BILL NO. S-20-10-36

SPECIAL ORDINANCE NO. S-_____

AN ORDINANCE approving the awarding of QUEST BID #7311399 - PROMENADE PARK RESTROOM PROJECT - $318,900.00 by the City of Fort Wayne, Indiana, by and through its Department of Purchasing and MOSAIC BUILDING SOLUTIONS, INC. for the PARKS AND RECREATION DEPARTMENT.

NOW, THEREFORE, BE IT ORDAINED BY THE COMMON COUNCIL OF THE CITY OF FORT WAYNE, INDIANA;

SECTION 1. That QUEST BID #7311399 - PROMENADE PARK RESTROOM PROJECT between the City of Fort Wayne, by and through its Department of Purchasing and MOSAIC BUILDING SOLUTIONS, INC. for the PARKS AND RECREATION DEPARTMENT, respectfully for:

> All labor, insurance, material, equipment, tools, power, transportation, miscellaneous equipment, etc., necessary for:
> construction of a new 230 s.f. restroom facility located on the north side of Promenade Park, just north of the existing playground site;

involving a total cost of THREE HUNDRED EIGHTEEN THOUSAND NINE HUNDRED AND 00/100 DOLLARS - ($318,900.00) all as more particularly set forth in said QUEST BID #7311399 - PROMENADE PARK RESTROOM PROJECT - $318,900.00 which is on file in the Office of the Department of Purchasing, and is by reference incorporated herein, made a part hereof, and is hereby in all things ratified, confirmed and approved.

SECTION 2. That this Ordinance shall be in full force and effect from and after its passage and any and all necessary approval by the Mayor.

_____
Council Member

APPROVED AS TO FORM AND LEGALITY

_____
Carol Helton, City Attorney

Bid Tabulation

Project Name: Promenade Park Restroom Building Construction
Project No.: Q0114-2020-1014
Quest #: 7311399

CONTRACTOR:	Mosaic Building Solutions	Schenkel Construction Indiana	Hamilton Hunter Builders, Inc.	C3 Construction Services, LLC	Strebig Construction, Inc.
Base bid:	$318,900.00	$324,850.00	$335,320.00	$367,705.00	$389,107.00
Alternate 1, Delete Graffiti Resistant Coating	-$4,050.00	-$3,900.00	-$3,850.00	-$6,200.00	-$11,180.00
Total Bid with Alt 1	$314,850.00	$320,950.00	$331,470.00	$361,505.00	$389,107.00

COUNCIL DIGEST SHEET

Enclosed with this introduction form is a tab sheet and related material from the vendor(s) who submitted bid(s). Purchasing Department is providing this information to Council as an overview of this award.

RFPs & BIDS

Quest Bid #	7311399
Awarded To	Mosaic Building Solutions, Inc.
Amount	$318,900.00
Conflict of interest on file?	X Yes ☐ No
Number of Registrants	6
Number of Bidders	5
Required Attachments	Bids – attach Tab Sheet

EXTENSIONS

Date Last Bid Out	October 8, 2020
# Extensions Granted To Date	0

SPECIAL PROCUREMENT

Contract #/ID *(State, Federal, Piggyback--Authority)*	n/a
Sole Source/ Compatibility Justification	

BID CRITERIA *(Take Buy Indiana requirements into consideration.)*

Most Responsible, Responsive Lowest	X Yes ☐ No *If no, explain below*
If not lowest, explain	

COUNCIL DIGEST SHEET

COST COMPARISON

Increase/decrease amount from prior years For annual purchase (if available).	n/a

DESCRIPTION OF PROJECT / NEED

Identify need for project & describe project; attach supporting documents as necessary.	This project includes the construction of a new 230 s.f. public restroom facility at Promenade Park. The building will be located just north of the existing playground.

REQUEST FOR PRIOR APPROVAL

Provide justification if prior approval is being requested.	n/a

FUNDING SOURCE

Account Information.	Funding source is Legacy Funds.

SECTION 00 4113 - BID FORM - STIPULATED SUM (SINGLE-PRIME CONTRACT)

1.1 BID INFORMATION

A. Bidder: Mosaic Building Solutions, LLC

B. Bidder Representative: Tracey Bade

C. Bidder Address: 709 Clay St Ste 200, Fort Wayne, IN, 46802

D. Bidder Phone Number: 260-498-7672

E. Bidder Email Address: tbade@mosaic-building.com

F. Project Name: **New Restroom Building**

G. Project Location: **Promenade Park**
Fort Wayne, IN 46802

H. Bid Due: **Thursday, October 8, 2020 – 11:00 a.m.**
City of Fort Wayne Purchasing Office
Citizens Square, 200 East Berry St., Suite 490, Fort Wayne, IN 46802

I. Owner: Board of Park Commissioners, City of Fort Wayne, Indiana

J. Owner Project Number: #220037

K. Purchasing ITB/RFQ Number: NA

1.2 CERTIFICATIONS AND BASE BID

A. Base Bid (Single-Prime Contract): The undersigned Bidder, having carefully examined the Procurement and Contracting Requirements, Conditions of the Contract, Drawings, Specifications, and all subsequent Addenda, as prepared by Owner and its consultants, having visited the site, and being familiar with all conditions and requirements of the Work, hereby agrees to furnish all material, labor, equipment and services, including all scheduled allowances, necessary to complete the construction of the above-named project, according to the requirements of the Procurement and Contracting Documents, for the stipulated sum of:

BASE BID ($20,000 contingency allowance included): $ 318,900.00

BASE BID IN WORDS: Three hundred eighteen thousand nine hundred and 00/100 DOLLARS

ALTERNATE #1: $ 4,050.00 DEDUCT

ALTERNATE #1 IN WORDS: Four thousand fifty and 00/100----------~~DOLLARS~~

The undersigned hereby certifies that all wages paid under this project will meet or exceed the Federal Minimum Wage.

Signature 10/08/2020 **Date**

1.3 TIME OF COMPLETION

A. The undersigned Bidder proposes and agrees hereby to commence the Work of the Contract Documents on a date specified in a written Notice of Award to be issued by Owner, and shall fully complete the Work as required by Contract Documents.

1.4 ACKNOWLEDGMENT OF ADDENDA

A. The undersigned Bidder acknowledges receipt of and use of the following Addenda in the preparation of this Bid:

1. Addendum No. 1, dated 09/22/2020.
2. Addendum No. 2, dated 10/05/2020.
3. Addendum No. 3, dated _____.
4. Addendum No. 4, dated _____.

1.5 CONTRACTOR'S LICENSE

A. The undersigned further states that it is a duly licensed contractor, for the type of work proposed, in City of Fort Wayne, Allen County, State of Indiana and that all fees, permits, etc., pursuant to submitting this proposal have been paid in full.

SUBMITTER

Company: Mosaic Building Solutions, LLC

Representative: Tracey Bade

Initials	Required Bid Forms Verification		Date Filed
TAB	Bid Form	☐	10/08/20
TAB	Bid Bond	☐	10/08/20
TAB	Affirmative Action Program – Non-segregated Facilities	☐	04/17/20
TAB	Certificate in Lieu of Financial Statement	☐	10/08/20
TAB	Emerging Business Enterprise (EBE) Declaration Form	☐	10/08/20
TAB	Form 96, Part I - Signed & Notarized	☐	10/08/20
TAB	Form 96, Part II - Signed & Notarized	☐	10/08/20
TAB	Section I, Public Works Experience	☐	10/08/20
TAB	Section II, Work Plan Questionnaire	☐	10/08/20
TAB	Section III, Contractor Financial Statement	☐	10/08/20
TAB	Section IV, Current Contractual Obligations	☐	10/08/20
TAB	Indiana Contractor Certification (projects over $300,000)	☐	10/08/20
TAB	Conflict of Interests Form	☐	10/08/20
TAB	Drug Policy Acknowledgement Form	☐	10/08/20
TAB	E-Verify Form	☐	10/08/20
TAB	Non-Collusion Affidavit	☐	10/08/20
	Performance and Payment Bond (file at time of award)	☐	
TAB	List of Subcontractors and Suppliers	☐	10/08/20
	Affidavit and Waiver of Lien (file at time of invoice)	☐	
	Schedule of Values	☐	Upon Award
TAB	Estimated Construction Schedule	☐	10/08/20

The undersigned hereby certifies the above required forms have been fully completed and properly submitted with this bid, and/or are already on file with the City of Fort Wayne.

Signature _____ Date 10/08/2020

END OF DOCUMENT 00 4113

CHUBB

Surety
202B Halls Mill Road, PO Box 1650
Whitehouse Station, NJ 08889-1650

O + 908.903.3485
F + 908.903.3656

Federal Insurance Company

AIA Document A310™ - 2010 Bid Bond

82151957 D

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

CONTRACTOR
(Name, legal status and address):
Mosaic Building Solutions
709 Clay Street Ste. 200
Fort Wayne, IN. 46802

OWNER
(Name, legal status and address):
Fort Wayne Parks and Recreation
705 E. State Blvd.
Fort Wayne, IN. 46805

BOND AMOUNT
5% of the Bid Amount

SURETY
(Name, legal status and principal place of business):
Federal Insurance Company
202B Halls Mill Rd., PO Box 1650
Whitehouse Station, NJ 08889-1650

PROJECT
(Name, location or address, and Project number, if any)
Promenade Park - New Restroom building Project #220037

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 here from 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 8th day of October 2020

Tracey Bade
(Witness)

Mosaic Building Solutions
(Principal)

(Title) Jake Fetters - President

(Corporate Seal)

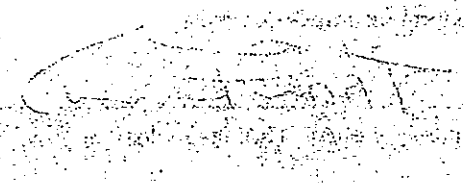
Federal Insurance Company

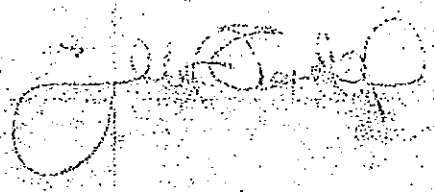
(Witness)

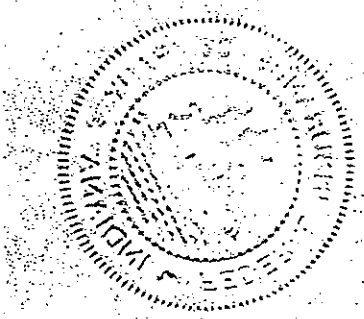
(Attorney-in-Fact) Thomas Fields

(Corporate Seal)

*Printed in cooperation with the American Institute of Architects (AIA) by Chubb. The language in this document conforms to the language used in **AIA Document A310 ™ - 2010.***







CHUBB

Power of Attorney

Federal Insurance Company | Vigilant Insurance Company | Pacific Indemnity Company
Westchester Fire Insurance Company | ACE American Insurance Company

Know All by These Presents, that **FEDERAL INSURANCE COMPANY**, an Indiana corporation, **VIGILANT INSURANCE COMPANY**, a New York corporation, **PACIFIC INDEMNITY COMPANY**, a Wisconsin corporation, **WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** corporations of the Commonwealth of Pennsylvania, do each hereby constitute and appoint Thomas Fields, Donald Hoch, Ryan Hoch, Melissa Markey and Jolene Stalling of Fort Wayne, Indiana ----------

each as their true and lawful Attorney-in-Fact to execute under such designation in their names and to affix their corporate seals to and deliver for and on their behalf as surety thereon or otherwise, bonds and undertakings and other writings obligatory in the nature thereof (other than bail bonds) given or executed in the course of business, and any instruments amending or altering the same, and consents to the modification or alteration of any instrument referred to in said bonds or obligations.

In Witness Whereof, said **FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY** and **ACE AMERICAN INSURANCE COMPANY** have each executed and attested these presents and affixed their corporate seals on this 3rd day of **January, 2020.**

Dawn M. Chloros, Assistant Secretary

Stephen M. Haney, Vice President

STATE OF NEW JERSEY
County of Hunterdon ss.

On this 3rd day of **January, 2020** before me, a Notary Public of New Jersey, personally came Dawn M. Chloros and Stephen M. Haney, to me known to be Assistant Secretary and Vice President, respectively, of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY, the companies which executed the foregoing Power of Attorney, and the said Dawn M. Chloros and Stephen M. Haney, being by me duly sworn, severally and each for herself and himself did depose and say that they are Assistant Secretary and Vice President, respectively, of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY and know the corporate seals thereof, that the seals affixed to the foregoing Power of Attorney are such corporate seals and were thereto affixed by authority of said Companies; and that their signatures as such officers were duly affixed and subscribed by like authority.

Notarial Seal

KATHERINE J. ADELAAR
NOTARY PUBLIC OF NEW JERSEY
No. 2316685
Commission Expires July 16, 2024

Notary Public

CERTIFICATION

Resolutions adopted by the Boards of Directors of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, and PACIFIC INDEMNITY COMPANY on August 30, 2016; WESTCHESTER FIRE INSURANCE COMPANY on December 11, 2006; and ACE AMERICAN INSURANCE COMPANY on March 20, 2009:

"RESOLVED, that the following authorizations relate to the execution, for and on behalf of the Company, of bonds, undertakings, recognizances, contracts and other written commitments of the Company entered into in the ordinary course of business (each a "Written Commitment"):

(1) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise.

(2) Each duly appointed attorney-in-fact of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise, to the extent that such action is authorized by the grant of powers provided for in such person's written appointment as such attorney-in-fact.

(3) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to appoint in writing any person the attorney-in-fact of the Company with full power and authority to execute, for and on behalf of the Company, under the seal of the Company or otherwise, such Written Commitments of the Company as may be specified in such written appointment, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.

(4) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to delegate in writing to any other officer of the Company the authority to execute, for and on behalf of the Company, under the Company's seal or otherwise, such Written Commitments of the Company as are specified in such written delegation, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.

(5) The signature of any officer or other person executing any Written Commitment or appointment or delegation pursuant to this Resolution, and the seal of the Company, may be affixed by facsimile on such Written Commitment or written appointment or delegation.

FURTHER RESOLVED, that the foregoing Resolution shall not be deemed to be an exclusive statement of the powers and authority of officers, employees and other persons to act for and on behalf of the Company, and such Resolution shall not limit or otherwise affect the exercise of any such power or authority otherwise validly granted or vested."

I, Dawn M. Chloros, Assistant Secretary of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY (the "Companies") do hereby certify that

(I) the foregoing Resolutions adopted by the Board of Directors of the Companies are true, correct and in full force and effect,
(II) the foregoing Power of Attorney is true, correct and in full force and effect.

Given under my hand and seals of said Companies at Whitehouse Station, NJ, this 8th Day of October 2020

Dawn M. Chloros, Assistant Secretary

IN THE EVENT YOU WISH TO VERIFY THE AUTHENTICITY OF THIS BOND OR NOTIFY US OF ANY OTHER MATTER, PLEASE CONTACT US AT:
Telephone (908) 903-3493 Fax (908) 903-3656 e-mail: surety@chubb.com

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/01/2020

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	Hoch Insurance Agency Inc 209 E. Washington Center Road Fort Wayne, IN 46825
CONTACT NAME:	Tom Fields
PHONE (A/C, No, Ext):	(260)471-7555
FAX (A/C, No):	(260)471-8550
E-MAIL ADDRESS:	jstalling@hochinsurance.com
INSURED	Mosaic Building Solutions 709 Clay Street Suite 200 Fort Wayne, IN 46802

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Selective Insurance Company of America	12572
INSURER B: SELECTIVE INS CO OF SC	19259
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	☑ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☑ OCCUR	Y		S2411819	06/15/2020	06/15/2021	EACH OCCURRENCE	$	1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$	500,000
							MED EXP (Any one person)	$	15,000
							PERSONAL & ADV INJURY	$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:						GENERAL AGGREGATE	$	2,000,000
							PRODUCTS - COMP/OP AGG	$	2,000,000
								$	
A	AUTOMOBILE LIABILITY ☑ ANY AUTO ☐ OWNED AUTOS ONLY ☑ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☑ NON-OWNED AUTOS ONLY	Y		S2411819	06/15/2020	06/15/2021	COMBINED SINGLE LIMIT (Ea accident)	$	1,000,000
							BODILY INJURY (Per person)	$	
							BODILY INJURY (Per accident)	$	
							PROPERTY DAMAGE (Per accident)	$	
								$	
A	☑ UMBRELLA LIAB ☑ OCCUR EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☑ RETENTION $ 0			S2411819	06/15/2020	06/15/2021	EACH OCCURRENCE	$	5,000,000
							AGGREGATE	$	5,000,000
								$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N N/A If yes, describe under DESCRIPTION OF OPERATIONS below			WC9086244	06/15/2020	06/15/2021	☑ PER STATUTE ☐ OTH-ER		
							E.L. EACH ACCIDENT	$	1,000,000
							E.L. DISEASE - EA EMPLOYEE	$	1,000,000
							E.L. DISEASE - POLICY LIMIT	$	1,000,000

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

Project- Promenade Park- New Restroom Building
Location- Promenade Park, Downtown Fort Wayne, IN 46802
The City of Fort Wayne listed as additional insured for General Liability and Automobile Liability.
The City of Fort Wayne will receive written notice of 30 days prior to cancellation, change or a material change in the policy and a 10 days notice for non payment.

CERTIFICATE HOLDER

Fort Wayne Parks & Recreation
705 E State Blvd
Fort Wayne, IN 46805

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

Jolene Stalling

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/01/2020

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PRODUCER	Hoch Insurance Agency Inc 209 E. Washington Center Road Fort Wayne, IN 46825	CONTACT NAME: Tom Fields PHONE (A/C, No, Ext): (260)471-7555 FAX (A/C, No): (260)471-8550 E-MAIL ADDRESS: jstalling@hochinsurance.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A : Selective Insurance Company of America	12572
INSURED	Mosaic Building Solutions 709 Clay Street Suite 200 Fort Wayne, IN 46802	INSURER B : SELECTIVE INS CO OF SC	19259
		INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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A	☑ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☑ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:	Y		S2411819	06/15/2020	06/15/2021	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 500,000 $ 15,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
A	AUTOMOBILE LIABILITY ☑ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☑ HIRED AUTOS ONLY ☑ NON-OWNED AUTOS ONLY	Y		S2411819	06/15/2020	06/15/2021	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
A	☑ UMBRELLA LIAB ☑ OCCUR EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☑ RETENTION $ 0			S2411819	06/15/2020	06/15/2021	EACH OCCURRENCE AGGREGATE	$ 5,000,000 $ 5,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC9086244	06/15/2020	06/15/2021	☑ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000

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

Project- Promenade Park- New Restroom Building Project:# 22037
Location- Promenade Park, Downtown Fort Wayne, IN 46802
The City of Fort Wayne listed as additional insured for General Liability and Automobile Liability.
The City of Fort Wayne will receive written notice of 30 days prior to cancellation, change or a material change in the policy and a 10 days notice for non payment.

CERTIFICATE HOLDER

Fort Wayne Parks & Recreation
705 E State Blvd
Fort Wayne, IN 46805

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

Jolene Stalling

PLEASE SEE LAST PAGE - LETTER FROM CITY OF FORT WAYNE

CITY OF FORT WAYNE
AFFIRMATIVE ACTION PROGRAM

This Document may be completed electronically at the following website address
https://tinyurl.com/COFWAffirmativeAction

NAME OF COMPANY _____

ADDRESS _____ CITY, ZIP CODE _____

E-MAIL ADDRESS _____ PHONE #_____

FAX # _____

Identify by title and name the highest official within the facility who has the overall responsibility for the implementation of the Equal Employment Opportunity and Affirmative Action Program.

_____ _____
Name: (please print) Title:

_____ _____
Date: Signature:

1. Does your firm have a written Affirmative Action Program? _____ Yes _____ No

   A. **If so**, and it contains answers to the questions asked in this program, attach a copy and sign the Written Statement of Company Policy.

   B. **If not**, do you accept the following program in meeting the requirements of the City of Fort Wayne? _____ Yes _____ No

PLEASE KEEP IN MIND THAT FAILURE TO COMPLETE ALL SECTIONS OF THIS DOCUMENT WILL RESULT IN YOUR PROGRAM BEING REJECTED.

2. Will your firm make every effort to increase employment of minorities at all levels of its workforce with particular emphasis to categories where few, if any, minority people are employed? _____ Yes _____ No

3. Current number of employees _____

   Number of employees in **January of this Year** _____

4. If total minority employment is less than 20% give reasons why. (Do not include Females when you figure minority employment percentages.)

   _____
   _____
   _____
   _____

5. List minority recruitment sources below:

Agency	Contact Person	Date

6. Does this company anticipate an increase in employment this year? ____Yes ____No

   Approximately how many? _____

7. What specific goals can you achieve for the employment of minorities in the following labor classifications during 2013:

   A. Officials and Managers _____%
   B. Professionals _____%
   C. Technicians _____%
   D. Sales _____%
   E. Office and Clerical _____%
   F. Skilled Craftsman _____%

G. Other _____%

8. **WRITTEN STATEMENT OF COMPANY POLICY**

It is the policy of _____ that Equal Employment Opportunity is afforded to all qualified persons without regard to race, sex, religion, color, national origin, disability, age or veteran status.

In support of this policy, _____ will not discriminate against any employee or applicant for employment because of race, religion, sex, national origin, sex, age, disability or veteran status.

The _____will take affirmative action to insure that applicants are employed and that employees are treated during employment without regard to their race, religion, color, sex, national origin, disability, age or veteran status. Such action will include but not be limited to: Recruitment, advertising or solicitation for employment hiring, placement, upgrading transfer or demotion, selection for training including apprenticeship rates of pay or other forms of compensation, layoffs or termination.

_____ _____
Name of Company or Firm Date

_____
Signature of Highest Company Official

_____
Name and Title of Signer

Please type or print

STATISTICAL INFORMATION FOR AFFIRMATIVE ACTION / VENDOR COMPLIANCE

Name of Contractor or Supplier

(Information Given By)

Address and Telephone Number

Person Filling Out This Form and Data

EEOC CATAGORY	EMPLOYEES BY RACE/ETHNICITY/SEX									DISABLED EMPLOYEES									TOTAL EMPLOYEES
	W		BLK		H		OTHER			W		BLK		H		OTHER			
	M	F	M	F	M	F	M	F	(Designate)	M	F	M	F	M	F	M	F	(Designate)	
1. OFFICIAL & ADMINISTRATORS																			
2. PROFESSIONALS																			
3. TECHNICIANS																			
4. OPERATIVES																			
5. LABORER																			
6. OFFICE AND CLERICAL																			
7. SKILLED CRAFT WORKERS																			
8. SERVICE - MAINTENANCE WORKERS																			
9. SALES WORKERS																			
TOTALS																			
PERCENTAGES																			

CERTIFICATION OF NON-SEGREGATED FACILITIES

Each Bidder is required to file a fully executed Certificate of Non-Segregated Facilities once a year.

The bidder certifies further that he will not maintain or provide for his employees any segregated facilities at any of his establishments and he will not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The Bidder agrees that a breach of this certification will be a violation of the Equal Opportunity clause in any contract resulting from acceptance of this bid. As used in this certification, the term "segregated facilities" means any waiting room, work area, restrooms and washrooms, restaurant or dress areas, parking lots, drinking fountains, recreation or entertainment areas, transportation and housing facilities provided for employees which are segregated by explicit directive or are in fact segregated on the basis of race, color, religion, national origin, sex, age, disability or veteran status because of habit, local custom, or otherwise. The Bidder agrees that (except where the Bidder has obtained identical certification from proposed subcontractors for specific time periods) he will obtain identical certification from proposed subcontractors prior to the award of subcontracts exceeding $10,000 which are not exempt from the provisions of the Equal Opportunity clause and that he will retain such certification in his files.

Note: THE PENALTY FOR MAKING FALSE STATEMENTS IN OFFERS IS PRESCRIBED IN 18 U.S.C. 1001.

Date: _____, _____
month, day year

_____
Name of Bidder

By: _____

Title: _____
Official Address & Zip Code

END OF SECTION 004581

CITY OF FORT WAYNE

THOMAS C. HENRY, MAYOR

April 14, 2020

Jacob Fetters
Mosaic Building Solutions, LLC
709 Clay Street, Suite 200
Fort Wayne, IN 46802

Subject: **City of Fort Wayne Affirmative Action Program**

Dear Mr. Fetters:

This letter is to notify you that your Affirmative Action Application has been received by the City of Fort Wayne's Vendor Compliance Office. Equal Employment Opportunity and Affirmative Action are very important to the City of Fort Wayne and to the people of our community.

We look forward to assisting you in reaching our mutual goals. Your application will be in effect for **one** year and the expiration date is **March 26, 2021**.

If you have any questions or concerns, please contact our office at (260) 427-2445.

Sincerely,

Jessica Bucher
Compliance Officer

CERTIFICATE IN LIEU OF FINANCIAL STATEMENT

I, Jacob S Fetters, the President
Name

_____, of Mosaic Building Solutions, LLC
Position Company

HEREBY CERTIFY THAT:

1. The Financial Statement of said Company, dated the 18th day of May, 20 20, now on file in the office of Parks and Recreation Department of Fort Wayne, Indiana, made a part hereof, is a true and correct statement, and, accurately reflects the financial condition of said Company, as of the date hereof; and,

2. I am familiar with the books of said Company, showing its financial condition and am authorized to make this certificate on its belief.

DATE: 10/08/2020

Signatory

Jacob S Fetters
Printed Name of Signatory

ACKNOWLEDGED

SUBSCRIBED AND SWORN to before me, a Notary Public, in and for said County and State, this 8th day of October, 2020.

NOTARY PUBLIC

Amanda L Leffler
Notary Public Printed Name

A Resident of Allen County.
My Commission Expires 10/18/2023

Amanda L. Leffler
Notary Public - State of Indiana
County of Residence: Allen
My Commission Exp. Oct. 18, 2023

END OF SECTION 004582

EMERGING BUSINESS ENTERPRISE (E.B.E.) DECLARATION FORM

(For Federal Projects, this is an MBE/WBE Declaration Form)

BIDDER MUST CHECK EITHER "A", "B" OR "C" BELOW, TO DECLARE HIS/HER STATUS AS AN E.B.E., OR NON-E.B.E. CONTRACTOR:

A. X The undersigned firm declares that it is not an E.B.E. contractor.

B. _____ The undersigned firm declares that it is an E.B.E. contractor. Please specify percentage of the economically disadvantaged individual's ownership:_____%.

C. _____ The undersigned declares that it and the firm _____, a certified E.B.E., have entered a joint venture to perform this contract, and therefore will be considered to be an E.B.E. contractor for this project.

☐ **If the City has placed an "x" in this space, the project on which you are bidding is a federally funded project. Therefore, the bidder must also identify his/her status as a Minority Business Enterprise (MBE) or Woman Business Enterprise (WBE), if such status exists.**

D. _____ The undersigned firm declares that it is certified MBE Contractor.

E. _____ The undersigned firm declares that it is a Certified WBE Contractor.

Contractor:	Contractor:
Mosaic Building Solutions, LLC	_____
By: _____	By: _____
Its: President	Its: _____

NOTE: A successful, non-E.B.E. bidder will be required to sign an "E.B.E. Rider" attached to the final contract. In the Rider, the successful bidder must agree that he/she will make a good faith effort to subcontract 10% of the overall contract amount to E.B.E. – certified subcontractors. A percentage less than 10% may be stipulated by the Owner in the Instructions to Bidders, but it is the Owner's goal to strive for 10%, pursuant to Executive Order 90-01 (as amended 05/08/06) of the City of Fort Wayne.

The contract will be awarded to the lowest bidder who is responsive and responsible. E.B.E. commitment is not a part of the contract award. The successful bidder will be required to sign the E.B.E. Rider or the contract will not be signed by the Owner.

EBE/MBE/WBE WAIVER/REDUCTION APPLICATION

Type of Waiver Requested: X EBE _____ MBE _____ WBE

Project Resolution Number: 220037

Project Name: Promenade Park New Restroom Building

Submitted By: Mosaic Building Solutions, LLC

Address: 709 Clay St., Suite 200

City, State Zip Code: Fort Wayne, IN 46802

Phone: 260-498-7672 **Email:** tbade@mosaic-building.com

Each of the following elements must be present in order to determine whether or not a reduction or waiver is appropriate. Please provide adequate documentation and information to show why a reduction or waiver of the goal is being sought. (If the space given is not sufficient, please attach additional pages as needed.)

1. **Please give detailed statement of efforts to identify and select portions of the project to sub contract.**

   Mosaic referenced the CFW EBE, WBE, MBE Directory dated September 2020 from the City of Fort Wayne's website. Subcontractors applicable to the project were identified and contacted either by phone or email. Mosaic identified subcontractors to perform the landscape work, plumbing/mechanical and the electrical work.

2. **Please provide a list of your contact with EBE/M/WBE firms.**

☐ **Name of firm contacted:** Apex Electric, LLC
Address: 1304 Maumee Ave. Fort Wayne, IN 46803
Phone: 260-739-5948
Contact Date & Time: October 5, 2020 at 3:58 pm
Method: ☐ Phone ☐ Fax ☐ Written ☒ Other (explain): Email

☐ **Name of firm contacted:** Break Thru Plumbing
Address: 1024 Eckart St. Fort Wayne, IN 46806
Phone: 260-410-7738
Contact Date & Time: October 5, 2020 at 10:52 am
Method: ☐ Phone ☐ Fax ☐ Written ☒ Other (explain): Email

☐ **Name of firm contacted:** CR Maintenance
Address: 2715 Greenview Ave. Fort Wayne, IN 46809
Phone: 260-410-3715
Contact Date & Time: October 5, 2020 at 4:00 pm
Method: ☐ Phone ☐ Fax ☐ Written ☒ Other (explain): Email

[If more contacts were attempted, please attach additional pages of documentation]
COPIES OF ALL WRITTEN OR FAX SOLITIFICATIONS MUST BE ATTACHED

3. **If a reduction or waiver is being sought because of reasons other than prices, the contractor must provide the following information:**

   a. Detailed statement of WHY no EBE/M/WBE firm was subcontracted:

   Mosaic Building Solutions did not receive any quotes from EBE subcontractors for the Promenade Park Restroom project prior to the time of bid. Break Thru Plumbing did call and state he may bid the project; however, Mosaic never received a quote.

4. **If a reduction or waiver is being sought because prices quoted by EBE/M/WBE firms were higher than non-EBE/M/WBE firms, the contractor must provide the following information:**

   a. Price Quoted:

Contractor	Price Quoted
1.	1.
2.	2.
3.	3.
4.	4.

   b. **Detailed statement of the work identified for EBE/M/WBE participation for which the contractor asserts the EBE/M/WBE quote(s) was higher than non-EBE/M/WBE firms. Please summarize direct negotiations with EBE/M/WBE firms for specific portions of the work (and document the dates and time when negotiations occurred), and please indicate why negotiations were unsuccessful:**

   c. **Please include other documentations that demonstrate that the EBE/M/WBE quotes were higher than non-EBE/M/WBE firms.**

5. **Summary:**

I, Jacob Fetters **of** Mosaic Building Solutions, LLC **(company) hereby request a reduction of** 100 **% from the EBE/M/WBE participation goal. This request is being sought for the reason explained above.**

(If the contractor desires to state further reason why the waiver should be accepted, please attach additional pages.)

Signed: _____ **Date:** October 8, 2020

Title: President

END OF SECTION 004583

MOSAIC BUILDING SOLUTIONS

E.B.E Waiver/Reduction Application – Additional Documentation

Name of firm contacted: Cristian Magadan

Address: 1830 Wayne Trace Fort Wayne, IN 46816

Phone: 260-205-7956

Contact Date & Time: 10/05/20 at 4:02 pm

Method: Email

Name of firm contacted: Deign Build Electrical Contracting, LLC

Address: 2403 Fairoak Dr. Fort Wayne, IN 46809

Phone: 260-747-3470

Contact Date & Time: 10/05/20 at 10:59 am

Method: Email

Name of firm contacted: Lawnscape Site Development, Inc.

Address: 6808 Parrott Road Fort Wayne, IN 46803

Phone: 260-749-8611

Contact Date & Time: 10/05/20 at 3:51 pm

Method: Email

CONTRACTOR'S BID FOR PUBLIC WORK - FORM 96

State Form 52414 (R2 / 2-13) / Form 96 (Revised 2013)
Prescribed by State Board of Accounts

PART I
(To be completed for all bids. Please type or print)

Date *(month, day, year)*: October 8th 2020

1. Governmental Unit (Owner): City of Fort Wayne Parks and Recreation
2. County : Allen
3. Bidder (Firm): Mosaic Building Solutions, LLC

   Address: 709 Clay Street Suite 200

   City/State/ZIPcode: Fort Wayne, IN 46802
4. Telephone Number: 260-498-7672
5. Agent of Bidder *(if applicable)*: na

Pursuant to notices given, the undersigned offers to furnish labor and/or material necessary to complete the public works project of City Of Fort Wayne Parks and Recreation (Governmental Unit) in accordance with plans and specifications prepared by Hoch Associates _____ and dated 09/14/2020 for the sum of See Quote Form $ See Quote Form

The undersigned further agrees to furnish a bond or certified check with this bid for an amount specified in the notice of the letting. If alternative bids apply, the undersigned submits a proposal for each in accordance with the notice. Any addendums attached will be specifically referenced at the applicable page.

If additional units of material included in the contract are needed, the cost of units must be the same as that shown in the original contract if accepted by the governmental unit. If the bid is to be awarded on a unit basis, the itemization of the units shall be shown on a separate attachment.

The contractor and his subcontractors, if any, shall not discriminate against or intimidate any employee, or applicant for employment, to be employed in the performance of this contract, with respect to any matter directly or indirectly related to employment because of race, religion, color, sex, national origin or ancestry. Breach of this covenant may be regarded as a material breach of the contract.

CERTIFICATION OF USE OF UNITED STATES STEEL PRODUCTS
(If applicable)

I, the undersigned bidder or agent as a contractor on a public works project, understand my statutory obligation to use steel products made in the United States (I.C. 5-16-8-2). I hereby certify that I and all subcontractors employed by me for this project will use U.S. steel products on this project if awarded. I understand that violations hereunder may result in forfeiture of contractual payments.

ACCEPTANCE

The above bid is accepted this _____ day of _____, _____, subject to the following conditions: _____

_____

Contracting Authority Members:

_____ _____

_____ _____

_____ _____

PART II

(For projects of $150,000 or more – IC 36-1-12-4)

Governmental Unit: Fort Wayne Parks and Recreation Department

Bidder (Firm) Mosaic Building Solutions, LLC

Date *(month, day, year):* October 8th, 2020

These statements to be submitted under oath by each bidder with and as a part of his bid. Attach additional pages for each section as needed.

SECTION I EXPERIENCE QUESTIONNAIRE

1. What public works projects has your organization completed for the period of one (1) year prior to the date of the current bid?

Contract Amount	Class of Work	Completion Date	Name and Address of Owner
22,361.00	Renovation	12/2018	FW-AC Airport Authority
2,080,900.00	Addition/Renov.	10/2018	EACS/Leo Elementary Schoo
2,488,300.00	New Construction	10/2018	City of Warsaw/New Fire Stati
89,410.00	Renovation	9/2019	Smith-Green Comm. Schools

2. What public works projects are now in process of construction by your organization?

Contract Amount	Class of Work	Expected Completion Date	Name and Address of Owner
6,500,900.00	Renovations	11/2020	FWCS/Washington Center ES
4,549,346.11	New Building	11/2020	DeKalb County Corrections
25,744,660.00	New Building	11/2020	NACS/New Elementary Schoo
86,090.00	Remodeling	10/2020	FW-AC Airport

3. Have you ever failed to complete any work awarded to you? No If so, where and why?

4. List references from private firms for which you have performed work.

Bob Harrison - Franklin Electric, Fort Wayne, IN

Charles Shepard III - Fort Wayne Museum of Art, Fort Wayne, IN

Dave Musselman - Murray Equipmnent, Fort Wayne, IN

Mike Foulk - TRIN, Ashley, IN

Chet Kitch - Kitch Financial

SECTION II PLAN AND EQUIPMENT QUESTIONNAIRE

1. Explain your plan or layout for performing proposed work. *(Examples could include a narrative of when you could begin work, complete the project, number of workers, etc. and any other information which you believe would enable the governmental unit to consider your bid.)*

Mosaic will procure the materials for the project and submittals will be collected and submitted for submitted for approvals. We will start the actual work according to the submitted for submitted for approvals. We will start the actual work according to the outlined in the specs.

2. Please list the names and addresses of all subcontractors *(i.e. persons or firms outside your own firm who have performed part of the work)* that you have used on public works projects during the past five (5) years along with a brief description of the work done by each subcontractor.

Don R Fruchey Inc. 5608 Old Maumee Road Fort Wayne, IN 46803

Votaw Electric, 3421 Centennial Drive, Fort Wayne, IN 46808

Almet Inc., 300 Hartzell Road, New Haven IN 46774

Central Indiana Hardware, 5322 Keystone Ave, Fort Wayne, IN 46825

Hall Aluminum, 3033 Wayne Trace, Fort Wayne, IN 46806

3. If you intend to sublet any portion of the work, state the name and address of each subcontractor, equipment to be used by the subcontractor, and whether you will require a bond. However, if you are unable to currently provide a listing, please understand a listing must be provided prior to contract approval. Until the completion of the proposed project, you are under a continuing obligation to immediately notify the governmental unit in the event that you subsequently determine that you will use a subcontractor on the proposed project.

Listing to be provided following the selection of accepted alternates, and in accordance with the contract documents.

4. What equipment do you have available to use for the proposed project? Any equipment to be used by subcontractors may also be required to be listed by the governmental unit.

This project will require standard construction equipment. We do not anticipate purchasing any new tools and/or equipment for this project.

5. Have you entered into contracts or received offers for all materials which substantiate the prices used in preparing your proposal? If not, please explain the rationale used which would corroborate the prices listed.

I have received bid offers to substantiate the prices used in this proposal.

SECTION III CONTRACTOR'S FINANCIAL STATEMENT

Attachment of bidder's financial statement is mandatory. Any bid submitted without said financial statement as required by statute shall thereby be rendered invalid. The financial statement provided hereunder to the governing body awarding the contract must be specific enough in detail so that said governing body can make a proper determination of the bidder's capability for completing the project if awarded.

SECTION IV CONTRACTOR'S NON – COLLUSION AFFIDAVIT

The undersigned bidder or agent, being duly sworn on oath, says that he has not, nor has any other member, representative, or agent of the firm, company, corporation or partnership represented by him, entered into any combination, collusion or agreement with any person relative to the price to be bid by anyone at such letting nor to prevent any person from bidding nor to include anyone to refrain from bidding, and that this bid is made without reference to any other bid and without any agreement, understanding or combination with any other person in reference to such bidding.

He further says that no person or persons, firms, or corporation has, have or will receive directly or indirectly, any rebate, fee, gift, commission or thing of value on account of such sale.

SECTION V OATH AND AFFIRMATION

I HEREBY AFFIRM UNDER THE PENALTIES FOR PERJURY THAT THE FACTS AND INFORMATION CONTAINED IN THE FOREGOING BID FOR PUBLIC WORKS ARE TRUE AND CORRECT.

Dated at Fort Wayne this 8th day of October, 2020

Mosaic Building Solutions LLC
(Name of Organization)

By _____

Jacob S. Fetters, President
(Title of Person Signing)

ACKNOWLEDGEMENT

STATE OF Indiana)
) ss
COUNTY OF Allen)

Before me, a Notary Public, personally appeared the above-named Jacob S. Fetters and swore that the statements contained in the foregoing document are true and correct.

Subscribed and sworn to before me this 8th day of October, 2020.

_____
Notary Public

My Commission Expires: 10/18/2023

County of Residence: Allen

Amanda L. Leffler
Notary Public - State of Indiana
County of Residence: Allen
My Commission Exp. Oct. 18, 2023

Part of State Form 52414 (R2 / 2-13) / Form 96 (Revised 2013)

BID OF

Mosaic Building Solutions LLC
(Contractor)

709 Clay Street, Suite 200
(Address)

Fort Wayne, IN 46802

FOR

PUBLIC WORKS PROJECTS

OF

Fort Wayne Parks and Recreation

705 E State Blvd

Fort Wayne, IN 46805

Filed _____, _____

Action taken _____

_____

INDIANA CONTRACTOR QUALIFICATION CERTIFICATION

Pursuant to Indiana Code 5-16-13, Contractor hereby certifies that he/she shall be qualified under either IC 4-13-6.4 (Qualification for State Public Works Projects) or IC 8-23-10 (Qualifications of Bidders for Contracts) prior to performing any work on a City of Fort Wayne Board of Park Commissioners Project. Contractor further certifies that subcontractors of Contractor awarded subcontracts on a Public Works Contract in excess of $300,000 shall be qualified under the applicable statute. Contractor acknowledges that if he/she violates any of the foregoing qualification requirements, he/she shall be ineligible to bid on Public Works Contracts for such time period as the City determines.

Mosaic Building Solutions, LLC
Name of Company

By: 
(Signature)

Jacob S Fetters
(Printed Name)

Title: President

END OF SECTION 004585

CITY OF FORT WAYNE, INDIANA

Mosaic Building Solutions, LLC
(Vendor Name)

VENDOR DISCLOSURE STATEMENT RELATING TO:

1. **FINANCIAL INTERESTS;**
2. **POTENTIAL CONFLICTS OF INTEREST;**
3. **CURRENT AND PENDING CONTRACTS OR PROCUREMENTS**

Vendors desiring to enter into certain contracts with the City of Fort Wayne, Indiana (the "City") shall disclose their financial interests, potential conflicts of interest and current and pending contract or procurement information as set forth below.

The following disclosures by Vendors are required for all contracts with annual payments by the City in the amount of $50,000 or more. Vendors shall disclose their financial interests, potential conflicts of interest and other contract and procurement information identified in Sections 1, 2 and 3 below as a prerequisite for consideration for a contract awarded by the City. This Disclosure Statement must be completed and submitted together with the Vendor's contract, bid, proposal or offer.

A publicly traded entity may submit its current 10K disclosure filing in satisfaction of the disclosure requirements set forth in Sections 1 and 2 below.

Section 1: Disclosure of Financial Interest in Vendor

a. If any individuals have either of the following financial interests in Vendor (or its parent), please check all that apply and provide their names and addresses (attach additional pages as necessary):

(i) Equity ownership exceeding 5% (____)

(ii) Distributable income share exceeding 5% (____)

(iii) Not Applicable (If N/A, go to Section 2) (_X_)

Name: Jacob S Fetters Name: _____

Address: 709 Clay St 200, Fort Wayne, IN, 46802 Address: _____

b. For each individual listed in Section 1a. show his/her type of equity ownership:

sole proprietorship (____) stock (____)
partnership interest (____) units (LLC) (____)
other (explain)_____

c. For each individual listed in Section 1a. show the percentage of ownership interest in Vendor (or its parent): ownership interest:

Name: _____ _____%

Name: _____ _____%

Section 2: Disclosure of Potential Conflicts of Interest (not applicable for vendors who file a 10K)

For each individual listed in Section 1a. check "Yes" or "No" to indicate which, if any, of the following potential conflict of interest relationships apply. If "Yes", please describe using space under applicable subsection (attach additional pages as necessary):

a. City employment, currently or in the previous 3 years, including contractual employment for services:
Yes _____ No __X__

b. City employment of "Member of Immediate Family" (defined herein as: *Spouse, Child, Step Child, Parent or Step Parent, Father-in-law or Mother-in-law, Brother or Sister, Step Brother or Step Sister, Half Brother or Half Sister, Brother-in-law or Sister-in-law, Son-in-law or Daughter-in-law, Grandparent or Step Grandparent, Grandparent or Step Grandparent of Spouse, Grandchild)*
Including contractual employment for services in the previous 3 years:
Yes _____ No __X__

c. Relationship to Member of Immediate Family holding elective City office currently or in the previous 3 years: Yes _____ No __X__

Section 3: DISCLOSURE OF OTHER CONTRACT AND PROCUREMENT RELATED INFORMATION

a. Does Vendor have **current** contracts (including leases) with the City? Yes _____ No __X__

If "Yes", identify each current contract with descriptive information including purchase order or contract reference number, contract date and City contact below (attach additional pages as necessary).

b. Does Vendor have **pending** contracts (including leases), bids, proposals, or other pending procurement relationship with the City? Yes _____ No __X__

If "Yes", identify each pending matter with descriptive information including bid or project number, contract date and City contact using space below (attach additional pages as necessary).

c. Does vendor have any existing employees that are also employed by the City of Fort Wayne?

Yes _____ No X

If "Yes", provide the employee's name, current position held at vendor, and employment payment terms (hourly, salaried, commissioned, etc.).

Name / Position / Payment Terms:

_____

Name / Position / Payment Terms:

_____

Name / Position / Payment Terms:

_____

d. Does vendor's representative, agent, broker, dealer or distributor (if applicable) have any existing employees that are also employed by the City of Fort Wayne? For each instance, please provide the name of the representative, agent, broker, dealer or distributor; the name of the City employee, and the payment terms (hourly, salaried, commissioned, etc.).

Company / Name / Payment Terms: _____

Company / Name / Payment Terms: _____

Section 4: CERTIFICATION OF DISCLOSURES

In connection with the disclosures contained in Sections 1, 2 and 3 Vendor hereby certifies that, except as described in attached Schedule A:

a. Vendor (or its parent) has not, within the five (5) year period preceding the date of this Disclosure Statement, been debarred, suspended, proposed for debarment declared ineligible or voluntarily excluded from any transactions by any federal, state or local unit of government;

b. No officer or director of Vendor (or its parent) or individual listed in Section 1a. is presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any offense;

c. Vendor (or its parent) has not, within the five (5) year period preceding the date of this Disclosure Statement, had one or more public transactions (federal, state or local) terminated for cause or default;

d. No officer or director of Vendor (or its parent) or individual listed in Section 1a. has, within the five (5) year period preceding the date of this Disclosure Statement, been convicted, adjudged guilty, or found liable in any criminal or civil action instituted by the City, the federal or state government or any other unit of local government; and

e. Neither Vendor, nor its parent, nor any affiliated entity of Vendor, or any of their respective officers, directors, or individuals listed in Section 1a. is barred from contracting with any unit of any federal, state or local government as a result of engaging in or being convicted of: (i) bid-rigging; (ii) bid-rotating; or (iii) any similar federal or state offense that contains the same elements as the offense of bid-rigging or bid-rotating

f. Pursuant to IC 5-22-16.5, Vendor hereby certifies they do NOT provide $20 million dollars or more in goods or services to the energy sector of Iran. Vendor also certifies it is not a financial institution that extends $20 million dollars or more in credit that will provide goods or services to the energy sector of Iran or extends $20 million dollars or more in credit to a person identified on the list as a person engaging in investment activities in Iran.

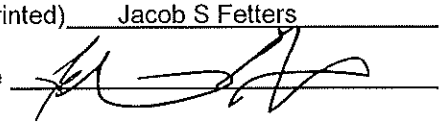
The disclosures contained Sections 1, 2 and 3 and the foregoing Certifications are submitted by

Mosaic Building Solutions, LLC
(Name of Vendor)

709 Clay ST Ste 200, Ft Wayne, IN 46802
Address
(260) 498-7672
Telephone
jfetters@mosaic-building.com
E-Mail Address

The individual authorized to sign on behalf of Vendor represents that he/she: (a) is fully informed regarding the matters pertaining to Vendor and its business; (b) has adequate knowledge to make the above representations and disclosures concerning Vendor; and (c) certifies that the foregoing representations and disclosures are true and accurate to the best of his/her knowledge and belief.

Name (Printed) Jacob S Fetters Title President

Signature  Date 10/08/2020

NOTE: FAILURE TO COMPLETE AND RETURN THIS FORM WITH YOUR DOCUMENTATION MAY RESULT IN YOUR CONTRACT, OFFER, BID OR PROPOSAL BEING DISQUALIFIED FROM CONSIDERATION.

END OF SECTION 004586

Drug Policy Acknowledgement Form

FORT WAYNE PARKS AND RECREATION

Pursuant to Article 19.08B of the Instructions to Bidders, Contractor acknowledges the City of Fort Wayne has in place Drug and Alcohol Policy that applies to any Contractor doing business with the City. A copy of this policy is available for inspection on the City of Fort Wayne website at: http://www.citvoffortwayne.org/purchasing-home.html. As a condition of being awarded any contract, the successful Bidder shall sign this Drug Policy Acknowledgement and agree to be bound by those provisions of the policy that may be applicable. A copy of this form will be retained by the City of Fort Wayne.

The undersigned, on behalf of the Contractor deposes and states that the Contractor acknowledges the City of Fort Wayne's Alcohol and Drug Policy.

Mosaic Building Solutions, LLC
Name of Company

Jacob S Fetters - President
Name and Title

Drug Policy Acknowledgement Form
00 54 52-1

END OF SECTION 004587

E-Verify Affidavit

Pursuant to Indiana Code 22-5-1.7, Contractor agrees and shall enroll in and verify the work eligibility status of all newly hired employees of the contractor through the E-Verify program. E-Verify means the electronic verification of work authorization program of the Illegal Immigration Reform and Immigration Responsibility Act of 1996 (P.L. 104-208). Division C, Title IV, s.403(a), as amended, operated by the United States Department of Homeland Security or a successor work authorization program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work authorization status of newly hired employees under the Immigration Reform and Control Act of 1986 (P.L. 99-603). Contractor is not required to verify the work eligibility status of all newly hired employees of Contractor through the E-verify program if the E-Verify program no longer exists.

The undersigned, on behalf of the Contractor, being first duly sworn, deposes and states that the Contractor does not knowingly employ an unauthorized alien. The undersigned further affirms that, prior to entering into its contract with the City, the undersigned Contractor will enroll in and agrees to verify the work eligibility status of all its newly hired employees through the E-Verify program.

Mosaic Building Solutions, LLC
Name of Company

By: _____
Title President

ACKNOWLEDGEMENT

STATE OF INDIANA)
) SS
COUNTY OF ALLEN)

Before me, a Notary Public, in and for said State and County, personally appeared the within named Company by Name, Title, who being first duly sworn upon his/her oath states that he/she is a duly authorized agent of the Contractor, and as such duly authorized to execute the foregoing Declaration, and acknowledged the same as his/her voluntary act and deed.

WITNESS my hand and sear this 8th day of October, 20 20.

My Commission Expires: 10/18/2023

_____
Signature of Notary Public

Resident of Allen County

Amanda L Leffler
Printed Name

END OF SECTION 004588

Amanda L. Leffler
Notary Public - State of Indiana
County of Residence: Allen
My Commission Exp. Oct. 18, 2023

Non-Collusion Affidavit

The undersigned bidder or agent, being duly sworn on oath, says that he/she has not, nor has any other member, representative, or agent of the firm, company, corporation or partnership represented by him, entered into any combination, collusion or agreement with any person relative to the price to be bid by anyone at such letting nor to prevent any person from bidding nor to include anyone to refrain from bidding, and that this bid is made without reference to any other bid and without any agreement, understanding or combination with any other person in reference to such bidding.

He/She further says that no person or persons, firms, or corporation has, have or will receive directly or indirectly, any rebate, fee gift, commission or thing of value on account of such sale.

OATH AND AFFIRMATION

I HEREBY AFFIRM UNDER THE PENALTIES FOR PERJURY THAT THE FACTS AND INFORMATION CONTAINED IN THE FOREGOING BID ARE TRUE AND CORRECT.

Dated this 8th day of October, 2020

Mosaic Building Solutions, LLC
(Name of Organization)

President
(Title of Person Signing)

(Signature)

ACKNOWLEDGEMENT

STATE OF Indiana)
) ss
COUNTY OF Allen)

Before me, a Notary Public personally appeared the above named and swore that the statements contained in the foregoing document are true and correct.

Subscribed and sworn to me this 8th day of October, 2020.

Notary Public Signature

My Commission Expires: 10/18/2023

Amanda L. Leffler
Notary Public - State of Indiana
County of Residence: Allen
My Commission Exp. Oct. 18, 2023

END OF SECTION 004589

MOSAIC BUILDING SOLUTIONS

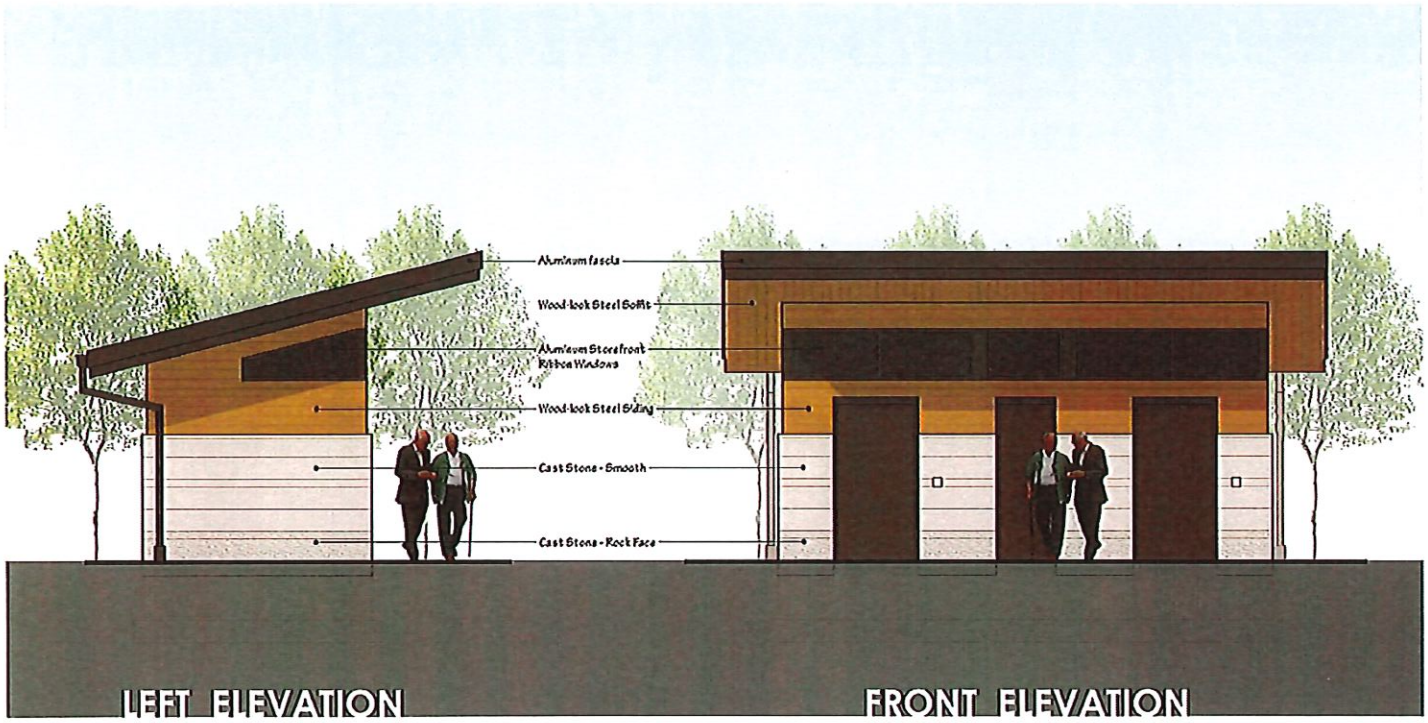
Promenade Park- New Restroom Building
Project No. 220037
Subcontractors & Suppliers
(Subject to Change)

Bunn, Inc.
Landscape Forms
Harlow Landscaping
Sierra Concrete
Carrington Masonry
ML Zehr
Tailored Foam
Big C Lumber
Momper Insulation
Central Indiana Hardware
LaForce
Hall Aluminum
Summit Painting
A Hattersley, Inc.
Henry Electric

MOSAIC BUILDING SOLUTIONS

Promenade Park- New Restroom Building
Project No. 220037
Estimated Schedule
(Subject to Change)

Sitework	Nov. 2 – Nov. 23
Foundations	Nov. 23 – Dec. 7
Masonry	Dec. 7 – Dec. 21
Framing/Roofing	Dec. 21 – Jan. 6
Plumbing/Mechanical	Nov. 30 – Dec. 14
Electrical	Dec. 14 – Dec. 30
Painting/Finishes	Jan. 6 – Jan. 13
Site Concrete	Jan. 13 – Jan. 27
Landscaping	March 1 – March 15



FORT WAYNE PARKS AND RECREATION

PROMENADE PARK RESTROOMS

MEMORANDUM

To: City Council Members, City of Fort Wayne
From: Steve Schuhmacher
CC: File
Subject: Council Approval of Promenade Park Restroom Project
Date: October 20, 2020

The Fort Wayne Parks and Recreation Department, on behalf of the Board of Park Commissioners is requesting approval for a contract with Mosaic Building Solutions Inc. The contract is for the construction of a new 230 s.f. restroom facility located on the north side of Promenade Park, just north of the existing playground site. The project was publicly bid through the City Purchasing office and Mosaic Building Solutions was the most responsive low bidder with a base bid of $318,900.00.

Please review the attached digest and bid tabulation for more information.

I will be available at the Council meetings to answer any questions you may have and I may also be reached at 427-6401.

Thank you for your consideration and support

We respectively request your approval of this contract so that we may proceed with the work. If you have any questions, please feel free to contact me at 427-6401 or the Executive Director, Steve McDaniel at 427-6407.

Thank you in advance.