

Florida Design Drilling Corp.

Bid Contact **Jeffrey Holst**
jeff@fldrilling.com
Ph 561-844-2966

Address **7733 Hooper Road**
West Palm Beach, FL 33411

Item #	Line Item	Notes	Unit Price	Qty/Unit	Attch.	Docs
PSUT-17-09--01-01	HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 1.01 General Requirements (Temporary Facilities, bonds and insurance)	Supplier Product Code:	First Offer - \$60,000.00	1 / lump sum	\$60,000.00	Y Y
PSUT-17-09--01-02	HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 1.02 Mobilization / Demobilization	Supplier Product Code:	First Offer - \$70,000.00	1 / lump sum	\$70,000.00	Y
PSUT-17-09--01-03	HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 1.03 Testing & Survey	Supplier Product Code:	First Offer - \$15,000.00	1 / lump sum	\$15,000.00	Y
PSUT-17-09--01-04	HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 1.04 Prevention, control and	Supplier Product Code:	First Offer - \$5,000.00	1 / lump sum	\$5,000.00	Y

abatement of
erosion and
water pollution

PSUT-17-09--01-05	HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 1.05 Trench Safety Act Compliance	Supplier Product Code:	First Offer - \$5,000.00	1 / lump sum	\$5,000.00	Y
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Lot Total \$155,000.00

Item #	Line Item	Notes	Unit Price	Qty/Unit	Attch.	Docs
PSUT-17-09--02-01	HOLLY LAKE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 2.01 Site Work	Supplier Product Code:	First Offer - \$30,000.00	1 / lump sum	\$30,000.00	Y
PSUT-17-09--02-02	HOLLY LAKE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 2.02 Structural Work	Supplier Product Code:	First Offer - \$150,000.00	1 / lump sum	\$150,000.00	Y
PSUT-17-09--02-03	HOLLY LAKE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 2.03 Mechanical Work	Supplier Product Code:	First Offer - \$350,000.00	1 / lump sum	\$350,000.00	Y
PSUT-17-09--02-04	HOLLY LAKE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 2.04 Electrical Work	Supplier Product Code:	First Offer - \$140,000.00	1 / lump sum	\$140,000.00	Y
PSUT-17-09--02-05	HOLLY LAKE BOOSTER STATION	Supplier Product Code:	First Offer - \$130,000.00	1 / lump sum	\$130,000.00	Y

DISINFECTION
SYSTEM
IMPROVEMENTS:
2.05
Instrumentation
and Controls
Work

Lot Total \$800,000.00

Item #	Line Item	Notes	Unit Price	Qty/Unit	Attch.	Docs
PSUT-17-09--03-01	ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 3.01 Site Work	Supplier Product Code:	First Offer - \$20,000.00	1 / lump sum	\$20,000.00	Y
PSUT-17-09--03-02	ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 3.02 Structural Work	Supplier Product Code:	First Offer - \$160,000.00	1 / lump sum	\$160,000.00	Y
PSUT-17-09--03-03	ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 3.03 Mechanical Work	Supplier Product Code:	First Offer - \$100,000.00	1 / lump sum	\$100,000.00	Y
PSUT-17-09--03-04	ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS: 3.04 Electrical Work	Supplier Product Code:	First Offer - \$60,000.00	1 / lump sum	\$60,000.00	Y
PSUT-17-09--03-05	ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS:	Supplier Product Code:	First Offer - \$85,000.00	1 / lump sum	\$85,000.00	Y

3.05
Instrumentation
and Controls
Work

Lot Total \$425,000.00

Item #	Line Item	Notes	Unit Price	Qty/Unit	Attch.	Docs
PSUT-17-09--04-01	PERMIT ALLOWANCE: Permit Allowance	Supplier Product Code:	First Offer -	1 / lump sum		Y

Lot Total \$0.00

Supplier Total \$1,380,000.00

Florida Design Drilling Corp.

Item: **HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS:1.01**
General Requirements (Temporary Facilities, bonds and insurance)

Attachments

Attachment_B_-_Vendor_Information_Form_and_a_W-9.pdf

Attachment_O_-_Vendor_Certification_Regarding_Scrutinized_Companies_List.pdf

Bid Bond.pdf

Pre-bid Attendance Form.pdf

References - Projects.pdf

Vendor Drug-Free Workplace Certification Form.pdf



(OFFICE USE ONLY) Vendor number:

Please complete this vendor information form entirely along with the IRS Form W-9, scan and upload it to the www.bidsync.com

Vendor Information Form

Operating Name (Payee)	Florida Design Drilling Corporation		
Legal Name (as filed with IRS)	Florida Design Drilling Corporation		
Remit-to Address (For Payments)	7733 Hooper Rd		
	West Palm Beach, FL 33411		
Remit-to Contact Name:	Claire Dezotell	Title:	Secretary
Email Address:	accounting@fldrilling.com		
Phone #:	561-844-2966	Fax #	561-844-2967
Order-from Address (For purchase orders)	7733 Hooper Rd		
	West Palm Beach, FL 33411		
Order-from Contact Name:	Claire Dezotell	Title:	
Email Address:	accounting@fldrilling.com		
Phone #:	561-844-2966	Fax #	561-844-2967
Return-to Address (For product returns)	7733 Hooper Rd		
	West Palm Beach, FL 33411		
Return-to Contact Name	Jeffrey Holst	Title:	Vice President
Email Address:	jeff@fldrilling.com		
Phone #:	561-844-2966	Fax #	561-844-2967
Payment Terms:	Net 30 days		

Type of Business (please check one and provide Federal Tax identification or social security Number)

<input checked="" type="checkbox"/> Corporation	Federal ID Number:	20-2779560
<input type="checkbox"/> Sole Proprietorship/Individual	Social Security No.:	
<input type="checkbox"/> Partnership		
<input type="checkbox"/> Health Care Service Provider		
<input type="checkbox"/> LLC - C (C corporation) - <u>S (S corporation)</u> - P (partnership)		
<input type="checkbox"/> Other (Specify):		

Name of Applicant / Signature

Title of Applicant Vice President Date 11/21/17

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Florida Design Drilling Corp.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____
 C Corporation
 S Corporation
 Partnership
 Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
7733 Hooper Road

6 City, state, and ZIP code
West Palm Beach, FL 33411

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

			-						
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or

Employer identification number

2	0	-	2	7	7	9	5	6	0
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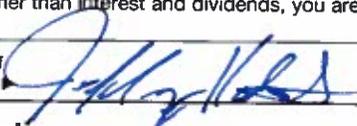
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person  Date ▶ **6/12/17**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

- An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:
- Form 1099-INT (interest earned or paid)
 - Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.
- By signing the filled-out form, you:
- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - Certify that you are not subject to backup withholding, or
 - Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



City of Pembroke Pines

**VENDOR CERTIFICATION REGARDING
SCRUTINIZED COMPANIZED LIST**

Respondent Vendor Name: Florida Design Drilling Corp.

Vendor FEIN: 20-2779560

Vendor's Authorized Representative Name and Title: Jeffrey Holst, Vice President

Address: 7733 Hooper Road

City: West Palm Beach State: FL Zip: 33411

Phone Number: 561-844-2966

Email Address: jeff@fldrilling.com

Section 287.135, Florida Statutes, prohibits agencies from contracting with companies, for goods or services of \$1 million or more, that are ineligible under Section 287.135(2), Florida Statutes. This requirement is not applicable to federally funded contracts.

As the person authorized to sign on behalf of Respondent, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not ineligible under Section 287.135(2), Florida Statutes. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject company to civil penalties, attorney's fees, and/or costs.

Certified By: Jeffrey Holst Florida Design Drilling Corp.

who is authorized to sign on behalf of the above referenced company.

Authorized Signature Print Name and Title:  Vice President

Date: 11/21/17

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we Florida Design Drilling Corporation (Here insert full name and address or legal title of Contractor)

7733 Hooper Road, West Palm Beach, FL 33411

as Principal, hereinafter called the Principal, and Western Surety Company (Here insert full name and address or legal title of Surety)

P.O. Box 5077, Sioux Falls, SD 57117-5077

a corporation duly organized under the laws of the State of South Dakota as Surety, hereinafter called the Surety, are held and firmly bound unto City of Pembroke Pines

601 City Center Way, Pembroke Pines, FL 33025

as Oblige, hereinafter called the Oblige, in the sum of FIVE PERCENT OF THE AMOUNT BID Dollars (\$ 5 %)

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, The Principal has submitted a bid for Booster Stations Disinfection System Improvements PSUT-17-09 (Here insert full name, address and description of project)

NOW, THEREFORE, if the Oblige shall accept the bid of the Principal and the Principal shall enter into a Contract with the Oblige in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Oblige the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Oblige may in good faith contract with another party to perform the Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

Signed and sealed this 5th day of December, 2017

Witness signature: Michael Black

Witness signature: Jenni Marous

Florida Design Drilling Corporation (Principal) (Seal)

Signature: Jeffrey Holst (Title) VICE PRESIDENT

Western Surety Company (Surety) (Seal)

Signature: Allyson Foss (Title) Attorney-In-Fact & Florida Licensed Resident Agent

Inquiries: (321) 800-6594

PSUT-17-09

Western Surety Company

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That WESTERN SURETY COMPANY, a South Dakota corporation, is a duly organized and existing corporation having its principal office in the City of Sioux Falls, and State of South Dakota, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

Allyson Foss, Jorge L Bracamonte, Individually

of Winter Park, FL, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature In Unlimited Amounts- for any and all surety bonds and any and all consents required by the State Department of Transportation of the State of Florida, incident to the release of retained percentages and/or estimates on engineering and/or construction contracts and to bind it thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the corporation and all the acts of said Attorney, pursuant to the authority hereby given, are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law printed on the reverse hereof, duly adopted, as indicated, by the shareholders of the corporation.

In Witness Whereof, WESTERN SURETY COMPANY has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 9th day of July, 2015.



WESTERN SURETY COMPANY

Paul T. Bruflat

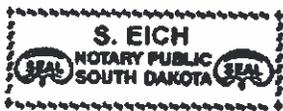
Paul T. Bruflat, Vice President

State of South Dakota }
County of Minnehaha } ss

On this 9th day of July, 2015, before me personally came Paul T. Bruflat, to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is the Vice President of WESTERN SURETY COMPANY described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporation and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporation.

My commission expires

February 12, 2021



S. Eich

S. Eich, Notary Public

CERTIFICATE

I, L. Nelson, Assistant Secretary of WESTERN SURETY COMPANY do hereby certify that the Power of Attorney hereinabove set forth is still in force, and further certify that the By-Law of the corporation printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said corporation this 5th day of December, 2017.



WESTERN SURETY COMPANY

L. Nelson

L. Nelson, Assistant Secretary

Authorizing By-Law

ADOPTED BY THE SHAREHOLDERS OF WESTERN SURETY COMPANY

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the shareholders of the Company.

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, and Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.



City of Pembroke Pines

Mandatory Pre-Bid/Site Visit Confirmation Form

The scanned form, signed by both the Contractor and City Representatives must be uploaded in order for the bid to be considered complete.

Jay Bright, who is a representative of
(Printed name of Contractor's representative)

Florida Design Drilling PERSONALLY came and appeared
(Contractor's Company)

before me and affirms that they have completed the mandatory pre-bid/site visit on this the

16 day of November, 2017 as required by:

Solicitation #: PSPW-17-09

Solicitation Title: Booster Stations Disinfection System Improvements

Jay Bright
(Contractor Representative's Printed Name)

David Stanbaugh
(City Representative's Printed Name)

[Signature]
(Contractor Representative's Signature)

[Signature]
(City Representative's Signature)

Florida Design Drilling
(Contractor's Company)

Engineer
(City Representative's Department)

561 818 9802
(Contractor's Phone Number)

(City Representative's Phone Number)

11/16/17
(Date)

11/16/17
(Date)

The City requires all questions on the " the BidSync website. Such request must be received by the "Question Due Date," questions received after the "Question Due Date" shall not be answered. Interpretations or clarifications in response to such questions will be issued via BidSync. The issuance of a response via BidSync is considered an Addendum and shall be the only official method whereby such an interpretation or clarification will be made.

Lift Station No. 309 Improvements

Owner: City of Boynton Beach

Engineer: Mathews Consulting

Contact: Jose Huertas

Phone: 561-742-6487

Description: The project consists of furnishing all labor, materials, equipment and all incidentals and appurtenances for the installation of: approximately 410 LF of 16-inch DR-18 C-900 PVC and 2,460 LF of 18-inch DR-11 HDPE (by directional drill) force main piping; replacement of existing jockey pump with a third duty, 91 Hp dry-pit submersible pump; conversion of existing Generator Building into new Electrical Building with new MCC with integral VFDs, new Control Panel and electrical appurtenances; installation of new diesel engine driven standby pump; various site/civil improvements; various process yard piping and pump station mechanical improvements; various structural and architectural improvements to the existing buildings; various electrical improvements including new electrical service feed, manual transfer switch, 75 KVA transformer, lighting panel and HVAC system. Work also includes clearing and grubbing, dewatering, bypass pumping, MOT plans, complying with permit conditions, testing and all restoration work for a complete and operating system.

Completed: October-17
Amount: \$ 1,832,000

On time? Yes
Change Orders: \$ 26,173

Reverse Osmosis Water Treatment Plant Acid Dilution System

Owner: City of Lake Worth

Engineer: AECOM

Contact: Julie Parham

Phone: 561-586-1798

Description: The proposed work consists of providing all labor, materials, equipment and incidentals required to construct as detailed in the contract documents. The work includes, but not necessarily limited to the following:
 Removing some 20 inch stainless steel pipe, fabrication of 20 inch stainless steel pipe spool pieces and restoration of a masonry wall
 Fabrication and installation of a new 20 inch in line stainless steel static mixer
 Fabrication and installation of a Sulfuric acid dilution system
 Installation of raw water booster pumps; piping, valves and appurtenances
 Installation of Halar piping, valves, and appurtenances and
 Bacteriological testing of raw water main.

Completed: May-17

On time? Yes

Amount: \$ 199,000

Change Orders: \$ (2,408)

Construction of Glades WWTD Bio Solids Cake System

Owner: City of Port Saint Lucie

Engineer: City of Port Saint Lucie

Contact: Rich Schoenborn

Phone: 772-873-6485

Description: The project work consists of the furnishing of all labor, materials, and equipment and the performance of all work included in this Contract including the partial demolition of the existing dewatered bio-solids cake conveyor system, construction of a new dewatered biosolids cake conveyance system complete with positive displacement pump, discharge piping system, meter pump and sludge cake lubrication system, valves, conveyors, concrete slabs, housekeeping pads, awnings, supports, hangers, metal fabrications and connections to existing conveyors, instrumentation, electrical connections, conduit, wiring, starters, control panel, modifications to the Glades SCADA and process/instrumentation control system, testing and all other accessories and appurtenances as required for a complete and operational dewatered bio-solids cake pumping system that is both locally and remotely monitored and controllable by the CITY and works with the existing centrifuge system.

Completed: June-17

On time? Yes

Amount: \$ 519,000

Change Orders: None

Floridan Well F-5 Wellhead and Raw Water Main

Owner: Seacoast Utility Authority

Engineer: Holtz Consulting Engineers

Contact: Brandon Selle

Phone: 561-627-2900

Description: The Project entails the construction of a stainless steel wellhead on an existing well with pump, motor, controls, piping, valves and fittings, concrete work, fencing, and electrical work and a 16-inch PVC and HDPE raw water main from the new wellhead to the Hood Road Administration Complex through 2 phases of construction. Phase 1 shall consist of the construction, testing and the restoration activities of the raw water main and a 2-inch fiber-optic conduit installed via open-cut and horizontally directional drilling methods through The Isles from the SUA Administration Complex to the EPB-3C Canal. Phase 2 shall consist of the construction, testing, and restoration activities of a raw water main and 2-inch fiberoptic conduit along the EPB 3C Canal to the location of Floridan Well F-5 and the installation of the new wellhead including all piping, electrical, instrumentation, mechanical, structural, civil, and restoration work required for a fully functioning system.

Completed: June-17 **On time?** Yes
Amount: \$ 893,000 **Change Orders:** \$ 14,574

Reconstruction of Surficial Aquifer Wells Nos. HR-7, HR-12 and HR-13

Owner: Seacoast Utility Authority **Engineer:** Holtz Consulting Engineers
Contact: Brandon Selle **Phone:** 561-627-2900

Description: Reconstruction of three new surficial production wells, 16" PVC casing, 130-140' depth, well screen, with 40 HP submersible pumps, ductile iron raw water main & wellheads, concrete, instruments & programming, RTU, SCADA, Fiber Optic cable, control panels, new 4160V electrical service, fencing.

Completed: On Going **On time?** Yes
Amount: \$ 1,486,122 **Change Orders:** \$ 215,509

Sodium Hypochlorite Storage and Feed Systems Replacing the Existing Gas Chlorine Systems

Owner: City of West Palm Beach **Engineer:** Kimley-Horn & Associates
Contact: Edna Bonelli **Phone:** 561-494-1157

Description: 1. A new sodium hypochlorite feed system to replace the existing gas chlorine feed system at the Ibis Water Re-pump Station as shown on the Drawings. A new aqueous ammonia feed system also will be installed at the Ibis site to replace the existing aqueous ammonia feed system. The new aqueous ammonia feed system will be installed in phases as the existing ammonia feed system is removed in order to provide continuous ammonia feed. The work at the Ibis site includes a new chemical injection and flow meter vault constructed over the existing storage tank influent pipe, chemical and sample piping, one sodium hypochlorite storage tank, two duplex metering pump skids for sodium hypochlorite and two duplex metering pump skids for aqueous ammonia, ammonia and sodium hypochlorite injectors, one static mixer, chlorine and ammonia residual analyzers, modifications to the existing pump station building, instrumentation, controls, and electrical construction. 2. The four typical sodium hypochlorite feed systems are designed to be installed inside new precast concrete shelters. The work at each site includes installation of new chemical injectors, chemical containment piping from each shelter to the chlorine injection points, one static mixer (Valley Forge only), water supply piping to each shelter, landscaping around each shelter, piping modifications, instrumentation, controls and electrical construction. Each shelter will provide a climate controlled location for the installation of one duplex metering pump skid, one chemical storage tank, chemical containment, safety shower, hose reel, exhaust fan, air conditioner, electrical, instrumentation and controls. The construction of the new typical sodium hypochlorite feed system at each site requires phasing and coordination with the Owner that allows the existing gas chlorine feed system to remain in operation while new system is constructed and tested, without interruption to the operation of the existing chlorine gas feed system, and followed by demolition of the existing gas chlorine feed systems.

Completed: On Going **On time?** Yes
Amount: \$ 2,152,000 **Change Orders:** \$ -

Lift Station 23 Rehabilitation

Owner: City of West Palm Beach

Engineer: Kimley-Horn & Associates

Contact: Edna Bonelli

Phone: 561-494-1157

- Description:**
1. Demolition as shown in the plans and technical specifications.
 2. All labor, material and equipment necessary for structural improvements, including a 248 SF +/- expansion to the existing 428 SF lift station building with new foundation; stucco; painting; rolling overhead steel door; roofing; interior aluminum stairs & landing; exterior concrete stairs; aluminum handrails; bridge crane I-beams; flood gate; concrete & SS pipe supports; concrete restoration; and other miscellaneous structural improvements.
 3. All labor, material and equipment necessary for mechanical improvements, complete, including all pipe, fittings, accessories, valves & actuators; AC system; crane & trolley; fire extinguishers; and other miscellaneous mechanical improvements.
 4. All labor, material and equipment necessary for electrical and controls system, including FPL fees, primary installation, generator with enclosure, automatic transfer switch, panels, main disconnect switch, VFD drives, pump terminal box, level transmitter, pressure transmitter, float switches and other miscellaneous electrical improvements.
 5. All labor, material and equipment necessary to accomplish the site work including the force main connection; generator pad and enclosure; wood fence and gates; dumpster enclosure; flowmeter; and other miscellaneous site improvements.
 6. All labor, material and equipment necessary for existing wet well rehabilitation.
 7. All labor material and equipment necessary to accomplish landscape improvements including planting materials, irrigation system and other miscellaneous landscape improvements.

Completed: June-17

On time? Yes

Amount: \$ 1,595,000

Change Orders: \$ 227,716

Reclaimed Water ASR System Well Construction

Owner: City of St. Cloud

Engineer: Jones, Edmunds & Associates

Contact: Lisa Rhea

Phone: 813-258-0703

Description: One 12-inch diameter ASR well, ASR-1 (Total Depth [TD] approximately 3,100 feet). The well will be completed with a final carbon steel casing cemented to land surface and is designed for reclaimed water storage and recovery. One 6-inch diameter storage zone monitoring well, SZMW-1 (TD approximately 2,400 feet). The well will be completed with a final carbon steel casing cemented to land surface and will be located not more than 750 feet from ASR-1. One 6-inch diameter shallow monitoring well, SMW-1 (TD approximately 1,400 feet). The well will be located not more than 150 feet from ASR-1. Modify chlorine contact chamber to install submersible recharge pump and install piping for ASR well. Electrical & I&C for VFD's and MOV.

Completed: May-17

On time? Yes

Amount: \$ 2,535,550

Change Orders: \$ 164,395

Reconstruction of Surficial Aquifer Wells Nos. HR-5, HR-6 and PBG-9

Owner: Seacoast Utility Authority

Engineer: Holtz Consulting Engineers

Contact: Brandon Selle

Phone: 561-627-2900

Description: Reconstruction of three new surficial production wells, 16" PVC casing, 130-140' depth, well screen, with 40 HP submersible pumps, ductile iron raw water main & wellheads, concrete, instruments & programming, RTU, SCADA, Fiber Optic cable, control panels, new 4160V electrical service, fencing.

Completed: November-16

On time? Yes

Amount: \$ 1,486,122

Change Orders: \$ 10,324

Repump #1 Rehabilitation

Owner: Fort Pierce Utility Authority

Engineer: Kimley Horn & Associates

Contact: Jason Lee

Phone: 561-840-0256

Description: Demolish existing building structure, framing, steel building skin, mechanical equipment, pumps, underground fuel tank, generator, and electrical gear. Construct new concrete block structure



City of Pembroke Pines

VENDOR DRUG-FREE WORKPLACE CERTIFICATION FORM

SECTION 1 GENERAL TERM

Preference may be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

IDENTICAL TIE BIDS - Preference may be given to businesses with drug-free workplace programs. Whenever two or more bids that are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drugfree workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after each conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

SECTION 2 AFFIRMATION

Place a check mark here only if affirming bidder **complies fully** with the above requirements for a Drug-Free Workplace.

Place a check mark here only if affirming bidder **does not** meet the requirements for a Drug-Free Workplace.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for Drug-Free Workplace Preference. This form must be completed by/for the proposer; the proposer WILL NOT qualify for Drug-Free Workplace Preference based on their sub-contractors' qualifications.


Authorized Signature

JEFFREY HULST
Authorized Signer Name

FLORIDA DESIGN DRILLING CORP.
Company Name

Supplier: Florida Design Drilling Corp.



City of Pembroke Pines

Attachment A

CONTACT INFORMATION FORM

IN ACCORDANCE WITH “**IFB # PSUT-17-09**” dated **November 1, 2017** titled “**Booster Stations Disinfection System Improvements**” attached hereto as a part hereof, the undersigned submits the following:

A) Contact Information

The Contact information form shall be electronically signed by one duly authorized to do so, and in case signed by a deputy or subordinate, the principal's properly written authority to such deputy or subordinate must accompany the proposal. This form must be completed and submitted through www.bidsync.com as part of the bidder's submittal. The vendor must provide their pricing through the designated lines items listed on the BidSync website.

COMPANY INFORMATION:

COMPANY: **Florida Design Drilling Corp.**

STREET ADDRESS: **7733 Hooper Road**

CITY, STATE & ZIP CODE: **West Palm Beach, FL 33411**

PRIMARY CONTACT FOR THE PROJECT:

NAME: **Jeffrey Holst** TITLE: **Vice President**

E-MAIL: **jeff@fldrilling.com**

TELEPHONE: **5618442966** FAX: **5618442967**

AUTHORIZED APPROVER:

NAME: **Jeffrey Holst** TITLE: **Vice President**

E-MAIL: **jeff@fldrilling.com**

TELEPHONE: **561-844-2966** FAX: **561-844-2967**

SIGNATURE: **Jeffrey Holst**

B) Proposal Checklist

Are all materials, freight, labor and warranties included? Yes

Did you submit the Proposal Security/Bid Bonds as required in Section 4.1 of the bid package? No Yes

C) Sample Proposal Form

The following sample price proposal is for information only. The vendor must provide their pricing through the designated lines items listed on the BidSync website.

A) HOLLY LAKE AND ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS

Item #	Product Description	Estimated Quantity	Unit	Unit Price
1.01	General Requirements (Temporary Facilities, bonds and insurance)	1	LS	Price to be Submitted Via BidSync
1.02	Mobilization / Demobilization	1	LS	Price to be Submitted Via BidSync
1.03	Testing & Survey	1	LS	Price to be Submitted Via BidSync
1.04	Prevention, control and abatement of erosion and water pollution	1	LS	Price to be Submitted Via BidSync
1.05	Trench Safety Act Compliance	1	LS	Price to be Submitted Via BidSync

B) HOLLY LAKE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS

Item #	Product Description	Estimated Quantity	Unit	Per Unit Cost
2.01	Site Work	1	LS	Price to be Submitted Via BidSync
2.02	Structural Work	1	LS	Price to be Submitted Via BidSync
2.03	Mechanical Work	1	LS	Price to be Submitted Via BidSync
2.04	Electrical Work	1	LS	Price to be Submitted Via BidSync
2.05	Instrumentation and Controls Work	1	LS	Price to be Submitted Via BidSync

C) ACADEMIC VILLAGE BOOSTER STATION DISINFECTION SYSTEM IMPROVEMENTS

Item #	Product Description	Estimated Quantity	Unit	Per Unit Cost
3.01	Site Work	1	LS	Price to be Submitted Via BidSync
3.02	Structural Work	1	LS	Price to be Submitted Via BidSync
3.03	Mechanical Work	1	LS	Price to be Submitted Via BidSync
3.04	Electrical Work	1	LS	Price to be Submitted Via BidSync
3.05	Instrumentation and Controls Work	1	LS	Price to be Submitted Via BidSync

D) MISCELLANEOUS

Item #	Product Description	Estimated Quantity	Unit	Per Unit Cost
4.01	Permitting Allowance	1	AL	\$50,000.00

Supplier: **Florida Design Drilling Corp.**



City of Pembroke Pines

Attachment C

NON-COLLUSIVE AFFIDAVIT

BIDDER is the **Officer**,

(Owner, Partner, Officer, Representative or Agent)

BIDDER is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid;

Such Bid is genuine and is not a collusive or sham Bid;

Neither the said BIDDER nor any of its officers, partners, owners, agents, representative, employees or parties in interest, including this affidavit, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other BIDDER, firm or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any BIDDER, firm, or person to fix the price or prices in the attached Bid or any other BIDDER, or to fix any overhead, profit, or cost element of the Bid Price or the Bid Price of any other BIDDER, or to secure through any collusion conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Contract;

The price of items quoted in the attached Bid are fair and proper and are not tainted by collusion, conspiracy, connivance, or unlawful agreement on the part of the BIDDER or any other of its agents, representatives, owners, employees or parties in interest, including this affidavit.

Printed Name/Signature **Jeffrey Holst**

Title **Vice President**

Name of Company **Florida Design Drilling Corp.**

Supplier: **Florida Design Drilling Corp.**



City of Pembroke Pines

Attachment D

**SWORN STATEMENT
ON PUBLIC ENTITY CRIMES
UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a).**

1. This sworn statement is submitted **Florida Design Drilling Corp.** (name of entity submitting sworn statement) whose business address is **7733 Hooper Rd, West Palm Beach, FL 33411** and (if applicable) its Federal Employer Identification Number (FEIN) is **20-2779560**. (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: .)
2. My name is **Jeffrey Holst** and my
(Please print name of individual signing)

relationship to the entity named above is **Vice President**.
3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
4. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 1. A predecessor or successor of a person convicted of a public entity crime: or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Cityship by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
6. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any

natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

7. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(Please indicate which statement applies.)**

A) Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.

B) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND **(Please indicate which additional statement applies.)**

B1) There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. **(Please attach a copy of the final order.)**

B2) The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. **(Please attach a copy of the final order.)**

B3) The person or affiliate has not been placed on the convicted vendor list. **(Please describe any action taken by or pending with the Department of General Services.)**

Jeffrey Holst	Florida Design Drilling Corp.	11/21/17
Bidder's Name/Signature	Company	Date

Supplier: Florida Design Drilling Corp.



City of Pembroke Pines

Attachment E

LOCAL VENDOR PREFERENCE CERTIFICATION

SECTION 1 GENERAL TERM

LOCAL PREFERENCE

The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:

1. "Local Pembroke Pines Vendor" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines.

OR;

2. "Local Broward County Vendor" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.

A preference of five percent (5%) of the total evaluation point, or five percent (5%) of the total price, shall be given to the **Local Pembroke Pines Vendor(s)**; A preference of two and a half percent (2.5%) of the total evaluation point for local, or two and a half percent (2.5%) of the total price, shall be given to the **Local Broward County Vendor(s)**.

COMPARISON OF QUALIFICATIONS

The preferences established in no way prohibit the right of the City to compare quality of supplies or services for purchase and to compare qualifications, character, responsibility and fitness of all persons, firms or corporations submitting bids or proposals. Further, the preference established in no way prohibit the right of the city from giving any other preference permitted by law instead of the preferences granted, nor prohibit the city to select the bid or proposal which is the most responsible and in the best interests of the city.

SECTION 2 AFFIRMATION

LOCAL PREFERENCE CERTIFICATION:

- Place a check mark here only if affirming bidder meets requirements above as a Local Pembroke Pines Vendor.
In addition, the business must attach a current business tax receipt from the City of Pembroke Pines along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- Place a check mark here only if affirming bidder meets requirements above as a Local Broward County Vendor.
In addition, the business must attach a current business tax receipt from the Broward County or the city within Broward County where the business resides along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- Place a check mark here only if affirming bidder does not meet the requirements above as a Local Vendor.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for Local Preference. This form must be completed by/for the proposer; the proposer WILL NOT qualify for Local Vendor Preference based on their sub-contractors' qualifications.

COMPANY NAME: **Florida Design Drilling Corp.**

PRINTED NAME / AUTHORIZED SIGNATURE: **Jeffrey Holst**

Supplier: **Florida Design Drilling Corp.**



City of Pembroke Pines

Attachment F

VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE CERTIFICATION

SECTION 1 GENERAL TERM

VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE

The evaluation of competitive bids is subject to section 35.37 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to veteran owned small businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with the following objective criteria as of the bid or proposal submission date stated in the solicitation. A veteran owned small business shall be defined as:

1. "Veteran Owned Small Business" shall mean a business entity which has received a "Determination Letter" from the United States Department of Veteran Affairs Center for Verification and Evaluation notifying the business that they have been approved as a Veteran Owned Small Business (VOSB).

A preference of two and a half percent (2.5%) of the total evaluation point, or two and a half percent (2.5%) of the total price, shall be given to the **Veteran Owned Small Business (VOSB)**. This shall mean that if a **VOSB** submits a bid/quote that is within 2.5% of the lowest price submitted by any vendor, the **VOSB** shall have an option to submit another bid which is at least 1% lower than the lowest responsive bid/quote. If the **VOSB** submits a bid which is at least 1% lower than that lowest responsive bid/quote, then the award will go to the **VOSB**. If not, the award will be made to the vendor that submits the lowest responsive bid/quote. If the lowest responsive and responsible bidder is a "**Local Pembroke Pines Vendor**" (**LPPV**) or a "**Local Broward County Vendor**" (**LBCV**) as established in Section 35.36 of the City's Code of Ordinances, entitled "Local Vendor Preference", then the award will be made to that vendor and no other bidders will be given an opportunity to submit additional bids as described herein.

If there is a **LPPV**, a **LBCV**, and a **VOSB** participating in the same bid solicitation and all three vendors qualify to submit a second bid, the **LPPV** will be given first option. If the **LPPV** cannot beat the lowest bid received by at least 1%, an opportunity will be given to the **LBCV**. If the **LBCV** cannot beat the lowest bid by at least 1%, an opportunity will be given to the **VOSB**. If the **VOSB** cannot beat the lowest bid by at least 1%, then the bid will be awarded to the lowest bidder.

If multiple **VOSBs** submit bids/quotes which are within 2.5% of the lowest bid/quote and there are no **LPPV** or **LBCV** as described in Section 35.36 of the City's Code of Ordinance, entitled "Local Vendor Preference", then all **VOSBs** will be asked to submit a **Best and Final Offer (BAFO)**. The award will be made to the **VOSB** submitting the lowest **BAFO** providing that that **BAFO** is at least 1% lower than the lowest bid/quote received in the original solicitation. If no **VOSB** can beat the lowest bid/quote by at least 1%, then the award will be made to the lowest responsive bidder.

COMPARISON OF QUALIFICATIONS

The preferences established in no way prohibit the right of the City to compare quality of supplies or services for purchase and to compare qualifications, character, responsibility and fitness of all persons, firms or corporations submitting bids or proposals. Further, the preference established in no way prohibit the right of the city from giving any other preference permitted by law instead of the preferences granted, nor prohibit the city to select the bid or proposal which is the most responsible and in the best interests of the city.

SECTION 2 AFFIRMATION

VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE CERTIFICATION:

Place a check mark here only if affirming bidder meets requirements above as a Veteran Owned Small Business.
In addition, the bidder must attach the "Determination Letter" from the U.S. Dept. of Veteran Affairs Center.

Place a check mark here only if affirming bidder does not meet the requirements above as a VOSB.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for VOSB Preference. This form must be completed by/for the proposer; the proposer WILL NOT qualify for VOSB Preference based on their sub-contractors' qualifications.

COMPANY NAME: **Florida Design Drilling Corp.**

PRINTED NAME / AUTHORIZED SIGNATURE: **Jeffrey Holst**

Supplier: **Florida Design Drilling Corp.**



City of Pembroke Pines

Attachment G

EQUAL BENEFITS CERTIFICATION FORM FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

Except where federal or state law mandates to the contrary, a Contractor awarded a Contract pursuant to a competitive solicitation shall provide benefits to Domestic Partners and spouses of its employees, irrespective of gender, on the same basis as it provides benefits to employees' spouses in traditional marriages.

The Contractor shall provide the City and/or the City Manager or his/her designee, access to its records for the purpose of audits and/or investigations to ascertain compliance with the provisions of this section, and upon request shall provide evidence that the Contractor is in compliance with the provisions of this section upon each new bid, contract renewal, or when the City Manager has received a complaint or has reason to believe the Contractor may not be in compliance with the provisions of this section. Records shall include but not be limited to providing the City and/or the City Manager or his/her designee with certified copies of the Contractor's records pertaining to its benefits policies and its employment policies and practices.

The Contractor must conspicuously make available to all employees and applicants for employment the following statement:

“During the performance of a contract with the City of Pembroke Pines, Florida, the Contractor will provide Equal Benefits to its employees with spouses, as defined by Section 35.39 of the City’s Code of Ordinances, and its employees with Domestic Partners and all Married Couples”.

The posted statement must also include a City contact telephone number and email address which will be provided to each contractor when a covered contract is executed.

SECTION 1 DEFINITIONS

1. **Benefits** means the following plan, program or policy provided or offered by a contractor to its employees as part of the employer's total compensation package which may include but is not limited to sick leave, bereavement leave, family medical leave, and health benefits.
2. **Cash Equivalent** mean the amount of money paid to an employee with a domestic partner or spouse in lieu of providing benefits to the employee's domestic partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee for his or her spouse from a traditional marriage.
3. **Covered Contract** means a contract between the City and a contractor awarded subsequent to the date when this section becomes effective valued at over \$25,000 or the threshold amount required for competitive bids as required in section 35.18(A) of the Procurement Code.
4. **Domestic Partner** shall mean any two (2) adults of the same or different sex who have registered as domestic partners with a governmental body pursuant to state or local law authorizing such registration, or with an internal registry maintained by the employer of at least one of the domestic partners. A contractor may institute an internal registry to allow for the provision of equal benefits to employees with domestic partners who do not register their partnerships pursuant to a governmental body authorizing such registration, or who are

located in a jurisdiction where no such governmental domestic partnership registry exists. A contractor that institutes such registry shall not impose criteria for registration that are more stringent than those required for domestic partnership registration by the City of Pembroke Pines.

5. **Equal benefits** means the equality of benefits between employees with spouses and/or dependents of spouses and employees with domestic partners and/or dependents of domestic partners, and/or between spouses of employees and/or dependents of spouses and domestic partners of employees and/or dependents of domestic partners.
6. **Spouse** means one member of a married pair legally married under the laws of any state within the United States of America or any other jurisdiction under which such marriage is legally recognized, irrespective of gender.
7. **Traditional marriage** means a marriage between one man and one woman.

SECTION 2 CERTIFICATION OF CONTRACTOR

The firm providing a response, by virtue of the signature below, certifies that it is aware of the requirements of Section 35.39 "City Contractors providing Equal Benefits for Domestic Partners and all Married Couples" of the City's Code of Ordinances, and certifies the following (**Check only one box below**):

- A.** Contractor currently complies with the requirements of this section; or
- B.** Contractor will comply with the conditions of this section at the time of contract award; or
- C.** Contractor will not comply with the conditions of this section at the time of contract award:
or
- D.** Contractor does not comply with the conditions of this section because of the following allowable exemption (**Check only one box below**):
- 1.** The Contractor does not provide benefits to employees' spouses in traditional marriages;
- 2.** The Contractor provides an employee the cash equivalent of benefits because the Contractor is unable to provide benefits to employees' Domestic Partners or spouses despite making reasonable efforts to provide them. To meet this exception, the Contractor shall provide a notarized affidavit that it has made reasonable efforts to provide such benefits. The affidavit shall state the efforts taken to provide such benefits and the amount of the cash equivalent. Cash equivalent means the amount of money paid to an employee with a Domestic Partner or spouse rather than providing benefits to the employee's Domestic Partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee's spouse;
- 3.** The Contractor is a religious organization, association, society, or any non-profit charitable or educational institution or organization operated supervised or controlled by or in conjunction with a religious organization, association, or society;
- 4.** The Contractor is a governmental agency;

The certification shall be signed by an authorized officer of the Contractor. Failure to provide such certification (by checking the appropriate boxes above along with completing the information below) shall result in a Contractor being deemed non-responsive.

COMPANY NAME: **Florida Design Drilling Corp.**

AUTHORIZED OFFICER NAME / SIGNATURE: **Jeffrey Holst**

Supplier: **Florida Design Drilling Corp.**



City of Pembroke Pines

Attachment H

PROPOSER'S QUALIFICATIONS STATEMENT

PROPOSER shall furnish the following information. Failure to comply with this requirement will render Bid non-responsive and shall cause its rejection. Additional sheets shall be attached as required.

PROPOSER'S Name and Principal Address:

**Florida Design Drilling Corp.
7733 Hooper Road
West palm Beach, FL 33411**

Contact Person's Name and Title: **Jeffrey Holst, Vice President**

Contact Person's E-mail Address: **jeff@fldrilling.com**

PROPOSER'S Telephone and Fax Number: **561-844-2966, 561-844-2967**

PROPOSER'S License Number: **CGC1522104**
(Please attach certificate of status, competency, and/or state registration.)

PROPOSER'S Federal Identification Number: **20-2779560**

Number of years your organization has been in business **12**

State the number of years your firm has been in business under your present business name **12**

State the number of years your firm has been in business in the work specific to this solicitation: **4**

Names and titles of all officers, partners or individuals doing business under trade name:
Daniel Ringdahl, President. Noah Ringdahl, Vice President.

The business is a: Sole Proprietorship Partnership Corporation

IF USING A FICTITIOUS NAME, SUBMIT EVIDENCE OF COMPLIANCE WITH FLORIDA FICTITIOUS NAME STATUTE. (ATTACH IN PROPOSER EXHIBIT SECTION)

Under what former name has your business operated? Include a description of the business. Failure to include such information shall be deemed to be intentional misrepresentation by the City and shall render the proposer RFP submittals non-responsive.

None

At what address was that business located?

N/A

Name, address, and telephone number of surety company and agent who will provide the required bonds on this contract:

JCA Surety Group, 407-575-4361, 941 W. Morse Blvd Suite 100, Winter Park, FL 32789

Have you ever failed to complete work awarded to you. If so, when, where and why?

No

Have you personally inspected the proposed WORK and do you have a complete plan for its performance?

Yes

Will you subcontract any part of this WORK? If so, give details including a list of each sub-contractor(s) that will perform work in excess of ten percent (10%) of the contract amount and the work that will be performed by each subcontractor (s).

Yes, electrical.

The foregoing list of subcontractor(s) may not be amended after award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.

List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.

None

List and describe all successful Bond claims made to your surety (ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).

None

List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last (10) years. The list shall include all case names; case, arbitration or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.

None

List and describe all criminal proceedings or hearings concerning business related offenses in which the Proposer, its principals or officers or predecessor organization(s) were defendants.

None

Has the Proposer, its principals, officers or predecessor organization(s) been CONVICTED OF A Public Entity Crime, debarred or suspended from bidding by any government entity? If so, provide details.

No

Are you an Original provider sales representative distributor, broker, manufacturer other, of the commodities/services proposed upon? If other than the original provider, explain below.

General Contractor

Have you ever been debarred or suspended from doing business with any governmental agency? If yes, please explain:

No

Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years:

Florida Design Drilling Corp. specializes in water treatment facility construction and water well drilling. We have extensive experience in chemical systems and underground water piping. Recent projects include ground storage tank construction with yard piping for Palm Beach County, hypochlorite system installation at 5 booster stations for the City of West Palm Beach. A full project reference list is attached to our bid.

The PROPOSER acknowledges and understands that the information contained in response to this Qualification Statement shall be relied upon by CITY in awarding the contract and such information is warranted by PROPOSER to be true. The discovery of any omission or misstatement that materially affects the PROPOSER'S qualifications to perform under the contract shall cause the CITY to reject the Bid, and if after the award, to cancel and terminate the award and/or contract.

Florida Design Drilling Corp.

(Company Name)

Jeffrey Holst

(Printed Name/Signature)

Supplier: Florida Design Drilling Corp.

REFERENCES FORM

Provide specific examples of similar contracts. References should be should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. **This form should be duplicated for each reference and any additional information that would be helpful can be attached.**

Reference Contact Information:

Name of Firm, City, County or Agency: **City of West Palm Beach**

Address: **401 Clematis St**

City/State/Zip: **West Palm Beach, FL 33401**

Contact Name: **Edna Bonelli** Title: **Senior Project Engineer**

E-Mail Address: **ebonelli@wpb.org**

Telephone: **561-494-1157** Fax: **none**

Project Information:

Name and location of the project: **Sodium Hypochlorite Storage and Feed Systems Replacing the Existing Gas Chlorine Systems**

Nature of the firm's responsibility on the project: **General contractor constructing new sodium hypochlorite and ammonia feed systems for multiple booster pump stations.**

Project duration: **18 months** Completion (Anticipated) Date: **1/2019**

Size of project: **2152000** Cost of project: **2152000**

Work for which staff was responsible: **All construction work**

Contract Type: **Lump Sum**

The results/deliverables of the project: **Sodium hypochlorite and ammonia feed systems**

REFERENCES FORM

Provide specific examples of similar contracts. References should be should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. **This form should be duplicated for each reference and any additional information that would be helpful can be attached.**

Reference Contact Information:

Name of Firm, City, County or Agency: **Mathews Consulting, inc.**

Address: **477 S Rosemary Ave, Suite 330**

City/State/Zip: **West Palm Beach, FL 33401**

Contact Name: **Rene Mathews** Title: **President**

E-Mail Address: **rmathews@mathewsconsultinginc.com**

Telephone: **561-655-6175** Fax: **561-655-6179**

Project Information:

Name and location of the project: **Water Treatment Plant No. 11 5 MG Ground Storage Tank**

Nature of the firm's responsibility on the project: **General contractor for construction of new 5 MG storage tank and associated 24" DI piping.**

Project duration: **12 months** Completion (Anticipated) Date: **12/2015**

Size of project: **2494949** Cost of project: **2494949**

Work for which staff was responsible: **All construction work**

Contract Type: **Lump sum**

The results/deliverables of the project: **5 MG storage tank and piping.**

REFERENCES FORM

Provide specific examples of similar contracts. References should be should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. **This form should be duplicated for each reference and any additional information that would be helpful can be attached.**

Reference Contact Information:

Name of Firm, City, County or Agency: **see attached**

Address: **see attached**

City/State/Zip: **see attached**

Contact Name: **see attached** Title: **see attached**

E-Mail Address: **see attached**

Telephone: **see attached** Fax: **see attached**

Project Information:

Name and location of the project: **see attached**

Nature of the firm's responsibility on the project: **see attached**

Project duration: **see attached** Completion (Anticipated) Date: **see attached**

Size of project: **see attached** Cost of project: **see attached**

Work for which staff was responsible: **see attached**

Contract Type: **see attached**

The results/deliverables of the project: **see attached**

REFERENCES FORM

Provide specific examples of similar contracts. References should be should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. **This form should be duplicated for each reference and any additional information that would be helpful can be attached.**

Reference Contact Information:

Name of Firm, City, County or Agency:

Address:

City/State/Zip:

Contact Name: Title:

E-Mail Address:

Telephone: Fax:

Project Information:

Name and location of the project:

Nature of the firm's responsibility on the project:

Project duration: Completion (Anticipated) Date:

Size of project: Cost of project:

Work for which staff was responsible:

Contract Type:

The results/deliverables of the project:

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Provide specific examples of similar contracts. References should be should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. **This form should be duplicated for each reference and any additional information that would be helpful can be attached.**

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Name and location of the project:

Nature of the firm's responsibility on the project:

Project duration: Completion (Anticipated) Date:

Size of project: Cost of project:

Work for which staff was responsible:

Contract Type:

The results/deliverables of the project: