ATTACHMENT "B" BID COST PROPOSAL FORM (BID SHEET)

ALL PRICES SHALL REMAIN VALID FOR ONE HUNDRED AND TWENTY (120) DAYS AFTER BID OPENING.

CITB NO.: CITB-0006-25, Gateway Monument and Park Identification Signage

* NOTE: <u>BASES OF AWARD</u>: The City will award the contract to the lowest priced responsive, responsible Bidders, in the aggregate. To be considered for award, the Bidder must submit an offer on all items listed in the Solicitation. If a Bidder fails to submit an offer on all items, its overall offer may be rejected. Contractor will be Selected Based on the TOTAL COST.

Prices shall contain all costs to include labor, equipment, supplies, tools, transportation, overhead, general and administrative, incidental expenses, operating margin and sub consultant costs (if any).

The bid price(s) will apply through the term of this project. The bid price(s) provided must be stated specifically in dollars and cents, NOT a percentage increase. If a "0" (zero) is entered, then that is the fee that the Bidder will receive if awarded this agreement. If a space is left blank, or a space is marked N/A, or the Department's Attachment "B", Bid Cost Proposal (Bid Sheet) is not utilized by the Bidder, the bid shall be considered non-responsive.

The quantities are estimated for bidding purposes only and are not necessarily a representation of the actual quantities that will be authorized under this Agreement.

- Do Not Re-Create, Modify or Replace the Department's Attachment "B" Bid Cost Proposal (Bid Sheet) with your own version
- Do Not Change the Department's Estimated Quantity
- Do Not Change the Unit Type
- The Bidder MUST BID ON ALL ITEMS listed

ACKNOWLEDGEMENT: I certify that I have read and agree to abide by all terms and conditions of this solicitation and that I am authorized to sign for the bidder. I certify that the Bid Response submitted is made in conformance with all requirements of the solicitation. In submitting a response, the bidder acknowledges they have read and agree to the solicitation terms and conditions and their submission is made in conformance with those terms and conditions.

Bidder Company Name: Rite Lite Signs, Inc.	-
FEID #: <u>56-2110311</u>	
Address: 1000 Biscayne Drive, Concord, NC 28027	
Authorized Signature: Date: 9/10/2025	Phone: 704-788-7097 Fax: 704-788-7091
E-mail: RHartsell@ritelitesigns.com Printed / Typed: Stafford B. Sau	unders II Title: General Manager

B-1

CITB-0006-25

Gateway Monument and Park Identification Signage



ATTACHMENT "B" BID COST PROPOSAL FORM (BID SHEET)

		UNIT OF			
ITEM NO.	ITEM	MEASUREMENT	QUANTITY	UNIT PRICE	TOTAL PRICE
	Maintenance of Traffic (MOT) Klondike Road				
1	location in the vicinity of Everett Park	LS	1	\$ 3,750.00	\$ 3,750.00
	Location 901 – Park Identification Signage:				
2	Panola Shoals Trailhead	LS	1	\$ 24,867.00	\$ 24,867.00
	Location 902 – Park Identification Signage:				
3	Salem Park	LS	1	\$ 24,867.00	\$ 24,867.00
	Location 903 – Park Identification Signage:				
4	Browns Mill Park	LS	1	\$ 24,867.00	\$ 24,867.00
	Location 904 – Park Identification Signage:		33000 3000		
5	Fairington Park	LS	1	\$ 24,867.00	\$ 24,867.00
	Location 906 - Park Identification Signage:				
6	Everett Park	LS	1	\$ 24,867.00	\$ 24,867.00
	Location 005 – Tertiary Gateway Monument				
	Signage: Near Everett Park - Klondike				
	Road/Flat Bridge Road near intersection with				
7	Union Church Road SW	LS	1	\$ 9,584.00	\$ 9,584.00
8	Tree Removal (Everett Park location only)	LS	1	\$ 8,950.00	\$ 8,950.00
	Removal of existing signs (see attachment to				-,
9	solicitation)	EA	2	\$ 550.00	\$ 1,100.00
			TOTAL COS		147.719.00

TOTAL COST IN WORDS: One hundred forty-seven thousand seven hundred nineteen dollars



Gateway Monument and Park Identification Signage





ATTACHMENT "A" BIDDER'S REQUIRED FORMS

Bidders are instructed to read and follow the instructions carefully, as any misinterpretation or failure to comply with instructions may lead to a Bidder's submittal being deemed non-responsive, non-responsible and may be rejected.

Bidder <u>MUST</u> submit its bid response electronically and <u>MUST</u> confirm its submittal in order for the City to receive a valid response through <u>Bidnet</u>.



BID CHECKLIST

Bidders are expected to examine this bid form, attached drawings, specifications, if any, and all instructions. Failure to do so will be at the Bidder's risk.

All prices and notations must be in ink or typewritten. No erasure permitted. Mistakes may be crossed out and corrections typed adjacent and must be initialed and dated in ink by the person signing the bid. All bids must be signed with the firm name and by a responsible officer or employee. Obligations assumed by such signature must be fulfilled.

Each bidder shall furnish the information required on the bid form and each accompanying sheet thereof on which he or she makes an entry.

Unit price for each unit bid shall be shown. A total shall be entered in the amount column for each bid. In case of discrepancy between a unit price and extended price, the unit prices represented will presume to be correct.

Although the City awards based on a "lump sum" basis to the bidder submitting the lowest, most responsive and responsible total bid as shown on the Invitation to Bid cover page, the City may choose to award on a "per group" or "per item" basis. Therefore, bidders must submit with their bids, all pricing pages on the forms provided clearly indicating which items are bid and which are not. Failure to submit these pages will render such bid non-responsive.

BID CHECK LIST:

Bidders are	cautioned to check their bid very carefully, using the following checklist:
	Bidder's Certification Page signed and notarized
	All required forms completed, signed and notarized (as applicable)
	Invitation to Bid Cost Proposal (Bid Sheet), including Unit Price and Total price completed.
	Bid Electronically submitted as specified

It is the bidder's responsibility to check Bidnet prior to submitting a bid response to ascertain if any addenda have been issued, to obtain such addenda and return signed addenda with the bid.



BIDDER'S CERTIFICATION

I have carefully examined the Invitation to Bid, Instructions to Bidders, General and/or Special Conditions, Specifications, Bid and any other documents accompanying or made a part of this invitation.

I hereby propose to furnish the goods or services specified in the Invitation to Bid at the prices or rates quoted in my bid. I agree that my bid will remain firm for a period of up to One Hundred and Twenty (120) days in order to allow the City adequate time to evaluate the bids. Furthermore, I agree to abide by all conditions of the bid.

I certify that all information contained in this bid is truthful to the best of my knowledge and belief. I further certify that I am duly authorized to submit this bid on behalf of the Contractor as its act and deed and that the Contractor is ready, willing and able to perform if awarded the bid.

I further certify that this bid is made without prior understanding, agreement, connection, discussion, or collusion with any person, firm or corporation submitting a bid for the same product or service; no officer, employee or agent of the City of Stonecrest or of any other bidder interested in said bid; and that the undersigned executed this Bidder's Certification with full knowledge and understanding of the matters therein contained and was duly authorized to do so.

Rite Lite Signs, Inc.	RHartsell@ritelites	sians.com	
NAME OF BUSINESS BY:	E-MAIL A		
SIGNATURE OF AUTHORIZED OFFICE	ER OR AGENT		
Stafford B. Saunders II, General Manager			
PRINTED NAME AND TITLE			
1000 Biscayne Drive			
MAILING ADDRESS Concord, NC 28027			
CITY, STATE, ZIP CODE			
704-788-7097			
TELEPHONE NUMBER			
TYPE: Stafford B. Saunders II Stafford B. Saunders II Stafford B. Saunders II (who are)	personally known to	o me or who has pro	oduced
as identific	ation and who did (did no	ot) take an oath.	
Notary Public Signature Julie A. Critasi Notary Name, Printed, Typed or Stamped	(SEAL)	JULIE A. CRIFASI NOTARY PUBLIC Cabarrus County North Carolina My Commission Expires October 2	3, 2027
Commission Number: 2022 7 9 8 0 0 0 6 4	Commission Expires:	: 10/23/27	



Please Note: All fields below must be completed. If the field does not apply to you, please note N/A in that field.

If you are a foreign corporation, you may be required to obtain a certificate from the Georgia Department of Revenue (https://dor.georgia.gov/taxes/register-new-business-georgia).

Company Name: (Le	gal Registration): <u>F</u>	Rite Lite Signs, Inc.			
Address: 1000 Biscay	ne Drive				
City: Concord		State	e: <u>NC</u>	Zip: 28027	
Telephone No. 704-788-7097		FAX No. <u>704-788-7</u>	<u>7091</u> Em	ail: RHartsell@ritel	litesigns.com
Does your firm qua	lify for SBE MB	E or WBE status: S	BEMBE	WBELOCAL_	
ADDENDUM ACK	NOWLEDGEME	NT - Bidder acknowle	edges that the foll	owing addenda have	been received and
are included in the bid					
Addendum No.	Date Issued	Addendum No.	Date Issued	Addendum No.	Date Issued
1		_4	8/15/25		
1 2 3	<u>7/22/25</u> <u>7/29/25 & 8/</u> 8/2	25			
contained within the base, it is hereby impaply to your bid, sin	oid documents and plied that your bid nply mark N/A. If	d to be part of the bid referenced in the space submittal complies wit Bidder is requesting it a written statement	e provided below. The full scope of any variation(s)	If no statement is conf this solicitation. If the or exception(s) to	tained in the below his section does not
to all instructions, con I have read all attache bid I will accept a con this bid. The below sig that in no event shall t expenses, or lost pr advertisement, bid co	nditions, specificate ments including the stract if approved be gnatory also hereby he City's liability for offits arising out of inferences, site visite gunder any provision	urnish the following arions addenda, legal ade specifications and fully the City and such act agrees, by virtue of suffer respondent's indirect of this competitive so as, evaluations, oral preson of indemnification of the competities of the second formula or so that are the competitive so the competition of the comp	vertisement, and cally understand who ceptance covers all bimitting or attempt, incidental, consecutive process esentations, or aways	conditions contained if at is required. By sub- I terms, conditions, are oring to submit a response equential, special or ex- ts, including but not and proceedings. This	n the bid/proposal. mitting this signed and specifications of onse, hereby agrees exemplary damages, limited to public limitation shall not

ITB-0006-25
Gateway Monument and Park Identification Signage



AUTHORIZED SIGNATORIES

The Bidder/Proposer represents that the following *principals* are authorized to sign bids, proposals, negotiate, and/or sign contracts and related documents to which the bidder/proposer will be duly bond. <u>Principal is defined</u> as an employee, officer, or other technical or professional in a position capable of substantially influencing the development or outcome of an activity required to perform the covered transaction.

Name	Title	Telephone Number
Stafford B. Saunders II	General Manager	704-788-7097
1112		
Ant Duly	Date: 8/28	3/2025
Authorized Signature / Name General Manager	Federal Employer I.I	D. No. (FEIN): 56-2110311
Title	•	
Rite Lite Signs, Inc.	Dun and Bradstreet N	
Legal Business Name	Website Address: www.rite	elitesigns.com
Principal Place of Business Address	: Concord, Cabarrus County, North Car	rolina
	(City/County/S	tate)
Telephone Number: 704-788-7097		
Type of Business/Organization (che	ck appropriate box):	
(a) Sole Proprietorship Par Other - Specify	tnership Non-Profit Joint Ventu	re 🟒 Corporation
(b) State of Incorporation: North C	arolina	

JOINT VENTURE FIRMS

Joint venture firms must complete and submit with their Bid/Proposal Response this form. Include a copy of the formal written and executed Joint Venture Agreement between all joint venture parties. This joint venture agreement must be executed and indicate the parties "respective roles, responsibilities, and levels of participation for the project. If proposing as a Joint Venture, the Joint Venture shall obtain and maintain all contractually required insurance in the name of the Joint Venture as required by the Contract. Individual insurance in the name of the parties to the Joint Venture will not be accepted. Failure to timely submit the required form along with the formal written and executed Joint Venture Agreement may result in disqualification of your Bid/Proposal Response.



I, Stafford B. Saunders II	, hereby certify that I have received a copy of the City of Stonecrest, GA
Purchasing Policy which can b	e found at https://www.stonecrestga.gov/Procurement.aspx and agree to
	the City of Stonecrest, GA Purchasing Policy to the extent the policy is
applicable to the undersigned.	
THIS CERTIFICATION is subm	tted by Stafford B. Saunders II the General Manager
	(Authorized Officer or Agent Print) (Title)
of Rite Lite Signs, Inc.	
Name of Com	pahy)
Da Non	8/28/2025
SIGNATURE (DATE



CONFLICT OF INTEREST DISCLOSURE FORM

Purpose

This Conflict-of-Interest Disclosure form is provided to assist Bidder's in screening for potential organizational conflicts of interest. The award of this contract is subject to the State of Georgia Purchasing Act relating and O.C.G.A Conflict-of-Interest Disclosure requirements.

Term: The term "Conflict of Interest" refers to situations in which financial or other personal consideration may adversely affect or have the appearance of adversely affecting an employee's professional judgement in exercising any City duty or responsibility in administration, management, instruction, research, or other professional activities.

All Bidders <u>MUST</u> disclose with their Bid the name of any officer, director, agent, or any relative of an officer, director or agent who is also an employee of the City. Further, all Bidders must disclose the name of any employee who owns, directly or indirectly, an interest of five percent (5%) or more in the Bidders company, firm or any of its subsidiaries. The Conflict-of-Interest Disclosure Form <u>MUST</u> be submitted along with your bid submittal.

Please check one of the following statements and attach additional documentation if necessary:

To the best of our knowledge, the undersigned firm has no potential conflict of interest due to any other Cities, Counties, contracts, or property interest for this Qualification.

The undersigned firm, by attachment to this form, submits information which may be a potential conflict of interest due to other Cities, Counties, contracts, or property interest for this Qualification.

ACKNOWLEDGED BY:

Name: Stafford B. Saunders II

Title: General Manager

Signature:

Company/Firm Name: Rite Lite Signs, Inc.

Address: 1000 Biscayne Drive, Concord, NC 28027

Phone: 704-788-7097

E-mail Address: RHartsell@ritelitesigns.com

Date: 08/28/2025



AFFIDAVIT VERIFYING STATUS FOR CITY PUBLIC BENEFIT APPLICATION

or Occupation Tax Cer as referenced in O.C.G				•	
Stonecrest	license/permit	and	/or	contract	for
	Saunders II				
	erson applying on bel	nalf of individual	l, business, corp	oration, partnersh	ip, or other
private entity]:					
1.	/ Iamali	Inited States citiz	van.		
OR	Tain a O	filled States Citiz	.CII		
2.	I am a l	egal nermanent	resident 18 vear	s of age or older	or I am an
otherwise qualified ali					
age or older and lawfu			ininigration un	a reactionality rice	ro years or
In making the above re					
makes a false, fictitious		ent or representati	ion in an affidav	it shall be guilty of	a violation
of O.C.G.A. § 16-10-2	H. D. Y.				
Signature of Applican	Doto: 8/28/2025				
Signature of Applicant	Date: 0/20/2020				
Printed Name: Stafford	B. Saunders II				
* Alien Registration nu					
* Alien Registration nu ** PLEASE INCLUD AUTHORIZATION, O OTHER DOCUMENT RESIDENT (No. 2).	E A COPY OF YOU GREEN CARD, PASSI	R PERMERMAI PORT WITH A	COPY OF YOU	UR DRIVER LIC	ENSE, OR
** PLEASE INCLUD AUTHORIZATION, O OTHER DOCUMENT	E A COPY OF YOUR GREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alies all definition of "alier qualified aliens that do	R PERMERMAN PORT WITH A D UNDER THE I nat aliens under the en registration number, it is	he Federal Imm mber. Because in the residents m	UR DRIVER LIC RE A LEGAL PEI igration and National legal permanent removed also provide	ense, or enality Act, esidents are their alien
** PLEASE INCLUD AUTHORIZATION, O OTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amer included in the Feder registration number. Q	E A COPY OF YOUR GREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the order alie all definition of "alier qualified aliens that do low:	R PERMERMAN PORT WITH A D UNDER THE I nat aliens under the en registration number, it is	he Federal Imm mber. Because in the residents m	UR DRIVER LIC RE A LEGAL PEI igration and National legal permanent removes also provide	ense, or RMANENT onality Act, esidents are their alien
** PLEASE INCLUDAUTHORIZATION, COTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amerincluded in the Feder registration number. Condentifying number below other Identifying Number Identifying Numbe	E A COPY OF YOUR EREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alice all definition of "alier qualified aliens that do ow: aber:	R PERMERMAN PORT WITH A D UNDER THE I hat aliens under the en registration numer, legal permant to not have an ali	he Federal Imm mber. Because in ent residents maken registration	igration and National permanent resoluted also provide number may support or who has	ense, or enality Act, esidents are their alien oly another
** PLEASE INCLUD AUTHORIZATION, O OTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amedincluded in the Feder registration number. Quidentifying number below. Other Identifying Number below.	E A COPY OF YOUR EREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alice all definition of "alier qualified aliens that do ow: aber:	R PERMERMAN PORT WITH A D UNDER THE I eat aliens under the registration num n'', legal perman o not have an alien personally kration and who dic	he Federal Immumber. Because Immumber residents maken registration	igration and National Periods	ense, or RMANENT onality Act, esidents are their alien oly another produced
** PLEASE INCLUDAUTHORIZATION, COTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amerincluded in the Feder registration number. Condentifying number below other Identifying Number Identifying Numbers II with the same of t	E A COPY OF YOUR EREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alice all definition of "alier qualified aliens that do ow: aber:	R PERMERMAN PORT WITH A D UNDER THE I nat aliens under the registration num n'', legal perman o not have an all personally kration and who did	he Federal Immumber. Because Interpretation nown to med (did not) take a	igration and National legal permanent remust also provide number may support or who has an oath.	ense, or consists or consists are their alien oly another produced
** PLEASE INCLUDAUTHORIZATION, COTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amerincluded in the Feder registration number. Condentifying number belonged by the same of	E A COPY OF YOUR EREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alice all definition of "alier dualified aliens that do ow: aber: ho is (who are) as identificate	PERMERMAN PORT WITH A D UNDER THE I nat aliens under the registration num, legal perman o not have an alien personally kration and who did	he Federal Immumber. Because Interpretation nown to me id (did not) take a	igration and National legal permanent results also provide number may support or who has an oath. Halson NOTAR	ense, or anality Act, esidents are their alien oly another produced
** PLEASE INCLUDAUTHORIZATION, COTHER DOCUMENT RESIDENT (No. 2). * Note: O.C.G.A.§ 50 Title 8 U.S.C., as amerincluded in the Feder registration number. Condentifying number below other Identifying Number Identifying Numbers Ucense License License License	E A COPY OF YOUR GREEN CARD, PASSI ATION AS ALLOWER -36-1(e)(2) requires the ded, provide their alier all definition of "alier all definition of alier all definition of alier all definition of alier all definition of alier	personally kration and who did	he Federal Immumber. Because Interpretation nown to med (did not) take a	igration and Nation legal permanent results also provide number may support or who has an oath. Halson Cabarro	ense, or consists or consists are their alien oly another produced



DRUG-FREE WORKPLACE

The undersigned certifies that the provisions of the Official Code of Georgia Annotated (O.C.G.A.) Sections 50-24-1 through 50-24-6 of, relating to the "Drug-free Workplace Act", have been complied with in full.

The undersigned further certifies that:

- (1) A drug-free workplace will be provided for the Contractor's employees during the performance of the Contract; and
- (2) Each Contractor who hires a subcontractor to work in a drug-free workplace shall secure from the subcontractor the following written certification:

"As	part	of	the	subconti	racting	agreen	nent wit	h R	ite Lite S	igns, Inc				
						-					(Contrac			
	Staffor	d B. S	aunder	s II, Genera	al Manag	er	certifies	to the	Contra	ctor tha	at a drug	g-free w	vorkpla	ace will be
prov	ided fo	r the	subco	ntractor'	s emplo	yees du	ring the p	erfori	mance o	of this (Contrac	t pursua	ant to	subsection
(b) c	of O.C.	G.A.	Section	n 50-24-0	03."		0 1					•		
()														
Also	the u	ınder	signed	further	certifie	s that h	e/she wi	ll not	engag	e in th	e unlay	vful m	anufac	ture, sale,
														ormance of
	Contrac		Onoun	on, poss c	ooron, o	1 450 01	. 001111 0111	ou suo	Stance	or many	juuriu ut		o perio	minumee or
the (Jonatao													
THI	S CERT	ΓΙFΙC	CATIO	N is subr	nitted b	V Staffor	d B. Saunde	ers II			the	Genera	ai Mana	ger
				1 10 0001			orized Offic		gent Prin	nt)			itle)	
of R	ite Lite S	igns, I	nc.						0			\ -		
	11	10	(Na	me of Con	mpany)			-	-					
	M	1			1 37									
į		1/2	()o.	The	-	8	/28/2025							
Sign	ature	M				_	Dat	e						
O		1.												
Stafford	d B. Sau	nders	Ι,	who is	(who	are)	personal	lv k	nown	to n	ne or	who	has	produced
Dri	sers	lia	ense				tion and v							r
	Δ.		0.	1					(,				
X	ly	1	mi	2										
Notary	Public	Sign	nature											
Н	aleu	Ü	ake											
	-			yped or S	Stamped	1	_							
110001		,	, ,) pour or c	, tumpee	•								
Comm	nission	Num	her: 1	20133	300	0110								
Comm	Hoolon	I TUIII		0017	,,,,,									
Comm	niccion	Evni	-ec. N	Jou. 7	1st -	8.50								
					1 .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
(SE A)	Haley WOTAR	LIN	ker											
				1										
	Cabam	35 CC	ullly	1										

North Carolina



GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT "E-VERIFY"

	Address: 1000 Biscayne Drive, Concord, NC 28027				
	By executing this affidavit, the undersigned person or entity verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm, or corporation which is registered with, is authorized to participate in, and is participating in the federal work authorization program commonly known as E-Verify,* in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91.				
	The undersigned person or entity further agrees that it will continue to use the federal work authorization program throughout the contract period, and it will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the undersigned with the information required by O.C.GA. § 13-10-91(b).				
	The undersigned person or entity further agrees to maintain of each such verification to the City of Stonecrest within is/are retained to perform such service.				
	695696	7/24/2013			
	E Verify TM Company Identification Number	Date of Authorization			
	BY: (Authorized Officer or Agent)	General Manager Title			
	* or any subsequent replacement operated by the United States federal work authorization program operated by the United States information of newly hired employees, pursuant to the Immigration 603.	States Department of Homeland Security to verify			
	Other Identifying Number:				
staf	The foregoing instrument was acknowledged before m Ford B. Saunders II, who is (who are) personall Drivers License as identification and w Motary Public Signature	y known to me or who has produced who did (did not) take an oath. Haley Linker HARY PUBLIC Cabarus County			
	Notary Name, Printed, Typed or Stamped	North Carolina			
		ission Expires: Nov. 21 ^{5t} , 2028			

Contractor(s) Name: Rite Lite Signs, Inc.



Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13- 10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (name of contractor) on behalf of (name of public employer) has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A.§ 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

N/A - Rite Lite Signs will self-perform		
Federal Work Authorization User Identification Number	Date of Authorization	
Name of Subcontractor		
Name of Project		
Name of Public Employer		
The foregoing instrument was acknowledged before me this, who is (who are) personally k as identification and who di	nown to me or who has	
Notary Public Signature	(SEAL)	
Notary Name, Printed, Typed or Stamped		
Commission Number:		
Commission Expires:		



INDEMINIFICATION CLAUSE

Contractor shall indemnify and hold harmless the City, and the members (including, without limitation, members of the City's Council, and members of the boards and of the City), officers, agents, representative and employees of each, from damages, losses, or expenses to the extent caused by or resulting from the negligence, recklessness, or intentionally wrongful conduct of the Contractor or other persons employed or utilized by the Contractor in the performance of the contract.

In any and all claims against the City, or any of their officers, members, agents, representatives, servants or employees, by any employee of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation of the Contractor under this Section shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefit payable by or for the Contractor or any subcontractor under Workers' Compensation Acts, disability benefit acts or other employee benefit acts.

Rite Lite Signs, Inc.	Took Jat	8/28/2025
Bidder's Name	Signature	Date
State of North Carol	ina	
County of <u>Cabarrus</u>		
Stafford B. Samders 11, who	was acknowledged before me this 28 is (who are) personally known as identification and who did (did	to me or who has produced
Steve Sink Notary Public Signature		
Haley Unker Notary Name, Printed, Type	d or Stamped	
Commission Number: 20	21333000110	
Commission Expires: No	v. 21st, 2028	
Cabarrus County North Carolina (TV3S)		

Haley Linker MOTARY PUBLIC



NON-COLLUSION STATEMENT

By signing its Bid, the Bidder certifies that its Bid is made independently and free from collusion. Bidder shall complete and submit the Non-Collusion Affidavit Form, to their best knowledge, any City officer or employee, or any relative of any such officer or employee as defined in O.C.G.A Section 50-5-67 and State of Georgia Purchasing Act, who is an officer or director of, or has a material interest in, the supplier's business, who is in a position to influence this procurement. Any City officer or employee who has any input into the writing of specifications or requirements, solicitation of offers, decision to award, evaluation of offers, or any other activity pertinent to this procurement is presumed, for purposes hereof, to be in a position to influence this procurement. For purposes hereof, a person has a material interest if he/she directly or indirectly owns more than five percent (5%) of the total assets or capital stock of any business entity, or if they otherwise stand to personally gain if the contract is awarded to this Bidder.

Failure of a Bidder to disclose any relationship described herein shall be reason for debarment in accordance with the provisions of the City Purchasing Policy.

Bidder, if doing business under an assumed name, i.e., an Individual, Association, Partnership, Corporation, or otherwise, shall be registered with the State of Georgia, Corporations Division.

ACKNOWLEDGED F Stafford B. Saunders II	BY:	Dust	
Bidder's Name	Signature		
General Manager	8/28/2025		
Title	Date		
Rite Lite Signs, Inc.			
Company/Firm Name			
1000 Biscayne Drive, Conco	rd, NC 28027		
Address		-	
704-788-7097			
Phone Number		-	
RHartsell@ritelitesigns.com			
E-Mail Address		-	
The foregoing instrum	ent was acknowledged before	me this 28th day of Aug	aust 2025 by
Stafford B. Saunders II	who is (who are) persona	ally known to me or w	ho has produced
Drivers license	as identification and	l who did (did not) take an oath.	THE PARTY OF THE P
Shley Sin	k	Haley Linker	
Notary Public Signature		NOTARY PUBLIC Cabarrus County	
Haley Linke		North Carolina	
Notary Namé, Printed, T	Typed or Stamped		
Commission Number:	201333000110 Com	mission Expires: <u>Nov. 21</u>	st, 2028



VENDOR CERTIFICATION REGARDING SCRUTINIZED COMPANIES LIST

Respondent Vendor Name: Rite Lite Signs, Inc.			
Vendor FEIN: <u>56-2110311</u>			
Vendor's Authorized Representative Name and	Title:	Stafford B. Saunders II, General M	lanager
Address: 1000 Biscayne Drive			
City: Concord	State:	NC Zi	p: 28027
Phone Number: 704-788-7097			
Email Address: RHartsell@ritelitesigns.com			

Georgia law specifies that certain suppliers identified as "Scrutinized Companies" are ineligible to bid on state entity procurements. Please refer to O.C.G.A. § 50-5-84 "Scrutinized Companies" Conducting Business Operations in Sudan, O.C.G.A. § 50-5-84.1 "Scrutinized Companies" Owned by the Government of Russia or Belarus, and O.C.G.A. § 50-5-84.2 "Scrutinized Companies" Owned by the Government of China for additional information. This is applicable for contracts worth \$100,000.00 or more.

As the person authorized to sign on behalf of Respondent, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or the Scrutinized Companies that Boycott Israel List. I further certify that the company is not engaged in a boycott of Israel. I understand that pursuant to O.C.G.A. § 50-5-84 the submission of a false certification may subject company to civil penalties, attorney's fees, and/or costs.

CERTIFIED BY:

Name: Stafford B. Saunders II

Title: General Manageri

Signature:

Date: 8/28/2025



TRENCH SAFETY

Bidder acknowledges that included in the appropriate bid items of his/her bid and in the Total Bid Price are costs for complying with the Georgia Underground Facility Protection Act (GUFPA). The Bidder further identifies the costs of such compliance to summarized below:

Trench Safety Measures (Describe)	Units of Measure (LF/SF)	Unit (Quantity)	Unit Cost	Extended Cost
A. N/A				
В.				
C.				
D.				

The Bidder certifies that all trench excavation done within his/her control in excess of five (5') feet in depth shall be in accordance with the Occupational Safety and Health Administration's excavation safety standards, C.F.R.s. 1926.650 Subpart P. and the Georgia Underground Facility Protection Act (GUFPA).

Failure to complete the above may result in a r Date:	non-responsive, non-responsible determination.	
Name:	Signature:	
Title:		
State of		
County of		
The foregoing instrument was acknowledge, who is (who are as identified as	d before me this day of	_20, by produced
Notary Public Signature	(SEAL)	
Notary Name, Printed, Typed or Stamped		
Commission Number:		
Commission Expires:		

INSURANCE

BIDDERS <u>MUST</u> SUBMIT PROOF OF INSURABILITY WITH BID RESPONSE TO BE CONSIDERED RESPONSIBLE TO THIS SOLICITATION.

The successful firm or individual entering a resulting contract with the City shall provide, pay for and maintain in full force and affect at all times during the services to be performed insurance as set forth below: (This may be modified, as the City deems appropriate)

The successful bidder must maintain in full force and effect, during the life of this engagement. Certificates of liability insurance, satisfactory to the City shall be furnished to the City immediately upon commencement of any services, with complete copies of policies to be furnished upon the City's request. Such certificates of insurance will provide the City with thirty (30) days prior written notice of any cancellation or non-renewal.

ITB-0006-25
Gateway Monument and Park Identification Signage



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/5/2025

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

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

th	is certificate does not confer rights to	the	certi	ificate holder in lieu of su)			
	DUCER				CONTAC NAME:	ст Jenny Sau	da			
	ole Insurance Advisors				PHONE (A/C, No. Ext): 704-809-1861 FAX (A/C, No): 704-817-4772					
	01 Rexford Rd 150-W				E-MAIL ADDRESS: sauda@nobleia.com					
	arlotte NC 28211				ADDRES		2.20	IDINO COVERACE		NAIC #
						National Inc.		Company		NAIC#
INSURED RITESIG-01					INSURER A : Middlesex Insurance Company					
Rite Lite Signs, Inc.			INSURER B:							
1000 Biscayne Dr			INSURER C :							
Col	ncord NC 28027				INSURE	RD:				
					INSURE	RE:				
					INSURE	RF:				
_				NUMBER: 1399729320				REVISION NUMBER:		
IN CE EX	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I (CLUSIONS AND CONDITIONS OF SUCH I	QUIR PERT POLIC	EME! AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF ANY	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	T TO V	VHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	3	
Α	X COMMERCIAL GENERAL LIABILITY	Υ	Υ	A0129188011		5/6/2025	5/6/2026	EACH OCCURRENCE	\$ 1,000,	000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED	\$ 500,00	
								(22222	\$ 15,000	
									\$ 1.000.	
	GEN'L AGGREGATE LIMIT APPLIES PER:								\$ 3,000,	
	Y PRO-								\$ 2,000,	
	TOUR DECT LOS								\$ <u>2,000,</u> \$	000
A	OTHER: AUTOMOBILE LIABILITY	Y	Y	A0129188011		5/6/2025	5/6/2026	COMBINED SINGLE LIMIT	\$ 1,000.	000
2.0	X ANY AUTO			7.6 126 1666 11		0/0/2020	3/3/2020	(Ea accident)	\$	-
	OWNED SCHEDULED								\$	
	X HIRED X NON-OWNED								\$	
	AUTOS ONLY AUTOS ONLY		Ì					(Per accident)		
_	V UMPPELLALIAD V	Υ				5/5/555			\$	
Α	X UMBRELLA LIAB X OCCUR	1	Y	A0129188012		5/6/2025	5/6/2026		\$ 5,000,	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 5,000,	000
	DED RETENTION \$ WORKERS COMPENSATION								\$	
Α	AND EMPLOYERS' LIABILITY		Υ	A0129188001		5/6/2025	5/6/2026	X PER OTH-		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$ 1,000,	000
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,	000
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,000,	
Α	Leased/Rented Equipment Contractors Equipment Installation	Y	Υ	A0129188011	,	5/6/2025	5/6/2026	Leased/Rented Equip Scheduled Equipment Installation	150,00 See B 100,00	elow
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES /A	COPD	101 Additional Pamarke School	le may b	attached if man	e enace le regule	ad)		
<i>D</i>	THE TOTAL STEED TO THE TOTAL STEED TOTAL STEED TO THE TOTAL STEED TOTAL STEED TO THE TOTAL STEED TOTAL STEED TO THE TOTAL STEED TO THE TOTAL STEED TOTAL STEED TOTAL STEED TO THE TOTAL STEED TOTAL STEED TOTAL STEED TO THE TOTAL STEED T	.20 (SOND	, Additional Remarks Scriedo	io, may be	s audelieu ii iiioi	e space is require			
CE	RTIFICATE HOLDER				CANC	ELLATION				
CEI	RIIFICATE HOLDER				CANC	ELLATION				
	Rite Lite Signs				THE	EXPIRATION	DATE THE	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL B Y PROVISIONS.		
	The Lie oigh				G.	RIZED REPRESE	Hayly	2		



Each bid must be accompanied with a BID BOND (bond only: certified checks or other forms are not acceptable) in an amount equal to five percent (5%) of the base bid, payable to the City of Stonecrest. Said bid bond guarantees the bidder will enter into a contract to construct the project strictly within the terms and conditions stated in this bid and in the bidding and contract documents, should the construction contract be awarded.

The Successful Bidder shall be required to furnish a bond for the faithful performance on the contract and a bond to secure payment of all claims for materials furnished and/or labor performed in performance of the project, both in amounts equal to one hundred percent (100%) of the contract price.

The Successful Bidder shall also be required to furnish a Maintenance Bond, in the amount of one-third (1/3) of the contract price, guaranteeing the repair or replacement caused by defective workmanship or materials for a period of one (1) year from the completion of construction.

Bonds shall be issued by a corporate surety appearing on the Treasury Department's most current list (Circular 570 as amended) and be authorized to do business in the State of Georgia.

Date of Bond must not be prior to date of Contract. If Contractor is a Partnership, all partners shall execute Bond.

BID BOND

KNOWN ALL BY THESE PRESENTS, That we, Rite Lite Signs, Inc.
as Principal, and Travelers Casualty and Surety Company of America, as Surety, are
held and firmly bound unto <u>City of Stonecrest</u> , as
Obligee, in the sum of5% of bid amount
Dollars (5% of bid amount) for the payment of which we bind ourselves, and our successors and assigns, jointly and severally, as provided herein.
WHEREAS, Principal has submitted or is about to submit a bid to the Obligee on a contract forCITB-0006-25 Gateway Monument & Park Identification Signage: manufacture & install
(1) tertiary gateway sign and (5) park identification signs in various locations in the city ("Project").
NOW, THEREFORE, the condition of this bond is that if Obligee accepts Principal's bid, and Principal enters into a contract with Obligee in conformance with the terms of the bid and provides such bond or bonds as may be specified in the bidding or contract documents, then this obligation shall be void; otherwise Principal and Surety will pay to Obligee the difference between the amount of Principal's bid and the amount for which Obligee shall in good faith contract with another person or entity to perform the work covered by Principal's bid, but in no event shall Surety's and Principal's liability exceed the penal sum of this bond.
Signed this day of August, 2025
Rite Lite Signs, Inc.
By: David R. Catchpole, Jr., Vice-President
Travelers Casualty and Surety Company of America
By: Mellina W. Mayl
Mellissa W. Slaughter , Attorney-in-Fact



Travelers Casualty and Surety Company of America **Travelers Casualty and Surety Company** St. Paul Fire and Marine Insurance Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Mellissa Slaughter of GASTONIA

, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 17th day of January, 2019.







State of Connecticut

City of Hartford ss.

On this the 17th day of January, 2019, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



Bv:

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this

26th day of August 2025



21





To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880. Please refer to the above-named Attorney-in-Fact and the details of the bond to which this Power of Attorney is attached.



PERFORMANCE AND PAYMENT BOND

BIDDERS MUST SUBMIT A LETTER OF PROOF OF ITS ABILITY TO OBTAIN A PERFORMANCE AND PAYMENT BOND WITH BID SUBMITTAL. FAILURE TO SUBMIT PROOF OF ABILITY TO OBTAIN A PERFORMANCE AND PAYMENT BOND WILL RESULT IN A NON-RESPONSIVE DETERMINATION.

This contract is required to be bonded pursuant to O.C.G.A. § 36-91-70. Payment and performance bonds are required for all construction contracts in excess of \$100,000.00; however, the City may also require bonds for construction contracts valued at less than \$100,000.00 of for any non-construction contracts.

Surety bonds issued by a surety authorized to do business in the state of Georgia are acceptable. Unless otherwise specified in the solicitation, other types of bonds including cash bonds, checks, and certified checks are not acceptable.

The Contractor shall furnish a Performance and Payment Bond in the amount equal to 100% of the first-year contract value, whichever is greater, within ten (10) business days of a written Notice of Intent to Award by City.



Mackenzie Vernon Travelers Bond Associate Account Executive

11440 Carmel Commons Blvd. Charlotte, NC 28226 704-544-3852 Mpvernon@travelers.com

08/05/2025

Re: Rite Lite Signs, Inc.

To Whom it May Concern:

Travelers Casualty and Surety Company of America a corporation under the laws of the State of Connecticut, with an office and place of business located at One Tower Square, Hartford, CT 06183, represents Rite Lite Signs, Inc. for its surety bonding needs. As of the date of this writing, Rite Lite Signs, Inc. remains in good standing with Travelers Casualty and Surety Company of America, which is affording continued surety credit for bonded obligations with single project sizes up to \$1,000,000 within an aggregate bonded surety program of \$3,000,000. The current outstanding bonded exposure for the account is \$2.3 million. The current billing rate is \$7.50 Per Thousand for Contract Obligations and \$5.00 per Thousand for Miscellaneous obligations.

This letter is not to be construed as an agreement to provide surety bonds for any particular project, but is offered as an indication of Travelers Casualty and Surety Company of America past experience and confidence in the firm. We reserve the right to review terms and conditions of any proposals, contract documents, bond forms, financial arrangements and other underwriting considerations at the time the contract is awarded.

If you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

Mackenzie Vernon

Mackenzie Vernon
Travelers Casualty and Surety Company of America

	SCI	HEDULE 1
BID NUMBER: N/A	LIAISON:	
<u>LET</u>	TER OF INTENT TO PERFORM	1 AS A SMALL BUSINESS
ENTERPRISE TO:(NAME O	F PRIME BIDDER)	
The undersigned intends to pe	rform work in connection with the	above BID as (Check one):
an individual	a corporation	a partnershipa joint venture
The undersigned is certi	fied as a SBE.	
The undersigned is prepared t particular work items or parts	o perform the following described thereof to be performed):	work in connection with the above project (specify in detail
		
as the following price:	\$	
You have projected the follow	ving commencement date of such of such work as follows:	work, and the undersigned is projecting completion
<u>Items</u>	Projected Commencement Date	Projected Completion Date
% of the dollar value w into a formal agreement for the	ill be awarded to non-minority conwork with you, conditioned upon	ntractors and/or non-minority suppliers. The undersigned will enter your execution of a contract with the City of Stonecrest.
OLAME OF CMALL DUCINE	SS ENTERPRISE CONTRACTO	
		()
DATE:	_ BY:(SIGNATURE OF SMALL B	USINESS ENTERPRISE CONTRACTOR)
	5	SCH-1

SCHEDULE 2

LETTER OF INTENT TO PERFORM AS A LOCAL BUSINESS
N/A
BID NUMBER: N/A LIAISON:
TO:(NAME OF PRIME BIDDER)
The undersigned intends to perform work in connection with the above BID as (Check one):
an individuala corporationa partnershipa joint venture
The undersigned is a qualified Local Business.
The undersigned is prepared to perform the following described work in connection with the above project (specify in detail particular work items or parts thereof to be performed):
as the following price: \$
You have projected the following commencement date of such work, and the undersigned is projecting completion of such work as follows:
Projected Projected Items Commencement Date Completion Date
% of the dollar value will be awarded to local contractors and/or local suppliers. The undersigned will enter into a formal agreement for the work with you, conditioned upon your execution of a contract with the City of Stonecrest.
(NAME OF LOCAL CONTRACTOR)
DATE:
BY:
(SIGNATURE OF LOCAL CONTRACTOR)
SCH 2
SCH-2

SUBCONTRACTORS

Please provide a list of Subcontractors that will be used to complete the work requested herein

Company Name: N/A - Rite Lite Signs will se	elf-perform
Address:	
	E-mail:
License Held:	License Number:
Company Name:	
Address:	
Phone Number:	E-mail:
License Held:	License Number:
Company Name:	
	E-mail:
License Held:	License Number:
Company Name:	
Address:	
Phone Number:	E-mail:
License Held:	License Number:
Company Name:	
	E-mail:
License Held:	License Number:
Company Name:	
	E-mail:
License Held:	License Number:

BIDDER REQUIRED REFERENCES

The Bidder shall provide Three (3) references specific to providing <u>Monument and Identification Signage</u> in the State of Georgia. At least <u>One (1)</u> reference shall be a local, county, state, or federal entity. **FAILURE TO SUBMIT REFERENCES WITH BID RESPONSE WILL RESULT IN BIDDER BEING DEEMED NON-RESPONSIVE.**

Services must be for similar scope of services, similar to the requirements of the solicitation this solicitation, specifications, and scope of work.

Include the owner's name, address, phone number, and current e-mail address.

Note: Do not include proposed team members or parent/subsidiary/affiliated companies as references in your submittals.

A. PRIME BIDDER'S NAME: Rite Lite Signs, Inc.
CLIENT NO.1 - Name of company/firm to be contacted: City of Forest Park, GA
Address: 745 Forest Parkway, Forest Park, GA 30297
Contact Person: A. Girard Geeter, Procurement Manager
Phone No: (470) 889-9087
Contact E-Mail Address: _procurement@forestparkga.gov
Project Performance Period: 04/23 to 11/23 (Dates should be in mm/yy format) Project Name: City of Forest Park Welcome Signs
Location of Project: City of Forest Park, GA
Description of the overall scope: Manufacture & installation of six (6) Gateway Welcome signs, including
landscaping, clearing & grubbing, tree trimming, asphalt removal & replacment.
Description of work that was self-performed by Bidder: Rite Lite Signs, Inc. self-performed all work except for the masonry bases for the signs.

ITB-0006-25
Gateway Monument and Park Identification Signage

CLIENT NO.2 - Name of company/firm to be contacted: Gwinnett County
Address: 75 Langley Dr, Lawrenceville, GA 30046
Contact Person: Christopher Duncan
Phone No: () 770-822-8720
Contact E-Mail Address: <u>christopher.duncan@gwinnettcounty.com</u>
Project Performance Period: 04/23 to 03/24 (Dates should be in mm/yy format)
Project Name: Construction of Building Monument Signs (7 signs)
Location of Project: Gwinnett County, GA
Description of the overall scope: Manufacture & install identification monument signs at various
county buildings.
Description of work that was self-performed by Bidder: Rite Lite Signs, Inc. self-performed all work except for the masonry bases for the signs.

CLIENT NO. 3 - Name of company/firm to be contacted: Gwinnett Technical College
Address: 1800 Century PI NE Ste 550, Atlanta, GA 30345
Contact Person: Denita Jones
Phone No: () 404-679-5951
Contact E-Mail Address: djones@tcsg
Project Performance Period: 12/23 to 12/24 (Dates should be in mm/yy format)
Project Name: Gwinnett Technical College Campus Wayfinding Signage Leaving College Campus Wayfinding Signage College Campus Wayfinding Signage College Campus Wayfinding Signage
Location of Project: Gwinnett Technical College, 5150 Sugarloaf Pkwy, Lawrenceville, GA 30043
Description of the overall scope: Manufacture & installation of various wayfinding and informational
signage throughout campus.
Description of work that was self-performed by Bidder: All work self-performed.



STATE OF GEORGIA BRAD RAFFENSPERGER, Secretary of State

State Licensing Board for Residential and General Contractors
LICENSE NO. GCQA005917

David Ralph Catchpole, Jr 1000 Biscayne Drive Concord NC 28027

Company Name: RITE LITE SIGNS, INC.
Company License NO: GCCO005920
General Contractor Qualifying Agent

EXP DATE - 06/30/2026 Status: Active Issue Date: 04/16/2018

A pocket-sized license card is below. Above is an enlarged copy of your pocket card.

Please make note of the expiration date on your license. It is your responsibility to renew your license before it expires. Please notify the Board if you have a change of address.

Wall certificates suitable for framing are available at cost, see board fee schedule. To order a wall certificate, please order from the web site – www.sos.ga.gov/plb.

Please refer to Board Rules for any continuing education requirements your profession may require.

Georgia State Board of Professional Licensing 237 Coliseum Drive Macon GA 31217

Phone: (404) 424-9966 www.sos.ga.gov/plb

David Ralph Catchpole, Jr 1000 Biscayne Drive Concord NC 28027 STATE OF GEORGIA

BRAD RAFFENSPERGER, Secretary of State
tate Licensing Board for Residential and General Contractors
License No. GCQA005917

David Ralph Catchpole, Jr

1000 Biscayne Drive Concord NC 28027

Company Name: RITE LITE SIGNS, INC. Company License NO: GCCO005920 General Contractor Qualifying Agent

EXP DATE - 06/30/2026 Status: Active Issue Date: 04/16/2018

Control Number: 18037679

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

RITE LITE SIGNS, INC. a Foreign Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 24167571
Date Inc/Auth/Filed: 02/27/2018
Jurisdiction : North Carolina
Print Date : 01/06/2023

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State



STATE OF GEORGIA BRAD RAFFENSPERGER, Secretary of State

State Licensing Board for Residential and General Contractors LICENSE NO. GCQA005917

David Ralph Catchpole, Jr 1000 Biscayne Drive Concord NC 28027

Company Name: RITE LITE SIGNS, INC.
Company License NO: GCCO005920
General Contractor Qualifying Agent

EXP DATE - 06/30/2026 Status: Active Issue Date: 04/16/2018

A pocket-sized license card is below. Above is an enlarged copy of your pocket card.

Please make note of the expiration date on your license. It is your responsibility to renew your license before it expires. Please notify the Board if you have a change of address.

Wall certificates suitable for framing are available at cost, see board fee schedule. To order a wall certificate, please order from the web site – www.sos.ga.gov/plb.

Please refer to Board Rules for any continuing education requirements your profession may require.

Georgia State Board of Professional Licensing 237 Coliseum Drive Macon GA 31217 Phone: (404) 424-9966

Phone: (404) 424-9966 www.sos.ga.gov/plb

David Ralph Catchpole, Jr 1000 Biscayne Drive Concord NC 28027 STATE OF GEORGIA BRAD RAFFENSPERGER, Secretary of State

tate Licensing Board for Residential and General Contractors
License No. GCQA005917

David Ralph Catchpole, Jr

1000 Biscayne Drive Concord NC 28027

Company Name: RITE LITE SIGNS, INC. Company License NO: GCCO005920 General Contractor Qualifying Agent

EXP DATE - 06/30/2026 Status: Active Issue Date: 04/16/2018

Control Number: 18037679

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

RITE LITE SIGNS, INC. a Foreign Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

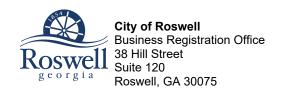
Docket Number : 24167571
Date Inc/Auth/Filed: 02/27/2018
Jurisdiction : North Carolina
Print Date : 01/06/2023

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State



Office Phone: 770/594-6235

RITE LITE SIGNS INC TASHA CATCHPOLE 1000 BISCAYNE DR CONCORD, NC 28027

At the bottom of this form is your City of Roswell Occupation Tax Certificate. It is sized so that it will fit in a standard picture frame made for 5 x 7 pictures, should you wish to frame it. While framing it is purely your option, it must be displayed in some manner in a conspicuous place in your business establishment and is not transferable to any other location, business or owner without proper notification to the City of Roswell.

City of Roswell BUSINESS REGISTRATION OFFICE 38 Hill Street Suite 120 Roswell, GA 30075

PLEASE FOLD ALONG THIS PERFORATION & DETACH CAREFULLY \$\rightarrow\$ City of Roswell, GA **Business Registration Office** 38 Hill Street PLEASE FOLD Suite 120 Roswell, GA 30075 2025 ALONG THIS OCCUPATION TAX CERTIFICATE PERFORATION THIS CERTIFICATE EXPIRES 12/31/2025 **AFTER** Business Name: RITE LITE SIGNS INC **Business Address: OUTSIDE CITY LIMITS DETACHING** Owner: CATCHPOLE, TASHA TOP PORTION Mailing/Billing Address: Business ID: Description SIGN MANUFACTURING RITE LITE SIGNS INC TASHA CATCHPOLE 1000 BISCAYNE DR CONCORD, NC 28027 COMMERCIAL BUSINESS NAICS: 339950 **DETACH THIS** PORTION This certificate shall be displayed in a conspicuous place in your business establishment and is not transferrable to any CAREFULLY other location, business or owner without proper notification to the City of Roswell Business Registration Office.

DMROS-BL

ABERT ABERT



AWS CERTIFIED WELDER Welders, Brazers and Operators

Joseph Lambert Cert # 1507201W

1-800-443-9353 Ext. 273 Information relating to identification and certification of the bearer of this card may be verified by calling or writing:

Certification Department of the American Welding Society
8669 NW 36th St., #130, Miami, FL 33166

Verification of the information on this card, including the test date and expiration date can be obtained by visiting the AWS website at www.aws.org/certification/cw_search.html.





American Welding Society® **CERTIFIED WELDER**

This Card is the property of AWS and shall be returned on demand.

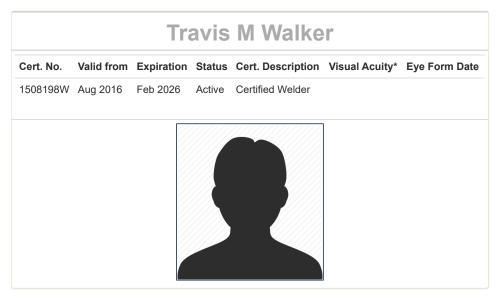
Jose _l #	oh Lambert Test Date	Sup	Code	Process(es)	GAS	Filler Metal	Base Metal	Pos	Thickness, Backing Thickness, Pipe; OD & Backing	Expires
1	6/19/2015	G	D1.1	SMAW	N/A	E7018	A36	3G	3/8" WB	1/15/2026
2	7/24/2015	B2.1	D1.1	SMAW	N/A	E7018	A36	3G	L:1/8"-3/4" WB	1/15/2026



AWS's Free Online Certification Verification Service



Please enter a Certification number below, along with the last name of the individual to be verified. The certification number can be found on a wallet card or wall certificate provided by the individual. The search will return the certification number, name and expiration date for each certification held by that individual.



* Certification number

1508198w

* Last name

walker

Go

AWS strongly suggests that the certification identity be verified with a government issued photo identification card, such as a driver's license

Note: Certificates and Wallet cards are the Property of AWS.

Our current CDL drivers are

Gary Martinson NC CDL 8248396 Exp 01/28/2029

Paul Lambert NC CDL 38103986 Exp 08/21/2026

Darren "DJ" Smith NC CDL 37733615 Exp 11/21/2026 Robert Mitchell NC CDL 28945558 Exp 10/03/2025

Certificate of Attendance

This to certify that

Jacob S. Grimmett

attended

OSHA 30-Hour Construction Safety Awareness

9/6, 9/7, 9/8, 9/9, 2022

Program Sponsor:



Presented by:
Patrick Jaap
(704) 754-7333 patrick.jaap@sentry.com

"As an OSHA authorized trainer, I verify that I have conducted this OSHA Outreach training class in accordance with OSHA Outreach Training Program requirements. I will document this class to my OSHA Authorizing Training Organization. Upon successful review of my documentation, I will provide each student a completion card within 90 days of the end of the class."

Certificate of Attendance

This to certify that

Nicholas T. Odom

attended

OSHA 30-Hour Construction Safety Awareness

9/6, 9/7, 9/8, 9/9, 2022

Program Sponsor:



Presented by:
Patrick Jaap
(704) 754-7333 patrick.jaap@sentry.com

"As an OSHA authorized trainer, I verify that I have conducted this OSHA Outreach training class in accordance with OSHA Outreach Training Program requirements. I will document this class to my OSHA Authorizing Training Organization. Upon successful review of my documentation, I will provide each student a completion card within 90 days of the end of the class."



18-006045064

This card acknowledges that the recipient has successfully completed:

10-hour Construction Safety and Health

This card issued to:

GARY MARTINSON

JESSICA L. EDWARDS

11/05/2019

Trainer Name

Date of Issue



Name: Nicholas Odom

NCDOT Certification Type: Flagger

Training: 10/10/2023-Expires: 10/10/2027

ID: WZ398326492

Card holder completed approved training program developed by J. M. Teague Engineering, training conducted by J. Love of J.M. Teague Engineering.



Name: Darren Smith

NCDOT Certification Type: Flagger

Training: 10/10/2023-Expires: 10/10/2027

ID: WZ147581592

Card holder completed approved training program developed by J. M. Teague Engineering, training conducted by J. Love of J.M. Teague Engineering.



Name: Gary Martinson

NCDOT Certification Type: Flagger

Training: 10/10/2023-Expires: 10/10/2027

ID: WZ370139020

Card holder completed approved training program developed by J. M. Teague Engineering, training conducted by J. Love of J.M. Teague Engineering.