



**BIDDER ACKNOWLEDGES ADDENDUM(S):** \_\_\_\_\_

**OSHA CERTIFICATION (attached):**  Yes  No (required for Construction) **Service only:**  Yes  No

**CERTIFICATE OF NON COLLUSION (attached):**  Yes  No

**TAX CERTIFICATION (attached):**  Yes  No

**PROOF OF INSURANCE (see page 8 for requirements) (attached certificate):**  Yes  No

**NAME AND ADDRESS OF BONDING COMPANY:** Selective Insurance Branchville, NJ

**Minority and Woman Owned Business Certification (Massachusetts):**  MBE  WBE  Other  DBE

**(include copy of certification with this form)**

**Note: Contractors are not required to be certified. This is for tracking purposes only.**

**OSHA VIOLATIONS IN THE PAST THREE YEARS:**  No  Yes **Please provide details:** \_\_\_\_\_

**HAVE YOU DEFAULTED ON A CONTRACT DURING THE PAST THREE YEARS:**  No  Yes **Please provide details:** \_\_\_\_\_

**ARE YOU CURRENTLY DEBARRED FROM ANY STATE OR FEDERAL CONTRACTS:**  No  Yes **Please provide details:** \_\_\_\_\_

**REGISTERED WITH THE SECRETARY OF STATE TO DO BUSINESS IN MASSACHUSETTS:**  Yes  No

**(Include screen print of the Secretary of State website with certification registration information or other proof of registration)**

**Date:** 2/19/2020

**Name of Submitting Contractor:** Advance Air & Heat Co., Inc.

**YEARS IN BUSINESS** 32 **Years (Minimum 5 years) (for trade category submitting for)**

**BARNSTABLE COUNTY REGION(S) YOU WILL SERVICE: (SEE ATTACHMENT A FOR TOWNS INCLUDED)**


**Location A Upper Cape**  **Yes**  **No**

**Location B Mid-Cape**  **Yes**  **No**

**Location C Lower Cape**  **Yes**  **No**

**Location D Outer Cape**  **Yes**  **No**

**Location E Nantucket**  **Yes**  **No**

**By:**  Karen DeSousa  
(Authorized Signature) (Print Name)

**Name & Title of Person Signing Bid:** Karen DeSousa, President

**Business Address:** 177 Bullock Road

**City, State, Zip Code:** East Freetown, MA 02717

**Telephone:** 508-763-3738

**Fax:** 508-763-8541

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