



20120541  
**Blanket Contract**

### City of Springfield Blanket Contract Tracer Document

The purpose of this document is to provide continuous responsibility for the custody of **BLANKET CONTRACTS** during the processing period.

**INSTRUCTIONS:** Upon receipt, please initial and write in the date of receipt. When your department has approved and signed the blanket contract, please initial and date in the forwarding section and deliver to the next department.

DEPARTMENT	DATE RECEIVED		DATE FORWARDED TO NEXT DEPT.	
	Initials	Date	Initials	Date
Office of Procurement			MM	10/31/13
Housing	KB	10/7/13	KB	10/7/13
City Comptroller	MM	10/15/13	MM	10/17/13
Law	MM	10/18	MM	10/18
CAFO	MM	10/31/13	MM	11/1
Mayor	MM	10/11/13	MM	11.1.13
Office of Procurement				

Vendor No.: 5380      Blanket Contract No.: 20120541      Blanket Contract Date: 10/14/12

Blanket Contract Amt.: \$1,343,922.00      Issue Date: 11/14/12      Renewal Date:

Appropriation Code1:  
Appropriation Code2:  
Appropriation Code3:  
Appropriation Code4:

Description of Funding Source:

Bid No.: 12-141      Requisition No.:      PO No.:

Vendor Name: ASSOCIATED BUILDING WRECKERS, INC.

Blanket Contract Type: RENEWAL

Blanket Contract Purpose: DEMO/DECONSTRUCTION OF VARIOUS PROPERTIES

Originating Dept.: OFFICE OF HOUSING

Expiration Date: 10/13/2014      Amendment Date:      Extension Date:

TYPE OF DOCUMENT (Please select at least one):

- New     
 Renewal     
 Amendment     
 Extension



August 14, 2013

Associated Building Wreckers, Inc.  
352 Albany Street  
Springfield, MA 01105

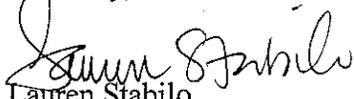
ATTN: Andrew Mirkin, Pres.

SUBJECT: Renewal of BC# 20120541-Services: Demolition/Deconstruction of Various Abandoned Properties for the City of Springfield-Office of Housing - \$1,343,922.00.

The City of Springfield – Office of Procurement, on behalf of the Office of Housing is hereby exercising its option to renew the third and final year of a three year agreement for the above referenced contract for the period of October 14, 2013- October 13, 2014.

Please sign all copies of this renewal letter and return to the Office of Procurement along with the enclosed Tax Affidavit Certificate and a current Certificate of Liability Insurance. And the enclosed bonds. Copies of all documents will be forwarded to you after securing all the required signatures.

Sincerely,

  
Lauren Stabilo  
Chief Procurement Officer

*[Handwritten signature]*

ASSOCIATED BUILDING WRECKERS, INC.  
SIGNED THIS 14 DAY OF August 2013

*[Handwritten signature]*

LAW DEPARTMENT  
SIGNED THIS 17<sup>th</sup> DAY OF OCT 2013

*we* APPROVED AS TO APPROPRIATION: *N/A*

*[Handwritten signature]*  
OFFICE OF THE COMPTROLLER  
SIGNED THIS 17<sup>th</sup> DAY OF October 2013

APPROVED BY:

*[Handwritten signature]*  
OFFICE OF HOUSING DIRECTOR  
SIGNED THIS 7<sup>th</sup> DAY OF October 2013

APPROVED BY:

*[Handwritten signature]*  
DOMENIC J. SARNO, MAYOR  
SIGNED THIS 1<sup>st</sup> DAY OF Nov 2013

REVIEWED BY:

*[Handwritten signature]*  
CAFO  
SIGNED THIS 1 DAY OF Nov 2013

TAX CERTIFICATION AFFIDAVIT FOR CONTRACTS

Individual Social Security Number, State Identification Number, Federal Identification Number, Company: Associated Building Wreckers Inc., P.O. Box (if any): Street Address Only: 352 Albany Street, City/State/Zip Code: Springfield Ma 01105, Telephone Number: 413-732-2179, Fax Number: 413-734-6224, List address(es) of all other property owned by company in Springfield: Please Identify if the bidder/proposer is a: Corporation [X], Individual, Partnership, Limited Liability Company, Limited Liability Partnership, Limited Partnership.

You must complete the following certifications and have the signature(s) notarized on the lines below. Any certification that does not apply to you, write N/A in the blanks provided.

FEDERAL TAX CERTIFICATION

I, Andrew Wickin (authorized agent) certify under the pains and penalties of perjury that ADW Inc (Bidder/Proposer) to my best knowledge and belief, has/have complied with all United States Federal taxes required by law.

ADW Inc Bidder/Proposer/Contracting Entity, [Signature] Authorized Person's Signature, Date: 8-14-13

CITY OF SPRINGFIELD TAX CERTIFICATION

I, Andrew Wickin (authorized agent) certify under the pains and penalties of perjury that ADW Inc (Bidder/Proposer) to my best knowledge and belief, has/have complied with all City of Springfield taxes required by law (has/have entered into a Payment Agreement with the City).

ADW Inc Bidder/Proposer/Contracting Entity, [Signature] Authorized Person's Signature, Date: 8-14-13

COMMONWEALTH OF MASSACHUSETTS TAX CERTIFICATION

Pursuant to M.G.L. c. 62C §49A, I, Andrew Wickin (authorized agent) certify under the pains and penalties of perjury that ADW Inc (Bidder/Proposer) to my best knowledge and belief, has/have complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

ADW Inc Bidder/Proposer/Contracting Entity, [Signature] Authorized Person's Signature, Date: 8-14-13

Notary Public

STATE OF Massachusetts, 8-14, 2013

County of Hampden ss.

Then personally appeared before me [name] Andrew Wickin [title] President of [company name] ADW Inc, being duly sworn, and made oath that he/she has read the foregoing document, and knows the contents thereof, and that the facts stated therein are true of his/her own knowledge, and stated the foregoing to be his/her free act and deed and the free act and deed of [company name] ADW Inc.

Notary Public

My commission expires: 3-12-2015

YOU MUST FILL THIS FORM OUT COMPLETELY AND, SIGNATURES MUST BE NOTARIZED ON THIS FORM AND YOU MUST FILE THIS FORM WITH YOUR BID/CONTRACT. TAX AFFIDAVITS THAT ARE NOT SIGNED AND NOTARIZED WILL BE REJECTED.



Surety Bonds Since 1904

**International Fidelity**

INSURANCE COMPANY

800 Hingham Street, Suite 205S  
Rockland, MA 02370  
(781) 871-8980  
Fax: (781) 871-5430

TO BE ATTACHED TO AND FORM A PART OF:

BOND #: NEIFSU0578185

EFFECTIVE DATE: November 4, 2011

PROJECT: Services: Demolition/Deconstruction of Various Abandoned Properties  
Throughout the City of Springfield, MA

OBLIGEE: City of Springfield  
36 Court Street  
Springfield, MA 01103

PRINCIPAL: Associated Building Wreckers,  
352 Albany Street Inc.  
Springfield, MA 01105

IT IS HEREBY UNDERSTOOD AND AGREED THAT THE ABOVE CAPTIONED BOND IS AMENDED AS FOLLOWS:

The term of the bond is extended to cover the period: November 4, 2013 to November 4, 2014.

NOTHING HEREIN CONTAINED SHALL VARY, ALTER OR EXTEND ANY PROVISION OR CONDITION OF THIS BOND EXCEPT AS HEREIN EXPRESSLY STATED.

THIS RIDER IS EFFECTIVE: 8/15/13  
(MONTH, DAY, YEAR)

SIGNED AND SEALED: 8/15/13  
(MONTH, DAY, YEAR)

Associated Building Wreckers, Inc.  
PRINCIPAL

BY

City of Springfield, MA  
OBLIGEE: **Domenic J. Sarno, Mayor**

BY

INTERNATIONAL FIDELITY INSURANCE COMPANY BY Lisa Kurtz  
SURETY ATTORNEY-IN-FACT Lisa Kurtz

Approved as to Form:

City Solicitor

# POWER OF ATTORNEY

## INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of Pennsylvania, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

MICHAEL F. METAYER, LISA KURTZ

Avon, CT

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such Instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 15th day of August, 2000:

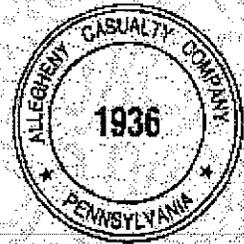
"RESOLVED, that (1) the President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 12th day of March, 2012.



STATE OF NEW JERSEY  
County of Essex

ROBERT W. MINSTER  
Executive Vice President/Chief Operating Officer  
(International Fidelity Insurance Company)  
and President (Allegheny Casualty Company)



On this 12th day of March 2012, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY; that the seals affixed to said Instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires Mar. 27, 2014

### CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this 15th day of August 2013

MARIA BRANCO, Assistant Secretary

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/03/2013

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 People's United Ins. Agency MA 1391 Main Street, 3rd Floor PO Box 4860 Springfield, MA 01101	CONTACT NAME: <b>Mary Hoth</b>
	PHONE (A/C, No, Ext): <b>413 781-6871</b>
INSURED Associated Building Wreckers, INC 352 Albany ST Springfield, MA 01106	FAX (A/C, No):
	E-MAIL ADDRESS: <b>mary.hoth@peoples.com</b>
INSURER(S) AFFORDING COVERAGE	
INSURER A:	<b>Nautilus Insurance Company</b>
INSURER B:	<b>Great Divide Insurance Company</b>
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES      CERTIFICATE NUMBER:      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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Blanket per Written Contract GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJE CT <input type="checkbox"/> LOC	X	X	ECPO1529724	03/15/2013	03/16/2014	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMPROP AGG \$3,000,000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			PD DED: 10,000			\$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10000	X	X	FFX1529725	03/15/2013	03/15/2014	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WCA1548165	02/01/2013	02/01/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <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
A	Pollution Liabili	X	X	ECPO1529724	03/15/2013	03/15/2014	\$1,000,000 Ded. \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Blanket Additional Insured status per Nautilus ECPO1001 (10/06); Blanket Waiver of Subrogation per Nautilus ENV2004 (09/06). Coverage is primary and non-contributory.  
 Contract #20120541 On-call demolition for City of Springfield

CERTIFICATE HOLDER City of Springfield Office of Procurement 36 Court ST, RM 405 Springfield, MA 01103	CANCELLATION 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 