

THE NEW TERMINAL ONE

JFK INTERNATIONAL AIRPORT

M/W/LBE, SDVOB Information Session:
Preparing a Successful Bid Submission

August 9, 2022

JFK

JFK 1



Today's Speakers



Frank Mendoza
Outreach Manager,
McKissack & McKissack



Jerry Herold
Project Manager,
AECOM Tishman



Lauren G. Munro
Risk Analyst II,
AECOM Tishman

Our World-Class Team

FINANCIAL SPONSORS	   
CAPITAL PROJECT DELIVERY	     
DESIGN-BUILDER	 
MASTER CONCESSIONAIRE	

The New Terminal One Redevelopment Project

To be built on site of the existing Terminal 1, Terminal 2 and former Terminal 3

9 Widebody Gates / **1** Narrow body Gate

0.7 million square foot building

45 acres (current T1 site)

All-International traffic



23 Widebody Gates / **1** Narrow body Gate

2.4 million square foot building

134 acres (current T1, T2 and former T3 sites)

All-International traffic



2.4M square feet of terminal space, **250% larger** than existing terminal

More than **300,000 square feet** of dining, retail, lounges, and recreational space, offering passengers a uniquely New York sense of place.

The New Terminal One Commitment

Reaffirming Our Commitments

- **30% M/WBE goal (20% MBE, 10% WBE)** across all phases and disciplines of the project
- **3% SDVOB goal** across all phases and disciplines of the project
- Hiring goals for minorities and women (**40% for laborers, 30% for other trades and 7% for women**)
- **Prioritization of local firms** starting with SE Queens and Western Nassau, followed by Borough of Queens and New York /New Jersey Port District



Commitment to the Community

Jobs



10,000+ total jobs
6,000+ local construction jobs

Local



Creating opportunities for local firms and residents
Prioritizing 37 local zip codes and Queens

Labor



Project Labor Agreement with leading MWBE and local hiring provisions
Building Trades investing through Ullico as a Financial Sponsor

Community



Initiatives on education, workforce, environmental, and business development
JFK Airport Academy to upskill local workforce

Sustainability



Green Energy and carbon reduction initiatives
LEED Certification through construction and state-of-the-art operational capabilities
Envision Certification to evaluate the sustainability of civil infrastructure

Diversity

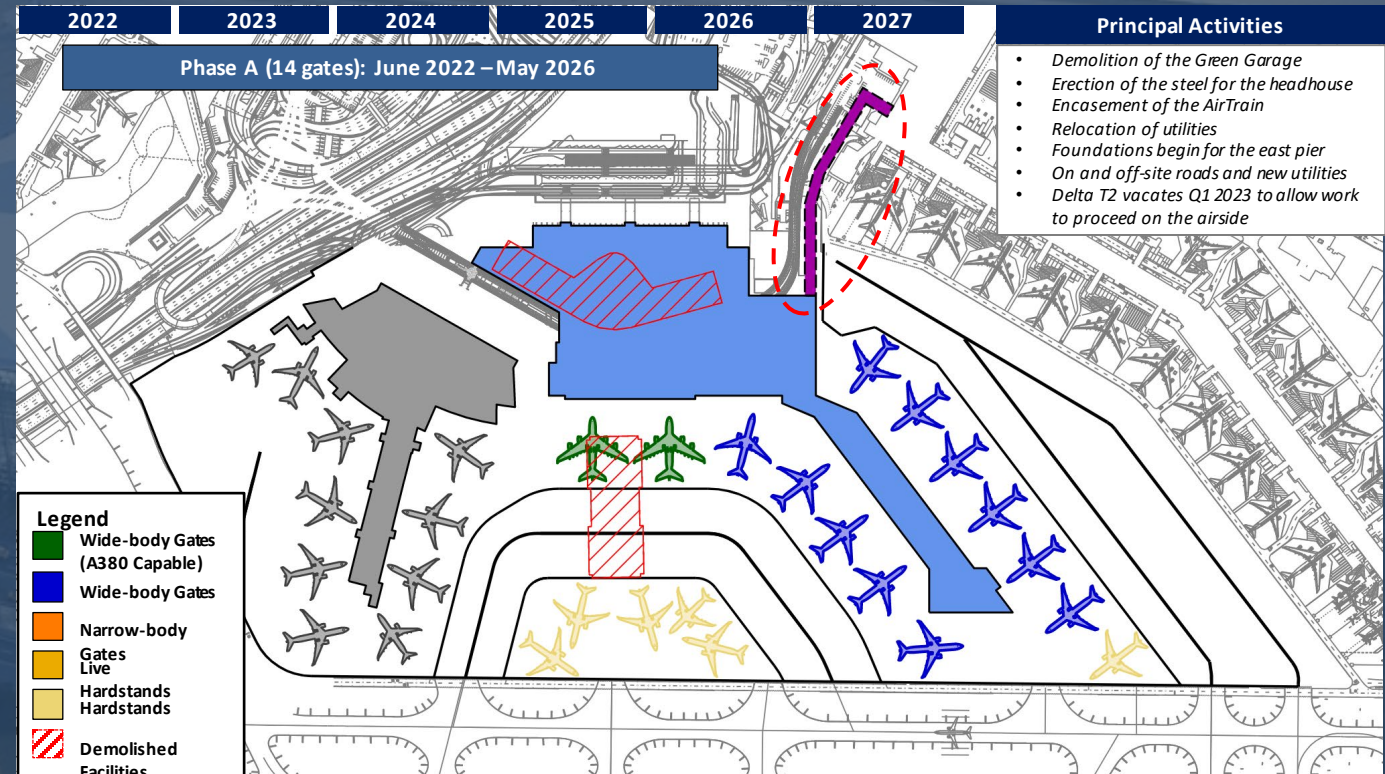


30% M/WBE participation goal across all disciplines and phases; **3% SDVOB** participation goal for design and construction work

Anticipated Project Phasing



- Demolition of the Green Garage, led by two local MWBEs, will kick off project construction
- 23 gates to be built in phases
 - 14 gates in Phase A
 - 5 gates in Phase B1
 - 4 gates in Phase B2
- Phasing is subject to international passenger traffic levels
- AECOM Tishman is the design-build contractor for Phase A



Preparing a Successful Bid Submission

Preparing a Successful Bid Submission

Access to Drawings and Bid Documents

What is Required

- *TradeTapp* prequalification application for Tishman Construction Corp **must** be complete prior to access to Drawings and Bid Documents
- Specify your Trade and Specialty by entering your Commodity Codes: NAIC/ CSI
- *BuildingConnected* Bid Notification
- Invitation to sign NTO Non-Disclosure Agreement
- Aim to achieve original deadline. If an extension is needed, requests must be made in advance of the Bid Due Date via *BuildingConnected*

The Bid Package

- All bidding will be done in BuildingConnected
- Reference the **Bid Documents List** and use it as a step-by-step guide through your submission
This gets updated with every addendum
- Rider A – General Information
- Rider B – Drawings and Specs
- Rider C – Alternates, Unit Prices and Labor Rates

BID DOCUMENTS LIST
JFK TERMINAL ONE REDEVELOPMENT
QUEENS, NEW YORK

XXX XX, 2022

TRADE:

IF ANY DEVIATIONS ARE BEING REQUESTED TO ANY OF THE CONTRACT DOCUMENTS BELOW, THE DEVIATIONS MUST BE INCLUDED WITH THE BID SUBMISSION.	DOCUMENT DATE	INITIAL ONLY ONE COLUMN	
		DOCUMENT ACCEPTED WITH NO DEVIATIONS	DEVIATIONS REQUESTED TO DOCUMENT
Trade Contract	June 2022		
Trade Contract Rider	June 2022		
NY Labor Law Exhibit	2022		
Bid Form			
Rider A, General Addendum			
Rider B, List of Drawings and Specifications	6/15/2022		
Rider C, Alternates, Unit Prices and Labor Rates			
Rider D, Temporary Services Rider	6/27/2022		
Rider E, Insurance Rider	May 2022		
Rider F, Safety Addendum	1/4/2022		
Rider H, MWBE Requirements (with attachment forms)	2022		
Rider I, Logistics Sequence Drawings	5/1/2022		
Rider J, PANYNJ requirements / RPW (part A, B, C)	3/3/2021		
Rider K, Tax Exempt Form	2/15/2022		
Rider L, Executed PLA	2/10/2022		
Rider M, LEED and Envision Rider	Feb 2022		
Rider N, OCIP Manual	6/17/2022		
Rider O, Bond Forms	Feb 2022		
Rider P, BIM Rider	2/10/2022		
Rider Q, Payment Procedures	6/27/2022		
Rider R, Redacted Design Build Agreement	5/20/2022		

Scope of Work

- Project Bid Form
- Example Roofing
- Prevailing Wage Project
- **Fees & Markups** are for values outside of the Scope of Work, example:
 - *Additional design fees above and beyond specified scope*

Project Bid Form

These sections are configured for the entire project in the Project Bid Form.

General Acknowledgments

[Click edit to add line items](#)

Bond Information

[Click edit to add line items](#)

Fees and Markups

[Click edit to add line items](#)

Labor Rates

[Click edit to add line items](#)

Certifications

[Click edit to add line items](#)

Disclaimers and Clarifications

[Click edit to add line items](#)

Request for Information (RFI)

- All requests for information must be transmitted via *Building Connected*
 - Addendums will be issued through Building Connected, followed by a notification of the Bid Due Date change
- Pre-Bid Meetings
- Scope Review Meetings

Inclusions

- Inclusions are specific to trade
- Any additional information can be submitted with your proposal
- Any questions about inclusions or any other aspect of Bid Form can be made through RFI process

Inclusions Mark "yes" to all yes/no questions »

* Please submit your MWBE participation plan (use form 08.01 under FILES tab) with your bid, otherwise your bid will be rejected. Yes No

* Please submit your surety letter with your bid, otherwise your bid will be rejected. Surety to issue letter stating that they have reviewed the latest trade contract and rider and will issue the required payment and performance bonds with the contract language as written. Yes No

Scope-Specific Information and Unit Costs Mark "yes" to all yes/no questions

TAKE OFFS:

* Total Man Hours	<input type="text" value="input response here"/>
* Total Sqft of Temporary roofing (Excluding itemized provisions)	<input type="text" value="input response here"/>
* Total Sqft of Permanent roofing	<input type="text" value="input response here"/>
* Total Sqft of Water Repellent	<input type="text" value="input response here"/>
* Total Sqft of Vapor Barrier	<input type="text" value="input response here"/>
* Total Sqft of Moisture Barriers	<input type="text" value="input response here"/>
* Total Sqft of Liquid Applied Roofing	<input type="text" value="input response here"/>

UNIT PRICING SCHEDULE:

Furnish & Install the following items (ADD/DEDUCT Unit Pricing):

* 1. PVC ROOFING (includes insulation and assemblies)	per square foot	<input type="text" value="\$"/>
* 2. FLUID APPLIED ROOFING	per square foot	<input type="text" value="\$"/>
* 3. ELASTOMERIC COATINGS	per square foot	<input type="text" value="\$"/>
* 4. COLD FLUID-APPLIED WATERPROOFING	per square foot	<input type="text" value="\$"/>
* 5. Water Repellent	per square foot	<input type="text" value="\$"/>
* 6. Pitch Pockets 18" X 18"	per each	<input type="text" value="\$"/>
* 7. Pitch Pocket 12" X 12"	per each	<input type="text" value="\$"/>

Alternates

- Project Alternates
- Payment and Performance Bond
 - P&P Bond is a form of credit, so the Principal is responsible to pay any claims. Not the same as insurance

Alternates

ALTERNATE NO. 1 – PERFORMANCE AND PAYMENT BOND:

In the event that the 100% Performance and 100% Labor and Material Payment Bonds from a Surety list in the Department of the Treasury's Listing of Approved Sureties are provided by this Contractor. Bond premium added to dollar amount of extra work:

*ADD %

ALTERNATE NO. 2 - INSURANCE:

In the event that this Contractor is directed to provide its own insurance in lieu of OCIP:

*ADD \$

ALTERNATE NO. 3 – Water Repellents:

In the event that this Contractor is NOT directed to furnish and install the Water-repellent coatings on the GFRC and UHPC as called for in the Specification 07 19 00:

*DEDUCT \$

ALTERNATE NO. 4 – Temporary Roofing:

In the event that this Contractor is directed to remove the temporary roofing prior to permanent installation:

*ADD \$

ALTERNATE NO. 5 – Permanent Roofing in Lieu of Temporary Roofing:

In the event that this Contractor is directed to furnish and install the permanent roofing over the baggage handling area in lieu of a temporary roof:

*DEDUCT \$

ALTERNATE NO. 6 – Air Train Enclosure:

In the event that this Contractor is NOT directed to furnish and install the Air Train enclosure roofing and waterproofing:

*DEDUCT \$

ALTERNATE NO. 7 – PV OMG Power Grip Plus Roof Mount:

In the event that this Contractor is directed to furnish and install the PV OMG Power Grip Plus Roof Mount (excluding rack) as shown on Option #2 Low Profile Rack system for the PV Panels. (Assume the furnish and installation of 2000 Mounts) (See Alt 7 Attachment for details):

*ADD \$

Local, M/WBE and SDVOB Participation

- Rider H Diversity Requirements
 - 30% M/WBE goal phases and disciplines of the project (20% MBE, 10% WBE)
 - 3% SDVOB goal
- “Diversity within Diversity”
 - ALL Bids Require Participation

MWBE PARTICIPATION: _____

Please provide the percentages for MWBE Participation: _____

* MBE (%)	<input type="text" value="input response here"/>
* WBE (%)	<input type="text" value="input response here"/>
* SDVOB (%)	<input type="text" value="input response here"/>
* LBE Tier 1 (%)	<input type="text" value="input response here"/>
* LBE Tier 2 (%)	<input type="text" value="input response here"/>

New Terminal One Procurement



Upcoming Bid Packages

Bid Opportunities in Q3 – Q4 2022

BATC
Carpentry
Concrete Slab-On-Grade
Demo of Terminal 2
Dock Guidance, Ramp Signage, etc.
Fire Alarm
Flooring
General Construction - Toilet Partitions, Etc.
Landscaping
LV Radio, DAS - Parts & Smarts

LV Security - Parts & Smarts
LV Telecom - Parts & Smarts
Masonry
Millwork
Miscellaneous Metals
OH Coiling & Specialty Doors
Ornamental Metal & Glass
Painting & Coatings
Phenolic Wall Panel
Roadway Canopies

Security Install
Signage
Spray on Fireproofing
Stair Steel
Telecom Install
Temp. Carpentry
Terrazzo
Wifi, DAS Cellular, Public Safety/Mobil Radio

Completing the Prequalification Process

Completing the Prequalification Process

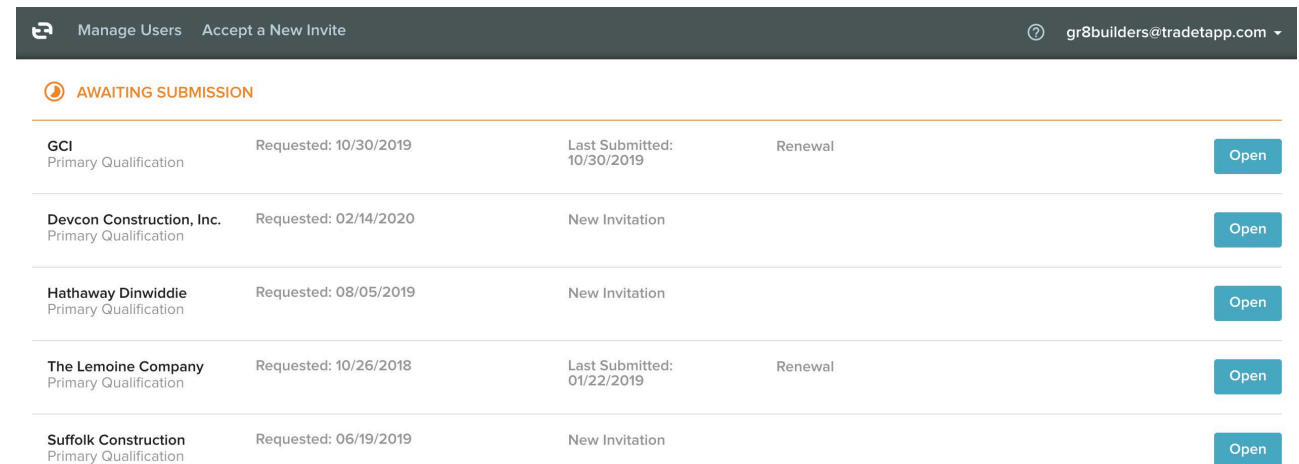
What is TradeTapp?

Web-based Vendor Prequalification

TradeTapp delivers a modern technology platform to the subcontractor prequalification process.

Why use TradeTapp as a subcontractor?

- **No redundancies:** submit any application and automatically create a stored qualification to use for any GC in the network.
- **Confidential & secure:** TradeTapp's secure platform safely protects the transmittal of your sensitive documents unlike email or fax.
- **Increased visibility:** By signing up to TradeTapp, you are joining the largest builder's network in Construction. This means your company can be found for more projects.



The screenshot shows the TradeTapp user interface. At the top, there is a navigation bar with 'Manage Users' and 'Accept a New Invite' on the left, and a user profile 'gr8builders@tradetapp.com' on the right. Below the navigation bar, there is a section titled 'AWAITING SUBMISSION' with a circular arrow icon. This section contains a table with five rows, each representing a qualification request. Each row includes the company name, the date requested, the date last submitted (if applicable), the status, and an 'Open' button.

Company	Requested	Last Submitted	Status	Action
GCI Primary Qualification	Requested: 10/30/2019	Last Submitted: 10/30/2019	Renewal	Open
Devcon Construction, Inc. Primary Qualification	Requested: 02/14/2020	New Invitation		Open
Hathaway Dinwiddie Primary Qualification	Requested: 08/05/2019	New Invitation		Open
The Lemoine Company Primary Qualification	Requested: 10/26/2018	Last Submitted: 01/22/2019	Renewal	Open
Suffolk Construction Primary Qualification	Requested: 06/19/2019	New Invitation		Open

Difference between *Tishman Construction Corporation* and *AECOM JFK T6* Prequalification

No redundancies: submit any application and automatically create a stored qualification to use for any GC in the network.

PLEASE NOTE:

- You will need to fill out one for Tishman Construction (JFK T1) and;
- You will need to fill out one for AECOM- JFK T6 (Hunt).

Company Name	Requested	Contact Email	Last Submitted	Action
Tishman Construction Corporation Primary Qualification	1/6/2022	support@buildingconnected.com	-	New Invitation Open
AECOM - JFK T6 Primary Qualification	1/17/2022	support@buildingconnected.com	-	New Invitation Open

When receiving an Invitation to Prequalify

1. Invited by the Tishman Team
2. Self-invited by Public Link

If you have an existing account...

- If you are already logged in to your BuildingConnected account, you'll be immediately directed to the "TradeTapp Invites" tab.

The screenshot shows the 'Qualifications' page in a web application. The top navigation bar is dark blue with the title 'Qualifications' and a user profile icon 'LM'. Below the title are four tabs: 'Manage Our Vendors', 'TradeTapp Invites' (which is active), 'Other Invites', and 'Permissions & Settings'. Under the 'TradeTapp Invites' tab, there are two status filters: 'Awaiting Submission' with a count of 2, and 'Submitted' with a count of 0. The main content area is titled 'Questionnaires that are awaiting submission'. Below this title is a table with one row for 'Tishman Construction Corporation'. The table columns are: Name (with 'Primary Qualification' below it), Requested date (1/6/2022), Contact Email (support@buildingconnected.com), Last Submitted (—), and Invitation Status (New Invitation). An 'Open' button is located at the end of the row. A yellow arrow points to the 'Open' button, and another yellow arrow points to the 'TradeTapp Invites' tab.

Name	Requested	Contact Email	Last Submitted	Invitation Status	Action
Tishman Construction Corporation Primary Qualification	1/6/2022	support@buildingconnected.com	—	New Invitation	Open

Sign in to your
BuildingConnected account

NEXT

 **Need an account?**

If you do not have an existing TradeTapp account...

- If you are new to BuildingConnected, you will be prompted to create an account before viewing the qualification questionnaire.
- Click on “Need an Account?” to begin the account creation process.
- Note: you do not need a paid subscription to join BuildingConnected or access your qualification applications.

If you did not receive your TradeTapp invitation email...

If you know that you have been invited to qualify with **Tishman Construction Corporation** through TradeTapp but are not receiving the invitation email, there are several things we suggest you do:

1. Check spam & junk mail folders;
2. Allow emails from **@tradetapp.com** (have your IT team whitelist the email domain);
3. Email AECOM Tishman directly to request that they resend your invitation.



TERMINAL PROJECTS

WORK WITH US

MEDIA

PUBLIC OUTREACH

CONTACT US

The New Terminal One

Port Authority of NY & NJ

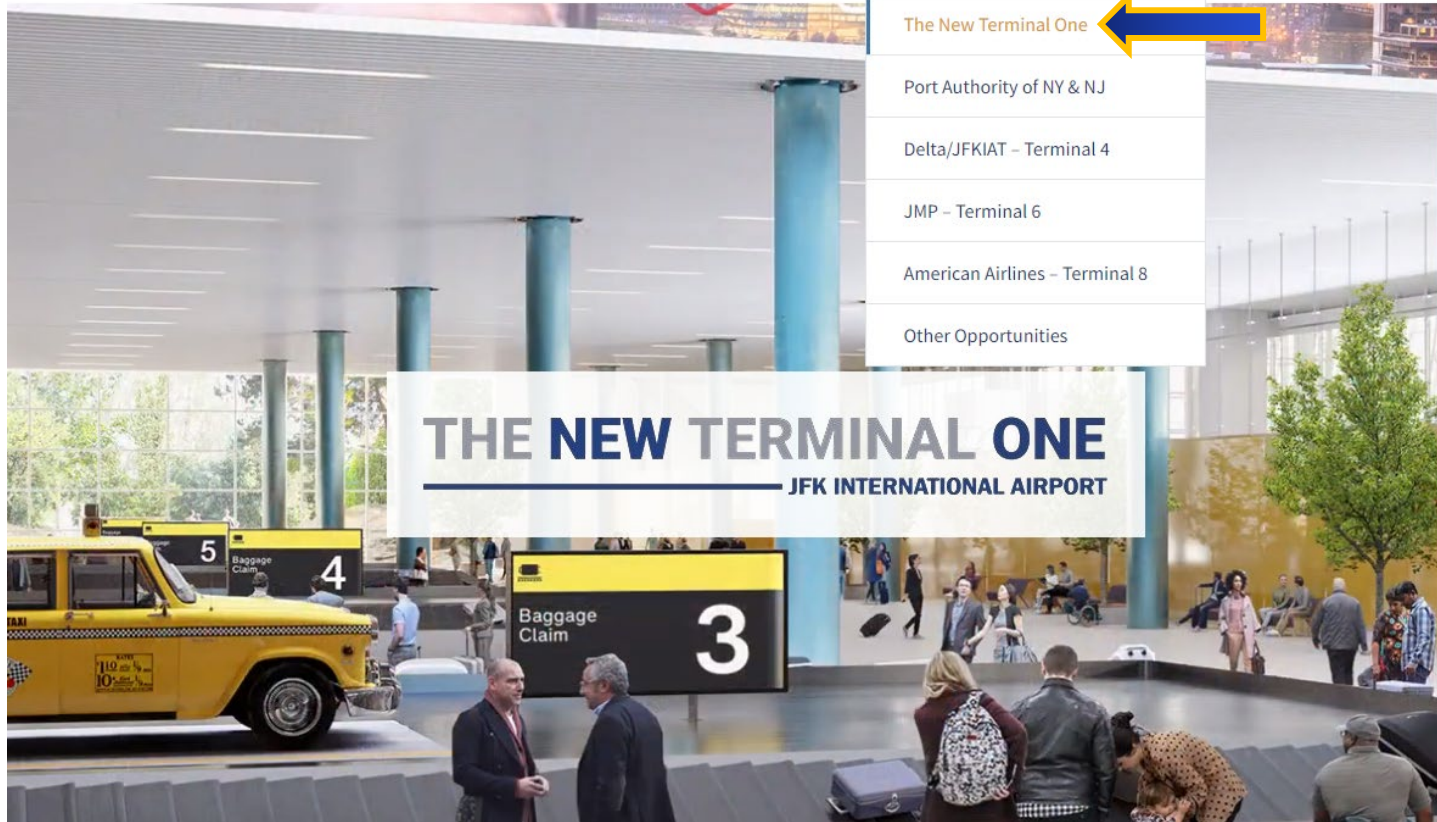
Delta/JFKIAT – Terminal 4

JMP – Terminal 6

American Airlines – Terminal 8

Other Opportunities

THE NEW TERMINAL ONE
JFK INTERNATIONAL AIRPORT



THE NEW TERMINAL ONE
JFK INTERNATIONAL AIRPORT

Public Link To Qualify

- The public link to qualify is on <https://www.anewjfk.com/projects/the-new-terminal-one/> for subcontractors to self-invite and complete the questionnaire.
- Questions? Reach out to support@buildingconnected.com.

AECOM TISHMAN

JOIN THE NEW TERMINAL ONE TEAM

The New Terminal One invites all vendors to join the AECOM Tishman bidders list. Click on the “Prequalify” button below. All Vendors are asked to complete an online Prequalification Questionnaire and upload required financial records and safety documents that provide the team with relevant information concerning their financial health, safety and integrity records.

- 1 First time users, please create an account then login.
- 2 If you have an account, login
- 3 Open the “Qualifications Tab”, followed by the “TradeTapp Invites” to locate the **Tishman Construction Corporation** questionnaire to prequalify for The New Terminal One.
- 4 If you have any questions, please email support@tradetapp.com



PREQUALIFY

How to begin filling out the Prequalification Questionnaire

The screenshot shows the 'Qualifications' section of the TradeTapp portal. The user is logged in as 'LM'. The navigation bar includes 'Manage Our Vendors', 'TradeTapp Invites', 'Other Invites', and 'Permissions & Settings'. The 'TradeTapp Invites' tab is active, showing a summary of 'Awaiting Submission' (2) and 'Submitted' (0). Below this, the section is titled 'Questionnaires that are awaiting submission'. A table lists a qualification for 'Tishman Construction Corporation', which is a 'Primary Qualification'. The request was made on '1/6/2022' and the contact email is 'support@buildingconnected.com'. The 'Last Submitted' date is blank. A 'New Invitation' link is present. An 'Open' button is highlighted with a red box on the right side of the table row.

Company Name	Requested	Contact Email	Last Submitted	Invitation	Action
Tishman Construction Corporation	1/6/2022	support@buildingconnected.com	-	New Invitation	Open

- Your main TradeTapp portal will include all of your pending submissions and all of your completed questionnaires.
- Navigate to the “Awaiting Submission” section and locate the request from AECOM Tishman.
- Click “Open” to begin filling out the questionnaire.

- Provide a response to each question and navigate through the questionnaire by using the “continue” button at the top.
- You can leverage the “back” button to go back to a previous question.

Manage Users Accept a New Invite gr8builders@tradetapp.com

AECOM Tishman
Last Saved: Jul 6, 10:24 AM
Currency in USD
Print Summary

Express Mode ?

GENERAL	14/16
CONTACTS	1/2
PROJECTS	3/4
LEGAL	0/2
INTEGRITY	0/1
SAFETY	3/7
INSURANCE	5/8
FINANCIAL	2/10
REVIEW	

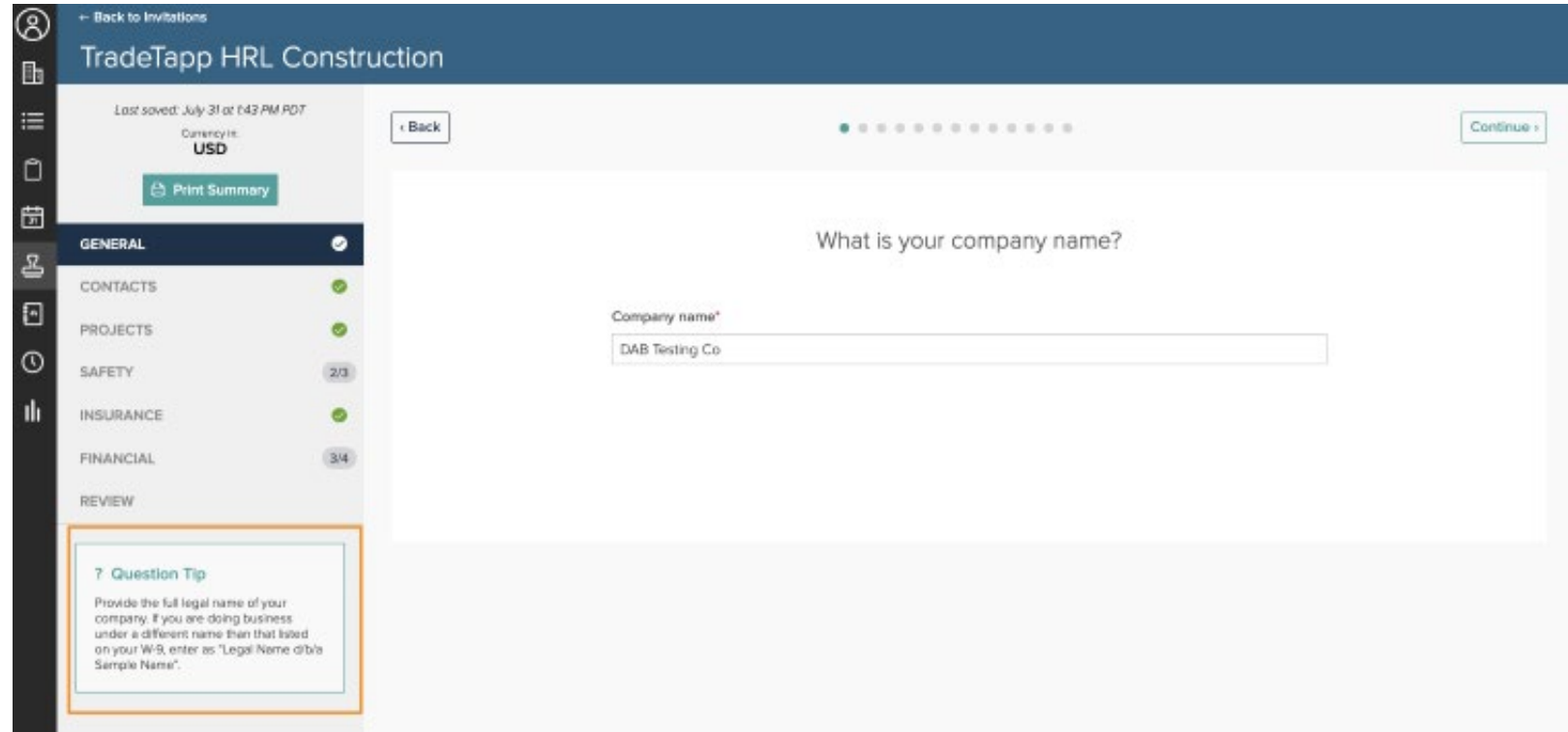
← BACK

CONTINUE →

What is your company name?

Company Name
Gr8 Builders

- If you are unsure what a question means or how to answer it, there are “Question Tips” which are located below the menu on the left-hand side of your questionnaire.
- If you have further question about your questionnaire, we recommend reaching out to: Info@onejfk.com.



- Once the questionnaire has been completed, you will have the chance to review the application before submitting.
- If all of the information looks correct, click "submit" to finalize the submission.

The screenshot shows a web application interface for reviewing an application. At the top, there is a navigation bar with "Manage Users" and "Accept a New Invite" on the left, and a user profile "gr8builders@tradetapp.com" on the right. Below the navigation bar, the main content area is divided into two sections. On the left is a sidebar menu for "AECOM Tishman" with the following items: GENERAL (checked), CONTACTS (checked), PROJECTS (checked), SAFETY (checked), INSURANCE (checked), FINANCIAL (3/4), and REVIEW (highlighted). Above the sidebar, there is a "Print Summary" button and an "Express Mode" toggle. The main content area has a "BACK" button and a "SUBMIT" button. The "SUBMIT" button is highlighted with a red border. The main content area contains the heading "Review Your Application" and the text: "Please finalize any incomplete questions as indicated below. When valid, click the **submit** button to finish your application. All currency is in USD". Below this, there is a "COMPLETED" section with two items: "GENERAL" with "Company Name: Gr8 Builders" and "Currency: USD", each with an edit icon.

Tishman TradeTapp Questionnaire:

Primary Questionnaire
Supplier/Consultant Questionnaire

General

Tishman Construction Corporation

Last Saved: Jun 24, 11:01 AM

Currency in
USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Provide the full legal name of your company. If you are doing business under a different name than that listed on your W-9, enter as "Legal Name d/b/a Sample Name"

← BACK



CONTINUE →

What is your company name?

Company Name

|

Tishman Construction Corporation

Last Saved: Jun 24, 11:12 AM

Currency in
USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Provide the full legal name of your parent company.

← BACK

CONTINUE →

Is your company a subsidiary or child to a parent company?

Is your company a subsidiary or child to a parent company?

You have indicated *not applicable* to this question

[Click here if this does apply to your company](#)

Tishman Construction Corporation

Last Saved: Jun 24, 11:10 AM

Currency in
USD

Print Summary

Express Mode ?



GENERAL 16/17

CONTACTS ✓

PROJECTS ✓

INTEGRITY ✓

SAFETY 5/7

INSURANCE 6/7

FINANCIAL 3/4

REVIEW

Question Tip

To add regions to your profile, use the dropdown menus to locate regions which you serve. Remember to add all that apply.

BACK



CONTINUE

What regions does your company normally serve?

Your Regions:

- Maryland ✕
- New Jersey ✕
- NY - New York City ✕
- New York ✕
- Connecticut ✕

Choose a region

Tishman Construction Corporation

Last Saved: Jun 24, 11:14 AM

Currency in
USD

Print Summary

Express Mode ?



GENERAL	16/17
CONTACTS	✓
PROJECTS	✓
INTEGRITY	✓
SAFETY	5/7
INSURANCE	6/7
FINANCIAL	3/4
REVIEW	

Question Tip

Provide your Minority, Disadvantaged, or Special Business Enterprise status as granted by the US DOT. You may provide one or several certifications.

← BACK



CONTINUE →

Does your company have any enterprise business certifications?

This application requires at least 1 entry for this question.

Add New

or select:

This doesn't apply to my company

CERTIFICATION:

Woman-owned businesses (WBE)

Minority-owned businesses (MBE)

Businesses owned by economically disadvantaged individuals (DBE)

Tishman Construction Corporation

Last Saved: Jun 24, 11:14 AM

Currency in
USD

Print Summary

Express Mode ?



GENERAL	16/17
CONTACTS	✓
PROJECTS	✓
INTEGRITY	✓
SAFETY	5/7
INSURANCE	6/7
FINANCIAL	3/4
REVIEW	

Question Tip

You may provide one or several union affiliations.

← BACK



CONTINUE →

Does your company have any union affiliations?

This application requires at least 1 entry for this question.

Add New

or select:

This doesn't apply to my company

PLEASE NOTE: Union affiliation is not a requirement to become prequalified nor a requirement to work on the project.

Tishman Construction Corporation

Last Saved: Jun 24, 11:14 AM

Currency in
USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

← BACK



CONTINUE →

What percentage of your work do you subcontract?

NOTE: Subcontracting refers to the practice of bringing in an outside company or individual to perform specific parts of a contract or project.

Projects

Tishman Construction Corporation

Last Saved: Jun 24, 11:19 AM

Currency in
USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Backlog is the total value of uncompleted work that your company has committed to via written contract. You may estimate this value if necessary.

← BACK



CONTINUE →

What is your estimated backlog as of today?

Current Estimated Backlog

PLEASE NOTE: A backlog is a buildup of work that needs to be completed.

Tishman Construction Corporation

Last Saved: Jun 24, 11:20 AM

Currency in
USD

Print Summary

Express Mode ?



- GENERAL
- CONTACTS
- PROJECTS
- INTEGRITY
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Provide completed projects of within the past 5 years and include the largest by total subcontract value. Note: it's possible that the references you provide will be contacted by the company you are submitting this application to.

BACK



CONTINUE

Provide references of recently completed projects

Largest Completed Project in Past 5 Years-

Completed Projects

Add New

Tishman Construction Corporation

Last Saved: Jun 24, 11:20 AM

Currency in
USD

Print Summary

Express Mode ?



GENERAL ✓

CONTACTS ✓

PROJECTS ✓

INTEGRITY ✓

SAFETY 5/7

INSURANCE 6/7

FINANCIAL 3/4

REVIEW

← BACK



CONTINUE →

What is your average job size?

Integrity

Tishman Construction Corporation

Last Saved: Jun 24, 11:26 AM

Currency in
USD

Print Summary

Express Mode ?



GENERAL	✓
CONTACTS	✓
PROJECTS	✓
INTEGRITY	✓
SAFETY	5/7
INSURANCE	6/7
FINANCIAL	3/4
REVIEW	

Question Tip

If provided, hover your mouse over the help icon shown after any question in the list for additional information. Please be sure to include an additional explanation or detail to your response when prompted.

← BACK

NEXT SECTION →

Please answer the following question(s)

During the past five (5) years, has your firm, its parent, a subsidiary or affiliate, or any principal, officer or director thereof been suspended, debarred, disqualified or otherwise been declared ineligible to bid or to perform work? If yes, please explain. *

YES

NO

During the past seven (7) years, has your firm, its parent, a subsidiary or affiliate or any principal, officer, director or employee thereof been subpoenaed by a local, state, multi-state, or federal governmental agency or authority? If yes, please explain. *

YES

NO

During the past seven (7) years, has your firm, its parent, a subsidiary or affiliate or any principal, officer, director or employee thereof been the target or subject of any investigation by a local, state, multi-state, or federal governmental agency or authority? If yes, please explain. *

YES

NO

During the past seven (7) years, has your firm, its parent, a subsidiary or affiliate or any principal, officer, or director been convicted of a crime, entered a plea of nolo contendere, indicted or otherwise charged or fined? If yes, please explain. *

YES

NO

During the past seven (7) years, has your firm, its parent, a subsidiary or affiliate or any principal, officer, or director entered into a consent decree, deferred prosecution agreement or a non-prosecution agreement relating to business activities? If yes, please explain. *

YES

NO

Safety

Tishman Construction Corporation

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Currency in
USD

Print Summary

Express Mode ?



- GENERAL
- CONTACTS
- PROJECTS
- INTEGRITY
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Experience Modification Rate (EMR) is calculated by your insurance provider based on claim and loss results. The rating is typically found in a letter from the insurance carrier, which should be provided as an attachment to each entry in this application.

BACK



CONTINUE

What are your company's EMR rates?

2019		
2018		
2017		
2016		
2015		
2014		

Add New

PLEASE NOTE: Obtain your EMR rate information from your insurance agency. All insurance agencies are required to provide the EMR rate to their corporate customers at the beginning of each fiscal year. If you are unsure about your current EMR rate, contact your insurance agent to find out what your rate is.

Tishman Construction Corporation

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Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
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Question Tip

If no, please upload a blank sheet.

BACK



CONTINUE

If your firm had any OSHA Fine, please upload citation.

Document upload

Choose Files



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- FINANCIAL 3/4
- REVIEW

BACK



CONTINUE

Please attach copies of your company's OSHA No. 300/300a log(s) from 2013-current year.

Document upload

Choose Files

or select:

This doesn't apply to my company

PLEASE NOTE: <https://www.osha.gov/sites/default/files/OSHA-RK-Forms-Package.pdf>

OSHA's Form 300 (Rev. 04/2004) Log of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the [free Adobe PDF Reader](#). In addition, the forms are programmed to auto-calculate as appropriate.

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Form approved OMB no. 1218-0176

Please Record:

- Information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid.
- Significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional.
- Work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12.

Reminders:

- Complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.
- Feel free to use two lines for a single case if you need to.
- Complete the 5 steps for each case.

Establishment name
City State

Step 1. Identify the person

Step 2. Describe the case

Step 3. Classify the case

Step 4.

Step 5.

(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness (e.g., 2/10)	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		
Reset			____/____ month / day		

SELECT ONLY ONE circle based on the most serious outcome:

Death (G)	Remained at Work		
	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Enter the number of days the injured or ill worker was:

Away from work (K)	On job transfer or restriction (L)
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days
____ days	____ days

Select one column:

Injury (1)	Illness				
	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Add a Form Page

Page totals
Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
 Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the [free Adobe PDF Reader](#).

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of . . . (M)			
(1) Injuries	0	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss	0
(3) Respiratory conditions	0	(6) All other illnesses	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name

Street

City State Zip

Industry description (e.g., *Manufacture of motor truck trailers*)

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees

Total hours worked by all employees last year

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive Title

Phone Date

Reset

Tishman Construction Corporation

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Currency in
USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
- SAFETY 5/7
- INSURANCE 6/7
- FINANCIAL 3/4
- REVIEW

BACK



CONTINUE

Please attach copies of your company's EMR letter from 2013-current year.

Document upload

Choose Files

or select:

This doesn't apply to my company

To Whom it May Concern;:

This is to certify that _____ insures the above referenced contractor under
policy# _____ through our agency and certifies the Experience Modification Rate (EMR) for
the most recent six (6) years, representative of the above referenced contractor, is as follows:

YEAR

EMR

YEAR

EMR

Insurance

Tishman Construction Corporation

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USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
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- INSURANCE** 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Provide the primary brokerage point of contact for your insurance programs.

BACK



CONTINUE

Who is the broker or agency contact for your insurance programs?

Broker/Agency Company Name

Contact Full Name

Contact Phone Number

Contact Email

Tishman Construction Corporation

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Print Summary

- Express Mode
- GENERAL
- CONTACTS
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- FINANCIAL
- REVIEW

Question Tip

The following coverages are being requested as part of this application. You may indicate Not Applicable for any coverage that your company does not carry. In addition, be sure to update any expired coverage, as indicated by the Updated Needed tag.

BACK

CONTINUE

Provide us details of your current insurance policies

PLEASE NOTE:
 Workers' Compensation;
 General Liability;
 Automobile Liability;
 Umbrella/Excess;
 Professional Liability;
 So on...

Add New

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Question Tip

The certificate of insurance (or "COI") for this question should be a sample that indicates ability to provide coverage.

BACK



CONTINUE

Provide us a copy of your current certificate(s) of insurance



Add New



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/29/2021

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 have ADDITIONAL INSURED provisions or 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 Scarbrough Medlin & Associates, Inc. 5700 Granite Pkwy, #500 Plano TX 75024	CONTACT NAME: Carol Dozier PHONE (A/C No. Ext): 214-423-3333 FAX (A/C No.): 214-423-3350 EMAIL ADDRESS: carol@scarbrough-medlin.com													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Ulica Lloyds of Texas</td> <td>10990</td> </tr> <tr> <td>INSURER B : Republic Franklin Insurance Company</td> <td>12475</td> </tr> <tr> <td>INSURER C : Service Lloyds</td> <td>43389</td> </tr> <tr> <td>INSURER D : Ulica National Insurance Group</td> <td>25976</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Ulica Lloyds of Texas	10990	INSURER B : Republic Franklin Insurance Company	12475	INSURER C : Service Lloyds	43389	INSURER D : Ulica National Insurance Group	25976	INSURER E :		INSURER F :
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INSURER E :														
INSURER F :														

COVERAGES **CERTIFICATE NUMBER:** 557630610 **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
D	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPP 5202293	11/1/2021	11/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY OTHER:			5188182	11/1/2021	11/1/2022	COMBINED SINGLE LIMIT (EA accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Basic \$ 10,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED. <input checked="" type="checkbox"/> RETENTION \$ 10,000			5202294	11/1/2021	11/1/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	SLICWC0120201	11/1/2021	11/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Hired & Non-Owned			5188182	11/1/2021	11/1/2022	Comprehensive Ded 1,000.00 Collision Ded 1,000.00 Actual Cash Value

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Blanket Additional Insured with Ongoing & Completed Operations & Blanket Waiver of Subrogation as required by written contract is included on General Liability. Blanket Additional Insured & Blanket Waiver of Subrogation as required by written contract is included on Auto Policy. Blanket Waiver of Subrogation as required by written contract is included on Workers Compensation. Blanket Primary & Non-Contributory as required by written contract is included on General Liability Policy only. Umbrella Policy follows form.
 HCBeck, Ltd., and all limited partners, general partners and all affiliated companies, and shareholders, directors and officers of the foregoing entities are included under the blanket as Additional Insured.

CERTIFICATE HOLDER HCBeck, Ltd. 1807 Ross Avenue Suite 500 Dallas TX 75201	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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ACORD 25 (2016/03)

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Print Summary

Express Mode ?



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- INSURANCE** 6/7
- FINANCIAL 3/4
- REVIEW

Question Tip

Provide the details of your current bonding program and brokerage contact. If a surety letter upload is required, you may also recognize this as a "good guy" letter.

BACK



CONTINUE

What are the details of your surety/bonding program?

Current Surety Company

Broker Agency Company Name

Broker Agency Contact Name

Single Project Bonding Capacity

Aggregate Bonding Capacity

PLEASE NOTE:

This letter provides evidence that the contractor has a surety relationship. It will state how long that relationship has existed; give the financial rating and T-listing of the surety and give general parameters of the limits of what kind of bonding the contractor would be considered for.

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- REVIEW

Question Tip

Do not include a % sign.

BACK



CONTINUE

What is your company's surety bond rate?

Tishman Construction Corporation

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BACK



NEXT SECTION

Please provide a bank reference letter, or "good guy" letter, dated within the past 6 months.

Document upload

Choose Files

or select:

This doesn't apply to my company

PLEASE NOTE:

This is a letter that essentially states that the principal has an account and have a relationship with you. The letter does not typically say what the credit line is.

Financial

Tishman Construction Corporation

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USD

Print Summary

Express Mode ?



- GENERAL ✓
- CONTACTS ✓
- PROJECTS ✓
- INTEGRITY ✓
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- REVIEW

Question Tip

Your most recent annual CPA reviewed or audited statements are strongly preferred. If you provide a compiled or incomplete financial statement, your application may be rejected!

BACK



NEXT SECTION

Upload your most recent financial statement including balance sheet and statement of income ("P&L"). CPA Audited or Reviewed statements are preferred.

2018		
2017		
2016		
2016		
2015		

Add New

Review

Tishman Construction Corporation

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SUBMIT

Review Your Application

Please finalize any incomplete questions as indicated below.
When valid, click the **submit** button to finish your application.

All currency is in USD

INCOMPLETE

SAFETY

Document upload:

Complete Required

Document upload:

Complete Required

COMPLETED

GENERAL

Company Name:



Currency: USD



THE NEW TERMINAL ONE

JFK INTERNATIONAL AIRPORT

Q & A

JFK

JFK



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2022 Outreach:

- For a copy of this and prior presentations visit our Events Web Page at <https://www.anewjfk.com/projects/the-new-terminal-one/>

September 13

- NTO MWLBE/SDVOB Information Session – *Preparing Estimates, Tips and Tricks*

October 13



- NTO MWLBE/SDVOB Information Session



November 13

- NTO MWLBE/SDVOB Information Session
Additional sessions will be scheduled

Office Hours

- Visit us at <https://www.anewjfk.com/projects/the-new-terminal-one/>
- Register for 1-on-1 Meetings:
 - **Virtual:** Daily from 9:00am to 5:00pm
 - **In-Person:** Wednesday's from 12:00pm to 4:00pm


Virtual Office Hour Meeting
30 mins, One-on-One
[View booking page](#)

[Copy link](#) [Share](#)


In-Person Office Hour Meeting
45 mins, One-on-One
[View booking page](#)

[Copy link](#) [Share](#)

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JFK INTERNATIONAL AIRPORT

To learn more visit:
www.anewjfk.com/projects/the-new-terminal-one/

General Inquiries: info@onejfk.com

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