

ATTACHMENT E

BARNSTABLE COUNTY – TRADESPERSON BLANKET BID

TRADE SUMMARY SHEET

(ONE FORM TO BE COMPLETED PER TRADE CATEGORY YOUR ARE SUBMITTING TO BE QUALIFIED FOR)

TRADE CATEGORY:

15 **CATEGORY NAME** Roofing Services **(Both from list on page 3):**

General Description of services you provide: Roofing and Flashing

FIRM NAME: Rockwell Roofing, Inc. **DATE:** 02/20/2020

ADDRESS: 44 Pond St. , Leominster , MA , 01453
Mailing/Street Town State Zip Code

Estimating/Sales Representative:

Name: Robert Barry

Email: bob@rockwellroofing.com

Direct Phone Number: 978-537-7825

TRADE/PROFESSIONAL LICENSES HELD (include copies): HIC

CS

Sheet Metal

GENERAL LIST OF SERVICES YOU PROVIDE:

Roofing and Flashing

BIDDER ACKNOWLEDGES ADDENDUM(S): 0

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: RLI Insurance Company, P.O. Box 3967, Peoria, IL 61612

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

(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: 02/20/2020 **Name of Submitting Contractor:** Rockwell Roofing, Inc.

YEARS IN BUSINESS 42 **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: David M Barry David M. Barry, President
(Authorized Signature) (Print Name)

Name & Title of Person Signing Bid: David M. Barry, President

Business Address: 44 Pond Street

City, State, Zip Code: Leominster, MA 01453

Telephone: 978-537-7825

Fax: 978-537-4132

E-mail address: bob@rockwellroofing.com