



Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

State of West Virginia  
 Request for Quotation  
 09 - Construction

Proc Folder: 93827

Doc Description: ADDENDUM 1: OPEN-END CONTRACT FOR ELEVATOR MAINTENANCE

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2015-05-12	2015-05-27 13:30:00	CRFQ 0506 HHR1500000005	2

**BID CLERK**  
 DEPARTMENT OF ADMINISTRATION  
 PURCHASING DIVISION  
 2019 WASHINGTON ST E  
 CHARLESTON WV 25305  
 US

**Vendor Name, Address and Telephone Number:**

**Jeff Havens**  
 Sr. Sales Consultant



**KONE Inc.**  
 Columbus  
 735 Cross Pointe Rd.  
 Ste. G  
 Gahanna, OH 43230  
 www.kone.us

Phone 614.866.1751 Ext 213  
 Cell 614.402.8198  
 Fax 614.866.3240  
 jeff.havens@kone.com

05/26/15 15:55:23  
 WV Purchasing Division

**FOR INFORMATION CONTACT THE BUYER**  
 Robert Kilpatrick  
 (304) 558-0067  
 robert.p.kilpatrick@wv.gov

Signature X *Jeff Havens* FEIN # 36-2357423 DATE 5-26-15

All offers subject to all terms and conditions contained in this solicitation

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Corrective Maintenance - Flat Hourly Rate	50.00000	HOUR	\$150.00	\$7,500-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Corrective Maintenance - Flat Hourly Rate.

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Percentage Markup for Parts	1.00000	EA	1.15%	\$11,500-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

See Specifications Section 5.2

Total of \$10,000 in estimated parts times markup multiplier of 1.XX where XX equals the percentage vendor will markup applicable parts.

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Elevator Maintenance Monthly Cost Elevator 1 - 350 Cap.	12.00000	MO	\$225.00	\$2,700-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Elevator Maintenance Monthly Cost - Elevator 1 Dover/Otis BJ9967 - 350 Capitol Street

BUYER		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Elevator Maintenance Monthly Cost Elevator 2 - 350 Cap.	12.00000	MO	\$ 225.00	\$2,700-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Preventative Maintenance Monthly Cost - Elevator 2 Dover/Otis BJ9968 - 350 Capitol Street

BUYER		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Elevator Maintenance Monthly Cost Elevator 3 - 350 Cap.	12.00000	MO	\$ 225.00	\$2,700-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Preventative Maintenance Monthly Cost Elevator 3 Dover/Otis BJ9969 - 350 Capitol Street

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Elevator Maintenance Monthly Cost Elevator 4 - 350 Cap.	12.00000	MO	\$225.00	\$2,700-

Comm Code	Manufacturer	Specification	Model #
72101506			

## Extended Description :

Preventative Maintenance Monthly Cost Elevator 4 Otis/Otis 1025687350 Capitol Street

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Elevator Maintenance Monthly Cost Elevator 1 - 500 Cap.	12.00000	MO	\$110.00	\$1,320-

Comm Code	Manufacturer	Specification	Model #
72101506			

## Extended Description :

Preventative Maintenance Montly cost Elevator 1 Dover/Dover EK3944 - 500 Capitol Street

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Elevator Maintenance Monthly Cost Elevator 2 - 500 Cap.	12.00000	MO	\$110.00	\$1,320-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Preventative Maintenance Monthly Cost Elevator 2 Dover/Dover EK3074 - 500 Capitol Street

BUYER - 304-957-0209	BUYER - 304-957-0209
HEALTH AND HUMAN RESOURCES OFFICE OF OPERATIONS ONE DAVIS SQUARE, RM 115 CHARLESTON WV25301 US	HEALTH AND HUMAN RESOURCES OPERATIONS DIAMOND PROJECT 350 CAPITOL ST CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Elevator Maintenance Monthly Cost Elevator 1 - 619 Virg.	12.00000	MO	\$110.00	\$1,320-

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Elevator Maintenance Monthly Cost Elevator 1 ThyssenKrupp/ThyssenKrupp EU3333 - 619 Virginia St. West.

HHR1500000005	<b>Document Phase</b> Draft	<b>Document Description</b> ADDENDUM 1: OPEN-END CONTRACT FOR ELEVATOR MAINTENANCE	<b>Page 6</b> of 6
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

## ATTACHMENT A

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: HHR150000005**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

(Check the box next to each addendum received)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input type="checkbox"/> Addendum No. 2            | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

KOWE, Inc.

Company

Jeff Havens

Authorized Signature

5-26-15

Date

**NOTE:** This addendum acknowledgment should be submitted with the bid to expedite document processing.  
Revised 6/8/2012



CRFQ 0506 HHR150000005: ATTACHMENT A: PRICING PAGE

Location Name	Capacity	Type	Landings	Monthly Cost	Quantity	Yearly Cost
<b>Diamond Bldg, 350 Capitol Street</b>						
Elevator #1	2500	Traction	8	\$ 225 <sup>-</sup>	12	\$ 2700 <sup>-</sup>
Elevator #2	2500	Traction	8	\$ 225 <sup>-</sup>	12	\$ 2700 <sup>-</sup>
Elevator #3	5000	Traction	9	\$ 225 <sup>-</sup>	12	\$ 2700 <sup>-</sup>
Freight Elevator	4000	Traction	4	\$ 225 <sup>-</sup>	12	\$ 2700 <sup>-</sup>

**Parking Garage, 500 Capitol Street**

Elevator #1	2500	Hydraulic	8	\$ 110 <sup>-</sup>	12	\$ 1320 <sup>-</sup>
Elevator #2	2500	Hydraulic	8	\$ 110 <sup>-</sup>	12	\$ 1320 <sup>-</sup>

**OCME, 619 Virginia Street West**

Elevator #1	2000	Hydraulic	2	\$ 110 <sup>-</sup>	12	\$ 1320 <sup>-</sup>
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FLAT MONTHLY RATE (Total all Monthly Costs from Above) =

\$ 1230<sup>-</sup>

Total Yearly Charge (Total all Yearly Costs from Above) =

\$ 14,760<sup>A</sup>

Cost for Parts

\$10,000.00

x Markup multiplier of

1.15

=

\$ 11,500<sup>B</sup>

Markup Multiplier is percentage of 15% Converted to Multiplier per PARTS MARKUP (See 5.2 of Specifications)

Flat Hourly Rate

\$150<sup>-</sup> x 50 HOURS (Estimated)

=

\$ 7,500<sup>C</sup>

TOTAL BID (Add A + B + C to calculate D)

= \$ 33,760<sup>D</sup>

CONTACT INFORMATION

Company Name:

\_\_\_\_\_

Company Address:

\_\_\_\_\_

\_\_\_\_\_

Contact Name:

\_\_\_\_\_

Contact Phone Number:

\_\_\_\_\_

Contact Fax Number:

\_\_\_\_\_

Contact Email Address:

\_\_\_\_\_

24-Hour Phone Number for Callback Services:

(877) 276-8691

Fax/Email for Delivery Order Receipt

jeff.havens@KONE.com

Elevators  
Escalators



Jeff Havens  
Sr. Sales Consultant

KONE Inc.  
Columbus  
735 Cross Pointe Rd.  
Ste. G  
Gahanna, OH 43230  
www.kone.us

Phone 614.866.1751 Ext 213  
Cell 614.402.8198  
Fax 614.866.3240  
jeff.havens@kone.com

**REQUEST FOR QUOTATION  
CRFQ 0506 HHR1500000005 Elevator Maintenance**

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- 10.1.1 Failure to perform Contract Services in accordance with requirements contained herein.
  - 10.1.2 Failure to comply with other specifications and requirements contained herein.
  - 10.1.3 Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.
  - 10.1.4 Failure to remedy deficient performance upon request.
- 10.2 The following remedies shall be available to Agency upon default.
- 10.2.1 Cancellation of the Contract.
  - 10.2.2 Cancellation of one or more release orders issued under this Contract.
  - 10.2.3 Any other remedies available in law or equity.

**11. MISCELLANEOUS:**

- 11.1 **No Substitutions:** Vendor shall supply only Contract Services submitted in response to the RFQ unless a contract modification is approved in accordance with the provisions contained in this Contract.
- 11.2 **Contract Manager:** During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address and customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Jeff Havens  
Telephone Number: (614) 402-8198  
Fax Number: (614) 866-3240  
Email Address: jeff.havens@kove.com

## CRFQ 0506 HHR150000005: Attachment B: Equipment Listing

LocationName	SerialNo.	Capacity	Make (Manufacture/ Hoist)	Location	Type	Land	Date Renovated	Last Full Load Test	Last No Load Test	State Inspection
350 Capitol Street, Elevator #1	BJ9967	2,500	Dover/Otis	Diamond	Traction	8	1999	Feb 2014	Mar 2015	Mar 2015
350 Capitol Street, Elevator #2	BJ9968	2,500	Dover/Otis	Diamond	Traction	8	1999	Feb 2014	Mar 2015	Mar 2015
350 Capitol Street, Elevator #3	BJ9969	5,000	Dover/Otis	Diamond	Traction	9	1999	Feb 2014	Mar 2015	Mar 2015
350 Capitol Street, Elevator #4	1025687	4,000	Otis/Otis	Diamond	Traction	4	1960	Feb 2012	Mar 2015	Mar 2015
500 Capitol Street, Elevator #1	EK3944	2,500	Dover/Dover	Garage	Hydraulic	8	1999 (New)	—	Feb 2015	Feb 2015
500 Capitol Street, Elevator #2	EK3074	2,500	Dover/Dover	Garage	Hydraulic	8	1999 (New)	—	Feb 2015	Feb 2015
619 Virginia Street West, Elevator #1	EU53333	2,000	ThyssenKrupp/ ThyssenKrupp	OCME	Hydraulic	2	2005	—	Feb 2015	Feb 2015

RFQ No. BHR1500000005

STATE OF WEST VIRGINIA  
Purchasing Division

**PURCHASING AFFIDAVIT**

**MANDATE:** Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

**DEFINITIONS:**

**"Debt"** means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

**"Employer default"** means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

**"Related party"** means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

**AFFIRMATION:** By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

**WITNESS THE FOLLOWING SIGNATURE:**

Vendor's Name: KONE Inc.  
Authorized Signature: Jeff Hawens Date: 5-26-15

State of Ohio  
County of Franklin, to-wit:

Taken, subscribed, and sworn to before me this 26<sup>th</sup> day of May, 2015.  
My Commission expires May 27<sup>th</sup>, 2018.

AFFIX SEAL HERE



NOTARY PUBLIC

God. Stepler  
Purchasing Affidavit (Revised 07/01/2012)

WV-73  
Rev. 08/2013



State of West Virginia  
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT  
West Virginia Code §21-1D-5

STATE OF WEST VIRGINIA,  
COUNTY OF Kanawha, TO-WIT:

I, Jeff Havens, after being first duly sworn, depose and state as follows:

- 1. I am an employee of KONE, Inc.; and,  
(Company Name)
- 2. I do hereby attest that KONE, Inc.  
(Company Name)

maintains a valid written drug free workplace policy and that such policy is in compliance with **West Virginia Code §21-1D.**

The above statements are sworn to under the penalty of perjury.

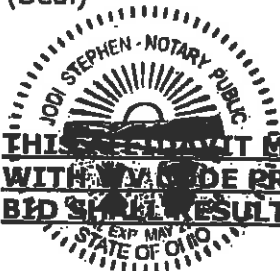
Our drug free  
work program  
#20005282-ODFW

By: Jeff Havens  
Title: Senior Sales Consultant  
Company Name: KONE, Inc.  
Date: 5-26-15

Taken, subscribed and sworn to before me this 26<sup>th</sup> day of May, 2015.

By Commission expires May 27<sup>th</sup>, 2018

(Seal)



Jodi Stephen  
(Notary Public)

**THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH ALL BIDDING PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.**

# CONTRACTOR LICENSE

Authorized by the

## West Virginia Contractor Licensing Board

**Number:** WV000551

**Classification:**  
SPECIALTY

KONE INC  
DBA KONE INC  
1 KONE COURT  
MOLINE, IL 61265-1380

**Date Issued**

SEPTEMBER 07, 2014

**Expiration Date**

SEPTEMBER 07, 2015



Authorized Company Signature



Chair, West Virginia Contractor  
Licensing Board

**WEST VIRGINIA  
CONTRACTOR  
LICENSING  
BOARD**

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.



# AIA Document A310™ - 2010

## Bid Bond

**CONTRACTOR:**

*(Name, legal status and address)*

KONE INC.  
One Kone Court  
Moline, IL 61265

**SURETY:**

*(Name, legal status and principal place of business)*

FIDELITY AND DEPOSIT COMPANY OF MARYLAND  
1400 American Lane, Tower I, 18th Floor  
Schaumburg, IL 60196-1056

**OWNER:**

*(Name, legal status and address)*

STATE OF WEST VIRGINIA  
2019 Washington Street East, Charleston, WV 25305

**BOND AMOUNT:** Five percent of amount bid.  
(5% of Amount Bid)

**PROJECT:**

*(Name, location or address, and Project number, if any)*

Elevator Maintenance

Project Number, if any:

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

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

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

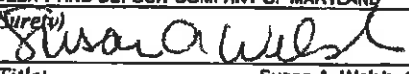
Signed and sealed this 26th day of May, 2015

  
*(Witness)* Samantha Chierici

  
KONE INC. *(Principal)* *(Seal)*

  
*(Title)* Melissa L. Fortier, Attorney-in-Fact

  
*(Witness)* Judy Andersen

FIDELITY AND DEPOSIT COMPANY OF MARYLAND  
  
*(Surety)* *(Seal)*  
*(Title)* Susan A. Welsh, Attorney In Fact

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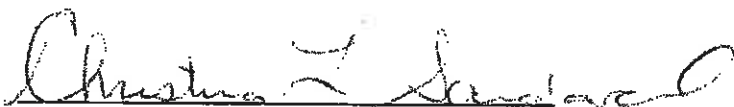
**ACKNOWLEDGEMENT BY SURETY**

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**STATE OF ILLINOIS  
COUNTY OF COOK**

On this 26<sup>th</sup> day of May, 2015, before me, Christina L. Sandoval, a Notary Public, within and for said County and State, personally appeared Susan A. Welsh to me personally known to be the Attorney-in-Fact of and for Fidelity and Deposit Company of Maryland and Melissa L. Fortier to me personally known to be the Attorney-in-Fact of and for KONE Inc. and acknowledged that they executed the said instrument as the free act and deed of said Company.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, at my office in the aforesaid County, the day and year in this certificate first above written.



Notary Public in the State of Illinois  
County of Cook





Exhibit A

Special Power of Attorney

KNOW ALL MEN BY THESE PRESENTS that KONE Inc., has made, constituted and appointed and by these presents does make, constitute and appoint Susan A. Welsh, Sandra M. Winsted, Melissa L. Fortier, Christina L. Sandoval, and Jeffrey M. Leadley as its true and lawful attorneys in fact with full power to execute, seal and deliver on its behalf surety bonds and other documents of similar character issued in the course of its business and to bind the Company thereby as if such writings had been duly executed and acknowledged by its officers. This Power of Attorney shall be explicitly limited to bond requests made in writing on KONE Surety Request Form by KONE Inc.'s Law Department or by any Branch Office.

IN WITNESS WHEREOF, KONE Inc. and Konematic, Inc. d/b/a Door Systems, Inc. have each caused their respective name to be subscribed by John Dahlquist Jr, Assistant Secretary and Khanh Josephson, Assistant Secretary respectively, and its corporate seal to be affixed and attested by Assistant Secretaries on this 20th day of February, 2015

Attest:

By: [Signature]  
KONE Inc.  
John Dahlquist Jr.  
Assistant Secretary

By: [Signature]  
Konematic, Inc. d/b/a Door Systems, Inc.  
Khanh Josephson  
Assistant Secretary

State of Illinois  
County of De Witt

On this 20 day of February, 2015 personally appeared before me, a Notary Public for the State of Illinois, John Dahlquist Jr., Assistant Secretary of KONE Inc. and Khanh Josephson, Assistant Secretary of Konematic, Inc. d/b/a Door Systems, Inc., who acknowledged that the foregoing is his free and voluntary act and deed on behalf of said corporation.



[Signature]  
Notary Public, State of Illinois  
My Commission Expires: 2-25-2018

**ZURICH AMERICAN INSURANCE COMPANY  
 COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
 FIDELITY AND DEPOSIT COMPANY OF MARYLAND  
 POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Maryland, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Maryland (herein collectively called the "Companies"), by **THOMAS O. MCCLELLAN, Vice President**, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint Sandra M. WINSTED, Susan A. WELSH, Judith A. LUCKY-EFTIMOV, James B. MCTAGGART, Debra J. DOYLE, Sandra M. NOWAK, Melissa L. FORTIER, Jessica B. YATES and Diane M. O'LEARY, all of Chicago, Illinois, EACH its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York, the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland, and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland, in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 5th day of September, A.D. 2014.

ATTEST:

ZURICH AMERICAN INSURANCE COMPANY  
 COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
 FIDELITY AND DEPOSIT COMPANY OF MARYLAND



By: *Michael McKibben*  
 Secretary  
 Michael McKibben

*Thomas O. McClellan*  
 Vice President  
 Thomas O. McClellan

State of Maryland  
 County of Baltimore

On this 5th day of September, A.D. 2014, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, THOMAS O. MCCLELLAN, Vice President, and MICHAEL MCKIBBEN, Secretary, of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, deposed and said, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.

*Maria D. Adamski*  
 Maria D. Adamski, Notary Public  
 My Commission Expires: July 8, 2015



**EXTRACT FROM BY-LAWS OF THE COMPANIES**

"Article V, Section 8, Attorneys-in-Fact. The Chief Executive Officer, the President, or any Executive Vice President or Vice President may, by written instrument under the attested corporate seal, appoint attorneys-in-fact with authority to execute bonds, policies, recognizances, stipulations, undertakings, or other like instruments on behalf of the Company, and may authorize any officer or any such attorney-in-fact to affix the corporate seal thereto; and may with or without cause modify or revoke any such appointment or authority at any time."

**CERTIFICATE**

I, the undersigned, Vice President of the ZURICH AMERICAN INSURANCE COMPANY, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that Article V, Section 8, of the By-Laws of the Companies is still in force.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the ZURICH AMERICAN INSURANCE COMPANY at a meeting duly called and held on the 15th day of December 1998.

RESOLVED: "That the signature of the President or a Vice President and the attesting signature of a Secretary or an Assistant Secretary and the Seal of the Company may be affixed by facsimile on any Power of Attorney...Any such Power or any certificate thereof bearing such facsimile signature and seal shall be valid and binding on the Company."

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at a meeting duly called and held on the 5th day of May, 1994, and the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seals of the said Companies, this 22 day of May, 2015.



*Michael Bond*

Michael Bond, Vice President