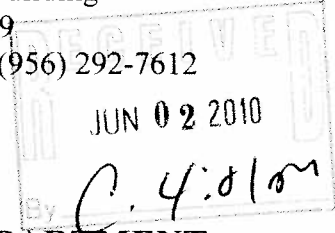




Hidalgo County Purchasing Office
2812 S. Business Highway 281
New Administration Building
Edinburg, Texas 78539
(956) 318-2626/ Fax: (956) 292-7612



HIDALGO COUNTY PURCHASING DEPARTMENT

LETTER OF TRANSMITTAL

TO: Hidalgo County Facilities Management

DATE: January 26, 2010

ATTN: Richard Sunday, Director

BID NO.: "Maintenance & Repair for Elevators Located in County Owned Buildings"

WE ARE SENDING YOU THE FOLLOWING

| COPIES | DESCRIPTION |
|--------------------|------------------------|
| 1 sole participant | RFB 2010-126-05-26-MEG |
| | |
| | |

THESE ARE TRANSMITTED AS CHECKED BELOW:

- AS REQUESTED
- FOR SIGNATURES AND RECOMMENDATION
- FOR SIGNATURES
- OTHER _____

MEMORANDUM

TO: Richard Sunday, Director
Hidalgo County Facilities Management

FROM: Elena Gomez, Buyer *hg*
Hidalgo County Purchasing Department

DATE: May 27, 2010

RE: Bid No. 2010-126-05-26-MEG -HIDALGO COUNTY
"MAINTENANCE & REPAIRS FOR ELEVATORS LOCATED IN COUNTY OWNED BLDGS"

Attached you will find **one (1) copy** of the bids received for the above referenced project. Please review and reply with your recommendation. We need to present your recommendation on the next Commissioner's Court Meeting; therefore, we would like to have your response on or before the following deadline.

Please indicate your recommendation or any concerns on the space provided below and reply to the Purchasing Dept. **via fax to (956)-318-2629 or (956) 292-7612 by no later than WEDNESDAY, JUNE 2, 2010 @ 4:30 P.M. in order to place this item on the agenda for next Commissioners Court Meeting, TUESDAY, JUNE 15, 2010**

If you should have any questions or need additional information please contact me at (956) 318-2626 x=4855

| <u>AWARD TO VENDOR(S):</u> | <u>RECOMMENDATION (BASIS)</u> |
|---|--|
| <i>Thyssen-Krupp</i> | <i>Sole bidder & avg \$263/elevator less than +/- avg \$300 service call</i> |
| <u>ACCOUNT:</u> <i>0-1100-41940-220-001-0-431</i> | |

Richard M. Sunday
Authorized Signature

Richard M. Sunday
Printed Name

2 JUNE 2010
Date

Hidalgo County
 Tabulation Sheet
 "Maintenance & Repairs for Elevators Located In County Owned Buildings"
 RFB NO.: 2010-126-05-26-MEG

| ThyssenKrupp Elevators | | | | | |
|--|--------------------------------------|-------------------|-------------------------|--|--------------------|
| | MAINTENANCE MONTHLY RATE per unit | | SERVICE CALLS | | |
| | Hydro | Cable Traction | Normal Hrs 8 AM-5 PM | After hours Nights, weekends & Holidays | Emergency Calls |
| 4 Elevators | Courthouse | | | | |
| 1 Main Lobby west side | | 400.00 | 0.00 | 0.00 | 0.00 |
| 2 Main Lobby east side | | 400.00 | 0.00 | 0.00 | 0.00 |
| 3 Northeast side | 275.00 | | 0.00 | 0.00 | 0.00 |
| 4 Northeast side | 275.00 | | 0.00 | 0.00 | 0.00 |
| 1 Elevator | County Clerk Warehouse | | | | |
| 1 Cty Clerks Warehouse | 200.00 | | 0.00 | 0.00 | 0.00 |
| 2 Elevators | Delta Building Warehouse | | | | |
| 1 left-north 2 story | 175.00 | | 0.00 | 0.00 | 0.00 |
| 2 Elevator right-South, 2 story | 175.00 | | 0.00 | 0.00 | 0.00 |
| 4 Elevators | Administration Building | | | | |
| 1 Main Lobby/Atrium | 300.00 | | 0.00 | 0.00 | 0.00 |
| 2 Main Lobby/Atrium | 300.00 | | 0.00 | 0.00 | 0.00 |
| 3 County Judge Office North Side | 200.00 | | 0.00 | 0.00 | 0.00 |
| 4 On the South Side | 200.00 | | 0.00 | 0.00 | 0.00 |
| Price per unit for any additional elevators | | | | | |
| 2 Floors | No Bid | No Bid | No Bid | No Bid | No Bid |
| 3 Floors | No Bid | No Bid | No Bid | No Bid | No Bid |
| 4 Floors | No Bid | No Bid | No Bid | No Bid | No Bid |
| 5 Floors | No Bid | No Bid | No Bid | No Bid | No Bid |
| TOTAL COST | 2,100.00 | 800.00 | 0.00 | 0.00 | 0.00 |

| # | Name of Trained Mechanic | NO. of Years | TYPE OF TRAINING/SOURCE |
|---|--------------------------|--------------|---|
| 1 | Roy Rangel | 28 Yrs | NEIEP: National Elevator Industry Education Prog. |
| 2 | Mark Castro | 15 Yrs | NEIEP |
| 3 | Don Prescott | 29 Yrs | NEIEP |
| 4 | David Garza | 10 Yrs | NEIEP |
| 5 | Bobby Schumann | 31 Yrs | NEIEP |



PURCHASING DEPARTMENT
County Of Hidalgo

COPY

MAY 10, 2010

THYSSEN KRUPP ELEVATOR

5449 BEAR LANE, SUITE 406

CORPUS CHRISTI, TX 78405

(800)334-8984 OFFICE; (866)228-5158 FAX

GREGG LAZNOVSKY - SALES MANAGER

Re: **HIDALGO COUNTY**

Request for Bids -"Maintenance & Repairs for Elevators Located in County Owned Buildings"

RFB-2010-126-05-26-MEG

Dear Gentleman/Ladies:

Enclosed please find a Request for Bid (RFB) packet for your review and consideration.

Hidalgo County Purchasing Department welcomes and appreciates your participation in the bid process.

If any further assistance is required, please do not hesitate to call the Purchasing Department 956/318-2626.

Sincerely,

Martha L. Salazar, CPPB
Hidalgo County Purchasing Agent

MLS/meg

Enclosures

Bid
for
HIDALGO COUNTY
"MAINTENANCE & REPAIRS for
ELEVATORS LOCATED in COUNTY OWNED BLDGS"
BID NO.: 2010-126-05-26-MEG

To: Martha L. Salazar, CPPB, Purchasing Agent
Hidalgo County Purchasing Department
2812 S Business Hwy 281 -New Administration Building
Edinburg, Texas 78539

In accordance with the Specifications, and subject to all laws and regulations of the United States and state and local laws, the undersigned bidder proposes and commits to furnish all labor, equipment, material, software and services as set forth in the documents hereinbefore mentioned. The undersigned bidder further agrees, upon acceptance of its bid, to execute a contract and/or Purchase Order issued by Hidalgo County for performing and completing the work described in the Specifications within the time stated and for the prices proposed in the documents attached hereto and made a part hereof.

Bidder acknowledges receipt of all of the pages of the documents referenced in the Invitation to Bid Checklist presented in connection with this procurement. Bidder understands that Hidalgo County reserves the right to reject any or all bids and further reserves the right to design the evaluation criteria to be used in selecting the lowest and best bid.

Bidder agrees that this bid shall be good and may not be withdrawn for a period of ninety (90) calendar days after the scheduled closing time for receiving bids, as contained in the Specifications.

Respectfully submitted,

Bidder: THYSSENKRUPP ELEVATOR
Address: 5449 BEAR LANE SUITE 406 - CORPUS CHRISTI, TX 78405
By: Gregg Laznovsky
Printed Name: GREGG LAZNOVSKY
Title: SALES MANAGER

(This page must be submitted with bid)

EXHIBIT "B"

BID PAGE

HIDALGO COUNTY

**"Maintenance & Repair for Elevators
Located in County Owned Buildings"**

RFB: 2010-126-05-26-MEG

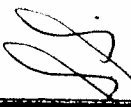
EXHIBIT "B"
"MAINTENANCE & REPAIRS for ELEVATORS"
LOCATED in COUNTY OWNED BLDGS"
BID NO.:2010-126-05-26-MEG

OPENED

10:11 a.m.

5/26/10

Witnessed



BID PAGE

Vendor must thoroughly fill in each section of the Bid Page (Exhibit "B") if applicable
INCOMPLETE submittals shall be considered a probable cause for disqualification.

| | MAINTENANCE MONTHLY RATE per unit | | SERVICE CALLS | | |
|---|--------------------------------------|-------------------|---------------------------------|---|--------------------|
| | Hydro Traction | Cable Traction | NORMAL HRS 8 AM-5 PM | After hours Nights, weekends & Holidays | Emergency Calls |
| 4 Elevators | Courthouse | | 100 N Closer | | |
| 1 Main Lobby west side (cable-electric type) | \$ | \$ 400.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 2 Main Lobby east side (cable-electric type) | \$ | \$ 400.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 3 Northeast side (hydro-electric type) | \$ 275.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 4 Northeast side (hydro-electric type) | \$ 275.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 1 Elevator | County Clerk Warehouse | | 317 N. Closer | | |
| 1 Cty Clerks Warehouse (hydro-electric type) | \$ 200.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 2 Elevators | Delta Building Warehouse | | 3100 S. Business Hwy 281 | | |
| 1 Elevator left- North 2 story freight elevator-No Passenger (hydro-electric type) | \$ 175.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 2 Elevator right-South, 2 story freight elevator-No Passenger (hydro-electric type) | \$ 175.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 4 Elevators | Administration Building | | 100 E CANO | | |
| 1 Main Lobby/Atrium (hydro-electric) | \$ 300.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 2 Main Lobby/Atrium (hydro-electric) | \$ 300.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 3 County Judge Office North Side (small hydro-electric) | \$ 200.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 4 On the South Side (small hydro-electric) | \$ 200.00 | \$ | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| 2 Floors | \$ | \$ | \$ | \$ | \$ |
| 3 Floors | \$ | \$ | \$ | \$ | \$ |
| 4 Floors | \$ | \$ | \$ | \$ | \$ |
| 5 Floors | \$ | \$ | \$ | \$ | \$ |
| TOTAL COST | \$ 2,100.00 | \$ 800.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 |

EXHIBIT "B"
"MAINTENANCE & REPAIRS for ELEVATORS
LOCATED in COUNTY OWNED BLDGS"
BID NO.:2010-126-05-26-MEG

* Number and experience of trained mechanics and supervisors who will be used in the performance of this contract (See Mechanic Qualifications).

| | NAMED TRAINED MECHANICS | NO. OF YEARS | TYPE OF TRAINING/SOURCE |
|---|-------------------------|--------------|--|
| 1 | ROY RANGEL | 28 YEARS | NATIONAL ELEVATOR NEIEP: INDUSTRY EDUCATION PROGRAM |
| 2 | MARK CASTRO | 15 YEARS | NATIONAL ELEVATOR NEIEP: INDUSTRY EDUCATION PROGRAM |
| 3 | DON PRESCOTT | 29 YEARS | NATIONAL ELEVATOR NEIEP: INDUSTRY EDUCATION PROGRAM |
| 4 | DAVID GARZA | 10 YEARS | NATIONAL ELEVATOR NEIEP: INDUSTRY EDUCATION PROGRAM |
| 5 | BOBBY SCHUMANN | 31 YEARS | NATIONAL ELEVATOR NEIEP: INDUSTRY EDUCATION PROGRAM |

BIDDER/COMPANY NAME: THYSSEN KRUPP ELEVATOR

ADDRESS: 5449 BEAR LANE, SUITE 406

CITY: CORPUS CHRISTI STATE: TX ZIP CODE: 78405

PHONE No: (800) 334-8984 FAX No: (866) 228-5158

AUTHORIZED SIGNATURE: Gregg Laznovsky

PRINTED NAME: GREGG LAZNOVSKY

TITLE: SALES MANAGER DATE: 05/21/10

EMAIL: gregory.laznovsky@thyssenkrupp.com



Branch Office:

5449 Bear Lane, Suite 406
Corpus Christi, Texas 78405
(361) 299-0033 office
(866) 228-5158 fax

Rio Grande Valley Office

324 W. Ocean Blvd., Suite 207
Los Fresnos, Texas 78566
(956) 233-1136 office
(866) 228-5158 fax

Non-Emergency 24/7 Trouble Call Phone Number: (800) 364-9023

Emergency 24/7 Trouble Call Phone Number: (800) 364-9023

Dear Sirs,

Here is a list of the personnel we have working for us in your area.

Office Personnel Information – Corpus Christi (C. C.) Branch Office:

| | | |
|-----------------|----------------------|----------------------|
| Micky Warren | Branch Manager | Cell: (361) 533-2351 |
| Donnye Mayfield | Service Manager | Cell: (361) 438-2501 |
| Kristin Smith | Sales Representative | Cell: (361) 779-3781 |
| Gloria McGrew | Office Manager | |
| Glenda Cook | Accounting | |

Office Personnel Information – Rio Grande Valley (RGV) Office:

| | | |
|-----------------|---------------|----------------------|
| Gregg Laznovsky | Sales Manager | Cell: (956) 592-0210 |
|-----------------|---------------|----------------------|

Technical Service and Operations Personnel Information - RGV:

| | |
|---------------------|---|
| Mark Castro | Service Technician/Mechanic / Upper Valley & Laredo |
| Roy Rangel | Service Technician/Mechanic / Upper Valley & Laredo |
| Roger Salinas | Service Technician/Helper / So. Padre Island & Lower Valley, Laredo |
| Mitch Mayfield | Service Technician/Mechanic / So. Padre Island & Lower Valley |
| Don Prescott | Service Technician/Mechanic / Upper Valley & Lower Valley |
| David Garza | Service Technician/Mechanic / Upper & Lower Valley, Laredo |
| Randy Engle | Service Technician/Mechanic / So. Padre Island & Lower Valley |
| Dos Myrick | Construction/ Mechanic |
| Clinton Kaiser | Construction/Mechanic |
| Jorge Velazquez | Construction/Helper |
| Floyd Stewart | Construction/Mechanic |
| Felix Saucedo | Construction/Helper |
| Mike Nerssta | Service Repair/Mechanic / Upper & Lower Valley, Laredo, Corpus Christi |
| Robert Schumann Jr. | Service Repair/Helper/Victoria, Laredo, Corpus Christi, Rio Grande Valley |
| Steve Maxson | Service Technician/Mechanic & Adjuster |

Technical Service and Operations Personnel Information – C. C.:

| | |
|-----------------|--|
| Robert Schumann | Service Technician/Mechanic & Adjuster |
| Steve Maxson | Service Technician/Mechanic & Adjuster |
| Price Tulley | Service Technician/Mechanic |
| Richard Arispe | Service Repair Mechanic |

Technical Service and Operations Personnel Information – Victoria:

| | |
|--------------|-----------------------------|
| Don Debose | Service Technician/Mechanic |
| Kirby Brandt | Service Technician/Mechanic |

Technical Service and Operation Personnel Information – Laredo:

| | |
|----------------|--|
| Sal Mendoza | Service Technician/Mechanic/Laredo |
| Price Tulley | Service Technician/Mechanic / Corpus Christi & Laredo |
| Richard Arispe | Service Technician/Mechanic / Corpus Christi & Laredo |
| Roy Rangel | Service Technician/Mechanic / Rio Grande Valley & Laredo |

******NOTE:**

During the event of any elevator breakdowns, emergency or non-emergency, it is always recommended that all "Trouble Calls" be reported to the 24/7 ThyssenKrupp Answering Service at (800) 364-9023. By calling our answering service there will always be an electronic report of all callbacks and this will also make sure that the customer will get the quickest response time from our local Route Mechanics/Technicians should your normally assigned Service Technician be on vacation or out sick.

Cell Phone Numbers for Local Route Mechanics:

| | | |
|-----------------|----------------------|------------------|
| Roy Rangel | Cell: (956) 491-6195 | Route Mechanic |
| Mark Castro | Cell: (956) 491-6484 | Route Mechanic |
| David Garza | Cell: (361) 774-0736 | Route Mechanic |
| Don Prescott | Cell: (956) 325-6276 | Route Mechanic |
| Bobby Schumann | Cell: (361) 549-5158 | Service Adjuster |
| Donnye Mayfield | Cell: (361) 438-2501 | Service Manager |

ThyssenKrupp Elevator
Attn: Gregg Laznovsky – Sales Manager
324 W. Ocean Blvd., Suite 207
Los Fresnos, Texas 78566
(956) 233-1136 office
(866) 228-5158 fax
(956) 592-0210 cell
E-mail: gregory.laznovsky@thyssenkrupp.com
Web: www.thyssenkruppelevator.com

EXHIBIT "C"
INSURANCE REQUIREMENTS

HIDALGO COUNTY

**"Maintenance & Repair for Elevators
Located in County Owned Buildings"**

RFB: 2010-126-05-26-MEG

ACORD **CERTIFICATE OF LIABILITY INSURANCE** Date
01/14/2010

| | | | |
|----------|---|---|---|
| Producer | WILLIS OF ILLINOIS INC 233 S WACKER DRIVE SUITE 2000 CHICAGO IL 60606 | This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below. | |
| Contact | Helen Chen Ph:312-288-7489 Fx:312-621-6865 hke.certificates@willis.com | INSURERS AFFORDING COVERAGE | NAIC # |
| Insured | THYSSENKRUPP ELEVATOR CORPORATION 2801 NETWORK DR STE 700 FRISCO TX 75034 | INSURER A | Lexington Insurance Company 19437 |
| | | INSURER B | Wausau Bus Ins Co/Wausau Underwriters Ins Co 26069/26042 |
| | | INSURER C | Indemnity Ins Co of NA/ACE American Ins Co 43575/22687 |
| | | INSURER D | |
| Contact | | INSURER E | |

Coverages
 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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | ADD'L INSRD | Type Of Insurance | Policy Number | Policy Effective | Policy Expiration | Limits |
|----------|-------------|--|---|------------------|-------------------|---|
| A | | General Liability | 037205277 | 10/01/2009 | 10/01/2011 | Each Occurrence Fire Damage \$2,000,000 Medical Expense \$5,000 Personal & Adv. Injury \$2,000,000 General Aggregate \$2,000,000 Products-Comp/Ops Aggr Included |
| | X | Commercial General Claims Made Occurrence | 037205278 | | | |
| | | Gen'l Agg Limit Applies Per: <input checked="" type="checkbox"/> Pol <input type="checkbox"/> Proj <input type="checkbox"/> Loc | | | | |
| B | | Automobile Liability | ASKZ91438879019 (AOS) | 10/01/2009 | 10/01/2010 | Combined Single Limit Bodily Injury (Person) Bodily Injury (Accident) Property Damage \$2,000,000 |
| | X | Any Auto All Owned Autos Scheduled Autos Hired Autos Non-Owned Autos | ASJZ91438879039 (PR) | | | |
| | | Garage Liability | | | | Auto Only (Accident) Other Than Auto Only: Each Accident Aggregate |
| | | Any Auto | | | | |
| | | Excess Liability | | | | Each Occurrence Aggregate |
| | | Occur Claims Made Deductible Retention \$ | | | | |
| C | | Worker's Compensation and Employers' Liability Any Proprietor / Partner / Executive Officer / Member Excluded? If yes, describe under Special Provisions below | WLRC45702911 (AOS) WLRC4570290A (CA) | 10/01/2009 | 10/01/2010 | WC Statutory Limits X Other EL Each Accident 1,000,000 EL Disease - Policy Limit 1,000,000 EL Disease - Ea Employee 1,000,000 |

RECEIVED
 JAN 21 2010
 BY *[Signature]* 2:54 PM

Other Coverages

| | | | | | | |
|--|--|--|--|--|--|--|
| | | | | | | |
|--|--|--|--|--|--|--|

Description of Operation/Locations/Vehicles/Exclusions Added By Endorsement/Special Provisions
 RE: ELEVATOR MODERNIZATION JOB# 077FAJ791-94 HIDALGO COUNTY ADMINISTRATION BUILDING - EDINBURG TX

| | |
|--|---|
| Certificate Holder | Cancellation CKDO-7ZQ2AF-100114161329 |
| COUNTY OF HIDALGO ATTN: HIDALGO COUNTY PURCHASING DEPARTMENT 2802 S. BUSINESS HWY 281 EDINBURG TX 78539 | Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail <u>30</u> days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. |
| | Authorized Representative <i>[Signature: Peter G. Chambers]</i> |

THYSSENKRUPP ELEVATOR

2801 NETWORK BLVD. STE 700
FRISCO TX 75034-0000
(866) 864-2596 (PHONE)
(972) 963-5223 (FAX)

TO: HIDALGO CNTY PURCHASING DEP
ATTN: MARTHA SALAZAR
2802 S BUSINESS HWY 281
EDINBURG TX 78539-0000

LETTER OF TRANSMITTAL

DATE: 01/15/2010
OUR JOB NO.: 077FAJ791-94
RE: HIDALGO CNTY ADMIN

WE ARE SENDING YOU:

* INSURANCE CERTIFICATES:
STANDARD

COMMENTS:

Please return requested documents to the above address.

Copy to: ThyssenKrupp/ CORPUS CHRISTI

Signed: JIM BAIRD
CONTRACT ADMINISTRATION

Insurance Requirement Acknowledgment

I, GREGG LAZNOVSKY, authorized representative for THYSSENKRUPP ELEVATOR,
Company/Vendor

hereby acknowledge receipt of the County's required insurance limits. Said requirements:

- will be acquired within 10 working days after notification from Purchasing Department of bid awarded by the Hidalgo County Commissioners' Court;
- will acquire additional amounts required to meet the County's requirements within 10 working days after notification from Purchasing Department of bid award by the Hidalgo County Commissioners' Court; currently carry the following:

Automobile Liability: \$ 2,000,000.00 General Liability: \$ 2,000,000.00

- have already been met, see attached copy of insurance certificate.

Gregg Laznovsky
Authorized Representative

05/21/10
Date

Notice to Bidder:

A certificate of insurance for the required insurance limits shall be provided to the Purchasing Department's Contract Managers in order to qualify for award of bid and to execute a contract between your Company and the County

Failure to provide Certificates of Insurance to the Purchasing Department's Contract Managers will cause the bid award to be rescinded and re-awarded to next lowest bidder. Certificates of Insurance will be monitored and verified on a **quarterly basis** to ensure coverage policy is in place. It is the Company's obligation to maintain the appropriate insurance coverage throughout the term of the contract.

THIS FORM MUST ACCOMPANY BID PACKET

PROJECT REQUIREMENTS ACKNOWLEDGMENT

This is to certify that I, GREGG LAZNOVSKY, possess all of the APPLICABLE:

1. Licenses: _____.
2. Bonds: _____.
3. Certificates: _____.
4. Permits: _____.
5. Other: _____.

necessary to carry out the required project. Furthermore, I am providing copies of the required documentation so that, if my company is awarded this bid, I may be eligible to enter into a contract with Hidalgo County and proceed to complete the project in a timely manner.

* Any licenses, bonds, certificates, permits, etc. which are required must be presented as part of the bid packet in order to expedite the bid evaluation process. Failure to provide said documentation will result in the disqualification of your bid.

Gregg Laznovsky
Authorized Signature

05/21/10
Date

THYSSEN KRUPP ELEVATOR
Company

5449 BEAR LANE, SUITE 406
Address

CORPUS CHRISTI, TX 78405
City, State, Zip

EXHIBIT "D"
CIQ FORM

HIDALGO COUNTY

**"Maintenance & Repair for Elevators
Located in County Owned Buildings"**

RFB: 2010-126-05-26-MEG



Edinburg, TX 78540

Instrument Number: 2009-2032883

Recorded On: September 09, 2009

As
Recording

Parties:

To

Billable Pag
Number of Pag

Comment: CONFLICT OF INTEREST

** Examined and Charged as Follows: **

| | |
|-------------------------|--------------|
| Recording | 16.00 |
| Total Recording: | 16.00 |

***** THIS PAGE IS PART OF THE INSTRUMENT *****
 Any provision herein which restricts the Sale, Rental or use of the described REAL PROPERTY
 because of color or race is invalid and unenforceable under federal law.

File Information:

Document Number: 2009-2032883
 Receipt Number: 1067343
 Recorded Date/Time: September 09, 2009 02:09P

Record and Return To:

THYSSENKRUPP ELEVATOR
 C/O GREGG LAZNOVSKY
 5449 BEAR LANE STE. 406
 CORPUS CHRISTI TX 78405

User / Station: I Leal - Cash Station 02



STATE OF TEXAS
COUNTY OF HIDALGO

I hereby certify that this Instrument was FILED in the File Number sequence on the date/time
printed hereon, and was duly RECORDED in the Official Records of Hidalgo County, Texas

Arturo Guajardo Jr.
County Clerk
Hidalgo County, TX

Hidalgo County
Arturo Guajardo Jr.
County Clerk
Edinburg, TX 78540

Total Receipt for Recording in:

Hidalgo County Clerk
P.O. Box 58
Edinburg, TX 78540

Used To:
THYSSENKRUPP ELEVATOR
C/O GREGG LAZNOVSKY 800-334-8984
5449 BEAR LANE STE. 406
CORPUS CHRISTI TX 78405

Recording Fees

| Document Description | Number | Recording Amount |
|----------------------|---------|------------------|
| Recording | 2032883 | 16.00 |
| CONFLICT OF INTEREST | | |
| Fees | | 1.00 |
| | | ----- |
| | | 17.00 |

Collected Amounts

| Payment Type | Amount |
|--------------|--------|
| H | 20.00 |
| | ----- |
| | 20.00 |

| | |
|------------------------|-------|
| Total Received : | 20.00 |
| Less Total Recordings: | 17.00 |
| | ----- |
| Change Due : | 3.00 |

Thank You
ARTURO GUAJARDO JR. - County Clerk

By - Imelda Leal

Receipt# Date Time
1067343 09/09/2009 02:09p

***VENDOR'S APPLICATION
&
W-9 FORM***

HIDALGO COUNTY

**"Maintenance & Repair for Elevators
Located in County Owned Buildings"**

RFB: 2010-126-05-26-MEG

HIDALGO COUNTY PURCHASING DEPARTMENT Bidder/Vendor Application

Complete in print or type. Please return this application to the Hidalgo County Purchasing Department
thru Facsimile: (956) 318-2629 or Fax (956) 292-7612
in person or regular mail to: 2812 S. Business Hwy. 281, Edinburg, Texas 78539
or email: purchasing@co.hidalgo.tx.us

| | |
|--|--|
| Company Name: <u>THYSSEN KRUPP ELEVATOR</u> Telephone No. <u>(800) 334-8984</u> | |
| dba Name: | |
| Legal Name: <u>THYSSEN KRUPP ELEVATOR</u> | |
| Mailing Address: <u>5449 BEAR LN., STE 406</u> Fax No. <u>(866) 228-5158</u> | |
| Physical Address: <u>5449 BEAR LANE, SUITE 406</u> | |
| City, State, Zip <u>CORPUS CHRISTI, TX 78405</u> Tax I.D. No. <u>62-1211267</u> | |
| Remit to Address: <u>5449 BEAR LN., STE. 406</u> City, State, Zip <u>CORPUS CHRISTI, TX 78405</u> | |
| E-Mail Address: <u>gregory.laznovsky@thyssenkrupp.com</u> | |
| Representative(s) Name(s) & Title(s) <u>GREGG LAZNOVSKY - SALES MANAGER</u> | |
| Type of Organization (check one): <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> LLC <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Other, Specify | |
| State Identification No. <u>62-1211267</u> (Please attached completed W-9 form with this application) Federal Identification No. or (if individual) SS No. | |
| State of Incorporation: <u>DELAWARE</u> Date: <u>1985</u> Other: | |
| Type of Business (check one): <input checked="" type="checkbox"/> Manufacturer <input type="checkbox"/> Wholesaler <input type="checkbox"/> Retailer <input type="checkbox"/> Broker <input checked="" type="checkbox"/> Distributor <input checked="" type="checkbox"/> Service Organization <input type="checkbox"/> Other, Specify | |
| Name & Title of Person(s) Authorized to Sign Bids, Proposals, and/or Contracts: <u>GREGG LAZNOVSKY, PONNYE MAYFIELD, MICKY WARREN, KRISTIN SMITH, GLORIA MCGREW</u> | |
| Small and/or Disadvantaged Business Information (check application criteria) | |
| Small Business: <input type="checkbox"/> Disadvantaged Business (At Least 51% Ownership) | |
| <input type="checkbox"/> Less than 125,000 annual gross receipt <input type="checkbox"/> Less than 250,000 annual gross receipt <input type="checkbox"/> Less than 499,000 annual gross receipt <input type="checkbox"/> More than 500,000 annual gross receipt | |
| <input type="checkbox"/> Black American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Asian Pacific American | |
| <input type="checkbox"/> Native American <input type="checkbox"/> Women <input type="checkbox"/> Other | |
| Have you been certified as a HUB or an MBE/WBE source?: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Indicate Certification No.(s): _____ or are Certificate(s) attached?: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| What type of product(s) is/are solicited by your company?: | |
| Would you like to be provided with specifications for procurements of such products?: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| To Be Completed by the County: Rec'd by (Purchasing): _____ Date Rec'd by (Purchasing): _____ | |
| Date Forwarded Information to Auditor's Office: _____ Entry Date: _____ Vendor No.: _____ | |

HISTORICALLY UNDERUTILIZED BUSINESS (HUB) DECLARATION

The primary objective of the Hidalgo County HUB Program is to ensure Historically Underutilized Businesses receive a fair and equal opportunity for participation in the County's procurement process. This fact holds true for Services (Professional & Non-Professional), Commodities, and Construction contracts and any subcontracts thereto. The program strongly encourages Prime Contractors to provide subcontracting opportunities to Certified Hub Contractors/Vendors. Our goal for HUB contractor/vendor participation, as well as HUB subcontractor participation is 30%. To be considered as a "Certified HUB Contractor/Vendor" the contractor/vendor must have been certified by, and hold a current and valid certification with any of the three agencies listed below.

Have you been Certified as a HUB or an MBE/WBE source?: Yes No

If yes, by whom?: Texas Building & Procurement Commission Other _____

Indicate Certification No(s): _____ or Are Certificate(s) Attached?: Yes No

LIST OF CERTIFIED HUB SUBCONTRACTORS
(Attach additional pages if necessary)

What percentage of the Bid, RFP, or RFQ is to be subcontracted with Certified HUB sources?: _____ %
(List HUB Subcontractor information below).

HUB Subcontractor Name: _____ HUB Status: _____
Certifying Agency (Check all applicable): Texas Building & Procurement Commission Other
Address: _____ City: _____ State: _____ Zip: _____
Contact Person: _____ Title: _____ Phone No.: () _____
Subcontract Amount: \$ _____ Description of Work to be Performed: _____

HUB Subcontractor Name: _____ HUB Status: _____
Certifying Agency (Check all applicable): Texas Building & Procurement Commission Other
Address: _____ City: _____ State: _____ Zip: _____
Contact Person: _____ Title: _____ Phone No.: () _____
Subcontract Amount: \$ _____ Description of Work to be Performed: _____

HUB Subcontractor Name: _____ HUB Status: _____
Certifying Agency (Check all applicable): Texas Building & Procurement Commission Other
Address: _____ City: _____ State: _____ Zip: _____
Contact Person: _____ Title: _____ Phone No.: () _____
Subcontract Amount: \$ _____ Description of Work to be Performed: _____

**Request for Taxpayer
 Identification Number and Certification**

Give form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific instructions on page 2.

| | |
|--|---|
| Name (as shown on your income tax return) THYSSENKRUPP ELEVATOR CORPORATION | |
| Business name, if different from above | |
| Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶ | |
| <input type="checkbox"/> Exempt from backup withholding | |
| Address (number, street, and apt. or suite no.) 5449 BEAR LANE, SUITE 406 | Requester's name and address (optional) |
| City, state, and ZIP code CORPUS CHRISTI, TX 78405 | |
| List account number(s) here (optional) | |

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

| |
|--------------------------------|
| Social security number |
| |
| or |
| Employer identification number |
| 61212112617 |

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here

Signature of U.S. person ▶ *Guy Reynolds*

Date ▶ **05/21/10**

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II Instructions on page 4 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules regarding partnerships* on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 2. The United States or any of its agencies or instrumentalities,
 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
 5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
 7. A foreign central bank of issue,
 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 10. A real estate investment trust,
 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 12. A common trust fund operated by a bank under section 584(a),
 13. A financial institution,
 14. A middleman known in the investment community as a nominee or custodian, or
 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

| IF the payment is for . . . | THEN the payment is exempt for . . . |
|--|--|
| Interest and dividend payments | All exempt recipients except for 9 |
| Broker transactions | Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker |
| Barter exchange transactions and patronage dividends | Exempt recipients 1 through 5 |
| Payments over \$600 required to be reported and direct sales over \$5,000 ¹ | Generally, exempt recipients 1 through 7 ² |

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

| For this type of account: | Give name and SSN of: |
|---|---|
| 1. Individual | The individual |
| 2. Two or more individuals (joint account) | The actual owner of the account or, if combined funds, the first individual on the account ¹ |
| 3. Custodian account of a minor (Uniform Gift to Minors Act) | The minor ² |
| 4. a. The usual revocable savings trust (grantor is also trustee) | The grantor-trustee ¹ |
| b. So-called trust account that is not a legal or valid trust under state law | The actual owner ¹ |
| 5. Sole proprietorship or single-owner LLC | The owner ³ |
| For this type of account: | Give name and EIN of: |
| 6. Sole proprietorship or single-owner LLC | The owner ³ |
| 7. A valid trust, estate, or pension trust | Legal entity ⁴ |
| 8. Corporate or LLC electing corporate status on Form 8832 | The corporation |
| 9. Association, club, religious, charitable, educational, or other tax-exempt organization | The organization |
| 10. Partnership or multi-member LLC | The partnership |
| 11. A broker or registered nominee | The broker or nominee |
| 12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments | The public entity |

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules regarding partnerships* on page 1.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

***CERTIFICATION REGARDING
DEBARMENT***

HIDALGO COUNTY

**"Maintenance & Repair for Elevators
Located in County Owned Buildings"**

RFB: 2010-126-05-26-MEG



PURCHASING DEPARTMENT
County Of Hidalgo

May 18, 2010

RE: ADDENDUM NO.1
RFB No:2010-126-05-26-MEG
HIDALGO COUNTY FACILITIES MANAGEMENT DEPARTMENT "Maintenance & Repair for Elevators Located County Owned Buildings"

Dear Gentlemen:

Attached you will find **ADDENDUM NO. 1, PAGE 1 OF 1** in connection with "**HIDALGO COUNTY FACILITIES MANAGEMENT DEPARTMENT**" Request for bids for "**Maintenance & Repair for Elevators Located County Owned Buildings**".

Please add this **ADDENDUM NO. 1** to your **BID** so as to permit your company to submit a complete packet. See original packet **LEGAL NOTICE** page 3 paragraph 9.

Acknowledge receipt of ADDENDUM NO. 1 by signing and returning this notice to us **VIA FAX AT (956) 318-2629** or **VIA E-MAIL TO elena.gomez@co.hidalgo.tx.us**.

If you do not receive all pages of **ADDENDUM NO. 1** please notify us immediately at (956) 318-2626.

Please be advised that this **ADDENDUM NO. 1** will complete your RFB packet for "**Maintenance & Repair for Elevators Located County Owned Buildings**" -**HIDALGO COUNTY FACILITIES MANAGEMENT DEPARTMENT**.


Thank you for your prompt attention to this matter.



Martha L. Salazar, CPPB
Hidalgo County Purchasing Agent

BY: _____

ADDENDUM NO 1
ACKNOWLEDEMENT OF RECEIPT


Firm Name

MLS/meg
Enclosures

ADDENDUM NO. 1

May 18, 2010

HIDALGO COUNTY FACILITIES MANAGEMENT DEPARTMENT
"Maintenance & Repair for Elevators Located
County Owned Buildings"
RFB-2010-126-05-26-MEG

Bid Opening Date: May 26, 2010

PLEASE NOTE THE FOLLOWING CHANGES

1. Please Note

2nd PRE-BID CONFERENCE A WALK-THRU

A pre-bid will be held on **THURSDAY, MAY 20, 2010 at 2:00 P.M.** at Hidalgo County Purchasing Department Conference Room located at 2802 South Business Hwy. 281, Edinburg, Texas. **ALL BIDDERS ARE ENCOURAGED TO ATTEND THIS CONFERENCE.**

2. Please add this **ADDENDUM NO. 1** to your Bid so as to permit your company to submit a complete packet.

I, *Gregory S. Larnovsky*, acknowledge receipt of ADDENDUM NO. 1 dated, May 18, 2010 for **RFB-2010-126-05-26-MEG** Hidalgo County Facilities Management Department-"Maintenance & Repair for Elevators Located County Owned Buildings"

GREGORY S. LARNOVSKY - SALES MGR.
Printed Proposer Name

05/21/10
Date

THYSSENKRUPP ELEVATOR

NOTE: **PLEASE SUBMIT THIS ADDENDUM WITH YOUR PACKET IN ORDER TO COMPLETE YOUR PROPOSAL PACKET.**