



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/16/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER SUNZ Insurance Solutions, LLC. ID: (TLR) c/o TLR of Bonita, Inc 700 Central Ave, Suite 500 St. Petersburg, FL 33701	CONTACT NAME: Workers' Comp Department PHONE (A/C, No. Ext): 727-520-7676 x 3 E-MAIL ADDRESS: certs@encorehr.com		FAX (A/C, No): 727-525-3862
	INSURER(S) AFFORDING COVERAGE		
INSURED TLR of Bonita, Inc dba EnterpriseHR 700 Central Avenue Suite 500 St. Petersburg FL 33701	INSURER A: SUNZ Insurance Company		NAIC # 34762
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 85373464

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC039-00001-025 WC039-00001-024	6/1/2025 6/1/2024	6/1/2026 6/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	E.L. EACH ACCIDENT \$1,000,000.00 E.L. DISEASE - EA EMPLOYEE \$1,000,000.00 E.L. DISEASE - POLICY LIMIT \$1,000,000.00

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

Coverage Provided for all leased employees but not subcontractors of: Reliant Construction Group Inc
 Client Effective: 7/15/2024

CERTIFICATE HOLDER

1665
 City of Pembroke Pines
 601 City Center Way
 Pembroke Pines, FL 33025

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Rick Leonard

© 1988-2015 ACORD CORPORATION. All rights reserved.

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD

Proposer's Background Information Form

#	Question	Response	Comment	Status
Contact Information				
1.1.1	Primary Contact: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Primary Contact for this project.	Himmler Quettan, Project Manager	hquettan@yahoo.com, 305-975-5596	Complete
1.1.2	Authorized Approver: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Authorized Approver for this project.	Himmler Quettan, Project Manager	hquettan@yahoo.com, 305-975-5597	Complete
Organization Background				
1.2.1	Please state the year that you company started its business.	2014		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	2014		Complete
1.2.3	What State is your Company Registered In?	Florida		Complete
Former Business				
1.3.1	Under what former name has your business operated? Include a description of the business.	None		Complete
1.3.2	At what address was that business located?	7607 Kismet St, Miramar, FL 33023		Complete
Past Failure				
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspected				
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subcontracting				
1.6.1	Will you subcontract any part of this WORK? If you will be subcontracting any part of this work, provide 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). (Note: The proposed 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.)	Yes	Quality Plus Construction(Roofing), Conwell & Associates(Mechanical), Turn Two electric(Electrical), MG Plumbing(Plumbing)	Complete
Bankruptcy Petitions				
1.7.1	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.	N/A		Complete
Bond Claims				
1.8.1	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).	N/A		Complete
Claims, Arbitrations, Administrative Hearings and Lawsuits				
1.9.1	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.	N/A		Complete
Criminal Proceedings or Hearings				

1.10.1	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.	N/A		Complete
Company Classification				
1.11.1	In regards to the commodities/services proposed, which of the following best classifies your firm? If you selected any options besides "Original Provider" please explain.	Original Provider		Complete
Debarment/Suspension				
1.12.1	Have you ever been debarred or suspended from doing business with any governmental agency? If you have been debarred or suspended from doing business with any governmental agency, please explain.	No		Complete
Similar Experience & Contracts				
1.13.1	Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.	We have provided similar services for neighboring cities including, but not limited to Miramar, Sunrise, Lauderhill, coral springs, etc.		Complete
Professional License Information				
1.14.1	Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your company has that are required to provide these services.	Applicable	General contractor's license	Complete
Conflict of Interest				
1.15.1	Do you need to disclose any conflicts of interest? The award of any contract hereunder is subject to the provisions of Chapter 112, Florida Statutes. Proposers must disclose with their Proposal the name of any officer, director, partner, proprietor, associate or agent who is also an officer or employee of CITY or any of its agencies. Further, all Proposers must disclose the name of any officer or employee of CITY who owns, directly or indirectly, an interest of five percent (5%) or more in the Proposer 's firm or any of its branches or affiliate companies.	No		Complete
19 Questions		100.00% Complete		



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

1. This sworn statement is submitted Reliant Construction Group Inc
(name of entity submitting sworn statement) whose business address is
7607 Kismet St, Miramar, FL 33023
and (if applicable) its Federal Employer Identification Number (FEIN) is
47-2200182. (If the entity has no FEIN, include the Social Security
Number of the individual signing this sworn statement: _____.)
2. My name is Himmler Quettan, and my
(Please print name of individual signing)
relationship to the entity named above is Project Manager.
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.)**

Bidder's Name/Signature

Reliant Construction Group Inc

Company

11-11-2025

Date



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: Reliant Construction Group Inc

AUTHORIZED OFFICER NAME / SIGNATURE: 



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:

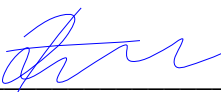
1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about 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

Himmler Quettan

Authorized Signer Name

Reliant Construction Group Inc

Company Name



NON-COLLUSIVE AFFIDAVIT


BIDDER is the Owner,
(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 Himmler Quettan  Digitally signed by Himmler Quettan
DN: cn=Himmler Quettan, c=US,
email=hquettan@yahoo.com
Date: 2025.11.11 17:14:51 -05'00'

Title Project Manager

Name of Company Reliant Construction Group Inc



**SCRUTINIZED COMPANY CERTIFICATION
PURSUANT TO FLORIDA STATUTE § 287.135.**

I, Himmler Quettan, Project Manager, on behalf of Reliant Construction Group Inc,
Print Name and Title Company Name

certify that Reliant Construction Group Inc :
Company Name

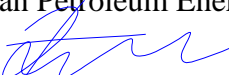
1. Does not participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has not engaged in business operations in Syria.

Submitting a false certification shall be deemed a material breach of contract. The City shall provide notice, in writing, to the Contractor of the City’s determination concerning the false certification. The Contractor shall have ninety (90) days following receipt of the notice to respond in writing and demonstrate that the determination of false certification was made in error. If the Contractor does not demonstrate that the City’s determination of false certification was made in error then the City shall have the right to terminate the contract and seek civil remedies pursuant to Florida Statute § 287.135.

Section 287.135, Florida Statutes, prohibits the City from: 1) Contracting with companies for goods or services in any amount if at the time of bidding on, submitting a proposal for, or entering into or renewing a contract if the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, F.S. or is engaged in a boycott of Israel; and 2) Contracting with companies, for goods or services over \$1,000,000.00 that are on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector list, created pursuant to s. 215.473, or are engaged in business operations in Syria.

As the person authorized to sign on behalf of the Contractor, I hereby certify that the company identified above in the section entitled “Contractor Name” does not participate in any boycott of Israel, is not listed on the Scrutinized Companies that Boycott Israel List, is not listed on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Syria. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject the company to civil penalties, attorney's fees, and/or costs. I further understand that any contract with the City for goods or services may be terminated at the option of the City if the company is found to have submitted a false certification or has been placed on the Scrutinized Companies with Activities in Sudan list or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

Reliant Construction Group Inc
Company Name


Himmler Quettan
Print Name / Signature

Project Manager
Title



**E-VERIFY SYSTEM CERTIFICATION STATEMENT
(UNDER SECTION 448.095, FLORIDA STATUTES)**

1. Definitions:
 - a. **“Contractor”** means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. “Contractor” includes, but is not limited to, a vendor or consultant.
 - b. **“Subcontractor”** means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.
 - c. **“E-Verify system”** means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.

2. Effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security’s E-Verify System to verify the employment eligibility of:
 - a. All persons employed by a Contractor to perform employment duties within Florida during the term of the contract; and
 - b. All persons (including subvendors/subconsultants/subcontractors) assigned by Contractor to perform work pursuant to the contract with the City of Pembroke Pines. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security’s E-Verify System during the term of the contract is a condition of the contract with the City of Pembroke Pines; and
 - c. Should vendor become the successful Contractor awarded for the above-named project, by entering into the contract, the Contractor shall comply with the provisions of Section 448.095, Fla. Stat., “Employment Eligibility,” as amended from time to time. This includes, but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

3. Contract Termination
 - a. If the City has a good faith belief that a person or entity with which it is contracting has knowingly violated s. 448.09 (1) Fla. Stat., the contract shall be terminated.
 - b. If the City has a good faith belief that a subcontractor knowingly violated s. 448.095 (2), but the Contractor otherwise complied with s. 448.095 (2) Fla. Stat., shall promptly notify the Contractor and order the Contractor to immediately terminate the contract with the subcontractor.
 - c. A contract terminated under subparagraph a) or b) is not a breach of contract and may not be considered as such.
 - d. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination.
 - e. If the contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

Reliant Construction Group Inc

COMPANY NAME: _____

Himmler Quettan, Project Manager

PRINTED NAME / AUTHORIZED SIGNATURE: _____



AFFIDAVIT OF COMPLIANCE WITH HUMAN TRAFFICKING LAWS

In accordance with section 787.06 (13), Florida Statutes, the undersigned, on behalf of the entity listed below (“Entity”), hereby attests under penalty of perjury that:

1. The Affiant is an officer or representative of the Entity entering into an agreement with the City of Pembroke Pines.
2. The Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes, entitled “Human Trafficking”.
3. The Affiant is authorized to execute this Affidavit on behalf of the Entity.
4. I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.
5. Pursuant to Sec. 92.525(2), Fla. Stat., under penalties of perjury, I declare that I have read the foregoing affidavit of compliance with Human Trafficking Laws and that the facts stated in it are true.

FURTHER AFFIANT SAYETH NAUGHT.

DATE: 11-11-2025

ENTITY: Reliant Construction Group Inc

SIGNATURE: 

NAME: Himmler Quettan

TITLE: Project Manager



VENDOR INFORMATION FORM

MAIN CONTACT INFORMATION			
Company Name (Legal Name as filed with IRS)	Reliant Construction Group Inc		
Doing Business As (DBA)			
Primary Business Address	7607 Kismet St		
	City:	Miramar	
	State:	FL	Zip: 33023
	Country:	USA	
Remit To Address	7607 Kismet St		
	City:	Miramar	
	State:	FL	Zip: 33023
	Country:	USA	
Order From Address	7607 Kismet St		
	City:	Miramar	
	State:	FL	Zip: 33023
	Country:	USA	
Foreign Entity (Yes/No)	No		
Telephone Number	305-975-5596		
Primary Company E-mail	hquettan@yahoo.com		
Fax	786-427-1316		
Website			
DUNS	089446981		
Independent Contractor (Yes/No)	Yes		
Identification Number	SSN:		FID: 47-2200182

GENERAL PAYMENT TERMS		
Discount Percent Defines the discount percentage the vendor extends to your organization.	Days to Discount Number of days which payment must be received to claim the discount percent.	Days to Net Number of days that the vendor allows before requiring net payment.

CONTACT # 1	
Contact Name (First & Last Name)	Himmler Quettan
Description/Title/Position	Project Manager
Phone (Voice)	305-975-5596
Phone (Text)	305-975-5596 Opt In (Y/N): N
Fax	786-427-1316
E-mail	hquettan@yahoo.com

STATE REGISTRATION	
Is your company registered with the State of Florida? (Y/N)	Y
If not, what state is your company registered in?	

Please attach the print out from <https://dos.myflorida.com/sunbiz/> or the appropriate state showing your active registration and any applicable fictitious names that are registered.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See <i>Specific Instructions</i> on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Reliant Construction Group Inc		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions. 7607 Kismet St	Requester's name and address (optional)	
	6	City, state, and ZIP code Miramar, FL 33023		
	7	List account number(s) here (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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number										
or										
Employer identification number										
4	7		-	2	2	0	0	1	8	2

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* 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 for Part II, later.

Sign Here	Signature of U.S. person	Date 11-11-2025
------------------	--------------------------	------------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

AUGUSTIN, RONALD

RELIANT CONSTRUCTION GROUP INC
7520 NW 7 ST
PLANTATION FL 33317

LICENSE NUMBER: CGC1522773

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at [MyFloridaLicense.com](https://www.MyFloridaLicense.com)

ISSUED: 07/20/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



United States Environmental Protection Agency

This is to certify that



Reliant Construction Group, Inc.

has fulfilled the requirements of the Toxic Substances Control Act (TSCA) Section 402, and has received certification to conduct lead-based paint renovation, repair, and painting activities pursuant to 40 CFR Part 745.89

In the Jurisdiction of:

All EPA Administered States, Tribes, and Territories

This certification is valid from the date of issuance and expires May 22, 2029

NAT-F201060-2

Certification #

May 08, 2024

Issued On



Marc Edmonds, Chief

Risk Assessment Management Branch 2.

**CERTIFICATION REGARDING LOBBYING;
DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS
FOR EXPENDITURE OF FEDERAL FUNDS**

LOBBYING

As required by 7 CFR Part 3018, for persons entering into a contract, grant or cooperative agreement over **\$100,000** involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress, in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit **Standard Form - LLL, "Disclosure Form to Report Lobbying,"** in accordance with its instructions; and
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The undersigned Contractor, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. Chap. 38, Administrative Remedies for False Claims and Statements, apply to this certification and disclosure, if any.



Signature of Contractor's Authorized Official

Himmler Quettan, Project Manager

Printed Name and Title of Contractor's Authorized Official

Reliant Construction Group Inc

Contractor / Name of Company

11-11-2025

Date

DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

As required by 7 CFR Part 3017, for persons entering into a contract, grant or cooperative agreement over **\$25,000** involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a Government entity (Federal, State, or local) with commission of any offenses enumerated in paragraph (b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default; and

Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.



Signature of Contractor's Authorized Official

Himmler Quettan, Project Manager

Printed Name and Title of Contractor's Authorized Official

Reliant Construction Group Inc

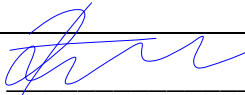
Contractor / Name of Company

11-11-2025

Date

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

1. Type of Federal Action: _____ a. contract _____ b. grant _____ c. cooperative agreement _____ d. loan _____ e. loan guarantee _____ f. loan insurance	2. Status of Federal Action: <div style="font-size: small; color: blue; margin-left: 20px;">Himmler Quettan, Project Manager</div> _____ a. bid / offer / application _____ b. initial award _____ c. post-award	3. Report Type: _____ a. initial filing _____ b. material change For material change only: Year _____ quarter _____ Date of last report _____
4. Name and Address of Reporting Entity: _____ Prime _____ Subawardee _____ Tier _____, if Known: <div style="text-align: center; font-weight: bold;">Congressional District, if known:</div>	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: <div style="text-align: center; font-weight: bold;">Congressional District, if known:</div>	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, <i>if applicable</i> : _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>Himmler Quettan</u> Title: <u>Project Manager</u> Telephone No.: <u>305-975-5596</u> Date: <u>11/11/25</u>	

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number



RELIANT CONSTRUCTION GROUP INC

Unique Entity ID G6SNNJ5RCEJ9	CAGE / NCAGE 7VLH1	Purpose of Registration All Awards
Registration Status Active Registration	Expiration Date Dec 3, 2025	
Physical Address 20418 NW 9TH AVE Miami, Florida 33169-2390 United States	Mailing Address 7607 Kismet ST Miramar, Florida 33023 United States	

Business Information

Doing Business as (blank)	Division Name (blank)	Division Number (blank)
Congressional District Florida 24	State / Country of Incorporation Florida / United States	URL (blank)

Registration Dates

Activation Date Dec 5, 2024	Submission Date Dec 3, 2024	Initial Registration Date Apr 10, 2017
---------------------------------------	---------------------------------------	--

Entity Dates

Entity Start Date Oct 27, 2014	Fiscal Year End Close Date Dec 31
--	---

Immediate Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Highest Level Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Executive Compensation

In your business or organization's preceding completed fiscal year, did your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) receive both of the following: 1. 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements and 2. \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

No

Does the public have access to information about the compensation of the senior executives in your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Not Selected

Proceedings Questions

Is your business or organization, as represented by the Unique Entity ID on this entity registration, responding to a Federal procurement opportunity that contains the provision at FAR 52.209-7, subject to the clause in FAR 52.209-9 in a current Federal contract, or applying for a Federal grant opportunity which contains the award term and condition described in 2 C.F.R. 200 Appendix XII?

Yes

Does your business or organization, as represented by the Unique Entity ID on this specific SAM record, have current active Federal contracts and/or grants with total value (including any exercised/unexercised options) greater than \$10,000,000?

No

Within the last five years, had the business or organization (represented by the Unique Entity ID on this specific SAM record) and/or any of its principals, in connection with the award to or performance by the business or organization of a Federal contract or grant, been the subject of a Federal or State (1) criminal proceeding resulting in a conviction or other acknowledgment of fault; (2) civil proceeding resulting in a finding of fault with a monetary fine, penalty, reimbursement, restitution, and/or damages greater than \$5,000, or other acknowledgment of fault; and/or (3) administrative proceeding resulting in a finding of fault with either a monetary fine or penalty greater than \$5,000 or reimbursement, restitution, or damages greater than \$100,000, or other acknowledgment of fault?

Not Selected

Exclusion Summary

Jul 02, 2025 12:48:02 PM GMT
<https://sam.gov/entity/G6SNNJ5RCEJ9/coreData?status=null>

Active Exclusions Records?

No**SAM Search Authorization**

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes**Entity Types****Business Types**

Entity Structure

Corporate Entity (Not Tax Exempt)

Profit Structure

For Profit Organization

Entity Type

Business or Organization

Organization Factors

Subchapter S Corporation**Socio-Economic Types****Minority-Owned Business****Self Certified Small Disadvantaged Business****Black American Owned**

Check the registrant's Reps & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

Financial Information

Accepts Credit Card Payments

No

Debt Subject To Offset

No

EFT Indicator

0000

CAGE Code

7VLH1**Electronic Funds Transfer**

Account Type

Checking

Routing Number

*******31**

Lock Box Number

(blank)

Financial Institution

JPMORGAN CHASE BANK, NA

Account Number

*******98****Automated Clearing House**

Phone (U.S.)

8009359935

Email

(blank)

Phone (non-U.S.)

(blank)

Fax

(blank)**Remittance Address****Ronald Augustin****7607 Kismet ST****Miramar, Florida 33023****United States****Taxpayer Information**

EIN

*******0182**

Type of Tax

Applicable Federal Tax

Taxpayer Name

Reliant Construction Group inc

Tax Year (Most Recent Tax Year)

2019

Name/Title of Individual Executing Consent

Pres

TIN Consent Date

Dec 3, 2024

Address

7607 Kismet ST**Miramar, Florida 33023**

Signature

Ronald Augustin**Points of Contact****Accounts Receivable POC**

✉

Himmeler Quettan, Project Manager

Jul 02, 2025 12:48:02 PM GMT

<https://sam.gov/entity/G6SNNJ5RCEJ9/coreData?status=null>

hquettan@yahoo.com
3059755596

Electronic Business

♀ Himmler Quettan hquettan@yahoo.com 3059755596	7607 Kismet ST Miramar, Florida 33023 United States
--	---

Government Business

♀ Himmler Quettan hquettan@yahoo.com 3059755596	7607 Kismet ST Miramar, Florida 33023 United States
--	---

Service Classifications

NAICS Codes

Primary	NAICS Codes	NAICS Title
Yes	236118	Residential Remodelers
	236115	New Single-Family Housing Construction (Except For-Sale Builders)
	236116	New Multifamily Housing Construction (Except For-Sale Builders)
	236220	Commercial And Institutional Building Construction
	237110	Water And Sewer Line And Related Structures Construction
	238130	Framing Contractors
	238140	Masonry Contractors
	238160	Roofing Contractors
	238220	Plumbing, Heating, And Air-Conditioning Contractors
	238310	Drywall And Insulation Contractors
	238320	Painting And Wall Covering Contractors
	238330	Flooring Contractors
	238340	Tile And Terrazzo Contractors
	238350	Finish Carpentry Contractors
	238910	Site Preparation Contractors

Size Metrics

IGT Size Metrics

Annual Revenue (from all IGTs)
(blank)

Worldwide

Annual Receipts (in accordance with 13 CFR 121) \$1,250,000.00	Number of Employees (in accordance with 13 CFR 121) 2
--	---

Location

Annual Receipts (in accordance with 13 CFR 121) (blank)	Number of Employees (in accordance with 13 CFR 121) (blank)
---	---

Industry-Specific

Barrels Capacity (blank)	Megawatt Hours (blank)	Total Assets (blank)
------------------------------------	----------------------------------	--------------------------------

Electronic Data Interchange (EDI) Information

This entity did not enter the EDI information

Disaster Response

Yes, this entity appears in the disaster response registry.

Bonding Levels	Dollars
(blank)	(blank)

States
Florida

Counties
FL: PALM BEACH, MIAMI-DADE, BROWARD

Metropolitan Statistical Areas
FL: West Palm Beach-Boca Raton

City of Pembroke Pines
Section 3 Implementation Plan
FORM 1 – SECTION 3 ASSESSMENT AND CERTIFICATIONS

This form is required for ALL projects and must be submitted with bid.

Project Information

Project Name: General Contractors for Home Repair Projects RFQ # PL-25-02
Project Location or Address(es): City of Pembroke Pines 601 City Center Way Pembroke Pines, FL 33025

Developer/Contactor Information:

Name of Firm: Reliant Construction Group Inc	Address: 7607 Kismet St, Miramar, FL 33023
Authorized Representative: Himmler Quettan	Title: Project Manager
Phone: 305-975-5596	Email: hquettan@yahoo.com

1. Check all that apply to your business:

- Your business is at least 51% owned and controlled by low- or very low-income persons
- Over 75% of the labor hours performed for your business over the past three-month period were performed by Section 3 workers
- Your business is at least 51% owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing
- None of the above

2. Will you be hiring new employees or providing new training opportunities because of this contract? Yes No

3. Will you be using subcontractors to complete this project? Yes No

4. Is your bid/contract amount greater than \$200,000? Yes No

If the response to item 4 above is "YES," Section 3 requirements will be fully enforced on this project. Please complete the certifications below. Please submit FORMS 2, 3, and 6 with final compliance reports, 30 days after project completion. FORM 4 is only required if numeric goals were not met.

If NO, Section 3 participation is strongly encouraged but not required. Please attempt to meet the Section 3 goals to the greatest extent feasible. You must still complete the certifications below as applicable and return FORMS 1 with your bid.

Certifications		YES	NO	N/A
All Projects:	By completing and signing this form, I agree to comply with all applicable requirements of the Section 3 of the Housing and Urban Development Act of 1968 (24 CFR Part 75)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	I understand that I must complete and submit FORM 1 with my bid even if my bid is under \$200,000.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Projects over \$200K:	I will include the Section 3 Clause (FORM 5) in all subcontracts for which Section 3 compliance is required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I understand that I am required to submit final Section 3 reports (FORMS 2, 3, 4, and 6), as applicable, along with supporting documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I agree that my company has made and will continue to make efforts "to the greatest extent feasible" to comply with Section 3 as required by HUD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I understand the minimum numerical goals for Section 3 participation and have completed FORM 1 with my bid. FORMS 2–6 will be submitted during final reporting, as applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I declare that all statements contained in this form and any accompanying documents are true and correct, and made with full knowledge that all statements given are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or revocation of funding or other penalties as prescribed under 18 U.S. Code § 1001.



Authorized Representative Signature

11-11-2025

Date

Reliant Construction Group Inc Response

Pricing unsealed at Nov 18, 2025 2:34 PM

CONTACT INFORMATION

Company

Reliant Construction Group Inc

Email

hquettan@yahoo.com

Contact

Himmler Quettan

Address

7607 Kismet
Miramar, FL 33023

Phone

(305) 975-5596

Website

N/A

Submission Date

Nov 11, 2025 9:30 PM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. CONFIRMATION TO BIND

1.1. I certify that I have read, understood and agree to the terms in this solicitation, and that I am authorized to submit this response on behalf of my company.*

Confirmed

Pass Fail

2. CERTIFICATION OF INSURANCE COMPLIANCE AND INTENT TO PROCURE REQUIRED COVERAGE

NOTE: Vendors are not required to purchase any additional insurance in order to submit a bid. However, they must certify that they either currently hold, or are able and willing to obtain, all required insurance coverages, endorsements, and limits prior to award and execution of the contract.

2.1. I certify that, if awarded this contract, I will be required to obtain and maintain all insurance policies as detailed in the INSURANCE REQUIREMENTS Section of this solicitation before any work may commence, and throughout the life of the contract.*

Confirmed

Pass Fail

2.2. Do you confirm that you will only use insurance carriers licensed to do business in the State of Florida and rated no less than "A" as to management, and no less than "Class VI" as to financial strength by A.M. Best, and that you understand all endorsements required (e.g., Additional Insured, Waiver of Subrogation, etc.) must be included?*

Yes

Pass Fail


2.3. Do you currently carry insurance policies that meet or exceed the minimum requirements outlined in the INSURANCE REQUIREMENTS section of this solicitation?*

Yes

Pass Fail

2.3.1. Please upload your current certificate(s) of insurance that demonstrate compliance with the insurance requirements outlined in this solicitation.*

Pass Fail

 [Pembroke Pines_GL_Exp_5-10-26.pdf](#)

 [Pembroke Pines_WC_Exp_6-1-2026.pdf](#)

2.4. Do you believe you are exempt from one or more insurance requirements (e.g., Workers' Compensation)?*

No

Pass Fail

2.5. Do you plan on using subcontractors for this project?*

Yes

Pass Fail

2.5.1. Do you acknowledge that all subcontractors must also carry the same insurance or be covered under your policy, and that proof of such coverage must be provided to the City?*

Yes

Pass Fail

3. EXPERIENCE AND CAPABILITIES

The relative experience and qualification of each applicant's proposed team, with respect to the project scope, will be judged and a relative rating assigned. This parameter expresses the general and specific project-related capability of the team and indicates the adequate depth and abilities of the organization which it can draw upon as needed. This will include management, technical, and support staff.

3.1. Explain your firm's interest in working on this project, a positive commitment to perform the required work and a description of the firm.*

Reliant Construction Group is located in City of Miramar, approximately 15 minutes from The City of Pass Fail
Pembroke Pines. We are writing in an effort to become one of the contractors in your pool.

We are interested in becoming one of the contractors for your pool because of your City's great reputation and track record of dealing with contractors. Our project manager, Himmler Quettan, is no stranger to your City. He has completed many projects with CRA on behalf of your City.. All of his projects with your City and every city he has

worked with; has been completed in a timely manner. We are committed to upholding that standard and we are committed to performing the required work in this RFQ. Furthermore, we are committed to performing said work at the highest level.

Our direct employees specialize in the different phases of construction which include but are not limited to minor and major structural repairs and restorations, window and door installation, drywall and framing installation, and minor plumbing, electrical, mechanical, roof repairs. Major mechanical, roofing, electrical, and plumbing will be handled by our fully licensed, fully insured, and fully qualified sub-contractors. We also specialize in mold remediation and lead abatement.

We specialize in government projects such as yours. Thus, we are intimately acquainted with government programs funded by HUD, CDBG, HOME, and NSP grants and funds. In the past we have worked with and/or are currently working with The City of North Miami, Town of Davie, The City of Coral Springs, The City of Tamarac, and The City of Plantation. We have also partnered with Construction Management Firms; such as CRA and Broward Minority Builders.

We have the financial stability, strength, and experience to handle as many as 50 government jobs at one time. Our ratings with the cities we have worked with, along with homeowner ratings has always been and continue to be high.

We are confident in the fact that we can be a valuable asset to your pool of contractors. Because....

1. 90% of our work is with city and municipality programs such as yours
2. Our project manager is intimately acquainted with most if not all of the inspectors in your pool
3. Our project manager is intimately familiar with CRA and its employees
4. We have the funds to run multiple projects at once

We would like to thank you in advance for choosing our company to be part of your pool. We look forward to working you.

3.2. Describe the size of your firm.*

Pass Fail

Our firm consist of our president(license holder), our project manager, our sub contractors(roofing, mechanical, plumbing & electrical), and our 5 staff structural workers

3.3. Describe your firm's financial history, strength and stability.*

Pass Fail

We have been in business for nearly 2 decades working with various cities, including Pembroke Pines. We have completed over 200 government projects. We have never failed to complete a project due to financial issues. All of our subs have been with us for multiples years. City projects constitute well over 90% of our focus. We are well known to all of the building departments. We complete our jobs quickly and efficiently once all permits have been issued.

3.4. Describe your firm's range of activities.*

Pass Fail

We can perform all structural remodeling including, but not limited to windows & doors. We work closely with our sub contractors(roofing, mechanical, plumbing & electrical) in order to quickly and efficiently complete work in those areas of expertise. We are also well versed in mold remediation and rectifying code violations.

3.5. Describe the specialized experience and technical competence of the firm or persons with respect to working on similar projects.*

Between myself, the project manager, our qualifier and our sub contractors: we have over several decades worth of experience working with the "EXACT" same projects as this one. We have also worked with the city of Pembroke Pines in the past on several projects.

3.6. Do you have a minimum of two (2) years of experience? Please provide proof of such experience.*

Yes we have well over 2 years of experience. The following is a sample of work we've completed over Pass Fail the past few years.

Maria Tapia

5522 W 27TH Ave

Hialeah FL 33168

Project Total: \$88,450

Scope of Work: Roof, Electrical, Mold, Plumbing, Kitchen Cabinets, Drywall & Paint

Current Status: Completed (2020)

Daniel & Golda Simon

2334 NW 87TH Drive

Coral Springs, FL 33065

Project Total: \$38,459

Scope of Work: Roof, Windows & Doors & Structural

Current Status: Completed (2020)

Campuzano Berta

10772 La Placida Drive # 7-202

Coral Springs, FL 33065

Project Total: \$46,262

Scope of Work: Roof, Windows & Doors, Structural

Current Status: Completed (2020)

Betty Williams

3279 NW 41 ST

Lauderdale Lakes FL 33309

Project Total : \$21,628

Scope of Work: Roof & Drywall

Current Status: Completed (2020)

Rosalee Edwards

2851 Somerset Drive bldg. E #115

Lauderdale Lakes, FL 33311

Project Total : \$24,025

Scope of Work: Windows & Doors

Current Status: Completed (2020)

Gary Horne

780 NW 134 ST

North Miami, FL 33168

Project Total: \$21100

Scope of Work: Electrical, Plumbing, Mechanical, Structural

Completed: 2019

Niclasse Jean Mary

820 NW 132 ST

North Miami FL 33161

Project Total \$19,000

Scope of Work: Windows & Doors- Garage door- Rain Gutter

Completed: 2019

DE LA CRUZ, JOSE

2420 NE 7th AVE

Wilton Manors, FL 33305

Project Total: \$21,700

Scope of Work: Windows & Doors/ Paint

Completed: 2019

Woods, Bernard

2805 NW 9th ST

Fort Lauderdale 33311

Project Total: \$17,000

Scope of Work: Windows & Doors

Completed: 2019

Averill, Paula

5171 NE 2nd Terrace

Oakland Park, FL 33334

Project Total: \$39,275

Scope of Work: Roof, Windows, Electrical, Structural

Completed: 2019

Diaz Daniel

619 NW 45th Court

Oakland Park, FL 33309

Project Total: \$ 47,705

Scope of Work: Roof, Structural, Mechanical, Plumbing

Completed: 2019

Janie Williams

4300 SW 24th ST

West Park, FL 33023

Project Total: \$39,250

Scope of Work: Roof, Windows, Mechanical, Electrical, Handicap ramp

Completed: 2019

ALTHEA KEEN

1276 NW 89 Drive

Coral Springs, FL 33071

Project Total: \$31,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2019

North Miami NSP

915 NE 122 ST

North Miami FL 33161

Project Total: \$ 18,850

Scope of Work Interior repairs- Walkway- Electrical- Paint

Completed: 2019

North Miami NSP

612 NE 130 ST

North Miami FL 33161

Project Total \$ 14,000

Scope of Work: Interior repairs- Mechanical- Electrical Paint

Completed: 2019

PATRICIA DYETTE

7761 NW 30 ST

Davie, FL 33024

Project Total: \$25,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2017

MICHELLE KENNY

3806 NW 77 AV

Davie, FL 33024

Project Total: \$17,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2017

PATRICIA MARTIN

3640 SW 55 AV

Davie, FL 33314

Project Total: \$40,000

Scope of Work: Roof, Windows and Doors, Electrical, Plumbing

Completed: 2017

SHARON LACHOWIZ

4757 SW 72 AV

Davie, FL 33314

Project Total: \$38,000

Scope of Work: Roof, Windows and Doors, Electrical, Plumbing

Completed: 2017

LINDA HARRIS

5700 SW 47 St

Davie, FL 33314

Project Total: \$38,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2017

MARY BALZANO

1199 SW 108 Way

Davie, FL 33324

Project Total: \$31,000

Scope of Work: Roof, Windows and Doors, Electrical, Plumbing

Completed: 2017

BLUNIE NICOLAS

2673 NW 92 AV

Coral Springs, FL 33065

Project Total: \$33,000

Scope of Work: Roof, Windows and Doors, Electrical, Mold Restoration

Completed: 2017

LESLY RICHARDSON

8460 NW 16 Street

Pembroke Pines FL 33024

Project Total: \$56,000

Scope of Work: Roof, Windows and Doors, Electrical, Plumbing, Kitchen

Completed: 2017

ANTHONY JOHNMARIE

2315 NW 98 TER

CORAL SPRINGS, FL

Project Total: \$35,000

Scope of Work: Roof, Ceiling repair, Mold remediation

Completed: 2017

LORNA IRELAND

4014 NW 76 AV

Coral Springs, FL 33065

Project Total: \$36,000

Scope of Work: Roof, Windows and Doors, Electrical, Mechanical

Completed: 2017

EDNA COLE

5723 NW 101 Drive

Coral Springs, FL 33076

Project Total: \$31,000

Scope of Work: Roof

Completed: 2017

JOE & IDA COLON

2310 NW 115 DR

Coral Springs, FL 33076

Project Total: \$33,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2018

LINDA COLEMAN

14141 NW 23 PL

OPA LOCKA, FL

Project Total: \$29,000

Scope of Work: Roof, Windows and Doors, Electrical, Plumbing

Completed: 2017

MICHAEL HALPERIN

1503 NW 85TH DR

CORAL SPRINGS, FL

Project Total: \$30,000

Scope of Work: Doors, Electrical, and Foundation

Completed: 2017

VERONICA SUAREZ

8199 NW 11 ST

CORAL SPRINGS, FL

Project Total: \$30,000

Scope of Work: Doors, Electrical, and Windows

Completed: 2017

KEVIN WILLIAMSON

1601 SW 50 AV

FORT LAUDERDALE, FL

Project Total: \$17,000

Scope of Work: Roof, Gutters, Termite tenting

Completed: 2017

ANMON BISHARI

728 NW 127 AV

CORAL SPRINGS, FL

Project Total: \$31,000

Scope of Work: Windows and Doors, Electrical, Plumbing

Completed: 2017

DONALD HALL

12113 ROYAL PALM BLVD

CORAL SPRINGS, FL

Project Total: \$30,000

Scope of Work: Windows and Doors, Electrical, Plumbing

Completed: 2017

MERCIANIE THOMAS

14115 NE 7 AV

NORTH MIAMI, FL

Project Total: \$30,000

Scope of Work: Roof, Windows and Doors, Painting

Completed: 2017

GERMAINE CHRISTIAN

1010 NW 129 ST

NORTH MIAMI, FL

Project Total: \$16,000

Scope of Work: Roof, Gutters

Completed: 2017

ELIZABETH VAVRA

1817 NE 121 ST

NORTH MIAMI, FL

Project Total: \$16,000

Scope of Work: Roof, Windows and Doors

Completed: 2017

Maria Alexander

1712 NW 38 ST

Oakland Park, FL 33309

Project Total: \$82,680

Scope of Work: Roof, Addition of Handicap Bathroom to existing house

Completed: 2018

Janie Williams

4300 SW 24th ST

West Park, FL 33023

Project Total: \$39,250

Scope of Work: Roof, Windows, Mechanical, Electrical, Handicap ramp

Completed: 2018

Russell Gwendolyn

9530 Toledo Lane

Davie FL 33324

Project Total: \$37,275

Scope of Work: Hurricane Tie Down, Tile Roof, Structural, Electrical

Completed: 2018

Robert Raines

1311 NW 199th ST

Miami Gardens, FL 33169

Project total: \$18,697

Scope of Work: Structural, Roof

Completed: 2018

Luckner Nelson

565 NE 132 ST

North Miami

Project total: \$23,700

Scope of Work: Windows, Doors, Paint

Completed :2018

Diaz Daniel

619 NW 45th Court

Oakland Park, FL 33309

Project Total: \$ 47,705

Scope of Work: Roof, Structural, Mechanical, Plumbing

Completed: 2018

DENISE SMITH

5410 SW 21 ST

WEST PARK, FL 33023

Project Total: \$45,000

Scope of Work: Roof, Gutters, Termite tenting, Ceiling repair, Mold remediation

Completed: 2018

ALTHEA KEEN

1276 NW 89 Drive

Coral Springs, FL 33071

Project Total: \$31,000

Scope of Work: Roof, Windows and Doors, Electrical

Completed: 2018

NOTE: This is not a comprehensive list

NOTE: Our team was responsible for every aspect of the above referenced jobs.

This is not an exhaustive list of our previous work.

3.7. The firm must provide information on their proximity to and familiarity with the area in which the project is located.*

Reliant Construction has worked with the City of Pembroke Pines in the past. We are very familiar with the city and it's building department. Pass Fail

3.8. Explain the availability and access to the firm's top level management personnel.* Pass Fail

Our qualifier and president Ron Augustin is readily available during business hours. He can be reached at 305-724-7898.

3.9. Identify the contact person and supervisory personnel who will work on the various projects, including the relative experience of all professionals proposed for use on the team.*

Our project manager Himmler Quettan has already overseen and completed many projects for your Pass Fail type of RFQ. Our entire team is very familiar with working with federally funded programs. As a matter of fact, that is the bulk of our work. We are capable of resolving all former violations/liens from previous owners.

With over 100 years of collective experience, The City of Pembroke Pines can rest assured that we are capable of carrying out all aspects of the scope of work within this RFQ. We are familiar with all aspects of permitting, inspecting, and carrying out the labor needed to complete projects in a timely manner. We are located in the City of Miramar, which is less than fifteen minutes from Pembroke Pines.

Our team members are readily accessible to all customers and stake holders during business hours and beyond. We have a proven track record of completing projects in a timely manner. Along with our timeliness, we also have high customer ratings from homeowners. This is in large part due to our team's ability to communicate and coordinate with all stake holders.

Reliant Construction Group Inc. Team

1) **Ronald Augustin**

- a. Role: CEO and Qualifier
- b. Experience: 19 years of construction experience, expert in Residential Rehabilitation projects and residential new construction

2) **Himmler Quettan**

- a. Role: Project Manager and On-Site Coordinator
- b. Experience: 16 years of construction management and former Miami-Dade County Public Schools educator

3) **Quality Plus Construction (Roofing)**

- a. Role: Roofing Specialist and Qualifying Agent
- b. Experience: over 29 years of roof-contracting experience

4) **Marvin Johnson**

- a. Role: Mechanical Specialist and Qualifying Agent
- b. Experience: over 16 years as a mechanical specialist

5) **Mervin Gordon**

- a. Role: Plumbing Specialist and Qualifying Agent
- b. Experience: over 26 years as a plumbing specialist

6) **Lloyd Lattibeaudiere**

- a. Role: Electrical Specialist and Qualifying Agent

b. Experience: over 34 years as an electrical specialist

7) **Jerome Gelin**

a. Role: Architect and Prepare drawings

b. Experience: over 10 years of experience as an architect

3.10. Provide summaries of key persons and on-site staff to be assigned to the project with emphasis on their experience with similar work.*

Himmler Quettan

Pass Fail

a. Role: Project Manager and On-Site Coordinator

3.11. Explain the ability and experience of the field staff with specific attention to project related experience.*

Our project manager and our installers have extensive field experience and are able to tackle any aspects of construction in the field. Pass Fail

3.12. Contractor should list any applicable qualification, including education, experience, honors and awards received, and professional associations of which the firm and/or its personnel are members.*

Reliant Construction is EPA certified. Ronald Augustin is certified in lead renovation. Pass Fail

3.13. Provide the recent, current, and projected workload of the firm.*

Reliant Construction is currently working on 10 government contracts. Pass Fail

3.14. What is your reputation compared to your peers in the market?*

Reliant Construction's reputation meets or exceeds our competitors. Pass Fail

3.15. What is your reputation like among customers and how have you developed it?*

Reliant Construction has an impeccable reputation with our customers. We develop it by responding quickly to their concerns. Pass Fail

3.16. How does your service differ from similar competitors? How do you win and retain business?*

Reliant Construction's service differs from our customer's in that we put our customer's interest ahead of our company's interest and that's how we retain business. Pass Fail

3.17. A brief statement must be included which explains why your proposal would be the most effective and beneficial to the City of Pembroke Pines.*

We are confident in the fact that we can be a valuable asset to your pool of contractors. Because.... Pass Fail

1. 90% of our work is with city and municipality programs such as yours
2. Our project manager is intimately acquainted with most if not all of the inspectors in your pool
3. Our project manager is intimately familiar with CRA and its employees
4. We have the funds to run multiple projects at once

4. FIRM'S UNDERSTANDING AND APPROACH TO THE WORK

The understanding that the applicant and consultants demonstrate as to the requirements and needs of the project, including an evaluation of the thoroughness demonstrated in analyzing and investigating the scope of the project.

4.1. Provide a narrative statement demonstrating an understanding of the overall intent of this solicitation, as well as the methods used to complete assigned tasks.*

The city of Pembroke Pines is looking for contractor's to

Pass Fail

- Correcting municipal code violations
 - Abate any health and safety problems in the resident's home
 - Provide safe electrical and mechanical systems
 - Stop weather penetration to make the resident's home more energy efficient
 - Improve the general condition of the resident's structure

4.2. Please clearly describe all aspects of the project proposed.*

Pass Fail

The city of Pembroke Pines is looking for contractor's that are able renovate homes in a manner that meets or exceeds current codes. This work is to be done by companies that are properly licensed and insured.

4.3. Include details of your approach and work plans.*

Pass Fail

Upon being awarded a contract, Reliant Construction will

1. Meet with homeowner to get all necessary documents signed
2. Apply for permit
3. Apply for HOA approval if needed
4. Begin work once all permits and HOA approval has been obtained
5. Complete all work in a timely manner

4.4. How would you organize this project in terms of milestones?*

Pass Fail

1. Obtain permit
2. Obtain HOA approval if needed
3. Mobilize needed sub contractors
4. Discuss work schedule with the homeowner(s)
5. Begin work
6. Schedule necessary inspections
7. Schedule final walk through with the home inspector

4.5. Identify any issues or concerns of significance that may be appropriate.*

Pass Fail

N/A

4.6. How do you ensure the quality of your services?*

Pass Fail

By only working with qualified sub contractors and suppliers

4.7. What criteria do you use to measure your quality?*

Pass Fail

Building codes and professional standards

4.8. How often do you find mistakes or errors in your work and what is done to correct these errors, and what is the average correction time?*

We rarely find mistakes, but when found we move to correct them immediately. The average correction time depending on the gravity of the error is typically a few hours to a day.

Pass Fail

4.9. Describe the firm's techniques for quality control. At a minimum describe the firm's technique to control design and contract documentation, including record keeping.*

Building codes and professional standards

Pass Fail

5. PREVIOUS EXPERIENCE

In this section, vendors are required to provide a detailed account of their previous experience relevant to the services outlined in this solicitation. The aim is to assess the vendor's capability and track record in delivering similar projects.

5.1. How many clients have you provided Services for?*

Pass Fail

Over 30 cities or municipalities and 100s of homeowners.

5.2. What similar or related projects have you worked on within the past three years?*

Pass Fail

In the past 3 years Reliant Construction has worked with Coral Springs, North Miami, Miami Gardens, Lauderhill, Miramar etc

5.3. What challenges did you face and how did you overcome them?*

Pass Fail

The most common challenge we face is getting permits approved in a timely manner. We then typically get the Housing Department involved to speed up the process.

5.4. How many of your clients are repeat clients?*

Pass Fail

Are far as government entities, all of them.

5.5. How much of your revenue is derived from managing projects similar to ours?*

Pass Fail

80 percent

5.6. Please describe the past record of performance of the firm or person with respect to accessibility to clients, ability to meet schedules, communication, and coordination skills. *

Himmler Quettan, Project Manager, is readily available during and after hours to meet client needs. Pass Fail

6. REFERENCE # 1

The minimum experience for this project is **five (5) years**. Provide specific examples of similar experience conducting licensed work of equal or similar scope of work, preferably delivered by the proposed team members. A **minimum of 3** references should be from the last **five years** and should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. As part of the proposal evaluation process, the City may conduct an investigation of references, including a record check or consumer affairs complaints. Proposers' submission of a proposal constitutes acknowledgment of the process and consent to investigate. The City is the sole judge in determining Proposers qualifications. In this section you will have the ability to enter information for 5 different references including their contact details and specific project information.

Please note that the City prefers references who are not current employees of the City of Pembroke Pines, as we generally do not contact our own employees for reference checks.

Proposers are advised to confirm that:

1. Each reference provided by the Respondent has up to date contact persons and contact information;
2. The contact person provided for each reference is someone who has personal knowledge of the Proposer's performance during the referenced project; and

3. The contact person for each reference has been contacted by the Proposer regarding this specific bid submittal and such person confirmed their willingness to serve as a reference.

6.1. Reference Contact Information – Name of Firm, City, County or Agency* Pass Fail
Minority Builders Coalition

6.2. Reference Contact Information – Reference's Business Address* Pass Fail
499 nw 70 av Plantation FL 33317

6.3. Reference Contact Information – Reference's Contact Name & Title* Pass Fail
Janice Hayes, program manager

6.4. Reference Contact Information – Reference's E-mail Address* Pass Fail
janice.hayes@minoritybuilders.org

6.5. Reference Contact Information – Reference's Phone Number* Pass Fail
954-792-1121 ext 25

6.6. Project Information – Was your firm the prime contractor for the listed project?* Pass Fail
Yes

6.7. Project Information – Name of Contactor Performing the Work* Pass Fail
Reliant Construction Group Inc.

6.8. Project Information – Name and location of the project* Pass Fail
Home Repair program for various cities in Broward County

6.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for* Pass Fail

- Correcting municipal code violations
- Abating any health and safety problems in the resident's home
- Providing safe electrical and mechanical systems
- Stopping weather penetration to make the resident's home more energy efficient
- Improving the general condition of the resident's structure

6.10. Project Information – Project Duration* Pass Fail
Two years

6.11. Project Information – Completion (Anticipated) Date* Pass Fail
June 2026

6.12. Project Information – Size of Project* Pass Fail
Single family homes

6.13. Project Information – Cost of Project* Pass Fail
\$30 - 50,000

7. REFERENCE # 2

7.1. Reference Contact Information – Name of Firm, City, County or Agency*

Pass Fail

City of Coral springs Housing

7.2. Reference Contact Information – Reference's Business Address*

Pass Fail

9500 West Sample Rd Coral springs FL 33065

7.3. Reference Contact Information – Reference's Contact Name & Title*

Pass Fail

Nathalene Carter, program manager

7.4. Reference Contact Information – Reference's E-mail Address*

Pass Fail

ncarter@coralsprings.gov

7.5. Reference Contact Information – Reference's Phone Number*

Pass Fail

954-3444-5910

7.6. Project Information – Was your firm the prime contractor for the listed project?*

Pass Fail

Yes

7.7. Project Information – Name of Contactor Performing the Work*

Pass Fail

Reliant Construction Group Inc.

7.8. Project Information – Name and location of the project*

Pass Fail

Home Repair program for the City of Coral springs

7.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for*

- Correcting municipal code violations
- Abating any health and safety problems in the resident's home
- Providing safe electrical and mechanical systems
- Stopping weather penetration to make the resident's home more energy efficient
- Improving the general condition of the resident's structure

Pass Fail

7.10. Project Information – Project Duration*

Pass Fail

Two years

7.11. Project Information – Completion (Anticipated) Date*

Pass Fail

December 2027

7.12. Project Information – Size of Project*

Pass Fail

Single family homes

7.13. Project Information – Cost of Project*

Pass Fail

\$30 - 65,000

8. REFERENCE # 3

8.1. Reference Contact Information – Name of Firm, City, County or Agency*

Pass Fail

City of Tamarac Housing & Community Development

8.2. Reference Contact Information – Reference's Business Address*

Pass Fail

7525 NW 88th Ave, Tamarac, FL 33321

8.3. Reference Contact Information – Reference's Contact Name & Title*

Pass Fail

Nichola Lewis, program manager

8.4. Reference Contact Information – Reference's E-mail Address*

Pass Fail

Nichola.Lewis@tamarac.gov

8.5. Reference Contact Information – Reference's Phone Number*

Pass Fail

(954) 597-3529

8.6. Project Information – Was your firm the prime contractor for the listed project?*

Pass Fail

Yes

8.7. Project Information – Name of Contactor Performing the Work*

Pass Fail

Reliant Construction Group Inc.

8.8. Project Information – Name and location of the project*

Pass Fail

Home Repair program for the City of Tamarac

8.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for*

- Correcting municipal code violations
- Abating any health and safety problems in the resident's home
- Providing safe electrical and mechanical systems
- Stopping weather penetration to make the resident's home more energy efficient
- Improving the general condition of the resident's structure

Pass Fail

8.10. Project Information – Project Duration*

Pass Fail

Two years

8.11. Project Information – Completion (Anticipated) Date*

Pass Fail

June 2026

8.12. Project Information – Size of Project*

Pass Fail

Single family homes

8.13. Project Information – Cost of Project*

Pass Fail

\$30 - 50,000

9. REFERENCE # 4

9.1. Reference Contact Information – Name of Firm, City, County or Agency

Pass Fail

City of Lauderhill Housing & Community Development

9.2. Reference Contact Information – Reference's Business Address

Pass Fail

5581 W Oakland Park Blvd, Lauderhill, FL 33313

9.3. Reference Contact Information – Reference's Contact Name & Title

Pass Fail

Martha Duvall, program manager

9.4. Reference Contact Information – Reference's E-mail Address

Pass Fail

mduvall@lauderhill-fl.gov

9.5. Reference Contact Information – Reference's Phone Number

Pass Fail

954-714-2181

9.6. Project Information – Was your firm the prime contractor for the listed project?

Pass Fail

Yes

9.7. Project Information – Name of Contactor Performing the Work

Pass Fail

Reliant Construction Group Inc.

9.8. Project Information – Name and location of the project

Pass Fail

Home Repair program for the City of Lauderhill

9.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for

Pass Fail

- Correcting municipal code violations
 - Abating any health and safety problems in the resident's home
 - Providing safe electrical and mechanical systems
 - Stopping weather penetration to make the resident's home more energy efficient
 - Improving the general condition of the resident's structure
-

9.10. Project Information – Project Duration

Pass Fail

Two years

9.11. Project Information – Completion (Anticipated) Date

Pass Fail

May 2026

9.12. Project Information – Size of Project

Pass Fail

Single family homes

9.13. Project Information – Cost of Project

Pass Fail

\$30 - 100,000

10. REFERENCE # 5

10.1. Reference Contact Information – Name of Firm, City, County or Agency

Pass Fail

Community Revitalization Affiliates, Inc.

10.2. Reference Contact Information – Reference's Business Address

Pass Fail

6151 Miramar Parkway Suite 202 Miramar, FL 33023

10.3. Reference Contact Information – Reference's Contact Name & Title

Pass Fail

Jacqueline Mirabal, program manager

10.4. Reference Contact Information – Reference's E-mail Address

Pass Fail

jmirabal@crasouthfl.com

10.5. Reference Contact Information – Reference's Phone Number

Pass Fail

954-939-3271

10.6. Project Information – Was your firm the prime contractor for the listed project?

Pass Fail

Yes

10.7. Project Information – Name of Contactor Performing the Work

Pass Fail

Reliant Construction Group Inc.

10.8. Project Information – Name and location of the project

Pass Fail

Home Repair program for the City of Miramar

10.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for

- Correcting municipal code violations
- Abating any health and safety problems in the resident's home
- Providing safe electrical and mechanical systems
- Stopping weather penetration to make the resident's home more energy efficient
- Improving the general condition of the resident's structure

Pass Fail

10.10. Project Information – Project Duration

Pass Fail

Two years

10.11. Project Information – Completion (Anticipated) Date

Pass Fail

June 2026

10.12. Project Information – Size of Project

Pass Fail

Single family homes

10.13. Project Information – Cost of Project

Pass Fail


\$30 - 50,000


11. PROJECT DOCUMENTS

11.1. PROPOSERS BACKGROUND INFORMATION FORM*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Proposers Background Information Form.xlsx](#)


 [Proposers Background Information Form.xlsx](#)


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

12.1. SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Sworn Statement on Public Entity Crimes.pdf](#)

 [Sworn Statement on Public Entity Crimes.pdf](#)

12.2. Public Entity Crimes Status*

Pass Fail

- Which option did you select on the Sworn Statement on Public Entity Crimes Form:
 - 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.
 - B1) 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 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 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 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 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 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.)

A) No convictions.

12.3. Did you select option B1 or B2 above?*

Pass Fail

No

12.4. Did you select option B3 above?*

Pass Fail


No

13. EQUAL BENEFITS CERTIFICATION FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

13.1. EQUAL BENEFITS CERTIFICATION FORM*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Equal_Benefits_Certification_Form.pdf](#)

 [Equal_Benefits_Certification_Form.pdf](#)

13.2. Equal Benefits Status*

Pass Fail

- Which option did you select on the Equal Benefits Certification Form:
 - 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;

A) Contractor currently complies.

13.3. Did you select option D2 above?*

Pass Fail


No

14. DRUG-FREE WORKPLACE CERTIFICATION

14.1. VENDOR DRUG FREE WORKPLACE CERTIFICATION*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor_Drug-Free_Workplace_Certification_Form.pdf](#)

 [Vendor_Drug-Free_Workplace_Certification_Form.pdf](#)

14.2. Drug-Free Status*

Pass Fail

Complies fully.


15. STANDARD DOCUMENTS

The following documents are standard documents that the City generally requires for every solicitation. As a result, we recommend vendors to keep these documents updated and readily available so that they can be easily uploaded for each project that the vendor would like to participate in. In the event that the City does not have one of the forms or documents listed below for your company, the City may reach out to your company after the bid has closed to obtain the document(s).

15.1. NON-COLLUSIVE AFFIDAVIT*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Non-Collusive_Affidavit.pdf](#)

 [Non-Collusive_Affidavit.pdf](#)

15.2. SCRUTINIZED COMPANY CERTIFICATION*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Scrutinized_Company_Certification.pdf](#)

 [Scrutinized_Company_Certification.pdf](#)

15.3. E-VERIFY SYSTEM CERTIFICATION*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Effective January 1, 2021, pursuant to Section 448.095, Florida Statutes, the City may not enter into a contract with a vendor/contractor/subcontractor unless that vendor/contractor/subcontractor is registered with and uses the E-Verify system administered by the U.S. Department of Homeland Security ("DHS").
3. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

 [E-Verify_System_Certification_Statement.pdf](#)

 [E-Verify_System_Certification_Statement.pdf](#)

15.4. HUMAN TRAFFICKING AFFIDAVIT*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Human_Trafficking_Affidavit.pdf](#)

 [Human_Trafficking_Affidavit.pdf](#)

16. VENDOR REGISTRATION

16.1. Do you currently have a City of Pembroke Pines Vendor Number registered in the PaymentWorks System?*

- The City of Pembroke Pines utilizes OpenGov as its e-Procurement platform for Pass Fail solicitation and bid submission purposes. However, please be advised that **vendor registration for onboarding and processing payments is handled separately** through the City's Accounts Payable Division using **PaymentWorks**, a secure online vendor management platform.
- All vendors that will be submitting invoices and requiring payments from the City are required to register on the PaymentWorks platform. If the vendor is not currently registered with the City via PaymentWorks and does not have a Vendor Number, the City will have to invite the vendor to register.
- For formal solicitations such as this project, the Procurement Department will send PaymentWorks registration invitations to vendor(s) who are under active consideration for award. Please be aware that not all vendors who submit proposals will receive an invitation, in order to manage system usage and avoid onboarding vendors who are unlikely to receive payments from the City.
- Invitations will typically be sent to the contact listed on the submitted Vendor Information Form.

No

16.2. VENDOR INFORMATION FORM*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor_Information_Form.pdf](#)


 [Vendor_Information_Form.pdf](#)

16.3. FORM W-9 (REVISED MARCH 2024)*

Pass Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Note - Please use the March 2024 version of the form as previously dated versions of this form may delay the processing of any payments to the selected vendor.

 [Form_W-9_\(Rev_March_2024\).pdf](#)

 [W-9_signed_11-11-2025.pdf](#)

17. OPTIONAL DOCUMENTATION

17.1. TRADE SECRETS

1. The Proposer's response to this solicitation is a public record pursuant to Florida law, which is subject to disclosure by the City under the State of Florida Public Records Law, Florida Statutes

Chapter 119.07 ("Public Records Law"). The City shall permit public access to all documents, papers, letters or other material submitted in connection with this solicitation and the Contract to be executed for this solicitation, subject to the provisions of Chapter 119.07 of the Florida Statutes.

2. Any language contained in the Proposer's response to the solicitation purporting to require confidentiality of any portion of the Proposer's response to the solicitation, except to the extent that certain information is in the City's opinion a Trade Secret pursuant to Florida law, shall be void. If a Proposer submits any documents or other information to the City which the Proposer claims is Trade Secret information and exempt from Florida Statutes Chapter 119.07 ("Public Records Laws"), the Proposer shall clearly designate that it is a Trade Secret and that it is asserting that the document or information is exempt. The Proposer must specifically identify the exemption being claimed under Florida Statutes 119.07. The City shall be the final arbiter of whether any information contained in the Proposer's response to the solicitation constitutes a Trade Secret.
3. EXCEPT FOR CLEARLY MARKED PORTIONS THAT ARE BONA FIDE TRADE SECRETS PURSUANT TO FLORIDA LAW, DO NOT MARK YOUR RESPONSE TO THE SOLICITATION AS PROPRIETARY OR CONFIDENTIAL. DO NOT MARK YOUR RESPONSE TO THE SOLICITATION OR ANY PART THEREOF AS COPYRIGHTED. ALL DOCUMENTS THAT THE FIRM PURPORTS TO BE CONFIDENTIAL, PROPRIETARY OR A TRADE SECRET SHALL BE UPLOADED TO THE OPENGOV WEBSITE AS A SEPARATE ATTACHMENT, IN THIS SECTION, CLEARLY IDENTIFYING THE EXEMPTION BEING CLAIMED UNDER FLORIDA STATUTES 119.07.
4. The city's determination of whether an exemption applies shall be final, and the proposer agrees to defend, indemnify, and hold harmless the city and the city's officers, employees, and agent, against any loss or damages incurred by any person or entity as a result of the city's treatment of records as public records.

No response submitted

17.2. FINANCIAL STATEMENTS

1. The City is **NOT** requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
2. Any claim of confidentiality on financial statements must be asserted at the time of submittal. The firm must identify the specific statute that authorizes the exemption from the Public Records Law. Please note that the financial statement exemption provided for in Section 119.071(1)c, Florida Statutes only applies to submittals in response to a solicitation for a "public works" project.

No response submitted

17.3. ALTERNATIVES

1. If you are submitting an alternative product, please upload any related information in this section (such as specification sheets, etc.).
2. In addition, pursuant to the "**Brand Names**" Section included in the GENERAL TERMS AND CONDITIONS Section if and wherever in the specifications a brand name, make, name of manufacturer, trade name, or vendor catalog number is mentioned, it is for the purpose of establishing a grade or quality of material only. Since the City does not wish to rule out other competition and equal brands or makes, the phrase "OR EQUAL" is added. However, if a product other than that specified is bid, Proposers shall indicate on their proposal and clearly state the

proposed substitution and deviation. It is the vendor's responsibility to provide any necessary documentation and samples within their bid submittal to prove that the product is equal to that specified. Such samples are to be furnished before the date of bid opening, unless otherwise specified. Additional evidence in the form of documentation and samples may be requested if the proposed brand is other than that specified. The City retains the right to determine if the proposed brand shall be considered as an approved equivalent or not.

No response submitted

17.4. ADDITIONAL INFORMATION


1. Please provide any additional information that you deem necessary to complete your proposal in this section, if it has not been requested in another section.


No response submitted

17.5. PROFESSIONAL LICENSES

Pass Fail

1. If applicable, please upload any professional licenses that may be required to perform the services outlined in the solicitation.

 [Reliant_GC_License_Exp_2026.pdf](#)

 [Reliant_EPA_cert_exp_5-22-29.pdf](#)

18. VENDOR CLASSIFICATION

18.1. Is your firm a Veteran Owned Small Business (VOSB)?*

Pass Fail

1. 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.
2. 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).

No

18.2. Is your firm a Minority-Owned Business Enterprise (MBE)?*

Pass Fail

No

18.3. Is your firm a Woman-Owned Business Enterprise (WBE)?*

Pass Fail

No

18.4. Is your firm a HubZone Business / Labor Surplus Area Firm?*

Pass Fail

No

18.5. Is your firm a Broward County Small Business Enterprise (SBE)?*

Pass Fail

No

18.6. Is your firm a Broward County Business Enterprise (CBE)?*

Pass Fail

No

18.7. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?* Pass Fail

No

18.8. Does your firm have a Vendor Classification that was not listed above?* Pass Fail

No

19. FEDERAL DOCUMENTS

19.1. Certification Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters for Expenditure of Federal Funds*


1. Lobbying: Pass Fail


1. As required by 7 CFR Part 3018, for persons entering into a contract, grant or cooperative agreement over **\$100,000** involving the expenditure of Federal funds, the Contractor must complete the **Certification Regarding Lobbying**.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress, in connection with this Federal contract, grant, loan, or cooperative agreement, the Contractor shall also complete and submit the **Standard Form - LLL, "Disclosure Form to Report Lobbying,"** in accordance with its instructions.

2. Debarment, Suspension and Other Responsibility Matters:

1. Where the Contractor is unable to certify to any of the statements in the certification for **Debarment, Suspension and Other Responsibility Matters**, he or she shall **provide an explanation**.

- Please download the below documents, complete, and upload.

 [Federal_Certification_for_Lobbying_and_Debarment_and_Form_LLL.pdf](#)

 [Federal_Certification_for_Lobbying_and_Debarment_and_Form_LLL.pdf](#)

19.2. Are you currently registered as an active entity on SAM.gov (System for Award Management)?*

1. All vendors submitting bids for this project must be registered and active in the Pass Fail System for Award Management (SAM.gov) at the time of bid award. This is a federal requirement for entities receiving federal funds, including contracts, grants, or other financial assistance. Registration on SAM.gov ensures that vendors are eligible to do business with the U.S. government and are not suspended, debarred, or otherwise excluded from participation in federal programs. SAM registration is free and can be completed at <https://sam.gov>. Bidders must provide their Unique Entity ID (UEI) and proof of active registration as part of their proposal.

Yes

19.2.1. If yes, please provide your Unique Entity ID (UEI)* Pass Fail

G6SNNJ5RCEJ9


19.2.2. What is the expiration date of your current SAM.gov registration? (MM/DD/YYYY)* Pass Fail

12/03/2025

19.2.3. Proof of Registration Upload*

Pass Fail

1. Please upload a PDF copy or screenshot of your entity's active registration status from SAM.gov that includes:
 1. Entity Name
 2. Unique Entity ID (UEI)
 3. DUNS (if applicable)
 4. Registration Status ("Active")
 5. Expiration Date
2. *This document must be downloaded from <https://sam.gov> and must show the current status at the time of bid submission.*

 [Sam_Regis_Exp_12-3-25.pdf](#)

19.3. Debarment Status – Is your entity currently debarred, suspended, or otherwise excluded from receiving federal contracts or financial assistance?*


No

Pass Fail

19.4. Form 1 of HUD Section 3 Implementation Plan*

Pass Fail

1. This project is governed by Section 3 of the Housing and Urban Development Act of 1968, as amended. Section 3 ensures that employment and economic opportunities created by HUD assistance benefit low- and very low-income individuals, especially those residing within the project's service area.
2. NO VALUEs must demonstrate their compliance with Section 3 requirements, please see "**HUD Section 3 Implementation Plan and Forms 1-6**" in the attachments section for additional information.
3. This may include providing information on how they will hire qualified low- and very low-income individuals and/or utilize Section 3 businesses as part of the project.
4. As part of the bidding process, NO VALUE must return **Form 1** with their bid submission, as failure to do so may result in the disqualification of your submittal.
5. In addition, Forms 2-6 must be submitted with final reporting, 30 days after project completion, as applicable.
6. Please download the below documents, complete, and upload.

 [Form_1_of_HUD_Section_3_Implementation_Plan.pdf](#)

 [Section_3_assessment_&_certifications.pdf](#)

19.5. I certify that the information provided above is true and correct to the best of my knowledge. I understand that false or misleading statements may disqualify this bid and subject the entity to federal penalties.*

Confirmed

Pass Fail