11/14/03

Taxpayer Identification# 300-196-660/000

Dear Business Representative:

Congratulations! You are now registered with the New Jersey Division of Revenue.

Use the Taxpayer Identification Number listed above on all correspondence with the Divisions of Revenue and Taxation, as well as with the Department of Labor (if the business is subject to unemployment withholdings). Your tax returns and payments will be filed under this number. and you will be able to access information about your account by referencing it.

Additionally, please note that State law (Public Law 2001, c.134) requires all contractors and subcontractors with State agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.

We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

If you have any questions or require more information, feel free to call our Registration Hotline at (609) 292-1730.

I wish you continued success in your business endeavors.

Sincerely,

John E. Tulk. Acting Director

STATE OF NEW JERSEY **BUSINESS REGISTRATION CERTIFICATE** FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS

DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252

TAXPAYER NAME:

SIGNAL ELECTRIC CORPORATION

TAXPAYER IDENTIFICATION#:

300-196-660/000

ADDRESS:

27 CANTERBURY RD E. BRUNSWICK NJ 08816

EFFECTIVE DATE:

08/04/02

FORM-BRC(08-01)

TRADE NAME:

SEQUENCE NUMBER:

0926769

ISSUANCE DATE:

11/14/03

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

Certification 40555

CERTIFICATE OF EMPLOYEE INFORMATION REPORT

RENEWAL

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of 15-AUG-2014 to 15-AUG-2021

SIGNAL ELECTRIC CORP.
27 CANTERBURT ROAD
EAST BRUNSWICK NJ 08816

Andrew P. Sidamon-Eristoff

State Treasurer

(REVISED 4/10)

EXHIBIT A

RETURN WITH BID

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) N.J.A.C. 17:27 GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

ESCNJ 16/17-55

March 15, 2017 @ 12:00 p.m.

JOC: Electrical - Repair & Maintenance

NJ State Approved Cooperative Pricing System #65MCESCCPS

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

Signature	G/A				
Name	OLEO	PEREL			
Title	Pro	rsident			
Company	Title:	Signal	Electro	Cocp	

ESCNJ 16/17-55 JOC: Electrical - Repair & Maintenance

Educational Services Commission of New Jersey Business Office

1660 Stelton Road Piscataway, New Jersey 08854

Chapter 271 **Political Contribution Disclosure Form** (Contracts that Exceed \$17,500.00) Ref. N.J.S.A. 52:34-25

The undersigned,	being authorized and know		ces, does hereby certify that ss Entity) has made the following
			ate or any political committee as
	Re	eportable Contributions	
<u>Date of</u> <u>Contribution</u>	Amount of Contribution	Name of Recipient Elected Official/ Committee/Candidate	Name of Contributor
The Business Ent	ity may attach additional pa	ages if needed.	
No Reportabl	le Contributions (Please cl	neck (✓) if applicable.)	
I certify that contributions to a 20.26.	pignal Electrical political	Cocp (Buston and Conditions of	siness Entity) made no reportable ommittee as defined in N.J.S.A. 19:44-
Certification			
<i>J</i> /	-		Public law 2005 – Chapter 271.
Name of Authoriz	zed Agent OLEG	PEREL	
Signature		PERELTitle	President
Danis and Entite	Signal F	Rection Copp	

ESCNJ 16/17-55 JOC: Electrical - Repair & Maintenance Page 55 of 79

To be completed and signed below.

Return with bid.

STATEMENT OF OWNERSHIP (OWNERSHIP DISCLOSURE CERTIFICATION)

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This Statement Shall Be Included with All Bid and Proposal Submissions

Name of Business:	Signal	Electro	c Ce	19Ch
Address of Business:	27 Cant	erbury	RS.	E. Breienswick, N. O88H
Name of person comp	leting this form: 02	LEO PE	FREL	

N.J.S.A. 52:25-24.2:

"No corporation, partnership, or limited liability company shall be awarded any contract nor shall any agreement be entered into for the performance of any work or the furnishing of any materials or supplies, unless prior to the receipt of the bid or proposal, or accompanying the bid or proposal of said corporation, said partnership, or said limited liability company there is submitted a statement setting forth the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be.

If one or more such stockholder or partner or member is itself a corporation or partnership or limited liability company, the stockholders holding 10 percent or more of that corporation's stock, or the individual partners owning 10 percent or greater interest in that partnership, or the members owning 10 percent or greater interest in that limited liability company, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member, exceeding the 10 percent ownership criteria established in this act, has been listed.

To comply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest."

The Attorney General has advised that the provisions of N.J.S.A. 52:25-24.2, which refer to corporations and partnerships, apply to limited partnerships, limited liability partnerships, and Subchapter S corporations.

ESCNJ 16/17-55 March 15, 2017 @ 12:00 p.m.

JOC: Electrical - Repair & Maintenance

NJ State Approved Cooperative Pricing System #65MCESCCPS This Ownership Disclosure Certification form shall be completed, signed and notarized. Failure of the bidder/proposer to submit the required information is cause for automatic rejection of the bid or proposal

Part I	
Check the box that represents the type of business organ	ization:
Sole Proprietorship (skip Parts II and III, sign and nota	rize at the end)
Non-Profit Corporation (skip Parts II and III, sign and n	otarize at the end)
Partnership Limited Partnership	Limited Liability Partnership
Limited Liability Company	
For-profit Corporation (including Subchapters C and S	or Professional Corporation)
Other (be specific):	
Part II	
who own 10 percent or more of its stock, of any	and addresses of all stockholders in the corporation class, or of all individual partners in the partnership n, or of all members in the limited liability company n, as the case may be.
or no individual partner in the partnership owns	ion owns 10 percent or more of its stock, of any class, a 10 percent or greater interest therein, or that no 10 percent or greater interest therein, as the case ma
Sign and notarize the form below, and, if necessary, coadditional sheets if more space is needed):	omplete the list below. (Please attach
Name: <u>OLEG PEREL</u> Address: <u>27 Canterbury RD</u>	Name:
E. Brunswick, NV 08816	
Name:	Name:
Address:	Address:

ESCNJ 16/17-55 JOC: Electrical - Repair & Maintenance March 15, 2017 @ 12:00 p.m.

NI State Approved Cooperative Pricing System #65MCESCCPS

Part II	Any Direct or Indirect Parent Entity Which is Publicly Traded:
the na percer Securi or gre federa	omply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit ame and address of each publicly traded entity and the name and address of each person that holds a 10 nt or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal ties and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent ater beneficial interest, also shall submit links to the websites containing the last annual filings with the al Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings ontain the information on each person that holds a 10 percent or greater beneficial interest."
	Pages attached with name and address of each publicly traded entity as well as the name and address of each person that holds a 10 percent or greater beneficial interest.
	OR
	Submit here the links to the Websites (URLs) containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent.

A	BA E	Sec.
43	L/I	1 1

Submit here the relevant page numbers of the filings containing the information on
each person holding a 10 percent or greater beneficial interest.

Subscribed and sworn before me this $\underline{10}$ day of march ,2017.

(Notary Public) There

My Commission expires:

TATIANA DERNOVAYA NOTARY PUBLIC OF NEW JERSEY My Commission Expires 8/13/2019

(Affiant)

(Print name of affiant and title if applicable)

(Corporate Seal if a Corporation)

ESCNJ 16/17-55 JOC: Electrical - Repair & Maintenance

Page 61 of 79

STATE OF NEW JERSEY - DIVISION OF PURCHASE AND PROPERTY DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

PART 1: CERTIFICATION

BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX. FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE	
Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter in contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in invess in Iran. The Chapter 25 list is found on the Division's website at http://www.state.ni.us/treasury/ourchase/pdf/Chapter/251 , must review this list prior to completing the below certification. Failure to complete the certification will render a bidd non-responsive. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriately law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declarity default and seeking debarment or suspension of the party.	of its parents, ment activities st.pdf. Bidders er's proposal and provided
PLEASE CHECK THE APPROPRIATE BOX:	
I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidd subsidiaries, or affiliates is <u>listed</u> on the N.J. Department of the Treasury's list of entities determined to be engage activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 complete the Certification below.	d in prohibited am an officer
<u>QR</u>	
I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliate the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in and sign and complete the Certification below. Failure to provide such will result in the proposal being renesponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.	Part 2 below
PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN I You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes beloe EACH BOX WILL PROMPT YOU TO PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE F THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, CLICK THE "ADD AN ACTIVITIES ENTRY" BUTTON.	varents, w. ROVIDE
Name Relationship to Bidder/Offeror	Delete
	-
Description of Activities	-
	-
Duration of Engagement Anticipated Cessation Date	1 1
Bidder/Offeror Contact Name Contact Phone Number	-
ADD AN ADDITIONAL ACTIVITIES ENTRY	1 1
Certification: I, being duly swom upon my cath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge an	ationalization reprint
	true and complete I
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the	and that I am under a
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecu	and that I am under a information contained ion under the law and
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecuthat it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and uner	and that I am under a information contained ion under the law and
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecu	and that I am under a information contained ion under the law and
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecuthat it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and uner	and that I am under a information contained ion under the law and
acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecuthat it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and uner OLEG PEREL	and that I am under a information contained ion under the law and lorceable.

ESCNJ 16/17-55 JOC: Electrical - Repair & Maintenance

Form **W-9** (Rev. November 2017)

Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line;	do not leave this line blank.							
	Signal Electric Corp.								
	2 Business name/disregarded entity name, if different from above								
age 3.	following seven boxes.				certa	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
e. Is on	Individual/sole proprietor or S Corporation S Corporation Partnership Trust/estate single-member LLC					Exempt payee code (if any)			
tion in	Limited liability company. Enter the tax classification (C=C corporation,	S=S corporation, P=Partners	ship) ►						
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not c LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LL another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LL is disregarded from the owner should check the appropriate box for the tax classification of its owner.				and the and				
ciff	Other (see instructions)				(Applie	s to accou	nts maintain	ed outsi	de the U.S.)
Spe	5 Address (number, street, and apt. or suite no.) See instructions.		Requester'	s name a	nd ac	idress (c	ptional)		
See	3005 Hadley Road, Unit # 1								
٠,	6 City, state, and ZIP code								
	South Plainfield, New Jersey 07080								
	7 List account number(s) here (optional)								
Par	Taxpayer Identification Number (TIN)								
Enter	our TIN in the appropriate box. The TIN provided must match the par	ne given on line 1 to avoi	d So	cial secu	rity n	umber			
backu	D withholding. For individuals, this is generally your social security nur	nher (SSN) However for	a] [Г Г	$\overline{\top}$	r i
entities	nt alien, sole proprietor, or disregarded entity, see the instructions for s, it is your employer identification number (EIN). If you do not have a	Part I, later. For other number, see <i>How to get :</i>	a		-		-		
IIN, Ia	ter.	-	or	· · · · · · · · · · · · · · · · · · ·					
Note: Number	If the account is in more than one name, see the instructions for line 1 or To Give the Requester for guidelines on whose number to enter.	. Also see What Name ar	nd Em	ployer ic	dentification number				
	or of the me medicate, for guidelines on whose number to enter.		3	0 -	0	1 9	6 6	6	0
Part	II Certification								
	penalties of perjury, I certify that:	· · · · · · · · · · · · · · · · · · ·							
Z. Fam Serv	number shown on this form is my correct taxpayer identification numl not subject to backup withholding because: (a) I am exempt from bac ice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and	ckup withholding or /h) L	have not k	2000 201	ifical	hu tha		Reve	enue at I am
	a U.S. citizen or other U.S. person (defined below); and								
	FATCA code(s) entered on this form (if any) indicating that I am exemp	ot from EATCA reporting	in named						
Certific	ation instructions. You must cross out item 2 above if you have been or	atified by the IRS that you	ara aurrani	Hua, bia.	et to i	oackup	withhold	ding t	ecause
other th	re failed to report all interest and dividends on your tax return. For real estation or abandonment of secured property, cancellation of debt, contribution in the certification, but interest and dividends, you are not required to sign the certification, but in the certification is a sign to be continued to sign the certification.	ons to an individual retiren	aant arrana	nomant ()	CAA)	~~~ ~~~	II		ents ter.
Sign Here	Signature of U.S. person ▶	Da	te ►	08	2-	7 2	2018	8	
Gen	eral Instructions	• Form 1099-DIV (divid	lends incl			rom etc	0100		
	references are to the Internal Revenue Code unless otherwise	tunds)							
	developments. For the latest information about developments	 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) 							
related	to Form W-9 and its instructions, such as legislation enacted ey were published, go to www.irs.gov/FormW9.	• Form 1099-B (stock of transactions by brokers	s)						
Purp	ose of Form	 Form 1099-S (procee Form 1099-K (merch; 	eds from re	eal estate	e trar	saction	is)		
An indivinforma	ridual or entity (Form W-9 requester) who is required to file an tion return with the IRS must obtain your correct taxpayer	 Form 1099-K (merchant card and third party network transactions) Form 1098 (nome mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 				ns) est),			
(2214), 1	ation number (TIN) which may be your social security number ndividual taxpayer identification number (ITIN), adoption	• Form 1099-C (cancel							
(EIN), to	er identification number (ATIN), or employer identification number or report on an information return the amount paid to you, or other	• Form 1099-A (acquisit Use Form W-9 only if	you are a	U.S. pe					t
amount	reportable on an information return. Examples of information	allen), to provide your o	correct TIN	l.					
• Form	ums include, but are not limited to, the following. If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.								



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/4/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endors

certificate floider in fled of Suc	in endorsement(s).				
PRODUCER		contact NAME: Danielle Spann			
Dale Group PO Box 6		PHONE (A/C, No, Ext):973-377-7000	FAX (A/C, No):973-377-4614		
Florham Park NJ 07932		E-MAIL ADDRESS:danielles@dalegroup.com			
		INSURER(S) AFFORDING COVERAGE	NAIC#		
		INSURER A :Everest Indemnity Ins Co.	10851		
INSURED	SIGNA-3	ınsurer в :American States Ins Co.	19704		
Signal Electric Corp.		INSURER C : Guard Insurance Group	31470		
27 Canterbury Road East Brunswick NJ 08816		INSURER D :			
Edge Branswick 140 000 10		INSURER E :			
		INSURER F:			
COVERAGES	CERTIFICATE NUMBER: 1020191616	REVISION NUI	WBER:		

COVERAGES	CERTIFICATE NUMBER: 1020191616	
-----------	--------------------------------	--

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

	INSR ADDLISUBR POLICY EFF POLICY EXP						
INSR LTR	TYPE OF INSURANCE	INSR WV		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	
Α	GENERAL LIABILITY		51GL006984161	10/19/2016	10/19/2017	EACH OCCURRENCE DAMAGE TO RENTED	\$1,000,000
	COMMERCIAL GENERAL LIABILITY					PREMISES (Ea occurrence)	\$50,000
	CLAIMS-MADE X OCCUR					MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$2,000,000
	POLICY PRO- JECT LOC						\$
В	AUTOMOBILE LIABILITY		01Cl3872507	8/31/2016	8/31/2017	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
							\$
Α	X UMBRELLA LIAB X OCCUR		51CC001249161	10/19/2016	10/19/2017	EACH OCCURRENCE	\$4,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$4,000,000
	DED X RETENTION \$10,000						\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		SIWC609425	8/31/2016	8/31/2017	X WC STATU- OTH- TORY LIMITS ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT	\$1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$1,000,000
						E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Certificate holder is added as an Additional Insured to the General Liability as required by written contract but, only as respects to all covered operations of the Named Insured performed on behalf of the Additional Insured.

CERT	IFICA	TE HO	LDER

CANCELLATION

Educational Services Commission of New Jersey 1660 Stelton Road Piscataway NJ 08854

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2010 ACORD CORPORATION. All rights reserved.

ACCEPTANCE OF BID And CONTRACT AWARD

Job Order Contracting: Electrical- Repair and Maintenance

TO BE COMPLETED BY RESPONDENT

In compliance with the Request for Bid, the undersigned warrants that I/we have examined the Instructions to Respondents, and, being familiar with all of the conditions surrounding the proposed projects, hereby offer and agree to furnish all labor, materials, and supplies incurred in compliance with all terms, conditions. specifications and amendments in the Request for Bid and any written exceptions to the bid. Signature also certifies understanding and compliance with the certification requirements of the ESCNJ's Terms and Conditions and any special Terms and Conditions if applicable. The undersigned understands that his/her competence and responsibility and that of any proposed subcontractors, time of completion, as well as other factors of interest to the ESCNJ as stated in the evaluation section will be a consideration in making the award. Your bid for contracting services is hereby accepted. As contractor, you are now bound to sell the materials and services listed by the attached bid based upon the solicitation, including all terms, conditions, specifications, amendments as set forth in the Request for Bid. As contractor you are hereby cautioned not to commence any billable work or provide any material or service under this contract until contractor receives an executed purchase order from a Co-op Member. The parties intend this contract to constitute the final and complete agreement between the ESCNJ and contractor, and no other agreements, oral or otherwise, regarding the subject matter of this contract, shall bind any of the parties hereto. No change or modification of this contract shall be valid unless it shall be in writing and signed by both parties to this contract. If any provision of this contract is deemed invalid or illegal by any appropriate court of law, the remainder of this contract shall not be affected thereby. The term of the agreement shall commence on award and continue for 12 or 24 months unless terminated, canceled or extended. By mutual written agreement, the contract may be extended as permitted by law

Company Name _	Signal	Electric	Coep	Date _	3/10/2017
Company Address	27 Can	Executed Be	City En Breek	Swick State	NV Zip Code Of8/6
Contact Person	OLEG	PERFEL		Title	President
Authorized Signat	ure (ink only)			Title	President

ACCEPTANCE OF BID AND CONTRACT AWARD BELOW TO BE COMPLETED ONLY BY ESCNJ

Awarding Agency: Educational Services Commission of New Jersey	
Agency Executive: Vatrus Branca Patrick M. Moran, SBA/BS	
Awarded this 28th day of April 2017 Contract Number ESCNJ 16/17	<u>-55</u>

ESCNJ 16/17-55 March 15, 2017 @ 12:00 p.m. JOC: Electrical - Repair & Maintenance **Page 73** of **79**