l .	DBOND			
KNOW ALL MEN BY THESE PRESENTS, that I/We Gen				
as Principal, hereinafter called Contractor, and United Fire & Casualty Company				
a corporation duly organized under the laws of the State of Iowa , as Surety, hereinafter called the Surety, are held and firmly bound unto Carson City, Nevada a consolidated municipality of the State of Nevada, hereinafter called City, for the sum of \$				
(state sum in words) five percent of total bid amou	unt			
for the payment whereof Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.				
WHEREAS, the Principal has submitted a bid, identified Facility".	WHEREAS, the Principal has submitted a bid, identified as BID # 1415-143 and titled "Carson City Animal Services Facility".			
good and sufficient surety for the faithful performance of surnished in the prosecution thereof, or in the event of the fabonds, if the Principal shall pay to the City the difference in said bid and such larger amount for which the City may in a	rincipal and the Principal shall enter into a contract with the City in or bonds as may be specified in the bidding or Bid Documents with such Contract and for the prompt payment of labor and material illure of the Principal to enter such Contract and give such bond or not to exceed the penalty hereof between the amount specified in good faith contract with another party to perform work covered by a the Invitation for Bids then this obligation shall be null and void,			
	Executed on this 12th day of August 2015			
	Signature of Principal Walance			
	Title: MOSI DON'T			
(Seal)	Firm: Geney/Gassiot, Inc.			
	Address: 5521 W. Fourth Street			
Superior State Sta	D 111/20500			
NOTARY PUBLIC	8			
STATE OF NEVADA No. 12-6575-2 My Appt. Exp. Dec. 5, 20	Written Name of Principal:			
(NO. 12-65/3-2				
	Signature of Notary:			
Subscribed and sworn before me thisday (printed name of notary)day wheeler	Notice Public for the Chate of			
Claims Under this Bond May be Addressed to:	Notary Public for the State of Newsda Resident Agent Information			
·	Complete for out of state bonding companies			
Name of Surety United Fire & Casualty Company	Name of Local Agent Pinnacle Surety & Insurance Servi			
Address P.O. Box 73909	Address 151 Kalmus Dr., Ste. A201			
City Cedar Rapids	City Costa Mesa			
State/Zip Code A 52407-3909	State/Zip Code CA 92626			
Name Stephanie Hoang	Agent's Name Stephanie Hoang			
Title Attorney-in-Fact	Agent's Title General Manager			
Phone (319)399-5700	Agents Phone (714)546-5100			
Surety's Acknowledgement	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
See attached	ill be cocented Cureties must			
NOTICE: No substitution or revision to this bond form wo	n the State of Nevada. Certified copy of Power of Attorney			
nust be attached.	or morada. Continua copy of 1 ower of Attorney			

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE 1189

A notary public or other officer com document to which this certificate is			
State of California)		
County of Orange)		
alalie	ore me,	V. Copeland	, Notary Public,
personally appeared		Stephanie Hoang	
· · · · · · · · · · · · · · · · · · ·	Name(s)	of Signer(s)	
who proved to me on the basis of sa within instrument and acknowledge capacity(ies), and that by his/her/th which the person(s) acted, executed to	ged to me that eir signature(s) o	he/she/they executed the same on the instrument the person(s),	e in his/her/their authorized or the entity upon behalf of
V. COPELAND Commission # 2046 Notary Public - Califo Orange County My Comm. Expires Oct 24	rnia 🤻	laws of the State of C paragraph is true and cor WITNESS my hand and Signature:	//
	s not required by lar t fraudulent and rea	PTIONALw, it may prove valuable to persons attachment of this form to another do	relying on the document
Type or Title of Document:			
Document Date:		Number of Pages:	
Signer(s) Other Than Named Above:			
Capacity(ies) Claimed by Signer(s)		Capacity(ies) Claimed I	oy Signer(s)
Signer's Name: Stephanie Hoang		Signer's Name:	
☐ Individual		☐ Individual	
☐ Corporate Officer – Title(s):		☐ Corporate Officer – 7	Γitle(s):
☐ Partner: ☐Limited ☐ General		☐ Partner: ☐Limited [
Attorney in Fact		☐ Attorney in Fact	
☐ Trustee		☐ Trustee	
☐ Guardian or Conservator		☐ Guardian or Conserv	ator
Other:			
Signer Is Representing:			



UNITED FIRE & CASUALTY COMPANY, CEDAR RAPIDS, IA UNITED FIRE & INDEMNITY COMPANY, WEBSTER, TX FINANCIAL PACIFIC INSURANCE COMPANY, ROCKLIN, CA CERTIFIED COPY OF POWER OF ATTORNEY

(original on file at Home Office of Company - See Certification)

Inquiries: Surety Department 118 Second Ave SE Cedar Rapids, IA 52401

KNOW ALL PERSONS BY THESE PRESENTS, That UNITED FIRE & CASUALTY COMPANY, a corporation duly organized and existing under the laws of the State of lows; UNITED FIRE & INDEMNITY COMPANY, a corporation duly organized and existing under the laws of the State of Texas; and FINANCIAL PACIFIC INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of California (herein collectively called the Companies), and having their corporate headquarters in Cedar Rapids, State of lowa, does make, constitute and appoint JENNIFER GRENROOD OF MERIDIAN, ID; OR ERIC LOWEY, OR MARK RICHARDSON, OR STEPHANIE HOANG, OR SHAWN BLUME, KEVIN CATHCART, ALL INDIVIDUALLY OF COSTA MESA CA

their true and lawful Attorney(s)-in-Fact with power and authority hereby conferred to sign, seal and execute in its behalf all lawful bonds, undertakings and other obligatory instruments of similar nature provided that no single obligation shall exceed \$50,000,000.00 and to bind the Companies thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Companies and all of the acts of said Attorney, pursuant to the authority hereby given and hereby ratified and confirmed.

The Authority hereby granted is continuous and shall remain in full force and effect until revoked by UNITED FIRE & CASUALTY COMPANY, UNITED FIRE & INDEMNITY COMPANY, AND FINANCIAL PACIFIC INSURANCE COMPANY

This Power of Attorney is made and executed pursuant to and by authority of the following bylaw duly adopted on May 15, 2013, by the Boards of Directors of UNITED FIRE & CASUALTY COMPANY, UNITED FIRE & INDEMNITY COMPANY, and FINANCIAL PACIFIC INSURANCE COMPANY. "Article VI - Surety Bonds and Undertakings"

Section 2. Appointment of Attorney-in-Fact. "The President or any Vice President, or any other officer of the Companies may, from time to time, appoint by written certificates attorneys-in-fact to act in behalf of the Companies in the execution of policies of insurance, bonds, undertakings and other obligatory instruments of like nature. The signature of any officer authorized hereby, and the Corporate seal, may be affixed by facsimile to any power of attorney or special power of attorney or certification of either authorized hereby; such signature and seal, when so used, being adopted by the Companies as the original signature of such officer and the original seal of the Companies, to be valid and binding upon the Companies with the same force and effect as though manually affixed. Such attorneys-in-fact, subject to the limitations set forth in their respective certificates of authority shall have full power to bind the Companies by their signature and execution of any such instruments and to attach the seal of the Companies thereto. The President or any Vice President, the Board of Directors or any other officer of the Companies may at any time revoke all power and authority previously given to any attorney-in-fact.

AASSETTIA CORPUBLIC SEAL



IN WITNESS WHEREOF, the COMPANIES have each caused these presents to be signed by its vice president and its corporate seal to be hereto affixed this 7th day of August, 2014

UNITED FIRE & CASUALTY COMPANY UNITED FIRE & INDEMNITY COMPANY FINANCIAL PACIFIC INSURANCE COMPANY

State of lowa, County of Linn, ss: On 7th day of August, 2014, before me personally came Dennis J. Richmann

to me known, who being by me duly sworn, did depose and say; that he resides in Cedar Rapids, State of Iowa, that he is a Vice President of UNITED FIRE & CASUALTY COMPANY, a Vice President of UNITED FIRE & INDEMNITY COMPANY, and a Vice President of FINANCIAL PACIFIC INSURANCE COMPANY the corporations described in and which executed the above instrument; that he knows the seal of said corporations, that the seal affixed to the said instrument is such corporate seal, that it was so affixed pursuant to authority given by the Board of Directors of said corporations and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporations.

Mary A. Bertsch lowa Notarial Seal Commission number 713273 My Commission Expires 10/26/2016

WILY PR

Mary A Bertoch

My commission expires: 10/26/2016

Vice President

1. David A. Lange, Secretary of UNITED FIRE & CASUALTY COMPANY and Assistant Secretary of UNITED FIRE & INDEMNITY COMPANY, and Assistant Secretary of FINANCIAL PACIFIC INSURANCE COMPANY, do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the bylaws and resolutions of said Corporations as set forth in said Power of Attorney, with the ORIGINALS ON FILE IN THE HOME OFFICE OF SAID CORPORATIONS, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

In testimony whereof I have hereupto subscribed my name and affixed the corporate seal of the said Corporations.

day of

HUGUST

,2015







By: Dal A Sa

Secretary, UF&C Assistant Secretary, UF&I/FPIC

STATE OF CALIFORNIA DEPARTMENT OF INSURANCE

SAN FRANCISCO

Certificate of Authority

THIS IS TO CERTIFY, That, pursuant to the Insurance Code of the State of California,

UNITED FIRE & CASUALTY COMPANY

of	CEDAR RAPID	s, IOWA		, (organized under the
laws of	AWOI		, subje	ect to its Articles	of Incorporation or
other fundam	nental organizationa	documents,	, is hereby autho	orized to transac	et within this State,
subject to all	provisions of this C	ertificate, the	; following classe	es of insurance:	FIRE, MARINE,
SURETY,	, PLATE GLASS,	LIABILITY	r, worker's	COMPENSATIO	N, COMMON
CARRIE	R LIABILITY, BU	RGLARY, S	SPRINKLER, T	EAM AND VEHI	CLE,
AUTOMOT	BILE, and MISC	LLANEOUS			
as such classe	s are now or may he	eafter be de	fined in the Insur	ance Laws of the	State of California.
This Certi	IFICATE is expressly	conditioned	upon the holder	hereof now and	l hereafter being in
full complian	ce with all, and not i	n violation o	f any, of the app	licable laws and l	lawful requirements
made under a	uthority of the laws	of the State	of California as l	ong as such laws	or requirements are
in effect and	applicable, and as s	ich laws and	requirements no	ow are, or may h	ereafter be changed
or amended.					
		In Witt	ness Whereof, e	ffective as of the	11TH day
2772 27 .		of FEB!	RUARY	, 19 81	I have hereunto set
		my hand a	and caused my of	ficial seal to be a	ffixed this. 11TH
		day of	FEBRUARY	, 19	31
					·
	/ -				ROBERT C. QUINN
		·		0	Insurance Commissioner
011.70	7.			He	mas Kerra

NOTICE:

Qualification with the Secretary of State must be accomplished as required by the California Corporations Code promptly after issuance of this Certificate of Authority. Failure to do so will be a violation of Ins. Code Sec. 701 and will be grounds for revoking this Certificate of Authority pursuant to the covenants made in the application therefor and the conditions contained herein.

By

BID # 1415-143

BID TITLE: "Carson City Animal Services Facility"

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 12.3 Addendums.

SUMMARY

BP.1	Schedule A Animal Services Facility –Total Project	Value	LS	Price	Price 200
BP.2	Total Bid Price (Schedule A)			2,641,000	2,20,00

BP.3 Total Base Schedule A Bid Price Written in Words:

Attree milion Toothudral & twenty Seven Housand waters the

BP.4 BIDDER INFORMATION:

Company Name: GRAN GASSOT MC
Federal ID No.: 94 - 274 6308
Mailing Address: 552/ W. Fould Street
City, State, Zip Code: Reno, NV 89523
Complete Telephone Number: 715. 747. 2200
Complete Fax Number: 775. 747. 2237
Fax Number including area code: 775. 747. 2227
E-mail: MGENEY & GENEY GASSIOT, COM

Contact Person / Title: WIKE GENEY, PRESIDENT
Mailing Address: 5521 W. FOURTH STEEF
City, State, Zip Code: RENO, NV 89533
Complete Telephone Number: 775. 747. 2200
Complete Fax Number: 775. 747. 2227
E-mail Address: MGENEY @ geney gassiot. com
BP.5 LICENSING INFORMATION:
Nevada State Contractor's License Number: 0031456
License Classification(s): Ba - RESIDENTIAL & SMALL COMMERCEN
Limitation(s) of License: Unlimited
Date Issued: 8 20 1990
Date of Expiration: 8 31 / 2016
Name of Licensee: DAVID MICHAEL GENEY
Carson City Business License Number: 15 - 00025067
Date Issued: 12/8/2014
Date of Expiration: 12/31/15
Name of Licensee: GENRY GASSIOT INC
BP.6 DISCLOSURE OF PRINCIPALS:
Individual and/or Partnership:
Owner 1) Name: MVHARL CARLEY
Address: 1220 GOIDSTONE RD
City, State, Zip Code: NV SIDO
Telephone Number: 775. 747. 2200
Owner 2) Name: KATHTEN GETUEN
Address: 1220 EDUSTONE RD
City, State, Zip Code: PANO NV 891008
Telephone Number: 116, 747, 2200

Other 1) Title:	
Name	
Other 2) Title:	
Name:	
Corporation:	
State in which Company is Incorporated: California	
Date Incorporated: 1981	
Name of Corporation: GENEY / GASSIOT, THE	
Mailing Address 5521 W. 4TH STREET	
City, State, Zip Code: REND, W 89523	
elephone Number: 715 · 741 · 2200	
President's Name: Hichael Geney	
/ice-President's Name: N A	
Other 1) Name & Title: KATHEEN Geney, corporate	Secretary
P.7 MANAGEMENT AND SUPERVISORY PERSONNEL:	
ersons and Positions	Years With Firm
itle 1) PROSECT MANAGER	13
ame 2) RON SHOWER	23
itle 2) PROSECT SUPERINDENT	
ame 3) Dod Uptol	2
itle 3) Prosect Superindent	

Name 4)			-		
Title 4)					
Name 5)	 				
Title 5)			_	·	
Name 6)	 		· · · · · · · · · · · · · · · · · · ·		

Title 6)

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

BP.8 <u>REFERENCES:</u>

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):	
	Contract Person: Pikk MillONN	
	Mailing Address: 1012 Pine Ave	
L	City, State, Zip Code: TRICKE, CA 9[0][0]	
L	Complete Telephone Number: 530.562.6443	
	E-Mail Address: VMCLOUN @ TFHD, COM	
L	Project Title: CENTRAL ENERGY PLANT WARAGE PENTANT	7
	Amount of Contract: \$806,292	,
	Scope of Work: POIDCATION OF WHILTY STINE & THEASTERNING	
	Williams two cooling towers 4 mobiles tousings	
	Company Name 2):	
	Contract Person: RCK COOLEY	
	Mailing Address: 305 Bull WAU	
	City, State, Zip Code: CARSON Gty, NV 8970/	
	Complete Telephone Number: 775 877 2355 x 7302	
	E-Mail Address: PLOOLTY C CARSON . ORET	
4	Project Title: WATEWATER RELAMATION PLANT DIQUESTEE	
ļ	Amount of Contract: 4 1,000,005	
	Scope of Work: Ditable CHEANULE PREPERATION, DEMO	
	OF PIPINETAND DOME, REPAIR CONCRETE MASONEU	
	WHET WORK.	
ĺ		

Company Name 3):
Contract Person: BPAN BYRD.
Mailing Address: 750 E. WULLAMS
City, State, Zip Code: FALIDAJ NV
Complete Telephone Number: 775.423.7415
E-Mail Address: DYRDb & CHURCHUL K. 12. NV. US
Project Title: EL BEST ELEMENTARY
Amount of Contract \$ 969, 099
Scope of Work: EXPANSION & KENDVATION
Company Name 4):
Contract Person:
Mailing Address:
City, State, Zip Code:
Complete Telephone Number:
E-Mail Address:
Project Title:
Amount of Contract:
Scope of Work:

BP. 9 CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS PRIMARY COVERED TRANSACTIONS

- 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.

Frankaansa harringi attau	ar explanation to this big.
Mechano Jan	PRESIDENT
Signature of Authorized Certifying Official	Title
MICHAEL GENER	8.11.15
Printed Name	Date
I am unable to certify to the above statement. M	ly explanation is attached.
Signature	Date
BIDDER'S SAFETY INFORMATION	

Bidder's Safety Factors:

Year	"E-Mod" Factor ¹	OSHA Incident Rate ²
2014	.91	0
2013	.92	0

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.10 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 NRS 338.141 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).

separate page).
Name of Subcontractor Address SENEY GASSIOT 5521 W. FOURTH STREET, REND. NV 89523
Phone Nevada Contractor License # Limit of License Unit of License Unit of License
Description of work Superevision AND ADMINISTRATION
Name of Subcontractor Address W. Fourt & Peno W 81122
Phone 747.200 Nevada Contractor License # Limit of License Unit of License
Description of work TRAMWH7
Name of Subcontractor Address Deax 408 Watton CA 96118
Finance 993 · 420 Nevada Contractor License # Limit of License 600,000
Description of work Description of work
Name of Suppontractor Address 2578 S. Cuppy ST. Chen City N 8970
Nevada Contractor License # Limit of License 600,000
Description of work ###
Name of Subcontractor Address 3000 Argoot PD CAPSON City NV 811
Phone Winds Nevada Contractor License # Limit of License DOD, DOD
Description of work HERRICA

SUBCONTRACTORS

BP.10 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 NRS 338.141 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).

Name of Subspiritractor	Address 2040 FADW	District &D FEBRULY NV 894/08
MG. W. 1534	Nevada Contractor License #	Limit of License
Description of work	ARTHWORK	
Name of Subcontractor	Address W 4710 PATDOL	PD McCletten CA 95652
916.640.0123	Nevada Contractor License #	Limit of License 3,000,000
Description of work	200Fint	
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		

SUBCONTRACTORS

BP.10 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 NRS 338.141 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).

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		

SUBCONTRACTORS

BP.11 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 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		

SUBCONTRACTORS

BP. 12 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. 13

WORKERS EMPLOYED REPORT INSTRUCTIONS FOR COMPLETION

Effective July 1, 2013, contractors who receive a preference in bidding on a public work must submit an affidavit to the public body certifying that 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 Department 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.
- Submit Identification log monthly listing all employees that worked for that month. The Identification log should correspo9nd with the certified payroll reports. If employees are not working in a given month then they should not be listed on said report.

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 #
		Date:
Address at which payroll red	cords are maintained:	
Contact Dayson and Dhana	Ni	
Contact Person and Phone	Number:	,
Employee Name	Driver License Number or ID	Issuing State or Jurisdiction
	Card Number	
	-	

Local Preference Affidavit

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

I, With the contractor of the Contractor of the Contractor of the contract of the contract. Several of the contract of the con
1. The Contractor shall ensure that 50 percent of the workers employed on the job possess a Nevada driver's license or identification card;
2. The Contractor shall ensure all vehicles used primarily for the public work will be registered and (where applicable) partially apportioned to Nevada;
3. The Contractor shall ensure at least 50 percent of the design professionals who work on the project (including sub-contractors) have a Nevada driver's license or identification card.
4. The Contractor shall ensure payroll records related to this project are maintained and available within the State of Nevada.
*Note that specific sections of NRS 338 detailing the continued procedures associated with the use of the "bidder's preference" have been amended by the passage of Assembly Bill 172 effective 7/1/13, requiring this affidavit and subsequent record keeping and reporting by the General Contractor using the preference program and awarded this project. These requirements are not applicable to Contractors who do not use the "Bidder's Preference" eligibility certificate in their bid.
•
By: Mythel Galley Title: Persident
By: Wyther Carry Title: Proposition Date: 26/26/15
0/2/11

BP.14 ACKNOWLEDGMENT AND EXECUTION:
STATE OF Nevada)
COUNTY OF WORK) SS
(Name of party signing this Bid Proposal), do depose and say: That I am the Bidder or authorized agent of the Bidder; and that I have read and agree to abide by this Bid which includes, but is not limited to the following documents: Notice to Contractors, Table of Contents, Project Coordination, Instructions to Bidders, Bid Bond, Proposal Summary, Contract Award Instructions and Information, Sample Contract, Sample Performance Bond, Sample Labor and Material Payment Bond, General Conditions, Special Conditions, Standard Specifications, Prevailing Wage Rates, Technical Specifications, Geotechnical Report (if any), Contract Drawings, Permits (if any), and any addenda issued and understands the terms, conditions, and requirements thereof; that if his/her bid is accepted that he/she agrees to furnish and deliver all materials except those specified to be furnished by the City (Owner) and to do and perform all work for the "Carson City Animal Services Facility", contract number 1415-143, together with incidental items necessary to complete the work to be constructed in accordance with the Contract Documents, Contract Drawings, and Specifications annexed hereto.
BIDDER:
PRINTED NAME OF BIDDER: MICHAEL CHEVEN
TITLE: + PAGE DEAT
FIRM: CHONEY LAKESOT, INC
Address: 552 W. FOURTH SPEET
City, State, Zip: PEND W 817723
Telephone: 777. 747. 2200
Fax: 747. 2227
E-mail Address: METENTY & EXTURITY GASSIOT. COM
MacQuest
(Signature of Bidder)
DATED: 2/26/15
Signed and sworn (or affirmed) before me on this day of houst , 2015, by
BARALLE STATE OF THE STATE OF T
(Signature of Notary)
(Notary Stamp)
END OF BID PROPOSAL B. CHEEK Notary Public - State of Nevada

BP - 15

B. CHEEK

Notary Public - State of Nevada

County of Washoe

APPT. NO. 15-1869-2

My App. Expires June 24, 2019

Carson City Animal Shelter

Bid Proposal

I, Michael Geney, President of Geney/Gassiot, Inc. hereby authorize Tiffany Hughes to act as an agent on behalf of Geney/Gassiot, Inc. and is authorized to make interlineation or alterations to the Bid Proposal Form and Subcontractor Listing on the day of the bid.

Michael Geney, President

Geney/Gassiot

Tiffan Hughes, Acting Agent

Geney/Gassiot, Inc.

Dated

Dated

Carson City Animal Shelter

Bid Proposal

I, Michael Geney, President of Geney/Gassiot, Inc. hereby authorize Kathleen Geney to act as an agent on behalf of Geney/Gassiot, Inc. and is authorized to make interlineation or alterations to the Bid Proposal Form and Subcontractor Listing on the day of the bid.

Michael Geney, President

Geney/Gassiot

Dated

Kathleen Geney, Acting Agent

Geney/Gassiot, Inc.

Dated



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-07-10-30-0331

SWORN AFFIDAVITS AS PROOF OF PREFERENTIAL BIDDER STATUS, UNDER PENALTY OF PERJURY, CERTIFYING GENEY GASSIOT INC. (HEREIN THE "GENERAL CONTRACTOR") NEVADA STATE CONTRACTORS' LICENSE HEREBY ISSUED THIS CERTIFICATE BY THE NEVADA STATE CONTRACTORS' BOARD, BASED UPON THE CONTRACTOR AND A CERTIFIED PUBLIC ACCOUNTANT HAVE SUBMITTED FULLY EXECUTED AND NOTARIZED STATUS: ACTIVE, IS 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 IN ACCORDANCE WITH THE PROVISIONS OF NRS 338.147(3), THE ABOVE-NAMED GENERAL THAT THE GENERAL CONTRACTOR IS QUALIFIED TO RECEIVE A PREFERENCE IN BIDDING AS SET FORTH IN NRS NUMBER: 31456 ORIGINAL ISSUE DATE: 08/20/1990 BUSINESS TYPE: CORPORATION CLASSIFICATION: B/2 RESIDENTIAL & SMALL COMMERCIAL MONETARY LICENSE LIMIT: UNLIMITED 338.147 AND NRS 338.1389 AND OTHER MATTERS RELATING THERETO. NRS 338,1389.

THIS CERTIFICATE OF ELIGIBILITY IS ISSUED ON SEPTEMBER 1, 2014 AND EXPIRES ON AUGUST 31, 2015, UNLESS SOONER REVOKED OR SUSPENDED BY THE NEVADA STATE CONTRACTORS BOARD



MANCY MATHIAS, LICENSING ADMINISTRATOR DATE 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