

BID DOCUMENTS CHECKLIST

The following documents are to be submitted with your bid. Place a ✓ next to each number to indicate forms are included.

1. ADDENDA ACKNOWLEDGEMENT (if applicable) FORM
2. AFFIRMATIVE ACTION LANGUAGE EXHIBIT A
3. AFFIRMATIVE ACTION QUESTIONNAIRE/PROOF
4. AMERICANS WITH DISABILITIES EXHIBIT B
5. BID DOCUMENTS CHECKLIST
6. BID PROPOSAL FORM
7. BID SECURITY (if applicable)
8. BIDDER'S COMMENT FORM
9. CERTIFICATE (CONSENT) OF SURETY
10. CONTRACTOR'S QUESTIONNAIRE/CERTIFICATION FORM
11. CONTRACTOR REGISTRATION CERTIFICATION FORM
12. CONTRACTOR'S REGISTRATION APPLICATION (IF APPLICABLE)
13. FORM W-9
14. EQUIPMENT CERTIFICATION FORM
15. NON-COLLUSION AFFIDAVIT FORM
16. POLITICAL CONTRIBUTION DISCLOSURE FORM
17. PRE-QUALIFICATION AFFIDAVIT FORM – ATTACH NOTICE OF CLASSIFICATION AND TOTAL AMOUNT OF UN-COMPLETED CONTRACTS
18. PREVAILING WAGES CERTIFICATION FORM
19. SPECIFICATIONS/SCOPE OF WORK SIGNATURE SHEET
20. STATEMENT OF OWNERSHIP FORM
21. SUBCONTRACTOR'S DISCLOSURE STATEMENT (if applicable)
22. SWORN CONTRACTOR CERTIFICATION – QUALIFICATIONS AND CREDENTIALS
23. TAXPAYER'S IDENTIFICATION NUMBER - (must be included on the bid form where indicated)
24. VENDOR'S AFFIDAVIT

The following documents are not required to be submitted with the proposal, but must be submitted prior to the contract award:

1. Proof of business registration with the state of New Jersey (NJ Business Registration Certificate)
2. Disclosure of Investment Activities with Iran
3. Certification of Federal Non Debarment

I have read the above and complied with the given instructions.

AUTHORIZED SIGNATURE: _____

TITLE: Marlee Hartline/Member

COMPANY: Marlee Contractors, LLC

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

EXHIBIT B


**AMERICANS WITH DISABILITIES ACT OF 1990
Equal Opportunity for Individuals with Disability**

The contractor and the Atlantic City Board of Education, (hereafter "owner") do hereby agree that the provisions of Title 11 of the Americans with Disabilities Act of 1990 (the "Act") (42 U.S.C. S121 01 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant there unto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

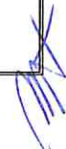
The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the *owner shall* expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Marlee Contractors, LLC		5/3/21
Company Name	Authorized Signature Marlee Hartline/Member	Date

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



BIDDER'S COMMENT FORM
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

This form is for bidder's use in offering voluntary alternates, or other comments intended to afford the Board information or opportunities to improve the quality of the project, without invalidating the bid proposal. It may **not** be used to take exception to specific conditions of the project defined in the contract documents which the bidder does not like. The bid provided must be based upon the plans and specs, and all contract conditions, as stated. If these documents or conditions contain some untenable item, or extremely expensive provision, for example, to which the bidder wishes to raise objection, this must be done at the pre-bid meeting, or in writing to the purchasing administrator through the question process outlined in the Instructions to Bidders. Such inquiries will have response issued by addendum only, and the resulting decision circulated to all bidders of record. Inquiries raised too close to the bid date will not be able to be answered.

None

Name of Company Marlee Contractors, LLC

Address 364 S. Egg Harbor Road

City, State, Zip Hammonton, NJ 08037

Name of Authorized Representative Marlee Hartline

Signature  Title Member Date 5/3/21

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



Contractor Questionnaire/Certification (pg. 1)

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

Name of Company Marlee Contractors, LLC

Street Address 364 S. Egg Harbor Road P.O. Box _____

City, State, Zip Hammonton, NJ 08037

Business Phone Number () 609-704-9040 Extension 0

Emergency Phone Number () 609-704-9040

FAX NO. () 609-704-9448 E-Mail marlee@marleecontractors.com

1. How many years have you been engaged in the contracting business under your present firm or trading name?

Answer 29

2. Have you ever failed to complete any work awarded to your company? Answer No

If yes, when, where and with whom? _____

3. Have you ever defaulted on a contract? Answer No

If yes, when, where and with whom? _____

4. Have you or other principals of your company been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in any public works projects by any federal, state or local agencies, including any "prior negative experience" disqualification pursuant to N.J.S.A. 18A:18A-4 (b) (c)?

Answer No If yes, when, where and with whom? _____

References

Architects--List names of architects that you have worked on projects within the last five (5) years:

	<u>Firm</u>	<u>Principal</u>	<u>Phone Number</u>
1.	<u>See Attached</u>	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

List name of principal bank with which your company does business:

<u>Bank</u>	<u>Officer</u>	<u>Phone Number</u>
<u>Ocean Bank</u>	<u>Kelly Facenda</u>	<u>609-567-5880</u>

Contractor Questionnaire/Certification (pg. 2)
BOILER MAINTENANCE AND REPAIRS
 Bid #22-008

School Districts--List names of school districts with which your company has completed projects similar to the one outlined in this bid:

	<u>School District</u>	<u>Official</u>	<u>Phone Number</u>
1.	<u>See Attached</u>	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Trade--List names of companies within your trade with which your company does business:

	<u>Firm</u>	<u>Principal</u>	<u>Phone Number</u>
1.	<u>See Attached</u>	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Certification

I declare and certify that I and the company, of which I am the agent, are not presently included on the following:

- New Jersey Department of Treasury – Consolidation Debarment Report
- NJ Department of Labor and Workforce Development – Prevailing Wage Debarment List
- Federal Debarred Vendor List – System for Award Management (SAM.gov)

I further declare and certify that no member of the Atlantic City Board of Education, nor any officer or employee or person whose salary is payable in whole or in part by said Board of Education is directly or indirectly interested in this bid or in the supplies, materials, equipment, work or services to which it relates, or in any portion of profits thereof. If a situation so exists where a Board member, employee, officer of the board has an interest in the bid, etc., then please attach a letter of explanation to this document, duly signed by the president of the firm or company.

Name of Company Marlee Contractors, LLC

President/Authorized Agent Marlee Hartline/Member
 (Print Name)

Signature of Authorized Agent

THIS FORM (2 Pages) MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



Marlee Contractors, LLC

**Mechanical & Electrical Maintenance Contractors
HVAC & Refrigeration, Electrical Repair & Maintenance**

To: Atlantic City BOE
1300 Atlantic Ave.
Atlantic City, NJ 08401

05/03/21

Dear Sir/Madam:

Our company has been servicing various Municipalities, School Districts, private Companies and the State of New Jersey for 29 years. We offer Heating, Ventilation, Air Conditioning, Refrigeration and Kitchen equipment services for commercial and industrial facilities. We are also a licensed electrical contractor. We specialize in multi-site facilities, and are set up for emergency response, 24 hours a day, 7 days a week.

We have a full staff of rotating on-call technicians. They are trained in multiple disciplines including Heating, Air-Conditioning and Refrigeration. Our technicians have already undergone security checks and are cleared to work at restricted facilities. We maintain a manned 24hour 7 day answering service, with a 24hour 7 day dispatcher. All you do is call the main number (609) 704-9040.

Several of our customers maintain 24hour operations including Detention Facilities, Nursing Homes, Retail Establishments and Housing Facilities. We are prepared to respond at any time to assist in resolving any emergencies that may arise.

We provide a full spectrum of HVAC, Boiler, Refrigeration and Electrical services, including but not limited to:

- HVAC Services
- Boiler Repair & Combustion Analysis
- Refrigeration Services
- Ductwork
- Welding & Fabrication
- Electrical Services

Respectfully,



Marlee Hartline



Marlee Contractors, LLC

**Mechanical & Electrical Maintenance Contractors
HVAC & Refrigeration, Electrical Repair & Maintenance**

To: Atlantic City BOE
1300 Atlantic Ave.
Atlantic City, NJ 08401

05/03/21

Dear Sir/Madam:

Here is a partial list of customers. Open end contract as needed:

-NJ Dept. of Military & Veterans Affairs
101 Eggerts Crossing Road
Lawrenceville, N.J. 08648
Lt. Matt Munoz -Facilities
609-530-6907

2014-Current	
2013-2014	2009-2010
2012-2013	2008-2009
2011-2012	2007-2008
2010-2011	2006-2007

-Hamilton Township B.O.E.
5801 Third St.
Mays Landing, N.J. 08210
Mr. Ian Nelson-Director of Facilities
609-625-5085

2014-Current	2008-2009
2013-2014	2007-2008
2012-2013	2006-2007
2011-2012	2005-2006
2010-2011	2004-2005
2009-2010	1994-2004

-County of Atlantic
P.O. Box 1107
Atlantic City, N.J. 08404
Jerry Griffin-Director of Facilities
609-343-2176

2018-Current	1994-2000
2015-2016	
2000-2014	

-Vineland B.O.E.
17 West Landis Avenue
Vineland, NJ 08360
Mr. Paul Farinaccio-Director of Facilities
(856)794-6700 ext.2228

2017-2019	2007-2008
2016-2017	2006-2007
2015-2016	2005-2006
2008-2009	

-Atlantic City B.O.E.
1809 Pacific Ave.
Atlantic City, N.J. 08401
Mr. Kurt Austin-Director of Facilities
609-343-7200 ext.5006

2014-2019	2009-2010
2013-2014	2008-2009
2012-2013	2007-2008
2011-2012	2006-2007
2010-2011	2001-2006



Marlee Contractors, LLC

**Mechanical & Electrical Maintenance Contractors
HVAC & Refrigeration, Electrical Repair & Maintenance**

REFERENCES

-Atlantic City Board of Education
1809 Pacific Ave
Atlantic City, N.J. 08401
Kurt Austin-Director of Facilities
609-343-7200

Monroe Twp. Public Schools
75 East Academy Street
Williamstown, NJ 08094
Mr. Ian Hicks-Facilities
856-259-7201

-Vineland Board of Education
17 West Landis Avenue
Vineland, NJ 08360
Paul Farinaccio-
Director of Facilities
856-794-6700 ext. 2228

Boardwalk Design and Dev.
9615 Ventnor Avenue
Margate, NJ 08402
Mr. Tony Cappuccio-Dir.
609-487-5959

-Hamilton Township Board of Education
5801 Third St.
Mays Landing, N.J. 08210
Mr. Ian Nelson-Director of Facilities
609-625-5085

Township of Hamilton
6101 Thirteenth St.
Hamilton Twp., NJ 08330
Ms. Sue Giberson-Director
of Facilities 609-517-5593

-NJ Dept. of Military & Veterans Affairs
101 Eggerts Crossing Road
Lawrenceville, N.J. 08648
Captain Matt Munoz -Facilities
609-530-6907

-County of Atlantic
P.O. Box 1107
Atlantic City, N.J. 08404
Jerry Griffin-Director of Facilities
609-343-2176

-Adult Diagnostic & Treatment Center
8 Production Way
Avenel, NJ 07001
Mr. Celso Castro-Director of Facilities
732-574-2250
973-477-9393-cell

Subcontractor's Disclosure Statement (pg. 1)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

The Marlee Contractors, LLC
(Name of Bidding Company)

PLEASE CHECK ONE _____ will subcontract a portion of this project.
 X will not subcontract any portion of this project.

Authorized Agent Marlee Hartline **Title** Member

Signature of Bidder _____ **Date** 5/3/21

If the bidder **IS NOT** going to subcontract any portion of this project, the bidder need not complete any further part of this document.

If the bidder **WILL** subcontract a portion of this project, the bidder must do the following:

- Identify the contract number and type of work he intends to subcontract.
- Provide the name, address and other pertinent information about the subcontractor.
- If the cost of the work by the subcontractor shall exceed \$20,000, the bidder shall provide in the bid package subcontractors (N.J.S.A. 18A:18A-18).
 - * Notice of Classification
 - * Total Amount of Uncompleted Contracts
 - * Contractor's Registration Certificate (Projects over \$2,000.00)

Please list subcontractor(s) on the following pages.

Bidders may make extra copies of the following pages.

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Subcontractor's Disclosure Statement (pg. 2)

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

1. Subcontractor for: _____
(Type of Work)

Name of Subcontracting Company _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

Authorized Agent _____ Title _____

Will the cost of subcontract exceed \$20,000?

____ Yes Estimated Value of Contract \$ _____

____ No Estimated Value of Contract \$ _____

If checked **YES**, the subcontractor must be pre-qualified to perform the work. The bidder must provide in the bid package the following:

- The subcontractor's Notice of Classification
- The subcontractor's Total Amount of Uncompleted Contracts
- The subcontractor's Contractor's Registration Certificate (Projects over \$2,000.00).

Certification of Equipment; Performance Security, etc.

The _____ hereby certifies the above named
Name of Bidding Company

subcontractor has the personnel, equipment, experience, financial and sufficient means to complete their portion of the contract in full accordance with the bid specifications.

Name of Bidding Company _____

Name of Authorized Agent _____

Signature of Authorized Agent _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID, IF APPLICABLE

Subcontractor's Disclosure Statement (pg. 3)

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

2. Subcontractor for: _____
(Type of Work)

Name of Subcontracting Company _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

Authorized Agent _____ Title _____

Will the cost of subcontract exceed \$20,000?

_____ Yes Estimated Value of Contract \$ _____

_____ No Estimated Value of Contract \$ _____

If checked **yes**, the subcontractor must be pre-qualified to perform the work. The bidder must provide in the bid package the following:

- The subcontractor's Notice of Classification
- The subcontractor's Total Amount of Uncompleted Contracts
- The subcontractor's Contractor's Registration Certificate (Projects over \$2,000.00).

Certification of Equipment; Performance Security, etc.

The _____ hereby certifies the above named
Name of Bidding Company

subcontractor has the personnel, equipment, experience, financial and sufficient means to complete their portion of the contract in full accordance with the bid specifications.

Name of Bidding Company _____

Name of Authorized Agent _____

Signature of Authorized Agent _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID, IF APPLICABLE

Subcontractor's Disclosure Statement (pg. 4)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

3. Subcontractor for: _____
(Type of Work)

Name of Subcontracting Company _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

Authorized Agent _____ Title _____

Will the cost of subcontract exceed \$20,000?

____ Yes Estimated Value of Contract \$ _____

____ No Estimated Value of Contract \$ _____

If checked **yes**, the subcontractor must be pre-qualified to perform the work. The bidder must provide in the bid package the following:

- The subcontractor's Notice of Classification
- The subcontractor's Total Amount of Uncompleted Contracts
- The subcontractor's Contractor's Registration Certificate (Projects over \$2,000.00).

Certification of Equipment; Performance Security, etc.

The _____ hereby certifies the above named
Name of Bidding Company

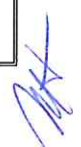
subcontractor has the personnel, equipment, experience, financial and sufficient means to complete their portion of the contract in full accordance with the bid specifications.

Name of Bidding Company _____

Name of Authorized Agent _____

Signature of Authorized Agent _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID, IF APPLICABLE



Subcontractor's Disclosure Statement (pg. 5)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

4. Subcontractor for: _____
(Type of Work)

Name of Subcontracting Company _____

Address _____

City, State, Zip _____

Telephone _____ Fax _____

Authorized Agent _____ Title _____

Will the cost of subcontract exceed \$20,000?

_____ Yes Estimated Value of Contract \$ _____

_____ No Estimated Value of Contract \$ _____

If checked **yes**, the subcontractor must be pre-qualified to perform the work. The bidder must provide in the bid package the following:

- The subcontractor's Notice of Classification
- The subcontractor's Total Amount of Uncompleted Contracts
- The subcontractor's Contractor's Registration Certificate (Projects over \$2,000.00).

Certification of Equipment; Performance Security, etc.

The _____ hereby certifies the above named
Name of Bidding Company

subcontractor has the personnel, equipment, experience, financial and sufficient means to complete their portion of the contract in full accordance with the bid specifications.

Name of Bidding Company _____

Name of Authorized Agent _____

Signature of Authorized Agent _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID, IF APPLICABLE

Subcontractor's Disclosure Statement (pg. 6)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

(Other Trades)

A. Name of Trade/Type of Work _____
Name of Subcontracting Company _____
Address _____
City, State, Zip _____
Telephone _____ Fax _____
Authorized Agent _____ Title _____
Value of Contract \$ _____

Bid Submittals from Subcontractor

____ Notice of Classification ____ Contractor's Registration Certificate ____ Uncompleted Contracts

B. Name of Trade/Type of Work _____
Name of Subcontracting Company _____
Address _____
City, State, Zip _____
Telephone _____ Fax _____
Authorized Agent _____ Title _____
Value of Contract \$ _____

Bid Submittals from Subcontractor

____ Notice of Classification ____ Contractor's Registration Certificate ____ Uncompleted Contracts

C. Name of Trade/Type of Work _____
Name of Subcontracting Company _____
Address _____
City, State, Zip _____
Telephone _____ Fax _____
Authorized Agent _____ Title _____
Value of Contract \$ _____

Bid Submittals from Subcontractor

____ Notice of Classification ____ Contractor's Registration Certificate ____ Uncompleted Contracts

Signature of Authorized Agent

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID, IF APPLICABLE

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP
N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)
 BOILER MAINTENANCE AND REPAIRS
 Bid #22-008

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: Marlee Contractors, LLC

Organization Address: 364 S. Egg Harbor Road, Hammonton, NJ 08037

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

Part II

The list below contains 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. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

OR

No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Business Address
Marlee Hartline	364 S. Egg Harbor Road Hammonton, NJ 08037
Robert Hartline	364 S. Egg Harbor Road Hammonton, NJ 08037

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

MX

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP (continued)
N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)
 BOILER MAINTENANCE AND REPAIRS
 Bid #22-008


Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** 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 pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Business Address
Marlee Hartline	364 S. Egg Harbor Road Hammonton, NJ 08037
Robert Hartline	364 S. Egg Harbor Road Hammonton, NJ 08037

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the **Atlantic City Board of Education** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the **Atlantic City Board of Education** to notify the **Atlantic City Board of Education** in writing of any changes to the information contained 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 prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the **Atlantic City Board of Education** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Marlee Hartline	Title:	Member
Signature:		Date:	5/3/21

THIS FORM (2 pages) MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Handwritten initials

EQUIPMENT CERTIFICATION
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

In accordance with N.J.S.A. 18A:18A-23, I hereby certify that:

A) Marlee Contractors, LLC
(Name of Company) owns all the necessary equipment as required by the specifications and to complete the specified public work project.

OR

B) _____
(Name of Company) leases or controls all the necessary equipment as required by the specifications, and to complete the specified public work project.

PLEASE NOTE:

If your company is not the actual owner of the equipment, **you shall submit with the bid:**

1. A certificate stating the source from which the equipment will be obtained, and
2. Obtain and submit with the bid a certificate from the owner and person in control of the equipment, definitely granting to the bidder the control of the equipment required during such time it may be necessary for the completion of that portion of the contract for which said equipment will be necessary.

Name of Company Marlee Contractors, LLC

Address 364 S. Egg Harbor Road

City, State, Zip Hammonton, NJ 08037

Authorized Agent Marlee Hartline **Title** Member

Signature of Authorized Agent



THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



NON-COLLUSION AFFIDAVIT
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

STATE OF : New Jersey)

COUNTY OF: Atlantic)

I, Marlee Hartline, of Egg Harbor in the County
of Atlantic, State of New Jersey, of full age, being duly sworn according to
the law on my oath, depose and say that:

I am Member of the firm of Marlee Contractors, LLC,
the bidder making the bid for the herein project, and that I executed said bid with full authority to do so, that said
bidder has not directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any
action in restraint of free, competitive bidding in connection with the project named in this bid, and that all statements
contained in said bid and in this Affidavit are true and correct, and made with full knowledge that the ATLANTIC CITY
BOARD OF EDUCATION relies upon the truth of the statement contained in said bid and in the statements contained in
this Affidavit in awarding the contract for said project.

I warrant that no requirement or commitment was made in reference to any political contribution to any party, person
or elected official, and that no undisclosed benefits of any kind were promised to anyone connected with the ATLANTIC
CITY BOARD OF EDUCATION or any political party in reference hereto.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon
an agreement or understanding for a com-mission, percentage, brokerage or contingent fee, **EXCEPT** bona fide
employees or bona fide established commercial or selling agencies maintained by:

Marlee Contractors, LLC

(Name of Contractor)

I further warrant and represent that I have never been convicted of or acknowledged or admitted to any payment of
kickbacks or unlawful gifts to any government official, school board official or employee for which conduct the
ATLANTIC CITY BOARD OF EDUCATION deems me disqualified from doing business with them under such
circumstances.

I also understand that the above disqualification does not apply to any vendor who co-operates with the prosecution
and gives supporting testimony on behalf of the prosecution in the course of a judicial inquiry.

SWORN AND SUBSCRIBED TO BEFORE ME

THIS 3rd DAY OF May, 2021


(Signature of NOTARY PUBLIC)

Janine M. Bennett

Notary Public of New Jersey

My Commission Expires June 16, 2025

NOTARY PUBLIC OF:


Signature of Affiant

Marlee Hartline/Member

Print/type name of Affiant

My Commission Expires: _____

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

PREQUALIFICATION AFFIDAVIT
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

The below affidavit must be submitted with your bid for projects over \$20,000.00 pursuant to N.J.S.A. 18A:18A-32:

STATE OF NEW JERSEY)
) ss
COUNTY OF Atlantic)

I, Marlee Hartline of the City of Egg Harbor in the County of Atlantic
and the State of ~~NJ~~ full age, being duly sworn according to law on my oath depose and say that:

No Material Adverse Change in Qualification

I am Member (*Position in Company*), and the bidder for the above named project. The answers to the following statements are true and correct and that there has been no material adverse change in the qualification information subsequent to the latest statement submitted as required (N.J.S.A. 18A:18A-32 et seq.) as amended, except as set forth herewith. I further certify that there is not now pending any litigation or other action that may jeopardize my rating, status or contract limits from their current limits.

Notice of Classification (DPMC 27)

Marlee Contractors, LLC (Name of Company) is classified by the State of New Jersey under Chapter 105, Laws of 1962, as amended. This Classification became effective 8/25/20 (Date)

Type of Contract/Trade Classified: HVACR, Electrical

Classification Approved Amount \$ 200,000.00

A copy of my valid and active prequalification/classification certificate from the Department of Treasury, Division of Property Management and Construction has been submitted with this bid.

Total Amount of Uncompleted Contracts (DPMC 701)

The total amount of uncompleted work is \$ 20,000.00 (approx) as of 5/3/21 (Date).

A copy of the company's Total Amount of Uncompleted Contracts form is required to be submitted with the bid.

Date 5/3/21

Signature of Authorized Representative

Marlee Hartline/Member
Sworn and subscribed to before me this 3rd day of May in the Year 2021.

Janine M. Bennett Notary Public of _____
Signature of Notary Print Name of Notary

My Commission Expires: June 16, 2025 Day Year

-SEAL-

This affidavit does not take the place of the "Notice of Classification" or the "Total Amount of Uncompleted Contracts" issued by the State of New Jersey, both of which must be submitted with the bid package of each bidder.

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

CONTRACTOR REGISTRATION CERTIFICATION

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

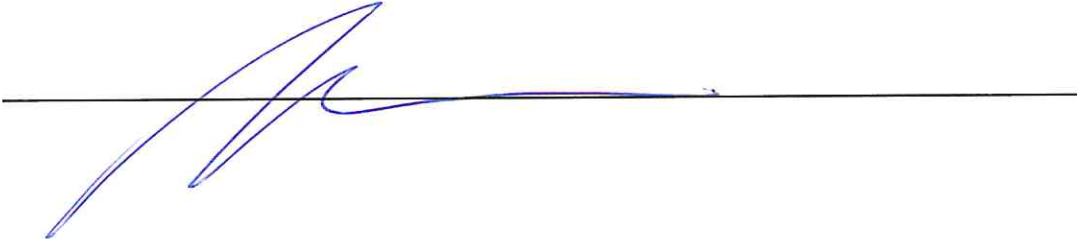
It is the determination of the Atlantic City Board of Education that this is a public works project which contract amount in total will exceed \$2,000.00 (two thousand dollars), therefore, pursuant to the Public Works Contractor Registration Act -- N.J.S.A. 34:11-56.48 et seq., contractors are to be aware of the following:

No contractor shall bid on any contract for public work as defined in section 2 of P.L.1963, c. 150 (C.34:11-56.26) unless the contractor is registered pursuant to this act. No contractor shall list a subcontractor in a bid proposal for the contract unless the subcontractor is registered pursuant to P.L.1999, c.238 (C.34:11-56.48 et seq.) at the time the bid is made. No contractor or subcontractor, including a subcontractor not listed in the bid proposal, shall engage in the performance of any public work subject to the contract, unless the contractor or subcontractor is registered pursuant to that act.

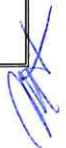
I certify that our company understands that the project of the Atlantic City Board of Education requires that all contractors and subcontractors listed in this proposal possess a valid Contractor Registration Certificate or submit with its bid a copy of the registration application (contractors and subcontractors) at the time the proposal is received by the Board and furthermore certify that I will provide copies of the valid certificates prior to the award of contract.

Name of Company Marlee Contractors, LLC

Authorized Agent Marlee Hartline Title Member

Authorized Signature 

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



PREVAILING WAGE CERTIFICATION
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

It is the determination of the Atlantic City Board of Education that this is a public works project that in total will exceed \$2,000.00 (two thousand dollars), therefore prevailing wages rules and regulations apply as promulgated by the New Jersey Prevailing Wage Act and in conformance with N.J.S.A. 34:11-56:25 et seq.

Certification

1. I certify that our company understands that this project of the Board of Education requires prevailing wages to be paid in full accordance with the law.
2. I further certify that all subcontractors named in this bid understand that this project requires the subcontractor to pay prevailing wages in full accordance with the law.

Non-compliance Statement

If it is found that any worker, employed by the contractor or any subcontractor covered by said contract, has been paid a rate of wages less than the prevailing wage required to be paid by such contract, the Board of Education, may begin proceedings to terminate the contractor's or subcontractor's right to proceed with the work, or such part of the work as to which there has been a failure to pay required wages and to prosecute the work to completion or otherwise. The contractor and his sureties shall be liable for any excess costs occasioned thereby to the public body.

NOTIFICATION OF VIOLATIONS – New Jersey Department of Labor and Workforce Development

Has the bidder or any person having an "interest" with the bidder, been notified by the New Jersey Department of Labor and Workforce Development by notice issued pursuant to N.J.S.A. 34:11-56:37 that he/she has been in violation for failure to pay prevailing wages as required by the New Jersey Prevailing Wage Act within the last five (5) years?

* Yes _____ No X

*If yes, please attach a signed document explaining any/or all administrative proceedings with the Department within the last five (5) years. Please include any pending administrative proceedings with the Department if any.

Submission of Certified Payroll Records

All certified payroll records are to be submitted to the person named below who is coordinating the activities for the project:

Name of Company Marlee Contractors, LLC

Authorized Agent Marlee Hartline/Member

Authorized Signature 

Date 5/3/21

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID



VENDOR'S AFFIDAVIT
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

STATE OF : New Jersey)

COUNTY OF : Atlantic)

I, Marlee Hartline, of full age, being duly sworn according to the law on my oath, depose and say that:

I am Member, (Officer/Partner/Owner) of the firm of:

Marlee Contractors, LLC

the Bidder making the bid for the herein project, and that I executed said bid with full authority to do so, and that all statements contained in said bid and in this Affidavit are true and correct and made with full knowledge that the ATLANTIC CITY BOARD OF EDUCATION relies upon the truth of the statement contained in said Bid and in the statements contained in this Affidavit in awarding the contract for said project.

I understand that this affidavit is being provided to the ATLANTIC CITY BOARD OF EDUCATION in compliance with the provisions of NJSA 18A:12-2 and NJSA 18A:6-8 which prohibit persons having a conflict of interest in entering into contracts or selling **textbooks, apparatus or supplies** to the Board of Education.

No person who is a shareholder, officer, director, partner or owner of the above vendor is officially connected with or employed in the ATLANTIC CITY PUBLIC SCHOOLS DISTRICT or is in any way pecuniarily or beneficially interested in or receives compensation or reward of any kind in connection with the sales of the vendor to the ATLANTIC CITY BOARD OF EDUCATION.

No member of the ATLANTIC CITY BOARD OF EDUCATION is employed or interested directly in the above vendor.

I further declare and certify that I and the company of which I am the agent, are not included on the State Treasurer's **List of Debarred, Suspended or Disqualified Bidders**.

I understand that if any statements made herein are false, I am subject to punishment and that any person who may be interested in my company while employed by the ATLANTIC CITY BOARD OF EDUCATION is subject to removal from office and to revocation of his/her certificate to teach or administer, direct or supervise instruction or educational guidance in the public school system.

SWORN AND SUBSCRIBED TO BEFORE ME

THIS 3rd DAY OF May, 2021

Janine M. Bennett
(Signature of NOTARY PUBLIC)

NOTARY PUBLIC OF: Janine M. Bennett

Notary Public of New Jersey

My Commission Expires: My Commission Expires June 16, 2025

Marlee Hartline
Signature of Affiant

Marlee Hartline/Member

Print/type name of Affiant

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Sworn Contractor Certification - Qualifications and Credentials

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

Pursuant to N.J.S.A. 18A:7G-37, a pre-qualified contractor seeking to bid school facilities projects, and any subcontractors, that are required to be named under N.J.S.A. 18A:7G-1 et seq. shall, as a condition of bidding, submit this Sworn Contractor Certification regarding qualifications and credentials.

I, the principal owner or officer of the company, certify that the forging statements are true and our firm has the following qualifications and credentials:

1. A current, valid certificate of registration issued pursuant to "The Public Works Contractor Registration Act," N.J.S.A. 34:11-56:48 et seq. A copy of which is submitted with its bid;
2. A current, valid Certificate of Authority (Business Registration) to perform work in New Jersey issued by the Department of Treasury, a copy of which is submitted with its bid;
3. A current valid contractor trade license required under applicable New Jersey Law for any specialty trade or specialty area in which the firm seeks to perform work, a copy of which is submitted with its bid;
4. During the term of the school facilities project, I as principal owner or officer of the company or corporation, as contractor, will have in place a suitable quality control and quality assurance program and an appropriate safety and health plan.
5. Certify that, at the time of bidding, the amount of the bid proposal and value of all of its outstanding incomplete contracts does not exceed the firm's existing aggregate rating limit.

Name of Company Marlee Contractors, LLC

Name of Owner or Officer Marlee Hartline/Member

Signature of Owner or Officer _____

Notarized before me this 3rd day of May, 2021
Month Year

NOTARY PUBLIC SIGNATURE

Print Name of Notary Public

Janine M. Bennett
Notary Public of New Jersey
My Commission Expires June 16, 2025

My commission expires _____
Month Day Year

-SEAL-

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

**Atlantic City Board of Education
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

BID/RFP SOLICITATION #: 22-008 VENDOR/BIDDER: Marlee Contractors, LLC

**PART 1:
CHECK THE APPROPRIATE BOX**

Pursuant to N.J.S.A. 52:32-5, et seq. (P.L. 2012, c.25 and P.L 2021, c.4) any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract, must certify that neither person nor entity, nor any of its parents, subsidiaries, or affiliates, is identified on the New Jersey Department of Treasury's Chapter 25 List as a person or entity engaged in investment activities in Iran. The Chapter 25 list is found on the Division's website at: <https://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Vendors/Bidders must review this list prior to completing the below certification. If the board of education finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

A. I certify, pursuant to N.J.S.A. 52:32-5, et seq. (P.L. 2012, c.25 and P.L 2021, c.4) that neither the Vendor/Bidder listed above nor any of its parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's Chapter 25 List of entities determined to be engaged in prohibited activities in Iran. SKIP PART 2.

OR

B. I am unable to certify as above because the Vendor/Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the New Jersey Department of the Treasury's Chapter 25 List. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below.

PART 2:

PLEASE PROVIDE ADDITIONAL LANGAGE INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

If you checked Box "B" above, provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in the investment activities in Iran by completing the boxes below.

ENTITY NAME: _____
RELATIONSHIP TO VENDOR/BIDDER: _____
DESCRIPTION OF ACTIVITIES: _____
DURATION OF ENGAGEMENT: _____
ANTICIPATED CESSATION DATE: _____
VENDOR/BIDDER CONTACT NAME: _____
VENDOR/BIDDER CONTACT PHONE NO.: _____

Attach Additional Sheets if Necessary.

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor/bidder, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the board of education is relying on the information contained herein, and that the Vendor/Bidder is under a **continuing obligation** from the date of this certification through the completion of any Contract (s) with the board of education to notify the board of education in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to **criminal prosecution** under the law, and 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 unenforceable.

Signature
Marlee Hartline/Member
Print Name and Title

5/3/21
Date

THIS FORM MUST BE COMPLETED, SIGNED, AND SUBMITTED PRIOR TO CONTRACT AWARD

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Contractor Instructions

Business entities (contractors) receiving contracts from a public agency that are NOT awarded pursuant to a “fair and open” process (defined at N.J.S.A. 19:44A-20.7) are subject to the provisions of P.L. 2005, c. 271, s.2 (N.J.S.A. 19:44A-20.26). This law provides that 10 days prior to the award of such a contract, the contractor shall disclose contributions to:

- any State, county, or municipal committee of a political party
- any legislative leadership committee*
- any continuing political committee (a.k.a., political action committee)
- any candidate committee of a candidate for, or holder of, an elective office:
 - of the public entity awarding the contract
 - of that county in which that public entity is located
 - of another public entity within that county
 - of a legislative district in which that public entity is located or, when the public entity is a county, of any legislative district which includes all or part of the county

The disclosure must list reportable contributions to any of the committees that exceed \$300 per election cycle that were made during the 12 months prior to award of the contract. See N.J.S.A. 19:44A-8 and 19:44A-16 for more details on reportable contributions.

N.J.S.A. 19:44A-20.26 itemizes the parties from whom contributions must be disclosed when a business entity is not a natural person. This includes the following:

- individuals with an “interest” ownership or control of more than 10% of the profits or assets of a business entity or 10% of the stock in the case of a business entity that is a corporation for profit
- all principals, partners, officers, or directors of the business entity or their spouses
- any subsidiaries directly or indirectly controlled by the business entity
- IRS Code Section 527 New Jersey based organizations, directly or indirectly controlled by the business entity and filing as continuing political committees, (PACs).

When the business entity is a natural person, “a contribution by that person’s spouse or child, residing therewith, shall be deemed to be a contribution by the business entity.” [N.J.S.A. 19:44A-20.26(b)] The contributor must be listed on the disclosure.

Any business entity that fails to comply with the disclosure provisions shall be subject to a fine imposed by ELEC in an amount to be determined by the Commission which may be based upon the amount that the business entity failed to report.

The enclosed list of agencies is provided to assist the contractor in identifying those public agencies whose elected official and/or candidate campaign committees are affected by the disclosure requirement. It is the contractor’s responsibility to identify the specific committees to which contributions may have been made and need to be disclosed. The disclosed information may exceed the minimum requirement.

The enclosed form, a content-consistent facsimile, or an electronic data file containing the required details (along with a signed cover sheet) may be used as the contractor’s submission and is disclosable to the public under the Open Public Records Act.

The contractor must also complete the attached Stockholder Disclosure Certification. This will assist the agency in meeting its obligations under the law. **NOTE: This section does not apply to Board of Education contracts.**

N.J.S.A. 19:44A-3(s): “The term “legislative leadership committee” means a committee established, authorized to be established, or designated by the President of the Senate, the Minority Leader of the Senate, the Speaker of the General Assembly or the Minority Leader of the General Assembly pursuant to section 16 of P.L.1993, c.65 (C.19:44A-10.1) for the purpose of receiving contributions and making expenditures.”

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Required Pursuant to N.J.S.A. 19:44A-20.26

**This form or its permitted facsimile must be submitted to the local unit
no later than 10 days prior to the award of the contract.**

Part I – Vendor Information

Vendor Name:	Marlee Contractors, LLC		
Address:	364 S. Egg Harbor Road		
City:	Hammonton	State: NJ	Zip: 08037

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.J.S.A. 19:44A-20.26 and as represented by the Instructions accompanying this form.

	Marlee Hartline	Member
Signature	Printed Name	Title

I. Part II – Contribution Disclosure

Disclosure requirement: Pursuant to N.J.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$300 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
			\$
None			

Check here if the information is continued on subsequent page(s)

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Continuation Page
C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Required Pursuant to N.J.S.A. 19:44A-20.26

Page ___ of _____

Vendor Name:

Contributor Name	Recipient Name	Date	Dollar Amount
			\$

Check here if the information is continued on subsequent page(s)

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

List of Agencies with Elected Officials Required for Political Contribution Disclosure

County Name: Atlantic

State: Governor, and Legislative Leadership Committees

Legislative District #: 2

State Senator and two members of the General Assembly per district.

County:

Freeholders
Surrogate

County Clerk
Registrar of Deeds

Sheriff

Municipalities (Mayor and members of governing body, regardless of title):

Absecon City	Estell Manor City	Mullica Township
Atlantic City	Folsom Borough	Northfield City
Brigantine City	Galloway Township	Pleasantville City
Buena Vista Township	Hammonton Town	Somers Point City
Corbin City	Linwood City	Ventnor City
Egg Harbor City	Longport Borough	Weymouth Township
Egg Harbor Township	Margate City	

Boards of Education (Members of the Board):

Absecon City	Folsom Borough	Mainland Regional
Atlantic City	Galloway Township	Mullica Township
Buena Regional	Greater Egg Harbor Regional	Northfield City
Egg Harbor City	Hamilton Township	Pleasantville City
Egg Harbor Township	Hammonton Town	Somers Point City
Estell Manor City	Longport	Weymouth Township

Fire Districts (Board of Fire Commissioners):

Buena Borough Fire District No. 1
Buena Borough Fire District No. 2
Buena Vista Township Fire District No. 1
Buena Vista Township Fire District No. 2
Buena Vista Township Fire District No. 3
Buena Vista Township Fire District No. 4

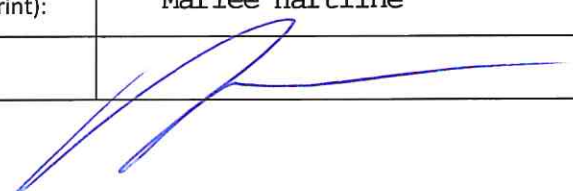
**CERTIFICATION OF NON-DEBARMENT
FOR FEDERAL GOVERNMENT CONTRACTS**

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

This certification shall be completed, certified to, and submitted to the contracting unit prior to contract award, except for emergency contracts where submission is required prior to payment.

PART I: VENDOR INFORMATION	
Individual or Organization Name	Marlee Contractors, LLC
Address of Individual or Organization	364 S. Egg Harbor Road Hammonton, NJ 08037
DUNS Code (if applicable)	847916889
CAGE Code (if applicable)	50GC9
Check the box that represents the type of business organization:	

- Sole Proprietorship (skip Parts III and IV) Non-Profit Corporation (skip Parts III and IV)
 For-Profit Corporation (any type) Limited Liability Company (LLC)
 Partnership Limited Partnership Limited Liability Partnership (LLP)
 Other (be specific): _____

PART II – CERTIFICATION OF NON-DEBARMENT: Individual or Organization			
I hereby certify that the individual or organization listed above in Part I is not debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the Atlantic City Board of Education is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by board of education to notify the board of education in writing of any changes to the information contained 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 prosecution under the law and that it will constitute a material breach of my agreement(s) with the board of education , permitting the board of education to declare any contract(s) resulting from this certification void and unenforceable.			
Full Name (Print):	Marlee Hartline	Title:	Member
Signature:		Date:	5/3/21

THIS FORM (4 PAGES) MUST BE COMPLETED, SIGNED, AND RETURNED PRIOR TO CONTRACT AWARD

Handwritten initials

**CERTIFICATION OF NON-DEBARMENT
FOR FEDERAL GOVERNMENT CONTRACTS (continued)**

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)

BOILER MAINTENANCE AND REPAIRS

Bid #22-008

PART III – CERTIFICATION OF NON-DEBARMENT: Individual or Entity Owning Greater than 50 Percent of Organization	
Section A (Check the Box that applies)	
<input checked="" type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of its voting stock, or of the partner in the partnership who owns more than 50 percent interest therein, or of the member of the limited liability company owning more than 50 percent interest therein, as the case may be.
Name of Individual or Organization	Marlee Hartline
Home Address (for Individual) or Business Address	1001 Columbia Road Egg Harbor, NJ 08215
OR	
<input type="checkbox"/>	No one stockholder in the corporation owns more than 50 percent of its voting stock, or no partner in the partnership owns more than 50 percent interest therein, or no member in the limited liability company owns more than 50 percent interest therein, as the case may be.
Section B (Skip if no Business entity is listed in Section A above)	
<input type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of the voting stock of the organization's parent entity, or of the partner in the partnership who owns more than 50 percent interest in the organization's parent entity, or of the member of the limited liability company owning more than 50 percent interest in organization's parent entity, as the case may be.
Stockholder/Partner/Member Owning Greater Than 50 Percent of Parent Entity	
Home Address (for Individual) or Business Address	
OR	
<input type="checkbox"/>	No one stockholder in the parent entity corporation owns more than 50 percent of its voting stock, no partner in the parent entity partnership owns more than 50 percent interest therein, or no member in the parent entity limited liability company owns more than 50 percent interest therein, as the case may be.

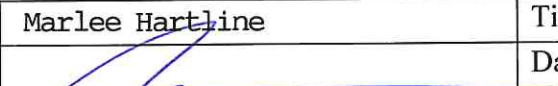
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**CERTIFICATION OF NON-DEBARMENT
FOR FEDERAL GOVERNMENT CONTRACTS (continued)**

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

Section C – Part III Certification

I hereby certify that no individual or organization that is debarred by the federal government from contracting with a federal agency owns greater than 50 percent of the **Organization listed above in Part I** or, if applicable, owns greater than 50 percent of a parent entity of **Atlantic City Board of Education**. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the **Atlantic City Board of Education** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award **board of education** to notify the **board of education** in writing of any changes to the information contained 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 prosecution under the law and that it will constitute a material breach of my agreement(s) with the **board of education**, permitting the **board of education** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Marlee Hartline	Title:	Member
Signature:		Date:	5/3/21

Part IV – CERTIFICATION OF NON-DEBARMENT: Contractor – Controlled Entities

Section A

Below is the name and address of the corporation(s) in which the **Organization listed in Part I** owns more than 50 percent of voting stock, or of the partnership(s) in which the **Organization listed in Part I** owns more than 50 percent interest therein, or of the limited liability company or companies in which the **Organization listed above in Part I** owns more than 50 percent interest therein, as the case may be.

Name of Business Entity

Business Address

****Add additional sheets if necessary****

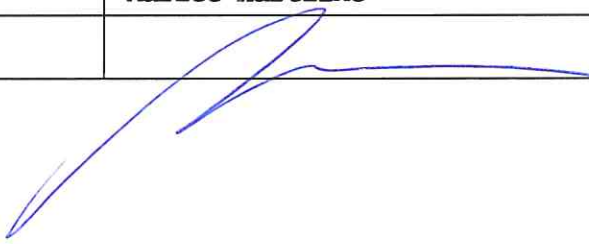
OR

The **Organization listed above in Part I** does not own greater than 50 percent of the voting stock in any corporation and does not own greater than 50 percent interest in any partnership or any limited liability company.

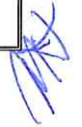
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**CERTIFICATION OF NON-DEBARMENT
FOR FEDERAL GOVERNMENT CONTRACTS (continued)**

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

Section B (skip if no business entities are listed in Section A of Part IV)			
<input type="checkbox"/>	Below are the names and addresses of any entities in which an entity listed in Part III A owns greater than 50 percent of the voting stock (corporation) or owns greater than 50 percent interest (partnership or limited liability company).		
	Name of Business Entity Controlled by Entity Listed in Section A of Part IV	Business Address	
Add additional Sheets if necessary			
OR			
<input type="checkbox"/>	No entity listed in Part III A owns greater than 50 percent of the voting stock in any corporation or owns greater than 50 percent interest in any partnership or limited liability company.		
Section C – Part IV Certification			
I hereby certify that the Organization listed above in Part I does not own greater than 50 percent of any entity that that is debarred by the federal government from contracting with a federal agency and, if applicable, does not own greater than 50 percent of any entity that in turns owns greater than 50 percent of any entity debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the Atlantic City Board of Education is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by board of education to notify the board of education in writing of any changes to the information contained 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 prosecution under the law and that it will constitute a material breach of my agreement(s) with the board of education , permitting the board of education to declare any contract(s) resulting from this certification void and unenforceable.			
Full Name (Print):	Marlee Hartline	Title:	Member
Signature:		Date:	5/3/21

THIS FORM (4 PAGES) MUST BE COMPLETED, SIGNED, AND RETURNED PRIOR TO CONTRACT AWARD



SAMPLE DOCUMENT ONLY

A CURRENT IRS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH YOUR BID

Form **W-9**
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-				-	

Employer identification number								
			-					

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on irs.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Verify that the TIN you are giving is correct for you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

Cal. No. 10231X

Form **W-9** (Rev. 8-2013)

District Locations (Subject to Change)

Administrative Building
1300 Atlantic Avenue

Atlantic City High School
1400 Albany Avenue

Atlantic City HS Boathouse
3300 Fairmount Avenue

Brighton Avenue School
30 N. Brighton Avenue

Chelsea Heights School
4101 Filbert Avenue

Dr. Martin Luther King School
1700 Marmora Avenue

New Jersey Avenue School
35 N. New Jersey Avenue

Pennsylvania Avenue School
201 N. Pennsylvania Avenue

New York Avenue School
411 North New York Avenue

Richmond Avenue School
4115 Ventnor Avenue

Sovereign Avenue School
3205 Arctic Avenue

Texas Avenue School
2523 Arctic Avenue

Uptown Complex
323 Madison Avenue

Venice Park
1601 N. Penrose Avenue

Indiana Avenue School
117 N. Indiana Avenue

All Locations are in Atlantic City, NJ 08401

BID FORM
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

BIDDERS SHOULD NOT AMEND THIS FORM IN ANY WAY
ANY QUESTIONS SHOULD BE RESOLVED PRIOR TO SUBMITTING BIDS

Criteria for award will be based on **Proposal A** for annual boiler service; **Proposal B** low bid hourly for boiler mechanic and low bid hourly for helper; and the percent of mark-up of certifiable cost of materials, if any. Hourly rates shall include all labor, overhead, consumables and travel to/from job site. In the event a tie low bid should occur, the Board of Education reserves the right to award at their discretion to any one of the tie bidders.

The undersigned agrees to perform work as requested within the terms of the bid specifications at the following rates:

PROPOSAL A: Per Building Price for Annual Boiler Service contract, includes annual Boiler Inspection, Maintenance Service and cleaning where applicable, includes all applicable labor and material:

A.	Atlantic City High School 1400 Albany Avenue	\$ 3,875.00
B.	Brighton Avenue School 30 N. Brighton Avenue	\$ 3,650.00
C.	Chelsea Heights School 4101 Filbert Avenue	\$ 2,395.00
D.	Dr. Martin Luther King School 1700 Marmora Avenue	\$ 3,875.00
E.	New York Avenue School 411 North New York Avenue	\$ 3,750.00
F.	Pennsylvania Avenue School 201 N. Pennsylvania Ave	\$ 3,375.00
G.	Richmond Avenue School 4115 Ventnor Avenue	\$ 3,475.00
H.	Sovereign Avenue School 3205 Arctic Avenue	\$ 2,650.00
I.	Texas Avenue School 2523 Arctic Avenue	\$ 3,100.00
J.	Uptown School Complex 323 Madison Avenue	\$ 2,750.00
K.	Venice Park School 1600 N. Penrose Avenue	\$ 2,100.00
TOTAL - PROPOSAL A:		\$ 34,995.00

BID FORM (page 2)
BOILER MAINTENANCE AND REPAIRS
Bid #22-008

PROPOSAL B: To be charged for non-routine Boiler repairs, services, system installations, and breakdowns.

Boiler Mechanic	\$ <u>93.50</u>	Per hour/per man/straight time
Helper	\$ <u>47.50</u>	Per hour/per man/straight time
Boiler Mechanic	\$ <u>187.00</u>	Per hour/per man/Overtime & Holidays & Emergency
Helper	\$ <u>95.50</u>	Per hour/per man/Overtime & Holidays & Emergency

MATERIALS (if required to be supplied by the contractor) - Percentage of mark-up over certifiable cost of **materials only**, if any 20%%. Percentage of mark-up **cannot** be applied to costs associated with equipment rentals or subcontractors. Contractor agrees to permit periodic audit, at discretion of Board of Education, to certify costs.

Terms below are defined as follows for the purposes of this bid:

Straight time: Monday through Friday 8:00am-4:30pm

Overtime: Work which continues from work which began during straight time or scheduled Saturdays

Scheduled Saturday: Saturday 8:00am-4:30pm scheduled at least 24 hours in advance

Sundays: Midnight Saturday through 8:00am Monday

Holidays: New Year's Day, Presidents' Day, Memorial Day, July 4th, Labor Day, Thanksgiving Day, Christmas Day.

Emergency Response: Any work for which the request is made between 4:00pm and 8:00am weekdays or between 4:00pm Friday and 8:00am Monday and which work is performed during other than "Straight Time" hours

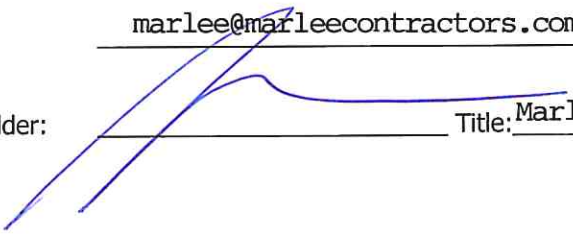
Company Name: Marlee Contractors, LLC Taxpayer ID Number: 22-355-8998

Address: 364 S. Egg Harbor Road

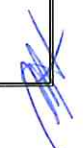
City: Hammonton State: NJ Zip Code: 08037

Telephone: 609-704-9040 Fax: 609-704-9448

Email: marlee@marleecontractors.com

Signature of Bidder:  Title: Marlee Hartline/Member Date: 5/3/21

THIS FORM (2 PAGES) MUST BE COMPLETED, SIGNED AND RETURNED WITH YOUR BID



Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
5 Marlee Contractors LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
364 S Egg Harbor Road

6 City, state, and ZIP code
Hammonton, NJ 08037

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			-					
--	--	--	---	--	--	--	--	--

or

Employer identification number

2	2	-	3	5	5	8	9	9	8
---	---	---	---	---	---	---	---	---	---

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ _____ Date ▶ 5/3/21

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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.

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Examiners of HVACR Contractors

HAS LICENSED

Robert Hartline
364 S Egg Harbor Road
Marlee Contractors
08037
Hammonton NJ 08037

FOR PRACTICE IN NEW JERSEY AS A(N): Master HVACR Contractor

06/10/2020 TO 06/30/2022
VALID

19HC00100000
LICENSEE/REGISTRANT/CERTIFICATION #

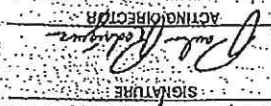

Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of HVACR Contractors
HAS LICENSED
Robert Hartline
Master HVACR Contractor

06/10/2020 TO 06/30/2022
VALID

19HC00100000
Licensee/Registrant/Certificate #


ACTING DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of HVACR Contractor
P.O. Box 17031
Newark, NJ 07101

PLEASE DETACH HERE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors

HAS LICENSED

MARLEE CONTRACTORS LLC
ROBERT HARTLINE
1001 COLUMBIA ROAD
HAMMONTON
EGG HARBOR CITY NJ 08215-4140
FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
MARLEE CONTRACTORS LLC
Electrical Business Permit

03/29/2021 TO 03/31/2024
VALID

34E301013900
License/Registration/Certificate #

Paul Russo
ACTING DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of Electrical Co
P.O. Box 45006
Newark, NJ 07101

03/29/2021 TO 03/31/2024
VALID

34E301013900
LICENSE/REGISTRATION/CERTIFICATION #

Robert Hartline
Signature of Licensee/Registrant/Certificate Holder

Paul Russo
ACTING DIRECTOR

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors

HAS LICENSED

Robert Hartline
1001 COLUMBIA RD
EGG HARBOR CITY NJ 08215-4140
FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Contractor

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
Robert Hartline
Electrical Contractor

03/29/2021 TO 03/31/2024
VALID

34E101013900
License/Registration/Certificate #

Paul Russo
ACTING DIRECTOR

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of Electrical Co
P.O. Box 45006
Newark, NJ 07101

03/29/2021 TO 03/31/2024
VALID

34E101013900
LICENSE/REGISTRATION/CERTIFICATION #

Robert Hartline
Signature of Licensee/Registrant/Certificate Holder

Paul Russo
ACTING DIRECTOR

PLEASE DETACH HERE

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY
DIVISION OF REVENUE
PO BOX 282
TRENTON, NJ 08646-0282

TAXPAYER NAME:

MARLEE CONTRACTORS, L.L.C.

ADDRESS:

364 S EGG HARBOR ROAD STE 2
HAMMONTON, NJ 08037

EFFECTIVE DATE:

04/24/98

TRADE NAME:

SEQUENCE NUMBER:

0086510

ISSUANCE DATE:

05/18/09

Director
New Jersey Division of Revenue

FORM-BRC

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

Certificate Number
604651

Registration Date: 03/18/2021
Expiration Date: 03/17/2023



State of New Jersey
Department of Labor and Workforce Development
Division of Wage and Hour Compliance
Public Works Contractor Registration Act

Pursuant to N.J.S.A. 34:11-56.48, et seq. of the Public Works Contractor Registration Act, this certificate of registration is issued for purposes of bidding on any contract for public work or for engaging in the performance of any public work to:

Responsible Representative(s):
Robert Hartline, Member

Responsible Representative(s):
Marlee Hartline, Managing Member

Marlee Contractors LLC
2021

Handwritten signature of Robert Asaro-Angelo.

Robert Asaro-Angelo, Commissioner
Department of Labor and Workforce Development

This certificate may not be transferred or assigned and may be revoked for cause by the Commissioner of Labor and Workforce Development.

NON TRANSFERABLE

State of New Jersey



DEPARTMENT OF THE TREASURY
DIVISION OF PROPERTY MANAGEMENT AND
CONSTRUCTION
33 WEST STATE STREET - P.O. BOX 034
TRENTON, NEW JERSEY 08625-0034



NOTICE OF CLASSIFICATION

In accordance with N.J.S.A. 18A:18A-27 et seq (Department of Education) and N.J.S.A. 52:35-1 (Department of the Treasury) and any rules and regulations issued pursuant hereto, you are hereby notified of your classification to do State work for the Department (s) as previously noted.

Aggregate Amount	Trade(s) & License(s)	Effective Date	Expiration Date
\$200,000	C047 -ELECTRICAL license #: 34EB01013900 C032 -HVACR license #: 19HC00100000	08/25/2020 08/25/2020	08/24/2022

- Licenses associated with certain trades are on file with the Division of Property Management & Construction (DPMC).
- Current license information must be verified prior to bid award.
- A copy of the DPMC 701 Form (Total Amount of Uncompleted Projects) may be accessed from the DPMC website at http://www.state.nj.us/treasury/dpmc/Assets/Files/dpmc-27_03_07.pdf.

ANY ATTEMPT BY A CONTRACTOR TO ALTER OR MISREPRESENT ANY INFORMATION CONTAINED IN THIS FORM MAY RESULT IN PROSECUTION AND/OR DEBARMENT, SUSPENSION OR DISQUALIFICATION. INFORMATION ON AGGREGATE AMOUNTS CAN BE VERIFIED ON THE DPMC WEB SITE.

NO MATERIAL CHANGE OF CIRCUMSTANCES

AFFIDAVIT

I, Marlee Hartline being of full age under oath depose and says:

1. I am a(n) owner, partner, shareholder or officer of the company set forth below and am duly authorized to execute this affidavit on its behalf.
2. A statement as to the financial ability, adequacy of plant and equipment, organization and prior experience of [Bidder], as required by N.J.S.A 18A:18A:28 has been submitted to the Department of Treasury within one (1) year preceding the date of opening of bids for this contract.
3. I certify, as required by N.J.S.A. 18A:18A:32 that there has been no material adverse change in the qualifications information of [Bidder] since such statement was submitted to the Department of Treasury except: None.

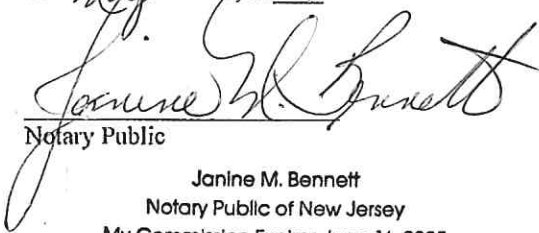
SEAL



TITLE: Marlee Hartline/Member

Marlee Contractors, LLC
COMPANY

Sworn and subscribed
Before me this 3rd day
of May, 2021



Notary Public

Janine M. Bennett
Notary Public of New Jersey
My Commission Expires June 16, 2025





State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF PROPERTY MANAGEMENT AND CONSTRUCTION
33 W. STATE STREET
PO BOX 034
TRENTON, NEW JERSEY 08625-0034

REPLY TO:
TEL: (609) 943-3400
FAX: (609) 292-7651

TOTAL AMOUNT OF UNCOMPLETED CONTRACTS

(This form is to be used with the NOTICE OF CLASSIFICATION when submitting bids to the Department of Education.)

I Certify that the amount of uncompleted work on contracts is \$ 20,000.00 approx.

The amount claimed includes uncompleted portions of all currently held contracts from all sources (public and private) in accordance with N.J.A.C. 17:19-2.13.

I further certify that the amount of this bid proposal, including all outstanding incomplete contracts does not exceed my prequalification dollar limit.



Respectfully submitted,

By Marlee Contractors, LLC

Name of Firm

Signature

Marlee Hartline/Member

Title

364 S. Egg Harbor Road

Business Address

Hammonton, New Jersey 08037

609-704-9040

Phone

Sworn to and subscribed before me This 3rd day of May 20 21

Notary Public

Handwritten signature of Janine M. Bennett

Janine M. Bennett

Notary Public of New Jersey

My Commission Expires June 16, 2025

Handwritten initials

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Required Pursuant To N.J.S.A. 19:44A-20.26

This form or its permitted facsimile must be submitted to the local unit no later than 10 days prior to the award of the contract.

Part I – Vendor Information

Vendor Name:	Marlee Contractors, LLC		
Address:	364 S. Egg Harbor Road		
City:	Hammonton	State:	NJ
		Zip:	08037

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.J.S.A. 19:44A-20.26 and as represented by the Instructions accompanying this form.

	Marlee Hartline	Member
Signature	Printed Name	Title

Part II – Contribution Disclosure

Disclosure requirement: Pursuant to N.J.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$300 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
None			\$

Check here if the information is continued on subsequent page(s)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/17/2021

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 endorsement(s).

PRODUCER M.L. Ruberton Agency LLC 850 S. White Horse Pike P.O. Box 638 Hammonton NJ 08037		CONTACT NAME: Paul Pullia Jr. PHONE (A/C, No, Ext): (609) 561-1200 FAX (A/C, No): (609) 567-9214 E-MAIL ADDRESS: Pjpullia@mlruberton.com															
INSURED Marlee Contractors, LLC DBA: Marlee Mechanical & Electrical 364 South Egg Harbor Road Hammonton NJ 08037-1452		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Republic Franklin Insurance Co.</td> <td>12475</td> </tr> <tr> <td>INSURER B: Utica Mutual Insurance Company</td> <td>25976</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Republic Franklin Insurance Co.	12475	INSURER B: Utica Mutual Insurance Company	25976	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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COVERAGES CERTIFICATE NUMBER: 2020-2021 updated WC REVISION NUMBER:

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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			CPP4970783	7/1/2020	7/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			4960369	7/1/2020	7/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			CULP4970784	7/1/2020	7/1/2021	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	5009035	1/19/2021	1/19/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Evidence of Coverage	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 Paul Pullia Jr/CAP 

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 **AIA**® Document A310™ – 2010

Bid Bond

Bond #CIC 1912799

CONTRACTOR:
(Name, legal status and address)
Marlee Contractors LLC
364 S. Egg Harbor Rd.
Hammonton, NJ 08037

SURETY:
(Name, legal status and principal place of business)
Capitol Indemnity Corporation
P.O. Box 5900
Madison, WI 53705

OWNER:
(Name, legal status and address)
Atlantic City Board of Education
1300 Atlantic Avenue, 5th Floor
Atlantic City, NJ 08401

BOND AMOUNT: \$ Ten Percent of the Attached Bid (10%)

PROJECT:
(Name, location or address, and Project number, if any)
Boiler Maintenance Bid #22-008 FY 2021-2022

ADDITIONS AND DELETIONS:
The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An *Additions and Deletions Report* that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 6 day of , May 2021



(Witness)



(Witness) Debbie Frye,
Surety, Account Executive

Marlee Contractors LLC.
(Contractor as Principal) (Seal)



(Title)

Capitol Indemnity Corporation
(Surety) (Seal)



(Title) Todd A. Stein, Attorney In Fact

CAPITOL INDEMNITY CORPORATION
POWER OF ATTORNEY

CIC 1912799

Bond Number

KNOW ALL MEN BY THESE PRESENTS, That the CAPITOL INDEMNITY CORPORATION, a corporation of the State of Wisconsin, having its principal offices in the City of Middleton, Wisconsin, does make, constitute and appoint

----- MARK LEVINSON; RUTH M. PELL; TODD A. STEIN; KELLEY J. WISOR -----

its true and lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf, as surety, and as its act and deed, any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of

----- ALL WRITTEN INSTRUMENTS IN AN AMOUNT NOT TO EXCEED: \$20,000,000.00 -----

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of CAPITOL INDEMNITY CORPORATION at a meeting duly called and held on the 15th day of May, 2002.

“RESOLVED, that the President, Executive Vice President, Vice President, Secretary or Treasurer, acting individually or otherwise, be and they hereby are granted the power and authorization to appoint by a Power of Attorney for the purposes only of executing and attesting bonds and undertakings, and other writings obligatory in the nature thereof, one or more resident vice-presidents, assistant secretaries and attorney(s)-in-fact, each appointee to have the powers and duties usual to such offices to the business of this company; the signature of such officers and seal of the Company may be affixed to any such power of attorney or to any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking or other writing obligatory in the nature thereof to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any of said officers, at any time.”

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner – Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

IN WITNESS WHEREOF, the CAPITOL INDEMNITY CORPORATION has caused these presents to be signed by its officer undersigned and its corporate seal to be hereto affixed duly attested, this 1st day of January, 2020.

Attest:

RJ Byrnes
Ryan J. Byrnes
Senior Vice President,
Chief Financial Officer and Treasurer
Suzanne M Broadbent
Suzanne M. Broadbent
Assistant Secretary



CAPITOL INDEMNITY CORPORATION

John L Sennott Jr.
John L. Sennott, Jr.
Chief Executive Officer and President

STATE OF WISCONSIN }
COUNTY OF DANE } S.S.:

On the 1st day of January, 2020 before me personally came John L. Sennott, Jr., to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is Chief Executive Officer and President of CAPITOL INDEMNITY CORPORATION, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order.



David J. Regele
David J. Regele
Notary Public, Dane Co., WI
My Commission Is Permanent

STATE OF WISCONSIN }
COUNTY OF DANE } S.S.:

I, the undersigned, duly elected to the office stated below, now the incumbent in CAPITOL INDEMNITY CORPORATION, a Wisconsin Corporation, authorized to make this certificate, DO HEREBY CERTIFY that the foregoing attached Power of Attorney remains in full force and has not been revoked; and furthermore, that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at the City of Middleton, State of Wisconsin this 6th day of May, 2021



Andrew B. Diaz-Matos
Andrew B. Diaz-Matos
Senior Vice President, General Counsel and Secretary

CAPITOL INDEMNITY CORPORATION
BALANCE SHEET
December 31, 2020

Admitted Assets

Cash and invested assets:	
Bonds	\$ 540,050,945
Common stocks	136,823,713
Cash, cash equivalents and short-term investments	51,386,666
Other invested assets	74,185
Receivables for securities	7,139
Total cash and invested assets	<u>728,342,648</u>
Investment income due and accrued	3,025,223
Uncollected premiums and agents' balances in course of collection	43,072,989
Deferred premiums, agents' balances and installments booked but deferred and not yet due	9,868,137
Amounts recoverable from reinsurers	5,847,405
Other amounts receivable under reinsurance contracts	97,063
Current federal and foreign income tax recoverable and interest thereon	363,716
Net deferred tax asset	15,146,078
Electronic data processing equipment and software	1,890,377
Receivables from parent, subsidiaries and affiliates	39,560
Total admitted assets	<u>\$ 807,693,196</u>

Liabilities and Surplus as Regards Policyholders

Liabilities:	
Losses	\$ 275,220,050
Reinsurance payable on paid losses and loss adjustment expenses	17,552,032
Loss adjustment expenses	54,378,410
Commissions payable, contingent commissions and other similar charges	434,788
Other expenses (excluding taxes, licenses and fees)	8,988,870
Taxes, licenses and fees (excluding federal and foreign income taxes)	580,794
Unearned premiums	136,642,443
Advance Premium	5,481
Ceded reinsurance premiums payable (net of ceding commissions)	4,835,724
Amounts withheld or retained by company for account of others	11,806,760
Provision for reinsurance	208,000
Payable to parent, subsidiaries and affiliates	16,308,674
Payable for securities	313
Other liabilities	561,483
Total liabilities	<u>527,523,822</u>
Surplus as regards policyholders:	
Common capital stock	4,201,416
Gross paid in and contributed surplus	103,923,753
Unassigned funds (surplus)	172,044,205
Surplus as regards policyholders	<u>280,169,374</u>
Total liabilities and capital and surplus	<u>\$ 807,693,196</u>

I, John L. Sennott Jr., CEO and President of Capitol Indemnity Corporation do hereby certify that to the best of my knowledge and belief, the foregoing is a full and true statutory Statement of Admitted Assets and Liabilities, Capital and Surplus of the Operation at December 31, 2020, prepared in conformity with the accounting practices prescribed by the Insurance Department of the State of Wisconsin. IN WITNESS WHEREOF, I have set my hand and affixed the seal of the Corporation at Middleton, Wisconsin.

John L. Sennott Jr.

John L. Sennott Jr
CEO & President



NEW JERSEY SURETY DISCLOSURE STATEMENT AND CERTIFICATION
(pursuant to N.J.S.A. 2A: 44-143)

Capitol Indemnity Corporation surety on the attached bond, hereby certifies the following:

1. The surety meets the applicable capital and surplus requirements of R.S. 17:17-6 or R.S. 17:17-7 as of the surety's most current annual filing with the New Jersey Department of Banking & Insurance.
2. The capital and surplus, as determined in accordance with the applicable laws of New Jersey, of the surety participating in the issuance of the attached bond is in the following amounts as of the calendar year ended December 31, 2018:

<u>Surety Company</u>	<u>Capital and Surplus</u>
Capitol Indemnity Corporation	\$268,403,079

which amounts have been certified as indicated by the certified public accountants, Ernst & Young LLP, 155 N. Upper Wacker Drive, Chicago, IL 60606, and are included in the Annual Statements on file with the New Jersey Department of Banking & Insurance, 20 West State Street, PO Box 325, Trenton, NJ 08625-0325.

3. Capitol Indemnity Corporation has a current rating from A.M. Best Company of A (Excellent).
4. Capitol Indemnity Corporation has received from the United States Secretary of the Treasury a Certificate of Authority pursuant to 31 U.S.C. §9305, the underwriting limitation per bond established therein on July 1, 2018 is \$21,699,000.
5. The amount of the bond to which this statement and certification is attached is

\$110,000.00

Certificate

I Todd A. Stein as Attorney-In-Fact for Capitol Indemnity Corporation
(Name of Agent)

a corporation admitted in New Jersey, DO HEREBY CERTIFY that, to the best of my knowledge, the foregoing statements made by me are true and ACKNOWLEDGE that if any of those statements are false, this bond is VOID.

Todd A. Stein
(Signature of Certifying Agent)

Todd A. Stein
(Printed Name of Certifying Agent)

Attorney-In-Fact
(Title of Certifying Agent)

May 6, 2021
(Date)

CONSENT OF SURETY

KNOW ALL MEN BY THESE PRESENTS, that for and consideration of the sum of \$ _____, lawful money of the United States of America, the receipt whereof is hereby acknowledged, paid the undersigned, and for other valuable consideration, the

Capitol Indemnity Corporation

(Name)

P.O. Box 5900, Madison, WI 53705

(Address)

existing under the laws of the State of New Jersey and licensed to do business in the State of New Jersey certifies and agrees, that if the contract for (Board of Education) Atlantic City Board of Education for: (Project) Boiler Maintenance Bid #22-008 FY 2021-2022

is awarded to (Bidder) Marlee Contractors, LLC

the undersigned will execute the bond or bonds as required of the contract documents and will become Surety in the full amount set forth in the contract documents for the faithful performance of all obligations of the Bidder, provided however, that this commitment shall expire sixty (60) days from the bid opening, unless agreed upon by Bidder, Owner and Surety to be extended.

Signed, sealed and dated this 6th day of May, 2021.

Capitol Indemnity Corporation

(Name)

By

Todd A. Stein

(Name) Todd A. Stein
Attorney in Fact

(To be accompanied by the usual proof of Authority of Officers of officers of the Surety Company to execute same)