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City Council Contract Agenda Items Review Checklist

Reviewer: Wesley Norris **Date Received: December 11, 2015**

Date: 12/11/15 Department: General Services Division Division: General Services Division

Dept Head/Contact Person: Ed Porche Phone No.: 313-628-0910

Description: Electrical Services

Contract No.: 2895764 - A2 PO Type: CPO Est. Value: **$237,000.00**
$705,000.00 + 237,000.00 = $942,000.00

Contract Term (if applicable): Upon City Council and/or FRC Approval to June 30, 2017

Funding: City 100%

Recommended Supplier: **Power Lighting and Technical Services**
Required Date: Immediately

---

1. The business being awarded is a RENEWAL. If a renewal, provide justification for renewal:
   REPAIR SERVICES TO MULTIPLE CITY LOCATIONS WHERE THERE ARE HVAC SYSTEMS

2. Was the product or service competitively bid? ☒Yes ☐No
   Attach Copy of Bid Tabulation/Evaluation score sheets as needed
   If the answer to #2 is "NO" explain why there was no competition:

3. Was a Co-Operative Agreement Considered? ☐Yes ☒No Co-Operative Name: _____
   If answer to #3 is "No" explain why a Co-Op was not considered:

4. Were savings achieved?
   ☐Yes Amount $_____ ☒No

5. Does this agreement represent an increase? No
   ☐ Variance in unit price only (Current unit price $0.00 Proposed Unit Price $0.00)
   ☒ Change in amount/volume of the good or service to be used.

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6. Does the supplier currently provide other goods and services to the City? ☒Yes ☐No
   If yes please list: _____

7. Is this good/service used by other departments? ☒Yes ☐No
   If "yes" can this Req/PAR be combined other department requirements? ☒Yes ☐No

8. Is this a service that can be performed by City employees? ☐Yes ☒No
   Is this a service that City employees can be trained to do? ☐Yes ☒No

NOTES: Buyer: Wesley Norris
a. Excluded Parties List / Supplier Award Management Website Reviewed? Yes x

☐ **PLACE ON FINANCIAL REVIEW COMMISSION AGENDA**

☒ **PLACE ON CITY COUNCIL AGENDA**

☐ **REJECT AND NOTIFY DEPARTMENT DIRECTOR:**

SIGNED: _____ DATE: 12/11/15
(Department)

INFORMATION PROVIDED BY: Wesley Norris

TITLE: Project Manager

PHONE: 224-4611

Y.GAINES

ELECTRICAL - LABOR RATES

BID TABULATION

7/9/2014

ASSUMPTIONS	Supplier 4		
D-BB's		Keo & Associates 18286 Wyoming St. Detroit, MI	
D-RB's			
D-BB's w/HQ in Detroit			
D-BSB's			
D-BMBC			
Joint Venture			
Mentor Venture			
	UNITS	UNIT PRICE	TOTAL PRICE
Straight time - Journeyman	1	121	$121.00
Straight time - Apprentice	1	102	$102.00
After Hours - Journeyman	1	181	$181.00
After Hours- Apprentice	1	153	$153.00
Sun & Holidays - Journeyman	1	242	$242.00
Sun & Holidays - Apprentice	1	204	$204.00
Emergency - Journeyman	1	242	$242.00
Emergency - Apprentice	1	204	$204.00
UP TO $10,000.00	0.05		$0.00
$10,000.01-$100,000.00	0.04		$0.00
$100,000.01-$500,000.00	0.03		$0.00
$500,000.01 AND OVER	0.02		$0.00
D-RB's			$0.00
D-BB's w/HQ in Detroit	0.03		$0.00
D-BSB's	0.01		$0.00
D-BMBC	0.02		$0.00
Joint Venture	0.02		$0.00
Mentor Venture	0.01		$0.00

ASSUMPTIONS	Supplier 5		
D-BB's		Power Lighting and Technical Services 10824 West Chicago, Detroit, MI	
D-RB's	1		
D-BB's w/HQ in Detroit			
D-BSB's			
D-BMBC			
Joint Venture			
Mentor Venture			
	UNITS	UNIT PRICE	TOTAL PRICE
Straight time - Journeyman	1	45	$45.00
Straight time - Apprentice	1	25	$25.00
After Hours - Journeyman	1	50	$50.00
After Hours- Apprentice	1	30	$30.00
Sun & Holidays - Journeyman	1	65	$65.00
Sun & Holidays - Apprentice	1	45	$45.00
Emergency - Journeyman	1	90	$90.00
Emergency - Apprentice	1	65	$65.00
UP TO $10,000.00	0.05		$0.00
$10,000.01-$100,000.00	0.04		$0.00
$100,000.01-$500,000.00	0.03		$0.00
$500,000.01 AND OVER	0.02		$0.00
D-RB's			$0.00
D-BB's w/HQ in Detroit	0.03		$0.00
D-BSB's	0.01		$0.00
D-BMBC	0.02		$0.00
Joint Venture	0.02		$0.00
Mentor Venture	0.01		$0.00

ASSUMPTIONS	Supplier 6		
D-BB's			
D-RB's			
D-BB's w/HQ in Detroit			
D-BSB's			
D-BMBC			
Joint Venture			
Mentor Venture			
	UNITS	UNIT PRICE	TOTAL PRICE
			$0.00
			$0.00
			$0.00
			$0.00
			$0.00
			$0.00
			$0.00
			$0.00
UP TO $10,000.00	0.05		$0.00
$10,000.01-$100,000.00	0.04		$0.00
$100,000.01-$500,000.00	0.03		$0.00
$500,000.01 AND OVER	0.02		$0.00
D-RB's			$0.00
D-BB's w/HQ in Detroit	0.03		$0.00
D-BSB's	0.01		$0.00
D-BMBC	0.02		$0.00
Joint Venture	0.02		$0.00
Mentor Venture	0.01		$0.00

The lowest bidder is Power Lighting and Technical Services

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CITY OF DETROIT
AMENDMENT AGREEMENT NO. 2
TO CONTRACT NO. 2895764

THIS AMENDMENT AGREEMENT NO. is entered into by and between the City of Detroit, a Michigan municipal corporation, acting by and through its General Services Department Department ("City"), and POWER LIGHTING AND TECHNICAL SERVICES INC, a MI Corporation with its principal place of business located at 10824 W. CHICAGO, SUITE A, DETROIT, MI 48204.

WITNESSETH:

WHEREAS, the City has engaged the Contractor to provide certain services ("Services") to the City; and

WHEREAS, the City and the Contractor have entered into a Contract reflecting the terms and conditions governing the subject engagement; and

WHEREAS, f the Contract permits the parties to amend the Contract by mutual agreement; and

WHEREAS, it is the mutual desire of the parties to enter into this Amendment to amend the Contract as set out in detail in the following sections;

NOW, THEREFORE, in consideration of the foregoing, and of the benefits to accrue to the parties from this Amendment, the parties agree that this Contract is amended as follows:

1. AMENDMENT to COMPENSATION

1.01 Section which now reads: Amount Agreed: **$705,000.00 + $237,000.00**

Is amended to read: Amount Agreed: **$942,000.00**

2. EFFECT OF AMENDED TERMS ON THE REMAINING PROVISIONS OF THE CONTRACT

5.01 With the exception of the provisions of the Contract specifically contained in this Amendment, all other terms, conditions and covenants contained in the Contract shall remain in full force and effect and as set forth in the Contract.

3. AMENDMENT AUTHORIZATION

6.01 This Amendment to the Contract shall not become effective until:

a) The Amendment has been approved by the required City departments;

b) The Amendment has been authorized by resolution of the City Council; and

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c) The Amendment has been signed by the City's Purchasing Director.

Prior to the approvals set forth in this Section, the Finance Director shall not authorize any payments to the Contractor pursuant to this Amendment, nor shall the City incur any liability to pay for any services or to reimburse the Contractor for any expenditure authorized by this Amendment.

IN WITNESS WHEREOF, the City and the Contractor, by and through their duly authorized officers and representatives, have executed this Amendment.

WITNESSES:

1. _____ (signature)

Martin Paris (print name)

2. _____ (signature)

Allen Lee (print name)

CONTRACTOR:

BY: _____ (signature)

Angel Paris (print name)

ITS: President (title)

WITNESSES:

1. _____ (signature)

Zachary Meers (print name)

2. _____ (signature)

Justin Fenwick (print name)

CITY OF DETROIT DEPARTMENT:

BY: _____ (signature)

BRAD DIX (print name)

ITS: Director (title)

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THIS AMENDMENT WAS APPROVED BY THE CITY COUNCIL ON: 1/12/2016

DocuSigned by:
Boysie Jackson 1/21/2016
E7BD9F26E53A4D0...
Purchasing Director Date

APPROVED BY LAW DEPARTMENT PURSUANT TO SECTION 6-406 OF THE CHARTER OF THE CITY OF DETROIT

DocuSigned by:
James Edwards 1/19/2016
23C12D9E4C0A41D...
Corporation Counsel Date

THIS AMENDMENT IS NOT VALID OR AUTHORIZED UNTIL APPROVED BY RESOLUTION OF THE CITY COUNCIL AND SIGNED BY THE PURCHASING DIRECTOR.

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Please [redacted] Process. Thx!

NOV 09 2015

REQUEST FOR INCOME TAX CLEARANCE

REQUESTING DEPARTMENT/DIVISION: Purchasing

CONTACT NAME: Wesley Norris E-MAIL ADDRESS: NORRISW@DETROITMI.GOV PHONE: 224-4611 FAX:

Type of Clearance: ☐ New ☐ Renewal (Please submit 30 days prior to submitting bid or expiration date)

A. To: City of Detroit, Income Tax Division, Coleman A. Young Municipal Center, 2 Woodward Avenue, Ste. 1220, Detroit, MI 48226

Phone: (313) 224-3328 or 224-3329
Fax: (313) 224-4588

For: Individual or Company Name: Power Lighting & Technical Services

Address: 10824 West Chicago, Suite 200

City: Detroit

State: Michigan Zip Code: 48204

Telephone: 313-515-7790 Fax #: 313-935-0499

E-mail Address: pwr.lite.tech@gmail.com

* perferred

B. Name of Chief Financial Officer/Authorized Contact Person (Include address if different from above): Angel Pacis (email perferred) →

Telephone #: 313-515-7790

Fax #: 313-935-0499

Employer Identification or Social Security Number: 45-4209117

Spouse Social Security Number:

Nature of Contract: Electrical Construction

BID CONTRACT AMOUNT (if known): Labor: $ Material: $

Contract # (if known) $237,000.00

C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.

Check One: ☐ Individual ☒ Corporation ☐ Partnership ☐ Estate & Trust

INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

1. Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above) ☐ Yes ☐ No
2. Are you a student, and/or claimed as a dependent on someone else's tax return? ☐ Yes ☐ No
3. Were you employed in the City of Detroit during the last seven (7) years? ☐ Yes ☐ No
4. Were you a resident of Detroit during the last seven (7) years? ☐ Yes ☐ No

CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

5. Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS-4). ☐ Yes ☒ No
6. Will the company have employees working in Detroit? ☒ Yes ☐ No
7. Will the company use sub-contractors or independent contractors in Detroit? [redacted] ☒ No

D. FOR INCOME TAX USE ONLY

Has the contractor complied with the provisions of the City Income Tax Ordinance?

☐ Yes ☒ No Signature LUCRETIA JENNINGS INCOME TAX INVESTIGATOR Date DEC 03 2015 Expires

☒ Yes ☐ No Signature LUCRETIA JENNINGS INCOME TAX INVESTIGATOR Date DEC 11 2015 Expires DEC 11 2016

☐ Yes ☐ No Signature Date Expires

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: www.detroitmi.gov

NOTE: An approved Income Tax Clearance

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CPO # 2895764

2 WOODWARD AVENUE, SUITE 105, COLEMAN A YOUNG MUNICIPAL CENTER
REVENUE COLLECTIONS UNIT (313) 224-4087 / FAX: 224-4238 / RevenueCollections@DetroitMI.gov

☐ SECTION A: BUSINESS LICENSE / BUDGET / CITY COUNCIL / DCOT / DPW / FINANCE / FIRE / HEALTH / HUMAN RIGHTS / LAW / MAYOR / OMBUDSMAN / PLANNING& DEVELOPMENT / POLICE / PURCHASING / RECREATION / WATER & SEWAGE / OTHER

ADDRESS OF DEPARTMENT

DATE SENT October 26, 2015 CONTACT PERSON Angel Paris

PHONE NUMBER 313-515-7790 FAX NUMBER 313-935-0494 EMAIL pwr.lite.tech@gmail.com

CONTRACT AMOUNT $ 237,000.00

☐ SECTION B: CORPORATION

CORPORATION NAME Power Lighting & Technical Services LICENSE TYPE Electrical Contractor

ADDRESS 10824 West Chicago Road Suite 200 CITY/STATE/ZIP Detroit

CITY PERSONAL PROPERTY NUMBER ☐ OWN ☒ LEASE

OTHER CITY-OWNED PROPERTY PARCELS FID / EIN NUMBER 45-4209117

CONTACT PERSON Angel Paris PHONE NUMBER 313-515-7790 EMAIL ADDRESS pwr.lite.Tech@gmail

☐ SECTION C: PARTNERSHIP

BUSINESS NAME LICENSE TYPE

BUSINESS ADDRESS

CITY PERSONAL PROPERTY NUMBER CITY/STATE/ZIP ☐ OWN ☐ LEASE

A: PARTNER'S NAME FID / EIN NUMBER

HOME ADDRESS PHONE NUMBER

DRIVER'S LICENSE # CITY/STATE/ZIP

OTHER CITY-OWNED PROPERTY PARCELS ☐ OWN ☐ LEASE

B. PARTNER'S NAME

HOME ADDRESS PHONE NUMBER

DRIVER'S LICENSE # CITY/STATE/ZIP

OTHER CITY-OWNED PROPERTY PARCELS ☐ OWN ☐ LEASE

CONTACT PERSON PHONE NUMBER EMAIL ADDRESS

☐ SECTION D: SOLE PROPRIETORSHIP

BUSINESS NAME LICENSE TYPE

BUSINESS ADDRESS

CITY PERSONAL PROPERTY NUMBER CITY/STATE/ZIP ☐ OWN ☐ LEASE

OWNER'S NAME FID / EIN NUMBER

HOME ADDRESS DRIVER'S LICENSE # PHONE NUMBER

OTHER CITY-OWNED PROPERTY PARCELS CITY/STATE/ZIP

EMAIL ADDRESS ☐ OWN ☐ LEASE

☐ SECTION E: PERSONAL SERVICES

NAME

CITY/STATE/ZIP ADDRESS

PHONE NUMBER ☐ OWN ☐ LEASE

OTHER PROPERTY ADDRESSES OWNED IN WITHIN DETROIT DRIVER LICENSE #

SOCIAL SECURITY NUMBER EMAIL ADDRESS

FOR TREASURY COLLECTION USE ONLY:

☐ APPROVED ☐ DENIED

☐ DENIED WITH ATTACHMENTS

REVENUE COLLECTIONS
APPROVED
CONTRACT CLEARANCES

Annette Smith

NOV 16 2015

CLEARANCE VALID UNTIL JAN 15 2016

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REVISED 7-12-2012

COVENANT OF EQUAL OPPORTUNITY

(Application for Clearance – Terms Enforced After Contract is Awarded)

I, being a duly authorized representative of Power Lighting & Technical Services, (hereinafter "Contractor"), am hereby authorized to enter into a Covenant of Equal Opportunity, (hereinafter "Covenant") with the City of Detroit, ("hereinafter" City); obligating the Contractor and all sub-contractors, not to discriminate against any employee or applicant for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his/her hire, promotion, job assignment, tenure, terms, conditions or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression; except as otherwise exempted under City Code, Ordinance No. 27-2-12.

Contractor will ensure that the City of Detroit Human Rights Department shall receive notification of all potential sub-contractors and a copy of their Covenant prior to the commencement of work on any City of Detroit contract. Contractor further agrees that the City of Detroit reserves the right to require additional information prior to, during, and at any time after the Covenant is fully executed.

Furthermore, Contractor agrees that this Covenant is valid for the life of the contract and/or for a specified period of time as indicated below and that a breach of this Covenant shall be deemed a material breach of contract and be subject to damages pursuant to City Code, Ordinance No. 27-3-2, Section (e).

RFQ / PO No.: (if applicable) 48526

Duration of Covenant June 6, 2014 to June 6, 2017

Printed Name of Contractor/Organization Power Lighting & Technical Services
(Type or Print Legibly)

Contractor Address 10824 West Chicago, Suite 200, Detroit, Michigan 48204
(City) (State) (Zip)

Contractor Phone/E-mail 313·408·2408 / powerlitetech@gmail.com
(Phone) (E-mail)

Printed Name & Title of Authorized Representative Angel Paris, President

Signature of Authorized Representative: Angel Paris

Date: June 6, 2014

*** This document MUST be notarized ***

Signature of Notary: [signature]

Printed Name of Seal of Notary: Esther Lynn

My Commission Expires: 12 / 19 / 18

ESTHER LYNN
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES DEC 19, 2018
ACTING IN COUNTY OF Wayne

FOR CONTRACTING DEPARTMENT USE ONLY:

Date Rec'd: __/__/__ Received by: _____ Title: _____

Please fax a COPY of the notarized Covenant and Award Letter to the Human Rights Department (313) 224-3434

(REV 3 7/3/12)

Effective Date: 12/1/10

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Client#: 7856 POWLIG

ACORD™ # CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/30/2015

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 holder in lieu of such endorsement(s).

PRODUCER
ZERVOS GROUP, INC.
24724 Farmbrook (248) 355-4411
P.O. Box 2067
Southfield, MI 48037-2067

CONTACT NAME:
PHONE (A/C, No, Ext): 248 355-4411 FAX (A/C, No): 248 355-2175
E-MAIL ADDRESS: marsha@zervosgroup.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Selective Insurance Co	
INSURER B : Liberty Mutual A/R WC	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
POWER LIGHTING & TECHNICAL SERVICES INC
10824 W. Chicago
Detroit, MI 48204

COVERAGES CERTIFICATE NUMBER: 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	X	X	S2032249	04/24/2015	04/24/2016	EACH OCCURRENCE	$1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$100,000
	X Contractual						MED EXP (Any one person)	$5,000
							PERSONAL & ADV INJURY	$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$2,000,000
	POLICY X PRO-JECT X LOC						PRODUCTS - COMP/OP AGG	$2,000,000
	OTHER:							$
A	AUTOMOBILE LIABILITY			S2032249	04/24/2015	04/24/2016	COMBINED SINGLE LIMIT (Ea accident)	$1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS / X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC534S5429500115	10/24/2015	10/24/2016	X PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$100,000
							E.L. DISEASE - POLICY LIMIT	$500,000

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

Project: City of Detroit Caymac 8th & 9th Floor Renovation.
W3 Construction ~~and City of Detroit~~ are included as Additional Insured with respect to the General Liability per written contract.

CERTIFICATE HOLDER

W3 Construction
7601 2nd Avenue
Detroit, MI 48202

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

Steve M. Zervos

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Hiring Policy Compliance Affidavit

I, Angel Paris, being duly sworn, state that I am the President
Title of Power Lighting & Technical Services
Name of Bidder Corporation or Other Business Entity

and that I have reviewed the hiring policies of this employer. I affirm that these policies are in compliance with the requirements of Article V, Division 6 of the Detroit City Code of 1984, being Sections 18-5-81 through 18-5-86 thereof. I further affirm that this employer will not inquire or consider the criminal convictions of applicants for employment needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted, until such times as the employer interviews the applicant or determines that the applicant is qualified.

In support of this affidavit, I attach a copy of the application form that will be used to hire employees needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted.

SIGNED,

Angel Paris Angel Paris

Title: President Date: June 6, 2014

STATE OF Michigan)
) SS
COUNTY OF Wayne)

The foregoing Affidavit was acknowledged before me the 6th day of June, 2014, by Angel Paris.

ESTHER LYNN
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES DEC 19, 2018
ACTING IN COUNTY OF Wayne

Notary Public, County of Wayne
State of Michigan
My commission expires: 12-19-18

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Power Lighting & Technical Services

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE OF APPLICATION: _____

Name: _____
Last First Middle

Address: _____
Street (Apt) City/State Zip

Alternate Address: _____
Street City/State Zip

Contact Information: _____(_____)_____(_____)_____
Home Telephone Mobile Telephone Email

How did you learn about our company?

POSITION SOUGHT: _____ **Available Start Date:** _____

Desired Pay Range: _____ **Are you currently employed?** _____
Hourly or Salary

EDUCATION

	Name and Location	Graduate? – Degree?	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc			
Other Education			

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

_____

_____

_____

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PREVIOUS EXPERIENCE

Please list beginning from most recent

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

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CITY OF DETROIT
SLAVERY ERA RECORDS AND INSURANCE DISCLOSURE AFFIDAVIT

1. Name of Contractor: Power Lighting & Technical Services

2. Address of Contractor: 10824 West Chicago Suite 200, Detroit, MI 48204

3. Name of Predecessor Entities (if any): None to be mentioned

4. Prior Affidavit submission? X No ___ Yes, on: _____ (Date of prior submission)

   If "No", complete Items 5 and 6.

   If "Yes", list date of prior submission above, go to Item 6 and execute this Affidavit.

5. ___ Contractor was established in 2012 (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

   Yes ___ Contractor has searched their records and those of any predecessor entity, and has found no records that they or any predecessor(s) made any investments in, or derived profits from the slave industry or from slave holder insurance policies.

   NO ___ Contractor has found records that they or their predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

6. I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge. All documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

Angel Paris (Printed Name) President (Title)

Angel Paris (Signature) October 30, 2015 (Date)

Subscribed and sworn to before me
this _____ day of _____

Notary Public, _____ County, Michigan
My Commission expires: _____

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SAM Search Results
List of records matching your search for :

Search Term : Power* Lighting* and* Technical* Services*
Record Status: Active

No Search Results