

DIVISION 00 – PROCUREMENT AND CONTRACTING REQUIREMENTS

SECTION 00 41 13

BID FORM

TO:

TOWN OF DEWEY BEACH
105 RODNEY AVENUE
DEWEY BEACH, DELAWARE

NEW DEWEY BEACH TOWN
HALL AND POLICE DEPT.

I have received the construction documents titled New Construction for Dewey Town Hall and Police Department. I have also received Addenda Nos. 4, and have included their provisions in this Proposal. I have examined both the documents and the site and submit the following bid.

In submitting this bid, I agree:

1. To hold my bid open until 60 days after bids are opened.
2. To enter into and execute a Contract, if awarded on the basis of this bid, and to furnish Performance and Labor and Material Payment Bonds in accord with the Supplementary Instructions to AIA Document A701.
3. To accomplish the work in accord with the Contract Documents.
4. To complete the work as certified in writing by the architect within 640 calendar days following receipt of written notice to proceed.

The first phase of construction will take 365 calendar days

The second phase of construction will take 275 calendar days.

Harkins Contracting, Inc. will construct this project for the lump sum price of:

Eleven Million Eight Hundred Forty Nine Thousand Eight Hundred Dollars (\$ 11,849,800.)

The first phase of construction with prevailing wage rate will cost:

Nine Million Two Hundred Twenty Two Thousand Three Hundred Dollars (\$ 9,222,300.)

The second phase of construction with prevailing wage rate will cost:

Two Million Six Hundred Twenty Seven Thousand Five Hundred Dollars (\$ 2,627,500.)

Included within the lump sum price is \$ 99,437 for the full payment & performance bond premium in the amount of 100% of the lump sum price stated on this bid form.

I include a copy of my current Delaware Contractor's license, Town of Dewey Contractor License, and other local licenses if applicable, with my bid. Subcontractor's entered into this contract with trades identified by the Delaware Division of Professional Regulation—including but not limited to Electricians, Elevator Mechanics, HVAC, Plumbers, Surveyors, etc.—shall possess professional licenses by the Delaware Division of Professional Regulation.

I include an executed copy of AIA Document A305 "Contractor's Qualification Statement" with my bid.

I include the required Bid Security with my bid.

I include the following DEDUCTIVE ALTERNATES. The Town of Dewey Beach reserves the right to incorporate alternates, in part or in total, it deems to be in its own best interests.

ALTERNATE NO. 1: Omit terrazzo flooring, and substitute with LVT flooring #2.

DEDUCT: \$ 39,951.

ALTERNATE NO. 2: Omit drywall, furring, acoustical batt insulation for wall types A and B. Embed conduit, power, or other utility within the wall. Finish exposed concrete with primer and paint as specified.

DEDUCT: \$ 39,848.

ALTERNATE NO. 3: Omit all LVT and Carpet where scheduled, and substitute for sealed and polished concrete.

DEDUCT: \$ 4,971.

ALTERNATE NO. 4: Substitute standing seam metal roof for fully adhered pvc membrane roof with standing seam profile.

ADD DEDUCT: \$ 160,666.

ALTERNATE NO. 5: Omit all windows on the third floor. Block and rough-in framing for future window install.

DEDUCT: \$ 52,500.

ALTERNATE NO. 6: Omit all ceramic tile. Provide rigid vinyl wall protection system up to 48" A.F.F. over painted moisture resistant drywall where scheduled, and provide fully adhered LVT flooring with heat welded seams to prevent moisture intrusion.

DEDUCT: \$ 15,399.

ALTERNATE NO. 7: Substitute fiberglass doors and frames for hollow metal doors and frames.

DEDUCT: \$ 13,160.

ALTERNATE NO. 8: Omit elevator # 2. Provide foundation pit, shaft wall at first floor, and floor block outs for second and third for future install. Provide handicap lift to serve between Grade Vestibule to Processing Vestibule with necessary safeguards, calls, and doors.

DEDUCT: \$ 144,700.

ALTERNATE NO. 9: Omit all ballistic (and fire-rated) exterior glass on first floor and substitute with ballistic and fire-rated glass block with frames and mortar.

DEDUCT: \$ 72,620.

ALTERNATE NO. 10: The cost to omit prevailing wages from labor for the project from first phase of construction.

DEDUCT: \$ ^{CM} 399 924,989.

ALTERNATE NO. 11: The cost to omit prevailing wages from labor for the project from second phase of construction.

DEDUCT: \$ 296,716.

ALTERNATE NO. 12: The cost in savings for construction if phasing was eliminated from the project and both phases (1+2) were constructed all at one time under prevailing wage rate.

DEDUCT: \$ 77,203.

SCHEDULE C- UNIT PRICES BID – CONTINGENT ITEMS

CONTINGENT ITEMS: The following unit prices will be utilized for changes in work from that indicated by the Project Manual, upon authorization of the Engineer.

ITEM NO.	DESCRIPTION	UNIT	ESTIMATED QUANTITY	UNIT PRICE	TOTAL PRICE
C1	Excavation Below Subgrade	-- CY	200	\$7.00	\$1,400.00
C2	Furnish and Place Gravel Bedding	-- CY	100	\$82.50	\$8,250.00
C3	Furnish and Place Special Backfill	-- CY	200	\$31.00	\$6,200.00
C4	Miscellaneous Excavation and Backfill	-- CY	100	\$14.00	\$1,400.00
C5	Furnish and Place Miscellaneous 4,500 psi Concrete	-- CY	100	\$205.00	\$20,500.00
C6	Secure Modified Proctor Tests	-- EA	6	\$250.00	\$1,500.00
C7	Secure Field Density Tests	-- EA	20	\$110.00	\$2,200.00
C8	Secure Concrete Field Test Cylinders	-- EA	20	\$165.00	\$3,300.00

SUBCONTRACTORS

Subcontractor's entered into this contract with trades identified by the Delaware Division of Professional Regulation—including but not limited to Electricians, Elevator Mechanics, HVAC, Plumbers, Surveyors, etc.—shall possess professional licenses by the Delaware Division of Professional Regulation. The undersigned BIDDER proposes to use the following named licensed SUBCONTRACTORS:

- SITE WORK HCE Site Maintenance
- PAVEMENT HCE Site Maintenance
- CONCRETE Harkins Concrete Construction
- STEEL Aledak Metalworks, Inc.
- CARPENTRY Eastern Shore Building and Drywall
- FRAMING Eastern Shore Building and Drywall
- CABINETRY Kitchen Concepts Plus

DOORS AND HARDWARE Salisbury Door & Hardware

WINDOWS Walker & Laberge Glass Company

DRYWALL Eastern Shore Building and Drywall

ACOUSTICAL CEILINGS Eastern Shore Building and Drywall

FLOORING Value Carpet One, Flooring Solutions

ROOFING Above All Construction

HVAC Ralph G. Degli Obizzi

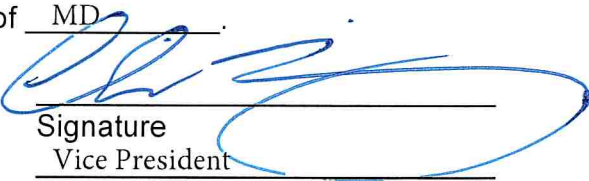
ELECTRICAL Diamond Electrical, Inc.

PLUMBING Ralph G. Degli Obizzi

FIRE PROTECTION Bear Industries, Inc.

The following Corporation is chartered in the State of MD.


Witness


Signature
Vice President
Title

CORPORATE SEAL

Harkins Contracting, Inc.
Firm Name
31400 Winterplace Pkwy, Ste 400
Salisbury, MD 21804

1/17/2025
Date

Business Address
DE-2021-000001799
Delaware Contractor's License #
2010102844
Delaware Business License

END OF SECTION



AIA® Document A305® – 2020

Contractor's Qualification Statement

THE PARTIES SHOULD EXECUTE A SEPARATE CONFIDENTIALITY AGREEMENT IF THEY INTEND FOR ANY OF THE INFORMATION IN THIS A305-2020 TO BE HELD CONFIDENTIAL.

SUBMITTED BY:

(Organization name and address.)

Harkins Contracting, Inc.
31400 Winterplace Pkwy, #400
Salisbury, MD 21804

SUBMITTED TO:

(Organization name and address.)

Town of Dewy Beach
105 Rodney Avenue
Dewey Beach, DE 19971

ADDITIONS AND DELETIONS:

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TYPE OF WORK TYPICALLY PERFORMED

(Indicate the type of work your organization typically performs, such as general contracting, construction manager as constructor services, HVAC contracting, electrical contracting, plumbing contracting, or other.)

Harkins Contracting, Inc. – General Contracting
Harkins Concrete Construction – Concrete Construction
Harkins Ready Mix – Concrete Supplier

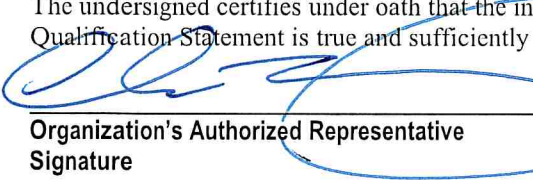
THIS CONTRACTOR'S QUALIFICATION STATEMENT INCLUDES THE FOLLOWING:

(Check all that apply.)

- Exhibit A – General Information
- Exhibit B – Financial and Performance Information
- Exhibit C – Project-Specific Information
- Exhibit D – Past Project Experience
- Exhibit E – Past Project Experience (Continued)

CONTRACTOR CERTIFICATION

The undersigned certifies under oath that the information provided in this Contractor's Qualification Statement is true and sufficiently complete so as not to be misleading.



 Organization's Authorized Representative Date
 Signature

Chris Manning, Vice President
Printed Name and Title

NOTARY
State of: **Maryland**
County of: **Wicomico**
Signed and sworn to before me this **16th** day of **January 2025**

Teresa M. Ellis
Notary Signature



My commission expires: 11/22/2028



AIA® Document A305® – 2020 Exhibit A

General Information

Contracting, Inc. and dated the 16th day of January in the year 2025
(In words, indicate day, month and year.)

§ A.1 ORGANIZATION

§ A.1.1 Name and Location

§ A.1.1.1 Identify the full legal name of your organization.

Harkins Contracting, Inc.
31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804

§ A.1.1.2 List all other names under which your organization currently does business and, for each name, identify jurisdictions in which it is registered to do business under that trade name.

N/A

§ A.1.1.3 List all prior names under which your organization has operated and, for each name, indicate the date range and jurisdiction in which it was used.

N/A

§ A.1.1.4 Identify the address of your organization’s principal place of business and list all office locations out of which your organization conducts business. If your organization has multiple offices, you may attach an exhibit or refer to a website.

31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804

§ A.1.2 Legal Status

§ A.1.2.1 Identify the legal status under which your organization does business, such as sole proprietorship, partnership, corporation, limited liability corporation, joint venture, or other.

Corporation

.1 If your organization is a corporation, identify the state in which it is incorporated, the date of incorporation, and its four highest-ranking corporate officers and their titles, as applicable.

Maryland 2009

.2 If your organization is a partnership, identify its partners and its date of organization.

N/A

.3 If your organization is individually owned, identify its owner and date of organization.

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- 4 If the form of your organization is other than those listed above, describe it and identify its individual leaders:

§ A.1.2.2 Does your organization own, in whole or in part, any other construction-related businesses? If so, identify and describe those businesses and specify percentage of ownership.

Harkins Concrete Construction – Concrete Construction – 100%
Harkins Ready Mix – Concrete Supplier – 100%

§ A.1.3 Other Information

§ A.1.3.1 How many years has your organization been in business?

16 Years

§ A.1.3.2 How many full-time employees work for your organization?

12

§ A.1.3.3 List your North American Industry Classification System (NAICS) codes and titles. Specify which is your primary NAICS code.

236200

§ A.1.3.4 Indicate whether your organization is certified as a governmentally recognized special business class, such as a minority business enterprise, woman business enterprise, service-disabled veteran owned small business, woman owned small business, small business in a HUBZone, or a small disadvantaged business in the 8(a) Business Development Program. For each, identify the certifying authority and indicate jurisdictions to which such certification applies.

N/A

§ A.2 EXPERIENCE

§ A.2.1 **Complete Exhibit D** to describe up to four projects, either completed or in progress, that are representative of your organization's experience and capabilities.

§ A.2.2 State your organization's total dollar value of work currently under contract.

\$60 Million

§ A.2.3 Of the amount stated in Section A.2.2, state the dollar value of work that remains to be completed:

\$13 Million

§ A.2.4 State your organization's average annual dollar value of construction work performed during the last five years.

\$29 Million

§ A.3 CAPABILITIES

§ A.3.1 List the categories of work that your organization typically self-performs. **None**

§ A.3.2 Identify qualities, accreditations, services, skills, or personnel that you believe differentiate your organization from others.

Attention to quality and working with owners to provide the best product for the most economical price. Our field and office staff work together to make the best team possible at building, listening, driving, and leading.

§ A.3.3 Does your organization provide design collaboration or pre-construction services? If so, describe those services.

Design review and comment for constructability and value engineering

§ A.3.4 Does your organization use building information modeling (BIM)? If so, describe how your organization uses BIM and identify BIM software that your organization regularly uses.

No

§ A.3.5 Does your organization use a project management information system? If so, identify that system.

No

§ A.4 REFERENCES

§ A.4.1 Identify three client references:

(Insert name, organization, and contact information)

Town of Ocean City
301 Baltimore Avenue
Ocean City, MD 21842
Contact: Hal Adkins – HAdkins@oceancitymd.gov - (410) 524-7716

Wicomico County Sheriffs Office
401 W. Naylor Mill Rd
Salisbury, MD 21801
Contact: Major Tod Richardson – trichardson@wicomicocounty.org – (410) 548-4892 (Office)

Fishers Popcorn
37081 Coastal Highway
Fenwick Island, DE 19944
Contact: Russell Hall, Vice President – russell@fishers-popcorn.com – (888) 436-6288 (Office)

§ A.4.2 Identify three architect references:

(Insert name, organization, and contact information)

George, Miles & Buhr, LLC (OPWWTP)
206 West Main Street
Salisbury, MD 21804
Contact: Morgan Helfrich – mhelfrich@gmbnet.com – (410) 742-3115

AWB Engineers (Allen Harim)
1942 Northwood Drive
Salisbury, MD 21801
Contact: Matt Drew – mdrew@awbengineers.com – (410) 742-7299 (Office)

WRA, LLP (OC 65th, OC Parking Lot)
801 South Caroline Street
Baltimore, MD 21231
(410) 235-3450 (Office)

Contact: Michael Henry

§ A.4.3 Identify one bank reference:
(Insert name, organization, and contact information)

Hebron Savings Bank
1310 Mount Herman Road
Salisbury, MD 21804
Contact: Amy Isaacs - (410) 546-8118 (Office)

§ A.4.4 Identify three subcontractor or other trade references:
(Insert name, organization, and contact information)

Diamond State Masonry – Mark Rizzo (302) 656-9612
Tomey Electric, Inc. – David Tomey (410) 228-8130
Delaware Elevator – Pete Meeks (410) 749-3489

Additions and Deletions Report for

AIA[®] Document A305[®] – 2020 Exhibit A

This Additions and Deletions Report, as defined on page 1 of the associated document, reproduces below all text the author has added to the standard form AIA document in order to complete it, as well as any text the author may have added to or deleted from the original AIA text. Added text is shown underlined. Deleted text is indicated with a horizontal line through the original AIA text.

Note: This Additions and Deletions Report is provided for information purposes only and is not incorporated into or constitute any part of the associated AIA document. This Additions and Deletions Report and its associated document were generated simultaneously by AIA software at 09:02:32 ET on 01/17/2025.

PAGE 1

~~This Exhibit is part of the Contractor's Qualification Statement, submitted by _____ and dated the _____ day of _____ in the year _____~~
Contracting, Inc. and dated the 16th day of January in the year 2025

...

Harkins Contracting, Inc.
31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804

...

N/A

...

N/A

...

31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804

...

Corporation

...

Maryland 2009

...

N/A

PAGE 2

Harkins Concrete Construction – Concrete Construction – 100%
Harkins Ready Mix – Concrete Supplier – 100%

...

16 Years

...

12

...

236200

§ A.1.3.4 Indicate whether your organization is certified as a governmentally recognized special business class, such as a minority business enterprise, woman business enterprise, ~~service disabled~~ ~~service-disabled~~ veteran owned small business, woman owned small business, small business in a HUBZone, or a small disadvantaged business in the 8(a) Business Development Program. For each, identify the certifying authority and indicate jurisdictions to which such certification applies.

N/A

...

\$60 Million

...

\$13 Million

...

\$29 Million

...

§ A.3.1 List the categories of work that your organization typically self-performs. None
PAGE 3

Attention to quality and working with owners to provide the best product for the most economical price. Our field and office staff work together to make the best team possible at building, listening, driving, and leading.

...

Design review and comment for constructability and value engineering

...

No

...

No

...

Town of Ocean City
301 Baltimore Avenue
Ocean City, MD 21842
Contact: Hal Adkins – HAdkins@oceancitymd.gov - (410) 524-7716

Wicomico County Sheriffs Office
401 W. Naylor Mill Rd

Salisbury, MD 21801

Contact: Major Tod Richardson – trichardson@wicomicocounty.org – (410) 548-4892 (Office)

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37081 Coastal Highway

Fenwick Island, DE 19944

Contact: Russell Hall, Vice President – russell@fishers-popcorn.com – (888) 436-6288 (Office)

...

George, Miles & Buhr, LLC (OPWWTP)

206 West Main Street

Salisbury, MD 21804

Contact: Morgan Helfrich – mhelfrich@gmbnet.com – (410) 742-3115

AWB Engineers (Allen Harim)

1942 Northwood Drive

Salisbury, MD 21801

Contact: Matt Drew – mdrew@awbengineers.com – (410) 742-7299 (Office)

WRA, LLP (OC 65th, OC Parking Lot)

801 South Caroline Street

Baltimore, MD 21231

(410) 235-3450 (Office)

Contact: Michael Henry

PAGE 4

Hebron Savings Bank

1310 Mount Herman Road

Salisbury, MD 21804

Contact: Amy Isaacs - (410) 546-8118 (Office)

...

Diamond State Masonry – Mark Rizzo (302) 656-9612

Tomey Electric, Inc. – David Tomey (410) 228-8130

Delaware Elevator – Pete Meeks (410) 749-3489



AIA® Document A305® – 2020 Exhibit B

Financial and Performance Information

This Exhibit is part of the Contractor’s Qualification Statement, submitted by **Harkins Contracting, Inc.** and dated the **16th** day of **January** in the year **2025**
(In words, indicate day, month and year.)

§ B.1 FINANCIAL

§ B.1.1 Federal tax identification number:

27-1117123

§ B.1.2 **Attach financial statements** for the **last three years** prepared in accordance with Generally Accepted Accounting Principles, including your organization’s latest balance sheet and income statement. Also, indicate the name and contact information of the firm that prepared each financial statement.

UHY Advisors, inc.
955 Mount Herman Road
Salisbury, MD 21804

§ B.1.3 Has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, been the subject of any bankruptcy proceeding within the last ten years?

No

§ B.1.4 Identify your organization’s preferred credit rating agency and identification information.

(Identify rating agency, such as Dun and Bradstreet or Equifax, and insert your organization’s identification number or other method of searching your organization’s credit rating with such agency.)

DUNS #833067528

§ B.2 DISPUTES AND DISCIPLINARY ACTIONS

§ B.2.1 Are there any pending or outstanding judgments, arbitration proceedings, bond claims, or lawsuits against your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, or any of the individuals listed in Exhibit A, Section 1.2, in which the amount in dispute is more than \$75,000?

(If the answer is yes, provide an explanation.)

No

§ B.2.2 In the last five years has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management:

(If the answer to any of the questions below is yes, provide an explanation.)

.1 failed to complete work awarded to it?

No

.2 been terminated for any reason except for an owners’ convenience?

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No

- .3 had any judgments, settlements, or awards pertaining to a construction project in which your organization was responsible for more than \$75,000?

Yes, Due to owner's default

- .4 filed any lawsuits or requested arbitration regarding a construction project?

Yes, Due to owner's default

§ B.2.3 In the last five years, has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management; or any of the individuals listed in Exhibit A Section 1.2:
(If the answer to any of the questions below is yes, provide an explanation.)

- .1 been convicted of, or indicted for, a business-related crime?

No

- .2 had any business or professional license subjected to disciplinary action?

No

- .3 been penalized or fined by a state or federal environmental agency?

No



AIA® Document A305® – 2020 Exhibit C

Project Specific Information

This Exhibit is part of the Contractor’s Qualification Statement, submitted by **Harkins Contracting, Inc.** and dated the **16th** day of **January** in the year **2025**
(In words, indicate day, month and year.)

PROJECT:

(Name and location or address.)

**New Dewey Beach Town Hall and Police Department
Dewey Beach, DE**

CONTRACTOR’S PROJECT OFFICE:

(Identify the office out of which the contractor proposes to perform the work for the Project.)

**31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804**

TYPE OF WORK SOUGHT

(Indicate the type of work you are seeking for this Project, such as general contracting, construction manager as constructor, design-build, HVAC subcontracting, electrical subcontracting, plumbing subcontracting, etc.)

General Contracting, Construction Manager, Design-Build

CONFLICT OF INTEREST

Describe any conflict of interest your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, or any of the individuals listed in Exhibit A Section 1.2, may have regarding this Project.

None

§ C.1 PERFORMANCE OF THE WORK

§ C.1.1 When was the Contractor’s Project Office established?

2009

§ C.1.2 How many full-time field and office staff are respectively employed at the Contractor’s Project Office?

12

§ C.1.3 List the business license and contractor license or registration numbers for the Contractor’s Project Office that pertain to the Project.

**State of Maryland #22673220
State of Delaware #2020102844
Town of Ocean City, MD #20-00337475
State of Virginia #2705133051**

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§ C.1.4 Identify key personnel from your organization who will be meaningfully involved with work on this Project and indicate (1) their position on the Project team, (2) their office location, (3) their expertise and experience, and (4) projects similar to the Project on which they have worked.

David J. Harkins, President – over 26 years of experience in concrete construction and general contracting in the Delmarva area.

Randy Swift, Vice President – over 35 years of experience in residential and commercial construction. His responsibilities include coordinating with owners, field personnel and subcontractors. His main focus is on managing all facets of all projects to attain accelerated schedules and budgets while maintaining the quality of work.

David Strauss, Chief Estimator - over 35 years of experience in budgeting, estimating, negotiating, subcontractor selection, purchasing, project management, onsite supervision, and critical path scheduling.

Chris Manning, Vice President – over 18 years of experience in residential/commercial construction, construction management and inspection/testing fields. He performs project management and quality assurance duties.

Phil Pierson, Project Manager – over 30 years of experience in commercial construction and construction management. He is experienced with project management which includes cost management, budgeting, inspections, site visits, sub/vendor coordinator and billing.

Mindy West, Controller – over 23 years of experience in all aspects of accounting, which includes 15 years of construction accounting experience. Ms. West oversees all accounting functions for all Harkins companies. She is responsible for office management, business insurance and benefit administration.

Teresa Ellis, Accounting Specialist – over 29 years of experience in the accounting field. Her responsibilities include accounts payable and payroll.

Fawn Milbourne, Project Coordinator – over 12 years of experience in the construction/engineering fields. Her experience includes owner/subcontractor contract review/preparation, project document control/management, project closeouts, extensive database management, owner billing, submittals, and sub certificate of insurance compliance.

Project Superintendents – our on-site superintendents boast many years of commercial and residential construction experience. We currently employ **Four (4)** superintendents most with in excess of over 20 years of experience and who are focused on completing projects on-time and on-budget.

All employees listed above are located in the Salisbury, MD Office, and have provided their expertise/experience on the following projects:

OC 65th Street Facility Upgrade, Ocean City, MD
Allen Harim Processing Plant, Millsboro, MD
Cape Henlopen High School District Band & Choir Renovations, Lewes, DE
Ocean Pines Waste Water Treatment Plant, Ocean Pines, MD
Residences of Riverplace Apartments, Seaford, DE
Hyatt Place Hotel, Ocean City, MD
Downtown Bridal Shop, Salisbury, MD
NASA Flight Facility, Wallops Island, VA
Cambria Hotel, Ocean City, MD
The Ross Student Housing, Salisbury, MD
Wicomico County Public Safety Building, Salisbury, MD

§ C.1.5 Identify portions of work that you intend to self-perform on this Project.

None – all work is subbed out

§ C.1.6 To the extent known, list the subcontractors you intend to use for major portions of work on the Project.

TBD

§ C.2 EXPERIENCE RELATED TO THE PROJECT

§ C.2.1 Complete Exhibit D to describe up to **four projects** performed by the Contractor's Project Office, either **completed or in progress**, that are relevant to this Project, such as projects in a similar geographic area or of similar project type. If you have already completed Exhibit D, but want to provide further examples of projects that are relevant to this Project, you may complete **Exhibit E**.

§ C.2.2 State the total dollar value of work currently under contract at the Contractor's Project Office:

\$60 Million

§ C.2.3 Of the amount stated in Section C.2.2, state the dollar value of work that remains to be completed:

\$13 Million

§ C.2.4 State the average annual dollar value of construction work performed by the Contractor's Project Office during the last five years.

\$29 Million

§ C.2.5 List the total number of projects the Contractor's Project Office has completed in the last five years and state the dollar value of the largest contract the Contractor's Project Office has completed during that time.

24 \$34,831,779

§ C.3 SAFETY PROGRAM AND RECORD

§ C.3.1 Does the Contractor's Project Office have a written safety program?

Yes

§ C.3.2 List all safety-related citations and penalties the Contractor's Project Office has received in the last three years.

None

§ C.3.3 Attach the Contractor's Project Office's OSHA 300a Summary of Work-Related Injuries and Illnesses form for the **last three years**.

§ C.3.4 Attach a copy of your insurance agent's verification letter for your organization's current workers' compensation experience modification rate and rates for the last three years.

§ C.4 INSURANCE

§ C.4.1 Attach current certificates of insurance for your commercial general liability policy, umbrella insurance policy, and professional liability insurance policy, if any. Identify deductibles or self-insured retentions for your commercial general liability policy.

§ C.4.2 If requested, will your organization be able to provide property insurance for the Project written on a builder's risk "all-risks" completed value or equivalent policy form and sufficient to cover the total value of the entire Project on a replacement cost basis?

Yes

§ C.4.3 Does your commercial general liability policy contain any exclusions or restrictions of coverage that are prohibited in AIA Document A101-2017, Exhibit A, Insurance A.3.2.2.3? If so, identify.

No

§ C.5 SURETY

§ C.5.1 If requested, will your organization be able to provide a performance and payment bond for this Project?

Yes

§ C.5.2 Surety company name:

Liberty Mutual Surety

§ C.5.3 Surety agent name and contact information:

**Hampton Roads Bonding
1080 Laskin Road, Suite 204
Virginia Beach, VA 23451
Contact: Mark Bundy (757) 491-1102**

§ C.5.4 Total bonding capacity:

\$40 million single projects / \$75 million aggregate

§ C.5.5 Available bonding capacity as of the date of this qualification statement:

\$35 Million

Additions and Deletions Report for AIA® Document A305® – 2020 Exhibit C

This Additions and Deletions Report, as defined on page 1 of the associated document, reproduces below all text the author has added to the standard form AIA document in order to complete it, as well as any text the author may have added to or deleted from the original AIA text. Added text is shown underlined. Deleted text is indicated with a horizontal line through the original AIA text.

Note: This Additions and Deletions Report is provided for information purposes only and is not incorporated into or constitute any part of the associated AIA document. This Additions and Deletions Report and its associated document were generated simultaneously by AIA software at 09:03:01 ET on 01/17/2025.

PAGE 1

This Exhibit is part of the Contractor's Qualification Statement, submitted by Harkins Contracting, Inc. and dated the 16th day of January in the year 2025

...

New Dewey Beach Town Hall and Police Department
Dewey Beach, DE

...

31400 Winterplace Pkwy, Suite 400
Salisbury, MD 21804

...

General Contracting, Construction Manager, Design-Build

...

None

...

2009

...

12

...

State of Maryland #22673220
State of Delaware #2020102844
Town of Ocean City, MD #20-00337475
State of Virginia #2705133051

PAGE 2

David J. Harkins, President – over 26 years of experience in concrete construction and general contracting in the Delmarva area.

Randy Swift, Vice President – over 35 years of experience in residential and commercial construction. His responsibilities include coordinating with owners, field personnel and subcontractors. His main focus is on managing all facets of all projects to attain accelerated schedules and budgets while maintaining the quality of work.

David Strauss, Chief Estimator - over 35 years of experience in budgeting, estimating, negotiating, subcontractor selection, purchasing, project management, onsite supervision, and critical path scheduling.

Chris Manning, Vice President – over 18 years of experience in residential/commercial construction, construction management and inspection/testing fields. He performs project management and quality assurance duties.

Phil Pierson, Project Manager – over 30 years of experience in commercial construction and construction management. He is experienced with project management which includes cost management, budgeting, inspections, site visits, sub/vendor coordinator and billing.

Mindy West, Controller – over 23 years of experience in all aspects of accounting, which includes 15 years of construction accounting experience. Ms. West oversees all accounting functions for all Harkins companies. She is responsible for office management, business insurance and benefit administration.

Teresa Ellis, Accounting Specialist – over 29 years of experience in the accounting field. Her responsibilities include accounts payable and payroll.

Fawn Milbourne, Project Coordinator – over 12 years of experience in the construction/engineering fields. Her experience includes owner/subcontractor contract review/preparation, project document control/management, project closeouts, extensive database management, owner billing, submittals, and sub certificate of insurance compliance.

Project Superintendents – our on-site superintendents boast many years of commercial and residential construction experience. We currently employ **Four (4)** superintendents most with in excess of over 20 years of experience and who are focused on completing projects on-time and on-budget.

All employees listed above are located in the Salisbury, MD Office, and have provided their expertise/experience on the following projects:

OC 65th Street Facility Upgrade, Ocean City, MD
Allen Harim Processing Plant, Millsboro, MD
Cape Henlopen High School District Band & Choir Renovations, Lewes, DE
Ocean Pines Waste Water Treatment Plant, Ocean Pines, MD
Residences of Riverplace Apartments, Seaford, DE
Hyatt Place Hotel, Ocean City, MD
Downtown Bridal Shop, Salisbury, MD
NASA Flight Facility, Wallops Island, VA
Cambria Hotel, Ocean City, MD
The Ross Student Housing, Salisbury, MD
Wicomico County Public Safety Building, Salisbury, MD

...

None – all work is subbed out
PAGE 3

TBD

...

\$60 Million

...

\$13 Million

...

\$29 Million

...

24 \$34,831,779

...

Yes

...

None

...

Yes

§ C.4.3 Does your commercial general liability policy contain any exclusions or restrictions of coverage that are prohibited in AIA Document A101-2017, Exhibit A, Insurance ~~A.3.2.2.2~~ A.3.2.2.3? If so, identify.

No

PAGE 4

Yes

...

Liberty Mutual Surety

...

Hampton Roads Bonding
1080 Laskin Road, Suite 204
Virginia Beach, VA 23451
Contact: Mark Bundy (757) 491-1102

...

\$40 million single projects / \$75 million aggregate

...

\$35 Million



AIA[®] Document A305[®] – 2020 Exhibit D

Contractor's Past Project Experience

	1	2	3	4
PROJECT NAME	Ocean Pines Waste Water Treatment Plant	Cape Henlopen School District Band & Chir Renovation	Ocean City Transit Facility 65 th Street	Cambria Hotel
PROJECT LOCATION	Ocean Pines, MD	Lewes, DE	Ocean City, MD	Ocean City, MD
PROJECT TYPE	Commercial	Commercial	Commercial	Commercial
OWNER	County Commissioners of Worcester County	Cape Henlopen School District	Town of Ocean City	Ocean I Hospitality, LLC
ARCHITECT	GMB Architects	Buck Simperts Architect & Associates	WRA LLP	Fisher Architecture
CONTRACTOR'S PROJECT EXECUTIVE	Randy Swift, VP	Randy Swift, VP	Randy Swift, VP	Randy Swift, VP
KEY PERSONNEL (include titles)	Randy Swift, VP Chris Manning, PM Jacob Lemon, APM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Jacob Lemon, APM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Jacob Lemon, APM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Jacob Lemon, APM Fawn Milbourne, PC
PROJECT DETAILS	Contract Amount \$949,700 Completion Date 1/24/22 % Self-Performed Work 100%	Contract Amount \$696,348 Completion Date 10/22/21 % Self-Performed Work 100%	Contract Amount \$25,186,970 Completion Date 1/17/21 % Self-Performed Work 100%	Contract Amount Completion Date % Self-Performed Work 100%
PROJECT DELIVERY METHOD	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction
SUSTAINABILITY CERTIFICATIONS				



AIA® Document A305® – 2020 Exhibit E

Contractor's Past Project Experience, Continued

	1	2	3	4
PROJECT NAME	Residences @ Riverplace Apartments	NASA	Ocean City Parking Lot & Guard Booth	Wicomico County Public Safety Building
PROJECT LOCATION	Seaford, DE	Wallops Island, VA	Ocean City, MD	Salisbury, MD
PROJECT TYPE	Commercial	Commercial LEED Silver	Commercial	Municipal - Public Safety
OWNER	The Residences at Riverplace	NASA/GFF/WFC, Wallops Island, VA	Town of Ocean city	Wicomico County
ARCHITECT	WRA LLP	GMB Architects	WRA LLP	MW Studios
CONTRACTOR'S PROJECT EXECUTIVE	Randy Swift, VP	Randy Swift, VP	Randy Swift, VP	Chris Manning, VP
KEY PERSONNEL (include titles)	Randy Swift, VP Chris Manning, PM Jacob Lemon, PM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Jacob Lemon, PM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Jacob Lemon, PM Fawn Milbourne, PC	Randy Swift, VP Chris Manning, PM Phil Pierson, PM/PS Amanda Everhart, PC
PROJECT DETAILS	Contract Amount \$6,360,000 Completion Date 1/31/20 % Self-Performed Work 100%	Contract Amount \$5,594,061 Completion Date 10/26/17 % Self-Performed Work 100%	Contract Amount 1,060,371 Completion Date 6/6/19 % Self-Performed Work 100%	Contract Amount \$33,371,386 Completion Date 9/24/24 % Self-Performed Work 100%
PROJECT DELIVERY METHOD	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input checked="" type="checkbox"/> Other: General Construction	<input checked="" type="checkbox"/> Design-bid-build <input type="checkbox"/> Design-build <input type="checkbox"/> CM constructor <input type="checkbox"/> CM advisor <input type="checkbox"/> Other: General Construction
SUSTAINABILITY CERTIFICATIONS				

Log of Work-Related Injuries and Illnesses

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

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name HARKIN Contracting
 City Salisbury State MD

Identify the person		Describe the case				Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Remained at Work				Away from work	On job transfer or restriction	(M)					
						Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	(K)	(L)	Injury (1)	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
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no

injury

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

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Injury	Skin disorder	Respiratory condition	Poisoning	Hearing loss	All other illnesses
(1)	(2)	(3)	(4)	(5)	(6)

Log of Work-Related Injuries and Illnesses

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

Year 2002



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

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name HARKINS Contracting
City SALISBURY State MD

Identify the person		Describe the case				Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Remained at Work				Away from work (K)	On job transfer or restriction (L)	(M)					
			month/day			Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	_____ days	_____ days	Injury (1)	Skin disease (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
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Log of Work-Related Injuries and Illnesses

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

Year 2023



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

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name HARKINS CONTRACTING
City SALISBURY State MD

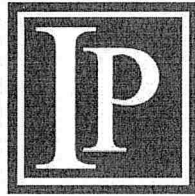
Identify the person		Describe the case			Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:						
(A) Case no.	(B) Employee's name	(C) Job title <i>(e.g., Welder)</i>	(D) Date of injury or onset of illness	(E) Where the event occurred <i>(e.g., Loading dock north end)</i>	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill <i>(e.g., Second degree burns on right forearm from acetylene torch)</i>	CHECK ONLY ONE box for each case based on the most serious outcome for that case:				Away from work	On job transfer or restriction	(M)					
			month/day			Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	(K)	(L)	Injury (1)	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
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Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

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

Page of

Injury	Skin disorder	Respiratory condition	Poisoning	Hearing loss	All other illnesses
(1)	(2)	(3)	(4)	(5)	(6)



**Insurance
Partners, LLC**

January 16, 2025

Harkins Contracting, Inc.
31400 Winterplace Pkwy., #400
Salisbury, MD 21804-2014

Re: Worker's Compensation
Q85-0400755
01/04/25 to 01/04/26

To Whom it may Concern:

This letter is to verify that the above referenced insured had the following experience modifications for the last 3 years:

2025 - .99
2024 - .99
2023 - .99

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

Thank you.

Sincerely,

Linda White

Linda White
lwhite@insurancepartnersllc.com
443-841-1622



Marsh McLennan Agency
1080 Laskin Road | Suite 204
Virginia Beach | VA 23451
T +1 757 491 1100 | F +1 757 491 3134
www.MarshMMA.com

January 17, 2025

The Town of Dewey Beach
105 Rodney Avenue
Dewey Beach, DE 19971

Re: Harkins Contracting, Inc.
New Construction for: Dewey Beach Town Hall & Police
GMB File #220242.A

To Whom It May Concern:

Hampton Roads Bonding has the privilege of providing surety bonds for Harkins Contracting, Inc. This account is written through Liberty Mutual Insurance Company. Liberty Mutual has an A.M. Best rating of A with a financial size category of XV and is listed in U.S. Treasury Circular 570.

During our relationship, we have observed their outstanding performance and consider them among our most valued surety clients. The current bond program is for single jobs up to \$40,000,000 with \$75,000,000 aggregate. There is approximately \$35,000,000 currently available. It should be understood if this fine firm needed bonds that exceed these limits the bonding company would certainly consider such a request based on their past experience. However, please note bond approval is based on the financial condition of the firm at the time of the bond request.

We appreciate having the opportunity to share with you our experience with this fine company and urge you to give them every consideration.

Regards,

Terri K. Strawhand

 **AIA[®] Document A310[™] – 1970**

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we
(Here insert full name and address or legal title of Contractor)

Harkins Contracting, Inc.
31400 Winterplace Parkway, Suite 400
Salisbury, MD 21804

as Principal, hereinafter called the Principal, and
(Here insert full name and address or legal title of Surety)

Liberty Mutual Insurance Company
175 Berkeley Street
Boston, MA 02116

a corporation duly organized under the laws of the State of **Massachusetts**
as Surety, hereinafter called the Surety, are held and firmly bound unto
(Here insert full name and address or legal title of Owner)

The Town of Dewey Beach
105 Rodney Avenue, Dewey Beach, DE 19971

as Obligee, hereinafter called the Obligee, in the sum of **-Ten-Percent-of-Amount-Bid----**
_____ Dollars (\$ **10%-of-Bid** _____), for the payment
of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors,
administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid for
(Here insert full name, address and description of project)
New Construction for Dewey Beach Town Hall & Police
GMB File #220242.A

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Obligee 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.

Signed and sealed this **17th** day of **January** 20 **25**

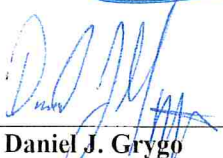


(Witness)

Harkins Contracting, Inc.

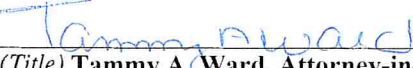
(Principal)  (Seal)

(Title)



(Witness) **Daniel J. Grygo**

Liberty Mutual Insurance Company

(Surety)


(Title) **Tammy A. Ward, Attorney-in-Fact** (Seal)

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.



POWER OF ATTORNEY

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

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 Tammy A. Ward all of the city of Virginia Beach, state of VA its true and lawful attorney-in-fact, with full power and authority hereby conferred to sign, execute and acknowledge the following surety bonds, undertakings, recognizances, contracts of indemnity, and all other surety obligations related thereto, the execution of which shall be binding upon the Companies as if it had been duly signed and executed by its own officers:

Principal Name: Harkins Contracting, Inc.
Obligee Name: The Town of Dewey Beach
Surety Bond Number: Bid Bond

Bond Amount: See Bond Form

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 9th day of September, 2024.



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

By: [Signature]
Nathan J. Zangerle, Assistant Secretary

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 9th day of September, 2024, 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, 2025
Commission number 1126044
Member, Pennsylvania Association of Notaries

By: [Signature]
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, of Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company do hereby certify that this 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 17th day of January, 2025.



By: [Signature]
Renee C. Llewellyn, Assistant Secretary

STATE OF DELAWARE

Department of Finance Division of Revenue

ACTIVE BUSINESS LICENSE
2010102844

EFFECTIVE

01/01/2025 - 12/31/2025

ISSUED TO

HARKINS CONTRACTING INC
31400 WINTERPLACE PKWY STE 400
SALISBURY MD 21804-2014

LOCATION

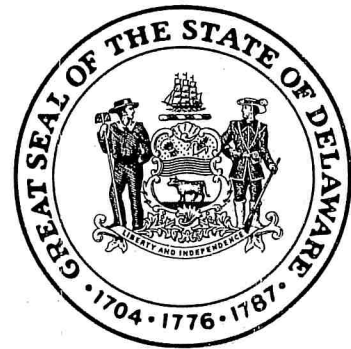
HARKINS CONTRACTING INC
31400 WINTERPLACE PKWY STE 400
SALISBURY, MD 21804-2014

TRADE, BUSINESS OR
PROFESSIONAL ACTIVITY

NON-RESIDENT CONTRACTOR

ISSUED: 12/18/2024
FEE PAID: \$75.00

Is hereby licensed to practice, conduct, or engage in the
occupation or business activity indicated above in
accordance with the license application duly filed
pursuant to Title 30, Delaware Code.



2025

POST CONSPICUOUSLY - NOT TRANSFERABLE



Certificate Number:

DE-2021-000001799

Valid for both Private and Public Work



Registration Date:

07/29/2021

Expiration Date:

07/29/2025

State of Delaware

Department of Labor

Office of Contractor Registration

Delaware Contractor Registration Act

Pursuant to 82 Del. Laws, c. 291, § 2; §3604. Registration required [Effective upon fulfillment of 82 Del. Laws, c. 168, § 6, as amended by 82 Del. Laws, c. 291, § 2] of the Contractor Registration Act. This certificate is required under this chapter before performing construction services or maintenance.

HARKINS CONTRACTING INC

Valid for both Private and Public Work

Responsible Representative(s)

David J. Harkins

Non Transferable

*This Certificate may not be transferred or assigned
and may be suspended or revoked by the
Secretary of the Delaware Department of Labor*

Karryl D. Hubbard

Secretary of the Delaware Department of Labor

**Town of Dewey Beach
Business License Application**
License Year May 1, 2024 – April 30, 2025

Every entity doing business in Dewey Beach must complete and return this form by April 30th if an ongoing business, or prior to start of business if new to Dewey Beach. The penalty for conducting business in Dewey Beach without a Town Business License is a late fee of 10% of the fee owed, plus a fine of \$500.00, in addition to the cost of the appropriate Business License.

Fee Schedule

For Businesses Outside of Dewey Beach

- Small Out-of-Town Business (business location is outside of town limits; 4 or less employees): \$143
- Large Out-of-Town Business (business location is outside of town limits; 5 or more employees): \$503

For Businesses Within Town Limits of Dewey Beach

- Small In-Town Business (4 or less employees), other than listed in numbers below: \$359
- Large In-Town Business (5 or more employees), other than listed in numbers below: \$503
 - Motel/Hotel: \$503.00 base fee, plus \$29.00 per room
 - Convention Center: \$2,872.00

Your application will not be accepted without payment. Make checks payable to The Town of Dewey Beach. Complete this form and payment online at www.townofdeweybeach.com.

Business Name <i>Harkins Contracting Inc.</i>		Applicant Full Name <i>Christopher Manning</i>		
Business Location Address <i>31400 Winterplace Pkwy 400</i>		City <i>Salisbury</i>	State <i>MD</i>	Zip <i>21801</i>
Business Mailing Address (if different from above)		City	State	Zip
Phone Number (Business)	Phone Number (Cell)	Email <i>Cmanning@harkinscontracting.com</i>		
If Applicable, List Any and All Corporate Entities				
State of Incorporation	State Business License No.	Tax ID No.	Upload Insurance and State License Document	

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Select Business Type

<input type="checkbox"/> Motel or Hotel Located in Dewey Beach	Number of Rooms: Total Due:
<input type="checkbox"/> Convention Center Located in Dewey Beach	Total Due:
<input type="checkbox"/> In-Town Business Not Listed Above	Number of Employees: Type of Service Provided: Total Due:
<input checked="" type="checkbox"/> Out-of-Town Business Not Listed Above	Number of Employees: <i>12</i> Type of Service Provided: <i>Construction General Contractor</i> Total Due: <i>503.00</i>

I hereby agree to abide by the Dewey Beach Code as it relates to the operation of my business. All information provided above is true and correct to the best of my knowledge.

Signature: *[Signature]* Date: *1/16/25*

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