SECTION PF-1 PROPOSAL FORM

PROPOSAL FORM

October 18th 2018 (Enter Month and Date)
TO: The Honorable Mayor and Town Council Town of Addison, Texas
The undersigned bidder, having examined the plans, specifications and contract documents, and the location of the proposed work, and being fully advised as to the extent and character of the work, proposes to furnish all equipment and to perform labor and work necessary for completion of the work described by and in accordance with the Plans, Specifications and Contract for the following prices, to wit:
TOTAL BASE BID:
Provide the <u>total sum</u> for the Base Bid cost of material and labor for the Addison Athletic Club HVAC Improvements (demolition and new work for the Cardio Wing and Original Building) as specified herein:
Nine Hundred Thirteen Thousand Three Hundred Twenty Nine Dollars (words)
\$\frac{\$913,329}{(numbers)}\$ Excludes Test & Balance
TOTAL ADD ALTERNATES BID:
The City reserves the right to include into the Work any combination of the items listed as Alternates, or to decline any or all of these items. Provide the <u>total sum</u> for the Alternate Bid – Original Building Demolition and New Scope as described in the Bid Schedule:
ADD: Two Hundred Sixty Six Thousand Seven Hundred Six Dollars (words)
\$\frac{\$266,706}{(numbers)}\$ Excludes Test & Balance
BID SCHEDULE:
The Bid Schedule breakdown must be submitted attached to this Proposal Form or no later than 5:00 PM on Monday, October 22, 2018, at the location listed herein. If the Bid Schedule is not submitted by this date, your bid may be considered as "non-responsive" and may not be considered for further evaluation.
PROPOSED TIME:
The undersigned agrees, if awarded the Contract, to commence the Work within ten (10) days of receipt of the Notice to Proceed and to achieve Substantial Completion for the Work required in the Base Bid and any selected Alternates within Proposed calendar days following receipt of Notice to Proceed.
Number of Calendar Days (Not to Exceed 150 Days): 150 days

ACKNOWLEDGMENT OF ADDENDA:

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Addendum No. 1

_10-03-18

Addendum No. 2

10-12-18

Addendum No. 3

- NOTES: 1. All items, labor, materials, equipment, facilities, incidentals and work required for construction of the project are to be provided and installed by the Contractor as part of the project and payment for the cost of such shall be included in the price bid for the construction of the project.
 - 2. Prices must be shown in words and figures for each item listed in the Proposal. In the event of discrepancy, the words shall control.
 - 3. Materials, which are "tax exempt", are those items which are physically incorporated into the facilities constructed for the Town of Addison, as set forth in the Special Provisions. Materials include, but are not limited to purchased items such as water pipe, sanitary sewer pipe, storm drain pipe, etc.

Services, which are "not tax exempt", are those items which are used by the Contractor but are not physically incorporated into the Town of Addison's facility and/or items which are consumed by construction, as set forth in the Special Provisions. Services include, but are not limited to, items such as supplies, tools, skill and labor, the purchase, rental or lease of equipment, etc.

Name of Person Signing Bid

Signature of Person Signing Bid

2563 E. Loop 820 N. Fort Worth, Texas 76118

Address

56-2288896

T.I.N. (Tax Identification or Employer's Number)

If BIDDER is: AN INDIVIDUAL n/a (Seal) (Individual's Name) doing business as Business address: Phone No. A PARTNERSHIP Infinity Contractors International LTD. (Seal) (Firm Name) Jim Bob Salter & Jim Salter (General Partner) doing business as Infinity Contractors International LTD. Business address: 2563 E. Loop 820 N. Fort Worth, Texas 76118

Phone No. _______(817) 838-8700

A CORPORATION

ву n/a	
(Corporation Name)	
(0.1.0)	
(State of Incorporation)	
By(Name of Person Authorized to Sign)	
(Name of Person Authorized to Sign)	
(Title)	
(Corporate Seal)	
A tract	
Attest (Secretary)	
Business address:	
	-
Phone No.	
Thome I to.	
A JOINT VENTURE	
n/a	
By (Name)	
(Address)	-
Ву	
(Name)	
4 11 Sec.	

(Address)
(Each joint venture must sign. The manner of signing for each individual, partnership and corporation that is a party to the joint venture should be in the manner indicated above.)

SECTION BB BID BOND



KNOW ALL MEN BY THESE PRESENTS, that we,infinity Contractors International, Ltd.
2563 East Loop 820 North, Fort Worth, Texas 76118
as principal, and the GREAT AMERICAN INSURANCE COMPANY, a corporation existing under the laws
of the State of Ohio, having its Administrative Office at 301 E. Fourth Street, Cincinnati, Ohio 45202, as surety,
are held and firmly bound unto Town Of Addison
3900 Beltway Drive, Addison, Texas 75001
as obligee, in the penal sum of Five Percent of the Total Bid Amount
Dollars (\$ 5% of Bid Amount -), lawful money of the United States of America, for the payment of which,
well and truly to be made, we bind ourselves, our heirs, executors, administrator, successors and assigns, Jointly
and severally, firmly by these presents.
SIGNED, sealed and dated this 18th day of October , 2018.
WHEREAS, the said principalInfinity Contractors International, Ltd
herewith submitting _a proposal for _ HVAC IMPROVEMENTS ADDISON ATHLETIC CLUB
Bid Number: 18-224
NOW, THEREFORE, the condition of this obligation is such that, if the said principal shall be awarded the
said contract, and shall within (10) days after receiving notice of such award
enter into a contract and give bond for the faithful performance of the contract, then this obligation shall be null
and void otherwise the principal and surety will pay unto the obligee the difference in money between the
amount of the principal's bid and the amount for which the obligee may legally contract with another party to
perform the work, if the latter amount be in excess of the former; but in no event shall the liability hereunder
exceed the penal sum hereof.
Infinity Contractors International, Ltd.
GREAT AMERICAN INSURANCE COMPANY
Principal Jim Bob Salter, President
$P_{\text{cut}}(1) = 0 \text{for } r = 0$
By: Carolyh Maples, Attorney-in-Fact

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET CINCINNATI, OHIO 45202 S13-369-5000 FAX 513-723-2740

The number of persons authorized by this power of attorney is not more than **FIVE**

No. 0 14975

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

JOHN R. WILSON GREG WILKERSON **CATHY VINSON**

Name VICKIE A. ROSS CAROLYN MAPLES

Address ALL OF FORT WORTH, **TEXAS**

Limit of Power ALL \$100,000,000.00

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above. IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate

officers and its corporate seal hereunto affixed this

day of NOVEMBER GREAT AMERICAN INSURANCE COMPANY

Attest

Divisional Senior Vice President

DAVID C. KITCHIN (877-377-2405)

STATE OF OHIO, COUNTY OF HAMILTON - ss:

Assistant Secretary

2017, before me personally appeared DAVID C. KITCHIN, to me

Susan a Kohowst

28TH **NOVEMBER** On this day of known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



Susan A. Kohorsi Notary Public, State of Ohio My Commission Expires 05-18-2020

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisonal Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this

18th

day of October



Assistant Secretary



Great American Insurance Company of New York Great American Alliance Insurance Company Great American Insurance Company

IMPORTANT NOTICE:

To obtain information or make a complaint:

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:

1-800-252-3439

You may write the Texas Department of Insurance at:

P.O. Box 149104 Austin, TX 78714-9091 FAX: 1-512-490-1007

Your notice of claim against the attached bond may be given to the surety company that issued the bond by sending it by certified or registered mail to the following address:

Mailing Address:

Great American Insurance Company

P.O. Box 2119

Cincinnati, Ohio 45202

Physical Address:

Great American Insurance Company

301 E. Fourth Street Cincinnati, Ohio 45202

You may also contact the Great American Insurance Company Claim office by:

Fax:

1-888-290-3706

Telephone:

1-513-369-5091

Email:

bondclaims@gaic.com

PREMIUM OR CLAIM DISPUTES:

If you have a dispute concerning a premium, you should contact the agent first. If you have a dispute concerning a claim, you should contact the company first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

ATTACH THIS NOTICE TO YOUR BOND:

This notice is for information only and does not become a part or condition of the attached document.

F.9667A (10/16)

SECTION BQS

BIDDER QUALIFICATION STATEMENT

SECTION BQS

ALL BIDDERS ARE NOTIFIED THAT THE FOLLOWING QUALIFICATION STATEMENT MUST BE COMPLETED AND SUBMITTED WITH THE BID PROPOSAL

CONTRACTOR'S QUALIFICATIONS

The Contractor shall show that he has experience with similar projects that require working on HVAC and electrical construction and/or replacement projects in confined quarters in a fully operational public facility which will require the Contractor to plan his work efforts and equipment needs with these limitations in mind. The Contractor shall submit a complete list of ALL Municipal and Similar Non-Municipal current and completed projects for the past three (3) years for review. This list shall include the names of supervisors and type of equipment used to perform this work.

BIDDERS QUALIFICATION STATEMENT

INFRASTRUCTURE AND DEVELOPMENT SERVICES BID NUMBER 18-224, ADDISON ATHLETIC CLUB HVAC IMPROVEMENTS

Contractor: Infinity Contractors International LTD.
Indicate One:Sole ProprietorX PartnershipOther
Corporation Joint Venture
Name: Jim Bob SalterPartner:Jim Salter
Title: PresidentTitle: CEO
Address: 2563 E. Loop 820 N. Address: 2563 E. Loop 820 N.
City: Fort Worth City: Fort Worth
State & Zip: Texas 76118 State & Zip: Texas 76118
Phone: (817) 838-8700 Phone: (817) 838-8700
State and Date of Incorporation, Partnership, Ownership, Etc. Texas
Location of Principal Office: 2563 E. Loop 820 N. Fort Worth, Texas 76118
Contact and Phone at Principal Office: Jim Bob Salter (817) 838-8700
Liability Insurance Provider and Limits of Coverage: Frost Insurance Agency, Inc. \$1,000,000
Workers Compensation Insurance Provider: Service Lloydes
Surety (Performance and Payment): Frost Insurance Agency, Inc.
Address: 2563 E. Loop 820 N. Fort Worth, Texas 76118
Contact and Phone: Jim Bob Salter (817) 838-8700

Superintendent and Backup Superintendent: (Work Resume - attach additional sheets.) (Safety Record - attached additional sheets; if needed show all verified safety violations.) The superintendent shall be able to communicate in English and not operate any equipment and have not had any verified job safety violations in the past five years. Any variations shall be reviewed by the OWNER for approval or denial. A job site shall be shut down if proper supervision is not provided.

Superintendent Name		Backup Superintendent	Name
Nick Stevenson		Bill Covington	1
Safety Record – List ALL Verific with explanation, date and action		•	p Superintendent
Superintendent			
None			
			
Backup Superintendent			
None			
			ß
Total Number of Employees to b	e Associated with th	nis Job:	
Managerial 2	Administrative	1 Profession	onal1
Skilled6	Semi-Skilled_	Other	
Percentage of work to be done by	Bidder's Employee	es (Based on Dollars Bio	d):70%

Nicklas Stevenson

EMPLOYMENT HISTORY:

INFINITY CONTRACTORS - 2006 to present

Project Superintendent/ Lead welding Tech.

Knowledge and Certification in welding procedures

A & G PIPING - 1997 to 2006

Welding Shop Superintendent. Project Superintendent

CMPA - 1995 to 1997

Welding Foreman. Orbital Welder

KINETIC SYSTEMS - 1993 to 1995

Orbital Welder

EXPERIENCE:

Supervised crews up to 20 personnel

My projects have had no lost time accidents

Maintained all maintenance logs for equipment and tools Proficient with blueprints, submittals, project specifications Communication skills with site managers and engineers Knowledgable with welding code and pressure vessel work Experience in design lay out and fabrication of process and

industrial piping systems.

EDUCATION:

Fort Worth Plumbers & Steamfitters Joint Apprenticeship

Program 1987 to 1992. Graduated.

Nationally Reconized Welding Certicifications - 8 certification

in GTAW, SMAW, GMAW, and ARC welding processes.

OSHA 30 certified

Cerified Fork lift operator First Aid/CPR-AED Certified Bill Covington 241 Briar Oaks Ln. Azle ,Tx. 76020 817-480-3285

Experience:

I have been in Mechanical Construction for oil, gas, chemical, and commercial for over thirty years. This includes the fabrication and installation of process piping, structural steel Fabrication and erection of metal buildings platforms, sheet metal installation, setting of vessels, and equipment along with the installation of some instrumentation. I have field design experience in piping isometrics and structural steel. I have also managed subcontractors and served as QA/QC and field inspector. I am experienced in material take off and bidding, planning, scheduling, I have some civil experience as well. I am very safety and detail oriented.

2. Certifications:

- * ABC certified pipe and structural fitter/ fabricator
- * Certified welder utilizing stick, heliarc, tig, mig, and intershield.
- * Certified 30 hour OSHA
- * Certified ground shoring and excavation
- * Certified confined space
- * Certified 50 ton crane operator
- * Certified Rigger
- * Certified in first Aid and CPR

3. Training:

- * Trained and understand all types of drawings including Ortho's, P&ID's, Piping and civil and commercial plans, Equipment installation and layout, Structural along with field design.
- * Trained in project management including budgeting, scheduling, cost reporting, and time.
- * Scaffolding erection and safety.
- * Hydro and air testing.
- * Welding inspection.
- * Numerous safety and fall protection classes.
- * Fire and spill prevention.

4. Employment:

Infinity Contractors
Fort Worth TX. 76118
April 2016 to Present
Project Superintendent
TX.Dot Mesquite. Install new Chiller
Lamaderna Install food processing. New facility

* Hidalgo Commercial and Industrial Fort Worth, Tx. 76106 Sept. 2014 to April 2016 Project Superintendent

*Weldon Contractors, Inc.

Arlington, Tx. Feb. 2007 to Sept. 2014 Project Superintendent

Continued

*KBI Inc. Grand Prairie, Tx. Jan. 2004 to Feb. 2007 Project Superintendent

*US Contractors Inc. Lake Jackson, Tx. 1992 to 2000 Superintendent and QA/QC

*Tofeco Inc.
Jacksboro, Tx.
1978 to 1991
Yard Superintendent and QA/QC

*Worked as a contractor and with various other contractors as needed.

5. General Skills:

- *Customer relations
- *General contracting professional
- *Good work ethics
- *Subcontract management

References upon request.

Chiller, AHUs, AC's	& HVLSs instillation		
Access to Tools and Equi	pment: Percent Owned 100%	Percent Rented	
Number of Years in Busi	ness as a Contractor on Above	e Types of Works: 24	
Type(s) of Work to be do Include Name, Ac Use additional sho	ddress, and Phone Number of	Sub-Contractor.	
Type of Work	Sub-Con	tractor	
Sheet Metal	Team She	eetmetal	
Insulation	Performanc	e Contracting Inc.	
Electrical	Angiel Elec	trical Construction	
Controls	LSI		
General Construction	Abbott Con	struction	
Test & Balance by O List Equipment to be used not listed shall be reviewed his project. (Use addition	d on this project (Make/Mode ed by the OWNER for approv	el/Age of Major Equipr val or rejection prior to	ment) Any Equipmen use of Equipment or
Type of Equipment	Make	Model	Age (years)
Chiller	Carrier	30XV	
AHU's	Carrier	39MN	
AC's	Carrier	42BV	
HVLS's	Hunter Industrial	TITAN-14	

years. (Use additional sheets if necessary.) Project: TRA CHLLD WTR PLNT / HVAC UPGRADE 1. Current Status: Complete Any Litigation Issues: Yes of No (Circle One) If Yes, explain: Any Verified Safety Violations: Yes on No (Circle One) If Yes, explain: Project Description: Upgrade HVAC Chillers, AHUs & CHW/R Loop Piping Owner/Agency: Trinity River Authority \$14,300,000-Year Built: 2017 Contract Price: Contact Person: Ernie Fink Phone: (682) 429-5489 2. Project: DCCCD VARIOUS MECHANICAL JOBS Complete Current Status: Any Litigation Issues: Yes of No (Circle One) If Yes, explain: Any Verified Safety Violations: Yes of No (Circle One) If Yes, explain:

List of ALL Municipal and Similar Non-Municipal current and completed projects for the past three (3)

Year Built: 2016	Contract Price:	\$2,300,000-
Contact Person: Sharon Wils	son Phone: (972) 860-	7763
Project: UNT MUSIC BLD	G AHU REPLACEMENT	
Current Status: Complete	5	
Any Litigation Issues: <u>Yes or</u>	No (Circle One) If Yes, exp	olain:
Any Verified Safety Violation	ns: <u>Yes or No</u> (Circle One) I	f Yes, explain:
Project Description: Install	AHUs in an occupied Camp	pus
Owner/Agency: UNIVERS	ITY OF NORTH TEXAS	
Year Built: 2016	Contract Price:	\$4,500,000
Contact Person: Barry Sullen	berger Phone: (940) 369-	-5500
	HVAC - SSC	
roject: TAMU Legett Hall		
roject: TAMU Legett Hall Current Status: Complete		

Any Ve	rified Safety Violations: Yes of No (Circle One) If Yes, explain:
<u> </u>	
-	
Project	Description: Completes a renovation of a dorm in 12 weeks with VAV Box
Owner/	Agency: Texas A&M University / SSC
Year Bu	nilt: 2016 Contract Price: \$4,5000,000-
Contact	Person: Michael Garon Phone: (979) 446-2506
Project:	Texas A&M University Rudder Hall HVAC Modifications
Current	Statue: Complete
	igation Issues: Yes on No (Circle One) If Yes, explain:
<u> </u>	
Any Vei	rified Safety Violations: Yes of No (Circle One) If Yes, explain:
**	
<u> </u>	
Project I	Description: Completes a renovation of a dorm in 12 weeks with VAV Box
Owner/A	Agency: Texas A&M University / SSC
Year Bu	ilt: 2017 Contract Price: \$4,775,000
	Person: Michael Garon Phone: (979) 446-2506
Project:	
Current	Status: Complete

		r <u>No</u> (Circle One) If Yes, ex	
-			
Any Ve	ified Safety Violatio	ons: <u>Yes of No</u> l(Circle One)	If Yes, explain:
8			
Project 3	Description: Compl	etes a renovation of a dorr	m in 10 weeks with VAV Bo
	-	M University / SSC	
			¢4.600.000
Year Bu	.lt:2018	Contract Price:_	\$4,000,000
Contact	Person: Michael Ga	ron Phone: (979) 446-2	2506
Project:	TSU Library HVA	AC - VAV & AHU Refurb	ishments
Current	Status: In Progres	S	
Anv Lit	gation Issues: Yes of	No (Circle One) If Yes, ex	xplain:
,	,	(0 0) 1 0 , 0	Ţ <u>-</u>
9			
Any Vei	ified Safety Violatio	ns: <u>Yes or No</u> (Circle One)	If Yes, explain:
Project I	escription: Replac	te 29 VAV Boxes & 5 AH	Us
Owner/	gency: Tarleton S	State University	

Year Built:	2018	Conti	ract Price:_	\$360,000-
Contact Person	: Aaron Wand	Phone:_	(254)-968	-9967
Project: Mid	lothian ISD HVAC	C Replacen	nents	
Current Status:	Complete			
Any Litigation	Issues: Yes or No	Circle One	e) If Yes, ex	plain:
Any Verified Sa	afety Violations: Y	es o(No)(0	Circle One)	If Yes, explain:
Project Descript	tion: Replace H	VAC Equip	oment, RTU	Js, Duct Mods
Owner/Agency:	Midlothian ISD			
Year Built:	2018	Contr	act Price:	\$3,200,000
Contact Person:	David Boswell	_ Phone:_	(972) 775-	-8296
Project: Mans	field Natatorium -	HVAC Re	enovation	
Current Status:_	Complete			
Any Litigation I	ssues: Yes of No	Circle One) If Yes, ex	plain:
Any Verified Sa	afety Violations: <u>Ye</u>	es of No)(C	Circle One)	If Yes, explain:
				_

Project Description: Replace dehumidification units and RTUs Owner/Agency: Mansfield ISD Year Built: 2018 Contract Price: \$1,400,000 Contact Person: Garry Walker Phone: (817) 733-9858 Project: Data Room Equipment Replacement Current Status: In Progress Any Litigation Issues: Yes of No Circle One) If Yes, explain: Any Verified Safety Violations: Yes of No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): ha Building Corp. Team Sheetmetal Angiel Electric 1: Cindy Edwards Attn: David Mason Attn: Paul Atkinson 9: Box T-1010 2033 E. Union Bower Rd 9: Wisherville, Texas 76402 Irving, TX 75061 Dallas, TX 75247			
Year Built: 2018 Contract Price: \$1,400,000 Contact Person: Garry Walker Phone: (817) 733-9858 Project: Data Room Equipment Replacement Current Status: In Progress Any Litigation Issues: Yes of No Circle One) If Yes, explain: Any Verified Safety Violations: Yes of No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): tha Building Corp. Team Sheetmetal Angiel Electric are: Cindy Edwards Attn: David Mason Attn: Paul Atkinson 9030 Directors Row Box T-1010 2033 E. Union Bower Rd 9030 Directors Row	Project Description	n: Replace dehumidification units and RTUs	
Contact Person: Garry Walker Phone: (817) 733-9858 Project: Data Room Equipment Replacement Current Status: In Progress Any Litigation Issues: Yes or No Circle One) If Yes, explain: Any Verified Safety Violations: Yes or No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): tha Building Corp. Team Sheetmetal Angiel Electric Technology (100) (Owner/Agency:_	Mansfield ISD	
Project: Data Room Equipment Replacement Current Status: In Progress Any Litigation Issues: Yes of No Circle One) If Yes, explain: Any Verified Safety Violations: Yes of No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018	Year Built:	2018 Contract Price: \$1,400,000	
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Any Litigation Issues: Yes or No Circle One) If Yes, explain: Any Verified Safety Violations: Yes or No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): ha Building Corp. Team Sheetmetal Angiel Electric in: Cindy Edwards Attn: David Mason Attn: Paul Atkinson 9030 Directors Row	Project: Data Ro	oom Equipment Replacement	
Any Litigation Issues: Yes of No Circle One) If Yes, explain: Any Verified Safety Violations: Yes of No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): the Building Corp. Team Sheetmetal Angiel Electric in: Cindy Edwards Attn: David Mason Attn: Paul Atkinson 9030 Directors Row	•	In Duo quona	
Any Verified Safety Violations: Yes of No Circle One) If Yes, explain: Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): the Building Corp. Team Sheetmetal Angiel Electric Tein: Cindy Edwards Attn: David Mason Attn: Paul Atkinson 9030 Directors Row			
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Project Description: Relocate 1 existing CRAC Unit, Replace 2 CRAC Units Owner/Agency: City of Arlington Year Built: 2018 Contract Price: \$407,000- Contact Person: Juan Serrano Phone: (817) 459-6135 references (List Company, Address, Contact Person, and Phone): ha Building Corp. Team Sheetmetal Angiel Electric a: Cindy Edwards Attn: David Mason Attn: Paul Atkinson Box T-1010 2033 E. Union Bower Rd 9030 Directors Row			
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	Project Descriptio Owner/Agency: Year Built:_ Contact Person:_J references (List Co	on: Relocate 1 existing CRAC Unit, Replace 2 CR City of Arlington 2018	AC Units
4) 965-9622 (972) 438-8225 (214) 824-6369	Project Descriptio Owner/Agency: Year Built:_ Contact Person:_J references (List Co	on: Relocate 1 existing CRAC Unit, Replace 2 CR City of Arlington 2018	tric

	Bank NA Ty Mayo	First Financial Bank Attn: Marcus Moore	Frost Insurance Company Attn: Greg Wilkerson
340 C	Grapevine Highway	891 Keller PKWY	640 Taylor
	, TX 76054 420-5552	Keller, TX 76248 (817) 329-8622	Fort Worth, TX 76102 (817) 420-5700
	yo@frostbank.com	(617) 523 6622	greg.wilkerson@frostinsurance.com
Claim	ns and Suits (if the answer to	any of the following question	ons is yes, please attached details):
1.	Has your organization ever	failed to complete any wor	k awarded to it?No
2.	Are there any judgments, cagainst your organization o	/i:	gs, or suits pending or outstanding
3.	Has your organization filed construction contracts with	any lawsuits or requested a in the last five years? <u>No</u>	rbitration with regard to
4.			al of your organization ever been failed to complete a construction
I,	Jim Bob Salter	,being duly sworn de	poses and says that the information
provi	ded herein is true and sufficie	ntly complete so as not to b	e misleading.
Date t Name	of	ober , 20 <u>18</u> .	
Organ	nization: Infinity Contractor	s International LTD.	
Ву	4	Jim Bob Salter	-
Title:	President		
STAT	TE OF TEXAS		
COU	NTY OF DALLAS		
	BEFORE ME the undersig	ned authority, on this day p	ersonally appeared
	Jim Bob Salter, knowr	n to me to be the person who	ose name subscribed to the
forego	oing instrument, and acknowl	edged to me that he execute	d the same for the
ourpo	ses and considerations therein	n expressed.	
GIVE	EN UNDER MY HAND AN	D SEAL OF OFFICE this	18 day of October 20 18.
A S	LEAH EMILY IBARRA Notary Public, State of Texas Comm. Expires 06-05-2022	BQS-12	

LEAH EMILY IBARRA
Notary Public, State of Texas
Comm. Expires 06-05-2022
Notary ID 129538142

Notary Public in and for <u>Tarrant</u> County, Texas



List of References Air Handlers

Dallas County Community College District

Attn: Sharon Wilson, P.E. 4343 IH-30 Mesquite, Texas 75150-2018 (972)-860-7763 sharonw@dcccd.edu

Reed, Wells & Benson

Attn: Ken Fulk, P.E. 12001 North Central Expressway Dallas, Texas 75243 (972)-788-4222 kfulk@rwb.net

Alpha Building Corporation

Attn: Cindy Edwards
P.O. Box T-1010
Stephenville, Texas 76402
(254)-965-9622 cedwards@alphabuilding.com

Oscar Renda Contracting

Attn: Rudy Renda Jr. 608 Henrietta Creek Road Roanoke, Texas 76262 (817)-491-2703

Tarleton State University

Attn: Aaron Wand Box T-0750 Stephenville, Texas 76402 (254)-968-9967 wand@tarleton.edu

Texas Air Systems

Attn: Tony Finch or Buddy Pace - Principal 2951 Northern Cross Blvd Suite 201 Fort Worth, Texas 76137 (817)-838-7400 tonyf@texasairsystems.com

SSC Service for Education

Attn: Michael Garon 600 Agronomy Road Suite 206 College Station, Texas 77843 (979) 446-2506 Michael.garon@compass-usa.com

Projects Completed:

Richland, Mountain View, Northlake, El Centro, Brookhaven, Eastfield, Cedar Valley - Colleges

Projects Completed:

Ornelas Dormitory Northlake College Building "E"

Projects Completed:

TSU Traditions Dormitory
TSU Huneywell Dormitory
SMU, UNT, TCCCD Projects

Projects Completed:

Eagle Mountain WTP Fort Worth SEWPP City of Houston Eastside WTP Dallas

Projects Completed:

TSU Central Plant TSU Hydronic Loop 28,000 If TSU Planetarium TSU CAE Data Rooms

Projects Completed:

Tarrant County Jail Garland Forensics Crime Lab Tarleton State University University of North Texas

Projects Completes:

TAMU Legett Hall



List of References Chillers

Dallas County Community College District

Attn: Sharon Wilson, P.E. 4343 IH-30 Mesquite, Texas 75150-2018 (972)-860-7763 sharonw@dcccd.edu

Reed, Wells & Benson

Attn: Ken Fulk, P.E. 12001 North Central Expressway Dallas, Texas 75243 (972)-788-4222 kfulk@rwb.net

DWG Engineering

Attn: D.W. Gibson, P.E. 3742 Willow Circle Weatherford, Texas 76087 (817)-441-9942

Oscar Renda Contracting

Attn: Rudy Renda Jr. 608 Henrietta Creek Road Roanoke, Texas 76262 (817)-491-2703

Tarleton State University

Attn: Aaron Wand Box T-0750 Stephenville, Texas 76402 (254)-968-9967 wand@tarleton.edu

Texas Air Systems

Attn: Tony Finch or Buddy Pace - Principal 2951 Northern Cross Blvd Suite 201 Fort Worth, Texas 76137 (817)-838-7400 tonyf@texasairsystems.com

Projects Completed:

Richland, Mountain View, Northlake, El Centro, Brookhaven, Eastfield, Cedar Valley - Colleges

Projects Completed:

Tyler Junior College Central Plant Northlake College Central Plant

Projects Completed:

UTA Steam & Chilled Water Tunnels UTA University Center UTA Hammond / Trimble Hall

Projects Completed:

Eagle Mountain WTP Fort Worth SEWPP City of Houston Eastside WTP Dallas

Projects Completed:

TSU Central Plant TSU Hydronic Loop 28,000 If TSU Planetarium TSU CAE Data Rooms

Projects Completed:

Tarrant County Jail Garland Forensics Crime Lab USPS Dallas Charleton Medical Center



List of References Direct For Owners

Dallas County Community College District

Attn: Sharon Wilson, P.E. 4343 IH-30 Mesquite, Texas 75150-2018 (972)-860-7763 sharonw@dcccd.edu

Reed, Wells & Benson

Attn: Ken Fulk, P.E. 12001 North Central Expressway Dallas, Texas 75243 (972)-788-4222 kfulk@rwb.net

Cabela's

Attn: Troy Kurz One Cabela Drive Sidney, Nebraska 69160 (308)-255-2149

Estes, McClure & Associates, Inc.

Attn: Josh Gentry, P.E., LEED 3608 West Way Tyler, Texas 75703 (903)-581-2677

Tarleton State University

Attn: Aaron Wand Box T-0750 Stephenville, Texas 76402 (254)-968-9967 wand@tarleton.edu

SSC Service for Education

Attn: Michael Garon
600 Agronomy Road Suite 206
College Station, Texas 77843
(979) 446-2506 Michael.garon@compass-usa.com

Projects Completed:

Richland, Mountain View, Northlake, El Centro, Brookhaven, Eastfield, Cedar Valley - Colleges

Projects Completed:

Tyler Junior College Central Plant Ornelas Dormitory Northlake College Central Plant Northlake College Building "E"

Projects Completed:

Cabela's Retail Store Fort Worth Texas Cabela's Retail Store Allen Texas

Projects Completed:

AISD BP#1 2009 AISD BP#7 2010 AISD BP #11 2012 AISD BP #12 2012

Projects Completed:

TSU Central Plant TSU Hydronic Loop 28,000 lf TSU Planetarium TSU CAE Data Rooms

Projects Completes:

TAMU Legett Hall



P.O. Box 33528 Fort Worth, Texas 76162-3528

January 26, 2017

Infinity Contractors International, Ltd. 2563 E Loop 820N Fort Worth, Texas 76118

To Whom It May Concern:

Great American Insurance Company is the surety for Infinity Contractors International, Ltd. Great American Insurance Company has a treasury limit in excess of \$140,000,000.00 along with an "A+ (Superior)" AM Best rating. Please consider this letter as confirmation of bondability of Infinity Contractors.

If requested by our client, Great American Insurance Company is willing to consider bid bonds, performance bonds, and payment bonds for Infinity Contractors subject to their normal underwriting consideration for single limits in the range of \$20,000,000.00 and an aggregate limit of approximately \$60,000,000.00 Great American Insurance Company is willing to consider supporting jobs which exceed this range on a job by job basis.

If you have any questions regarding this information, feel free to contact our office. This letter is not an assumption of liability, nor is it a bid bond or performance bond. It is issued only as a bonding reference when requested by our client.

Sincerely,

Greg A. Wilkerson

Senior Vice President-Frost Insurance

Surety Bond Account Manager for Infinity Contractors International, Ltd.

ext Welkan



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/29/2017

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 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 noticer in fieu of such endorsement(s).								
PRODUCER	CONTACT NAME: Tammie Thompson							
Frost Insurance Agency, Inc. P.O. Box 33528	PHONE (A/C, No, Ext): 817-420-5700 FAX (A/C, No): 817-420-575							
Fort Worth TX 76162	E-MAIL ADDRESS: tammie.thompson@frostinsurance.com							
	INSURER(S) AFFORDING COVERAGE							
	INSURER A : Employers Mutual Casualty Co	21415						
INSURED INFIN-1	INSURER B : Columbia Casualty	31127						
Infinity Contractors Int'l Ltd	INSURER C: Liberty Surplus Ins Corp							
Ten Áces, LLC; ICON Group, Ltd; Infinity Holdings, Inc.; Infinity Contractors of TX, LLC	INSURER D : Service Lloyds Group 43389							
2563 E Loop 820 N #12	INSURER E : Emcasco Insurance Co 21407							
Fort Worth TX 76118	INSURER F:							

COVERAGES CERTIFICATE NUMBER: 618984320 **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			
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			3D12770	7/1/2017	7/1/2018	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$100,000		
	**************************************						MED EXP (Any one person)	\$5,000		
	X XCU Included						PERSONAL & ADV INJURY	\$1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000		
	POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$2,000,000		
	OTHER:						Employee Benerfits	\$1,000,000		
Е	AUTOMOBILE LIABILITY			3E12770	7/1/2017	7/1/2018	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000		
	X ANY AUTO						BODILY INJURY (Per person)	\$		
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$		
								\$		
Α	X UMBRELLA LIAB X OCCUR			3J12770	7/1/2017	7/1/2018	EACH OCCURRENCE	\$5,000,000		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED X RETENTION \$\$10,000							\$		
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			SRZF2627016	7/1/2017	7/1/2018	X PER OTH-			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$1,000,000		
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$1,000,000		
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000		
B C A	Professional Liability Pollution Liability Leased/Rented Equip.			C6014222726 TIEHO104439116 3C12770	7/1/2017 7/1/2017 7/1/2017	7/1/2018	Per Claim Per Incident Leased/Rented Equip.	1,000,000 1,000,000 300,000		
DESCRIPTION OF OREDATIONS // OCATIONS // SELECTIONS // SEL										

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

CERT	IFICA	TE H	OLDER

SAMPLE ONLY-Proof of Insurance Valid Certificate will be

valid until this is completed w/name of cert holder & signed

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

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Form W-9

(Rev. November 2017) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.														
	INFINITY CONTRACTORS INT'L LTD														
	2 Business name/disregarded entity name, if different from above														
Print or type. Specific Instructions on page 3.	following seven boxes.						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):								
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation	☐ Trust/		instructions on page 3/.											
	single-member LLC	Partnership	E	Exempt payee code (if any)											
	✓ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶S														
	Note: Check the appropriate box in the line above for the tax classification of LLC if the LLC is classified as a single-member LLC that is disregarded from another LLC that is not disregarded from the owner for U.S. federal tax purposes.	n the owner unless the ow poses. Otherwise, a single	vner of the e-member	LLC is		Exemption from FATCA reporting code (if any)									
H I	is disregarded from the owner should check the appropriate box for the tax	Classification of its owner			(A	(Applies to accounts maintained outside the U.S.)									
bed	Other (see instructions) ► 5 Address (number, street, and apt. or suite no.) See instructions.	T	Requester	quester's name and address (optional)											
S		1	rioquester s riamo ana acaross (optional)												
See	2563 E LOOP 820 N 6 City, state, and ZIP code														
	Cart Sales (Sales Victor) (Sales Reads (SALes Sales Assessed														
	FORT WORTH TX 76118														
	7 List account number(s) here (optional)														
Par															
Entery	your TIN in the appropriate box. The TIN provided must match the name	given on line 1 to avoi		ocial se	ecurity number										
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other								-							
entities	s, it is your employer identification number (EIN). If you do not have a nu	mber, see How to get	a L			L		J	Ш						
	TIN, later.														
Note:	If the account is in more than one name, see the instructions for line 1.	Also see What Name ar	nd 🖺	mpioye	riae	r identification number									
Numb	er To Give the Requester for guidelines on whose number to enter.		1 5	6 6	_	2	2 8	8	8	9	6				
	The same of the sa								2000	200					
Part					_										
	penalties of perjury, I certify that:						\-								
1. 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 2. 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									nue at I am						
	a U.S. citizen or other U.S. person (defined below); and														
	FATCA code(s) entered on this form (if any) indicating that I am exempt	from FATCA reporting	is correc	ct.											
Certifi	cation instructions. You must cross out item 2 above if you have been not	ified by the IRS that you	are curre	ently sul	bjec	t to b	ackup	with	hold	ing b	ecause				
you ha	we failed to report all interest and dividends on your tax return. For real esta ition or abandonment of sec ured property, cancellatio n of debt, contribution han interest and dividends, you are not required to sign the certification, but	te transactions, item 2 c ns to an individual retire	does not a ment arra	apply. F ngemer	or n	nortg: RA), a	age in ind ge	teres neral	t pai	a, ayme	ents				
Sign	Signature of	6.			T										
Here	U.S. person	Da	ate ▶	0/18	3/1	3									
	neral Instructions	 Form 1099-DIV (dividual) 	idends, ir	ncluding	gth	ose f	rom s	tock	s or I	nutu	al				
noted.		Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)													
related	e developments. For the latest information about developments I to Form W-9 and its instructions, such as legislation enacted	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)													
after they were published, go to www.irs.gov/FormW9. • Form 1099-S (proceeds from real published).															
Pur	pose of Form	Form 1099-K (merchant card and third party network transactions)													
	ividual or entity (Form W-9 requester) who is required to file an	 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 													
identif	ation return with the IRS must obtain your correct taxpayer cation number (TIN) which may be your social security number	 Form 1099-C (canceled debt) 													
(SSN).	individual taxpayer identification number (ITIN), adoption	 Form 1099-A (acquisition or abandonment of secured property) 													
taxpay	rer identification number (ATIN), or employer identification number to report on an information return the amount paid to you, or other at reportable on an information return. Examples of information	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.							nt						
returns include, but are not limited to, the following. • Form 1099-INT (interest earned or paid) • Form 1099-INT (interest earned or paid)							9 to the requester with a TIN, you might ng. See What is backup withholding,								
. 0.11	orm 1099-INT (Interest earned or paid)														