

Agenda

- ☐ Introductory Remarks and Project Overview
 - Frank Mendoza, New Terminal One
- ☐ Strategic Estimating Tips, Trends & Tools
 - John Bonse, Senior Estimator at Tishman Construction
- ☐ Upcoming Bid Packages in the next 30, 60, 90-Days
 - Jerry Herold, AECOM Tishman
- □ Prequalification Refresher
 - Lauren Munro, AECOM Tishman
- **□** Questions & Answers





Our World-Class Team





Project Update

- On September 8th, the New Terminal One (NTO) broke ground, with the first new gates anticipated to open in 2026
- NTO reached financial close for the first phase of the project and executed a lease with the Port Authority allowing construction to proceed on June 10, 2022
 - The Port Authority Board approved the addition of Ferrovial as a lead financial sponsor alongside Carlyle, JLC Infrastructure and Ullico
- The 2.4 million square foot terminal aspires to be among the top-rated airport terminals in the world
- NTO will create more than 10,000 jobs and strengthen the economic ties to the community



NTO recognizes the importance of creating jobs, supporting local businesses, promoting diversity, and delivering opportunities to the local community



The New Terminal One Impact





Diversity Goals and Eligible Certifications for Credit

- 30% M/WBE goal across all phases and disciplines of the project
 20% MBE
 10% WBE
- 3% SDVOB goal across all phases and disciplines of the project
- Workforce hiring goals for minorities and women:

40% for laborer

30% for other trades

7% for women

 Prioritization of local firms starting with Southeast Queens and Western Nassau, followed by the Borough of Queens and the New York and New Jersey Port Districts





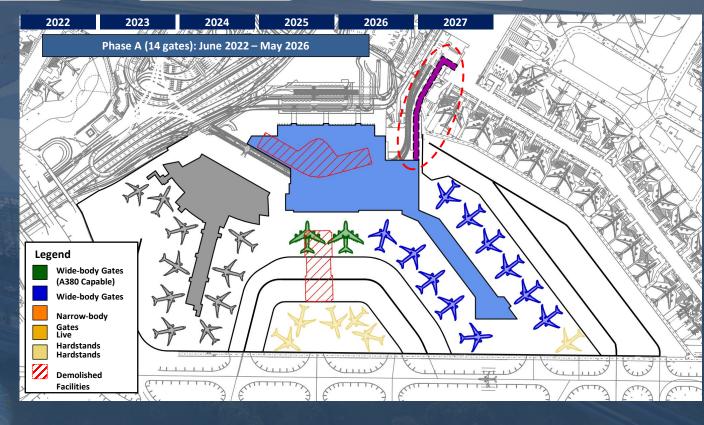




Anticipated Project Phasing



- 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



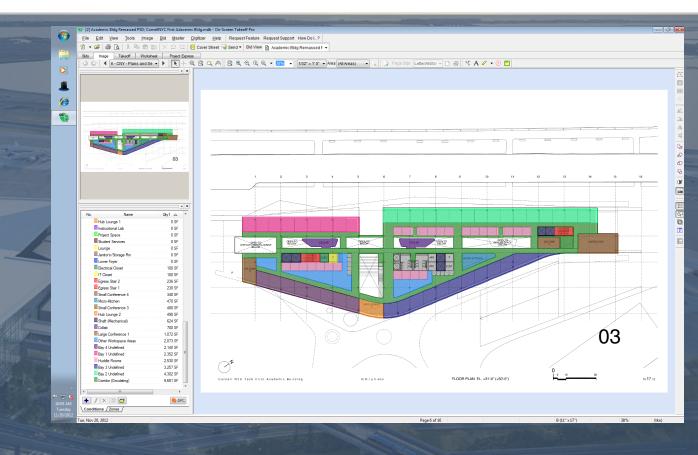


The New Terminal One Redevelopment Project

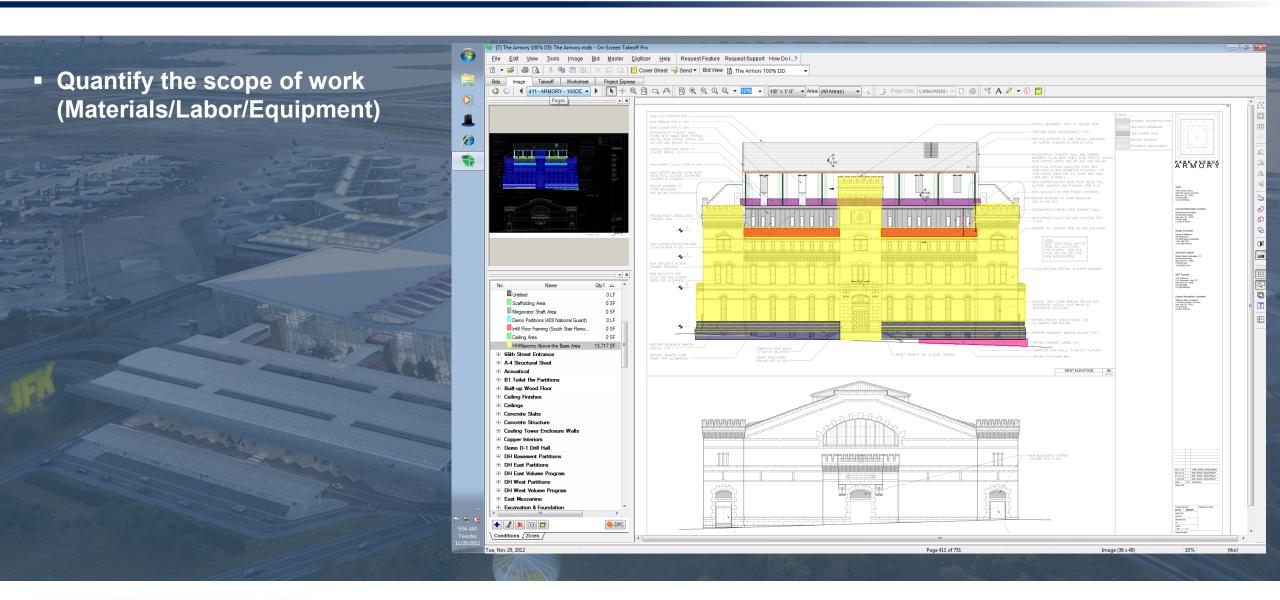




- Tools: on-screen takeoff (OST)
- Quantity takeoffs
- Apply equipment, labor with productivity rates
- Solicitation of material/vendor/subcontractor pricing
- Review quotes/proposals
- Apply appropriate burdens/markups (general conditions, insurances, bonds, fee)
- Submit completed bid forms with all required attachments (bid to ownership/cm)
- List qualifications and exclusions (bid to gc)

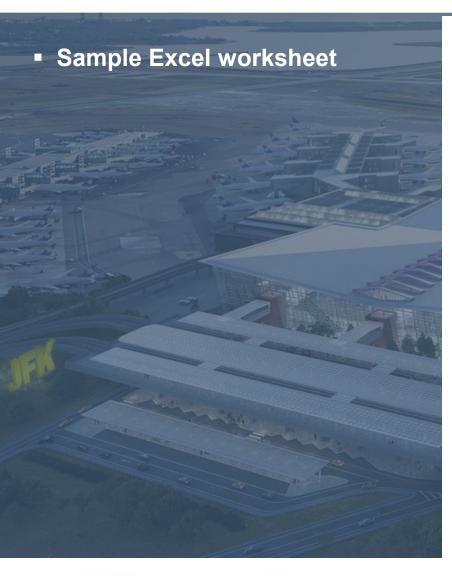














SHEET METAL TAKEOFF & SUMMARY SHEET UNDC #5, CONSOLIDATION BUILDING IEDIUM PRESSURE DUCTWORK (2" TO 6" STATIC PRESSURI

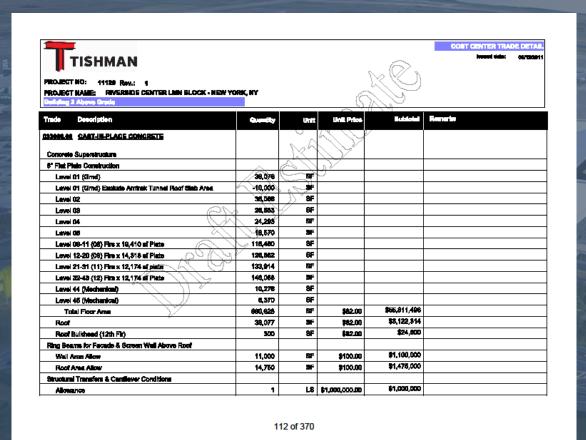
| Duct Dime | ensions Short | Lined | Insulated | .ength | Perimeter (4 if min.) | Sq. Ft. | >72" 16 ga. 2.656 | >54" 18 ga. 2.156 | >30" 20 ga. 1.656 | >12" 22 ga. 1.406 | 24 ga. 1.156 | Acoustic Lining (SF) | insulation (SF) | Access Doors (Each) | Dar | omatic mpers f min.) SF | Dar | Smoke npers f min.) SF | Flex Conn (4 If Qty | min.) | Scr (3 sf | Mesh een min.) SF |
|-----------|---|---------|-----------|----------|--------------------------|-------------|-------------------------|-------------------------|-------------------------|---------------------------|-----------------|----------------------------|--------------------|---------------------------|----------|----------------------------------|----------|---------------------------------|------------------------------|---------------------------|-------------------------------------|----------------------------|
| SUPPLY | AIR RIS | -R | (AHL | J-37-1) | M-1000 | | | | | | | | | | | | | | | | | 一 |
| 136 x | | | * | 182 | 31 | 5,642 | 14,986 | | | | | | 5,642 | | | | \vdash | | | \vdash | - | М |
| SUPPLY | | R | (AHU | J-37-2) | M-1000 | | | | | | | | | | | | \vdash | | | \vdash | | П |
| 136 x | 46 | Т | T | 182 | 31 | 5,642 | 14,986 | | | | | | 5,642 | | | | | | | | | П |
| SUPPLY | AIR RIS | ER | (AHU | J-37-3) | M-1000 | | | | | | | | | | | | | | | | | П |
| 136 x | 46 | Т | * | 182 | 31 | 5,642 | 14,986 | | | | | | 5,642 | | | | | | | | | П |
| SUPPLY | AIR RIS | ER | (AHU | J-37-4) | M-1000 | | | | | | | | | | | | | | | | | |
| 136 x | 46 | Т | * | 182 | 31 | 5,642 | 14,986 | | | | | | 5,642 | | | | | | | | | |
| SUPPLY | AIR RIS | ER (| (AHU | J-9-1) N | A-1000 | | | | | | | | | | | | | | | | | |
| 136 x | | _ | * | 169 | 31 | 5,239 | 13,915 | | | | | | 5,239 | | | | | | | | | |
| SUPPLY | | _ | | _ | | | | | | | | | | | | | | | | | | ш |
| 136 x | | _ | * | 169 | 31 | 5,239 | 13,915 | | | | | | 5,239 | | | | | | | | | ш |
| SUPPLY | | | | | | | | | | | | | | | | | \perp | | | | | ш |
| 136 x | | _ | * | 169 | 31 | 5,239 | 13,915 | | | | | | 5,239 | | | | \vdash | | | _ | | ш |
| SUPPLY | | | | | | | | | | oxdot | | | | | | | ш | | | _ | \vdash | ш |
| 136 x | | _ | * | 169 | 31 | 5,239 | 13,915 | | | \vdash | | | 5,239 | | | | ш | | | _ | _ | ш |
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| 36 x | 24 | + | * | 540 | 10 | 5,400 | | | 8,943 | \vdash | | | 5, 4 00 | 108 | \vdash | | 108 | 648 | _ | Н | _ | ш |
| SUPPLY | AID DIE | - D / | ** | 43.00 | 1000 | | | | | \vdash | | | | _ | \vdash | | \vdash | | _ | \vdash | \vdash | ш |
| 36 x | | | #U-L | 104 | 9 | 936 | | | 1,551 | \vdash | | | 936 | 1 | _ | | 1 | 5 | _ | \vdash | \vdash | Н |
| SUPPLY | | _ | _ | | | 830 | | | 1,001 | | | | 830 | | | | _ | 9 | _ | - | - | Н |
| 36 x | | _ | * | 91 | 8 | 728 | | | 1,206 | - | | | 728 | 1 | _ | | 1 | 3 | _ | \vdash | _ | Н |
| SUPPLY | | _ | | | | 720 | | | 1,200 | \vdash | | | 720 | _ | \vdash | | Η. | • | \vdash | \vdash | \vdash | Н |
| 36 x | | | * | 78 | 11 | 858 | | | 1,421 | - | | | 858 | 1 | \vdash | | 1 | 7 | _ | \vdash | \vdash | - |
| SUPPLY | | R (| AC-3 | | | | | | 1,121 | | | | | _ | | | _ | | | \vdash | | М |
| 36 x | | | * | 78 | 8 | 624 | | | 1.034 | | | | 624 | 1 | | | 1 | 3 | | | | П |
| SUPPLY | AIR RIS | ER (| AC-4 | -1) M-1 | 1000 | | | | | | | | | | | | | | | - | | П |
| 36 x | | | * | 65 | 9 | 585 | | | 969 | | | | 585 | 1 | | | 1 | 4 | | | | П |
| SUPPLY | AIR RIS | ER (| AC-5 | i-1) M-1 | 1000 | | | | | | | | | | | | | | | | | П |
| 60 x | 24 | T | * | 52 | 14 | 728 | | 1,570 | | | | | 728 | 1 | | | 1 | 10 | | | | |
| SUPPLY | AIR RIS | ER (| AC-6 | i-1) M-1 | 1000 | | | | | | | | | | | | | | | | | |
| 60 x | 20 | Т | * | 39 | 14 | 546 | | 1,178 | | | | | 546 | 1 | | | 1 | 9 | | | | |
| SUPPLY | AIR RIS | ER (| AC-7 | 78-1) N | 1-1000 | | | | | | | | | | | | | | | | | |
| 60 x | 30 | | * | 26 | 15 | 390 | | 841 | | | | | 390 | 1 | | | 1 | 13 | | | | |
| | | \perp | \perp | | | | | | | | | | | | | | | | | | | |
| | SUPPLY AIR (AHU-37-1) 37TH FLOOR (M-0237) | | | | | | | | ш | | | | | | | | | | | | | |
| 136 x | | * | _ | 36 | 31 | 1,116 | 2,965 | | | | | 1,116 | | | | | \Box | | | $ldsymbol{ldsymbol{eta}}$ | $ldsymbol{ldsymbol{ldsymbol{eta}}}$ | ш |
| 84 x | | * | _ | 12 | 22 | 264 | 702 | | | \Box | | 264 | | 1 | | | 1 | 28 | | $ldsymbol{ldsymbol{eta}}$ | $oxed{\Box}$ | ш |
| 48 x | | * | | 12 | 14 | 168 | | | 279 | | | 168 | | 1 | | | 1 | 12 | | \vdash | | igsquare |
| | | U-37 | -2) 3 | | LOOR (M-0 | | | | | $ldsymbol{ldsymbol{eta}}$ | | | | | | | \vdash | | | \vdash | lacksquare | $\boldsymbol{\sqcup}$ |
| 136 x | 46 | * | \perp | 30 | 31 | 930 | 2,471 | | | L | | 930 | | 1 | | | 1 | 44 | | | | ш |

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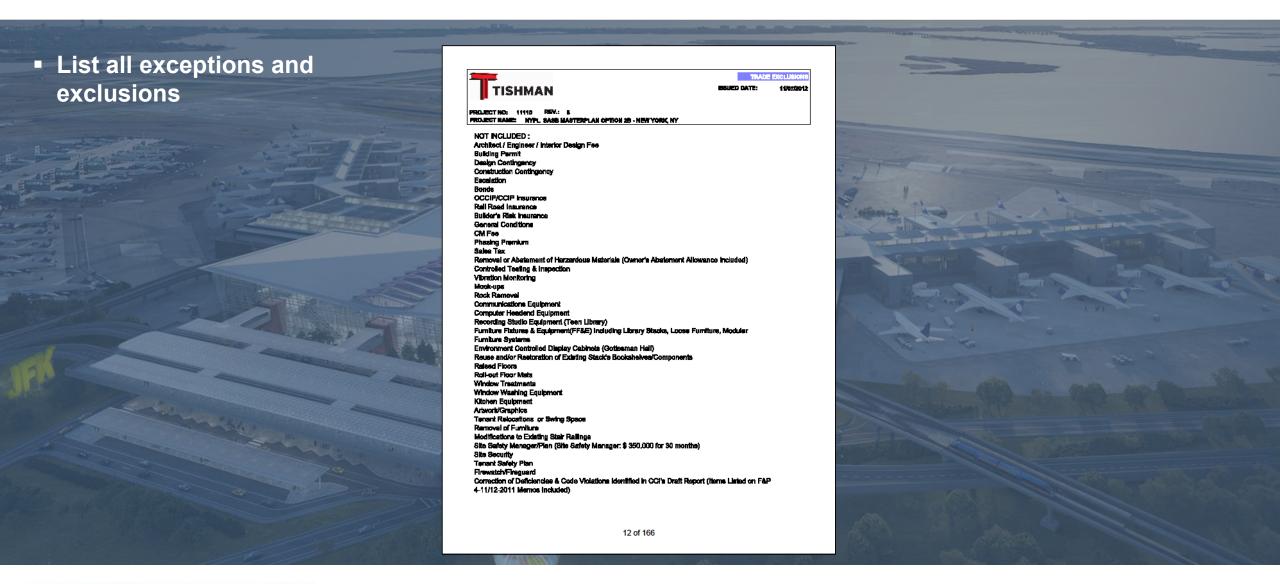


Populate the quantities with pricing (Historical Pricing or Trade Contractors/Vendors)



| TISHMAN | | | | | CORT CENTER TRADE DE Navel dile: 191 |
|--|-----------|------|--------------|-------------|---|
| PROJECT NO: 12125 Raw.; 1 PROJECT NAME: FIRST ACADEMIC BUILDING - NEW YO First Academia Delicing | DRIK, ITY | | | | |
| Trade Description | Questity | Unit | Unit Price | Bublishi | Remarks |
| ZIMMALM HVAC | | | | | |
| HVAC Equipment | | | | | |
| Ground Source Heat Pump System, Closed Loop | 1 | La | | | By Others |
| Cooling Tower, 200 Tons | 1 | EA | | | By Others |
| Water-to-Water Heat Pumps, 50 Tone | 10 | EA | | | By Others |
| Chilled Weter Heat Exchangers, 175 Tone | 2 | EA | \$26,000.00 | 000,08\$ | |
| Heating Hot Water Heat Exchangers, 1500 MEH | 2 | EA | \$27,000.00 | \$64,000 | |
| Groundwater Free Cooling Heat Exchanger | 1 | EA | \$45,000.00 | \$45,000 | |
| Air Handling Unit, 100% Outside Air | | | | | |
| Workspaces, North, 20,000 CFM | 1 | EA | \$206,500.00 | \$206,500 | |
| Workspaces, South, 12,000 CFM | 1 | EA | \$126,000.00 | \$126,000 | |
| Air Handling Units, VAV | | | | | |
| Classroome, 17,600 CFM | 1 | EA | \$165,000.00 | \$185,000 | |
| Curto, 7,600 CFM | 1 | EA | \$80,000.00 | 000,08\$ | |
| Instructional Labs, 15,000 CFM | 1 | EA | \$168,000.00 | \$168,000 | |
| Altum, 18,000 CFM | 1 | EA | \$168,000.00 | \$158,000 | |
| Heating & Ventileting Unit | | | | | |
| Klichen Makeup Air | 1 | EA | \$126,000.00 | \$126,000 | |
| Chilled Beams, 2-Pipe, Active | | | | | |
| Workspaces | 470 | EA | \$3,600.00 | \$1,692,000 | |
| Fam Coll Units, 4-Pipe | | | | | |

45 of 58





Technologies: Excel





NYPH RADIOLOGY NEW YORK, NY DESIGN DEVELOPMENT ESTIMATE

| CSI# | DESCRIPTION | QUANTITY | UNIT | PRICE | SUBTOTAL | TOTAL |
|-------|---|----------|----------|----------------------|-----------------|------------|
| 15300 | Fire Protection | | | | | |
| | Demolition - Selective, Cut, Cap & Drop | 1 | LS | 5,000.00 | 5.000 | |
| | Fire Protection Specialties | | | ., | | |
| | Floor Control Valve Assembly | | | Existin | a to Remain | |
| | Pipe, Valves & Fittings | | | | ľ | |
| | Fire Standpipe Piping | | | Existin | g to Remain | |
| | Wet Sprinkler System | | | | ſ | |
| | Sprinkler Piping & Heads | | | | | |
| | 2-1/2" Black Steel, Schedule 40, Threaded | 306 | LF | 52.00 | 15,912 | |
| | 2" Black Steel, Schedule 40, Threaded | 11 | LF | 47.00 | 517 | |
| | 1-1/2" Black Steel, Schedule 40, Threaded | 99 | LF | 41.00 | 4,059 | |
| | 1-1/4" Black Steel, Schedule 40, Threaded | 116 | LF | 40.00 | 4,640 | |
| | 1" Black Steel, Schedule 40, Threaded | 666 | LF | 38.00 | 25,308 | |
| | Sprinkler Heads | 143 | HDS | 195.00 | | |
| | Sprinkler Drain Piping | | | Existin | g to Remain | |
| | Miscellaneous | | | | | |
| | Seismic Restraints | 1 1 | LS | 2,000.00 | 2,000 | |
| | Testing | 1 | LS | 4,000.00 | 4,000 | |
| | Miscellaneous Fire Protection Work | 1 | | 2,000.00 | 2,000 | |
| | Total - Fire Protection | | \$ 11.42 | /SF | | \$ 91,321 |
| 15400 | Plumbing | | | | | |
| | Demolition - Selective, Cut, Cap & Drop | 1 | LS | 10,000.00 | | |
| | Plumbing Equipment | | | Existin | g to Remain | |
| | Plumbing Specialties | | | 4 000 00 | 4 000 | |
| | Floor Drains | 1 | EA | 1,800.00 | 1,800 | |
| | Plumbing Fixtures & Roughing | | | 0.000.00 | 44 500 | |
| | Water Closets, Wall Hung | 5 5 | EA EA | 2,300.00 1.500.00 | 11,500 7,500 | |
| | Lavatory Pantry Sinks | 2 | EA | 2.300.00 | 4.600 | |
| | Shower | 1 1 | FA | 3,500.00 | 3,500 | |
| | Pipe, Valves & Fittings | | EA | 3,500.00 | 3,300 | |
| | Sanitary, Waste & Vent System | | | | | |
| | 4" Cast Iron, Service Weight, No-Hub | 134 | LF | 89.00 | 11.926 | |
| | 3" Cast Iron, Service Weight, No-Hub | 165 | LF | 73.00 | 12.045 | |
| | 2" Cast Iron, Service Weight, No-Hub | 227 | ĬF | 56.00 | 12.712 | |
| | Domestic Cold Water System | | - | 00.00 | 12,712 | |
| | 2" Copper, Type L | 171 | LF | 62 00 | 10.602 | |
| | 1-1/2" Copper, Type L | 116 | ÜF | 54.00 | 6,264 | |
| | 3/4" Copper, Type L | 30 | LF | 40.00 | 1,200 | |
| | Domestic Hot Water System | | _ | | ,, | |
| | 1-1/2" Copper, Type L | 154 | LF | 44.00 | 6,776 | |
| | 3/4" Copper, Type L | 432 | LF | 40.00 | 17.280 | |
| | Piping Insulation | 1 | LS | 4,000.00 | 4,000 | |
| | Miscellaneous | l | | | l . | |
| | Cleaning & Testing | 1 | LS | 5,000.00 | 5,000 | |
| | Miscellaneous Plumbing Work | 1 | LS | 3,000.00 | 3,000 | |
| | Total - Plumbing | | \$ 16.21 | /SF | | \$ 129,705 |
| 15500 | Heating, Ventilating & Air Conditioning | | | | | |
| | Demolition - Selective, Cut, Cap & Drop HVAC Equipment | 1 | LS | 25,000.00 | 25,000 | |
| | Air Handling Unit, 12,000 CFM | 1 | EA | 150,000.00 | 150,000 | |

PH Radiology Design Development Estimate Rev1 Pag

Page 1 of 4

11/21/



Technologies: Tishman Tracker/Sage Timberline

- General format template
- Ease of customization
- On-the-spot modifications during working sessions
- Estimating programs (Sage/Timberline, mc2, Procore, etc)



PROJECT NO:

ROJECT NAME: 33 BEEKMAN STREET - NEW YORK, I

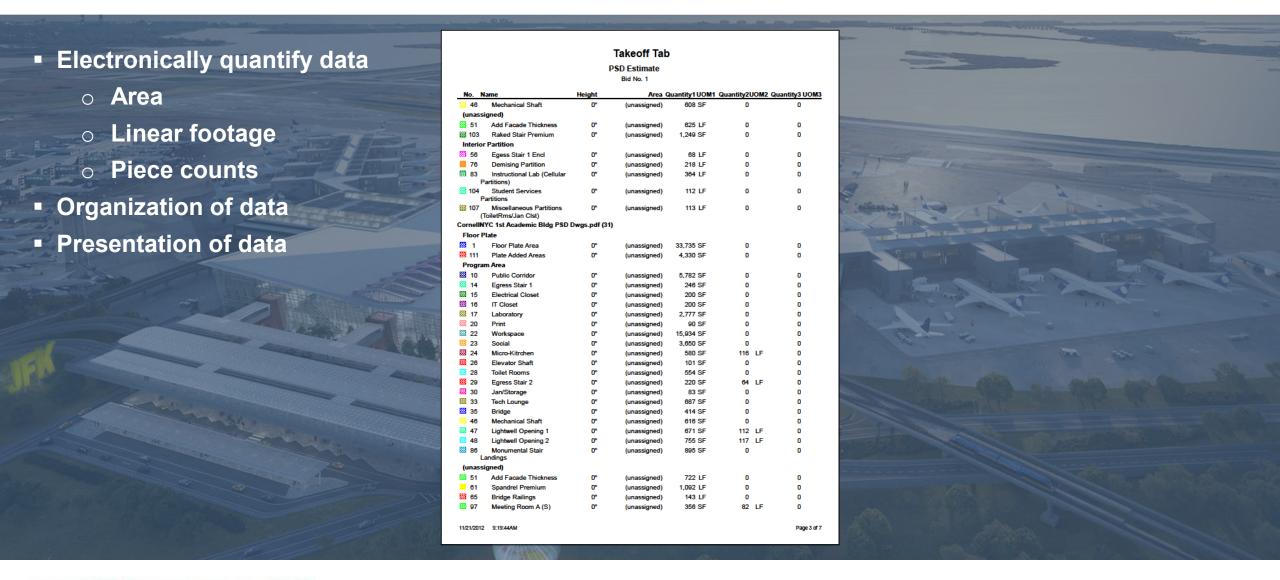
| Trade | Description | 33 BEEKMAN STREET | 33 BEEKMAN STREET | Variance | Reason for Variance |
|-----------|--------------------------|---------------------|-------------------|--------------------|-------------------------------|
| | | 09/21/2012 Rev: 0 | 11/12/2012 Rev: 1 | | |
| 704500.00 | HOIST/SIDWK BRDGS/SH | \$1,300,000 | \$1,300,000 | \$0 | |
| 601500.00 | FIELD LABOR | \$1,500,000 | \$1,500,000 | \$0 | |
| 323000.00 | SITE IMPROVEMENTS | \$622,000 | \$622,000 | \$0 | |
| 312316.10 | EXCAVATION & FOUNDATION | \$ 5,157,000 | \$5,081,000 | \$(76,000) | Reduced Plt Walls depths |
| 033000.00 | CAST-IN-PLACE CONCRETE | \$14,162,000 | \$14,162,000 | \$0 | |
| 034000.00 | PRECAST CONCRETE | \$20,000 | \$20,000 | \$0 | |
| 042000.00 | UNIT MASONRY | \$315,000 | \$315,000 | \$0 | |
| 055000.00 | METAL FABRICATIONS | \$601,000 | \$588,000 | \$(13,000) | Delete Catwalk from 1st Mezz. |
| 062000.00 | FINISH CARPENTRY | \$347,000 | \$342,000 | \$(5,000) | 6 Less Vanities |
| 071000.00 | WATERPROOFING | \$73,000 | \$73,000 | \$0 | |
| 078100.00 | APPLIED FIREPROOFING | \$10,000 | \$10,000 | \$0 | |
| 075000.00 | MEMBRANE ROOFING | \$258,000 | \$258,000 | \$0 | |
| 079000.00 | JOINT SEALERS | \$50,000 | \$50,000 | \$0 | |
| 081100.00 | METAL DOORS AND FRAMES | \$610,000 | \$608,000 | \$(2,000) | 6 Less Bathrooms |
| 105500.00 | POSTAL SPECIALTIES | \$58,000 | \$58,000 | \$0 | |
| 087000.00 | HARDWARE | \$275,000 | \$274,000 | \$(1,000) | 6 Less Bathrooms |
| 088000.00 | GLAZING | \$142,000 | \$140,000 | \$(2,000) | 6 Less Bathrooms |
| 099113.00 | EXTERIOR FAÇADE | \$8,796,000 | \$8,751,000 | \$ (45,000) | |
| 090000.00 | SPECIAL FINISHES | \$641,000 | \$641,000 | \$0 | |
| 090100.10 | LOBBY WORK | \$395,000 | \$395,000 | \$0 | |
| 092900.00 | GYPSUM WALLBOARD/DRYWALL | \$4,215,000 | \$4,212,000 | \$(3,000) | 6 Less Bathrooms |
| 093000.00 | TILE | \$1,250,000 | \$1,227,000 | \$(23,000) | 6 Less Bathrooms |
| 096500.00 | RESILIENT FLOORING | \$601,000 | \$601,000 | \$0 | |

Page 1 of 2



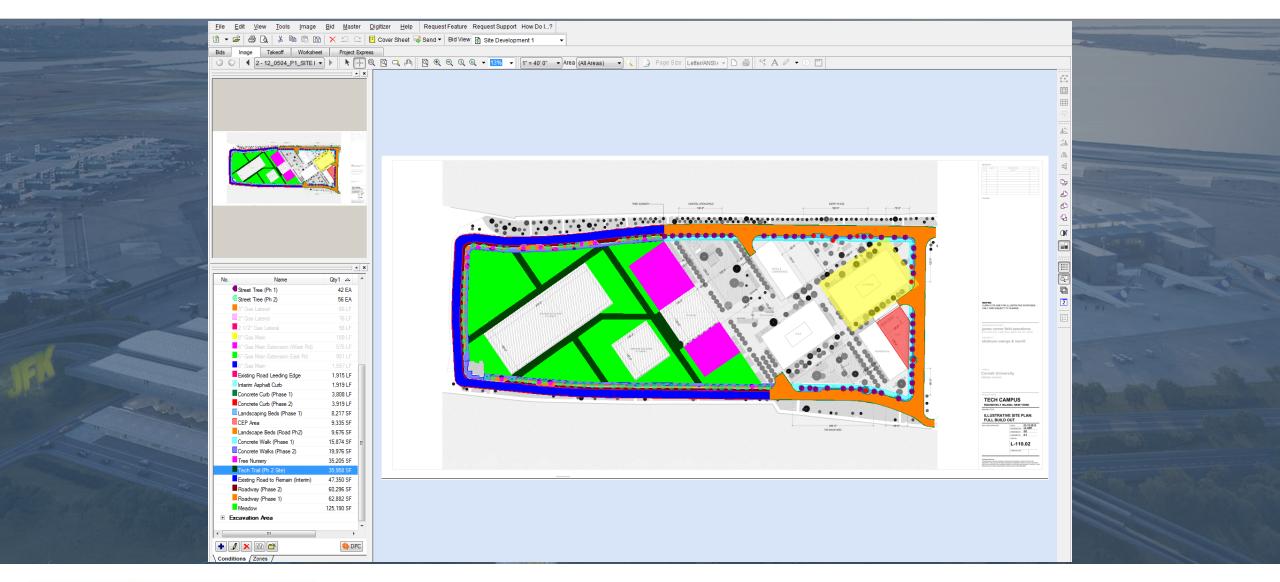


Technologies: On Screen Take-Off





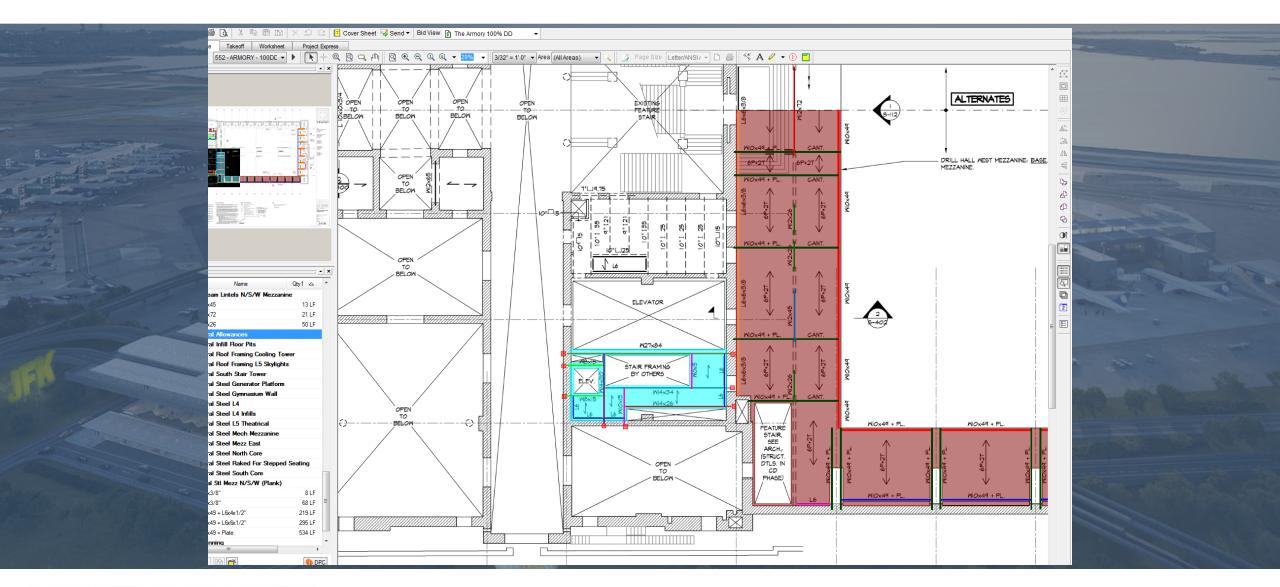
Technologies: On Screen Take-Off







Technologies: On Screen Take-Off

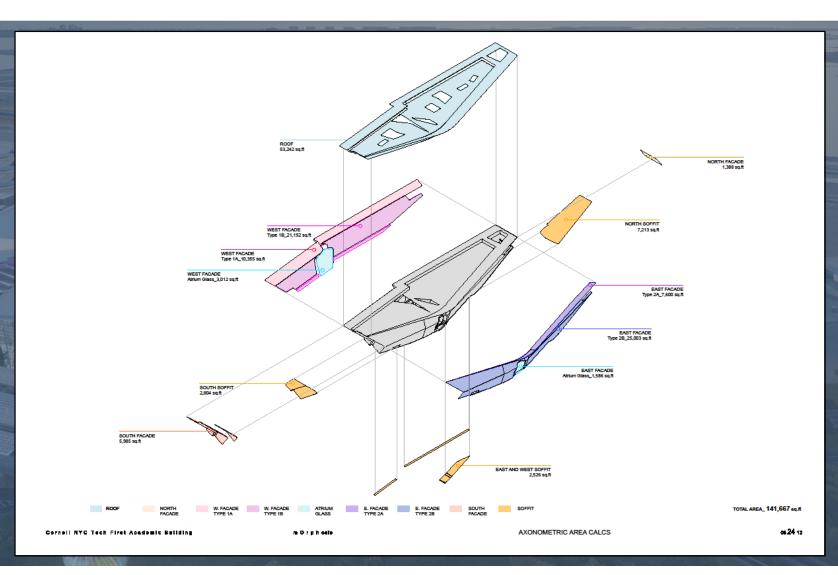






Emerging Technology: Building Information Modeling (BIM)

- Ability to extract accurate quantities from architectural and engineering models/drawings
- Reconcile quantities at each design milestone







Trends and Market Assessment







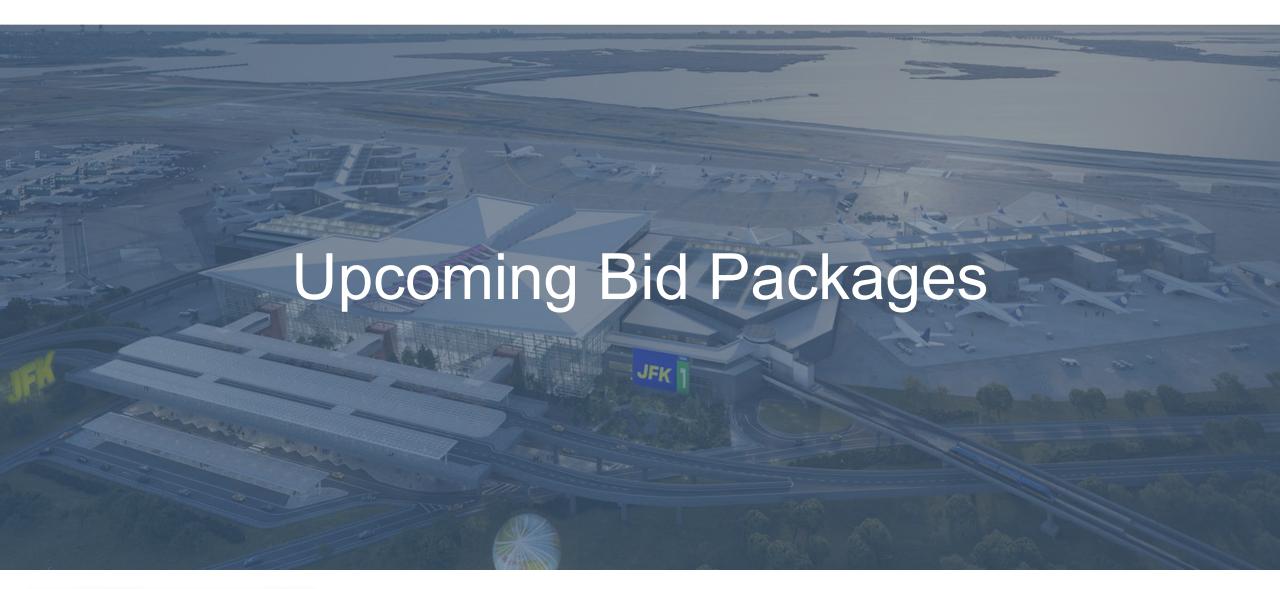
Maintaining Profitability

- Capturing a complete scope of work
- Purchasing material/equipment/subcontractors
- Preconstruction buyout material/equipment/subcontractors, submittals & approvals, planning
- Construction supervision, track productivity
- Post-op lessons learned





New Terminal One Procurement





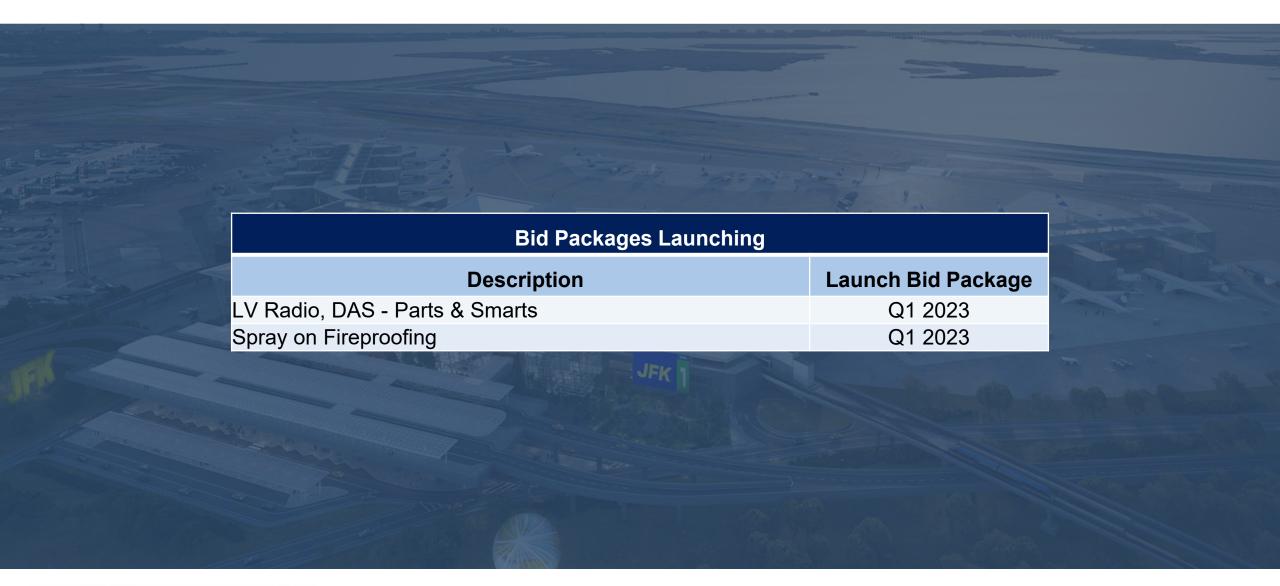


Bid Opportunities in Q4 2022

| Bid Packages Launching | | | | | | |
|--|--------------------|--|--|--|--|--|
| Description | Launch Bid Package | | | | | |
| Concrete Slab-On-Grade | Q4 | | | | | |
| Concrete Slab-on-Metal-Deck | Q4 | | | | | |
| Stair Steel | Q4 | | | | | |
| Miscellaneous Metals - Stairs and Roof Guard Rails | Q4 | | | | | |
| Miscellaneous Metals - Support Steel | Q4 | | | | | |
| Miscellaneous Metals - Ticketing Counters, Retail Support Steel and Baggage Handling Systems Platforms | Q4 | | | | | |
| Temporary and Permanent Carpentry | Q4 | | | | | |
| BATC | Q4 | | | | | |
| Low Voltage Security - Parts & Smarts | Q4 | | | | | |
| Low Voltage Telecom - Parts & Smarts | Q4 | | | | | |
| Masonry | Q4 | | | | | |
| Ornamental Metal & Glass | Q4 | | | | | |
| Interior Wall Paneling | Q4 | | | | | |
| Dock Guidance, Ramp Signage, etc. | Q4 | | | | | |



Bid Opportunities in Q1 2023





Completing the Prequalification Process





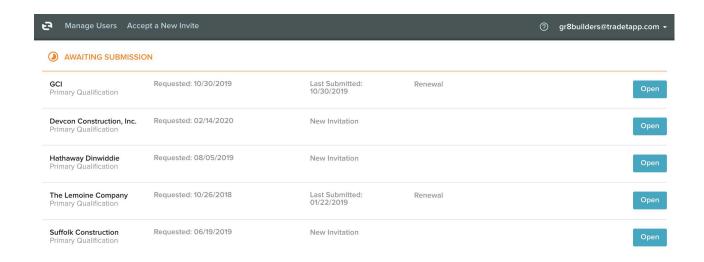
What is TradeTapp?

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.





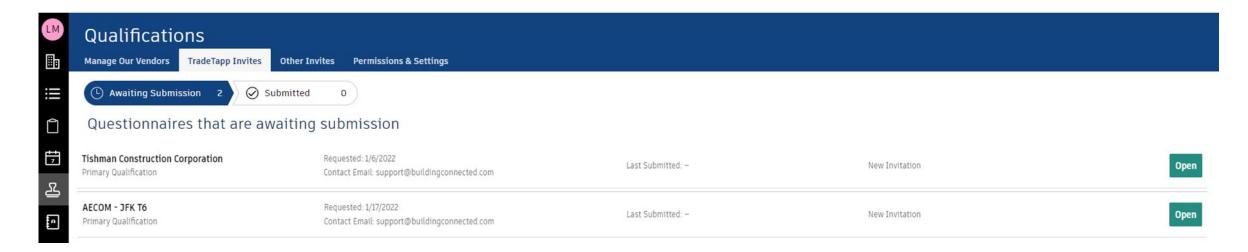


Difference between *Tishman Construction Corporation* and *AECOM JFK T6* Prequalification

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).







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.









Sign in to your BuildingConnected account

| Email | | |
|-------|------------------|--|
| | 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 <u>Tishman Construction</u> <u>Corporation</u> through TradeTapp but are not receiving the invitation email, there are several things we suggest you do:

- 1. Check spam & junk mail folders;
- 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.

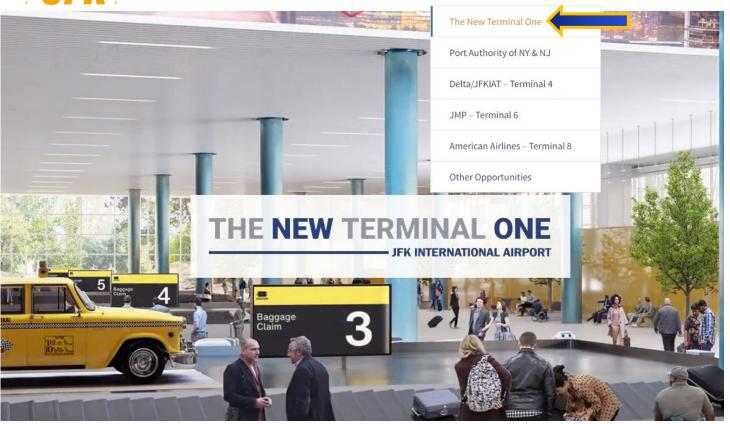








Public Link To Qualify



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



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



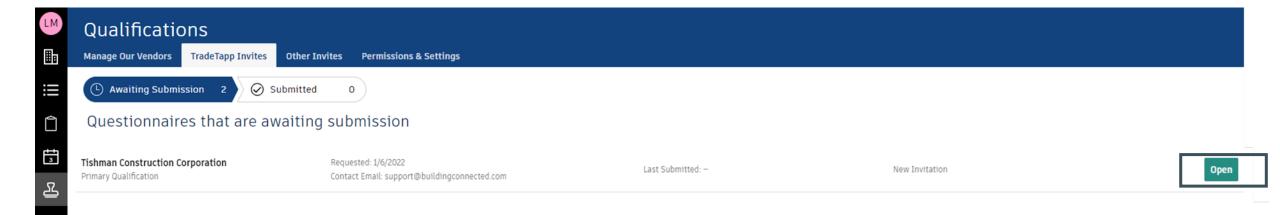




How to begin filling out the Prequalification Questionnaire





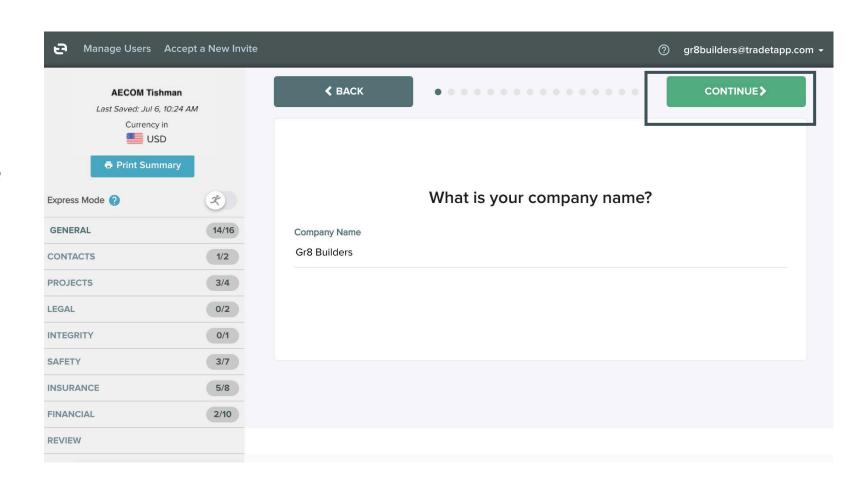


- Your main TradeTapp portal will include all of your pending submissions and all of your completed questionnaires.
- Navigate to the "Awaiting Submission" section and locate the request from AECOM Tishman.
- Click "Open" to begin filling out the questionnaire.





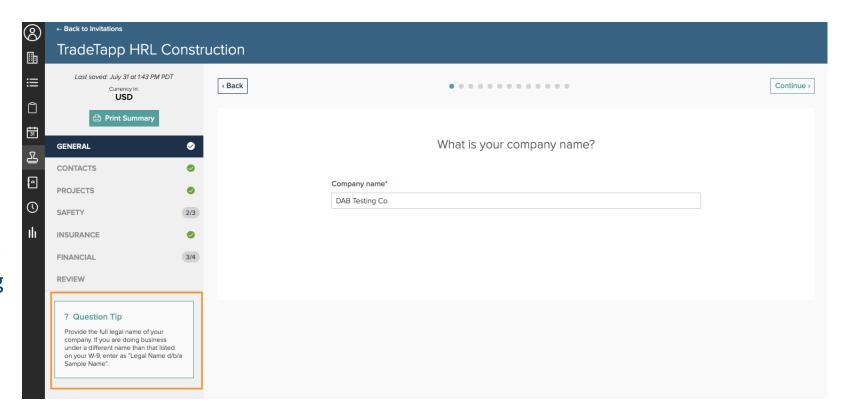
- Provide a response to each question and navigate through the questionnaire by using the "continue" button at the top.
- You can leverage the "back" button to go back to a previous question.







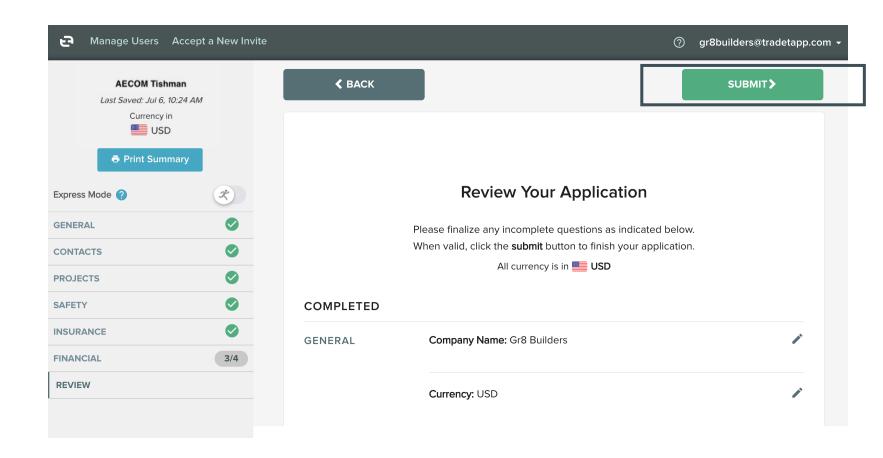
- If you are unsure what a question means or how to answer it, there are "Question Tips" which are located below the menu on the left-hand side of your questionnaire.
- If you have further question about your questionnaire, we recommend reaching out to: lnfo@onejfk.com.







- 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.







Tishman TradeTapp Questionnaire:

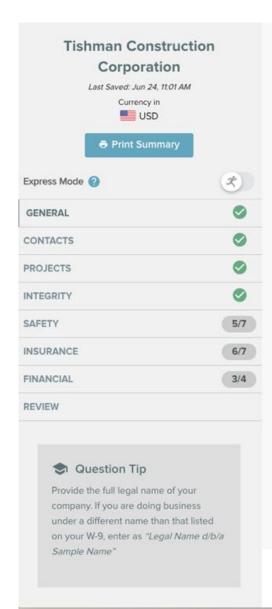
Primary Questionnaire
Supplier/Consultant Questionnaire

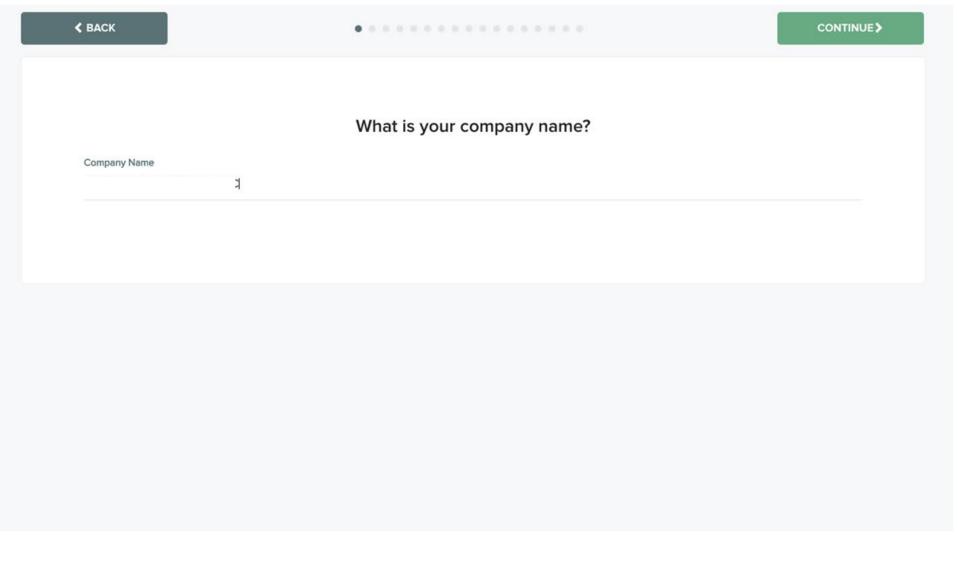




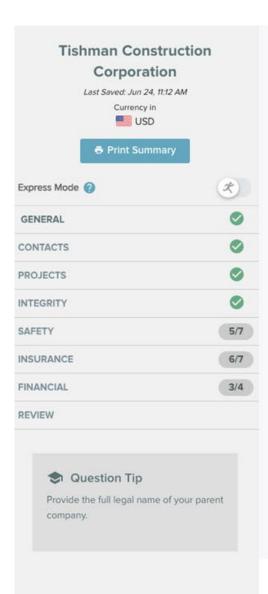
General

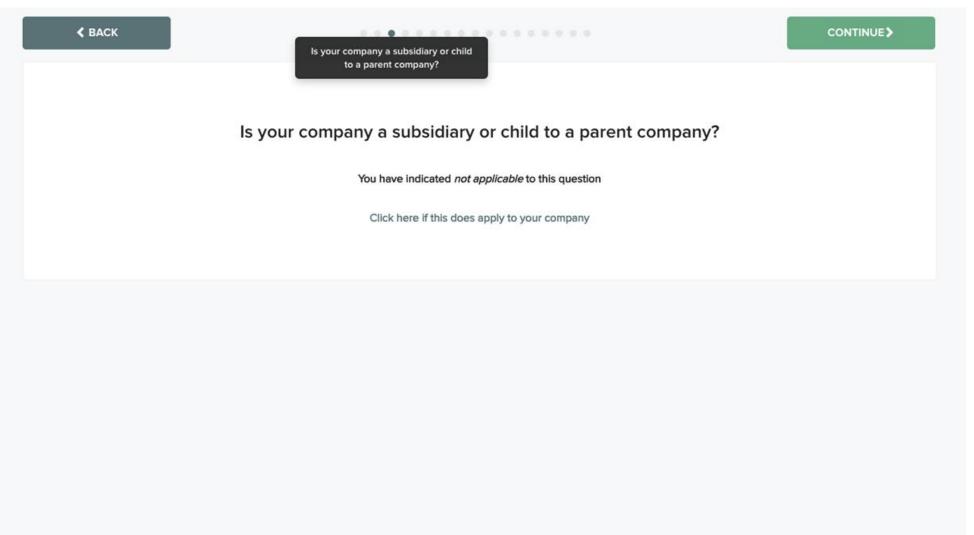






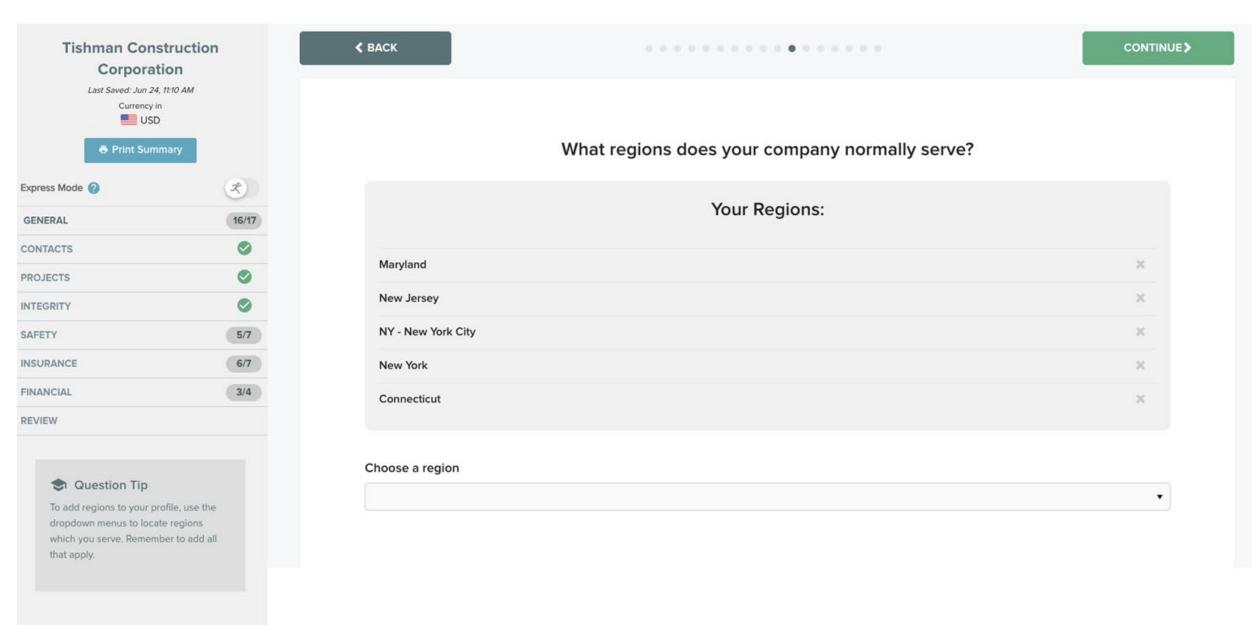






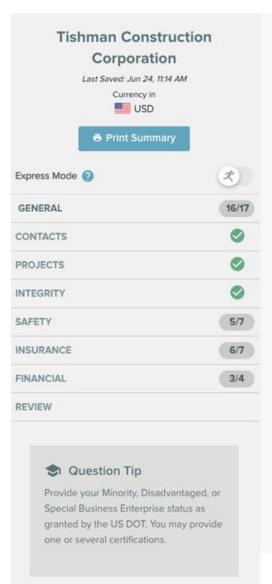


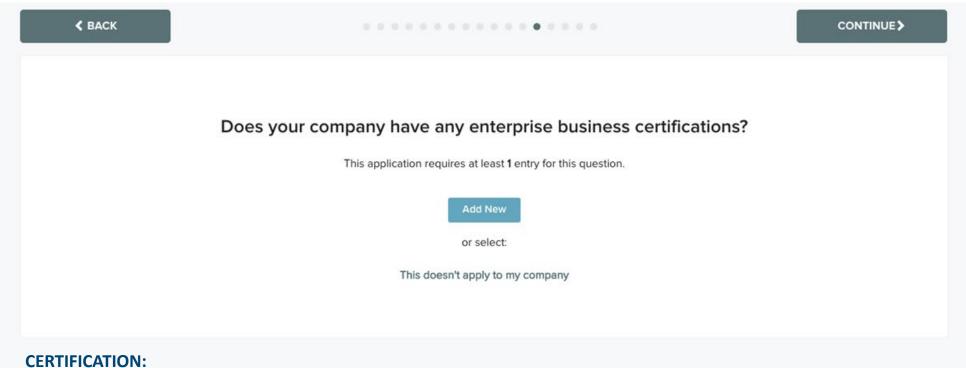












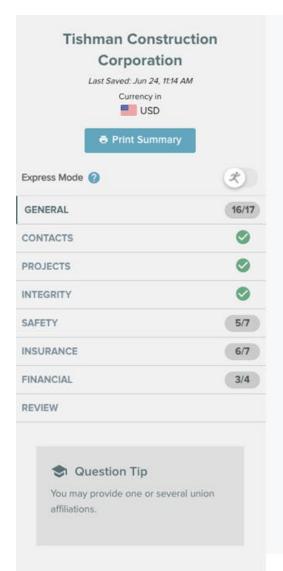
Woman-owned businesses (WBE)

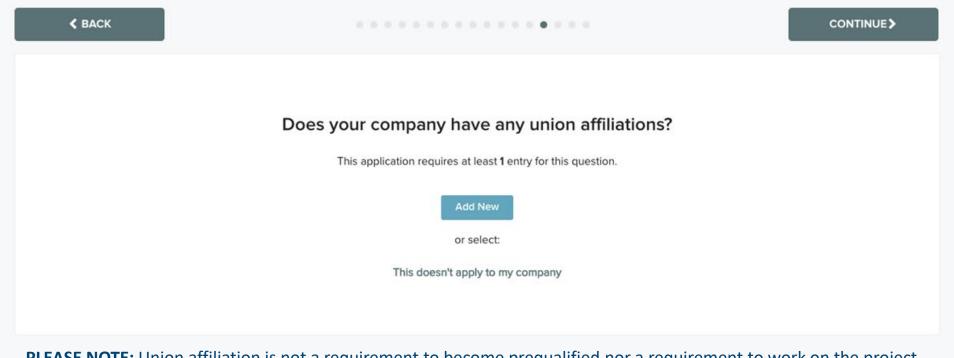
Minority-owned businesses (MBE)

Businesses owned by economically disadvantaged individuals (DBE)

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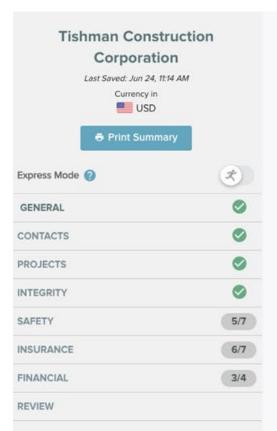


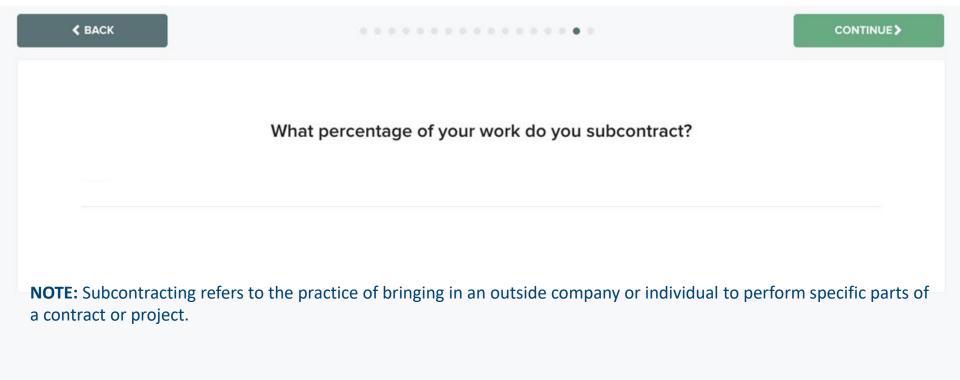


PLEASE NOTE: Union affiliation is <u>not</u> a requirement to become prequalified <u>nor</u> a requirement to work on the project.





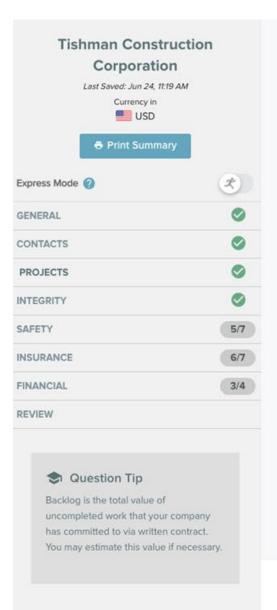


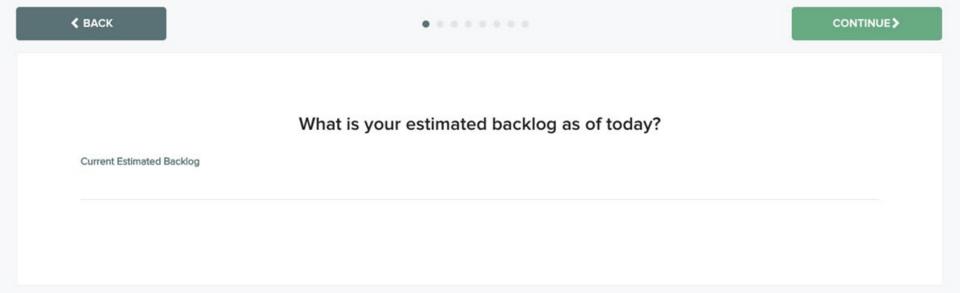






Projects

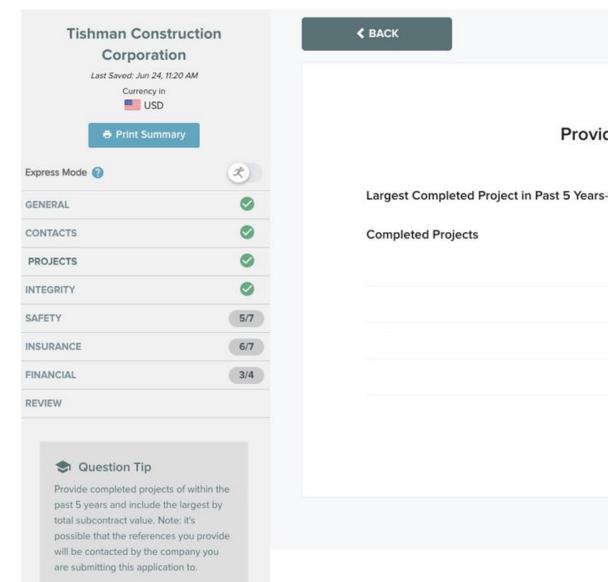


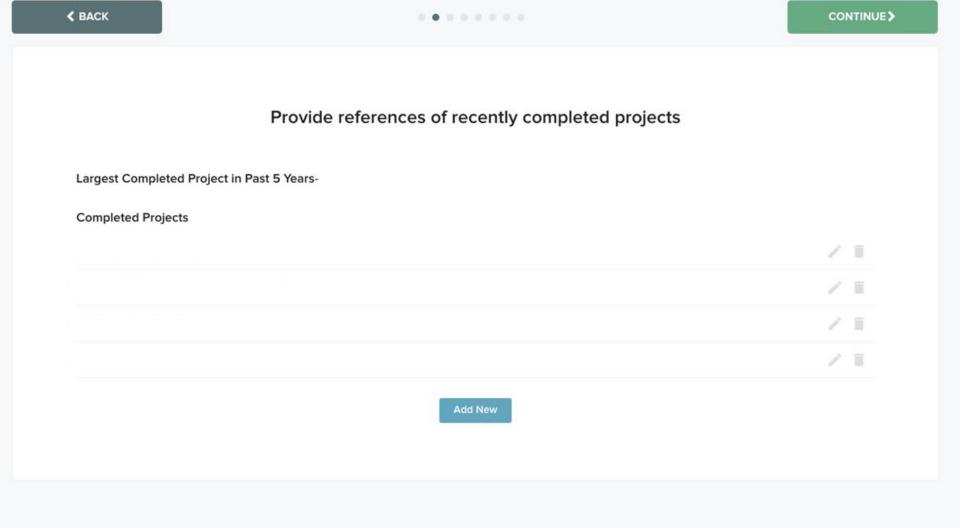


PLEASE NOTE: A backlog is a buildup of work that needs to be completed.



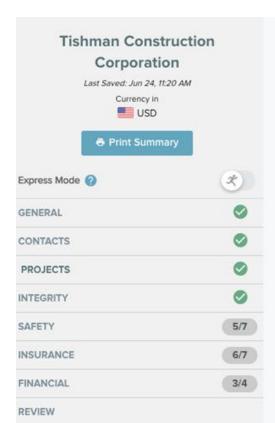


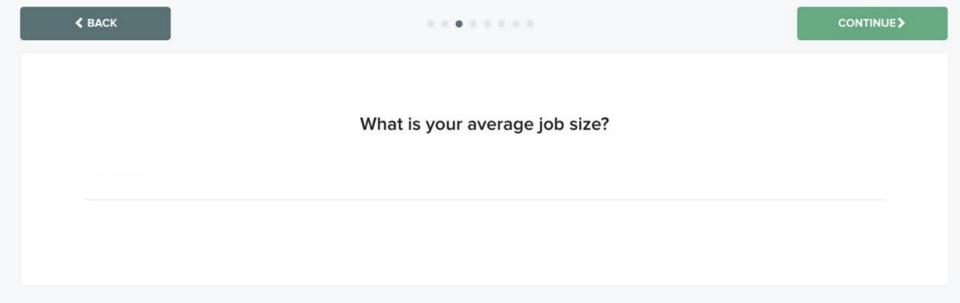




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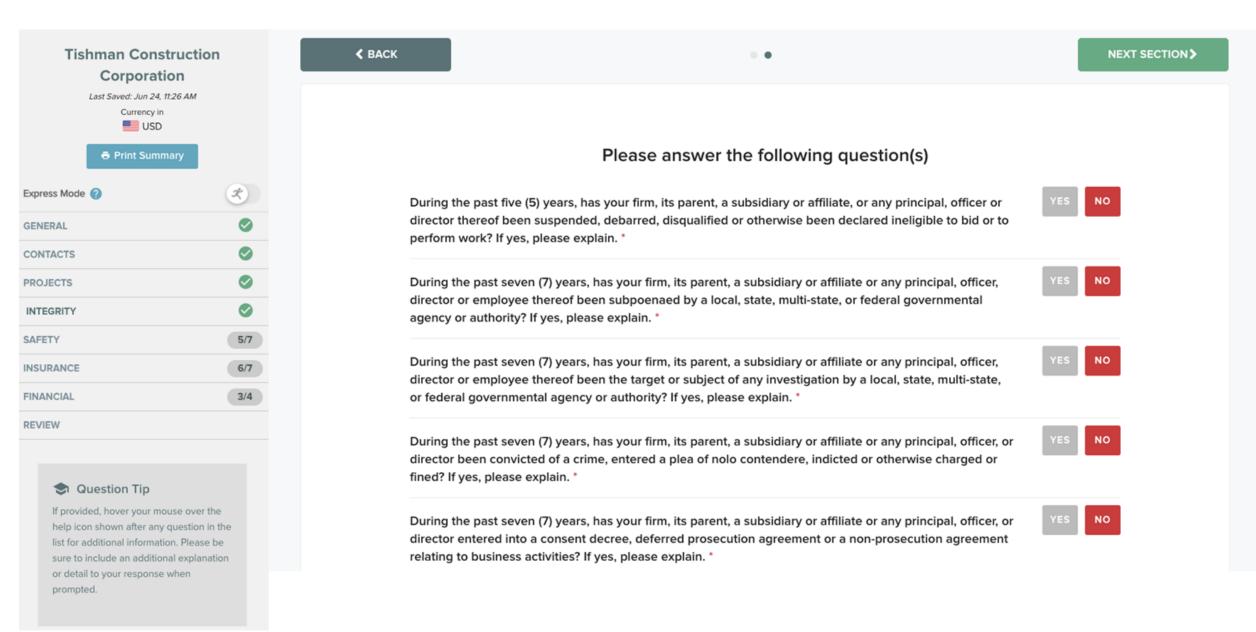








Integrity

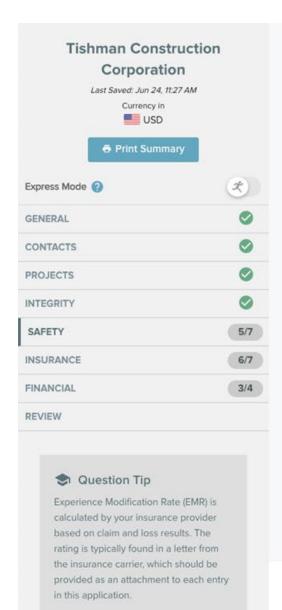


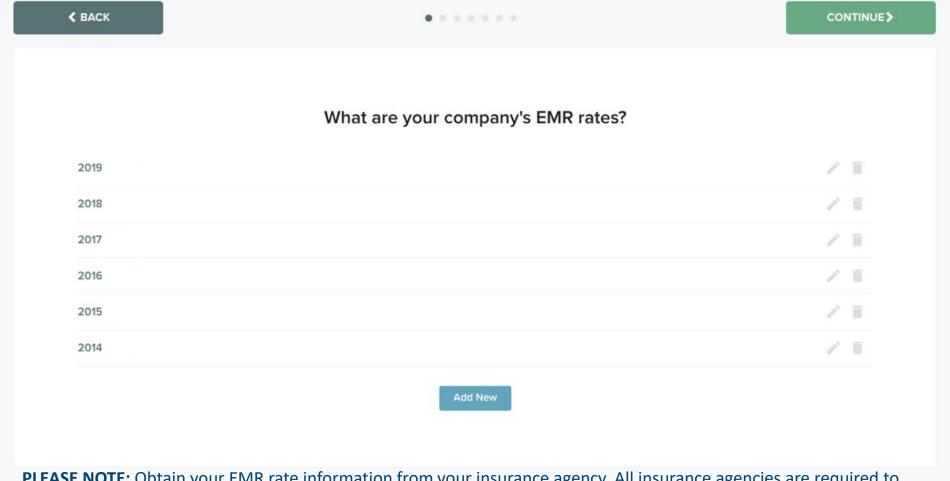


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Safety

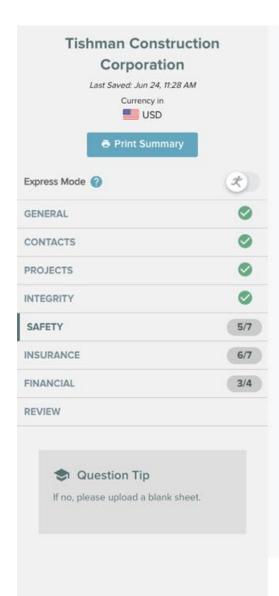


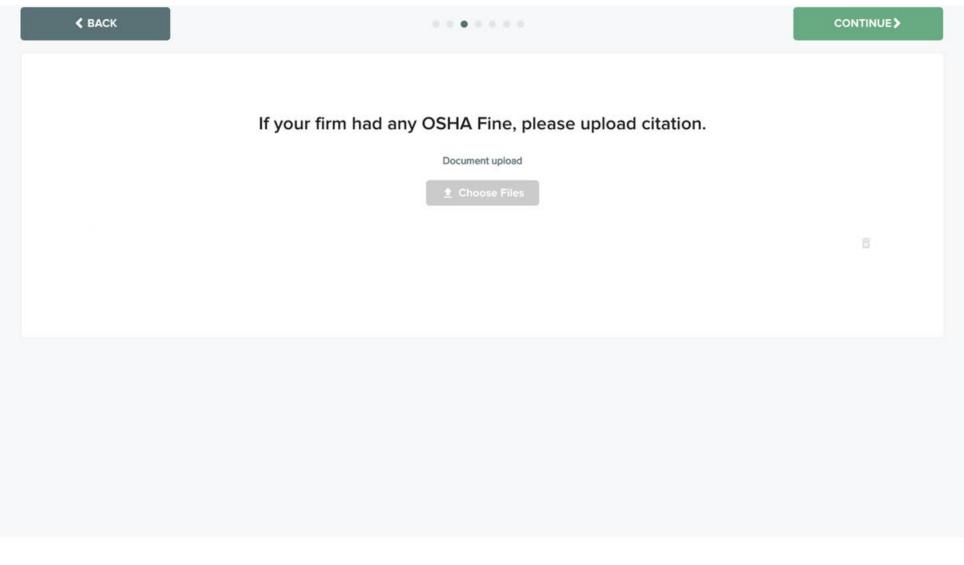


PLEASE NOTE: Obtain your EMR rate information from your insurance agency. All insurance agencies are required to provide the EMR rate to their corporate customers at the beginning of each fiscal year. If you are unsure about your current EMR rate, contact your insurance agent to find out what your rate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



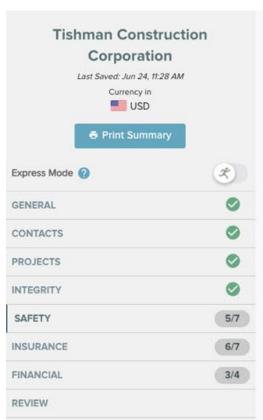


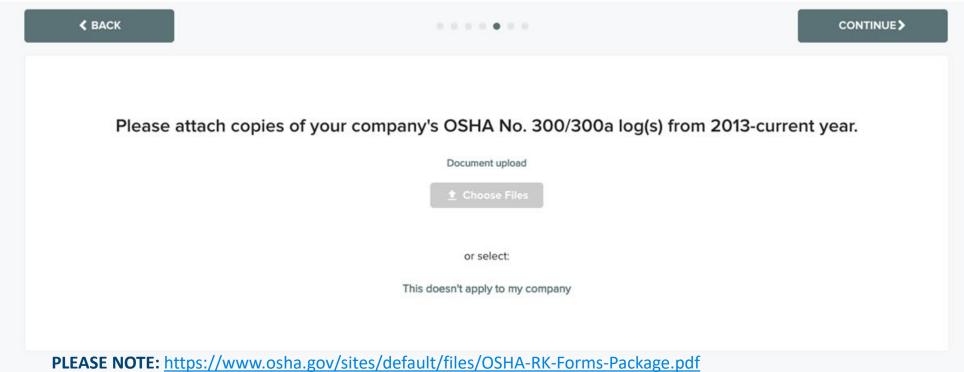














OSHA's Form 300 (Rev. 04/2004)

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.

Establishment name

Year 20

Form approved OMB no. 1218-0176

U.S. Department of Labor Occupational Safety and Health Administration

- · 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.

| | m | | | |
|--|---|--|--|--|
| | | | | |
| | | | | |

 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

| • Wo | | k-related injuries and illnesses t juries and illnesses that meet a 2. | | | | Feel free to use to | vo lines for a single case if teps for each case. | you need t | o. | | City | | | State |
|--------------|-----------------|---|-----------------------------|--|---------------------------------|--|--|--------------|-------------------------------|---------------------------------------|------------------------------------|---|---|--|
| St | ep 1. Idei | ntify the person | | Step 2. Des | cribe the case | | | | Classify | | | Step 4. | | Step 5. |
| | (A) Case | (B) Employee's name | (C) Job title | (D) Date of injury | (E) Where the event occurred | (F) Describe injury or illness, p | arts of body | | ONLY ONE (| circle based on ne: | the | Enter the ri days the in worker was | jured or ill | Select one column: |
| | no. | Employee's name | (e.g., Welder) | or onset of illness (e.g., 2/10) | | d) affected, and object/substan directly injured or made pe Second degree burns on right | rson ill (e.g., | | | Remained | at Work | worker was | | Illness |
| | | | | (0.8., 2/10) | | acetylene torch) | , | Death (G) | Days away from work (H) | Job transfer or restriction (I) | Other record- able cases (J) | Away from work (K) | On job transfer or restriction (L) | ikin disorder kespirat on ondition Poisoning kearing loss All other |
| Reset | | | | // | | | | \bigcirc | \bigcirc | \circ | \circ | days | days | (1) (2) (3) (4) (5) (6 |
| Reset | | | | month / day | | | | 0 | \circ | \circ | \circ | days | days | 000000 |
| Reset | | | | month / day | | | | 0 | \circ | \circ | \circ | days | days | 000000 |
| Reset |] | | | month / day | | | | 0 | \circ | \circ | \circ | days | days | 000000 |
| Reset | | | | month / day | | | | 0 | 0 | \circ | \circ | days | days | 000000 |
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| instructions | s, search and g | or this collection of information is est ather the data needed, and complete a | nd review the collection of | of information. Persons a | re not required to | dd a Form Page | Page totals | 0 | 0 | 0 | 0 | 0 | 0_ | 0 0 0 0 0 0 |
| estimates o | r any other as | of information unless it displays a cur sects of this data collection, contact: U Avenue, NW, Washington, DC 2021 | S Department of Labor, (| OSHA Office of Statistic | ral Analysis, Room | du a Foilli Fage | Be sure to trans | fer these to | tals to the Sui | mmary page (Fo | orm 300A) before | you post it. | | Injury Respiratory condition Poisoning All other |
| | | | | | | | | | | | | | _ | (1) (2) (3) (4) (5) (6 |

OSHA's Form 300A (Rev. 04/2004)

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.



U.S. Department of Labor Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

Summary of Work-Related Injuries and Illnesses

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 | S | | |
|--|--|--|--|
| 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) | (1) | (J) |
| Number of Days | | | |
| Total number of days away from work | | otal number of days of b transfer or restriction | |
| 0 | _ | 0 | |
| (K) | | (L) | |
| Injury and Illnes | s Types | | |
| Total number of (M) | • | | |
| (1) Injuries | 0 | (4) Poisonings | 0 |
| (2) Skin disorders | 0 | (5) Hearing loss | 0 |
| (3) Respiratory conditi | ions 0 | (6) All other illnesses | 0 |

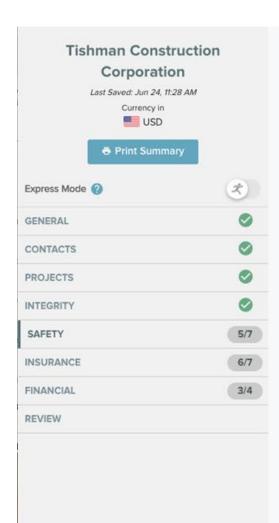
Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

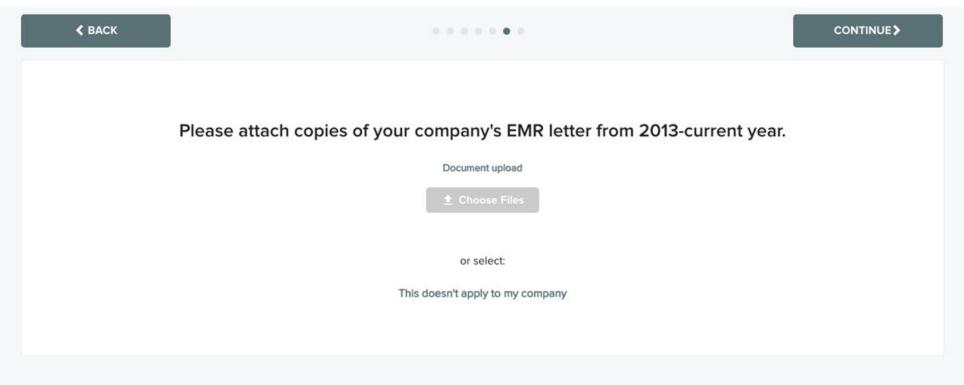
Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information 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.

| four establishment na | ime | | | |
|-----------------------|--|-------------|--------------|--------------|
| Street | | | | |
| City | Sta | ate | Zip | |
| Industry descript | ion (e.g., Manufacture | of motor tr | uck trailers |) |
| | | | | |
| North American | Industrial Classification | on (NAICS) | , if known (| e.g., 336212 |
| | | , , | , | |
| | | | | |
| | nformation (If you d e next page to estimate | | ese figures, | see the |
| Annual average | number of employees | | | |
| | ed by all employees la | ast year | | |
| Sign here | ed by an employees is | ist year _ | | |
| | olfida o Abio do como | | | |
| | sifying this docum | | | |
| | have examined this of the entries are true, | | | |
| | , | | | |
| Company execut | ive | 7 | Γitle | |
| Phone | | Date | | |
| | | | | |











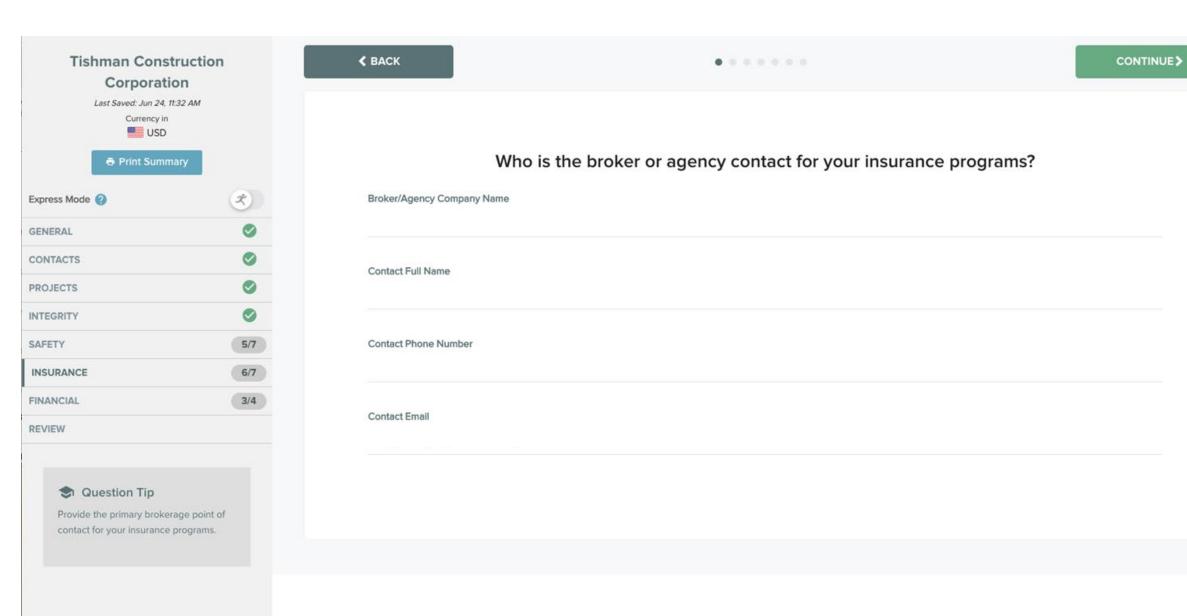


| To Whom it May Conce | ern;: | | |
|-------------------------|--------------------------------|---------------------|-----------------------------------|
| This is to certify that | Insurance Company | _ insures the above | referenced contractor under |
| policy# | | certifies the Exper | ience Modification Rate (EMR) for |
| 1 | vears, representative of the a | _ | |
| | | | |
| YEAR | EMR | YEAR | EMR |
| | | | |
| | | | |
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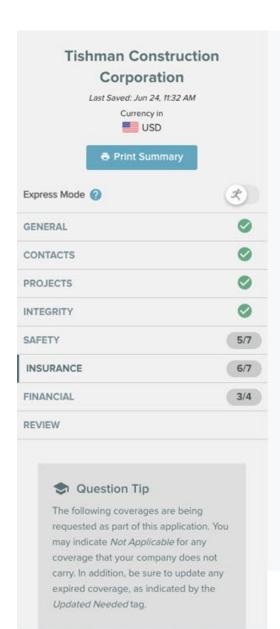


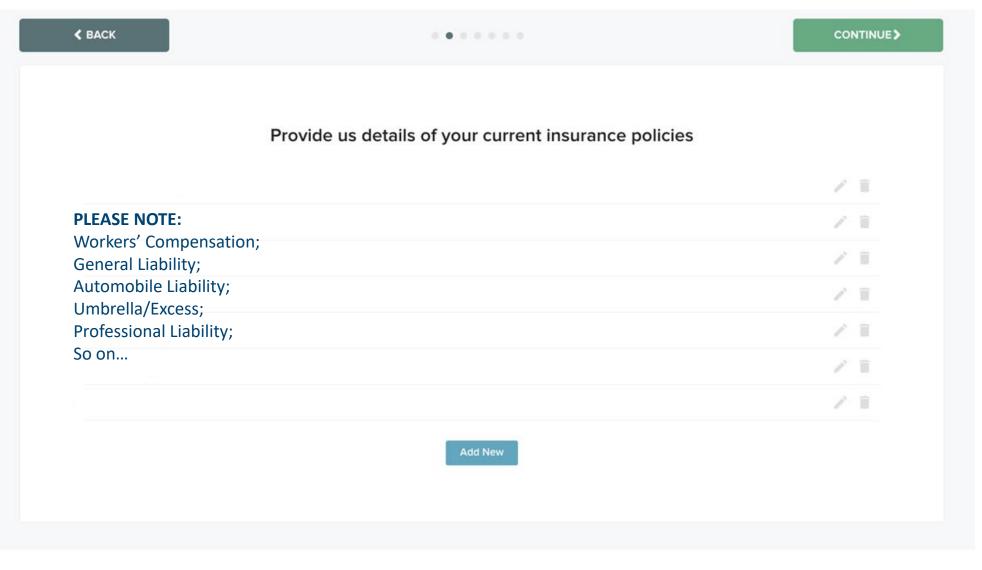
Insurance



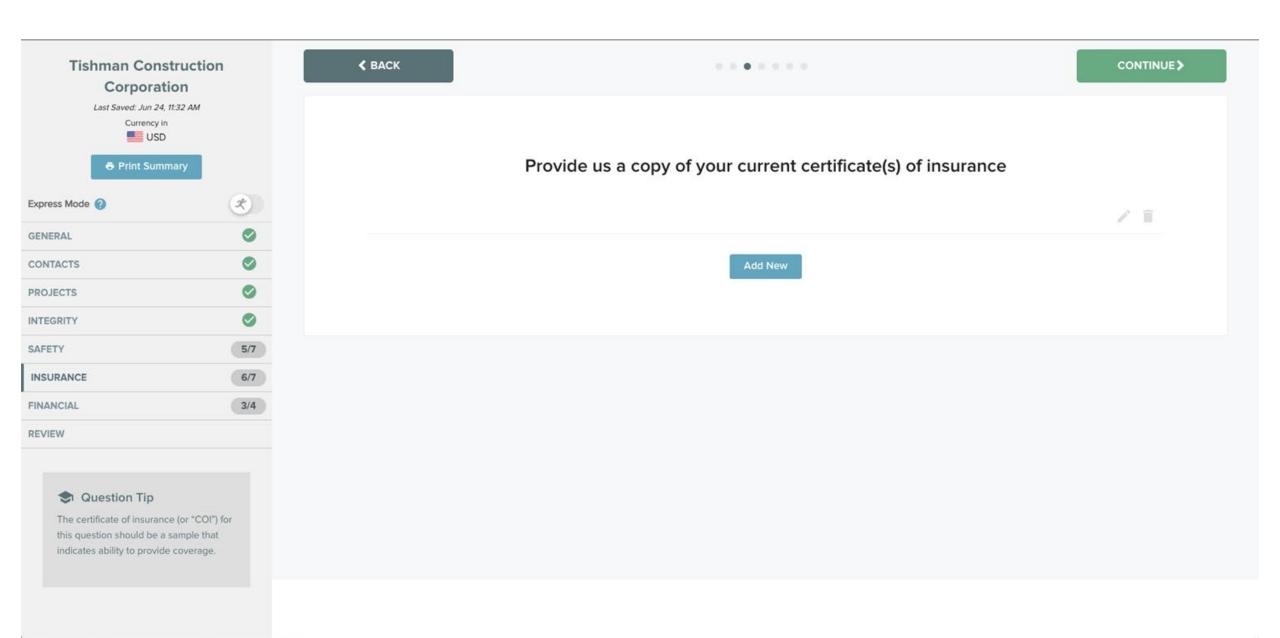








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| | | - | |

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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(les) 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 s | | | | | | |
|--|--|--------|--|--|--|--|
| PRODUCER | NAME: Carol Dozier | | | | | |
| Scarbrough Medlin & Associates, Inc. 5700 Granite Pkwy. #500 | PHONE (A/C, No. Ext): 214-423-3333 FAX (A/C, No): 214-423-33 | | | | | |
| Plano TX 75024 | E-MAIL ADDRESS: carol@scarbrough-medlin.com | | | | | |
| | INSURER(S) AFFORDING COVERAGE | NAIC # | | | | |
| | INSURER A: Utica Lloyds of Texas | 10990 | | | | |
| INSURED | INSURER B: Republic Franklin Insurance Company | | | | | |
| Total Office Solutions LLP, Move Solutions, Ltd. dba Move Solutions-Dallas, Ltd., Furniture | INSURER C : Service Lloyds | 43389 | | | | |
| Solutions NOW, Ltd. dba Corporate Source, Ltd. | INSURER D: Utica National Insurance Group | 25976 | | | | |
| Sojourner Properties, L.P. | INSURER E: | | | | | |
| 1473 Terre Colony Ct.; Dallas TX 75212 | INSURER F: | | | | | |

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.

| Į, | LTR | TR TYPE OF INSURANCE | | WVD | POLICY NUMBER | (MM/DD/YYYY) | (MM/DD/YYYY) | LIMIT | 8 |
|----|-----|---|-----|-----|---------------|--------------|--------------|---|----------------------|
| Γ | D | X COMMERCIAL GENERAL LIABILITY | | | CPP 5202293 | 11/1/2021 | 11/1/2022 | EACH OCCURRENCE | \$1,000,000 |
| П | | CLAIMS-MADE X OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$100,000 |
| П | | | | | | | | MED EXP (Any one person) | \$5,000 |
| П | | | | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| П | | GENL AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$2,000,000 |
| П | | POLICY X PRO- JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | \$2,000,000 |
| L | | OTHER: | | | | | | | \$ |
| Г | В | AUTOMOBILELIABILITY | | | 5188182 | 11/1/2021 | 11/1/2022 | COMBINED SINGLE LIMIT (Ea accident) | \$1,000,000 |
| П | | X ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| П | | OWNED SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | 94 |
| П | | X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | 94 |
| L | | | | | | | | PIP-Basic | \$10,000 |
| Г | Α | X UMBRELLALIAB X OCCUR | | | 5202294 | 11/1/2021 | 11/1/2022 | EACH OCCURRENCE | \$5,000,000 |
| П | | EXCESS LIAB CLAIMS-MADE | | | | | | AGGREGATE | \$5,000,000 |
| L | | DED X RETENTION\$ 10,000 | | | | | | | s |
| Г | С | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | SLICWC0120201 | 11/1/2021 | 11/1/2022 | X STATUTE OTH- | |
| П | | ANYPROPRIETOR/PARTNER/EXECUTIVE N | N/A | | | | | E.L. EACH ACCIDENT | \$1,000,000 |
| П | | (Mandatory in NH) | | | | | | E.L. DISEASE - EA EMPLOYEE | \$1,000,000 |
| L | | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$1,000,000 |
| | В | Hired & Non-Owned | | | 5188182 | 11/1/2021 | 11/1/2022 | Comprehensive Ded Collision Ded Actual Cash Value | 1,000.00 1,000.00 |

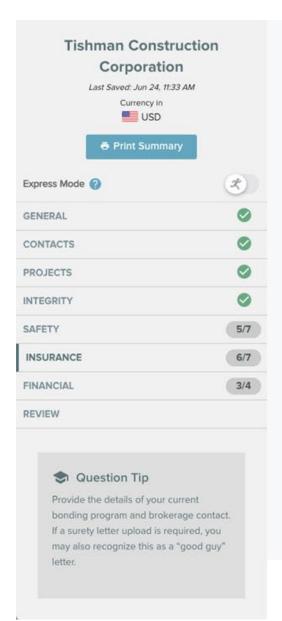
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 161, Additional Remarks Schedule, may be attached if more space is requiredly
Blanket Additional Insured with Ongoing & Completed Operations & Blanket Walver of Subrogation as required by written contract is included on Auto Policy. Blanket Walver of Subrogation as required by written contract is included on Auto Policy. Blanket Walver of Subrogation as required by written contract is included on Auto Policy. 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.

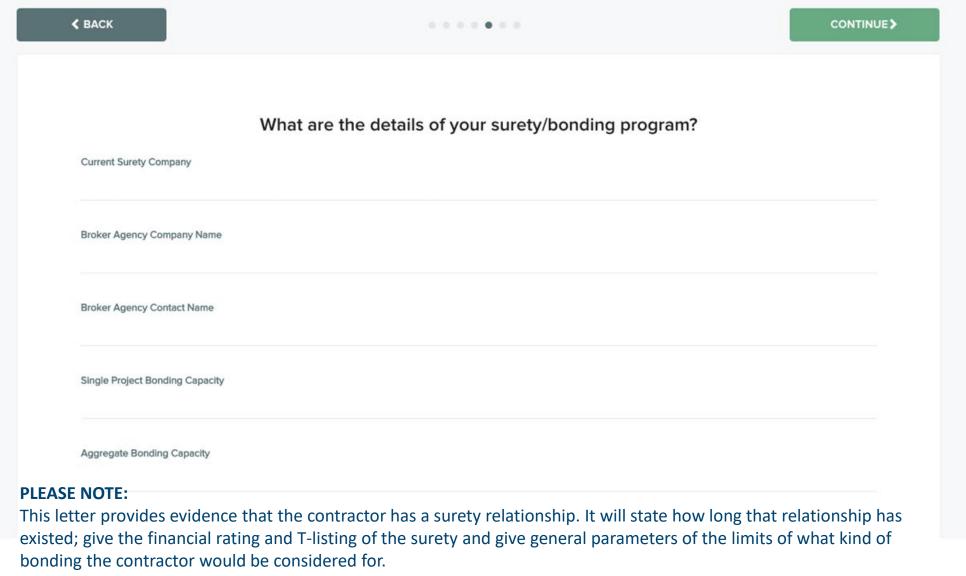
HCBeck, Ltd., and all limited partners, general partners and all affiliated companies, and shareholders, directors and officers of the foregoing entities are included under the blanket as Additional Insured.

| CERTIFICATE HOLDER | CANCELLATION | | | | | |
|----------------------------------|--|--|--|--|--|--|
| HCBeck, Ltd. 1807 Ross Avenue | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | | | |
| Suite 500 Dallas TX 75201 | AITHORIZED REPRESENTATIVE | | | | | |

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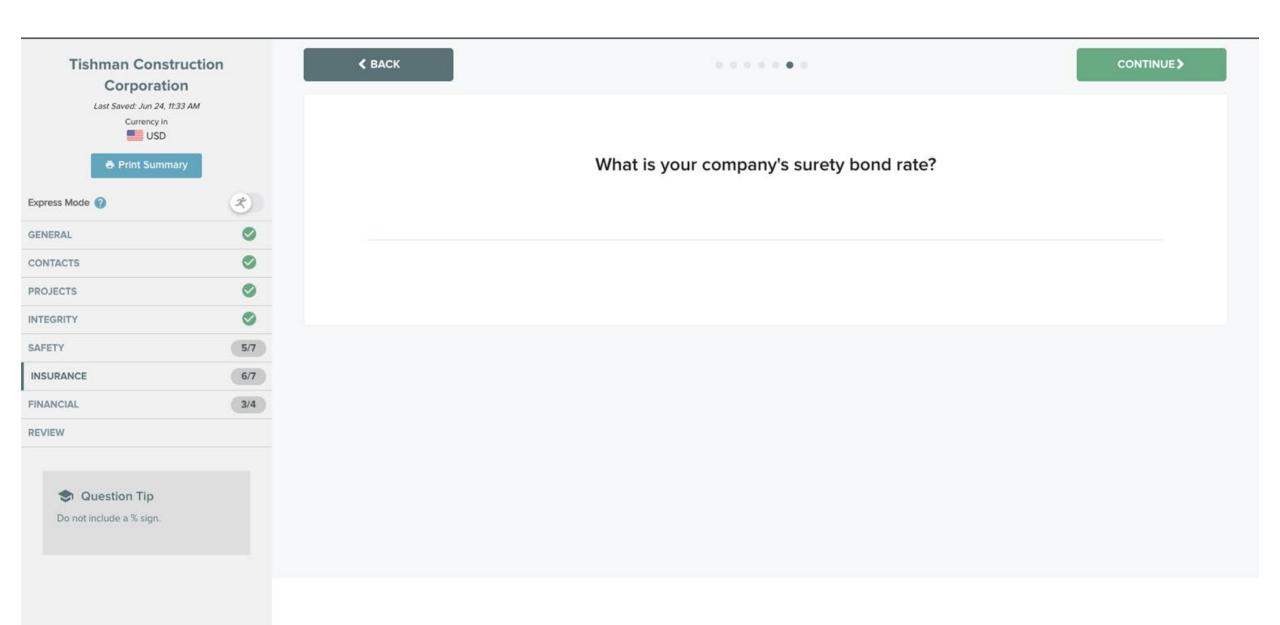






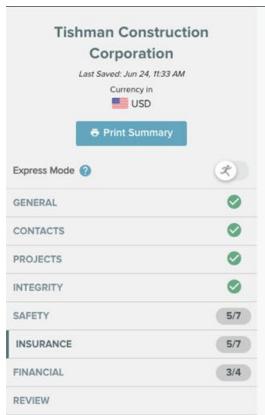


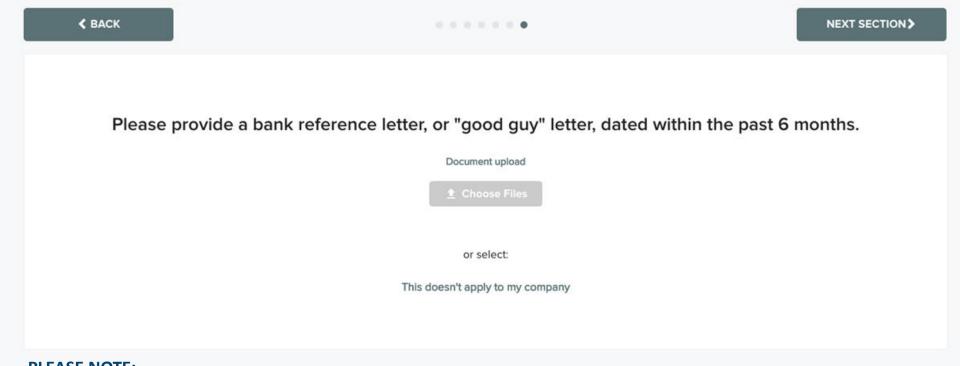












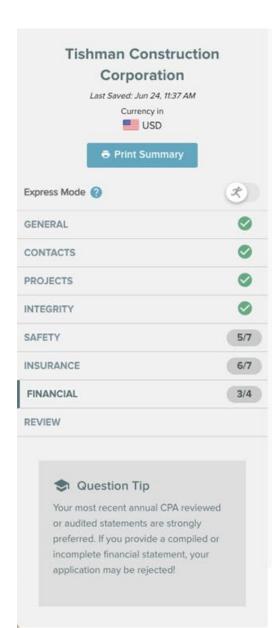
PLEASE NOTE:

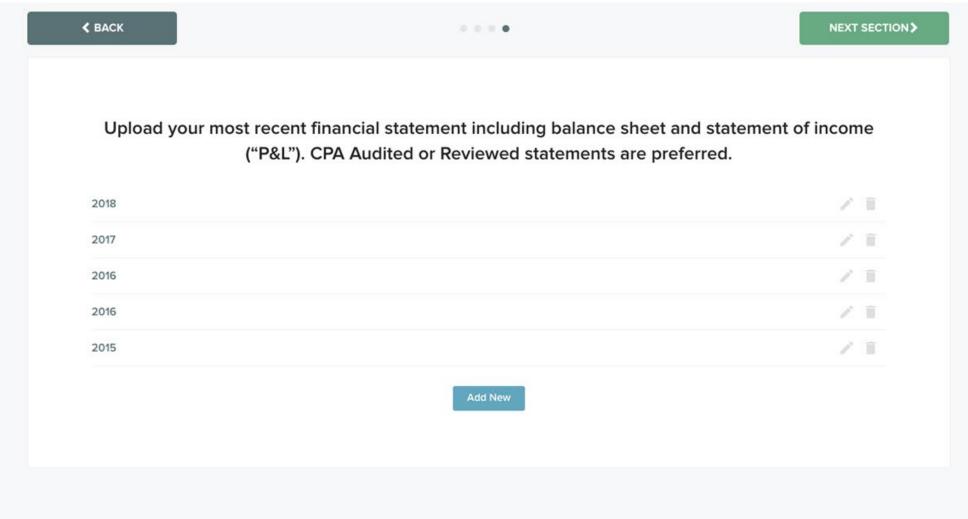
This is a letter that essentially states that the principal has an account and have a relationship with you. The letter does not typically say what the credit line is.





Financial

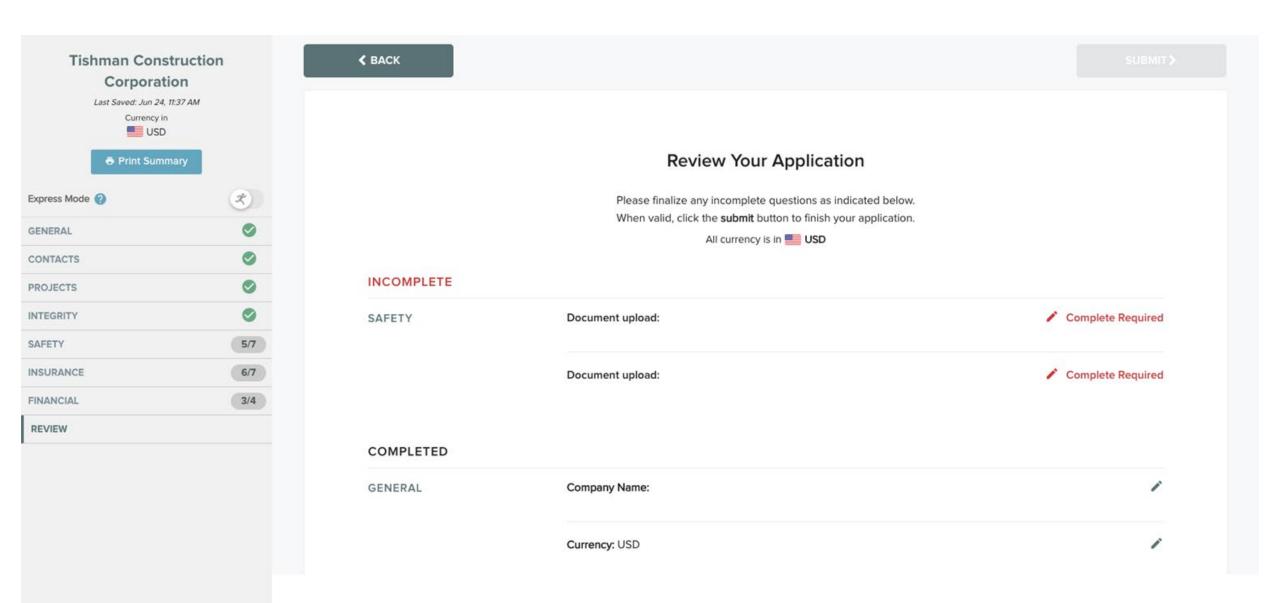








Review









Stay Connected with The New Terminal One

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/

November 17

NTO Local Workforce Event

December 13

NTO MWLBE/SDVOB Information Session

Additional sessions will be scheduled

Office Hours

Register for 1-on-1 Meetings:

Virtual: Daily from 9:00am to 5:00pm

In-Person: Wednesday's from 12:00pm to 4:00pm

