

City and Borough of Juneau Engineering Department 155 South Seward Street Juneau, Alaska 99801

Telephone: 586-0490, FAX: 586-4530

September 24, 2018

## **EMAILED (ORIGINAL MAILED)**

RE:

**Eaglecrest Snow Making Pipe Welding** 

RFQ No. E19-098

Jeff Duvernay Harri Plumbing & Heating 809 West 12th Street Juneau, AK 99801

## **NOTICE OF AWARD/NOTICE TO PROCEED**

Dear Mr. Duvernay:

This letter shall serve as formalization of the award and authorization to proceed with the Eaglecrest Snow Making Pipe Welding project, RFQ No. E19-098.

The are no subcontractors listed for this project.

You will have until November 10, 2018, to complete Phase One and Two. Phase Three Work to be complete in summer of 2019. Please coordinate your construction activities with Dave Scanlan at 790-2000 extension 221.

The Purchase Order number for this project is PO 111098, for the bid amount of \$36,500. Please reference this PO number and project name and number on all invoices.

Contractor shall be required to meet all Alaska Department of Labor and Workforce Development requirements pertaining to prevailing wages.

Sincerely.

**Greg Smith** 

**Contract Administrator** 

C: Dave Scanlan, CBJ Project Manager

**CBJ Purchasing** 

State Department of Labor, Wage and Hour Division - Bid Opening Date: 9/14/2018

**Enclosures:** 

Employment Security Tax Clearance Compliance Certificate and Release Form

## **Employment Security Tax Clearance**

Date:		<u> </u>
То:	Alaska Department of Labor Juneau Field Tax Office 907-465-2787 FAX 907-465-2374	
From:		<u> </u>
Subject:	Eaglecrest Snow Making Pipe W CBJ Contract No. RFQ No. E19-0	
Timeframe	of Contract	
Please advi	se whether or not clearance is granted	d for the following CONTRACTOR or Subcontractor:
Name of firr	n	
Address		
	nake final payment for WORK perform	urity Act, this request is for tax liability clearance and ed under the subject contract. Please send your
	iska 99801	
	arance is granted. arance is NOT granted.	
Remarks: _		
Signature		Date
Title		

## **COMPLIANCE CERTIFICATE AND RELEASE FORM**

PROJECT: Eaglecrest Snow Making Pipe Welding CONTRACT NO: RFQ E19-098

The CONTRACTOR must complete and submit this to the Contract Administrator with respect to the entire contract. Completed forms may be submitted upon completion of the Project. All requirements and submittals must be met before final payment will be made to the CONTRACTOR.

I certify that the following and any referenced attachments are true:

- All WORK has been performed, materials supplied, and requirements met in accordance with the applicable Drawings, Specifications, and Contract Documents.
- All Suppliers and Subcontractors have been paid in full with no claims for labor, materials or other services outstanding. If all Subcontractors and suppliers are not paid in full, please explain on a separate sheet.
- All employees have been paid not less than the current prevailing wage rates set by the State of Alaska (or U.S. Department of Labor, as applicable).
- All equal employment opportunity, certified payroll and other reports have been filed in accordance with the prime contract.
- ➤ The attached list of Subcontractors is complete (required from CONTRACTOR). The Contract Administrator was advised and approved of all Subcontractors before WORK was performed and has approved any substitutions of Subcontractors.
- ➤ All DBE firms listed as a precondition of the prime contract award must have performed a commercially useful function in order for the WORK to count to a DBE goal. All DBE firms performed the WORK stated and have received at least the amount claimed for credit in the Contract Documents.
- ➤ All DBE Subcontractors must attach a signed statement of the payment amount received; the nature of WORK performed, whether any balance is outstanding, and indicate that no rebates are involved.
- ➤ If the amount paid is less than the amount originally claimed for DBE credit, the CONTRACTOR has attached approval from the Contract Administrator for underutilization.

I understand it is unlawful to misrepresent information in order to receive a payment which would otherwise be withheld if these conditions were not met. I am an authorized agent of this firm and sign this freely and voluntarily. The foregoing statements are true and apply to the following project contractor.

		Capacity: CONTRACTOR	
Firm Name	_	. ,	
 Signed	Printed Name and Title	 Date	

Return completed form to: Greg Smith, Contract Administrator, City and Borough of Juneau, 155 South Seward Street, Juneau, AK 99801. Call (907) 586-0873 if we can be of further assistance or if you have any questions.