TECHNICAL SECTION 1

T-1A – Introduction of Project Team

Founded in 2010, RLS Construction Group (RLS) has considerable experience managing governmental projects that have a variety of different subcontractor and in-house trades personnel involved. RLS has executed or is in the process of executing over \$65 million in relevant construction and design/building projects of varying size, scope, complexity and value. It is our business practice to provide our clients with quality management and workmanship, adherence to timelines and schedules, best practice quality control & safety plans and compliance to all project documents. By following this business practice, we excel at delivering projects on time, within budget and provide our clients with best value projects, generating repeat customers time and time again.

The cornerstone to successful integration of multiple in-house trades' personnel and subcontractors' work is effective scheduling. Effective scheduling can have a project running like clockwork, regardless of how many subcontractors are involved. However, ineffective scheduling can result in work stoppages, poor quality, confusion and, ultimately, project failure. Each of the construction contracts our staff has been involved with over the past years has involved coordinating the work of multiple subcontractors. Many of those contracts also involved the coordination of multiple, new construction and renovation projects at the same time. RLS has created systems to respond to contracts of this nature and allow us to excel in the performance of these contracts.

Because of the 100+ construction contracts and task orders RLS has completed over the past 10 years, we have extensive experience in coordinating the work of multiple disciplined subcontractors and in-house trade workers. The Project Manager and Superintendent will be responsible for coordinating the activities of all the on-site crews. Support for this subcontractor coordination will also be supplied by our scheduling department. We first schedule preconstruction meetings with all the subcontractors and the RLS for a particular project or task order. During these meetings, the team determines the level and scope of organization required among the various subcontractors. Once a project is in the very early stages, the RLS meets with the subcontracting team to discuss and coordinate schedules, questions or concerns. Project subcontractors are issued a three (3) week notice for pre-start of the critical construction coordination activities. Once construction begins, the team holds weekly meetings and progress schedules are continually updated and distributed. In addition, subcontractors are required to submit daily reports to ensure adequate manpower supervision and that appropriate materials are received on time to the appropriate project supervisors at the project sites. Because of these subcontractor coordination efforts, we are able to manage an efficient flow of work for each project or task order.

Our present and past corporate experience includes many instances of our participation in the design, renovation, and new construction of complex projects that have included the same characteristics as those that may become a part of this project. These characteristics include:

• Contract value ranging from under \$2,000 to over \$5 million

- Design/Build Projects
- Completed on/ahead of schedule
- New Building Construction
- Repair & Alteration of Various Facilities
- Renovation of Occupied Medical Facilities
- Disease Infection Control Requirements
- Demolition of Facilities & Hazardous Material Abatement
- Major Sitework- Asphalt & Concrete Paving
- Structural Repair & Upgrade
- Medical Gas Systems
- Complex Electrical Systems
- Mechanical System Installation, Repair and Alteration

You will find several outstanding qualities that run through our organization: professional, motivated, proactive, detailed-oriented, qualified, experienced, empowered, honest, respectful and fair. We are people you can work with that want your project to be successful based on your priorities. The combination of personal commitment and corporate operational strategy creates a business environment for success: commitment to customer satisfaction - quality materials and installation -a safe work- site-and a high standard of professional service.

With our significant experience in government construction and renovation work, we clearly understand that "TEAMWORK" is important to the success of a project. RLS builds a collaborative relationship on all of our projects. On each of our projects we provide a team of experienced professionals who work with the entire Government team to provide the solutions for a successful project. Understanding the challenges facing all team members will develop the foundations of our management plan. We will prioritize the critical responsibilities of each Team member and develop a clear outline and understanding of these activities. RLS will provide the following benefits to the Government:

- Design/Build capabilities and successful past performance
- Ability to provide leadership in partnering
- Fast track construction on time completion
- Superior Disease Infection Control and Quality Control Programs
- Dedicated Project Managers

The RLS key management staff in the home office remains in constant touch with the project team, monitoring their efforts and making periodic site visits to ensure that the project or contract is progressing to the government's satisfaction. Our key management staff is headed up by Mr. Robert Schopfer, President and Mr. Paul Woolsey, Project Manager.

Our streamlined corporate structure is specifically designed to meet the needs of multiple task orders and simultaneous contracting by providing both home office support and all necessary on-site staffing for any anticipated workload. In the RLS Home Office, we have an extensive number of highly qualified individuals in the construction and design fields, as well as the organizational structure to respond to the fast pace of task order contracts. We have built and refined our

organizational structure specifically to allow our home office executive staff the opportunity to respond to the unique demands of these highly interactive contract types. The experience of our executives, coupled with the talents of our in-house construction professionals and our engineering consultants, gives us the capability to perform a wide variety of multiple simultaneous task orders and consistently deliver effective solutions and high-quality projects for every customer.

Our Home Office executive-level personnel schedule visits to each of our contract sites no less than monthly. During these visits, the home office will review the progress of ongoing work, upcoming work, schedules, staffing needs, quality and safety issues, subcontractor response and efforts, budget and the overall project management. During these visits, the Operations Manager and the home office will also determine any upcoming needs of the RLS.

Program Manager:

The RLS Program Manager, Robert Schopfer, will have the overall responsibility for the successful delivery of the project. Mr. Schopfer will be heavily involved in the project, spending upwards of 40% of his time in the preconstruction phase and 60% in the construction phase. He will attend the construction progress meetings and will be ultimately responsible for the client's total satisfaction. The Program Manager is responsible for overall management and success of multiple, simultaneous task orders, maintaining master schedules, signing purchase orders, performing some estimating, managing RLS site personnel and representing RLS with contract owners and maintaining all necessary contract documentation. Mr. Schopfer is responsible for the overall success of the individual task orders. He functions as a coordinator between the task orders and the resources available to complete the individual task orders. Mr. Schopfer has the authorization to sign contracts on behalf of the corporation, mandate company policy for the benefit of our customer, negotiate task orders and acquire any support necessary to complete the work at hand. Mr. Schopfer also prepares submittals, initiates payroll functions (which will be carried out by the accounting department in our home office), prepares the contract budget, conducts task order planning and scheduling and ensures contract compliance at the task level.

The Program Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and sub- professionals and will direct and expedite the work.
- Coordinate and manage the construction team.
- Participate in establishing the project schedule and man-hour budget requirements.
- Is aware of the client's objectives and must satisfy the client's goals.
- Develop the master project schedule.
- Responsible for completing the project on time and on budget.
- Authority to negotiate change orders with the client.
- Hold team meetings on progress and problems for timely resolution.

Project Manager:

The proposed Project Manager, Paul Woolsey, will be responsible for the overall success of the individual task orders. The Project Manager's authority comes directly from our home office and the on-site staff will report directly to the Project Manager. The Project Manager will estimate task orders, schedule the work, hire key subcontractors, prepare submittals, initiate payroll functions

(which will be carried out by the accounting department in our home office), prepare the contract budget, conduct task order planning, scheduling and ensure contract compliance at the task level. The Project Manager reports directly to the Program Manager. The Project Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and sub- professionals and will direct and expedite the work.
- Coordinate and manage the construction team.
- Participate in establishing the project schedule and man-hour budget requirements.
- Is aware of the client's objectives and must satisfy the client's goals.
- Develop the master project schedule.
- Estimating
- Subcontractor Procurement
- Responsible for completing the project on time and on budget.
- Authority to negotiate change orders with the client.
- Hold team meetings on progress and problems for timely resolution.

Quality Control Manager:

The RLS Quality Control Manager, Michael Spitler, will manage the inspection, recording and review process for the project's quality issues on a full-time basis. He will have day-to-day responsibility for management of all field construction quality issues. Non-conforming items will be issued to the team for review and resolution. Mr. Spitler will be responsible to the client and RLS for the overall quality control of this project. He will have complete authority and responsibility to shut the job down if quality standards are not being met.

The Quality Control Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and subcontractors on quality issues. Will direct and expedite the QC Program.
- Be involved early in the Preconstruction Phase and the establishment of all Quality Control requirements.
- Authority to make immediate corrective action if quality standards are not being met.
- Review and approve all submittals and shop drawings.
- Ensure that all required testing is being performed.
- Inspect work performed for contract compliance on a daily basis.
- Conduct the three-phase control inspection for each definable feature of work.
- Record and submit the Daily Construction Quality Report (DCQR) to the Government on a daily basis.
- Maintain as-built drawings current with work performed.
- Coordinate inspections and tests performed by the CQC Organization.
- Supervise the inspection of material and/or equipment to be incorporated into the work.

Project Superintendent:

The RLS Site Superintendent (TBD) will be responsible for the field activities. The Superintendent responsibilities will include coordination of the work sequence and details, quality assurance, safety, labor and equipment control, site utilization, temporary utilities and maintaining the progress schedule.

The Superintendent will report to the Project Manager and will perform the following duties and have the following authority:

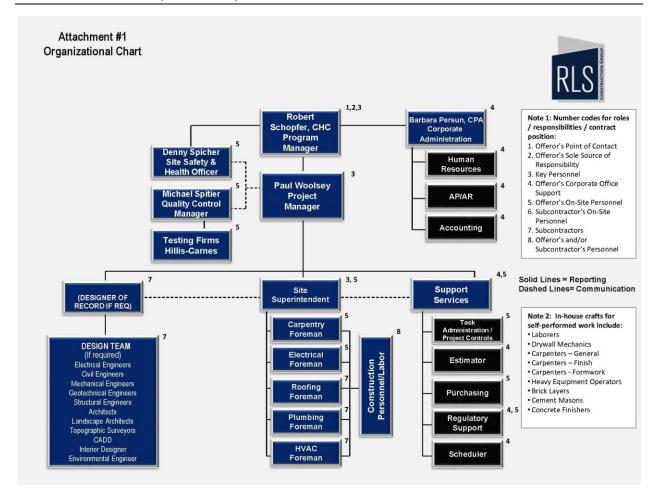
- Authority and control for RLS' subcontractors and company trade workers.
- Be involved in the planning of the project to determine crane and hoist locations.
- Determine laydown and staging areas for office trailers and materials.
- Responsible for project layout and elevation control.
- Direct and expedite the material deliveries to the project site.
- Authority to shut the job down if quality and safety standards are not being met.
- Determine project fence location and will be responsible for site security.
- Assist project management with the preparation of the project Quality Control Plans.
- Control both construction and non-construction personnel movement.
- Maintain as-built drawings current with work performed.

Site Safety Health Officer (SSHO):

The RLS SSHO, Denny Spicher, will be responsible for the safety of all field activities. He will have day-to-day responsibility for management of safety for all field operations. He will have the authority to shut down any work activities if any safety standards are violated. He will be responsible to the client and RLS for the overall safety of this project and has complete authority and responsibility to shut the job down if OSHA Safety Standards are not being met.

Mr. Spicher will report to Robert Schopfer, President, and will perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and all subcontractors on Safety issues. Will direct and expedite the approved Accident Prevention Plan.
- Authority to shut the job down if OSHA Safety Standards are not being met.
- Conduct preparatory Activity Hazard Analysis on-site for each phase of work.
- Perform random drug testing.
- Be the dedicated trade contractor safety representation.
- Complete the trade contractor safety plan review.
- Hold regularly scheduled safety meetings.
- Have special access or badging requirements.
- Be responsible for the development of site-specific existing safety procedures or standards (HAZCOM Plan).
- Be responsible for the development of jobsite reporting procedures and monitoring procedures.



RLS Construction Group proposes to use the following subcontractors:

- Window Specialists, Inc. or B&G Glass (Storefront Windows and Glass)
- B&G Glass (Storefront Windows and Glass)
- Postupak Painting (Painting)
- Eastern Roofing Systems (Roof) or Detwiler Roofing (Roof)
- SimmCon Systems (Drywall)

Window Specialists, B&G Glass, Eastern Roofing Systems and Detwiler Roofing are new subcontractors to RLS Construction Group. You will find their Exhibit F information under Section T-1C.

Postupak Painting has been a subcontractor to RLS since 2017. Postupak was our painting subcontractor on the Carbondale Readiness Center project that we have submitted as a reference project. This subcontract total was \$53,776. They also performed on our project Bethlehem Township Municipal Building (\$8,500) and are currently on our SSA Hazleton project that we have submitted as a reference project. Their subcontract for this project is \$12,500. All of these projects were managed by Paul Woolsey. You will find their Exhibit F information under Section T-1C.

SimmCon Systems has been a subcontractor to RLS since 2016. SimmCon provided drywall on many projects for us, including the Carbondale Readiness Center that we have submitted as a reference project. This subcontract total was \$67,000. Paul Woolsey was project manager for this project, and you will find their Exhibit F information under Section T-1C.

Please note that we have listed two subcontractors for some items. This is due to quotes being received at the last minute and we wanted to pre-qualify each sub.

UNDERSTANDING OF SCOPE OF WORK

RLS understands that this project is a phased project and that portions are in secure areas. The project begins by removing and replacing roofing systems in sequence 1. Once abatement has concluded we will begin with Sequence 2, where we will remove non-asbestos ceiling systems and bulk heads. Our plan is to stay ahead of our window subcontractor in removing the old window systems and security screens, so as not leave any openings incomplete. While this process is taking place, we will begin the chase and rooftop unit structural framing. Once the duct installation and/or sprinkler system is complete we can begin metal framing for chases and bulkheads, as well as the completion of the masonry chases and masonry window infills at duct locations. As the overhead rough-ins are beginning we can start installation of the gypsum board suspension systems. Once overhead is done is specific areas, we can begin abuse resistant drywall, followed by installation of agency supplied tile flooring and new base. The project concludes with painting of new drywall and masonry finishes, as well as patched areas. The painting of the security screens can progress as the windows are being replaced, allowing for a secure and safe work site. These will be repetitive steps per sequence until project is complete.

UNDERSTANDING OF MULTI-PHASE PROJECTS

Construction can be placed as a series of stages or phases, rather than on continuous process. This can be useful for clients where a complex sequence of events needs to be followed (such as on densely occupied or complex site), or where there are a number of distinct components to the works, particularly for clients who are seeking to maintain some level of during construction and so wish to minimize disruption. In such cases, the project works can be divided into a series of smaller projects, spaced out over a period of months or even years.

Construction projects can be phased:

- By work category: Every part of a particular type of work is completed as part of one phase.
- By section: Dividing the project into different sections and completing them as separate projects.
- By partial completion: For example, the entire shell is built and the interior finished in separate phases.

Some of the advantages of phased construction include:

- Lower initial investment and so less initial risk.
- Construction costs can be spread over a longer time period.
- Income can be generated throughout the construction period.
- The ability to continue to occupy a site throughout the development.
- A smaller scope of works can result in a shorter construction schedule for key parts of the development.
- It can enable clients to continue to make changes based on response to the initial phases, market conditions and so on.
- Different parts of the works can be procured in the way most suited to them.

Some of the disadvantages of phased construction include:

- As different work phases will be spread out, the project overall will take longer.
- The costs overall may also be higher, as the works take longer, inflation is likely to have a greater impact, and it is not as possible to deliver economies of scale.
- The opportunity to make design changes may lead to scope creep.
- Maintaining business operations while construction is proceeding may be difficult.
- The possibility that delays in one part of the works will impact on other phases.

Particular care is required in relation to:

- Logistics on site when different sections are in the possession of different parties.
- The protection of completed sections from ongoing work.
- The provision of appropriate insurance at all times for parts of the site.
- The adoption of appropriate health and safety measures to deal with risks resulting from occupation of areas adjacent to, or only accessible through ongoing construction works.
- The provision of appropriate security measures.
- Continuity of systems such as building services.

Project No. DGS C-0503-0023 Phase 1 Rebid HVAC Replacement, Danville State Hospital General Construction (.1 Contract)

Where all the works are procured under a single contract, phasing can be allowed for by sectional completion clauses. These allow different completion dates for different sections of the works. RLS Construction Group has completed numerous phased projects. We have given those examples as part of Section T-1C Qualifications, Experience and Past Performance.

UNDERSTANDING OF SECURED PROJECTS

RLS Construction Group is primarily a Federal Contractor. We hold a multi-year contract with the General Services Administration and have worked at multiple Social Security Administration Buildings where clearances are required. We also perform work for the Air National Guard at Harrisburg International Airport where clearances are required, along with daily check-in and searches. We have also performed projects at the VA Medical Centers in their secure floors (psychiatric wards) where we have had to project a site security personnel that oversaw the safety of our staff from patients.

TECHNICAL SECTION 1

T-1B – Prime Contractor Information

APPENDIX E PRIME CONTRACTOR QUALIFICATION STATEMENT COVER SHEET

DGS Project Name HVAC Replacement, Danville State Hospital
DGS Project Number C-0503-0023 Phase 1 Rebid1 General Construction
Check One: Corporation, Partnership, Individual, Joint Venture, X_ Other LLC
Name of Firm RLS Construction Group LLC
Address 405 St. John's Church Road, Suite 106 Camp Hill, PA 17011
Principal Office 405 St. John's Church Road, Suite 106 Camp Hill, PA 17011
Owner or Authorized Representative Robert L. Schopfer, President/CEO
APPENDIX E - SECTION 1 – INFORMATION ON FIRM
1.1 Background Information

c) Provide an <u>Attachment 1</u> to this Qualifications Statement identifying all jurisdictions in which the firm is licensed or otherwise qualified to do business. List and provide copies of any business or trade licenses, certificates or registrations (to the extent that they apply to the Contract Work) held by the firm.

b) How many years has the firm been doing business in proposed contract field? 10

Under what former names has the firm conducted business? N/A

RLS Construction Group holds the following licenses and/or registrations:

• Commonwealth of Pennsylvania – Contractor

a) How many years has the firm been in business? 10

- Pennsylvania Department of General Services Small Business
- Pennsylvania Department of General Services Small Diverse Business
- Service Disabled Veteran Owned Small Business

d)	If the firm is a corporation, provide the following information:
	Date of incorporation
	State of incorporation
	President's name
	Vice-President's name(s)
	Secretary's name
	Treasurer's name
e)	If the firm is a partnership, provide the following information:
	Date of formation
	Type of partnership
	Names of partners
f)	If the firm is individually owned, provide the following information:
	Date of formation
	Name of owner
g)	If the form of the firm is other than those listed above, describe it and name the principals
	LLC Date: June 2010 State of Pennsylvania Robert L. Schopfer

APPENDIX E - SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019	\$ 6,868,765
Year 2018	\$ 8,559,518
Year 2017	\$ 11,980,552

b) Identify the percentage of work on similar projects the firm typically performs with its own work force:

At a minimum, RLS Construction Group performs at least 15% of the project with our employees.

c) List the categories of work that the firm normally performs with its own forces on similar projects.

RLS Construction Group self-performs selective demolition, infection control, dust control, general carpentry, door and hardware installation, framing, drywall, acoustical ceiling, painting, concrete and masonry infills.

2.2 Project Experience and References

Submit as **Attachment 2** to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects that are similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- i. Name of project, type of project and location
- ii. Description of the project and relevance of work to the Contract Work
- iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e-mail address.
- iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- vi. As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 3</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1:	2019	0.802
Year 2:	2018	0.790
Year 3:	2017	0.764

b) Provide the firm's Total Lost Workday Incidence Rate (LWDIR) for the past three years, beginning with the most recent year available:

Year 1:	2019	0
Year 2:	2018	0
Year 3:	2017	0

*LWDIR Rate = Number of Lost Time Injuries & Illnesses x 200,000 ÷ Total Hours Worked

c) Provide the firm's Recordable Incidence Rate (RIR) for the past three years:

Year 1:	2019	0
Year 2:	2018	0
Year 3:	2017	0

^{*}RIR Rate = Number of Injuries x 200,000 ÷ Total Hours Worked

d) Provide in an <u>Attachment 4</u> to this Qualifications Statement a list of any health or safety citations issued by federal or state agencies for serious or willful violations issued in the past 3 years. Include a separate statement for any such violations and include the citation number, a brief description of the violation and the amount of penalty, if any, for each violation and current status of violation.

APPENDIX E - SECTION 3 - REQUIRED DISCLOSURES

The firm shall answer the following questions with regard to the past three (3) years. If any question is answered in the affirmative, the firm shall submit in an <u>Attachment 5</u> to this Qualifications Statement, for each affirmative answer, a written explanation which shall provide details concerning the matter in question, including applicable dates, locations, names of projects/project owners and current status of any such matter.

3.1	Has the firm ever been debarred or suspended from doing business with any federal, state or local government agency or private entity?
	Yes No X
3.2	Is the firm currently or has the firm been otherwise prohibited from doing business with any
3.2	federal, state or local government agency or private entity?
	Yes No \underline{X} _
3.3	Has the firm been denied prequalification (not including short listing), declared non-
3.3	responsible, or otherwise declared ineligible to submit bids or proposals for work by any
	federal, state or local government agency or private entity?
2.4	Yes No X
3.4	Has the firm defaulted, been terminated for cause or otherwise failed to complete any project
	that it was awarded?
25	Yes No X
3.3	Has the firm been assessed or required to pay liquidated damages in connection with work
	performed on any project?
2 -	Yes_No_X
3.6	Has the firm had any business or professional license, registration, certificate or certification
	suspended or revoked?
2.7	Yes No X
3.7	Have any liens been filed against the firm as a result of its failure to pay subcontractors,
	suppliers, or workers?
•	Yes_No_X
3.8	Has the firm been denied bonding or insurance coverage or been discontinued by a surety
	or insurance company?
	YesNo_X
3.9	Has the firm been found in violation of any laws, including but not limited to contracting or
	antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a
	final decision of a court or government agency?
	YesNo_ <u>X</u> _
	*Note: information regarding health and safety violations is addressed in a previous section.
3.10	Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?
	Yes No X
3.11	Has the firm been the subject to any bankruptcy proceeding?
	Yes No X_

<u>APPENDIX E - SECTION 4 - REQUIRED REPRESENTATIONS</u>

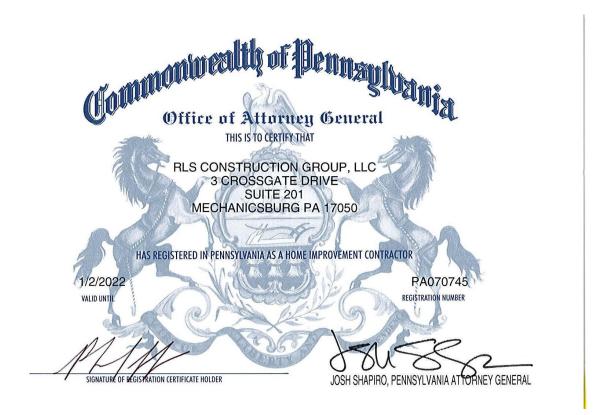
In submitting this Qualifications Statement, along with the representations and authorizations listed on the Proposal Signature page and in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.
- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

ATTACHMENT 1 – JURISDICTIONS / LICENCES / CERTIFICATIONS / REGISTRATIONS

RLS Construction Group is licensed to do business in the Commonwealth of Pennsylvania (certificates attached), Delaware, Maryland and West Virginia.

RLS is also a registered Service-Disabled Veteran Owned Business with the Federal Government.



NOTICE OF SMALL BUSINESS SELF-CERTIFICATION AND SMALL DIVERSE BUSINESS VERIFICATION



The Department is pleased to announce that

RLS CONSTRUCTION GROUP LLC

has successfully completed the Pennsylvania Department of General Services' process for self-certification as a small business under the Commonwealth's Small Business Contracting Program, and is verified as a Small Diverse Business with the following designation(s):

BUSINESS TYPE(s):

Construction Contractor

CERTIFICATION NUMBER: 374863202001-SB-VBE
CERTIFCATION TYPE: SMALL DIVERSE BUSINESS

ISSUE DATE: 01/02/2020 EXPIRATION DATE: 01/02/2022

RECERTIFIED DATE:

Kerry L. Kirkland, Deputy Secretary
Bureau of Diversity, Inclusion & Small Business Opportunities

NOTICE OF SMALL BUSINESS SELF-CERTIFICATION



The Department is pleased to announce that

RLS CONSTRUCTION GROUP LLC

has successfully completed the Pennsylvania Department of General Services' process for self-certification as a small business under the Commonwealth's Small Business Contracting Program, with the following designation:

BUSINESS TYPE(s):

Construction Contractor

CERTIFICATION NUMBER: 374863-2020-01-SB
CERTIFCATION TYPE: SMALL BUSINESS

ISSUE DATE: 01/16/2020 EXPIRATION DATE: 01/16/2022

RECERTIFIED DATE:

Kerry L. Kirkland, Deputy Secretary Bureau of Diversity, Inclusion & Small Business Opportunities

Kerry L. Kirkland

5/19/2020

Vendor Information Pages



RLS Construction Group, LLC

Duns: 962844135



Company Email: rschopfer@rlscg.com | Web Address: http://www.rlscg.com | Phone: (717) 502-6680

Business Information

Doing Business As:

Last Verified: 4/19/2019 Expiration Date: 4/19/2022

Business Address 1: 3 Crossgate Drive

Business Address 2: City: Mechanicsburg

State/Temitory: Pennsylvania

Zip: 17050

Phone: (717) 502-6680 Fax: (717) 502-6681

Business Type

Business Type:

Cage Code: 61M33

NAICS Codes: 236116, 238160, 238320, 238350, 238390, 238340, 238330, 238990, 236220, 238140, 238220, 238310, 236210, 238110, 238130, 238150, 238190, 238210, 238910, 238120, 237990, 237110,

238170, 541330 Year Established: 2010

FSC: PSC:

Service Disabled Veteran Owned Small Business

Woman Owned Small Business: No Minority Owned Small Business: No

Hub Zone: No 8(a): No

Purchase Card: No

https://www.vip.vetbiz.va.gov/Search/BusinessProfile/f192d094-3af5-e611-942c-0050568df19d

5/19/2020

Vendor Information Pages

Capabilities

Number of Employees: 17

Number of Veteran Employees: 1
Number of Operating Locations: 1

Service Areas: New Jersey, Pennsylvania, Maryland, Virginia, Delaware, Dist. of Columbia, West Virginia

Capabilities Keywords: General Construction; New Multifamily Housing Construction (except For-Sale Builders); Industrial Building Construction; Commercial and Institutional Building Construction; Water and Sewer Line and Related Structures Construction; Other Heavy and Civil Engineering Construction; Poured Concrete Foundation and Structure Contractors; Structural Steel and Precast Concrete Contractors; Framing Contractors; Masonry Contractors; Glass and Glazing Contractors; Roofing Contractors; Siding Contractors; Other Foundation, Structure, and Building Exterior Contractors; Electrical Contractors and Other Wiring Installation Contractors; Plumbing, Heating, and Air-Conditioning Contractors; Drywall and Insulation Contractors; Painting and Wall Covering Contractors; Flooring Contractors; Tile and Terrazzo Contractors; Finish Carpentry Contractors; Other Building Finishing Contractors; Site Preparation Contractors; All Other Specialty Trade Contractors; Engineering Services

Capabilities Narrative: General Construction

ATTACHMENT 2 – PROJECT EXPERIENCE AND REFERENCES

Multi-Phased Projects in an Occupied and Fully Function Building

i. Name of project, type of project and location

Remove Nurses Station - CLC Renovation Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Renovated existing spaces on the 2nd & 3rd Floors of Building 27 at the Wilkes-Barre VA Medical Center. Work included minor demolition (architectural, HVAC, electrical, fire protection and plumbing), asbestos abatement, lead remediation and new HVAC, plumbing, electrical, fire protection and architectural work.

Relevance: General construction project in an occupied and fully functional building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. John Krynic
Department of Veterans Affairs
1111 East End Boulevard
Wilkes-Barre, PA
570-824-3521, ext. 7780
John.Krynic@va.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$ 972,306.00 Final Contract: \$1,154,248.89

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: July 2018 Final Completion Date: September 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Government CPARS not available/submitted.

i. Name of project, type of project and location

Rehabilitation of Carbondale Readiness Center Renovation

Carbondale Readiness Center, Lackawanna, PA

ii. Description of the project and relevance of work to the Contract Work

Description: Renovated approximately 18,500 square feet Readiness Center and 3,100 square feet maintenance building. Work included modifications and improvements to HVAC, electrical, plumbing, IT and fire alarm systems. Repairs to the building facade, masonry repairs, replace some doors and windows and replace roofing. Renovate the toilet and shower areas. Architectural improvements to the ceilings, walls and flooring and ADA access. Site improvements to include parking lot repairs, paving, sidewalk and curb replacement, fence and gate replacement, site lighting and exterior signage.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. David Jackson
Department of General Services
9999 Hamilton Boulevard, Suite 100
Tek Park Technology Campus
Breinigesville, PA 18031
610-871-0233
davjackson@pa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$ 962,807.00 Final Contract: \$1,155,827.90

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: May 2019 Final Completion Date: May 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

i. Name of project, type of project and location

SSA Hazleton Barrier Wall and Office Renovation Renovation

Hazleton Social Security Administration Building

ii. Description of the project and relevance of work to the Contract Work

Description: RLS was contracted to construct a barrier wall between SSA employees and the general public. Project also included interior renovation that includes asbestos abatement, general demolition, vinyl and carpet flooring, framing and drywall, painting, HVAC, electrical and security modifications.

Relevance: General construction project in an occupied and fully functional building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Pascal Mensah-Panford General Services Administration 100 South Independence Mall West Philadelphia, PA 19106 215-446-4870 pascal.mensah-panford@gsa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$668,880.00 Current Contract: \$676,842.84

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: June 2020 Projected Completion Date: August 2020

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Project is not complete. Performance ratings not available.

Multi-Phased Projects in a Secure Building

i. Name of project, type of project and location

Building 81 Renovation Renovation DLA Distribution Office of Procurement

ii. Description of the project and relevance of work to the Contract Work

Description: This project consisted of a 61,000 SF office facility renovation, including removal / replacement of suspended ceiling system, wall finishes, paint, floor coverings and new systems furniture and stairwell renovation. Rehabilitation of the exterior shall include cleaning/washing and painting of the Exterior Insulation and Finishing system. Removed the existing 2-pipe HVAC system including chiller, boilers, pumps, piping, fan coil units, air handling units, and building control system. Install new HVAC system in total. Electrical system upgrades included replacement of incoming underground power service (to be landed on new switchgear), replacement of all power distribution panels and replacement of interior power distribution infrastructure.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Joshua Woodworth DLA Distribution 430 Mifflin Avenue New Cumberland, PA 17070 717-770-4192 Joshua.Woodworth@dla.mil

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$5,655,517.00 Final Contract: \$6,374,312.74

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: December 2017 Final Completion Date: October 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Government CPARS not available/submitted.

i. Name of project, type of project and location

Improve Isolation Rooms Renovation Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Providing Architectural/Engineering consulting services to install HVAC exhaust on ante rooms serving A4-16 and A4-17 and all ancillary equipment needed to meet the design requirements. Work included HVAC, electrical, roofing, structural, HVAC controls, fire protection and general carpentry.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Andrew Cullipher
Department of Veterans Affairs
1111 East End Boulevard
Wilkes-Barre, PA
Andrew.Cullipher@va.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$299,350.00

Final Contract: \$304,016.52

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: November 2018 Final Completion Date: November 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

i. Name of project, type of project and location

SSA Williamsport Renovation

Renovation

Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Complete renovation including HVAC, electrical, roofing, structural, HVAC controls, fire protection, new transaction windows and general carpentry.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Ms. Gabrielle Trout, PE General Services Administration 100 South Independence Mall West Philadelphia, PA 19106 Gabrielle.Trout@gsa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$392,890.00 Final Contract: \$493,348.85

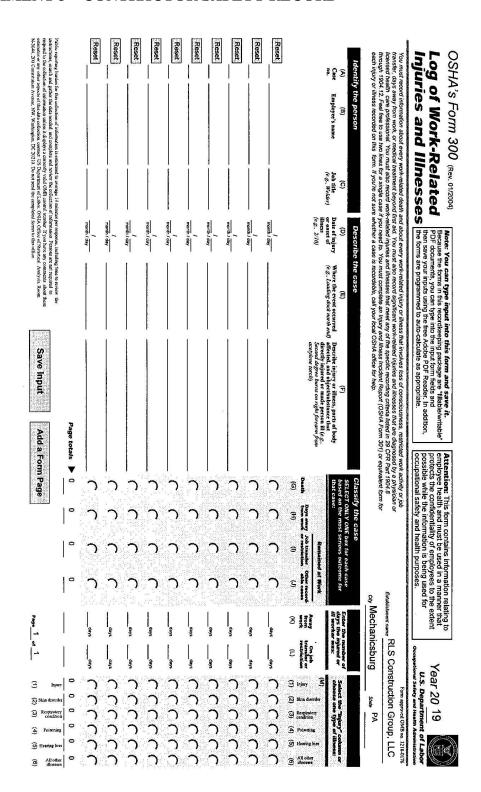
v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: June 2018 Final Completion Date: November 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

ATTACHMENT 3 – CONTRACTOR SAFETY RECORD



(2) Skin disorders (1) Injuries

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even it no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write '0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited acces to 65HA Form 301 or its equivalent. See 29 CFR Part 1904.55, in OSHA's recordiceping rule, for further details on the access provisions for these forms.

Total number of

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Public reporting burden for this collection of information is estimated to a verage 50 minutes per response, including time to review the instructions, search and gather the data meeded, and complete and review the collection of information. Ferross are not required to respond to the collection of information (and the search of the collection of information and the search of the data meeter. If you have any commence to deep the respect of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 20th Constitution Avenue, NW, Washington, DC 202-10. Do not send the completed forms to this office. (3) Respiratory conditions Total number of days away from work Post this Summary page from February 1 to April 30 of the year following the year covered by the form. Number of Cases Number of Days Total number of . . . (M) Injury and Illness Types cases with days away from work Total number of Ĵ 0 0 0 0 Total number of days of job transfer or restriction E Total number of cases with job transfer or restriction (6) All other illnesses (5) Hearing loss (4) Poisonings 3 0 Total number of other recordable cases 0 0 0 S 0

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Street 405 St. John's Church Road City Camp Hill State PA Zip 17011 Industry description (e.g., Manufacture of motor truck trailers) General Construction Standard Industrial Classification (SIC), if known (e.g., 3715) OR North American Industrial Classification (NAICS), if known (e.g., 375) Employment information (if) you don't have these figures, see the Worksheet on the next page to estimate.) Annual average number of employees Annual average number of employees last year Total hours worked by all employees last year 31936 Sign here Knowingly falsifying this document may result in a fine. I certify that I have examined this document and that to the best of my knowledge face uptes at the first accurate, and complete. Company executive Phone 717, 502, 6680 Save inputt	Establishment information Your establishment name RLS Construction Group, LLC

Year 20 19 U.S. Department onal Safety and Health Au

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the materiacium, secretal and gather the data needed, and complete and review the collections of information mices are reported to respond to the collections of formation mices and public account of the collections of formation mices and public account of the collections of the data collections, content US Department of Labor, OSHA Office of Statistical Analysis, Room N-5644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.	Reset month lay month lay month lay month lay	Reset	Reset	Reset mouth / Bay	Reset month / day	Reset month / day	Reset month / day	(c.g., result) illness (c.g., 210)	Da	You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also precord significant work-related injuries and linesses that are obligatosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that me apositic recording criteria stated in 29 CFF Part 1904, 8 through 1904, 12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.	OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Portion then Injuries and Illnesses the lines.
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Add a Form Page						0 0 0	0 0	n from Death Days away Jo Doath from work or (G) (H)	Classify the case SELECT ONLY ONE box for each case based on the most serious outcome for that case:	isness, restricted work activity or job shall are diagnosed by a physician or sa listed in 29 CFR part 1904.8 SHA Form 301) or equivalent form for	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.
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(3) Respiratory conditions (2) Skin disorders (1) Injuries

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(6) All other illnesses (5) Hearing loss (4) Poisonings

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Injury and Illness Types

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biblic reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the interactions, search and galact file data needed, and complete and review the collection of information in Persons are not required for response to the collection of information in the response are not required to response do the collection of information in the response to th

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.

Because the forms in this recordkeeping package are "fillable\u00favirlable\u00edbe PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

U.S. Department of Labor Occupational Safety and Health Administration Year 20 18

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Standard Industrial Classification (SIC), if known (e.g., 3715) 3 Crossgate Drive Establishment information Company executive my knowl Knowingly falsifying this document may result in a fine Sign here Total hours worked by all employees last year Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.) North American Industrial Classification (NAICS), if known (e.g., 336212) General Construction Industry description (e.g., Manufacture of motor truck trailers) certify that I have exam Annual average number of employees stablishmont namo Mechanicsburg State PA RLS Construction Group, LLC this document and that to the best of accurate, and complete Date 23049 Title Save Input 12 Zip 17050

away from work

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Page 21 of 28

OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses Identify the person (B) Employee's name out every work-tekted death and about every work-related injury or titress that involves loss of consciousness, restincted work activity or job transfer, at treatment beyond first aid. You must also record significant work-related rinjures and litresses that are diagnosed by a physician or licensed neath had record work-related rinjuries and itinesses that meet any of the specific recording orderia listed in 20 CFR Part 1904.8 through 1904, 12, Feel frea to thou record work-related injuries and itinesses that meet any of the specific recording orderia listed in 20 CFR Part 1904.8 through 1904, 12, Feel frea to thou record work-related in highly and itiness recorded on this recorded in the reco (C) Job title (e.g., Welder) (D) Date of injury or onset of illness Describe the case (E) Where the event occurred (e.g., Loading dock north end) (F) Describe injury or illness, parts of body affected, and object/substance that directly injured Be sure to transfer these totals Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentially of employees to the extent possible while the information is being used for · O O O O O O O O O O O O O O O (K) ow Mechanicsburg strment name RLS Construction Group, LLC 2 PA

(2) Skin disorders (3) Respiratory conditions (1) Injuries Post this Summary page from February 1 to April 30 of the year following the year covered by the form. Using the Log, count the individual entries you made for each calegory. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0." All establishments covered by Part 1904 must complete this Summary page, even it no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entires are complete and accurate before completing this summary. Ablik reporting burden for this collection of information is estimated to average 58 minutes per response, including must or review the instructions, search and galart the data needed, and complete und review the collection of information. Herous are not required to respond to the collection of information unless it stipleys a currently value (OME centred inheader. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA, Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 2021, Do so see sent the completed forms to this diffice. Total number of . . . (M) from work Total number of days away fotal number of Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirey. They also have limited access to the OSHA Form 301 or equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms. Number of Days Number of Cases B Total number of cases with days away from work 00 transfer or restriction Total number of days of job Total number of cases with job Ē transfer or restriction (6) All other illnesses (4) Poisonings Total number of other recordable cases 0 3 000 Your ostablishment name RLS Construction Group, LLC Sign here North American Industrial Classification (NAICS), if known (e.g., 336212) Knowingly falsifying this document may result in a fine Total hours worked by all employees last year Industry description (e.g., Manufacture of motor truck trailers) General Construction Establishment information 717 502-6680 Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.) Standard Industrial Classification (SIC), if known (e.g., 3715) nnual average number of employees Mechanicsburg State PA ZIP 1705C 3 Crossgate Drive 236220 41,477 and that to the best of my President/CEO 01/08/2018

OSHA'S Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Year 20 17_



Pennsylvania Compensation Rating Bureau
United Plaza Building • Suite 1500
30 South 17th Street • Philadelphia, PA 19103-4007
(215)568-2371 • FAX (215)564-4328 • www.pcrb.com

PA EXPERIENCE RATING MODIFICATION

File Number: 3287550 County: **CUMBERLAND**

0.802 Address: 3 CROSSGATES DRIVE **Experience Mod:**

XREF: MECHANICSBURG PA 17055

09/03/2019 Effective Term: Issue Date: 12/31/2019 - 12/31/2020

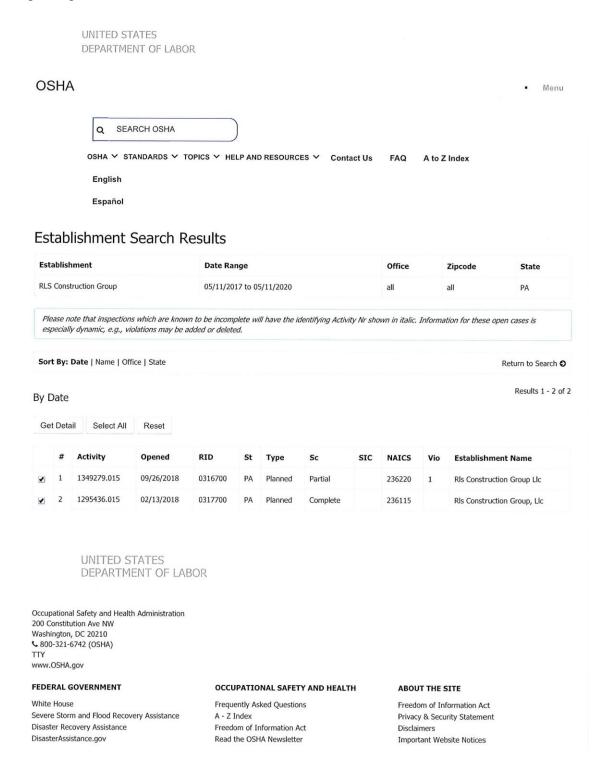
Card Number: 0651 **Governing Class Code:**

> **Employer Name:** RLS CONSTRUCTION GROUP LLC

Modification	History	Effective Date				
0.790		12/31/2018				
0.764		12/31/2017				
0.739		02/01/2017				
0.762		02/01/2016				
Governing Class Code	Rating Value	Description				
608	4.60	FLAT CEMENT WORK				
646	3.80	FURNITURE OR FIXTURE INSTALLATION				
651	4.47	CARPENTRY - COMMERCIAL				
654	5.57	CONCRETE CONSTRUCTION				
661	2.29	ELECTRICAL WIRING IN BUILDINGS				
951	.20	SALESPERSON - OUTSIDE				
953	.08	OFFICE				
9890	.05	SAFETY COMMITTEE CREDIT (5%)				

ATTACHMENT 4 – HEALTH OR SAFETY CITATIONS

RLS Construction Group does not have any EPA violations. Below please find the information regarding our OSHA violation.



UNITED STATES DEPARTMENT OF LABOR

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Español

Inspection Detail

Case Status: CLOSED

Inspection: 1295436.015 - Rls Construction Group, Llc

Inspection Information - Office: Wilkes-Barre

Nr: 1295436.015 Report ID: 0317700 Open Date: 02/13/2018

RIs Construction Group, LIc

Va Medical Center1111 E. End Blvd.

Wilkes Barre, PA 18711

Union Status: NonUnion

SIC:

Scope:

NAICS: 236115/New Single-Family Housing Construction (except Operative Builders)

Mailing: 3 Crossgate Drive#100, Mechanicsburg, PA 17050

Inspection Type:

Planned

Complete

Advanced Notice:

Ownership: Safety/Health:

Private Safety

Emphasis:

Close Conference: 02/13/2018

P:Ctarget, L:Fall, N:Ctarget Close Case: 02/20/2018

Case Status: CLOSED

UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration 200 Constitution Ave NW Washington, DC 20210 **℃** 800-321-6742 (OSHA)

www.OSHA.gov

FEDERAL GOVERNMENT OCCUPATIONAL SAFETY AND HEALTH

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White House

Severe Storm and Flood Recovery Assistance

Disaster Recovery Assistance DisasterAssistance.gov USA.gov

No Fear Act Data U.S. Office of Special Counsel

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English

Español

Inspection Detail

Case Status: CLOSED

Inspection: 1349279.015 - Rls Construction Group Llc

Inspection Information - Office: Harrisburg

Report ID: 0316700 Nr: 1349279.015

Open Date: 09/26/2018

RIs Construction Group LIc

Gym Building1700 South Lincoln Avenue Lebanon, PA 17042

Union Status: NonUnion

SIC:

NAICS: 236220/Commercial and Institutional Building Construction

P:Ctarget, N:Ctarget

Mailing: 3 Crossgate Drive, Mechanicsburg, PA 17050

Inspection Type: Planned

Scope:

Emphasis:

Partial

Advanced Notice:

Ownership: Private Safety/Health: Health

Close Conference: Close Case:

09/26/2018 01/24/2019

Case Status: CLOSED

Violation Summary										
	Serious	Willful	Repeat	Other	Unclass	Total				
Initial Violations	2					2				
Current Violations				2		2				
Initial Penalty	\$6,652	\$0	\$0	\$0	\$0	\$6,652				
Current Penalty	\$0	\$0	\$0	\$6,652	\$0	\$6,652				
FTA Amount	\$0	\$0	\$0	\$0	\$0	\$0				

					Vio	lation Items					
	#	ID	Туре	Standard	Issuance	Abate	Curr\$	Init\$	Fta\$	Contest	LastEvent
	1.	01001	Other	19100134 F02	12/12/2018	01/09/2019	\$3,326	\$3,326	\$0		I - Informal Settlement
Deleted	2.	01002A	Serious	19261153 C01	12/12/2018	01/09/2019	\$0	\$3,326	\$0		I - Informal Settlement
	3.	01002B	Other	19261153 D02 I	12/12/2018	01/09/2019	\$3,326	\$0	\$0		I - Informal Settlement

UNITED STATES DEPARTMENT OF LABOR

ATTACHMENT 5 – REQUIRED DISCLOSURES

Not Applicable. RLS did not answer any questions in the affirmative.

TECHNICAL SECTION 1

T-1C – Designated Critical Work

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

DGS Project Number C-0503-0023 Phase 1 Rebid1 General Construction
DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.
Check One Work item for which this Qualification Statement is being submitted:
General Contractor (.1 Contract) X Multi-Phased Project in a Secured Building X Multi-Phased Project in an Occupied & Fully Functional Building
HVAC Contractor (.2 Contract)
Asbestos AbatementMulti-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Plumbing Contractor (.3 Contract) Multi-Phased Project in a Secured Building
Multi-Phased Project in an Occupied & Fully Functional Building
 Electrical Contractor (.4 Contract) Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
Fire Protection Contractor (.5 Contract) Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building

DGS Project Name HVAC Replacement, Danville State Hospital

Project No. DGS C-0503-0023 Phase 1 Rebid HVAC Replacement, Danville State Hospital General Construction (.1 Contract)

Name of Firm RLS Construction Group LLC
Address 405 St. John's Church Road, Suite 106 Camp Hill, PA 17011
Principal Office 405 St. John's Church Road, Suite 106 Camp Hill, PA 17011
Owner or Authorized Representative Robert L. Schopfer, President/CEO
SECTION 1 – FIRM INFORMATION
SECTION 1 TIRM IN ORMATION
1.1 Background Information
a) How many years has the firm been in business? 10
b) How many years has the firm been doing business in proposed contract field? 10
Under what former names has the firm conducted business? N/A
c) Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business.
• Pennsylvania
Maryland
West Virginia
Delaware
Delaware
d) If the firm is a corporation, provide the following information:
Date of incorporation
State of incorporation
President's name
Vice-President's name(s)
Secretary's name
Treasurer's name
e) If the firm is a partnership, provide the following information:
Date of formation
Type of partnership
Names of partners
f) If the firm is individually owned, provide the following information:
Date of formation
Name of owner
g) If the form of the firm is other than those listed above, describe it and name the principals: <u>LLC Date: June 2010 State of Pennsylvania Robert L. Schopfer</u>

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019	\$ 6,868,765
Year 2018	\$ 8,559,518
Year 2017	\$ 11,980,552

b) Identify the percentage of work on similar projects the firm typically performs with its own work force:

At a minimum, RLS Construction Group performs at least 15% of the project with our employees.____

c) List the categories of work that the firm normally performs with its own forces on similar projects.

RLS Construction Group self-performs selective demolition, infection control, dust control, general carpentry, door and hardware installation, framing, drywall, acoustical ceiling, painting, concrete and masonry infills.

2.2 Project Experience and References

Submit as **Attachment 1** to this Qualifications Statement:

- a) <u>Suggested number of Sheets/Pages</u>:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects that are similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- i. Name of project, type of project and location
- ii. Description of the project and relevance of work to the Contract Work
- iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.
- iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- vi. As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1:	2019	0.802
Year 2:	2018	0.790
Year 3:	2017	0.764

b) Provide the firm's Total Lost Workday Incidence Rate (LWDIR) for the past three years, beginning with the most recent year available:

Year 1:	2019	0
Year 2:	2018	0
Year 3:	2017	0

*LWDIR Rate = Number of Lost Time Injuries & Illnesses x 200,000 ÷ Total Hours Worked

c) Provide the firm's Recordable Incidence Rate (RIR) for the past three years:

Year 1:	2019	0
Year 2:	2018	0
Year 3:	2017	0

^{*}RIR Rate = Number of Injuries x 200,000 ÷ Total Hours Worked

d) Provide in an <u>Attachment 3</u> to this Qualifications Statement a list of any health or safety citations issued by federal or state agencies for serious or willful violations issued in the past 3 years. Include a separate statement for any such violations and include the citation number, a brief description of the violation and the amount of penalty, if any, for each violation and current status of violation.

EXHIBIT F - SECTION 3 - REQUIRED DISCLOSURES

The firm shall answer the following questions with regard to the past three (3) years. If any question is answered in the affirmative, the firm shall submit in an **Attachment 4** to this Qualifications Statement, for each affirmative answer, a written explanation which shall provide details concerning the matter in question, including applicable dates, locations, names of projects/project owners and current status of any such matter.

noje	as/project owners and current status of any such matter.
3.1	Is the firm currently debarred or suspended from doing business with any federal, state or local government agency or private entity? Yes No X
3.2	Has the firm ever been debarred or suspended from doing business with any federal, state or local government agency or private entity? YesNo_X
3.3	Is the firm currently or has the firm been otherwise prohibited from doing business with any federal, state or local government agency or private entity? Yes No X
3.4	Has the firm been denied prequalification (not including short listing), declared non-responsible, or otherwise declared ineligible to submit bids or proposals for work by any federal, state or local government agency or private entity? YesNo_X
3.5	Has the firm defaulted, been terminated for cause or otherwise failed to complete any project that it was awarded? Yes No X
3.6	Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project? YesNo_X
3.7	Has the firm had any business or professional license, registration, certificate or certification suspended or revoked? YesNo_X
3.8	Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers? YesNo_X
3.9	Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company? Yes No X_
3.10	Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency? YesNo X
3.11	*Note: information regarding health and safety violations is addressed in a previous section. Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business? YesNo_X
3.12	Has the firm been the subject to any bankruptcy proceeding? YesNo_X

APPENDIX F - SECTION 4 - REQUIRED REPRESENTATIONS

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.
- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

ATTACHMENT 1 – PROJECT EXPERIENCE AND REFERENCES

Multi-Phased Projects in an Occupied and Fully Function Building

i. Name of project, type of project and location

Remove Nurses Station - CLC Renovation Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Renovated existing spaces on the 2nd & 3rd Floors of Building 27 at the Wilkes-Barre VA Medical Center. Work included minor demolition (architectural, HVAC, electrical, fire protection and plumbing), asbestos abatement, lead remediation and new HVAC, plumbing, electrical, fire protection and architectural work.

Relevance: General construction project in an occupied and fully functional building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. John Krynic
Department of Veterans Affairs
1111 East End Boulevard
Wilkes-Barre, PA
570-824-3521, ext. 7780
John.Krynic@va.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$ 972,306.00 Final Contract: \$1,154,248.89

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: July 2018 Final Completion Date: September 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Government CPARS not available/submitted.

i. Name of project, type of project and location

Rehabilitation of Carbondale Readiness Center Renovation

Carbondale Readiness Center, Lackawanna, PA

ii. Description of the project and relevance of work to the Contract Work

Description: Renovated approximately 18,500 square feet Readiness Center and 3,100 square feet maintenance building. Work included modifications and improvements to HVAC, electrical, plumbing, IT and fire alarm systems. Repairs to the building facade, masonry repairs, replace some doors and windows and replace roofing. Renovate the toilet and shower areas. Architectural improvements to the ceilings, walls and flooring and ADA access. Site improvements to include parking lot repairs, paving, sidewalk and curb replacement, fence and gate replacement, site lighting and exterior signage.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. David Jackson
Department of General Services
9999 Hamilton Boulevard, Suite 100
Tek Park Technology Campus
Breinigesville, PA 18031
610-871-0233
davjackson@pa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$ 962,807.00 Final Contract: \$1,155,827.90

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: May 2019 Final Completion Date: May 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

i. Name of project, type of project and location

SSA Hazleton Barrier Wall and Office Renovation Renovation Hazleton Social Security Administration Building

ii. Description of the project and relevance of work to the Contract Work

Description: RLS was contracted to construct a barrier wall between SSA employees and the general public. Project also included interior renovation that includes asbestos abatement, general demolition, vinyl and carpet flooring, framing and drywall, painting, HVAC, electrical and security modifications.

Relevance: General construction project in an occupied and fully functional building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Pascal Mensah-Panford General Services Administration 100 South Independence Mall West Philadelphia, PA 19106 215-446-4870 pascal.mensah-panford@gsa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$668,880.00 Current Contract: \$676,842.84

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: June 2020 Projected Completion Date: August 2020

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Project is not complete. Performance ratings not available.

Multi-Phased Projects in a Secure Building

i. Name of project, type of project and location

Building 81 Renovation Renovation DLA Distribution Office of Procurement

ii. Description of the project and relevance of work to the Contract Work

Description: This project consisted of a 61,000 SF office facility renovation, including removal / replacement of suspended ceiling system, wall finishes, paint, floor coverings and new systems furniture and stairwell renovation. Rehabilitation of the exterior shall include cleaning/washing and painting of the Exterior Insulation and Finishing system. Removed the existing 2-pipe HVAC system including chiller, boilers, pumps, piping, fan coil units, air handling units, and building control system. Install new HVAC system in total. Electrical system upgrades included replacement of incoming underground power service (to be landed on new switchgear), replacement of all power distribution panels and replacement of interior power distribution infrastructure.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Joshua Woodworth DLA Distribution 430 Mifflin Avenue New Cumberland, PA 17070 717-770-4192 Joshua.Woodworth@dla.mil

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$5,655,517.00 Final Contract: \$6,374,312.74

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: December 2017 Final Completion Date: October 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Government CPARS not available/submitted.

i. Name of project, type of project and location

Improve Isolation Rooms Renovation Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Providing Architectural/Engineering consulting services to install HVAC exhaust on ante rooms serving A4-16 and A4-17 and all ancillary equipment needed to meet the design requirements. Work included HVAC, electrical, roofing, structural, HVAC controls, fire protection and general carpentry.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Mr. Andrew Cullipher
Department of Veterans Affairs
1111 East End Boulevard
Wilkes-Barre, PA
Andrew.Cullipher@va.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$299,350.00

Final Contract: \$304,016.52

v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: November 2018 Final Completion Date: November 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

i. Name of project, type of project and location

SSA Williamsport Renovation Renovation Wilkes-Barre VA Medical Center

ii. Description of the project and relevance of work to the Contract Work

Description: Complete renovation including HVAC, electrical, roofing, structural, HVAC controls, fire protection, new transaction windows and general carpentry.

Relevance: General construction project in an occupied and secured building.

iii. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and e- mail address.

Ms. Gabrielle Trout, PE General Services Administration 100 South Independence Mall West Philadelphia, PA 19106 Gabrielle.Trout@gsa.gov

iv. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.

Original Contract: \$392,890.00 Final Contract: \$493,348.85

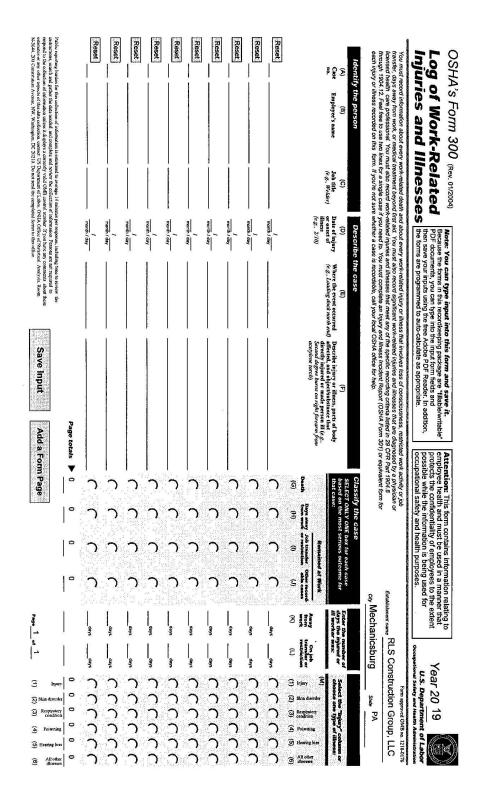
v. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.

Original Completion Date: June 2018 Final Completion Date: November 2018

vi. As available, performance ratings of the work evaluated by owner or owner's representative.

Performance rating not available from client.

ATTACHMENT 2 – CONTRACTOR SAFETY RECORD



Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Summary of Work-Related Injuries and Illnesses

OSHA's Form 300A (Rev. 01/2004)

All establishments covered by Part 1804 must complete this Summary page, even it no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write '0."

(3) Respiratory conditions (2) Skin disorders (1) Injuries Total number of days away from work otal number of Number of Days Number of Cases Total number of . . . (M) Injury and Illness Types ତ 3 0 cases with days away from work Total number of Ĵ 0 0 0 0 Total number of days of job transfer or restriction Ξ Total number of cases with job transfer or restriction (6) All other illnesses (5) Hearing loss (4) Poisonings 3 Total number of other recordable 0 0 0 3 0

							ω
I certify that I have exampled his document and that to the best of my knowledge english of accurate, and complete. Title Phone 717. 502. UCBO Date 2 / 11 / 20 Save input	Sign here Knowingly falsifying this document may result in a fine.	Annual average number of employees 17 Total hours worked by all employees last year 31936	Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)	North American Industrial Classification (NAICS), if known (e.g., 336212) 236220	Standard Industrial Classification (SIC), if known (e.g., 3715) OR	City Camp mill State PA Zip 1/011 Industry description (e.g., Manufacture of motor track trailers) General Construction	RLS Construction Group hn's Church Road

Year 20 19 U.S. Department of Labo local Safety and Health Administration

Note: You can type input into this form and save it. Because the forms in this recordiseping package are "fillable/writable" PDF documents, you can type into the input from fields and then save your inputs using the free Adobe PDF Reader.

Reset Reset Reset Reset Reset Reset OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses Job title (e.g., Welder) month / day Save Input s, parts of body stance that person ill (e.g., ight forearm from Add a Form Page Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for 00 0 0 0 000000000 Other record-able cases Establishment name RLS Construction Group, LLC Mechanicsburg from work On job transfer or restriction (L) Year 20 18 U.S. Department of I 3 0 3 Injury Select the "Injury" column or choose one type of illness: 0 0 @ Respiratory PA 0 Poisoning 0 0 0 0 (5) Hearing loss 0 0 All other illnesses

biblic reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information markets it displays a currently valid OMB control number. If you have any comments thout these estimates or any other response of this data collection, contact US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 20th Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the enthes are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904;35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases	ses		
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	Œ	(3)	(2)
Number of Days	ys		
Total number of days away from work		Total number of days of job transfer or restriction	
(K)	I	(L)	
Injury and Illness Types	ess Types		
Total number of (M) (1) Injuries	0	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss	0
(3) Respiratory conditions	ions 0	(6) All other illnesses	0

Save Input	
Date//	Phone
Title	Company executive
this document and that to the best of faccurate, and complete.	I certify that I bywe examined that document and that to the best of my knowledge the entries are that accurate, and complete.
t may result in a fine.	Knowingly falsifying this document may result in a fine
	Sign here
23049	Total hours worked by all employees last year
12	Annual average number of employees
don't have these figures, see the	Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)
	236220
(NAICS), if known (e.g., 336212)	North American Industrial Classification (NAICS), if known (e.g., 336212)
	OR
f known (e.g., 3715)	Standard Industrial Classification (SIC), if known (e.g., 3715)
f motor truck trailers)	Industry description (e.g., Manufacture of motor truck trailers) General Construction
e PA Zip 17050	City Mechanicsburg State
	3 Crossgate Drive
uction Group, LLC	Establishment information Your establishment name RLS Construction Group, LLC

U.S. Department of Occupational Safety and Health Admi Year 20 18

Form approved OMB no. 1218-0176

Note: You can type input into this form and save it.

Because the forms in this recordkeeping package are "fillable writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses Identify the person (C) Job title (e.g., Welder) (D) Date of injury or onset of illness Describe the case (E) Where the event occurred (e.g., Loading dock north end) (F) Describe injury or illness, parts of body affected, and object/substance that directly injured Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentially of employees to the extent possible while the information is being used for ow Mechanicsburg bishmeni name RLS Construction Group, LLC 2 State PA

(3) Respiratory conditions (2) Skin disorders (1) Injuries

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries had no cases, write "0." All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entires you made for each categoy. Then write the totals below, making sure you've added the entires from every page of the Log. If you	Establishment information	
had no cases, write "0."	RIS Construction Group IIC	
Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirely. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's record/keeping rule, for further details on the access provisions for these forms.	Street 3 Crossgate Drive	
	Noohop:oph.sp	
Number of Cases	City Mechanicsburg State PA ZIP 1/USU	
Total number of Total number of Total number of Total number of deaths cases with days cases with job other recordable	Industry description (e.g., Manufature of motor trade trailers) General Construction	
away from work transfer or restriction cases	Standard Industrial Classification (SIC), if known (e.g., 3715)	
0 0		
(G) (H) (I) (J)	OR	
Number of Days	North American Industrial Classification (NAICS), if known (e.g., 336212)	
Total number of days away Total number of days of job from work transfer or restriction	Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)	
	Annual average number of employees 22	
(C)	Total hours worked by all employees last year $41,477$	
Injury and Illness Types	Sign here	
Total number of	Knowingly falsifying this document may result in a fine.	
Injuries 0 (4) Poisonings 0	I certify that I have examined this document and that to the last of acc	
Skin disorders 0 (5) Hearing loss 0 Respiratory conditions 0 (6) All other illnesses 0	knowledge the entries are true, accurate, and complete. President/CEO	
Post this Summary page from February 1 to April 30 of the year following the year covered by the form.	717 502-6680 01/08/2018	
Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and eview the collection of information. Persons are not required to respond to the collection of information and the search of the collection of information and the		
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9890

Pennsylvania Compensation Rating Bureau

United Plaza Building • Suite 1500 30 South 17th Street • Philadelphia, PA 19103-4007 (215)568-2371 • FAX (215)564-4328 • www.pcrb.com

PA EXPERIENCE RATING MODIFICATION

File Number: 3287550 County: CUMBERLAND

Experience Mod: 0.802 **Address:** 3 CROSSGATES DRIVE

XREF: MECHANICSBURG PA 17055

Issue Date: 09/03/2019 **Effective Term:** 12/31/2019 - 12/31/2020

Card Number: 1 Governing Class Code: 0651

Employer Name: RLS CONSTRUCTION GROUP LLC

Modification	History	Effective Date
0.790)	12/31/2018
0.764	1	12/31/2017
0.739)	02/01/2017
0.762	2	02/01/2016
Governing Class Code	Rating Value	Description
608	4.60	FLAT CEMENT WORK
646	3.80	FURNITURE OR FIXTURE INSTALLATION
651	4.47	CARPENTRY - COMMERCIAL
654	5.57	CONCRETE CONSTRUCTION
661	2.29	ELECTRICAL WIRING IN BUILDINGS

OFFICE

SALESPERSON - OUTSIDE

SAFETY COMMITTEE CREDIT (5%)

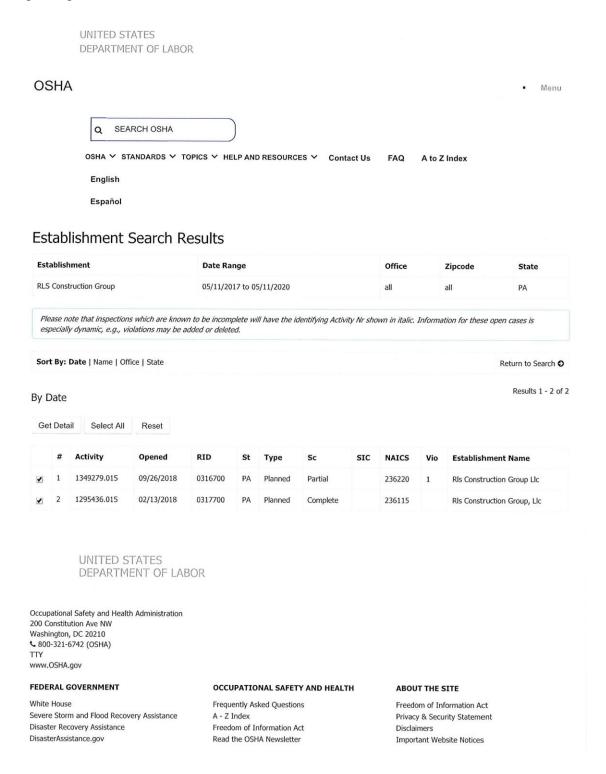
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ATTACHMENT 3 – HEALTH OR SAFETY CITATIONS

RLS Construction Group does not have any EPA violations. Below please find the information regarding our OSHA violations.



UNITED STATES
DEPARTMENT OF LABOR

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English

Español

Inspection Detail

Case Status: CLOSED

Inspection: 1295436.015 - RIs Construction Group, LIc

Inspection Information - Office: Wilkes-Barre

Nr: 1295436.015 Report ID: 0317700

Rls Construction Group, Llc

Va Medical Center1111 E. End Blvd.

Wilkes Barre, PA 18711

Union Status: NonUnion

Open Date: 02/13/2018

SIC:

NAICS: 236115/New Single-Family Housing Construction (except Operative Builders)

Mailing: 3 Crossgate Drive#100, Mechanicsburg, PA 17050

Inspection Type: Planned

Scope: Complete

omplete Advanced Notice:

Ownership: Private

Safety/Health:SafetyClose Conference:02/13/2018Emphasis:P:Ctarget, L:Fall, N:CtargetClose Case:02/20/2018

Case Status: CLOSED

N

UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration 200 Constitution Ave NW Washington, DC 20210

└ 800-321-6742 (OSHA)

www.OSHA.gov

White House

FEDERAL GOVERNMENT

Severe Storm and Flood Recovery Assistance

Disaster Recovery Assistance

DisasterAssistance.gov

USA.gov No Fear Act Data

U.S. Office of Special Counsel

OCCUPATIONAL SAFETY AND HEALTH

Frequently Asked Questions

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Office of Inspector General

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English

Español

Inspection Detail

Case Status: CLOSED Inspection: 1349279.015 - Rls Construction Group Llc

Inspection Information - Office: Harrisburg Nr: 1349279.015 Report ID: 0316700 Open Date: 09/26/2018

Rls Construction Group Llc

Gym Building1700 South Lincoln Avenue

Lebanon, PA 17042

NAICS: 236220/Commercial and Institutional Building Construction

Mailing: 3 Crossgate Drive, Mechanicsburg, PA 17050

Planned Inspection Type:

Scope: Partial Ownership:

Private

Safety/Health: Health Emphasis: P:Ctarget, N:Ctarget Advanced Notice: Close Conference:

Close Case:

Union Status: NonUnion

09/26/2018 01/24/2019

Case Status: CLOSED

	Vi	iolation s	Summary			
	Serious	Willful	Repeat	Other	Unclass	Total
Initial Violations	2					2
Current Violations				2		2
Initial Penalty	\$6,652	\$0	\$0	\$0	\$0	\$6,652
Current Penalty	\$0	\$0	\$0	\$6,652	\$0	\$6,652
FTA Amount	\$0	\$0	\$0	\$0	\$0	\$0

					Vio	ation Items					
	#	ID	Туре	Standard	Issuance	Abate	Curr\$	Init\$	Fta\$	Contest	LastEvent
	1.	01001	Other	19100134 F02	12/12/2018	01/09/2019	\$3,326	\$3,326	\$0		I - Informal Settlement
Deleted	2.	01002A	Serious	19261153 C01	12/12/2018	01/09/2019	\$0	\$3,326	\$0		I - Informal Settlement
	3.	01002B	Other	19261153 D02 I	12/12/2018	01/09/2019	\$3,326	\$0	\$0		I - Informal Settlement

UNITED STATES DEPARTMENT OF LABOR

ATTACHMENT 4 – REQUIRED DISCLOSURES

Not Applicable. RLS did not answer any questions in the affirmative.

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

COVER SHEET

DGS Project Name_	Danville State Hospital NCSTU Admissions Bldg
DGS Project Number	DGS 503-23
one "Designated Cr	CAL WORK: For proper evaluation, the Proposer MUST submit at least itical Work Qualification Statement" for each Work item listed in T-1C ontract. NOTE: The selected Proposer shall enter subcontracts with ractor in T-1C.
Check One Work item	for which this Qualification Statement is being submitted:
General Contractor (.1 Contract)
	Project in a Secured Building Project in an Occupied & Fully Functional Building
HVAC Contractor (.2	Contract)
	tement Project in a Secured Building Project in an Occupied & Fully Functional Building
Plumbing Contractor	r (.3 Contract)
	Project in a Secured Building Project in an Occupied & Fully Functional Building
Electrical Contractor	(.4 Contract)
	Project in a Secured Building Project in an Occupied & Fully Functional Building
Fire Protection Contr	ractor (.5 Contract)
	Project in a Secured Building Project in an Occupied & Fully Functional Building

Name of Firm	Window Specialists Inc.	
Address	127 N 8th St, Lebanon, PA 17046	
Principal Office	, Lebanon, PA	
	prized Representative Robert J. Carlson, President	

SECTION 1 - FIRM INFORMATION

1.1 Ba	ickground Information								
a)	How many years has the	firm been in business? 4	5 years						
b)	How many years has the	firm been doing business	in proposed contract field? 35 years						
	Under what former names has the firm conducted business?								

c)	Identify all jurisdictions in Pennsylvania	which the firm is licensed New York	or otherwise qualified to do business. Delaware						
	Maryland	Washington DC	West Virginia						
d)	d) If the firm is a corporation, provide the following information:								
Date of incorporation 10/30/2007									
	State of incorporation Pe								
	President's name Robert	esident's name Robert J. Carlson							
	nnie Brossman								
	Secretary's name Jennie Brossman Treasurer's name Robert J. Carlson								
	Treasurer's name Robe	rt J. Carlson							
e)	If the firm is a partnership	, provide the following info	ormation: N/A						
		, i							
Ð	If the firm is individually a	wand provide the followin	a information. NI/A						
f)	If the firm is individually owned, provide the following information: N/A								
		Date of formationName of owner							
	Name of Owner								
g)	If the form of the firm is of principals:	ther than those listed abov	e, describe it and name the N/A						

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

 a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 2019 \$ 4,709,566.30 Year 2018 \$ 4,660,124.00 Year 2017 \$ 2,931,105.00

- b) Identify the percentage of work on similar projects the firm typically performs with its own work-force 98%
- List the categories of work that the firm normally performs with its own forces on similar projects.

Furnish and Install Commercial and Institutional Windows, Glass, and Glazing Services

2.2 Project Experience and References

Submit as Attachment 1 to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and email address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

 Year 1:
 2019
 9885 - Credit

 Year 2:
 2018
 9885 - Credit

		Year 3:	2017	9885 - Cre	edit	2016 · 2015 · 2014 ·	.845	
	b)	Provide the	firm's Total Lo	st Workday Inc	idence	e Rate (L	WDIR) for the past three	
		Year 1:	ming war are r	nost recent yea			an NCCI state. There	efore no data is
		Year 2:			col	lected f	or Workday Incidence	Rate.
		Year 3:						
		Hours \		ber of Lost II	ime in	juries &	Illnesses x 200,000 + To	tal
	c)	Provide the	firm's Recorda	ble Incidence F	Rate (I	RIR) for t	he past three years:	
		Year 1:					an NCCI state. Ther	
		Year 2:			co	llected	for Recordable Inciden	ce Rate.
		Year 3:						
		*RIR R	ate = Number o	of Injuries x 200	0,000	+ Total H	ours Worked	
	d)	safety citation issued in the include the	ons issued by for e past 3 years citation number	ederal or state Include a sepa r. a brief descri	agend arate s otion o	ies for se statemen of the vio	nent a list of any health or erious or willful violations t for any such violations an ation and the amount of olation. N/A - No Violat	
		<u>\$</u>	SECTION 3 -	REQUIRED	DIS	CLOSL	IRES	
ques Qua deta	stion is lification ils con	answered ns Statemen cerning the	in the affirmat t, for each affir	ive, the firm a rmative answer estion, includir	shall r, a w ng ap	submit ii ritten exp plicable	past three (3) years If a n an <u>Attachment 5</u> to the planation which shall providates, locations, names	nis de
3.1	local	government a	y debarred or s agency or priva		doing	busines	s with any federal, state or	9
	Yes_	No <u>X</u> _						
3.2	Has the	ne firm ever t al governmer	peen debarred of agency or pri	or suspended fivate entity?	rom d	oing busi	ness with any federal, state)
	Yes_	No <u>X</u>						
3.3			y or has the firn cal government				om doing business with an	1
	Yes_	No X_						
3.4	respon	nsible, or oth		d ineligible to s	ubmit	bids or p	sting), declared non- roposals for work by any	
	Yes _	No <u>X</u> _						
3.5		e firm defau t that it was a		inated for caus	e or o	therwise	failed to complete any	

		Yes X_	No
	3.6	Has the fir performed	rm been assessed or required to pay liquidated damages in connection with work d on any project?
		Yes	No X
	3.7	Has the fir suspende	rm had any business or professional license, registration, certificate or certification d or revoked?
		Yes	No X
	3.8		liens been filed against the firm as a result of its failure to pay subcontractors, or workers?
		Yes	No <u>X</u>
	3.9	Has the fir or insuran	m been denied bonding or insurance coverage or been discontinued by a surety ce company?
		Yes	No X
	3.10	antitrust la	m been found in violation of any laws, including but not limited to contracting or lws, tax or licensing laws, labor or employment laws or environmental laws by a ion of a court or government agency?
		Yes	No <u>X</u>
		*Note: info	ormation regarding health and safety violations is addressed in a previous section.
	3.11	Has the fir indictment	m or its owners, officers, directors or managers been the subject of any criminal or criminal investigation concerning any aspect of the firm's business?
		Yes	No <u>X</u>
1000000	3.12	Has the fire	m been the subject to any bankruptcy proceeding?
		Yes	No <u>X</u>

SECTION 4 - REQUIRED REPRESENTATIONS

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.

- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible. Unsure. - Discussion required
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

	Kaaniivations Statement
Project Location	Project Description
Washington DC	Historical Replication Project
Lebanon, PA	Historical Replication Project
Baltimore, MD	Historical Replication Project
Washington DC	Historical Replication Projects

DGS, 2000 14th St NW 8th Floor, Washington, DC 20009, many contacts throughout WSI's relationship with DGS		Room 407A, Baltimore, MD 21202	Lincoln Avenue, Lebanon, PA 17042 Baltimore City Public Schools, 200 F North Ave	Lebanon VAMC, Mike Tedesco, 1700 South	Suite 500, Rockville, MD 20850	Project Reference - Name & Address Grunley Construction, 15020 Shady Grove Rd,
~	Varied pricing dependent on size	\$ 569,643.00 \$	\$ 2,732,831.00 \$		\$ 1,774,986.00 \$	Original Bid/Proposal Price
and scope - Usually around \$1MM/Project	ied pr	\$ 632,498.00	\$ 2,895,647.14		\$ 1,774,986.00	Final Contract Price
40 projects 40 projects over a 20 year over a 20 year span span		11/30/2017	9/30/2019		10/30/2007	Projected Completion date
40 projects over a 20 year span		12/30/2017	10/28/2019		10/30/2007	Actual Completion Date

Qualifications Statement

Attachment 1

Window Specialists Inc

Window Specialists, Inc.

J.O. Wilson Elementary School



Post Installation

Location: Washington, DC

Contract Value: \$1,115,000

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Storefront
- Louvers
- Metal Panel System



Original conditions



Post Installation

Project Narrative:

Project Team:

Project Manager: Marco Kempinksi
Field Operations Manager: Greg Jones
Field Superintendent: Adrian Bodnari

Design-Build project involving a complete facelift for an old school. The façade was completely changed from the existing conditions and involved combining a good looking metal framing system, with functional louvers, and a complementing panel system. Extensive research regarding louvers was necessary to combine function and aesthetics.

Window Specialists, Inc.

Maury Elementary School



Location: Washington, DC

Contract Value: \$540,000

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Historical Window Replacement
- Curved Windows
- Historic Replication
- Louvers

Project Team:

Project Manager: Marco Kempinski

Field Operations Manager: Greg Jones

Field Superintendent: Mike Price





Project Narrative:

Complete replacement of all windows utilizing self-balanced double hung windows by Graham Architectural Products. Curved top windows with triple grid Muntins replicated the old existing historic windows. Louvers were integrated including curved top units. Historic panning and trims completed the system. Custom A/C brackets and panels were fabricated.

Window Specialists, Inc.

Drew Elementary School



Location: Washington, DC

Contract Value: \$860,000

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Window Replacement
- Entrance Doors
- Historic Replication

Project Team:

Project Manager: Marco Kempinski

Field Operations Manager: Greg Jones

Field Superintendent: Mike Price

Project Narrative:

Design-Build project whereby WSI worked closely with the architect to achieve the desired look along with proper functionality. Windows were manufactured by Custom Window Company and had narrow sightlines to replicate the original windows. Triple grid Muntins, historic panning, and complementary trims were used. Custom A/C brackets and panels were fabricated.

Tubman Elementary School



Location: Washington, DC

Contract Value: \$775,000

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Storefront
- Louvers
- Special Trim



Project Team:

Project Manager: Marco Kempinksi Field Operations Manager: Greg Jones

Field Superintendent: Adrian Bodnari



Project Narrative:

Design-Build involving aluminum storefront system, louvers, and panel system. The old façade was replaced with a modernized look. Vents and A/C work was included.

Prospect Learning Center



Location: Washington, DC

Contract Value: \$220,000

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Window Replacement
- Storefront
- FRP Doors

Project Team:

Project Manager: Marco Kempinski

Field Operations Manager: Greg Jones

Field Superintendent: Mark Witthoff



Project Narrative:

Window and door replacement project. Graham Architectural Products strut window with the project-in hoppers. FRP doors, storefront framing, break metal closures.

Rose Hardy Middle School



Location: Washington, DC

Contract Value: \$1,138,438

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Historical Window Replacement
- Interior glazing

Project Team:

Project Manager: Robert Carlson

Field Operations Manager: Mark Witthoff

Field Superintendent: Michael Price



Project Narrative:

Complete window replacement of existing with special panning, trims, and muntins utilized to replicate the original existing windows in a historic district. Both renovation of the existing building and new construction of an addition were involved. An interior skylight shown in the picture above was refurbished with new glass. This was part of a total Modernization project, which had several challenges due to numerous changes during the construction process. We coordinated with both the original contractor and the replacement contractor.

Stoddert Elementary School



Location: Washington, DC

Contract Value: \$230,379

Owner: DCPS

825 N. Capitol Street NE Washington, DC 200002

Key Factors:

- Window replacement
- Historic replication

Project Team:

Project Manager: Timothy Houle

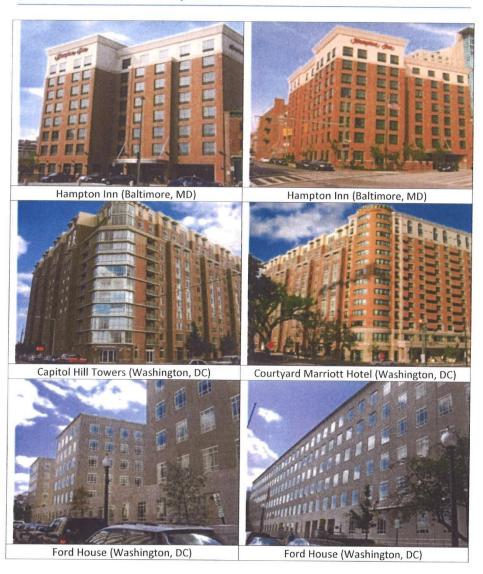
Field Operations Manager: Chris Mantle

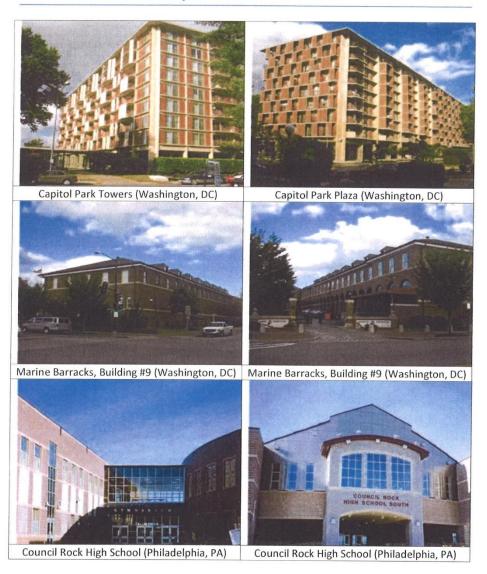
Field Superintendent: Greg Jones

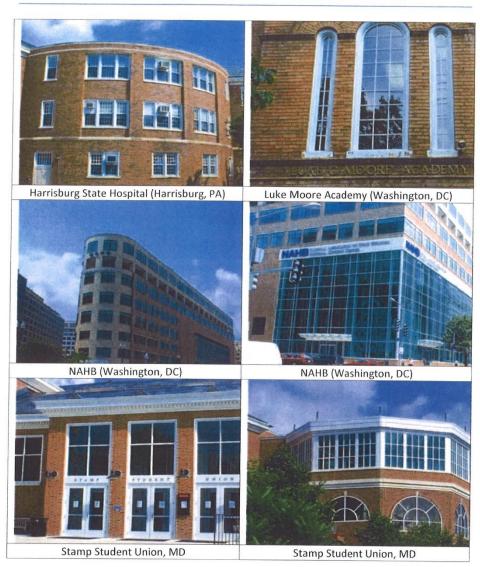


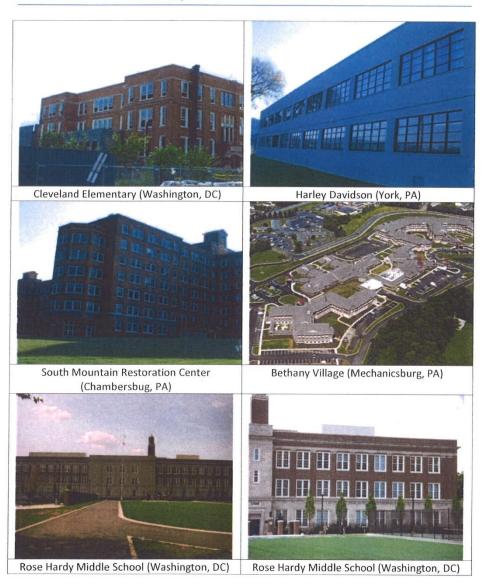
Project Narrative:

Modernization project included complete window replacement with historic replication. Project consisted of self balancing, double hung historic replication windows with custom exterior trim and triple grid muntins used. Project also incorporated historical replication of bay window. This was part of a total Modernization project, which had several challenges due to the coordination needed between the windows, interior and exterior work needed, especially at the bay window.









APPENDIX F

DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

COVER SHEET

DGS Project Name
DGS Project Number
DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.
Check One Work item for which this Qualification Statement is being submitted:
General Contractor (.1 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
HVAC Contractor (.2 Contract)
Asbestos AbatementMulti-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Plumbing Contractor (.3 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Electrical Contractor (.4 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Fire Protection Contractor (.5 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building

Name of Firm	109	stopat	1	acrti	5)			
Address	81	Nec	~	Fred	nerc	LB	Pa.	
Principal Office _	0	erl	Pc.	Stape	/c	diam'r.		
Owner or Author	ized Ren	recentative		1/				

SECTION 1 - FIRM INFORMATION

1.1 Ba	ckground Information
a)	How many years has the firm been in business?
b)	How many years has the firm been doing business in proposed contract field? 55
	Under what former names has the firm conducted business?
c)	Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business.
d)	If the firm is a corporation, provide the following information:
	Date of incorporation 1965
	State of incorporation
	State of incorporation
	Vice President's name(s)
	Secretary's name CARL Postport
	Treasurer's name
e)	If the firm is a partnership, provide the following information:
	Date of formation
	Type of partnership
	Names of partners
f)	If the firm is individually owned, provide the following information:
	Date of formation
	Name of owner
g)	If the form of the firm is other than those listed above, describe it and name the principals:

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

 a) Provide the annual construction volume in dollars completed by the firm in the past three years:

Year 12 \$ 1.2 M Year 17 \$ 1.2 M

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force _______
- List the categories of work that the firm normally performs with its own forces on similar projects.

2.2 Project Experience and References

Submit as Attachment 1 to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and email address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1: $\frac{20/9}{20/9} = \frac{1782}{787}$ Year 2: $\frac{20/9}{787} = \frac{787}{787}$

		Year 3:	2017	,784		
	b)	Provide the	e firm's Total Los	t Workday In	cidence Rate (LWDIF	R) for the past three
		Year 1:	2019			
		Year 2:	2-18	0	•	
		Year 3:	2017	0	-	
				per of Lost 7	Time Injuries & Illnes	sses x 200,000 ÷ Total
	c)	Provide the	e firm's Recordal	ole Incidence	Rate (RIR) for the pa	ist three years:
		Year 1:	2019	0	-	
		Year 2:	2018	0	_	
		Year 3:	2017	0		
					00,000 ÷ Total Hours	Worked
	d)	safety citat issued in the include the	tions issued by fe he past 3 years. e citation number	ederal or state Include a se , a brief desc	ifications Statement as a agencies for serious parate statement for a ription of the violation rrent status of violation	s or willful violations any such violations and and the amount of
			SECTION 3 -	REQUIRE	D DISCLOSURE	<u>s</u>
quest Quali detail	tion is fication s cor	s answered ons Statemencerning th	in the affirmatent, for each affi	tive, the firm rmative answ estion, include	shall submit in an er, a written explana ding applicable date	three (3) years. If any Attachment 5 to this ation which shall provide es, locations, names of
3.1	local	governmen	t agency or priva		m doing business wit	th any federal, state or
	-	No <u></u>	_			
3.2	or loc	cal governm	ent agency or pr	or suspended ivate entity?	d from doing business	s with any federal, state
0.0		No				J-1 1 141
3.3	feder	al, state or l	ocal governmen			doing business with any
		No				
3.4	respo feder	onsible, or o al, state or	therwise declare local governmen	d ineligible to	including short listing submit bids or proportivate entity?), declared non- osals for work by any
	Yes	No _/	_			
3.5			aulted, been tern s awarded?	ninated for ca	use or otherwise faile	ed to complete any

	Yes No
3.6	Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?
	Yes No
3.7	Has the firm had any business or professional license, registration, certificate or certification suspended or revoked?
	Yes No/
3.8	Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?
	Yes No
3.9	Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?
	Yes No
3.10	Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?
	Yes No
	*Note: information regarding health and safety violations is addressed in a previous section.
3.11	Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?
	Yes No
3.12	Has the firm been the subject to any bankruptcy proceeding?
	Yes No

SECTION 4 - REQUIRED REPRESENTATIONS

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws

- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

(3) Respiratory conditions

000

(6) All other illnesses

000

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Total number of . . . (M)
(1) Injuries

Injury and Illness Types

from work

Total number of days away

Total number of days of job transfer or restriction

Number of Days

Total number of

away from work cases with days Total number of

transfer or restriction

Total number of other recordable

 Ξ

Number of Cases

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even it no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entires are complete and accurate before completing this summary.

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have a equivalent. See 29 CFR Part 1904-35, in OSHA's recondkeeping rule, for further details on the access provisions for these forms.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write '0." Knowingly falsifying this document may result in a fine Sign here North American Industrial Classification (NAICS), if known (e.g., 336212) Standard Industrial Classification (SIC), if known (e.g., 3715) otal hours worked by all employees last year nployment information (I) you don't have 15708240290 Dilkes Barrown Pazir 18702 New Frederic 84,817, so

OSHA's Form 300 (Rev. 01/2004)

Tou must record information about every work-related clearly and about every work-related injury of illness that molves loss of consciousness, restricted work activity or job transfer, days away from work, or medical freatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or ficensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific according criteria lasted in 29 CFR Part 1994. It through 1994, 12 Feel free to use the first professional. You must also record work-related injuries and illnesses that meet any of the specific according criteria lasted in 29 CFR Part 1994. It through 1994, 12 Feel free to use the first professional from the specific according criteria lasted in 29 CFR Part 1994. It through 1994, 12 Feel free to use the first professional from the specific according to the first professional from the first professional from the specific according to the specific according to the first professional from the specific according to the first professional from the first pro

Log of Work-Related Injuries and Illnesses (C) Job title (e.g., Welder) Date of injury
or onset
of illness Describe the case (F)

Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right foreurn from arceptone torth) Page totals Attention: This form contains information relating to employee health and must be used in a manner that protests the confidentially of employees to the extent possible while the information is being used for 0000000000000 30000000000000 days Wilkes Bare State C 3 Check the "Injury" column choose one type of Illness:

APPENDIX F

DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

COVER SHEET

DGS Project Name Danville State Hospital HVAC Renovations
DGS Project Number DGS 503-23 Phase 1.1
DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.
Check One Work item for which this Qualification Statement is being submitted:
General Contractor (.1 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
HVAC Contractor (.2 Contract)
Asbestos AbatementMulti-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Plumbing Contractor (.3 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
Electrical Contractor (.4 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
Fire Protection Contractor (.5 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building

Name of Firm	Eastern Roofing Systems, Inc. (LR Costanzo subcontractor)	
Address 1		
Principal Office _	1 Keystone Place, Jessup, PA 18434	_
Owner or Author	ized Representative John Basalyga, President	

SECTION 1 – FIRM INFORMATION

I.1 Ba	ckground Information					
a)	How many years has the firm been in business?18					
b)	How many years has the firm been doing business in proposed contract field?19					
	Under what former names has the firm conducted business? N/A					
c)	Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business.					
	Pennsylvania New York Maryland					
	New Jersey Connecticut Delaware					
d)	If the firm is a corporation, provide the following information: Date of incorporation February 2002 State of incorporation Pennsylvania					
	President's name John Basalyga					
	Vice President's name(s) N/A					
	Secretary's name N/A					
	Treasurer's nameN/A					
e)	If the firm is a partnership, provide the following information: Date of formationN/A					
	Type of partnership					
	Names of partners					
f)	If the firm is individually owned, provide the following information:					
100	Date of formation N/A					
	Name of owner					
g)	If the form of the firm is other than those listed above, describe it and name the principals:					

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

 a) Provide the annual construction volume in dollars completed by the firm in the past three years:

```
Year 2019 $26,163,000.00

Year 2018 $14,212,000.00

Year 2017 $17,033,000.00
```

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force $\underline{95\%}$
- List the categories of work that the firm normally performs with its own forces on similar projects. Roofing, waterproofing, sheet metal, metal panels

2.2 Project Experience and References

Submit as Attachment 1 to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and email address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1:	2019	1.032
Year 2:	2018	1.130

		Year 3:	_2017	1.243	e e
	b)		firm's Total Los nning with the m		cidence Rate (LWDIR) for the past three ar available:
		Year 1:	2019	0	
		Year 2:	2018	2.06	
		Year 3:	2017	4.27	•
		*LWDIR Hours V		per of Lost T	ime Injuries & Illnesses x 200,000 ÷ Total
	c)	Provide the	firm's Recordat	ole Incidence	Rate (RIR) for the past three years:
		Year 1:	2019	0	
		Year 2:	2018	2.06	
		Year 3:	2017	5.69	
		*RIR R	ate = Number o	f Injuries x 20	00,000 + Total Hours Worked
	d)	safety citation issued in the include the	ons issued by fe e past 3 years. citation number,	ederal or state Include a ser , a brief desci	ifications Statement a list of any health or a agencies for serious or willful violations parate statement for any such violations and ription of the violation and the amount of rent status of violation.
		\$	SECTION 3 -	REQUIRE	D DISCLOSURES
ques Qual detai	tion is ificatio Is cor	answered ns Statemen ncerning the	in the affirmati t, for each affin	ive, the firm mative answestion, include	n regard to the past three (3) years. If any shall submit in an <u>Attachment 5</u> to this er, a written explanation which shall provide ling applicable dates, locations, names of the matter.
3.1			y debarred or su agency or privat		m doing business with any federal, state or
	Yes_	No_X			
3.2	or loc	al governme	peen debarred on thagency or privi	or suspended vate entity?	from doing business with any federal, state
	Yes_	No_X			
3.3			y or has the firm cal government		vise prohibited from doing business with any ivate entity?
	Yes_	No_X			
3.4	respo	nsible, or oth	denied prequali erwise declared cal government	d ineligible to	ncluding short listing), declared non- submit bids or proposals for work by any ivate entity?
	Yes_	No_X			
3.5		he firm defau ct that it was		inated for cau	se or otherwise failed to complete any

	Yes No _X
3.6	Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?
	Yes No _X_
3.7	Has the firm had any business or professional license, registration, certificate or certification suspended or revoked? $ \frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} \right) \left$
	Yes No _
3.8	Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?
	Yes No <u>X</u>
3.9	Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?
	Yes No_X
3.10	Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?
	Yes No_X
	*Note: information regarding health and safety violations is addressed in a previous section.
3.11	Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?
	Yes No _X
3.12	Has the firm been the subject to any bankruptcy proceeding?
	Yes No_X

SECTION 4 - REQUIRED REPRESENTATIONS

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.

- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.



		I.	1AJOR PRO	JECTS COMPL	.ETED		
PROJECT	OWNER	TYPE	SQ. FT.	COMPLETION DATE	CONTACT NAME	CONTACT PHONE	CONTRACT VALUE
Matrix World Kitchen Greencastle, PA	Matrix Antrim Partners, LP Forsgate Drive CN 4000 Cranbury, NJ 08512.	60 mil EPDM	1,010,349	10/14/13	Steve Mixell	(717) 360-2007	\$4,475,117.0
Pocono Mountain Clear Run Elementary School Swiftwater, PA	Pocono Mountain School District PO Box 200 Swiftwater, PA 18370	90 mil EPDM	155,782	10/12/12	Tim Mitchell	(570) 839-7121	\$1,324,636.0
Global Logistics Staten Island, NY	Matrix Development Group 586 Gulf Avenue State Island, NY 10314	60 mil TPO	978,000	11/03/17	Dennis Vance	(215) 688-8385	\$3,050,450.0
Liberty at Mill Creek Allentown, PA	Liberty Property Limited	60 mil EPDM	1,613,400	10/31/16	Dwight Lewis	(484) 735-3286	\$8,226,040.0
MEDRAD/Bayer Saxonburg, PA	Bayer Healthcare, LLC MEDRAD, Inc. 100 Global View Drive Warrendale, PA 15086	60 mil Reinforced EPDM	114,000	10/2013	Mark Sobeck	(570) 829-5777	\$614,632.00
Kalahari Hotel and Convention Center Mt. Pocono, PA	Kalahari Resorts	60 mil EPDM	180,740	1/30/2015	Kramer Brothers	Various	\$2,674,200.0
Roofs at Waterfall Waterford, CT	Silverman Realty Group 237 Mamaroneck Avenue White Plains, NY 10605	60 mil EPDM	65,700	11/08/16	Tony Nardozzi	(914) 255-0574	\$574,300.00

OSHA's Form 300 (Rev. 01/2004)

You must record information about every work-related injury or liness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and linesses that are diagnosed by a physician or foresed health date professional. You must also record work-related injures and linesses that meet any of the specific recording criteria islated in 39 CPR 1904.8 through 1904, 12. Feed free to use two lines for a single case if you need to. You must complete an injury and liness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help. Log of Work-Related Injuries and Illnesses

No. (A)

Employee's Name B

(C) Job Title (e.g., Welder)

(E)
Where the event occurred (e.g. Loading dock north end)

Describe injury or illness, parts of body affected, and object/substance that directly injured or mad person ill (e.g. Second degree burns on right forearm from acetylene torch)

CHECK ONLY ONE box for each case based on the most serious outcome for that case:

Enter the number of days the injured or ill worker was:

"injury" column or choose

type of

Days away from work

Job transfer or restriction

Other record-able cases

Away From Work (days)

On job transfer or restriction (days)

All other illnesses

Skin Disorde

Classify the case

City

Jessup

Establishment name

Eastern Roofing Systems, Inc.

Form approved OMB no. 1218-0176

State

Describe the case

(D)
Date of injury or onset of illness (mo./day)

Michael Esser
Juan Guerra

Roofer Roofer Roofer

02/22 05/18 10/21 12/15

Cut left hand cutting material
Membrane cleaner caused skin
Fell through roof and broke ribs

5 80-

Identify the person

Attention: This form contains information relating to employee health and must be used in a manner that projects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 2017

U.S. Department of Labor Occupational Safety and Health Administration

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and compilete and evidew the collection of information in the proper of the respond to the collection of information unless it displays a currently wall OMB control Persons ere not required to respond to the collection of information unless it displays a currently wall OMB control number. If you have any comments about these estimates or any assests of this data collection contact. US Department of Labor, CSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Injury

Skin Disorder

Poisoning

0

Page

1 of 1

3

2

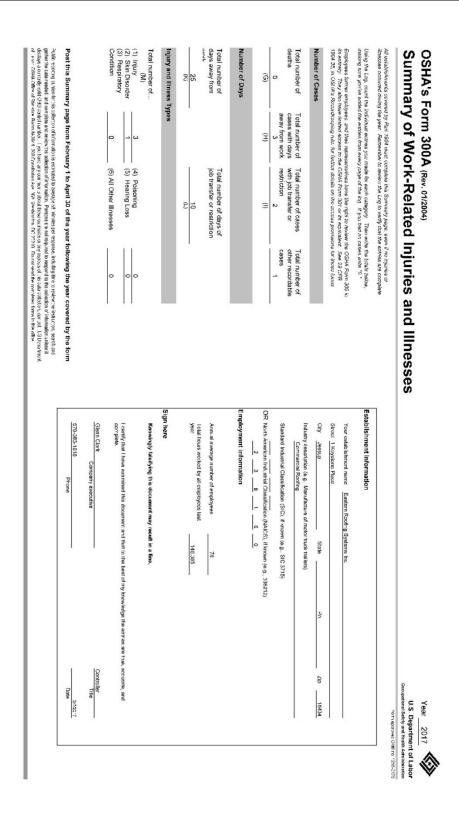
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Page totals

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OSHA's Form 300 (Rev. 01/2004)

Log of Work-Related Injuries and Illnesses

for occupational safety and health purposes Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used

Year 2018

U.S. Department of Labor Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

You must record information about every work-related injury or likess that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first abd. You must also record significant work-related injuries and linesses that are described injuries and linesses that meet any of the specific recording criteria listed in 25 CFR 1904.8 Involugh 1904 12. Feel free to use two lines for a single case if you need to. You must complete an injury and liness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help. Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, assents and gather the date needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless if displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact. US Department of Labor, OSHA, Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office. Case No. Identify the person Trevor Morris (B) Employee's Name (C) Job Title (e.g., Welder) Labroer 12/03 (D)
Date of injury or onset of illness (E)
Where the event occurred (e.g. Loading dock north end) Describe the case Describe injury or illness, parts of body affected, and object/substance that directly injured or mad person ill (e.g. Second degree burns on right forearm from acetylene torch) Fell through hale in roof Be sure to transfer these totals to the Summary page (Form 300A) before you post it. CHECK ONLY ONE box for each case based on the most serious outcome for that case: Classify the case <u>@</u> Days away from work Ξ City Establishment name Remained at work Other record Jessup Page 3 Enter the number of days the injured or ill worker was: 1 of 1 Away From Work (days) 28 (K (days) Eastern Roofing Systems, Check the "injury" column or choose one type of 3 Skin Disorder 2 Skin Disorder Respiratory Condition (3) (3) 4 Poisoning Inc PA (i) Hearing Loss (5) Hearing Loss 6 6

5.312014449

(1) Injury(2) Skin Disorder(3) RespiratoryCondition Total number of... (M) Total number of days away from Public reporting burden for this collection of information is estimated as everage 30 minutes par response, including time to review the instruction, search and gained the deal excellent and complete and review the collection of information, misses it designed as contractly red and 50 minutes and complete and review the collection of information misses it disables accurately red all 50 minutes and complete about these extended about the accurate and or september of this data collection, controlled formation that and or service and the controlled formation that and according to the controlled formation that the controlled formation that and the controlled formation that all the controlled formation that the controlled formation that all the controlled formation that the contro Summary of Work-Related Injuries and Illnesses OSHA's Form 300A (Rev. 01/2004) Post this Summary page from February 1 to April 30 of the year following the year covered by the forn Injury and Illness Types chanbiopues (orme employees, and their impreendatives taure the right to review the OSHA Form 300 in Its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1964-35, in OSHA's Recordierepring rule, for further details on the access provisions for these forms. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0." All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete Total number of umber of Days imber of Cases 38 <u>@</u> 0 Total number of cases with days away from work $\widehat{\Xi}$ (4) Poisoning (5) Hearing Loss (6) All Other Illnesses Total number of days of job transfer or restriction Total number of cases with job transfer or 0 Ē Total number of other recordable cases Sign here Establishment information OR North American Industrial Classification (NAICS), if known (e.g., 396212) nployment information 570-383-1818 I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete. Total hours worked by all employees last year Industry description (e.g., Manufacture of motor truck trailers) Commercial Roofing Street 1 Keystone Place Your establishment name Knowingly falsifying this document may result in a fine Annual average number of employees Standard Industrial Classification (SIC). If known (e.g., SIC 3715) Jessup Phone State 96,881 PA Controller Title Zip 9/28/2019 Date U.S. Department of Labor Occupational Safety and Health Administration 18434 Year 2018

OSHA's Form 300 (Rev. 01/2004) Log of Work-Related	300 (Rev.	01/200 ate	d Injuries a	OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses	to employ that prote extent po for occup	yee health ar ects the conf ossible while oational safet	to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	in a manner ployees to the is being used poses.		Oppul U.	Year_ .S. Dep	2019 partmen	ent of	Year 2019 U.S. Department of Labor Occupational Safety and Health Administration	ation
You must record information about every vibeyond first aid. You must also record signification and illnesses that meet any of the injuries and illness incident report (OSHA For	work-related injury or il mificant work-related in specific recording crite arm 301) or equivalent	ness that invo	wheel loss of consciousness, restricted wo esses that are diagnosed by a physician of CFR 1904.8 through 1904.12. Feel free injury or liness recorded on this form. If	You must record information about every work-related injury or liness that implies to consciousness, restricted work activity or pib transfer, days away from work, or medical treatment reproducting and at You must also record significant work-related injuries and illnesses that are diagnosed by a physician or literated health care prodessional. You must also record work-related injuries and illnesses that medically a produced any of the specific recording criteria letted in 20.5 FIG. 504. Brought 1904.12. Fed free to use how lines for a single case if you need to. You must complete an injury and linesses that medically expend (CSHA Formadit) or equivalent from for each fluidy or liness recorded on this form. If you're not sure whether a case is recorded, cally out local CSHA.	atment ork-related omplete an OSHA		Establishment name	nt name	Ш	Easte	Form approved OMB no Eastern Roofing Systems, Inc	n approv	ed OMB tems, I	Form approved OMB no. 1218-0176 oofing Systems, Inc	-0176
office for help.							City	Jessup			State _			PA	
Identify the person			Describe the case	case	Classif	Classify the case	5700	9							
(A) (B) Case Employee's Name	(C) Job Title (e.g.,	(D) Date of		(F) Describe injury or illness, parts of body affected,		ONLY ONE	CHECK ONLY ONE box for each case based on the most serious outcome for that case:	based on	Enter the number of days the injured or ill worker was:		Check the	"injury"	column o	Check the "injury" column or choose one type of illness:	one type
NO.	Weider)	onset of	Loading dock north end)	and object/substance that directly injured or made person ill (e.g. Second degree burns on right							(M)	1			ses
		illness (mo./day)		forearm from acetylene torch)	Death	Days away from work	Remained at work	d at work	Away t	On job transfer or restriction			ion		ner illnes
							Job transfer or restriction	Other record- able cases		(days)	Injury	Skin Di Respira	Conditi	Poison Hearing	
					9	(H)	()	(J)	Ī	(2)	3	2	9	H	(6)
								61 6				\perp	${oldsymbol{H}}$	H	\forall
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								50.		Ш			\dashv	\parallel	+
				Page totals	0	0	0	0	0	0	0	0	0	0	0
Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid ONB control number. If you have any comments about these estimates or any aspects of this data collection, contact. If the collection of the collection is a specific or any aspects of this data collection, contact. If the collection of the collection is a specific or any aspects of this data collection, contact. If the collection is contacted to the collection of th	finformation is estime if the data needed, an collection of informati these estimates or an	ted to averaged complete and on unless it divides and the same on unless it divides and the same on constitution on the same o	e 14 minutes per response, including time dreview the callection of information splays a currently valid OMB control to the dreview the callection, contact US may see New Westerbook Dr. 2020 ft. Inc.	Be sure to transfer these totals to the Summary page (Form 300A) before you p	s to the s	iummary p	page (Form 3	00A) before	you post it.	-	Injury	Skin Disorder Respiratory	Condition	Poisoning Hearing Loss	All other illnesses
Department of Labory Corres Curice of Statests, Popular-Cooks, Adv Cotstitution and, New, Mashington, De Adelou for followed forms to this office.	SILES, ROOMIN-OOTH,	700 Constituti	an Ave, Nev, exemingar, DC 20210. Da					Page	1 0 1		3	(2)	(3)	(4) (5)) (6)

(1) Injury(2) Skin Disorder(3) RespiratoryCondition Total number of deaths Total number of... (M) Total number of days away from Public exporting burden for this collection of information is estimated to average 59 minutes per response, including time to extend the instruction, search and gather the data needed, and comprehe and a view the collection of information, response to the collection of information undessit displays a contrarely deal of Moormation and under the public and response above for the data collection, control displays and control number of public about the asset datasets or any sequest of this data collection, control displays and collection. On the control of the data collection control this data collection control this data collection. All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete Summary of Work-Related Injuries and Illnesses OSHA's Form 300A (Rev. 01/2004) Post this Summary page from February 1 to April 30 of the year following the year covered by the form Injury and Illness Types Employees former employees, and their expressfallium have the right to exide the CSHA Form 200 in Its artifacy. They also have limited occass to the CSHA Form 301 of the equivalent, does 90 FcR 1904.35, in OSHA's Recordisesping rule, for further details on the access provisions for these forms. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0." ımber of Days umber of Cases <u>6</u>0 Total number of cases with days away from work (4) Poisoning (5) Hearing Loss (6) All Other Illnesses Total number of cases with job transfer or Total number of days of job transfer or restriction 30 Total number of other recordable OR North American Industrial Classification (NAICS), if known (e.g., 336212) Establishment information mployment information I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete. Knowingly falsifying this document may result in a fine. Total hours worked by all employees last year Industry description (e.g., Manufacture of motor truck trailers) Commercial Roofing Annual average number of employees Standard Industrial Classification (SIC), if known (e.g., SIC 3715) Your establishment name State Zp U.S. Department of Labor Occupational Safety and Health Administration Form approved OMB no. 1218-0176 Year 2019 18434

APPENDIX F

DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

COVER SHEET

DGS Project Name Danville State Hosital- NCSTU Admissions Building
DGS Project Number DGS 503-23 Phase 1
DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.
Check One Work item for which this Qualification Statement is being submitted:
General Contractor (.1 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
HVAC Contractor (.2 Contract)
Asbestos AbatementMulti-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Plumbing Contractor (.3 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
Electrical Contractor (.4 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Fire Protection Contractor (.5 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building

Name of Firm	SimmCon Systems Inc
Address 111	Pleasant Grove Road, Duncannon, PA 17020
Principal Office _	111 Pleasant Grove Road, Duncannon, PA 17020
Owner or Authori	zed Representative Richard Simmons Jr.

SECTION 1 – FIRM INFORMATION

1.1 [Bad	ckground Information
á	a)	How many years has the firm been in business?5
1	b)	How many years has the firm been doing business in proposed contract field?5
		Under what former names has the firm conducted business? None
(c)	lem:lemma
(d)	If the firm is a corporation, provide the following information:
		Date of incorporation 08/01/2016
		State of incorporation Pennsylvania
		President's name Richard Simmons Jr.
		Vice President's name(s) N/A
		Secretary's name N/A
		Treasurer's nameN/A
	e)	If the firm is a partnership, provide the following information:
	C)	Date of formation N/A
		Type of partnership
		Names of partners
		Tannes of partitions
f	f)	If the firm is individually owned, provide the following information:
		Date of formation N/A
		Name of owner
Ç	g)	If the form of the firm is other than those listed above, describe it and name the principals: N/A

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

 a) Provide the annual construction volume in dollars completed by the firm in the past three years:

```
    Year 2019
    $ 3,150,000.00

    Year 2018
    $ 3,588,159.00

    Year 2017
    $ 2,630,055.00
```

- Identify the percentage of work on similar projects the firm typically performs with its own work force 99%
- List the categories of work that the firm normally performs with its own forces on similar projects. Metal Framing, Drywall, Acoustical Ceilings, EIFS, Stucco

2.2 Project Experience and References

Submit as Attachment 1 to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and email address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- xii. As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

Year 1:	_ 2019	.082	
Year 2:	2018	085	

		Year 3:	2017	N/A	
	b)		e firm's Total Lo inning with the i		sidence Rate (LWDIR) for the past three ar available:
		Year 1:	2019	0	
		Year 2:	2018	0	
		Year 3:	2017	0	
			R Rate = Num Worked	nber of Lost T	ime Injuries & Illnesses x 200,000 ÷ Total
	c)	Provide the	e firm's Recorda	able Incidence	Rate (RIR) for the past three years:
		Year 1:	2019	11.84	
		Year 2:	2018	14.22	
		Year 3:	2017	0	
		*RIR F	Rate = Number	of Injuries x 20	0,000 ÷ Total Hours Worked
	d)	safety citat issued in the include the	ions issued by the past 3 years. citation numbe	federal or state . Include a sep er, a brief descr	fications Statement a list of any health or agencies for serious or willful violations arate statement for any such violations and iption of the violation and the amount of rent status of violation.
			SECTION 3	- REQUIREI	D DISCLOSURES
ques Qual detai	tion is ificatio Is cor	answered ns Stateme ncerning the	in the affirmant, for each aff	ative, the firm irmative answe uestion, includ	regard to the past three (3) years. If any shall submit in an Attachment 5 to this er, a written explanation which shall provide ing applicable dates, locations, names of h matter.
3.1			tly debarred or sagency or priva		n doing business with any federal, state or
	Yes_	No_X	=		
3.2			been debarred ent agency or p		from doing business with any federal, state
	Yes_	No_X	- .		
3.3			tly or has the fir ocal governmer		ise prohibited from doing business with any vate entity?
	Yes_	No <u>X</u>	-,		
3.4	respo	nsible, or ot		ed ineligible to	ncluding short listing), declared non- submit bids or proposals for work by any vate entity?
	Yes_	No <u>X</u>	=		
3.5		he firm defa ct that it was		minated for cau	se or otherwise failed to complete any

	Yes	No X
3.6		rm been assessed or required to pay liquidated damages in connection with work d on any project?
	Yes	No <u>X</u>
3.7		rm had any business or professional license, registration, certificate or certification d or revoked?
	Yes	No <u>X</u>
3.8		liens been filed against the firm as a result of its failure to pay subcontractors, or workers?
	Yes	No <u>X</u>
3.9		rm been denied bonding or insurance coverage or been discontinued by a surety ince company?
	Yes	No <u>X</u>
3.10	antitrust la	rm been found in violation of any laws, including but not limited to contracting or aws, tax or licensing laws, labor or employment laws or environmental laws by a sion of a court or government agency?
	Yes	No <u>X</u>
	*Note: info	ormation regarding health and safety violations is addressed in a previous section.
3.11		rm or its owners, officers, directors or managers been the subject of any criminal tor criminal investigation concerning any aspect of the firm's business?
	Yes	No X
3.12		rm been the subject to any bankruptcy proceeding?
	Yes	No <u>X</u>

SECTION 4 - REQUIRED REPRESENTATIONS

In submitting this Qualifications Statement, along with the other representations and authorizations listed in the RFP, the firm also makes the following representations, which it understands are required as a condition of performing the Contract Work and receiving payment for same.

- 4.1 The firm will possess all applicable professional, business and trade licenses required for performing the Contract Work.
- 4.2 The firm satisfies all bonding and insurance requirements as stipulated in the solicitation for the Contract Work.
- 4.3 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with the Commonwealth's requirements for workers' compensation insurance according to all applicable laws, and unemployment insurance according to all applicable laws.

- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
- 4.6 The firm represents that it has no conflicts of interests with the Commonwealth of Pennsylvania and, if awarded the Contract Work, any potential conflicts of interest that may arise in the future will be disclosed immediately to the Department of General Services.
- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.

APPENDIX F

DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

APPENDIX F DESIGNATED CRITICAL WORK QUALIFICATIONS STATEMENT

COVER SHEET

DGS Project Name
DGS Project Number 503-23 Phase 1 - dated 9-11-19
DESIGNATED CRITICAL WORK: For proper evaluation, the Proposer MUST submit at least one "Designated Critical Work Qualification Statement" for each Work item listed in T-1C for the respective contract. NOTE: The selected Proposer shall enter subcontracts with each listed subcontractor in T-1C.
Check One Work item for which this Qualification Statement is being submitted:
General Contractor (.1 Contract)
Multi-Phased Project in a Secured Building Multi-Phased Project in an Occupied & Fully Functional Building
HVAC Contractor (.2 Contract)
Asbestos AbatementMulti-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Plumbing Contractor (.3 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Electrical Contractor (.4 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building
Fire Protection Contractor (.5 Contract)
Multi-Phased Project in a Secured BuildingMulti-Phased Project in an Occupied & Fully Functional Building

Name of Firm _	B&G Glass Service, Inc.
Address	2668 Leisczs Bridge Rd, Leesport, PA 19533
Principal Office	2668 Leisczs Bridge Rd, Leesport, PA 19533
Owner or Autho	prized Representative Matthew D. Freeborn / President

SECTION 1 – FIRM INFORMATION

1.1 Ba	ckground <u>Information</u>
a)	How many years has the firm been in business? 57 years
b)	How many years has the firm been doing business in proposed contract field? 57 years
	Under what former names has the firm conducted business?
c)	Identify all jurisdictions in which the firm is licensed or otherwise qualified to do business. PA, NJ & DE
d)	If the firm is a corporation, provide the following information: Date of incorporation 1976
	State of incorporation Pennsylvania
	President's name Matthew D. Freeborn
	Vice President's name(s) Bryan G. Moll and Donald H. Moll, Jr
	Secretary's name Ann G. Moll
	Treasurer's name
e)	If the firm is a partnership, provide the following information: not applicable
	Date of formation
	Type of partnership
	Name of partners
	Names of partners
	names or parmers
f)	If the firm is individually owned, provide the following information: not applicable
f)	,
f)	If the firm is individually owned, provide the following information: not applicable
f) g)	If the firm is individually owned, provide the following information: not applicable Date of formation

SECTION 2 - EXPERIENCE AND PERFORMANCE

2.1 General

 a) Provide the annual construction volume in dollars completed by the firm in the past three years.

Year 2019 \$ 8,853,000 Year 2018 \$ 7,105,000 Year 2017 \$ 6,429,000

- b) Identify the percentage of work on similar projects the firm typically performs with its own work force $96\,\%$
- List the categories of work that the firm normally performs with its own forces on similar projects.
 All glazing systems completed by B&G Glass own staff

2.2 Project Experience and References

Submit as Attachment 1 to this Qualifications Statement:

- a) Suggested number of Sheets/Pages:
 - 3 sheets/(6 pages)

Three (3) detailed project descriptions for relevant projects similar in size and scope to the Contract Work. The project descriptions shall include, at a minimum, the following information presented in the order listed below:

- vii. Name of project, type of project and location
- viii. Description of the project and relevance of work to the Contract Work
- ix. Contact information for an owner representative familiar with the firm's work performed on this project. Include name, address, telephone number(s) and email address.
- x. The original bid/proposal price and the final contract price. If the project is ongoing, project the final price and relation to proposal price. Contract value for which the firm was/is responsible.
- xi. The original date for project completion and the actual completion date. If the project is ongoing, project the completion date and relation to original schedule.
- xii. As available, performance ratings of the work evaluated by owner or owner's representative.

2.3 Contractor Safety Record

Submit as <u>Attachment 2</u> to this Qualifications Statement the information specified herein and verify this information by providing copies of OSHA 300/200 Forms or appropriate documentation from insurance carriers, as applicable. The firm may submit written explanations to comment on or clarify its safety record.

a) Provide the firm's Workers Compensation Experience Modification Rating for the past three years, beginning with the most recent year available:

70 - 12	
9 0.707	
	0.707

2018

0.913

		Year 3:	2018	0.913	
	b)		firm's Total Lo		sidence Rate (LWDIR) for the past three ar available:
		Year 1:	2019	0 .	
		Year 2:	2018	0	
		Year 3:	2017	0	
			Rate = Num Worked	ber of Lost T	ime Injuries & Illnesses x 200,000 ÷ Total
	c)	Provide the	firm's Recorda	able Incidence	Rate (RIR) for the past three years:
		Year 1:	2019	0	
		Year 2:	2018	0	
		Year 3:	2017	_ 0	
		*RIR R	Rate = Number	of Injuries x 20	0,000 ÷ Total Hours Worked
	d)	safety citati issued in th include the	ons issued by f e past 3 years. citation numbe	ederal or state Include a sep r, a brief descr	fications Statement a list of any health or agencies for serious or willful violations parate statement for any such violations and iption of the violation and the amount of rent status of violation.
			X No	health or safe	ety citations issued to company since founded in 1963
			SECTION 3	- REQUIRE	O DISCLOSURES
ques Qual detai	tion is ficatio Is cor	answered ns Statemer ocerning the	in the affirmant, for each aff	tive, the firm irmative answe lestion, includ	regard to the past three (3) years. If any shall submit in an Attachment 5 to this er, a written explanation which shall provide ing applicable dates, locations, names of h matter.
3.1			ly debarred or s agency or priva		n doing business with any federal, state or
	Yes_	No <u>X</u> _			
3.2			been debarred nt agency or pi		from doing business with any federal, state
	Yes_	No X			
3.3			ly or has the fire		ise prohibited from doing business with any vate entity?
	Yes_	No_X	•		
3.4	respo	nsible, or oth		ed ineligible to	ncluding short listing), declared non- submit bids or proposals for work by any vate entity?
	Yes_	No X			
3.5		he firm defau ot that it was	,	ninated for cau	se or otherwise failed to complete any

Yes No <u>X</u>
Has the firm been assessed or required to pay liquidated damages in connection with work performed on any project?
Yes No X
Has the firm had any business or professional license, registration, certificate or certification suspended or revoked?
Yes No X
Have any liens been filed against the firm as a result of its failure to pay subcontractors, suppliers, or workers?
Yes No X
Has the firm been denied bonding or insurance coverage or been discontinued by a surety or insurance company?
Yes No X
Has the firm been found in violation of any laws, including but not limited to contracting or antitrust laws, tax or licensing laws, labor or employment laws or environmental laws by a final decision of a court or government agency?
Yes No X
*Note: information regarding health and safety violations is addressed in a previous section.
Has the firm or its owners, officers, directors or managers been the subject of any criminal indictment or criminal investigation concerning any aspect of the firm's business?
Yes No X
Has the firm been the subject to any bankruptcy proceeding?
Yes No_X_

SECTION 4 - REQUIRED REPRESENTATIONS

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- 4.4 The firm and all subcontractors it employs in execution of the Contract Work shall be in full compliance with all requirements of the Commonwealth's prevailing wage law and Public Works Employment Verification Act.
- 4.5 If awarded the Contract Work, the firm represents that it will not exceed its current bonding limitations when the Contract Work is combined with the total aggregate amount of all unfinished work for which the Contractor is responsible.
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- 4.7 The firm represents the price offered in connection with its proposal for the Contract Work was arrived at independently without consultation, communication or agreement with any other Proposer or competitor.
- 4.8 The firm will ensure that employees and applicants for employment are not discriminated against because of their race, color, religion, sex or national origin.



Commercial • Residential • Automotive • Specialty

May 21, 2020

SUBJECT: **DANVILLE STATE HOSPITAL**

Project Experience and References

Exhibit 1

Recently Completed - Similar Project

Project Name: **Tower Health Bariatrics**

NAI Keystone Owner:

Architect: **Architectural Concepts** General Contractor / Construction Manager:

phone # 484-513-6819 GC/CM Contact info: Mark Keever mark.keever@dbconstructiongrp.com

Type of work: Exterior Ribbon Windows & Interior Office Glass

Project Location: Wyomissing, PA Contract Amount: \$ 275,000 10/30/2019 Date Completed

Recently Completed - Similar Project

Project Name: KidJoy Company Iron Mountain Owner: Architect: Meister Cox Architects

General Contractor / Construction Manager: Stoltzfus Enterprises

Matt Lambert phone # 610-286-5115 matt@stoltzfus.com GC/CM Contact info Type of work Office & Design Center - Curtain Wall, Store Front and interior glass fit out

Project Location: Morgantown, PA Contract Amount \$ 600,000 Year Completed 2019

Recently Completed - Similar Project

Project Name: 999 Berkshire Owner: Carlino Property

Architect:

General Contractor / Construction Manager: D&B Construction

Dan Gring phone # 610-927-6494 GC/CM Contact info dan.gring@dbconstructiongrp.com

Type of work Store Front, interior glass fit out

Project Location: Wyomissing, PA Contract Amount \$ 245,000 Year Completed 2019

2668 Leisczs Bridge Rd, Leesport, PA 19533-9334 • 610.372.7868

Summary of Work-Related Injuries and Illnesses All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify mat the entries are complete Using the Log, count the individual entries you made for each category. Then write the trails below, making sure you've added the entries from every page of the log. If you had no cases write '0.' Employees farmer employees, and their representatives have the right to review the OSHA Form 300 in its entriety. They also have limited access to the OSHA Form 301 or its sativations. See 29 CFR	Establishment information Your establishment name **P 3 6 6 6 6 5 5 5
	City READIAG State TA.
Total number of Total number of cases Total number of deaths cases with days with job transfer or other recordable	ity description (e.g., Manufacture of motor truck traile
0 away from work restriction 0 cases 0 0 (G) (H) (I) (J)	Standard Industrial Classification (SIC), if known (e.g., SIC 3715)
Number of Days	Employment information
Total number of days of days away from job transfer or restriction	Annual average number of employees
(K) 0 (L)	Total hours worked by all employees last year
Injury and Illness Types Total number of	Sign here W W M M M C Knowingly falsifying this document may result in a fine.
(1) Injury 0 (4) Poisoning 0 (2) Skin Disorder 0 (5) Hearing Loss 0 (6) All Other Illnesses 0	Loeffy that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete. M. W. M.
Post this Summary page from February 1 to April 30 of the year following the year covered by the form	Phone Phone
Public reporting burden for this collection of information is estimated to average 55 minutes per response, including time to review the instruction, search and gather the data meeting, and compilete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OABS control number. If you have any comments about these estimates or any supervise of this data objection, contact. US operational classification, and the completed forms to this edition, and the completed forms to this data object forms to this data of these operations.	

(1) Injury(2) Skin Disorder(3) RespiratoryCondition Post this Summary page from February 1 to April 30 of the year following the year covered by the form Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid CoMB control number. If you have any comments about these estimates or you search of his data collection, contact. US Department of Labor, OSHA Office of Statistics. Room N-5944, 200 Constitution Ave. NW. Washington, DC 20210. Do not send the completed forms to this office. Total number of... Injury and Illness Types days away from Total number of Number of Days Total number of Number of Cases Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0." Traindiges former employeess, and their copresentatives have the right to review the OSHA From 300 in its entirest. They also have limited across to the OSHA Form 310 in sequivalent. See 29 GFR 190A 35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms. Summary of Work-Related Injuries and Illnesses <u>S</u> <u>G</u> Total number of cases with days (4) Poisoning (5) Hearing Loss (6) All Other Illnesses Total number of days of job transfer or restriction with job transfer Total number of other recordable cases (5) OR North American Industrial Classification (NAICS), if known (e.g., 336212) Employment information Establishment information I certify that I have examined this docun complete. Knowingly falsifying this document may result in a fine Total hours worked by all employees last year Annual average number of employees Standard Industrial Classification (SIC), if known (e.g., SIC 3715) Industry description (e.g., Manufacture of motor truck trailers) GLASS INFORMACIÓN TO A TO A Your establishment name ent and that to the best of my knowledge the entries are true, accurate, and State M 000 いのなりへんの SALES Zip 5 U.S. Department of Labor tional Safety and Health Administration 1000 Form approved OMB no. 1218-0176

Year Z = 17

OSHA's Form 300A (Rev. 01/2004)

Injury Skin Disorder Respiratory Condition Total number of days away from work Public reporting burden for this collection of information is estimated to seriage 58 minutes per response, including time to review the instruction, search and gather the data revieted, and complete and review the collection of filteration. Persons are not required to respond to the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid CMAR control number. If you have any comments about these estimates or any supports of this data objection, contact, US Department of Labor. OSHA Office of Statistics, Room N-3644, 200 Constitution Ave. NW, Washington, DC 20210. Do not send the competed forms to this office. Post this Summary page from February 1 to April 30 of the year following the year covered by the form Total number of... Injury and Illness Types Number of Days Total number of Number of Cases Jsing the Log, count the individual entries you made for each calegory. Then write the totals below, haking sure you've added the entries from every page of the log. If you had no cases write "Q." All establishments covered by Part 1904 must complete this Summary page, even if no injuries or Tinesses occurred during the year. Remember to review the Log to verify that the entries are complete ployees former employees, and their representatives have the right to roview the OSHA From 300 in entirety. They also have limited access to the OSHA From 301 or its equivalent. See 29 GFR 04.35. In OSHA's Recordkeeping rule, for further details on the access provisions for these forms. (G) 0 cases with days away from work 0 (4) Poisoning (5) Hearing Loss (6) All Other Illnesses Total number of days of job transfer or restriction Total number of cases with job transfer or 0 Total number of other recordable cases (5) Employment information OR North American Industrial Classification (NAICS), if known (e.g., 336212) Establishment information Knowingly falsifying this document may result in a fine Total hours worked by all employees last year Your establishment name Annual average number of employees Standard Industrial Classification (SIC), if known (e.g., SIC 3715) Industry description (e.g., Manufacture of motor truck trailers) 610-372-7868 LEES DOKT MARK WEIDNER examined this document and that to the best of my knowledge the entries are true, accurate, and M とろろう State 80,000 WY BRIDGE しのなかん A SALES N Zip Jul. 56

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

not send the completed Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a corrently yaild OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact. US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, Dc 20210. Do Case No. You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that need any of the specific recording criteria listed in 29 of CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or liness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA of their OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses Identify the person (B) Employee's Name (C) Job Title (e.g., Welder) Date of injury or onset of 0 Where the event occurred (e.g. Loading dock north end) $\widehat{\mathbb{E}}$ Describe the case Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burns on right forearm from acetylene torch) Be sure to transfer these totals to the Summary page (Form 300A) before you post it. F Page totals CHECK ONLY ONE box for each case based on the most serious outcome for that case: Classify the case Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used (G) Days away from work Œ City Job transfer Establishment name Remained at work Other record-Page 大田の からかり 1 of 1 Enter the number of days the injured or ill worker was: Away From Work (days) B On job transfer or restriction (days) G2A55 Occupational Safety and Health Administration U.S. Department of Labor Year 2018 Check the "injury" column or State 3 Injury Form approved OMB no. 1218-0176 七州とこみ SERVICE (2) Skin Disorder Skin Disorder Respiratory Condition Respiratory Condition (3) (4) Poisoning Poisoning (5) Hearing Loss G Hearing Loss

type of

All other illnesses

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact. US Department of Labor, OSH4 Office of Statistics, Room N-3844, 200 Constitution Ave, NW, Washington, Dc 20210. Do Case No. You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment begrand first add. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record significant work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an illnur and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help. OSHA's Form 300 (Rev. 01/2004) Log of Work-Related Injuries and Illnesses Identify the person Employee's Name (C) Job Title (e.g., (D) Date of injury or onset of illness Where the event occurred (e.g. Loading dock north end) Œ Describe the case Describe injury or illness, parts of body affected, and object/substance that directly injured or mad person ill (e.g. Second degree burns on right forearm from acetylene torch) Be sure to transfer these totals to the Summary page (Form 300A) before you post it. F Page totals the most serious outcome for that case: Classify the case CHECK ONLY ONE box for each case based on for occupational safety and health Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used Days away from work Œ City Establishment name ob transfer Remained at work Other record-Page EESTON 1 of 1 Enter the number of days the injured or ill worker was: D. N. O (days) From Work On job (days) THAK Occupational Safety and Health Administration U.S. Department of Labor Check the "injury" column or choose one type of Year 2019 3 $\widehat{\mathbb{Z}}$ injury Injury Form approved OMB no. 1218-0176 (2) Skin Disorder BRUICE ナカとらる Respiratory Condition Respiratory Condition (3) (3) (4) Poisoning Poisoning (i) Hearing Loss (5) Hearing Loss 6) All other illnesses

Summary of Work-Related Injuries and Illnesses	uries and Illnesses	
All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete	njuries or s are complete	
Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."	September 1	Establishment information
Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.		Your establishment name BYG GLASS SERVICE Street 2668 LEISCH BRIDGE RD.
Number of Cases	City	LEES DORT State PA.
Total number of Total number of cases deaths cases with days with job transfer or away from work restriction	Indus Total number of Other recordable	Industry description (e.g., Manufacture of motor truck trailers) LAAS INVSTA ALD TYON SERVICE S
(G) (H) (I)	(J) OR North	OR North American Industrial Classification (NAICS), if known (e.g., 336212)
Number of Days	Employm	Employment information
Total number of Total number of days of days away from job transfer or restriction work	Annus	Annual average number of employees 39
0 0 (K) (L)	Total year	Total hours worked by all employees last 83000
Injury and Illness Types	Sign here	Marke
(M) (1) Injury (2) Skin Disorder (3) Respiratory (4) Poisoning (5) Hearing Loss	0 Knowing O Loetify the	Knowingly falsifying this document may result in a fine. I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and
	 	RORK WE IDNETT
Post this Summary page from February 1 to April 30 of the year following the year covered by the form	ing the year covered by the form	10. 872. 7868
Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it gligates a currently yeal Could counts number. If you have any comments about these estimates or your appears of this data collection, contact. US Department of Labor, OSHA Office of Statistics, Room the 3844, 200 Constitution Ave. (W. Westimoton, D.C. 2021). Do not send the completed forms to this office.	uling time to review the instruction, search and spood to the collection of information unless it is sof this data collection, contact. US Department of addition conclead from so this office.	



Pennsylvania Compensation Rating Bureau

United Plaza Building • Suite 1500 30 South 17th Street • Philadelphia, PA 19103-4007 (215)568-2371 • FAX (215)564-4328 • www.pcrb.com

PA EXPERIENCE RATING MODIFICATION

File Number: 2254083 County: BERKS

Experience Mod: 0.693 **Address:** 2668 LEISCZS BRIDGE RD

XREF: LEESPORT PA 19533

Issue Date: 10/08/2019 **Effective Term:** 01/01/2020 - 01/01/2021

Card Number: 1
Governing Class Code: 0666

Employer Name: B & G GLASS SERVICE INC

Modification	History	Effective Date	
0.707		01/01/2019	
0.913		01/01/2018	
0.950		01/01/2017	
0.990		01/01/2016	
Governing Class Code	Rating Value	Description	
666	5.29	PLATE GLASS INSTALLATION	
815	2.15	AUTOMOBILE SERVICE CENTER	
951 .20		SALESPERSON - OUTSIDE	
953 .08		OFFICE	
9046 .05		CONSTRUCTION CLASS PREMIUM CREDIT	
9890 .05		SAFETY COMMITTEE CREDIT (5%)	

TECHNICAL SECTION 2

T-2A -Project Management Team

The RLS key management staff in the home office remains in constant touch with the project team, monitoring their efforts and making periodic site visits to ensure that the project or contract is progressing to the government's satisfaction. Our key management staff is headed up by Mr. Robert Schopfer, President and Mr. Paul Woolsey, Project Manager.

Program Manager:

The RLS Program Manager, Robert Schopfer, will have the overall responsibility for the successful delivery of the project. Mr. Schopfer will be heavily involved in the project, spending upwards of 40% of his time in the preconstruction phase and 60% in the construction phase. He will attend the construction progress meetings and will be ultimately responsible for the client's total satisfaction. The Program Manager is responsible for overall management and success of multiple, simultaneous task orders, maintaining master schedules, signing purchase orders, performing some estimating, managing RLS site personnel and representing RLS with contract owners and maintaining all necessary contract documentation. Mr. Schopfer is responsible for the overall success of the individual task orders. He functions as a coordinator between the task orders and the resources available to complete the individual task orders. Mr. Schopfer has the authorization to sign contracts on behalf of the corporation, mandate company policy for the benefit of our customer, negotiate task orders and acquire any support necessary to complete the work at hand. Mr. Schopfer also prepares submittals, initiates payroll functions (which will be carried out by the accounting department in our home office), prepares the contract budget, conducts task order planning and scheduling and ensures contract compliance at the task level.

The Program Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and sub- professionals and will direct and expedite the work.
- Coordinate and manage the construction team.
- Participate in establishing the project schedule and man-hour budget requirements.
- Is aware of the client's objectives and must satisfy the client's goals.
- Develop the master project schedule.
- Responsible for completing the project on time and on budget.
- Authority to negotiate change orders with the client.
- Hold team meetings on progress and problems for timely resolution.

Project Manager:

The proposed Project Manager, Paul Woolsey, will be responsible for the overall success of the individual task orders. The Project Manager's authority comes directly from our home office and the on-site staff will report directly to the Project Manager. The Project Manager will estimate task orders, schedule the work, hire key subcontractors, prepare submittals, initiate payroll functions (which will be carried out by the accounting department in our home office), prepare the contract budget, conduct task order planning, scheduling and ensure contract compliance at the task level. The Project Manager reports directly to the Program Manager.

The Project Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and sub- professionals and will direct and expedite the work.
- Coordinate and manage the construction team.
- Participate in establishing the project schedule and man-hour budget requirements.
- Is aware of the client's objectives and must satisfy the client's goals.
- Develop the master project schedule.
- Estimating
- Subcontractor Procurement
- Responsible for completing the project on time and on budget.
- Authority to negotiate change orders with the client.
- Hold team meetings on progress and problems for timely resolution.

Quality Control Manager:

The RLS Quality Control Manager, Michael Spitler, will manage the inspection, recording and review process for the project's quality issues on a full-time basis. He will have day-to-day responsibility for management of all field construction quality issues. Non-conforming items will be issued to the team for review and resolution. Mr. Spitler will be responsible to the client and RLS for the overall quality control of this project. He will have complete authority and responsibility to shut the job down if quality standards are not being met.

The Quality Control Manager will also perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and subcontractors on quality issues. Will direct and expedite the QC Program.
- Be involved early in the Preconstruction Phase and the establishment of all Quality Control requirements.
- Authority to make immediate corrective action if quality standards are not being met.
- Review and approve all submittals and shop drawings.
- Ensure that all required testing is being performed.
- Inspect work performed for contract compliance on a daily basis.
- Conduct the three-phase control inspection for each definable feature of work.
- Record and submit the Daily Construction Quality Report (DCQR) to the Government on a daily basis.
- Maintain as-built drawings current with work performed.
- Coordinate inspections and tests performed by the CQC Organization.
- Supervise the inspection of material and/or equipment to be incorporated into the work.

Project Superintendent:

The RLS Site Superintendent (TBD) will be responsible for the field activities. The Superintendent responsibilities will include coordination of the work sequence and details, quality assurance, safety, labor and equipment control, site utilization, temporary utilities and maintaining the progress schedule.

The Superintendent will report to the Project Manager and will perform the following duties and have the following authority:

- Authority and control for RLS' subcontractors and company trade workers.
- Be involved in the planning of the project to determine crane and hoist locations.
- Determine laydown and staging areas for office trailers and materials.
- Responsible for project layout and elevation control.
- Direct and expedite the material deliveries to the project site.
- Authority to shut the job down if quality and safety standards are not being met.
- Determine project fence location and will be responsible for site security.
- Assist project management with the preparation of the project Quality Control Plans.
- Control both construction and non-construction personnel movement.
- Maintain as-built drawings current with work performed.

Site Safety Health Officer (SSHO):

The RLS SSHO, Denny Spicher, will be responsible for the safety of all field activities. He will have day-to-day responsibility for management of safety for all field operations. He will have the authority to shut down any work activities if any safety standards are violated. He will be responsible to the client and RLS for the overall safety of this project and has complete authority and responsibility to shut the job down if OSHA Safety Standards are not being met.

Mr. Spicher will report to Robert Schopfer, President, and will perform the following duties and have the following authority:

- Authority to speak for RLS in dealing with the client and all subcontractors on Safety issues. Will direct and expedite the approved Accident Prevention Plan.
- Authority to shut the job down if OSHA Safety Standards are not being met.
- Conduct preparatory Activity Hazard Analysis on-site for each phase of work.
- Perform random drug testing.
- Be the dedicated trade contractor safety representation.
- Complete the trade contractor safety plan review.
- Hold regularly scheduled safety meetings.
- Have special access or badging requirements.
- Be responsible for the development of site-specific existing safety procedures or standards (HAZCOM Plan).
- Be responsible for the development of jobsite reporting procedures and monitoring procedures.

Robert L. Schopfer Project Executive

As Project Executive, Bob is responsible for the coordination and management of the entire project team. His responsibilities include managing all phase of construction, guiding project management and on-site personnel, project administration, cost and schedule management, and facilitating communication between all parties, to ensure a smooth construction process for the client. Acting as the hub of the project team, Bob provides a key resource for maintaining project goals, schedule and budget, so the finished project meets the established objectives.

With 35 years of construction experience, Bob has dedicated his skills to serving government and institutional clients. Because he has worked successfully with various government agencies in the past, including DGS, Bob understands the protocols that are required for publicly-funded projects, and he brings a deep understanding of the unique needs that are specific to government clients.

Relevant Experience:

PA Department of General Services – Forum Building, Harrisburg, PA Interior renovations including floor finishes, fixed seating replacement, ceiling and wall mural conservation, and repair and upgrades to HVAC and electrical systems.

PA Department of General Services – Server Room Enhancements – Harrisburg, PA Work included replacing power equipment, electrical devices and control equipment, and fire suppression equipment for the server room as described on the drawing and specifications for Building #8 at the Harrisburg Military Post.

Lebanon VA Medical Center – Renovate MOVE, Lebanon, PA Renovation of the fitness center areas in the gymnasium and removing Building 144 and adding a new classroom to Building 24 for the MOVE program.

Education:

Bachelor of Science, Environmental Engineer Pennsylvania State University, State College, PA

Military Service:

United States Army, Field Artillery Forward Observer – Sargent E-5 August 1983 to August 1985

Certifications:

OSHA-10 OSHA 30-Hour Construction CPR/First Aid/AED

Paul Woolsey Project Manager

As a Project Manager, with over 18 years of experience in the construction field, Paul works closely with the owner, client, design team and the on-site construction staff. With being involved in the entire process Paul can make sure the project is progressing properly and ensure confidence in the client. Paul is responsible and cautious of monitoring the budget and the schedule of the project. Furthermore, Paul works closely with the site superintendent on ensuring the project goes as planned and meets the extremely high expectations of RLS Constructions Group.

Paul started his career running a roofing crew and then moved on to do design work. He then progressed to project managing for the last 13 years. Paul has extensive experience working with corporate headquarters and cities for site approvals. This experience has given Paul an understanding of operations and all other aspects of a construction site. Backed by strong credentials and a proven history of on-time, on-budget and high-quality project completions.

Relevant Project Experience:

Wilkes-Barre VA Medical Center – Improve Isolation Rooms – Wilkes-Barre, PA Installation of HVAC exhaust on ante rooms and ancillary equipment. Work under this project includes mechanical/Heating Ventilation and Air-Conditioning (HVAC), electrical, roofing, structural, HVAC controls, fire protection, carpentry, and architectural design.

PA Department of General Services – Rehabilitate Carbondale Readiness Center – Carbondale, PA Renovate approximately 18,500 square feet Readiness Center and 3,100 square feet maintenance building. Work includes but not limited to modifications and improvements to HVAC, electrical, plumbing, IT and fire alarm systems. Repairs to the building facade, masonry repairs, replace some doors and windows and replace roofing. Renovate the toilet and shower areas. Architectural improvements to the ceilings, walls and flooring and ADA access. Site improvements to include parking lot repairs, paving, sidewalk and curb replacement, fence and gate replacement, site lighting and exterior signage

Wilkes-Barre VA Medical Center – Remove Nurses Stations – Wilkes-Barre, PA Renovation of existing spaces on the 2nd & 3rd Floors of Building 27 at the Wilkes-Barre VA Medical Center as defined by drawings and specifications. Work will include minor demolition (architectural, HVAC, electrical, fire protection and plumbing), asbestos abatement, lead remediation and new HVAC, plumbing, electrical, fire protection and architectural work.

Herman T. Schneebeli Federal Building, SSA Williamsport - Williamsport, PA Provided a secure barrier wall between the Social Security Administration workforce and the public that they serve. The project included updates to the public space and the SSA office space, as well as temporarily relocating the SSA within the building. Project included new interior finishes, flooring and ceilings.

Certifications:

OSHA-10 / OSHA 30-Hour Construction / CPR/First Aid/AED

Michael Spitler Quality Control Systems Manager

As an RLS Construction Group Site Safety and Health Officer (SSHO) and Quality Control Manager, Mike Spitler is charged with ensuring that safety and quality protocols are strictly adhered to by RLS staff and its subcontractors. Mike builds trusted relationships with the site staff, including all subcontractors, and maintains the safety protocols for the job-site. Mike oversees all safety related issues, including inspecting the job-site for at-risk behaviors, reporting compliance with safety regulations and creating job-specific safety plans. Mike's presence on the job-site allows him to view the project personnel in action and verify that all safety regulations are properly enforced.

Mike has over 7 years of experience in the construction industry, with 3 years of experience in Quality Control and Safety and Health oversight. Mike started his career as a laborer and progressed to his current managerial responsibilities. Because safety is the culture at RLS, Mike holds one of the most important positions in the organization, ensuring that the life and health of everyone in close proximity to an RLS job-site is protected. His efforts to maintain adherence to strict safety standards on every project, have led RLS to be recognized by countless organizations for our outstanding safety record. Mike's talents and dedication result in every project site maintaining the highest safety standards.

Mike's oversight of safety and quality issues includes scrutinizing at-risk behaviors and poor workmanship. Incidents of non-compliance are reported directly to the President of RLS Construction Group to safeguard against inadequate enforcement of safety regulations and quality control requirements of each project.

Certifications:

OSHA 30-Hour Construction CPR/First Aid/AED

Project No. DGS C-0503-0023 Phase 1 Rebid HVAC Replacement, Danville State Hospital General Construction (.1 Contract)

Denny E. Spicher Site Safety & Health Officer (SSHO)

Denny brings30+ years of top management experience in corporate Risk Management, Safety, Human Resources, and Training: developed, designed, and directed comprehensive Risk Management and Safety programs for multiple corporations. Directed Employee Relations and Training for 1,200 employees, 80 to 90 managers, and in 11 regions. Responsible for strategic alignment of Safety Programs to corporate MOD and Loss Control goals.

Education:

Master's Degree and State Certification in Adult Education, Bucknell University

Bachelor of Professional Study, Major in Organizational Counseling, Elizabethtown College

Concentration Business Management and Psychology, Elizabethtown College Insurance Institute of America, AIM Designation (Associate Insurance in Management)

Certifications:

ICS FEMA

FEMA CERTIFICATIONS

ICSIS-100.a, IS-100.HC, IS-200.a, ICS-300, ICS-400, IS-700.a, IS-800.b, IS-813

Counselor Secondary School Education (Bucknell University)

Instructor Post Secondary, (Central Penn Business School) CPR first aid emergency care certification.

SHA, Forklifts, Booms, & Aerial Platforms, Defensive Driving Trainer

"NSC" - Hilti Tools, Scaffolding, Confided Space, Lasers, and Instructor

Certification Course for Working (Zenger/Miller)

Job Evaluation Methodology, Hay Group AIM Designation (Associate Insurance in Management) Instructor Certification Course for Front-line Leadership Zenger/Miller)

Governor's Safety Counsel 2003 – Present

WC Conference Committee 2007 – 2009

Gary Luzier Site Superintendent

As the Site Superintendent, Gary supervises the day-to-day operations at the project site and controls the short-term schedule. Gary manages on-site quality control and subcontractor coordination to create steady progress through the tasks and smooth transitions between all trades, which minimizes down-time and disruptions to the workflow. He maintains open communication with every worker on-site, so the project goals and safety protocols are clearly defined. Additionally, Gary consults daily with the Project Manager, to ensure any changes and updates are conveyed efficiently to everyone involved, from the field through to the client.

Gary has over 45 years of experience in the construction industry with over 25 years of experience as a superintendent, starting as a field laborer with his father's construction company and progressing to his current superintendent responsibilities. His successful management of all aspects of the jobsite, his skill with renovations, upgrades and new construction, and his knowledge with material take-off, framing, and blueprint reading ensure that each client has an exceptional resource overseeing their project site.

Relevant Experience

Herman T. Schneebeli Federal Building, SSA Williamsport - Williamsport, PA Provided a secure barrier wall between the Social Security Administration workforce and the public that they serve. The project included updates to the public space and the SSA office space, as well as temporarily relocating the SSA within the building. Project included new interior finishes, flooring and ceilings.

James E. VanZandt Medical Center – Pneumatics HVAC Controls, Altoona, PA Replacing Building 1 Pneumatic HVAC Controls with DDC Controls.

James E. VanZandt Medical Center – Replace Space Signage, Altoona, PA Remove and replace approximately 1,636 room signs. Work included removal, patching, painting and installation of new signage.

Ft. Indiantown Gap – Area 6 Laundry Facility – Annville, PA Construction of new 1,300SF laundry facility.

Social Security Administration Building – Lewistown, PA Complete renovation of Social Security Administration Building, including HVAC, electrical and security upgrades.

Certifications:

OSHA 30-Hour Certification OSHA 10-Hour Certification CPR/First Aid/AED Blueprint Reading

John Weston Site Superintendent

As the Site Superintendent, John supervises the day-to-day operations at the project site and controls the short-term schedule. John manages on-site quality control and subcontractor coordination to create steady progress through the tasks and smooth transitions between all trades, which minimizes down-time and disruptions to the work flow. He maintains open communication with every worker on-site, so the project goals and safety protocols are clearly defined. Additionally, John consults daily with the Project Manager, to ensure any changes and updates are conveyed efficiently to everyone involved, from the field through to the client.

John has over 33 years of experience in the construction industry with over 20 years of experience as a superintendent, starting as a laborer and progressing to his current superintendent responsibilities. His successful management of all aspects of the job-site, his skill with renovations, upgrades and new construction, and his knowledge with material take-off, framing, and blueprint reading ensure that each client has an exceptional resource overseeing their project site.

Relevant Experience

Wilkes-Barre VA Medical Center – Remove Nurses Stations – Wilkes-Barre, PA Renovation of existing spaces on the 2nd & 3rd Floors of Building 27 at the Wilkes-Barre VA Medical Center as defined by drawings and specifications. Work will include minor demolition (architectural, HVAC, electrical, fire protection and plumbing), asbestos abatement, lead remediation and new HVAC, plumbing, electrical, fire protection and architectural work.

Wilkes-Barre VA Medical Center – Construct Front Entrance Canopy – Wilkes-Barre, PA Construction of a new canopy and revolving doors with two single side doors in the existing front entrance of the Wilkes-Barre VA Medical Center. Work under this project includes construction of a canopy and revolving doors, structural metal work, electrical, structural and architectural.

Wilkes-Barre VA Medical Center – Improve Isolation Rooms – Wilkes-Barre, PA Installation of HVAC exhaust on ante rooms and ancillary equipment. Work under this project includes mechanical/Heating Ventilation and Air-Conditioning (HVAC), electrical, roofing, structural, HVAC controls, fire protection, carpentry, and architectural design.

Bethlehem Township Physical Plant Addition - Bethlehem, PA Addition to existing physical plant building by means of a pre-manufactured building. Site work shall include new paving, micro-piles, soil anchors (for existing retaining wall) and foundations.

Certifications

OSHA 30-Hour Construction CPR/First Aid/AED Blueprint Reading Forklift

Barbara S. Persun, CPA CFO

Ms. Persun holds over 30 years of experience in accounting and financial operations, budget development & management, financial and strategic planning, business expansion, complex business & tax issue resolution, staff management and development, crisis management and merger and acquisition accounting.

As CFO for the last nine years with RLS Construction Group, Barb provides extensive hands-on experience in management, business leadership and relationship development with our banks, bonding companies, commercial and health insurance carriers/agents, external accountants, and employees. In summary, she provides fiscal oversight of the Company. She handles all aspects of accounting related to job costing except accounts payable entry and vendor communication.

Education

Bachelor of Science, Accounting Shippensburg University, Shippensburg, PA

CPA Licensing - Pennsylvania – 1990

Beth Ann Helsel Project Administrator

Ms. Helsel holds over 25 years of administrative experience in the engineering / construction industry.

As Project Administrator for the last 5 years with RLS Construction Group, Beth Ann provides administrative support to the RLS Management Team. She is responsible for project set-up and close-outs, processing project shop drawings, RFI's, subcontractor agreements along with related training and compliance documentation, vendor purchase orders, subcontractor pay applications and vendor invoicing. In addition, she is responsible for client and subcontractor change order administration.

Education

Associates of Arts, Executive Secretarial Science Harrisburg Area Community College, Harrisburg, PA

TECHNICAL SECTION 2

T-2B - Work Plan and Schedule

RLS understands that this project is a phased project and that portions are in secure areas. The project begins by removing and replacing roofing systems in sequence 1. Once abatement has concluded we will begin with Sequence 2, where we will remove non-asbestos ceiling systems and bulk heads. Our plan is to stay ahead of our window subcontractor in removing the old window systems and security screens, so as not leave any openings incomplete. While this process is taking place, we will begin the chase and rooftop unit structural framing. Once the duct installation and/or sprinkler system is complete we can begin metal framing for chases and bulkheads, as well as the completion of the masonry chases and masonry window infills at duct locations. As the overhead rough-ins are beginning we can start installation of the gypsum board suspension systems. Once overhead is done is specific areas, we can begin abuse resistant drywall, followed by installation of agency supplied tile flooring and new base. The project concludes with painting of new drywall and masonry finishes, as well as patched areas. The painting of the security screens can progress as the windows are being replaced, allowing for a secure and safe work site. These will be repetitive steps per sequence until project is complete.

)	0	Task Mode	Task Name	Duration
1		1 /2	NTP	
2		10	Submittals-Critical Path	
3		*	Mobilize "Sequence 1"	
4		10	Ballast removal "vacuum truck"	5 days
5		No.	Roof tear off "resealed every day	20 days
6		19	Install new roof	20 days
7		1/2	Pull test with manufacturer	1 day
8		**	Roof blocking	5 days
9		19	Plumber supplied roof drains install	5 days
10		10	New flashings, gutters and downspouts	6 days
11		**	"Sequence 2" - start after Mech. Abatement	
12		19	Secure sequence 2 areas	1 day
13		₹?	General Demo-includes joint expansion	5 days
14		70	Rough framing for windows	4 days
15		*	Replacement of windows	6 wks
16		*	Paint steel lintels	4 days
17		1/2	Shaft walls	5 days
18		*	Misc. steel installation	8 days
19		19	Electrical room upgrades	10 days
20		*	E&S installation	1 day
21		10	Prepare staging area	3 days
22		No.	Misc. grading	2 days
23		10	Trench work	15 days
24		1/2	Backfill and restore trench after other primes are complete	6 days
25		**	Survey, coordinate and layout pads with all primes	1 day
26		**	Prep and pour pads	10 days
27		19	Set prefabricated pump house	1 day
28		**	Install Chainlink w/barb wire fence	1 day
29		×2	Accoustical grid for drywall and ACT	13 days
30		₹	Hang drywall and finish	16 days
31		And the second	Paint soffits and ceilings	8 days
32		*	Floor patch and base	2 days
33		And the second	Clean up/inspection	5 days
34		**	"Sequence 3" - start after Mech. Abatement	
35		*	Secure sequence 3 areas	1 day
36		1/2	General Demo-includes joint expansion	5 days

37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55	Mode An An An An An An An An An A	Rough framing for windows Replacement of windows Paint steel lintels Misc. steel installation Doorframe, slab and hardware Accoustical grid for drywall and ACT Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	4 days 6 wks 4 days 8 days 2 days 13 days 18 days 2 days 5 days
39 40 41 42 43 44 45 46 47 48 49 50 51 52 53		Paint steel lintels Misc. steel installation Doorframe, slab and hardware Accoustical grid for drywall and ACT Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	4 days 8 days 2 days 13 days 18 days 8 days 2 days 5 days
40 41 42 43 44 45 46 47 48 49 50 51 52 53 54	· · · · · · · · · · · · · · · · · · ·	Misc. steel installation Doorframe, slab and hardware Accoustical grid for drywall and ACT Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	8 days 2 days 13 days 18 days 8 days 2 days 5 days
41 42 43 44 45 46 47 48 49 50 51 52 53 54		Doorframe, slab and hardware Accoustical grid for drywall and ACT Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	2 days 13 days 18 days 8 days 2 days 5 days
42 43 44 45 46 47 48 49 50 51 52 53	· · · · · · · · · · · · · · · · · · ·	Accoustical grid for drywall and ACT Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	13 days 18 days 8 days 2 days 5 days
43 44 45 46 47 48 49 50 51 52 53 54		Hang drywall and finish Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	18 days 8 days 2 days 5 days
44 45 46 47 48 49 50 51 52 53	· · · · · · · · · · · · · · · · · · ·	Paint soffits and ceilings Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	8 days 2 days 5 days
45 46 47 48 49 50 51 52 53	**************************************	Floor patch and base Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	2 days 5 days
46 47 48 49 50 51 52 53	· · · · · · · · · · · · · · · · · · ·	Final walkthrough "Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	5 days
47 48 49 50 51 52 53 54	\$\$\$ \$\$\$\$ \$\$\$\$	"Sequence 4" - start after Mech. Abatement Secure sequence 4 areas	
48 49 50 51 52 53 54	**************************************	Secure sequence 4 areas	1 day
49 50 51 52 53 54	鸡	*	1 450
50 51 52 53 54	*		1 day
51 52 53 54		General Demo-includes joint expansion	5 days
52 53 54	**	Rough framing for windows	4 days
53 54		Replacement of windows	6 wks
54	**	Paint steel lintels	4 days
	**	Misc. steel installation	8 days
55	*	Accoustical grid for drywall and ACT	13 days
	**	Doorframe, slab and hardware	
56	**	Hang drywall and finish	10 days
57	**	Paint soffits and ceilings	5 days
58	₹	Floor patch and base	2 days
59	19	Final walkthrough	5 days
60	**	"Sequence 5" - start after Mech. Abatement	
61	**	Secure sequence 5 areas	1 day
62	*	General Demo-includes joint expansion	5 days
63	**	Rough framing for windows	4 days
64	**	Replacement of windows	6 wks
65	*	Paint steel lintels	4 days
66	1	Misc. steel installation	8 days
67	**	Accoustical grid for drywall and ACT	13 days
68	**	Hang drywall and finish	18 days
69	**	Paint soffits and ceilings	8 days
70	**	Floor patch and base	2 days
71	19	Final walkthrough	5 days

D	0	Task Mode	Task Name	Duration
73		₹?	Secure sequence 6 areas	1 day
74		77	General Demo-includes joint expansion	5 days
75		*	Rough framing for windows	4 days
76		*	Replacement of windows	3 wks
77		10	Paint steel lintels	4 days
78		19	Misc. steel installation	8 days
79		**	Accoustical grid for drywall and ACT	13 days
80		**	Hang drywall and finish	10 days
81		19	Paint soffits and ceilings	5 days
82	1	*	Floor patch and base	2 days
83		19	Final walkthrough	5 days
84		A?	"Sequence 7" - start after Mech. Abatement	
85		No.	Secure sequence 7 areas	1 day
86		And the second	General Demo-includes joint expansion	5 days
87		**	Rough framing for windows	4 days
88		And the second	Replacement of windows	3 wks
89		×2	Paint steel lintels	4 days
90		**	Misc. steel installation	8 days
91		19	Accoustical grid for drywall and ACT	13 days
92		**	Hang drywall and finish	10 days
93		*	Paint soffits and ceilings	5 days
94		10	Floor patch and base	2 days
95		19	Final walkthrough	5 days
96		**	"Sequence 8 - start after Mech. Abatement	
97		19	Secure sequence 8 areas	1 day
98		*	General Demo-includes joint expansion	5 days
99		**	Rough framing for windows	4 days
100		**	Replacement of windows	25 days
101		**	Paint steel lintels	4 daγs
102		No.	Misc. steel installation	8 days
103		₹?	Accoustical grid for drywall and ACT	13 days
104		*	Hang drywall and finish	10 days
105		And a	Paint soffits and ceilings	5 days
106		₹	Floor patch and base	2 days
107	1	1	Final walkthrough	5 days

TECHNICAL SECTION 2

T-2C – Safety Plan

The safety of our employees, our subcontractors' employees and the general public is a vital priority in the management and completion of this project. It is our intent to conduct all the operations of our projects in a safe manner. Incidents cause suffering and hardship to those immediately involved, result in job delays, and generate added expenses to contractors.

Safety is never the result of pure luck but is always the direct result of a carefully planned program, conscientiously carried forward by management and supervision and communicated to each employee. Positive action will be taken to promote a safe work site.

It is the policy of RLS Construction Group to protect the safety and health of all employees and the general public on every RLS project for our clients. Our Program includes safety procedures facilitated by RLS. The RLS Safety Management Team (made up of both management and employees) will meet as necessary to ensure success of the program.

Our company's Workplace Safety Program is designed to assists subcontractors to be responsible for their own safety and to further ensure total jobsite safety. Our manual and a site-specific safety plan will be the basis for site safety operations. Utilization of the RLS Workplace Safety Program, other safety procedures, and individual company safety policies will maximize the effectiveness of site safety.

All companies are required to submit their company safety plan and adhere to all items 100% of the time. RLS reserves the right to reject any company's safety policy not consistent with OSHA regulations and to enforce stricter policies to assure site safety. Each company is responsible for enforcing safety policies established for their company and the site. RLS may override any subcontractor on a decision pertaining to safety if they believe it is in the best interest of the employee at risk. will design specific programs relating to orientation, training, and audits of all subcontractors on behalf of RLS.

The goal for our projects is to have an incident free workplace and jobsite, with no OSHA recordable injuries or OSHA citations. Therefore, it is essential that all operating practices and procedures result in safe and efficient operations. One of the increasingly important functions of the project staff is implementation of OSHA requirements. An OSHA compliance officer may wish to visit the project at any time. Legally, the project staff may require the compliance officer to produce a search warrant to inspect the construction site for violations. **However, this is not an RLS policy.** Generally, a compliance officer will be less likely to nitpick if he has the cooperation of the project staff, RLS and subcontractors at the start of an OSHA inspection.

Additionally, the following outlines our site-specific procedures in performing work safely and insuring a safe working environment:

- I. Company Safety Policy
 - A. Project Executive's Message on Safety
 - B. Safety Policy
 - C. Orientation Check List and Sign Off
- II. Responsibilities and Loss Prevention
 - A. Management
 - B. Designated Safety Director
 - C. Trades Contractor and/or Sub-Contractors and Foremen
 - D. Project Managers
 - E. Employees
- III. General
 - A. OSHA Inspections
 - B. Safety and Health Inspection Report
 - C. Site Postings and Signage
 - D. Non-Compliance of Any Company On-Site
- IV. Training
 - A. First Aid, CPR, OSHA Training
 - B. Tool Box Talks Handouts and Meetings
 - C. Initial Jobsite Safety Conference
 - D. Specific Safety Training
- V. Safety and Health Procedures
 - A. Hazard Communications/Safety Data Sheets (SDS)
 - B. Incident/Near Miss Reporting/Investigations
 - C. Emergency Action Plan
 - D. Jobsite Inspections and Housekeeping
 - E. Personal Protective Equipment
 - F. Scaffolding
 - G. Stairs and Ladders
 - H. Substance Abuse Awareness
 - I. Tool Safety
 - J. Confined Space
 - K. Electrical
 - L. Fall Protection
 - M. Fire Prevention
 - N. Hot Work Permit Program
 - O. Lockout/Tag out
- VI. Safety Forms and Additional Resources
 - A. Resources
 - 1. Construction Regulatory Guide (29 CFR 1926 Regulations and Index)
 - 2. Occupational Safety and Health Standards for the Construction Industry (29 CFR Part 1926)
 - 3. Construction Safety & Health (Compliance Manual)
 - 4. Construction Tool Box Safety Talks

It is the responsibility of RLS to provide a safe working environment for all employees and to protect employees, the general public, property and equipment from incidents. Management will:

- Provide and enforce the safety plan.
- Accept the ultimate responsibility for the safety of all operations.
- Assign on site "competent person", or use the services of a safety consulting firm, to ensure compliance with safety and health standards on all work sites and operations, and to coordinate safety and loss prevention activities.
- Delegate the responsibility for safe operations and OSHA compliance.
- Ensure that subcontractors are held accountable for safe operations within the scope of his responsibilities.
- Demand safe performance from all employees and express this demand periodically and whenever the opportunity presents itself.
- Provide sufficient funds, time, personnel and equipment for safe operations.
- Utilize, support and participate in incident investigation activities. Insist that all incidents resulting in a loss of \$500 or greater be thoroughly investigated and written reports submitted.
- Participate in, support and attend safety meetings in order to provide physical visibility of management's concern for and interest in safety.
- Promptly report all injuries, to the State Industrial Incident Board and the workmen's compensation insurance carrier. This report shall be made by forwarding the completed First Report of Injury Form to this insurance broker.
- Promptly report all losses to the appropriate insurance carrier via the insurance broker.
- Maintain a record of occupational injuries and illnesses as required by the Workmen's Compensation Law of the State of Pennsylvania, and the Occupational Safety and Health Act of 1970.

Project Managers are responsible to communicate the site specific and their individual company safety program and policies to all project team members of RLS and to assist their subcontractor with the safety program.

Each employee has a responsibility to himself for his own safety and health and that of others with whom he comes in contact. In carrying out his assigned work, each employee must observe all safety and health standards related to his work. He will immediately report any unsafe working conditions or practices to the attention of his supervisor. All work will be conducted in a safe, efficient, workmanlike manner, and in accordance with the site and their company safety program, accepted safety standards of the trade and the Occupational Safety and Health Act of 1970.

Subcontractor and their management team are also required to provide competent persons on the jobsite in this safety effort. They have the knowledge and experience to recognize unsafe conditions and have the authority to correct those conditions. These are the persons absolutely responsible for site safety for their own employees. They are critical to maintaining a safe work environment because they are in constant touch with all employees and are aware of changing conditions. They are charged with conducting a safe, efficient operation at all times.

Safety is an operating leadership responsibility and cannot be delegated to a subordinate or to a staff function. Every individual who supervises directs or controls the work or actions of others are responsible for the safety of each person under their supervision, direction or control. In addition, all such individuals are responsible for the safety of equipment and property within the area of his responsibility.

Subcontractor will be responsible for the following:

- Analyze job specifications and the jobsite for possible safety hazards and with the assistance of the RLS designated Safety Director. Pre-plan each job to eliminate recognized safety hazards.
- Contact "PA One Call" prior to commencing and groundbreaking operations, to determine the necessity for any special precautions.
- Pre-plan each phase of the work with the Foreman, to ensure that everyone has a complete understanding of what is required.
- Ensure that all materials and equipment delivered to the jobsite are placed so as to minimize handling and to establish good housekeeping.
- Ensure proper security for all materials and equipment.
- Review each incident report for completeness of detail and follow up on the Foreman's investigation and recommendations. Submit the report to RLS.
- Subcontractor are responsible for the completion, accuracy and submission to the RLS of all incident and loss reports.
- Meet with the Foreman at least once a week to pre-plan the next week's activities.
- Inspect each job for unsafe practices or conditions and explain the reason for the correction.
- Make every effort to instill the proper attitudes for safety and incident prevention in all employees.
- Arrange for all necessary barricades and warning signs.
- Ensure that all work is conducted in accordance with OSHA standards, and all other Federal, State and local requirements.
- Ensure that all subcontractors conduct their operations in accordance with the company's safety plan, OSHA standards, and all other Federal, State and local requirements.
- Ensure that Foreman review the safety requirements and precautions with all employees at the beginning of each job. Throughout the remainder of the job, insist that the Foreman hold weekly "Toolbox Safety Talks" and that each talk is documented.
- Subcontractor are responsible for their company's job safety.
- Correct unsafe conditions immediately. No repeats.
- Conduct Weekly Safety Toolbox Talks.
- Maintain incident records, including costs.
- Require immediate reporting of all incidents, incidents and near misses.
- Maintain site safety program.
- Be involved in day-to-day activities.
- Supervise compliance with the site-specific safety program by all subcontractors.
- Conduct project safety inspections as necessary. Document same.
- Review all incident, incident and near-miss reports and determine that total corrective measures have been taken.

- Indoctrinate employees and subcontractors prior to starting work. The orientation shall consist of construction safety rules, wearing of personal protective equipment and repair or replacement of said equipment, emergency procedures, parking, etc.
- Complete an approved OSHA Safety and Red Cross CPR & First Aid Course. All management personnel on-site should maintain a current card for all courses.
- Post all required OSHA documents.
- Ensure protection of the general public by minimizing hazards immediately outside the limits of construction, i.e. barricading sidewalks, cleaning streets, posting warning signs.
- Maintain adequate first aid supplies on the project.
- Post a list of emergency telephone numbers and information regarding doctors, hospitals, ambulance services, police authorities and fire departments.
- Ensure that hard hats and proper clothing are worn at all times.
- Ensure use of protective glasses, goggles, safety harnesses, lifelines, etc.

Their Superintendents and Foremen will:

- Assure all employees understand the company safety plan prior to beginning each job. Ensure they are aware of management's concern for safety, loss prevention and efficient operations.
- Closely supervise employees, to ensure they work in accordance with company rules and regulations.
- Hold "Toolbox Safety Talks", weekly, to discuss safety, the problems to be encountered during the week, and to review any incidents which may have occurred in the previous week.
- Investigate each incident. Complete the appropriate incident report form and submit to management. It is the Foreman's responsibility to initiate the incident report as soon as he is aware of any injury, damage or loss.
- Assure the job is cleaned up, necessary barriers are erected, and warning signs are posted at the end of each day. A thorough inspection of the job each night will minimize public exposure, tool loss and equipment damage.
- Post current emergency telephone numbers prior to starting each operation.
- Ensure that emergency phone numbers remain current and are readily available to everyone on the jobsite.
- Conspicuously post all pertinent safety signs and posters, such as OSHA poster, hardhat required, etc.

T-2D – Quality Management Plan

The Quality Management Plan for RLS Construction Group has been prepared for use on all its construction projects. The Quality Management Plan is a written description of intended actions to control and assure quality.

Policy and Expectations:

Quality is to be an integrated part of all aspects of the project delivery method. RLS shall qualify subcontractors and select the best subcontractors and suppliers available to meet the project specifications, schedule and budget. Our staff utilizes proven processes and procedures to help the project team achieve quality results for the clients.

INTRODUCTION

This Quality Management Plan (QMP) guides all members of the RLS Team in delivering a project that meets high quality standards. This plan has been enacted by the leadership at RLS to provide reliable, quality-focused services to their clients. This QMP shall satisfy all contractual agreements concerning quality processes and procedures.

We have developed a simplified program to guide our team's quality control/assurance efforts.

- Perform thorough drawing and specification review for quality-assurance constructability reviews
- Perform detailed subcontractor qualification review prior to Contract Award
- Perform thorough submittal/shop drawing review and look for conflicts with Contract Documents
- Conduct and document pre-installation meetings for all building components
- Verify that materials delivered to the site conform to the specification and approved submittals
- Perform mockups and benchmarks of all major building components to identify conflicts, ensure agreement on client/architect expectations
- Perform regular field inspections to ensure that the work in the field complies with the contract documents, submittals and mockups/benchmarks
- Develop and aggressively manage an ongoing "non-conforming work list" to minimize the size of the punch list upon project completion

A. MANAGEMENT RESPONSIBILITY

The Management Team is wholly committed to quality and all personnel associated with the project are expected to abide by all guidelines and procedures as listed in this plan.

Responsibilities: RLS has defined and documented a Quality Policy that is communicated, implemented and maintained at all levels of its organization. Its management has designated a Quality Assurance Representative for each project who has defined authority and responsibility for ensuring that the Quality Policy is implemented and maintained.

The QMP contains a complete organization chart and description of the Management Team's responsibilities and their relationships. A project specific plan and organization chart is developed for each project as specific requirements and responsibilities may vary from job to job.

- The upper management for the firm consists of the President/CEO, Project Manager and Project Superintendent who establish the organization's overall Quality Control Policy and procedures. These individuals have the responsibility to periodically review and improve the suitability and effectiveness of the quality control practice of the firm that ultimately provides action to prevent quality problems, identifies and records quality problems, initiates solutions through appropriate channels.
- Quality Assurance (QA) Representative The QA Representative is charged with independent auditing of the project for conformance to the QMP, through scheduled internal auditing of the work. The QA Representative has the authority to cite conformance or violations.
- Project Manager (PM) The PM is responsible for managing, implementing and conforming to the overall QMP for the project. Other responsibilities include maintaining a total commitment towards improving quality on a policy level as it affects the overall team. This includes issuing directives to any member of the project team.
- Project Superintendent (SUPER) The SUPER is responsible for confirming to the on-site field requirements of the QMP. This includes informing, guiding and advising project staff, contractors and subcontractors of the responsibilities and expectation of the plan. The SUPER will coordinate the efforts of Inspectors, the Owner's Independent Testing and Inspection Agency, as well as Commissioning Consultants. The SUPER shall also conduct Pre-Installation meetings with key subcontractors, conduct daily field inspections of the work, verify materials delivered conform to contract documents and approved submittals, implement mockup installations and obtain Owner/Architect approval, perform field monitoring of the work utilizing specification and checklists from RLS's manual, develop lists of non-conforming work for trades as work progresses, facilitate and coordinate proper closeout procedures.

B. DOCUMENTED QUALITY MANAGEMENT SYSTEM

Proper documentation is essential to a quality-driven project. All plans, drawings and specifications are required to be maintained by all personnel. Any and all personnel that inspect quality issues are required to have the necessary authority to enact and necessary changes to maintain quality processes. Written documentation detailing all activities as they relate to quality is required and is to be verified to follow established quality process.

For construction inspection services, all documentation (quality and procedural) will follow the owner's current standards. Inspections will comply with construction document (plans and specifications) requirements.

Responsibilities: The PM is responsible for disseminating project documents (plans, specifications, etc.) and this QMP for the control of processes including inspection, testing, and nondestructive examination, maintenance of quality record, quality audits, and training. The Quality Assurance Representative is responsible for training the project staff on the QMP, verifying documentation has occurred, auditing the work for compliance with the quality control plan and reviewing any corrective action.

C. DOCUMENT CONTROL

Documentation shall be carefully controlled to verify that the proper documents currently in effect are available and being used, while all documents that have been superseded, rejected or discontinued must be properly marked as "Void" and removed completely from all areas and persons associated with the project to provide project-wide continuity. These items shall be stored in the project files and identified as "void and superseded - do not use". All documents shall be filed according to the approved filing system of the project. All team members involved with the project will be furnished a copy of this approved QMP.

Responsibilities: The RLS Management Team shall verify all document control processes are effective and meet the project specifications and requirements. Specific Responsibilities include the following:

- Personnel associated with each project shall maintain document control for the inspection procedures, test procedures and QA program and procedures.
- The PM and the SUPER are responsible for all external communication and dissemination of project correspondence. They have the authority to prepare, review, approve, issue, revise, distribute and store all project documents. All correspondence will be saved and logically organized in the official project files.
- The Superintendent will complete a daily report of on-site activities.

D. PURCHASING

This encompasses subcontractor qualifications, bid package scopes of work, bid package scheduling requirements, long lead item purchases, contract purchases and Owner provided work. All requirements will be properly stated in contracts, subcontracts or purchase orders generated for the project.

Responsibilities: The PM oversees all procurement activities and obtains approval from the RLS President/CEO for any contract or purchase order recommendation and/or execution.

E. PRODUCT IDENTIFICATION AND TRACEABLILITY

This section includes measures that should be established and maintained for identifying and controlling products delivered to the jobsite. All products should be delivered in original manufacturer packaging or with appropriate tags and markings identifying the material or product to use on the project.

Physical identification and control shall be used to the extent possible. Items that fail to possess identification or items for which record traceability has been lost, or items that do not confirm requirements should be segregated to prevent use or installation. An item shall be able to be identified by how it is marked or tagged.

Responsibilities: The SUPER is responsible to make sure that materials and equipment delivered to the site are properly labeled and tagged for the project and are in accordance with the approved submittals for the material or piece of equipment.

F. PROCESS CONTROL

This section describes the processes used at RLS in relation to process control. All unique instructions shall be reviewed to verify accuracy and applicability to the work to be performed. Any instructions that appear to be incomplete shall be referred to the designer for clarification. Unique instructions shall conform to overall project specifications. Any clarification from the designer shall also be reviewed to determine applicability.

Responsibilities: The PM and SUPER will identify which work activities involve unique process instructions. These instructions shall have been provided in the specifications. The personnel will verify conformance with any special instructions for all unique activities associated with the specific task order. The construction contract documents will be reviewed to identify any unique activities associated with the work. Inspections will be performed in the proper sequence to document the various construction stages.

G. INSPECTION AND TESTING

When products are delivered to the purchaser/contractor, it is the responsibility of the purchaser/contractor to verify they are in conformance with the requirements. Verification should be in accordance with the documented procedures.

In-process testing and inspection of the work to verify conformance of an item or work activity to specified requirements shall be in accordance with the documented procedures. Both inspection and process monitoring methods should be performed, as necessary, to ensure that the specified requirements for the control work processes and the quality of the item are being achieved throughout the duration of the work. Final inspection and testing should ensure that all specified inspections and tests, including those specified for the receipt of product or in-process work, have been carried out and the resulting data meet specifications.

Records shall be maintained of the various inspections and tests to provide evidence that the product has passed inspection and/or test with defined acceptance criteria.

Responsibilities: RLS staff will require critical issues are emphasized in the inspection and testing program:

- Items or work affecting safety
- Items that affect system reliability
- Items that affect service life
- Long lead time items or custom manufactured items
- High visibility areas
- ADA compliance items

H. INSPECTION, MEASURING AND TESTING

Inspection, measuring and test equipment used should meet the standards of accuracy for the measurements which are required. The equipment should be calibrated according to specifications.

All tests should have a minimum set of information to properly identify the material tested and its subsequent pass/fail requirement. This information, at a minimum, shall include the material being tested, the unique test identifier, personnel performing the test, the location of the material on the jobsite and all equipment used in the test. The inspector should note specific dates and times inspections took place on a common set of contract documents use for the purpose, noting whether test failed or passed on that date.

Responsibilities: The SUPER will coordinate the efforts of the Owner's Independent Testing and Inspection Agency's Inspectors to verify the status of work inspected. The SUPER shall require the Inspectors to mark up the common set of plans noting the area tested, date and whether the test passed/failed. In addition, a daily field report from the inspector shall be required.

I. NON-CONFORMANCE

The Non-Conformance Report shall be the primary tool of the quality personnel when identifying construction workmanship and materials not meeting specifications and standards.

Responsibilities: The person(s) present during identification of a deficiency will take appropriate steps to document the non-conforming item. The inspector overseeing that section of the work performed shall notify the appropriate sub-contractors of the deficiency. The Owner shall have the sole authority to determine acceptance of any non-conforming work. The SUPER shall keep an ongoing list of non-conforming work and document such items with the trades at their job conference/coordination meetings.

J. CORRECTIVE ACTION

Any non-conforming work shall be investigated to determine the appropriate corrective action. New tests and procedures resulting from the corrective action process shall be documented and verified acceptable according to standards. Any information discovered from the corrective action shall be documented to help prevent reoccurrence.

Responsibilities: The authorized inspection personnel (as delegated by the PM) shall identify, implement and document corrective actions that are directly resulting from any QA procedure. This includes routine construction inspection, non-conformance reports and material inspection.

T-3A – Staffing Resources

RLS Construction Group's expertise includes performance and/or management of all construction disciplines. We have sufficient staff and experience to self-perform selected critical trades. Our staff routinely provides supervision, concrete and general trades, including structural, carpentry and finishing work. Because our staff has specialized skills in these critical trades, we are able to move quickly through major tasks, and plan to supplement our staff with only the best pre-qualified subcontractors.

RLS provides full-time employment for the following trades: Site Superintendent / Foreman -6 Laborers -10 Carpenters -10 Equipment Operators -3 Cement Finishers -3

RLS provides key personnel, including Project Management, Administration, Site Superintendents, Quality Control Management, Safety Management and Estimating and Scheduling professionals to further assist our effort of achieving the self-performance goals. Our Project Managers communicate daily with the Site Superintendents and meet weekly with RLS President and CEO, Robert Schopfer to review quality, assign manpower and schedule the right RLS workers to our on-going job-sites to ensure maximum efficiency and quality.

RLS vets our subcontractors in a similar manner to the government when it selects its contractors; by carefully reviewing past performance and choosing to work only with companies that have a proven track record of success as measured by their completion of quality work and completing the project on time and within budget. RLS has developed strong relationships with numerous subcontractors necessary to handle those specialty trades that fall outside of the expertise of RLS. We believe some specialty trades are best handled by contractors with the proper training and expertise who have encountered every contingency that a complicated job site can throw at them. Experienced subcontractors can also provide useful guidance during the bid process by suggesting alternate materials and methods that help us achieve the best value for our customers.

RLS has a commitment to ongoing training to engage our workforce, offer career advancement and provide a challenging and fulfilling work experience. RLS holds its employees accountable for their performance and tracks their actual trade-specific skills by use of a Skills Matrix that assigns measurable ratings to their job tasks. RLS values speed, efficiency and coordination while delivering quality workmanship. With our team of experienced design professionals, project managers and field personnel, we consistently complete projects that exceed client expectations, providing them with quality service and the best overall value.

T-3B – Skill Training

Construction can be a physically and mentally challenging career, though a personally and financially rewarding one. Some people work construction for a brief time, perhaps to raise money for college, while others spend their entire working lives building—or demolishing—in the world of contracting.

Prospective construction workers might not realize how many of the required skills they already have. Many people learn construction skills by working on their own projects at home, or by doing volunteer work with neighbors or community organizations.

Apprentice Training

Our apprenticeship program is available for dedicated journeymen who express an interest in formal construction training. RLS Construction Group will assist employees in getting enrolled and pay the cost of classroom instruction, provide supervision/instruction in the field, and provide a safe and paid work environment to apply learned skills.

On-the-Job Training

On-the-job training (OJT) is a hands-on method of teaching workers the knowledge, skills, and competencies needed to perform a specific job. Employees earn a paycheck while learning in the actual environment where the work is performed.

Mentorship

We want to help new our managers and craft workers succeed so we offer extensive on-the-job training and assistance through mentorship. A significant component of the training includes matching our new employee with a mentor. Our seasoned supervisors provide assistance and guidance during the new employee's transition into our culture and helps contribute to their growth and development.

T-shaped" Cross-Training and Development

Consistent cross-training creates T-shaped employees. T-shaped employees have two dimensions:

- 1. The horizontal bar represents a broad set of skills enabling them to work on a variety of projects that are within their wheelhouse but outside of their core area of expertise.
- 2. The vertical bar represents Deep knowledge in a specialized or functional area, discipline or specialty.

If one of our T-shaped employees is a drywall specialist they likely also have a broad set of skills in other areas. These skills mean they are able to assist their coworkers on a variety of projects (e.g. carpentry, HVAC, painting, pipefitting, etc.). With a crew of T-shaped employees, any employee is able to step in for another co-worker whenever they are needed. A consistent focus on developing T-shaped employees builds firm resilience.

T-3C – Workforce Safety

RLS' Safety Program has been developed to comply with the regulations under the USACE EM 385 1-1 Safety Manual and the Occupational Safety and Health Administration (OSHA) 29 CFR 1910 and 29 CFR 1926 to the operations of this project. It addresses foreseeable activities associated with project activities. Our Safety Program establishes personnel protection standards and mandatory safety practices and procedures. Additionally, it assigns responsibilities, establishes standard operating procedures, and provides for contingencies that may arise while operations are being. The level of protection and the procedures specified in the Safety Program represent the minimum health and safety requirements to be observed by site personnel engaged in the referenced inspection of construction related activities. Unknown conditions may exist, and known conditions may change. Should an employee find himself or herself in a potentially hazardous situation, the employee will immediately discontinue the hazardous procedures(s) and either personally effect appropriate preventative or corrective measures, or immediately notify the Site and Safety Health Officer (SSHO) or a qualified RLS' representative of the nature of the hazard. In the event of an immediately dangerous or life-threatening situation, the employee always has "stop work" authority. Any necessary revision to the Health and Safety procedures will be recorded. Each employee is responsible for exercising the utmost care and good judgment in protecting his or her own health and safety and that of fellow employees. Should any employee observe a potentially unsafe condition or situation, it is the responsibility of that employee to immediately bring the observed condition to the attention of the appropriate health and safety personnel. RLS has received the Associated Builders and Constructors (ABC) highest national recognition for eight (8) straight years.

TRAINING REQUIREMENTS

All personnel have received appropriate OSHA construction training. Required worker training is indicted in the table below.

Required RLS Training and Site-Specific Training

Required RLS Construction Training	Site-specific Training Requirements
OSHA 30-hour for Construction – Site Safety	All personnel working on site shall attend site-
and Health Officer training	specific orientation/training prior to starting on
OSHA 10-hour for Construction – All on-site	site project work. This training will be facilitated
personnel	by the Department of Veterans Affairs (VA)

All on-site personnel (including supervisors) will attend tailgate safety briefings each morning prior to beginning fieldwork. The daily meetings will be facilitated by the SSHO. Employees will be instructed on the requirements of the Safety Program and any additional safety or health concerns and discuss the proposed activities scheduled for the day. Any employee not present at the scheduled daily safety meeting shall be thoroughly briefed by the SSHO prior to starting work for the day. Special emphasis will be placed on potential emergency procedures to in the event of an accident or illness. A thorough review of the potential hazards, the protective measures to be

taken to avoid those hazards, the proper use of any personal protective equipment (PPE) to be used, and the contents of the Safety Program will be conducted. Attendance at daily safety briefings, any site-specific training, and an employee endorsement of the provisions of the Safety Program will be maintained by the SSHO.

Emergency Response Training

RLS' employees and subcontractors are limited to OSHA Awareness-level Emergency Response training which was incorporated into their Hazard Communication training prior to starting the project. Their training taught them to recognize an emergency, notify and keep personnel away from the scene. They will not be responding to emergencies. Training for emergency actions of taking shelter and evacuation procedures will be established and covered with all subcontractors during the safety orientation by the SSHO and posted on a central job board.

SAFETY AND HEALTH INSPECTIONS

Internal Safety and Health Inspections: The SSHO will conduct daily informal safety and health inspections of the active field work areas. The inspection shall cover workplace conditions, physical area safety, and employee work practices. The SSHO shall document any deficiencies and corrective actions in the Daily Hazard Surveillance Checklist form, which can be found in our Safety Program together with other project forms. The SSHO will be responsible for ensuring all deficiencies noted are corrected immediately. If deficiencies cannot be corrected immediately, appropriate temporary countermeasures will be implemented that will ensure safety until more permanent countermeasures can be put in place. All deficiency, countermeasure, and completion tracking are the responsibility of the SSHO and shall be completed throughout the duration of the project. All deficiencies, including safety inspection findings, will be tracked. The SSHO will be responsible for ensuring items are followed up and completed as required to ensure continued compliance.

Daily Safety and Health Inspections:

The SSHO will conduct daily informal safety and health inspections of the active field work area(s). The inspection shall cover workplace conditions, physical area safety, and employee work practices. The SSHO shall document any deficiencies and corrective actions in a field logbook as well as into the QC Daily Report. RLS has put in place extensive policies, procedures, and incentives all designed to provide a safe and healthy work environment for all of our employees, subcontractors, and customers. RLS has never had an accident or safety violation on any of our project sites since the formation of our company. What follows here is a general discussion and details on the RLS Team's Zero Incident Safety Program and a site-specific accident prevention, health and safety plan. Our goal on every job is **Zero Incidents** - to ensure that all work is completed safely, with appropriate tools, Safety and Health Requirements, and all VA requirements. This goal takes priority over scheduling concerns. Any task that the Safety Manager, or his designee, observes being performed in an unsafe manner, or without appropriate safety precautions, will be stopped until proper safety procedures can be instituted. Potential hazards are identified and systematically reduced or eliminated as much as possible. Environmental hazards are given extra consideration to verify that all dangerous procedures and materials are handled in accordance with OSHA and Environmental Protection Agency (EPA) guidelines. Every effort is made to substitute safe alternatives for potentially hazardous materials and methods.

The following key practices to meet our Zero Incident safety policy have been put into effect by the RLS Team:

- > Demonstrated management commitment
- > Staffing for safety
- ➤ Safety & Health planning pre-project / pre-task/AHA's
- > Safety & Health training and education
- Worker involvement and participation
- Recognition and rewards
- > Subcontractor management
- > Incident reporting and investigation
- > Drug and alcohol testing

The Safety Officer is responsible for certifying that all workers are aware of proper safety procedures. He will conduct weekly safety training sessions to ensure that everyone understands the particular dangers and hazards of the work in progress and that all site workers are familiar with safe operation and handling of equipment and materials. We require that subcontractors maintain the same level of education with all employees on all jobs. Health and safety inspections are held regularly while a project is in progress. We publish and maintain a Safety Plan for all of our employees and subcontractors. The goals of the Safety Plan are to minimize risk of injury on the job, reduce property damage, and enforce compliance with all laws, codes, and guidelines. Our Safety Plan includes education in specific job-related tasks as well as general, continuing safety training. The plan outlines methods to detect, correct, and prevent unsafe practices and hazardous conditions. The plan also provides information in supplying and properly using protective equipment, safety mechanisms, and establishes a regular schedule for tool and equipment maintenance.

Potential hazards are identified and systematically reduced or eliminated as much as possible. When this is not possible, we make sure that only qualified personnel with previous experience and specific training are assigned to hazardous duty. All subcontractors are also shown the location of all emergency equipment and Safety Data Sheets, telephones, and evacuation routes. Standards in the areas of housekeeping, protective safety equipment, weekly safety meetings, fire protection equipment, and treating, reporting, and investigating injuries is also outlined in the RLS' Safety Plan. Also included are safe procedures for all types of construction activities by CSI category. RLS' Safety Plan is included as a compliance document with our Employee Handbook and as a referenced specification in all subcontracts.

Denny Spicher, our Site Safety & Health Officer, is responsible for certifying that all subcontractors and in-house workers are aware of proper safety procedures. The approved RLS' Accident Prevention Plan (APP) will flow down to all subcontractors and will be enforced by the RLS SSHO. We always publish and maintain a Safety Plan for all of our employees and subcontractors and keep a copy of that site-specific APP on site. The goals of the APP are to minimize risk of injury on the job, reduce property damage, and enforce compliance with all laws, codes, and guidelines. During the preparatory phase of each definable feature of work, the SSHO will conduct a safety meeting going over the Activity Hazard Analysis (AHA) with all subcontractors and RLS employees. All personnel are required to sign the form certifying they will follow all safety precautions required by the AHA. The SSHO will conduct weekly safety training sessions to

ensure that everyone understands the particular dangers and hazards of the work in progress and that all site workers are familiar with safe operation and handling of equipment and materials. We require that subcontractors maintain the same level of education with all employees on all jobs. Health and safety inspections are held regularly while a project is in progress. Our Safety Plan includes education in specific job-related tasks as well as general, continuing safety training. The plan outlines methods to detect, correct, and prevent unsafe practices and hazardous conditions. The plan also provides information in supplying and properly using protective equipment, safety mechanisms, and establishes a regular schedule for tool and equipment maintenance. All subcontractors are also shown the location of all emergency equipment and Safety Data Sheets, telephones, and evacuation routes. Standards in the areas of housekeeping, protective safety equipment, weekly safety meetings, fire protection equipment, and treating, reporting, and investigating injuries is also outlined in RLS' Safety Plan.