good Faith Effort Affidavit (not assessment)			
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Exhibit U	Davis Bacon Act	
Exhibit V	(Review only) Code of Ethics	
Exhibit W	Bidder's Acknowledgement	
Exhibit X	Bid Submittal Checklist	
Exhibit Y	Receipt of Addenda	
Licenses	Include evidence of all required licenses as referenced in ITB	
Date:		
Firm Name:		
Ву:		
Title:		
Telephone Nu	umber:	
FAX number:		

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Email address:



EXHIBIT "Y"

RECEIPT OF ADDENDA

ADDENDA RECEIVED:	
Addendum No	Date Received
Date:	
Signature:	
Name:	
(Print)
Title	



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