BID	BOND	
KNOW ALL MEN BY THESE PRESENTS, that I/We Gene	y/Gassiot, Inc.	
as Principal, hereinafter called Contractor, and _The Ohio C	Casualty Insurance Company	
New Hampshire a corporation duly organized under the laws of the State of New Hampshire as Surety, hereinafter called the Surety, are held ar firmly bound unto Carson City, Nevada a consolidated municipality of the State of Nevada, hereinafter called City, for the su of \$ (5%) Five percent of the attached bid amount Dollars		
(state sum in words) (5%) Five percent of the attached bid amount		
for the payment whereof Contractor and Surety bind themselves, their heirs, executors, administrators, successors an assigns, jointly and severally, firmly by these presents.		
WHEREAS, the Principal has submitted a bid, identified as Digester Rehabilitation Project – Phase I Rebid".	BID # 1213-180 and titled "Wastewater Reclamation Plant	
Accordance with the terms of such bid, and give such bond or good and sufficient surety for the faithful performance of sufurnished in the prosecution thereof, or in the event of the failubonds, if the Principal shall pay to the City the difference not said bid and such larger amount for which the City may in go	ncipal and the Principal shall enter into a contract with the City in bonds as may be specified in the bidding or Bid Documents with Contract and for the prompt payment of labor and material are of the Principal to enter such Contract and give such bond or to exceed the penalty hereof between the amount specified in od faith contract with another party to perform work covered by the Invitation for Bids then this obligation shall be null and void,	
	Executed on this 20th day of June / 2013	
	Signature of Principal:	
	Title: Trust DENY	
(Seal)	Firm: Geney/Gassiot, Inc.	
	Address: 5521 W. Fourth Street	
City/State/Zip Code: Reno, NV 89523		
	Written Name of Principal: Geney/Gassiot, Inc.	
	ATTEST NAME	
	Signature of Notary: See Attached	
Subscribed and sworn before me this day of		
(printed name of notary) Notary Public for the State of		
Claims Under this Bond May be Addressed to:	Nevada Resident Agent Information Complete for out of state bonding companies	
Name of Surety The Ohio Casualty Insurance Company	, Name of Local Agent Cragin & Pike	
Address 62 Maple Avenue	Address 2603 W. Charleston Blvd.	
City Keene	City Las Vegas	
State/Zip Code NH 03431	State/Zip Code Nevada, 89102	
Name	Agent's Name Rena Casprowitz	
Title Stephanie Hoang, Attorney-in-Fact	Agent's Title Bond Account Manager	
Phone 617-357-9500	Agents Phone (702) 877-1111 (ext. 649)	
Surety's Acknowledgement	(102) 011 IIII (OAL. 077)	
NOTICE: No substitution or revision to this bond form will business in and have an agent for services of process in	l be accepted. Sureties must be authorized to do the State of Nevada. Certified copy of Power of Attorney	

must be attached.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

		0\\0\\0\\0\\0\\0\\0\\0\\0\\0\\0\\0\\0\\
State of California	l	
County of Orange	\$	
On 2013 before me,	Barbara Copeland, Notary Public	
personally appeared	Stephanie Hoang	
	Name(s) of Signer(s)	
BARBARA COPELAND Commission # 2016348 Notary Public - California Orange County My Comm. Expires Apr 19, 2017	who proved to me on the basis of satisfate be the person(s) whose name(s) is/are within instrument and acknowledge he/she/they executed the same in his/he capacity(ies), and that by his/her/their si instrument the person(s), or the entity which the person(s) acted, executed the I certify under PENALTY OF PERJUR of the State of California that the foregot true and correct. WITNESS my hand and official seal.	subscribed to the ed to me that er/their authorized gnature(s) on the upon behalf of e instrument.
	Signatura Capila	L
Place Notary Seal Above	Signature of Notary Pul	blic
Though the information below is not required by law, i	· - · · · · -	ument
Description of Attached Document		
Title or Type of Document:		
Document Date:	Number of Pages:	
Signer(s) Other Than Named Above:		
Capacity(ies) Claimed by Signer(s)		
Signer's Name: Stephanie Hoang Individual Corporate Officer — Title(s):	Signer's Name: Individual Corporate Officer — Title(s):	
□ Partner — □ Limited □ General □ Attorney in Fact □ Trustee □ Guardian or Conservator □ Other:	☐ Attornev in Fact	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Signer Is Representing:	Signer Is Representing:	- -
		-

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THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Certificate No. 6117650

ÉST on any business day.

Ed

1-610-832-8240 between 9:00 am and 4:30

ဂ္

Power of Attorney

American Fire and Casualty Company The Ohio Casualty Insurance Company Liberty Mutual Insurance Company West American Insurance Company

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That American Fire & Casualty Company and The Ohio Casualty Insurance Company are corporations duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, __Eric Lowey; Mark Richardson; Shawn Blume; Stephanie Hoang

all of the city of Costa Mesa each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed day of May



The Ohio Casualty Insurance Company Liberty Mutual Insurance Company West American Insurance Company

American Fire and Casualty Company

STATE OF WASHINGTON COUNTY OF KING

__<u>2013</u>_, before me personally appeared Gregory W. Davenport, who acknowledged himself to be the Assistant Secretary of American On this 8th day of May Fire and Casualty Company, Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Seattle, Washington, on the day and year first above written.



This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS - Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary, Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts - SECTION 5. Surety Bonds and Undertakings, Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes Gregory W. Davenport, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, David M. Carey, the undersigned, Assistant Secretary, of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seals of said Companies this



David M. Carey, Assistant Secretary

102 of 1000

BID # 1213-180

BID TITLE: "Wastewater Reclamation Plant Digester Rehabilitation Project – Phase I Rebid"

NOTICE:

No substitution or revision to this Bid Proposal form will be accepted. Carson City will reject any Bid that is received that has changes or alterations to this document. Although the Prevailing Wages are provided in this bid document, the bidder is responsible to verify with the Labor Commissioner if any addendums have been issued. The successful bidder will be required to provide the current Prevailing Wages used in preparation of their bid within 24 hours of bid submission.

<u>PRICES</u> will be valid for sixty (60) calendar days after the bid opening which is indicated in the Notice to Contractors.

<u>A COPY OF CONTRACTOR'S "CERTIFICATE"</u> of eligibility issued by the State of Nevada Contractors' Board as proof of Bidder's compliance with the provisions of N.R.S. 338.147 must be submitted with his/her bid for the preference to be considered. This Statute does not apply to projects expected to cost less than \$250,000.

COMPLETION of this project is expected **PURSUANT TO THE BID DOCUMENTS**.

BIDDER acknowledges receipt of 1 & 2 Addendums.

SUMMARY

	Description	Scheduled Value		Unit III	Total Price!
<u> </u>	Base Bid Items - Schedule A	<u> </u>			
BP. 1	Mobilization, Demobilization and Clean-up	1	LS		90,000
BP. 2	Digester Cleaning	1	LS		53,500
BP. 3	Demolition	1	LS		354,485
BP.4	Digester Interior Walls Structural Inspection and Repair (Allowances)	1	LS	\$50,000	\$50,000
BP. 5	Digester Dome Replacement	1	LS		305,676
BP. 6	Digester CMU Wall Repair	100	CMU		16,000
BP.7	Digester Gas Piping	1	LS		134,561
BP.8	Electrical and Instrumentation	1	LS		46,110
BP. 9	SUBTOTAL SCHEDULE A				1,010,332
BP. 10	Total Base Bid Price(SCHEDULE	A)			1,010,332

BP.11 Total Base (SCHEDULE A) Bid Price Written in Words:

One Million, TENTHOSOND, THEE Hundred . They Two

BP.12 BIDDER INFORMATION:

Company Name: Geney/Gassiot, Inc.

Federal ID No.: 94-2746308

Mailing Address: 5521 W. Fourth Street

City, State, Zip Code: Reno, Nevada 89523

Complete Telephone Number: 775.747.2200

Complete Fax Number: 775.747.2227

Fax Number including area code: 775,747,2227

E-mail: mgeney@geneygassiot.com

Contact Person / Title: Michael Geney/President

Mailing Address: 5521 W. Fourth Street

City, State, Zip Code: Reno, Nevada 89523

Complete Telephone Number: 775.747.2200

Complete Fax Number: 775.747.2227

E-mail Address: mgeney@geneygassiot.com

BP.13 LICENSING INFORMATION:

Nevada State Contractor's License Number: 0031456A

License Classification(s): General Engineering

Unlimited

Limitation(s) of License:

Date Issued: 4/2/2013

Date of Expiration: 4/30/2015

Name of Licensee: Geney/Gassiot, Inc.

Carson City Business License Number: 13-00025067

Date Issued: 5/28/2013

Date of Expiration: 12/31/2013

0 10 11

Name of Licensee: Geney/Gassiot, Inc.

BP.14 DISCLOSURE OF PRINCIPALS:

Individual and/or Partnership: N/A Owner 1) Name: Address: City, State, Zip Code: Telephone Number: Owner 2) Name: Address: City, State, Zip Code: Telephone Number: Other 1) Title: Name Other 2) Title: Name: Geney/Gassiot, Inc. Corporation: State in which Company is Incorporated: CA. NV as a Foreign Corporation 6/8/1981 Date Incorporated: Geney Gassiot, Inc. Name of Corporation: Mailing Address 5521 W. Fourth Street Reno, Nevada 89523 City, State, Zip Code: 775.747.2200 Telephone Number: Michael Geney President's Name: N/A Vice-President's Name: Kathleen Geney, Secretary/Treasurer Other 1) Name & Title:

BP.15 MANAGEMENT AND SUPERVISORY PERSONNEL:

Persons and Positions	Years With Firm
Name 1) Michael Geney	26 years
Title 1) Project Executive	
Name 2) Nick Skuse	13 years
Title 2) Project Manager	
Name 3) Lorne Johnson	3 years
Title 3) Project Supervisor	
Name 4) Jennifer Behrendt	3 years
Title 4) Project Engineer	
Name 5)	
Title 5)	
Name 6)	

Title 6)

(If additional space is needed, attach a separate page)

BP.16 REFERENCES:

Instructions:

List at least three (3) contracts of a similar nature performed by your firm in the last three (3) years. If **NONE**, use your Company's letterhead (and submit with your bid proposal) to list what your qualifications are for this contract. Carson City reserves the right to contact and verify, with any and all references listed, the quality of and the degree of satisfaction for such performance.

Clients: (if additional space is needed attach a separate page)

· · · · · · · · · · · · · · · · · · ·	
Company Name 1): Tahoe	Forest Hospital District
Contract Person: Rick Mc	Conn
Mailing Address: 10121 Pir	ne Avenue
City, State, Zip Code: Truck	kee, California 96161
Complete Telephone Number:	530.587.6011
E-Mail Address: rmcconn@	Dtfhd.com
Project Title: Cancer	Center Linear Accelerator Vault
Amount of Contract: \$660k	<
thick concre	uded but not limited to building a heavily reinforced seven foot (7') ete vault structure to house and contain dedicate cancer treatment and potential radioactive materials.
Company Name 2): Tahoe	Forest Hospital District
Contract Person: Rick Mc	Conn
Mailing Address: 10121 Pi	ne Avenue
City, State, Zip Code: Trucke	ee, California 96161
Complete Telephone Number:	530.587.6011
E-Mail Address: rmcconn@	@tfhd.com
Project Title: Tahoe Forest	t Hospital Central Energy Plant Generator Building Package
Amount of Contract: \$4.1M	
including ex	quare foot CMU generator building and adjacent electrical room cavation, site and retaining walls and associated foundation demolition of a pump room, chiller and oxygen storage tank. Bulk rage tank, supporting equipment and security fence.

	Company Name 3): Tahoe Forest Hospital District
	Contract Person: Rick McConn
	Mailing Address: 10121 Pine Avenue
	City, State, Zip Code: Truckee, California 96161
	Complete Telephone Number: 530.587.6011
	E-Mail Address: rmcconn@tfhd.com
	Project Title: Tahoe Forest Hospital
	Amount of Contract \$6.2M
	New constructions of Central Energy Plant Modular Buildings housing and the Scope of Work: following pieces of equipment: chiller units, heat exchanger and associated electrical panels, dual unit cooling tower and bulk liquid oxygen storage tank and associated site improvements. Company Name 4):
	Contract Person:
	Mailing Address:
	City, State, Zip Code:
	Complete Telephone Number:
	E-Mail Address:
	Project Title:
	Amount of Contract:
1	Scope of Work:

BP. 17 CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS PRIMARY COVERED TRANSACTIONS

- 1. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal, State or Local department or agency.
- b) Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
- c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- d) Have not within a three-year period preceding this bid had one or more public transactions (Federal, State or Local) terminated for cause or default.
- 2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

Marino my	President
Signature of Authorized Certifying Official	Title
Michael Geney	6/24/2013
Printed Name	Date

Bidder's Safety Factors:

Year	"E-Mod" Factor ¹	OSHA Incident Rate ²
2011	95%	0
2010	100%	0

¹ E-Mod (Experience Modification) Factors are issued by the Employer's Insurance Company of Nevada

² OSHA Incident Rate is the number of OSHA Recordable Accidents per 100 employees and is calculated as the number of accidents divided by 208,000.

SUBCONTRACTORS

BP.18 INSTRUCTIONS: for Subcontractors and General Contractors who self-perform in amounts exceeding five (5) percent of bid amount. This information must be submitted with your bid proposal. The bidder shall enter NONE under Name of Subcontractor if not utilizing subcontractors exceeding this amount and per revised NRS 338.141 (as amended by SB268), the prime contractor shall list itself on the subcontractor's list if it will be providing any of the work on the project. (This form must be complete in all respects. If, additional space is needed, attach a separate page).

Took of the state	o io riocaca, attacir a coparato pag	
Name of Subcontractor	Address 13521 W. 4711 ST	MET, RONO, NV 89522>
Phone 147 2200	Nevada Contractor License #	Limit of License
Description of work	PALLINGS, STAVO	TURAL, SHOKING
Name of Subcontractor	Address	1D, RENO, NV 89512
Phone 775.691.7903	Nevada Contractor License #	Limit of License UNUMITED
Description of work	MOLLTION	
Name of Subcontractor	Address 685 ENISTN L	JAY, RENO, NV 89502
Phone 775.342.29.60		Limit of License サラのひ,のひ
Description of work		,
Name of Subcontractor	Address 39 GLEN CAYUR	AN CIRCLE, SPARKS NV 8943
Phone 745.8791	Nevada Contractor License #	Limit of License
Description of work	131NG	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

SUBCONTRACTORS

BP.19 INSTRUCTIONS: for Subcontractors exceeding one (1) percent of bid amount or \$50,000 whichever is greater. This information must be submitted by the three lowest bidders within two (2) hours after the completion of the opening of the bids. The bidder may elect to submit this information with the bid proposal and, in that case, the bidder will be considered as having submitted this information within the above two hours.

Name of Subcentractor	Address PGB 2210	DAYFON NV 89403
Phone 115.246.8622	Nevada Contractor License #	Limit of License NULLITED
Description of work	FOURCING STEEL	-, PT TENDONS
Name of Subcontractor	Address	SACRAMUENTO, CA 95817
Phone 916-392-9020	Nevada Contractor License #	Limit of License
Description of work Hat Pac	4 COATINGS, W	JAMER REPELLANTS
Name of Subcontractor	Address 30 Hiltopyp. Unix	on City NV 89706
Phone: 246.0105	Nevada Contractor License #	Limit of License
Description of work	SONRY	
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	.
Phone	Nevada Contractor License #	Limit of License
Description of work		

SUBCONTRACTORS

BP. 20 INSTRUCTIONS: for all Subcontractors not previously listed on the 5% and 1% pages. This information must be submitted by the three lowest bidders within twenty four (24) hours after the completion of the opening of the bids. The bidder may elect to submit this information with the bid proposal and, in that case, the bidder will be considered as having submitted this information within the above twenty four hours.

Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	•
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

BP. 21

WORKERS EMPLOYED REPORT INSTRUCTIONS FOR COMPLETION

Effective April 27, 2011, contractors who receive a preference in bidding on a public work must submit an affidavit to the public body certifying that at least 50 percent of all workers employed on the public work, including any employees of the contractor and of any subcontractor, will hold a valid driver's license or identification card issued by the Nevada D epartment of Motor Vehicles. Pursuant to NRS 338.070(4), a contractor and each subcontractor engaged on a public work shall keep an accurate record showing, for each worker employed by the contractor or subcontractor in connection with the public work who has a driver's license or identification card, the name of the worker, the driver's license number or identification card number of the worker, and the state or other jurisdiction that issued the license or card. A copy of this record must be received by the public body no later than 15 days after the end of the month. Additionally, the contractor and any subcontractor will maintain and make available for inspection within Nevada his or her records concerning payroll relating to the public work.

- EACH contractor and subcontractor must complete the Workers Employed Report.
- · You may make additional copies of the report as necessary.
- · A copy of this report must be submitted with the monthly certified payroll report.
- For the first report submitted, each contractor and subcontractor should list every worker employed in connection with the public work. The workers listed should be the same as those reported on the certified payroll report.
- For each subsequent month, add only those workers not previously reported to the Workers Employed Report and submit the newly-revised report. If no additional workers have been added, you may submit the previous month's report.
- If a worker has been reported on a previous month's report, but does not work during a subsequent month or is no longer employed by the contractor, his or her name should remain on the report. DO NOT DELETE ANY NAMES. This report is intended to serve as a cumulative list of all workers employed by the contractor and subcontractor over the duration of the project to verify compliance with the minimum requirements of the affidavit.



WORKERS EMPLOYED REPORT

Project Name:	Contract Number :	
General Contractor:		PWP #
Subcontractor:		Date:
Address at which payrol	l records are maintained:	
Contact Person and Pho	one Number:	
Employee Name	Driver License Number or ID Card Number	Issuing State or Jurisdiction
<u> </u>		
		
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<u> </u>		

BP. 22

MATERIAL SUPPLIER REPORT INSTRUCTIONS FOR COMPLETION

Effective April 27, 2011, contractors who receive a preference in bidding on a public work must submit an affidavit to the public body certifying that at least 25 percent of the suppliers of the materials used for the public work will be located in Nevada. In order to ensure compliance the prime contractor shall submit with its monthly application for progress payment a Material Supplier Report completed by each contractor engaged on the public work.

- EACH contractor and subcontractor must complete the Material Supplier Report.
- · You may make additional copies of the report as necessary.
- A copy of this report must be submitted with the monthly application for progress payment.
- For the first report submitted, each contractor and subcontractor should list every supplier of materials used in connection with the public work. Include a brief list or description of the materials supplied in the space provided on the report.
- For each subsequent month, add only those suppliers not previously reported to the Material Supplier Report and submit the newly-revised report. If no additional suppliers have been added, you may submit the previous month's report.
- DO NOT DELETE ANY NAMES. This report is intended to serve as a cumulative list of all suppliers of materials over the duration of the project to verify compliance with the minimum requirements of the affidavit.



MATERIAL SUPPLIER REPORT

Project Name:	Contract Number :	
Project Name:		PWP #
Subcontractor:		Date:
	-	
Material Supplier Name	Address	Material Supplied
	 	

Local Preference Affidavit

(This form is required to receive a preference in bidding)

I, Michael Geney	, on behalf of the Contractor,	Geney/Gassiot, Inc.	, swear
and affirm that in order to be in comp bidding on Project No.1213-180 following requirement will be adhere submission of this affidavit on behalf comply with any requirements is a mathe Contractor may lose their preference pursuant to NRS 338. XXX*:	, Project Name ** d to, documented and attained or f of Geney/Gassiot, Inc. aterial breach of the contract and	certify that the completion of the contract. Upon I recognize and accept that fails entitles the City to damages. In ad	e in e ure to ldition,
1. The Contractor shall ensure at least identification card;	t 50 percent of the workers posse	ess a Nevada driver's license or	
2. The Contractor shall ensure all veh applicable) partially apportioned to N		ic work will be registered and (whe	ere
3. The Contractor shall ensure at least sub-contractors) have a Nevada driver		sionals who work on the project (in	cluding
4. The Contractor shall ensure at leas Nevada and;	at 25 percent of the material supp	liers used for the public work are l	ocated in
5. The Contractor shall ensure payroll of Nevada.	records related to this project ar	re maintained and available within	the State
*Note that specific sections of NRS "bidder's preference" have been an this affidavit and subsequent record program and awarded this project the "Bidder's Preference" eligibility	nended by the passage of Assend d keeping and reporting by the . These requirements are not a	nbly Bill 144 on April 27, 2011, r General Contractor using the pi	equiring reference
By: Michael Geney	Title: President		
Signature:	Date: 6/24/2013	3	
Signed and sworn to (or affirmed) bef by Michael Geney	fore me on this day o (name of person making s	f = Ju/y, $20/3$, tatement).	
State of Nevada		DENEEN HYBARGER	
County of Washoe Notary Signature S	TAMP AND SEAL	Notary Public - State of Nevada Appointment Recorded in Washoe County No: 06-105241-2 - Expires May 11, 2014	

**Wastewater Reclamation Plant Digester Rehabilitation Project-Phase 1



NEVADA STATE CONTRACTORS BOARD

9670 GATEWAY DRIVE, SUITE 100, RENO, NEVADA, 89521 (775) 688-1141 FAX (775) 688-1271, INVESTIGATIONS (775) 688-1150 2310 CORPORATE CIRCLE, SUITE 200, HENDERSON, NEVADA, 89074, (702) 486-1100 FAX (702) 486-1190, INVESTIGATIONS (702) 486-1110

CERTIFICATE OF ELIGIBILITY PER NRS 338.147 and NRS 338.1389

CERTIFICATE NUMBER: BPC-13-05-29-0487

CERTIFICATE BY THE NEVADA STATE CONTRACTORS' BOARD, BASED UPON THE INFORMATION CONTAINED IN THE STATEMENT OF COMPLIANCE WITH NEVADA REVISED STATUTES (NRS) 338.147 AND NRS 338.1389 AND THE AFFIDAVIT OF CERTIFIED PUBLIC ACCOUNTANT SUBMITTED TO THE NEVADA STATE CONTRACTORS BOARD AS PROOF OF CONTRACTOR'S COMPLIANCE WITH THE PROVISIONS OF NRS 338.147 AND NRS 338.1389. IN ACCORDANCE WITH THE PROVISIONS OF NRS 338.147(3), THE ABOVE-NAMED GENERAL CONTRACTOR AND A CERTIFIED PUBLIC ACCOUNTANT HAVE SUBMITTED FULLY EXECUTED AND NOTARIZED SWORN AFFIDAVITS AS PROOF OF PREFERENTIAL BIDDER STATUS, UNDER PENALTY OF PERJURY, CERTIFYING THAT THE GENERAL CONTRACTOR IS QUALIFIED TO RECEIVE A PREFERENCE IN BIDDING AS SET FORTH IN NRS 338.147 AND NRS NEVADA STATE CONTRACTORS' LICENSE STATUS: ACTIVE, IS HEREBY ISSUED THIS NUMBER: <u>31456A</u> ORIGINAL ISSUE DATE: <u>04/02/2013</u> BUSINESS TYPE: <u>CORPORATION</u> CLASSIFICATION: <u>A-</u> GENEY GASSIOT INC. (HEREIN THE "GENERAL CONTRACTOR") GENERAL ENGINEERING MONETARY LICENSE LIMIT: UNLIMITED 338,1389 AND OTHER MATTERS RELATING THERETO. APRIL 30, 2014, UNLESS THIS CERTIFICATE OF ELIGIBILITY IS ISSUED ON MAY 29, 2013 AND EXPIRES ON SOONER REVOKED OR SUSPENDED BY THE NEVADA STATE CONTRACTORS BOARD.



HWOOL WINGLES LICENSING ADMINISTRATOR FOR MARGI A. GREIN, EXECUTIVE OFFICER

338.147 and NRS 338.1389. The above-named General Contractor shall bear the responsibility to validity of the information contained in the Contractors Statement of Compliance or the Affidavit of Certified Public Accountant as Proof of Contractors Compliance with the Provisions of NRS The Nevada State Contractors Board assumes no liability or responsibility for the accuracy or ascertain the accuracy and validity of the affidavits provided to support the issuance of this certificate

BP.23 ACKNOWLEDGMEN	FAND EXECUTION:
STATE OF Nevada	') ss
COUNTY OF Washoe	
includes, but is not limited to the Coordination, Instructions to Bidd Sample Contract, Sample Perfor Special Conditions, Standard Sp Report (if any), Contract Drawing conditions, and requirements the materials except those specified "Wastewater Reclamation Plantogether with incidental items need to be specified."	(Name of party signing this Bid Proposal), do depose and say: That ent of the Bidder; and that I have read and agree to abide by this Bid which following documents: Notice to Contractors, Table of Contents, Project ders, Bid Bond, Proposal Summary, Contract Award Instructions and Information, mance Bond, Sample Labor and Material Payment Bond, General Conditions, ecifications, Prevailing Wage Rates, Technical Specifications, Geotechnical is, Permits (if any), and any addenda issued and understands the terms, reof; that if his/her bid is accepted that he/she agrees to furnish and deliver all to be furnished by the City (Owner) and to do and perform all work for the tigester Rehabilitation Project — Phase I Rebid", contract number 1213-180, cessary to complete the work to be constructed in accordance with the Contract and Specifications annexed hereto.
BIDDER:	Michael Geney
PRINTED NAME OF BIL	DDER:
TITLE: President	•
FIRM: Geney/Gass	
Address:	. Fourth Street
City, State, Zip: Rer	no, Nevada 89523
Telephone:	747.2200
Fax:774.74	7.2227
E-mail Address:	geney@geneygassiot.com
Mila	- Jan
(Signatu 6/24/2013	re of Bidder)
DATED:	
Signed and sworn (or affirmed) b	efore me on this, 2013, by
Jeneen Hylange	1
(Signature of Notary)	(Notary Stamp)
END OF BID PROPOSAL	DENEEN HYBARGER Notary Public - State of Nevada Appointment Recorded in Washoe County No: 06-105241-2 - Expires May 11, 2014

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