

**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. : ITB-0011-25, Installation of Rectangular Rapid Flashing and Yellow Flashing Traffic Beacons.**

\* **NOTE: BASES OF AWARD:** 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: American Lighting and Signalization, LLC.

FEID #: 59-2554039

Address: 205 Apex Drive, Jefferson, GA 30549

Authorized Signature:  Date: 10/31/2025 Phone: (478) 343-6386 Fax: N/A

E-mail: fvandyke@asplundh.com Printed / Typed: F. Jonah VanDyke Title: Regional Manager

B-1

ITB-0011-25

Installation of Rectangular Rapid Flashing and Yellow Flashing Traffic Beacons  
Attachment "B" – Bid Cost Proposal Form (Bid Sheet)



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

| <b>ITEM NO.</b> | <b>ITEM</b>  | <b>UNIT OF MEASUREMENT</b> | <b>QUANTITY</b> | <b>UNIT PRICE</b>  | <b>TOTAL PRICE</b>  |
|-----------------|--|----------------------------|-----------------|--------------------|---------------------|
| 1               | Installation of RRFB Beacon at Lithonia High School - Address: 2440 Phillips Rd., Lithonia, Ga. 30058  | LS                         | 1               | \$19,865.00        | \$ 19,865.00        |
| 2               | Installation of RRFB Beacon at Miller Grove High School – Address: 2645 Dekalb Medical Pkwy, Lithonia, Ga. 30058   | LS                         | 1               | \$19,865.00        | \$ 19,865.00        |
| 3               | Installation of RRFB Beacon at Salem Middle School – Address: 5333 Salem Rd., Stonecrest, Ga. 30038  | LS                         | 1               | \$19,865.00        | \$ 19,865.00        |
| 4               | Installation of RRFB Beacon at Intersection of Fannin Drive and Salem Road   | LS                         | 1               | \$19,865.00        | \$ 19,865.00        |
| 5               | Installation of RRFB Beacon at Flatrock Elementary School – Address: 4603 Evans Mill Road, Stonecrest, Ga. 30038   | LS                         | 1               | \$19,865.00        | \$ 19,865.00        |
| 6               | Installation of a Pair of Yellow Traffic Beacon at the Intersection of Turner Hill Road and Rockland Road – Address: 4603 Evans Mill Road, Stonecrest, Ga. 30038 | LS                         | 1               | \$18,165.00        | \$ 18,165.00        |
|                 |  |                            |                 | <b>TOTAL COST:</b> | <b>\$117,490.00</b> |

**TOTAL COST IN WORDS:**

**Note:** All required concrete, excavation and other work shall be including in the lump sum price for each location.

B-2

ITB-0011-25

Installation of Rectangular Rapid Flashing and Yellow Flashing Traffic Beacons  
Attachment "B" – Bid Cost Proposal Form (Bid Sheet)





## 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.

American Lighting and Signalization, LLC.

dfinn2@asplundh.com

NAME OF BUSINESS

E-MAIL ADDRESS

BY: Ronald D. Hallock

SIGNATURE OF AUTHORIZED OFFICER OR AGENT

PRINTED NAME AND TITLE

Ronald Hallock VP, Assistant Secretary

MAILING ADDRESS

500 Mapewood Dr. Suite 4

Jupiter, FL 33458

CITY, STATE, ZIP CODE

561-758-6702

TELEPHONE NUMBER

TYPE: Mobile

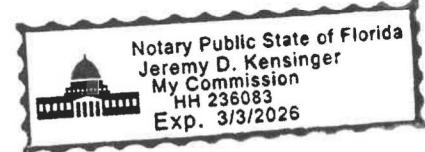
Ronald Hallock, who is (who are) personally known to me or who has produced  
Drivers License as identification and who did (did not) take an oath.

Notary Public Signature

Jerry Kensinger

Notary Name, Printed, Typed or Stamped

(SEAL)



Commission Number: 236083 Commission Expires: 3-3-2026



## STATEMENT OF QUALIFICATIONS

**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: (Legal Registration): American Lighting and Signalization, LLC.

Address: 205 Apex Dr.

City: Jefferson State: GA Zip: 30549

Telephone No. 470-879-6656 FAX No. N/A Email: jbass11@asplundh.com

***Does your firm qualify for SBE MBE or WBE status: SBE    MBE    WBE    LOCAL***

**ADDENDUM ACKNOWLEDGEMENT** - Bidder acknowledges that the following addenda have been received and are included in the bid submittal:

| <u>Addendum No.</u> | <u>Date Issued</u> | <u>Addendum No.</u> | <u>Date Issued</u> | <u>Addendum No.</u> | <u>Date Issued</u> |
|---------------------|--------------------|---------------------|--------------------|---------------------|--------------------|
| <u>1</u>            | <u>09/25</u>       |                     |                    |                     |                    |
| <u>2</u>            | <u>10/17</u>       |                     |                    |                     |                    |
| <u>3</u>            | <u>10/17</u>       |                     |                    |                     |                    |

**VARIANCES:** State any variations to specifications, terms and conditions in the space provided below or reference in the space provided below all variances contained on other pages of bid, attachments or bid pages. No variations or exceptions by the Bidder will be deemed to be part of the bid submitted unless such variation or exception is listed and contained within the bid documents and referenced in the space provided below. If no statement is contained in the below space, it is hereby implied that your bid submittal complies with the full scope of this solicitation. If this section does not apply to your bid, simply mark N/A. **If Bidder is requesting any variation(s) or exception(s) to the specifications, terms and conditions, you must submit a written statement with your bid submittal.**

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The below signatory hereby agrees to furnish the following article(s) or services at the price(s) and terms stated subject to all instructions, conditions, specifications addenda, legal advertisement, and conditions contained in the bid/proposal. I have read all attachments including the specifications and fully understand what is required. By submitting this signed bid I will accept a contract if approved by the City and such acceptance covers all terms, conditions, and specifications of this bid. The below signatory also hereby agrees, by virtue of submitting or attempting to submit a response, hereby agrees that in no event shall the City's liability for respondent's indirect, incidental, consequential, special or exemplary damages, expenses, or lost profits arising out of this competitive solicitation process, including but not limited to public advertisement, bid conferences, site visits, evaluations, oral presentations, or award proceedings. This limitation shall not apply to claims arising under any provision of indemnification or the City's protest ordinance contained in this competitive solicitation.

Submitted By: F. Jonah VanDyke Signature: 

Title: Regional Manager Date: 10/31/2025



**City of Stonecrest, Georgia**

Procurement Department

3120 Stonecrest Blvd., Suite 190

Web: [www.stonecrestga.org](http://www.stonecrestga.org)

Office: Phone: (772)-224-0200

Email: [Procurement@stonecrestga.org](mailto:Procurement@stonecrestga.org)

**Installation of Rectangular Rapid Flashing (RRFB) and Yellow Flashing Traffic Beacons**

**ITB-0011-25**

**TO:** ALL BIDDERS  
**FROM:** CITY OF STONECREST PROCUREMENT DEPARTMENT  
**SUBJECT:** ADDENDUM NO. ONE  
**DATE:** SEPTEMBER 25, 2025  
**CC:** GENERAL PUBLIC

**NOTICE:** This addendum is being issued to make the following change(s). All other terms and conditions of this solicitation remains unchanged.

**1. REVISE MICROSOFT TEAMS MEETING INFORMATION:**

**ORIGINAL:**

**Microsoft Teams meeting**

Join on your computer, mobile app or room device

Meeting ID: 262 912 335 828 9

Passcode: hH9Ad9ur

**REVISED**

**Microsoft Teams meeting**

Join on your computer, mobile app or room device

Meeting ID: 280 126 179 615 7

Passcode: iF6Ws9KF

**ALL OTHER INFORMATION IN THIS SECTION REMAINS THE SAME**

Addendum No. 1 must be signed as acknowledgment of receipt and attached to the bid response when submitted by **3:00 p.m., Friday, October 24, 2025**. For information on this solicitation, please contact:

Tanisha Boynton, Procurement Official  
3120 Stonecrest Blvd., Suite 190  
Stonecrest, Ga. 30038  
Phone: (772)-224-0200  
Email: [Tboynton@stonecrestga.gov](mailto:Tboynton@stonecrestga.gov)

American Lighting and Signalization, LLC.  
**NAME OF COMPANY**

  
**BIDDER'S SIGNATURE**

**SIGNATURE DATE:** 10/31/2025



**City of Stonecrest, Georgia**

Procurement Department

3120 Stonecrest Blvd., Suite 190

Web: [www.stonecrestga.org](http://www.stonecrestga.org)

Office: Phone: (772)-224-0200

Email: [Procurement@stonecrestga.org](mailto:Procurement@stonecrestga.org)

**Installation of Rectangular Rapid Flashing (RRFB) and Yellow Flashing Traffic Beacons**

**ITB-0011-25**

**TO:** ALL BIDDERS  
**FROM:** CITY OF STONECREST PROCUREMENT DEPARTMENT  
**SUBJECT:** ADDENDUM NO. TWO  
**DATE:** OCTOBER 17, 2025  
**CC:** GENERAL PUBLIC

**NOTICE:** This addendum is being issued to make the following change(s). All other terms and conditions of this solicitation remains unchanged.

**1. REVISED BID BOND DUE DATE AND PERFORMANCE BOND INFORMATION:**

**ORIGINAL:**

**BID BOND: REQUIRED FOR THIS SOLICITATION**

**FAILURE TO SUBMIT A BID BOND WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION. BIDDER'S MUST SUBMIT A COPY OF THE BID BOND WITH BID SUBMITTAL.**

**BID BOND MUST BE MAILED OR HAND DELIVERED TO: FAILURE TO SUBMIT A BID BOND WILL PRIOR TO 12:00 PM, MONDAY, SEPTEMBER 9, 2025, WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION.**

City of Stonecrest  
Procurement Department  
ATTN: Tanisha Boynton, Procurement Official  
3120 Stonecrest Blvd., Suite 190  
Stonecrest, Ga. 30038

**PERFORMANCE AND PAYMENT BOND: IS REQUIRED FOR THIS SOLICITATION. FAILURE TO SUBMIT PROOF OF BONDABILITY WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION.**

**NOTE:** In addition to submitting *Attachment "A"* – Bidder's Required Forms and *Attachment "B"* – Bid Cost Proposal (Bid Sheet), Bidder's **MUST** submit the manufacturer information consisting of but not limited to; pictures and technical specification for the Gazebo being offered in response to this solicitation **BY BIDS DUE DATE AND TIME. FAILURE TO SUBMIT THE REQUESTED MANUFACTURER INFORMATION WITH BID SUBMITTAL WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION.**

**REVISED:**

**BID BOND: REQUIRED FOR THIS SOLICITATION**

**FAILURE TO SUBMIT A BID BOND WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION. BIDDER'S MUST SUBMIT A COPY OF THE BID BOND WITH BID SUBMITTAL.**

**BID BOND MUST BE MAILED OR HAND DELIVERED TO: FAILURE TO SUBMIT A BID BOND PRIOR TO 12:00 PM, MONDAY, OCTOBER 27, WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION.**

City of Stonecrest  
Procurement Department  
ATTN: Tanisha Boynton, Procurement Official  
3120 Stonecrest Blvd., Suite 190  
Stonecrest, Ga. 30038

**PERFORMANCE AND PAYMENT BOND: IS REQUIRED FOR THIS SOLICITATION. FAILURE TO SUBMIT PROOF OF BONDABILITY WILL RESULT IN A NON-RESPONSIVE AND NON-RESPONSIBLE DETERMINATION.**

**ALL OTHER INFORMATION IN THIS SECTION REMAINS THE SAME**

**2. BIDS DUE DATE CHANGE:**

**ORIGINAL**

**ELECTRONIC BID SUBMISSION DEADLINE:**

Electronic Bid Responses shall be submitted via Bidnet (<https://Bidnetdirect.com/georgia/cityofstonecrest>) in response to this solicitation, prior to the designated bids due date and time indicated in the solicitation, **Friday, October 24, 2025 by 3:00PM.** **PAPER BID SUBMITTALS WILL NOT BE ACCEPTED.**

**REVISED:**

**ELECTRONIC BID SUBMISSION DEADLINE:**

Electronic Bid Responses shall be submitted via Bidnet (<https://Bidnetdirect.com/georgia/cityofstonecrest>) in response to this solicitation, prior to the designated bids due date and time indicated in the solicitation, **Monday, November 3, 2025 by 3:00PM.** **PAPER BID SUBMITTALS WILL NOT BE ACCEPTED.**

**ALL OTHER INFORMATION IN THIS SECTION REMAINS THE SAME**

Addendum No. 2 must be signed as acknowledgment of receipt and attached to the bid response when submitted by **3:00 p.m., Monday, November 3, 2025.** For information on this solicitation, please contact:

Tanisha Boynton, Procurement Official  
3120 Stonecrest Blvd., Suite 190  
Stonecrest, Ga. 30038  
Phone: (772)-224-0200  
Email: [Tboynton@stonecrestga.gov](mailto:Tboynton@stonecrestga.gov)

American Lighting and Signalization, LLC.

**NAME OF COMPANY**

  
BIDDER'S SIGNATURE

**DATE:** 10/31/2025



## 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/propose will be duly bond. Principal is defined 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 |
|-------------------|-------------------------|------------------|
| Ronald R. Hallock | VP, Assistant Secretary | (561) 758-6702   |

/ F. Jonah VanDyke

Date: 10/31/2025

Authorized Signature / Name

Regional Manager

Title

American Lighting and Signalization, LLC.

Legal Business Name

Principal Place of Business Address:

Federal Employer I.D. No. (FEIN): 59-2554039

Dun and Bradstreet No.: \_\_\_\_\_

Website Address: americanlighting.us

Jefferson/Jackson/GA

(City/County/State)

Telephone Number: (478) 343-6386

Type of Business/Organization (check appropriate box):

(a)  Sole Proprietorship  Partnership  Non-Profit  Joint Venture  Corporation  
 Other - Specify

(b) State of Incorporation: Florida

### 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.



## PURCHASING POLICY ADDENDUM

I, Ronald R. Hallock, hereby certify that I have received a copy of the City of Stonecrest, GA, Purchasing Policy which can be found at <https://www.stonecrestga.gov/Procurement.aspx> and agree to comply with all requirements of the City of Stonecrest, GA Purchasing Policy to the extent the policy is applicable to the undersigned.

THIS CERTIFICATION is submitted by Ronald R. Hallock the VP, Assistant Secretary  
(Authorized Officer or Agent Print) (Title)  
of American Lighting and Signalization, LLC.  
(Name of Company)

Ronald R. Hallock.  
SIGNATURE

10-31-2025  
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 **MUST** 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 **MUST** 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: F. Jonah VanDyke

Title: Regional Manager

Signature: 

Company/Firm Name: American Lighting and Signalization, LLC.

Address: 205 Apex Dr Jefferson, GA 30549

Phone: 478-343-6368

E-mail Address: fvandyke@asplundh.com

Date: 10/31/2025



## 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 BY:**

F. Jonah VanDyke

Bidder's Name

Signature

Regional Manager

10/31/2025

Title

Date

American Lighting and Signalization, LLC.

Company/Firm Name

205 Apex Dr Jefferson, GA 30549

Address

(478) 343-6386

Phone Number

fvandyke@asplundh.com

E-Mail Address

The foregoing instrument was acknowledged before me this 31<sup>st</sup> day of October 2025 by Franklin, who is (who are) personally known to me or who has produced Drivers license as identification and who did (did not) take an oath.

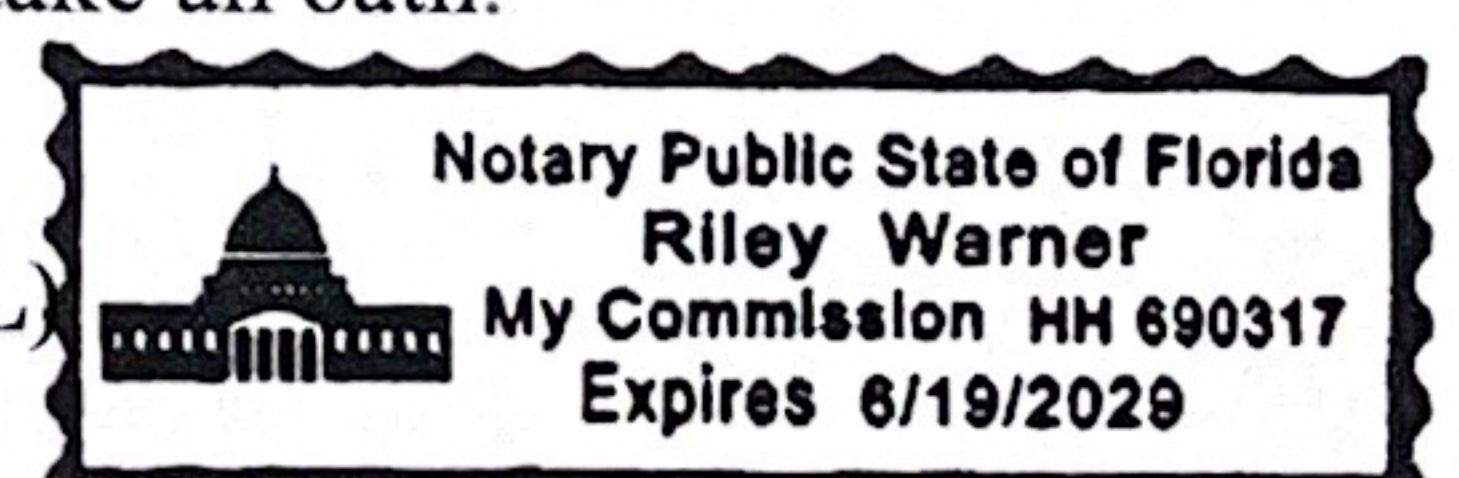
Riley Warner

Notary Public Signature

Riley Warner

Notary Name, Printed, Typed or Stamped

(SEAL)



Commission Number: HH 690317

Commission Expires: 06/19/2029

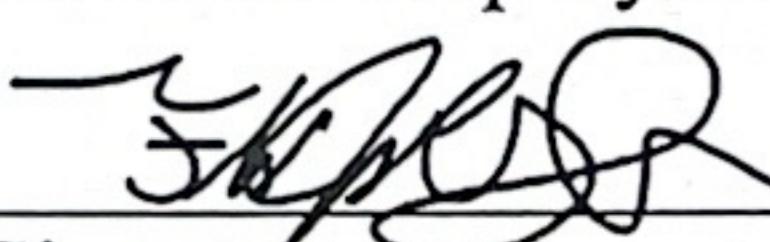


## INDEMINIFICATION CLAUSE

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.

American Lighting and Signalization, LLC.  
Bidder's Name

  
Signature

10/31/2025  
Date

State of Georgia

County of Jefferson

The foregoing instrument was acknowledged before me this 31<sup>st</sup> day of October 2025 by  
Franklin, who is (who are) personally known to me or who has produced  
Drivers License as identification and who did (did not) take an oath.

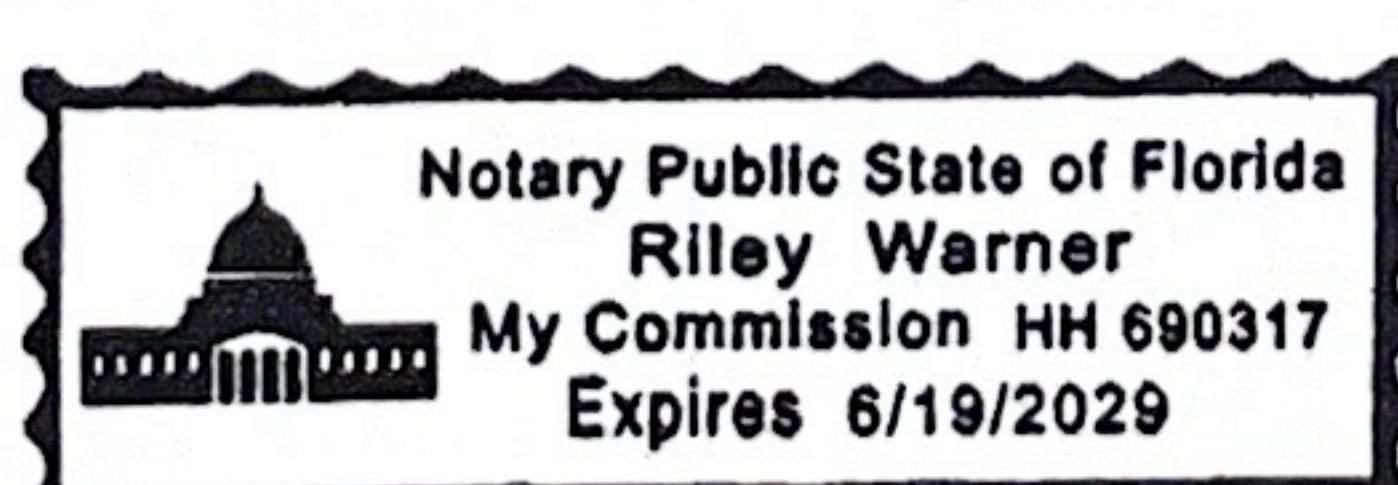
Riley Warner  
Notary Public Signature

Riley Warner  
Notary Name, Printed, Typed or Stamped

Commission Number: HH 690317

Commission Expires: 06/19/2029

(SEAL)





## GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT “E-VERIFY”

Contractor(s) Name: American Lighting and Signalization, LLC.

Address: 205 Apex Dr Jefferson, GA 30549

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.G.A. § 13-10-91(b).

The undersigned person or entity further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Stonecrest within five (5) business days after any subcontractor(s) is/are retained to perform such service.

45005

E Verify™ Company Identification Number

BY: Ronald D. Hallock  
(Authorized Officer or Agent)

7/1/2007

Date of Authorization

VP, Assistant Secretary

Title

Date: 10-27-2025

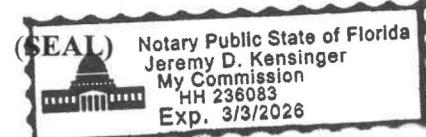
\* or any subsequent replacement operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603.

Other Identifying Number: \_\_\_\_\_

The foregoing instrument was acknowledged before me this 27 day of October 2025 by Ronald Hallock, who is (who are) personally known to me or who has produced Drivers License as identification and who did (did not) take an oath.

Jerry D. Kensinger  
Notary Public Signature

Jerry Kensinger  
Notary Name, Printed, Typed or Stamped



Commission Number: 236083 Commission Expires: 3-3-2026



## 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 subcontracting agreement with American Lighting and Signalization, LLC.  
(Contractor),  
\_\_\_\_ certifies to the Contractor that a drug-free workplace will be  
provided for the subcontractor’s employees during the performance of this Contract pursuant to subsection  
(b) of O.C.G.A. Section 50-24-03.”

Also, the undersigned further certifies that he/she will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the Contract.

THIS CERTIFICATION is submitted by Ronald Hallock the VP, Assistant Secretary  
(Authorized Officer or Agent Print) (Title)  
of American Lighting and Signalization, LLC.  
(Name of Company)

Donald L. Bush (Name of Company)  
Signature 10-27-2025 Date

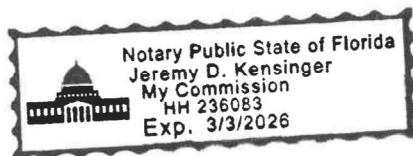
Ronald Hallock, who is (who are) personally known to me or who has produced  
Drivers License as identification and who did (did not) take an oath.

  
Notary Public Signature  
Jerry Konsinger

Notary Name, Printed, Typed or Stamped

Commission Number: 236083

Commission Expires: 3-3-2026



(SEAL)



## VENDOR CERTIFICATION REGARDING SCRUTINIZED COMPANIES LIST

Respondent Vendor Name: American Lighting and Signalization, LLC.

Vendor FEIN: 59-2554039

Vendor's Authorized Representative Name and Title: F. Jonah VanDyke Regional Manager

Address: 205 Apex Dr

City: Jefferson State: GA Zip: 30549

Phone Number: (478) 343-6386

Email Address: [fvandyke@asplundh.com](mailto:fvandyke@asplundh.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: F. Jonah VanDyke

Title: Regional Manager

Signature: 

Date: 10/31/2025



# AIA® Document A310™ – 2010

## Bid Bond

**CONTRACTOR:**

(Name, legal status and address)  
AMERICAN LIGHTING AND SIGNALIZATION,  
LLC  
205 Apex Drive  
Jefferson, GA 30539

**SURETY:**

(Name, legal status and principal place  
of business)  
LIBERTY MUTUAL INSURANCE COMPANY  
175 Berkeley Street  
Boston, MA 02116

**OWNER:**

(Name, legal status and address)  
CITY OF STONECREST, GEORGIA  
3120 Stonecrest Blvd., Stonecrest, GA 30038

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

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

**PROJECT:**

(Name, location or address, and Project number, if any)

ITB-0011-25 INSTALLATION OF RECTANGULAR RAPID FLASHING BEACONS  
(RRFB) AND YELLOW FLASHING TRAFFIC BEACONS

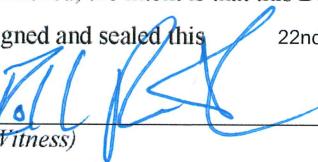
Project Number, if any:

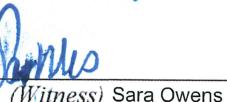
The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the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

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

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

Signed and sealed this 22nd day of October, 2025

  
(Witness)

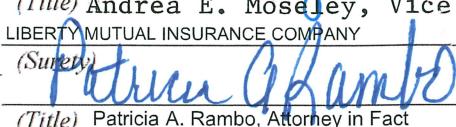
  
(Witness) Sara Owens

AMERICAN LIGHTING AND SIGNALIZATION, LLC

(Principal)   
(Seal)

(Title) Andrea E. Moseley, Vice President

LIBERTY MUTUAL INSURANCE COMPANY

(Surety)   
(Seal)

(Title) Patricia A. Rambo, Attorney in Fact



## POWER OF ATTORNEY

Liberty Mutual Insurance Company  
The Ohio Casualty Insurance Company  
West American Insurance Company

Certificate No: 8213593 - 019022

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Annmarie Breene, Babette Ward, Cathy H. Ho, Dana Donahue, Joanne C. Wagner, Kimberly G. Sherrod, Lori S. Shelton, Marisa Thielen, Patricia A. Rambo, Patricia Dorsaneo, Patrick Breene, Pedro Gonzalez, Jr., Sara Owens, Wayne G. McVaugh

all of the city of Philadelphia state of PA each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 3rd day of April, 2025.



Liberty Mutual Insurance Company  
The Ohio Casualty Insurance Company  
West American Insurance Company

By:

Nathan J. Zangerle, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

State of PENNSYLVANIA ss  
County of MONTGOMERY

On this 3rd day of April, 2025 before me personally appeared Nathan J. Zangerle, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal  
Teresa Pastella, Notary Public  
Montgomery County  
My commission expires March 28, 2029  
Commission number 1126044  
Member, Pennsylvania Association of Notaries

By:

*Teresa Pastella*  
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

### ARTICLE IV – OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

### ARTICLE XIII – Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

**Certificate of Designation** – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes Nathan J. Zangerle, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

**Authorization** – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 22ND day of OCTOBER, 2025.



By:

*Renee C. Llewellyn*  
Renee C. Llewellyn, Assistant Secretary

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email [HO SUR@libertymutual.com](mailto:HO SUR@libertymutual.com).



LIBERTY MUTUAL INSURANCE COMPANY  
FINANCIAL STATEMENT – DECEMBER 31, 2024

| Assets  | Liabilities   |
|---|---|
| Cash and Bank Deposits.....\$4,608,826,756.00                 | Unearned Premiums.....\$9,890,896,878.00                                    |
| *Bonds – U.S Government.....\$4,281,375,446.74                | Reserve for Claims and Claims Expense.....\$29,467,071,865.00               |
| *Other Bonds.....\$21,566,489,527.26                          | Funds Held Under Reinsurance Treaties.....\$341,948,172.00                  |
| *Stocks.....\$15,589,644,012.00                               | Reserve for Dividends to Policyholders.....\$954,025.00                     |
| Real Estate.....\$86,497,925.00                               | Additional Statutory Reserve.....\$150,547,865.00                           |
| Agents' Balances or Uncollected Premiums...\$7,512,975,129.00 | Reserve for Commissions, Taxes and Other Liabilities.....\$5,049,906,410.00 |
| Accrued Interest and Rents.....\$225,249,712.00               | Total.....\$47,104,416,171.00   |
| Other Admitted Assets.....\$19,367,663,200.00                 | Special Surplus Funds.....\$174,153,086.00                                  |
| <b>Total Admitted Assets.....\$74,539,483,661.00</b>          | Capital Stock.....\$10,000,075.00   |
|   | Paid in Surplus.....\$13,209,595,772.00                                     |
|   | Unassigned Surplus.....\$13,415,980,561.00                                  |
|   | Surplus to Policyholders.....\$27,435,067,490.00                            |
|   | <b>Total Liabilities and Surplus.....\$74,539,483,661.00</b>                |

\* Bonds are stated at amortized or investment value; Stocks at Association Market Values.  
The foregoing financial information is taken from Liberty Mutual Insurance Company's financial statement filed with the Massachusetts Department of Insurance.

I, TIM MIKOLAJEWSKI, Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the foregoing is a true, and correct statement of the Assets and Liabilities of said Corporation, as of December 31, 2024, to the best of my knowledge and belief.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Corporation at Seattle, Washington, this 8th day of March, 2025.



*Timothy A. Mikolajewski*

Timothy A. Mikolajewski, Assistant Secretary



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)

10/23/2025

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).

|  |  |   |  |  |              |                |
|--|--|---|--|--|--------------|----------------|
| PRODUCER   |  |   |  | CONTACT NAME:                          |              |                |
| Aon Risk Services Central, Inc.<br>Two Logan Square<br>100 North 18th Street, 16th floor<br>Philadelphia, PA 19103 |  | Aon Risk Services Central, Inc.<br>4 Overlook Point<br>Lincolnshire, IL 60069 |  | PHONE (A/C, No. Ext):                  | 215-255-2000 | FAX (A/C, No): |
|  |  |   |  | E-MAIL ADDRESS:                        |              |                |
|  |  |   |  | INSURER(S) AFFORDING COVERAGE          |              | NAIC #         |
|  |  |   |  | INSURER A: Greenwich Insurance Company |              | 22322          |
|  |  |   |  | INSURER B: XL Insurance America, Inc.  |              | 24554          |
|  |  |   |  | INSURER C:                             |              |                |
|  |  |   |  | INSURER D:                             |              |                |
|  |  |   |  | INSURER E:                             |              |                |
|  |  |   |  | INSURER F:                             |              |                |

**COVERAGES** **CERTIFICATE NUMBER:** 151571 **REVISION NUMBER:** 2145169556

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSPD                                     | SUBR WVD | POLICY NUMBER                           | POLICY EFF (MM/DD/YYYY)  | POLICY EXP (MM/DD/YYYY) | LIMITS                                    |   |              |
|----------|--|--|----------|---|--|-------------------------|---|---|--------------|
| A        | COMMERCIAL GENERAL LIABILITY   | X  | X        | RGD300136208                            | 8/1/2025   | 8/1/2026                | EACH OCCURRENCE                           | \$ 3,000,000                                    |              |
|          | CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/>   |  |          |   |  |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 500,000                                      |              |
| A        | GEN'L AGGREGATE LIMIT APPLIES PER:   | X  | X        | RAD943783708 (AOS)<br>RAD943786808 (VI) | 8/1/2025   | 8/1/2026                | MED EXP (Any one person)                  | \$ 10,000                                       |              |
|          | POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC  |  |          |   |  |                         | PERSONAL & ADV INJURY                     | \$ 3,000,000                                    |              |
|          | OTHER:   |  |          |   |  |                         | GENERAL AGGREGATE                         | \$ 4,000,000                                    |              |
|          |  |  |          |   |  |                         | PRODUCTS - COMP/OP AGG                    | \$ 4,000,000                                    |              |
|          |  |  |          |   |  |                         |   | \$  |              |
|          |  |  |          |   |  |                         |   | \$  |              |
| A        | AUTOMOBILE LIABILITY   | X  | X        | RAD943783708 (AOS)<br>RAD943786808 (VI) | 8/1/2025   | 8/1/2026                | COMBINED SINGLE LIMIT (Ea accident)       | \$ 3,000,000                                    |              |
|          | ANY AUTO <input checked="" type="checkbox"/>   |  |          |   |  |                         | BODILY INJURY (Per person)                | \$  |              |
|          | OWNED AUTOS ONLY <input type="checkbox"/>  |  |          |   |  |                         | BODILY INJURY (Per accident)              | \$  |              |
|          | Hired AUTOS ONLY <input type="checkbox"/>  |  |          |   |  |                         | PROPERTY DAMAGE (Per accident)            | \$  |              |
|          | \$10,000 Med Pa <input type="checkbox"/>   |  |          |   |  |                         |   | \$  |              |
|          |  |  |          |   |  |                         |   | \$  |              |
|          | UMBRELLA LIAB  | X  | X        |   |  |                         | EACH OCCURRENCE                           | \$  |              |
|          | EXCESS LIAB  |  |          |   |  |                         | AGGREGATE                                 | \$  |              |
|          | DED  |  |          |   |  |                         | RETENTION \$                              |   | \$           |
|          |  |  |          |   |  |                         |   |   | \$           |
| B        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  | Y / N<br><input checked="" type="checkbox"/> N | N / A    | X                                       | RWD300135808 (AOS)<br>RWR300135908<br>(AL, AK, AZ, MN, NE, OK, WI) | 8/1/2025                | 8/1/2026                                  | <input checked="" type="checkbox"/> PER STATUTE | OTH-ER       |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?<br>(Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below |  |          |   |  |                         |   | E.L. EACH ACCIDENT                              | \$ 3,000,000 |
|          |  |  |          |   |  |                         |   | E.L. DISEASE - EA EMPLOYEE                      | \$ 3,000,000 |
|          |  |  |          |   |  |                         |   | E.L. DISEASE - POLICY LIMIT                     | \$ 3,000,000 |
|          |  |  |          |   |  |                         |   |   |              |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Stonecrest is listed as additional insured as required by written agreement but only according to policy terms, conditions and exclusions for liability arising from operations performed by or on behalf of the named insured.

Waiver of subrogation applies only where required by written agreement unless claim arises out of negligence of the certificate holder.

The above coverage is considered primary and non-contributory as respects other insurance carried by certificate holder as required by written agreement.

30-day notice of cancellation, 10-day notice of cancellation for non-payment of premium.

## CERTIFICATE HOLDER

City of Stonecrest  
3120 Stonecrest Blvd., Suite 190  
Stonecrest, Ga. 30038

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Aon Risk Services Central, Inc.*

## BIDDER REQUIRED REFERENCES

The Bidder shall provide Three (3) references specific to the scope of work requested in this solicitation of similar size and scope in the State of Georgia. At least One (1) 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:** American Lighting and Signalization, LLC.

**CLIENT NO.1** - Name of company/firm to be contacted: City of Atlanta | Department of Transportation

Address: 55 Trinity Avenue SW, Suite 4400 Atlanta, GA 30303

Contact Person: Sowmya Maya, P.E. / PM Sr. -Traffic

Phone No: (404)831-4550

Contact E-Mail Address: SMaya@atlantaga.gov

Project Performance Period: 05/2014 to Present

(Dates should be in mm/yy format)

Project Name: State of Georgia Contract No. 48400-140-0000000013-3, Traffic Signal Maintenance

Location of Project: Georgia

Description of the overall scope: Traffic Signal Maintenance

Description of work that was self-performed by Bidder:

Traffic Signal Maintenance

**CLIENT NO.2** - Name of company/firm to be contacted: Florida Department of Transportation

Address: 2198 Edison Ave Jacksonville, FL 32204

Contact Person: Walter Sibley, PE / PM, Jacksonville Const.

Phone No: (904)360-5546

Contact E-Mail Address: walter.sibley@dot.state.fl.us

Project Performance Period: 12/18/2023 to 2/2/2024  
(Dates should be in mm/yy format)

Project Name: E20F5-R2 TWO 19 AIA @ TREASURE BEACH RD

Location of Project: St. Johns County

Description of the overall scope: Installation of pedestrian hybrid crosswalk

Description of work that was self-performed by Bidder:

Installation of pedestrian hybrid system

**CLIENT NO. 3** - Name of company/firm to be contacted: Florida Department of Transportation

Address: 2198 Edison Ave Jacksonville, FL 32204

Contact Person: Walter Sibley, PE / PM, Jacksonville Const.

Phone No: (904)360-5546

Contact E-Mail Address: walter.sibley@dot.state.fl.us

Project Performance Period: 3/6/2023 to 5/5/2023  
(Dates should be in mm/yy format)

Project Name: E20F5-R1 TWO 16 SR 16 FR EVERINGTON RD TO RANDALL RD

Location of Project: CLAY COUNTY

Description of the overall scope: UPGRADE SCHOOLS ZONE SIGN AND RRFB

Description of work that was self-performed by Bidder:

UPGRADE SCHOOLS ZONE SIGN AND RRFB