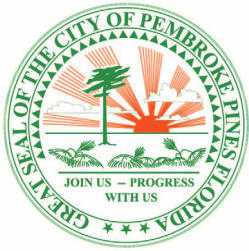


Exhibit "B"

Notice of Qualification of Local Vendor Preference

IFB # RE-25-07 New Chiller for Studio 18



PEMBROKE PINES CITY COMMISSION

Angelo Castillo
MAYOR
954-450-1020
acastillo@ppines.com

Michael A. Hernandez
VICE MAYOR
DISTRICT 4
954-450-1030
mihernandez@ppines.com

Thomas Good, Jr
COMMISSIONER
DISTRICT 1
954-450-1030
tgood@ppines.com

Jay D. Schwartz
COMMISSIONER
DISTRICT 2
954-450-1030
jschwartz@ppines.com

Maria Rodriguez
COMMISSIONER
DISTRICT 3
954-450-1030
mrodriguez@ppines.com

Charles F. Dodge
CITY MANAGER
954-450-1040
cdodge@ppines.com

Advanced Roofing, Inc. has qualified for Local Broward County Vendor Preference according to the policy described in City Ordinance 35.36 LOCAL VENDOR PREFERENCE. The policy states that a LOCAL BROWARD COUNTY VENDOR that qualifies for local vendor preference shall have an option to submit another bid which is at least 1% lower than the lowest responsive bid.

Under the City's policy, in order to win the award for RE-25-07, the second bid from **ADVANCED ROOFING INC.** must be at least 1% lower than the lowest bid. The lowest bid submitted for this project is **\$299,780**:

Line Item	Description	Qty	UM	Unit Cost	Total
1-1	Chiller Cost	1	Lump Sum	\$112,250.00	\$112,250.00
1-2	Installation cost	1	Lump Sum	\$75,000.00	\$75,000.00
1-3	Materials Costs	1	Lump Sum	\$85,000.00	\$85,000.00
1-4	Concrete Slab Costs	1	Lump Sum	\$6,000.00	\$6,000.00
1-5	Additional Considerations	1	Lump Sum	\$10,000.00	\$10,000.00
Sub-Total					\$288,250.00
1-6	Payment & Performance Bond	1	%	4.0%	\$11,530.00
Total					\$299,780.00

Advanced Roofing Inc. has until 5:00 p.m., Thursday, April 16, 2026, to submit this form to Byron Granda-Paez, Assistant Purchasing Manager, at bgrandapaez@ppines.com.

YES ✓ I choose to submit a second bid of:

Line Item	Description	Qty	UM	Unit Cost	Total
1-1	Chiller Cost	1	Lump Sum	\$112,250.00	\$112,250.00
1-2	Installation cost	1	Lump Sum	\$75,000.00	\$75,000.00
1-3	Materials Costs	1	Lump Sum	\$85,000.00	\$85,000.00
1-4	Concrete Slab Costs	1	Lump Sum	\$6,000.00	\$6,000.00
1-5	Additional Considerations	1	Lump Sum	\$14,000.00	\$14,000.00
Sub-Total					\$292,250.00
1-6	Payment & Performance Bond	1	%	% 1.5%	\$ 4,383.75
Total					\$296,633.75

 I choose to decline the opportunity to submit a second bid for this project.

Company Name: Advanced Roofing Inc. DBA Advanced Air Systems

Address: 1950 NW 22nd Street, Fort Lauderdale, FL 33311

Phone Number: 954-332-1418 E-mail Address: paulm@advancedairsystem.com

Print Name: Paul Murphy Signature: *Paul Murphy*

PRICE TABLES

Primary Response

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N.
1-1	Chiller Cost	1	Lump Sum	\$142,986.00	\$142,986.00	
1-2	Installation cost	1	Lump Sum	\$69,939.00	\$69,939.00	
1-3	Materials Costs	1	Lump Sum	\$60,002.00	\$60,002.00	
1-4	Concrete Slab Costs	1	Lump Sum	\$8,789.00	\$8,789.00	
1-5	Additional Considerations	1	Lump Sum	\$18,364.00	\$18,364.00	
Total					\$300,080.00	

Columns

Alternate Response

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N.
1-1	Chiller Cost	1	Lump Sum	\$0.00	\$0.00	n/a
1-2	Installation cost	1	Lump Sum	\$0.00	\$0.00	n/a
1-3	Materials Costs	1	Lump Sum	\$0.00	\$0.00	n/a
1-4	Concrete Slab Costs	1	Lump Sum	\$0.00	\$0.00	n/a
1-5	Additional Considerations	1	Lump Sum	\$0.00	\$0.00	n/a
Total					\$0.00	

Columns

Payment & Performance Bond

Line Item	Description	Unit of Measure	Percentage
3-1	Cost to provide a Payment & Performance Bond for the project, in the form of a percent	Percent	1.5%

Columns



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/11/2025

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 Acrisure Southeast Partners Insurance Services LLC 1317 Citizens Blvd Leesburg FL 34748 License#: BR-1796553 ADVAROO-06	CONTACT NAME: Jalen Belle-Walker PHONE (A/C No. Ext): 800-845-8437 E-MAIL ADDRESS: jbelle-walker@acrisure.com	FAX (A/C, No):	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Advanced Roofing Inc dba: Advanced Air Systems 1950 Nw 22nd Street Fort Lauderdale FL 33311	INSURER A: Greenwich Insurance Company		22322
	INSURER B: Starr Indemnity & Liability Company		38318
	INSURER C: Bridgefield Employers Insurance Company		10701
	INSURER D: Continental Casualty Company		20443
	INSURER E: Columbia Casualty Company		31127
	INSURER F: Indian Harbor Insurance Company		36940

COVERAGES

CERTIFICATE NUMBER: 421540456

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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Incl <input checked="" type="checkbox"/> Broad Form PD GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			CGS740979406	1/1/2025	1/1/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CAH740979506	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$10,000
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			1000588143251	1/1/2025	1/1/2026	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
C	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 Y	N/A	830-56020	1/1/2025	1/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D E F	Installation Floater Contractors Errors & Omissions Contractors Poll incl Mold			4016260407 C 6018114505 CEO744615206	1/1/2025 1/1/2025 1/1/2025	1/1/2026 1/1/2026 1/1/2026	Per Jobsite/Aggregate \$5.5M/\$15,000,000 Ea Claim/Aggregate \$5000000/\$5000000 Ea Claim/Aggregate \$2000000/\$2000000

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

CERTIFICATE HOLDER**CANCELLATION**

"For Bidding Purposes Only"
USA

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

AUTHORIZED REPRESENTATIVE

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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.	Paul Murhphy, VP of Advanced Air Systems paulm@advancedairsystems.com 954-522-6868		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.	Paul Murhphy, VP of Advanced Air Systems paulm@advancedairsystems.com 954-522-6868		Complete
Organization Background				
1.2.1	Please state the year that you company started its business.	1983		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	1983		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.	Korns and Son, roofing		Complete
1.3.2	At what address was that business located?	1950 NW 22nd Street, Fort Lauderdale, FL 33311		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	Langer Electric Service Company - yes it will be more than 10% of the contract amount.	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.	none		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).	none		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.	see attached list		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.	none		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.	Other	We are an HVAC contractor	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.	See Attached Write up		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.	Not Applicable	not sure what you mean by professional license but we hold both a State Mechanical Licesnse and Class A HVAC 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 Advanced Roofing, Inc. dba Advanced Air Systems
(name of entity submitting sworn statement) whose business address is
1950 NW 22nd Street, Fort Lauderdale, FL 33311
and (if applicable) its Federal Employer Identification Number (FEIN) is
59-2360591. (If the entity has no FEIN, include the Social Security
Number of the individual signing this sworn statement: _____.)

2. My name is Robert P. Kornahrens and my
(Please print name of individual signing)

relationship to the entity named above is President.

3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.

4. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 1. A predecessor or successor of a person convicted of a public entity crime: or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Cityship by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a



joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

6. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

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

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

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

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

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

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


Bidder's Name/Signature

Advanced Roofing, Inc. dba Advanced Air Systems
Company

12/8/2025
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: Advanced Roofing, Inc. dba Advanced Air Systems

AUTHORIZED OFFICER NAME / SIGNATURE: _____

A handwritten signature in blue ink, appearing to be "M. I. K.", written over a horizontal line.



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

Robert P. Kornahrens, President

Authorized Signer Name

Advanced Roofing, Inc. dba Advanced Air Systems

Company Name



NON-COLLUSIVE AFFIDAVIT

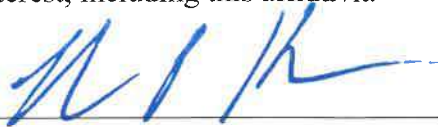
BIDDER is the Owner,
(Owner, Partner, Officer, Representative or Agent)

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 

Title Robert P. Kornahrens President

Name of Company Advanced Roofing, Inc. dba Advanced Air Systems



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

I, Robert P. Kornahrens, President, on behalf of Advanced Roofing, Inc. dba Advanced Air Systems,
Print Name and Title Company Name

certify that Advanced Roofing, Inc. dba Advanced Air Systems,
Company Name

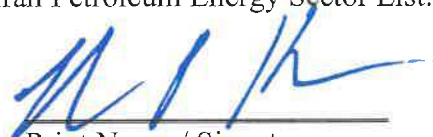
1. Does not participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has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

Advanced Roofing, Inc. Advanced Air Systems
Company Name


Print Name / Signature

President
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.

Advanced Roofing, Inc. dba Advanced Air Systems

COMPANY NAME: _____

Robert P. Kornahrens

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: 12/8/2025

SIGNATURE: 

ENTITY: Advanced Roofing, Inc. dba Advanced Air Systems

NAME: Robert P. Kornahrens

TITLE: President



VENDOR INFORMATION FORM

MAIN CONTACT INFORMATION			
Company Name (Legal Name as filed with IRS)	Advanced Roofing, Inc.		
Doing Business As (DBA)	Advanced Air Systems		
Primary Business Address	1950 NW 22nd Street		
	City:	Fort Lauderdale	
	State:	Florida	Zip: 33311
	Country:	USA	
Remit To Address	same as above		
	City:		
	State:		Zip:
	Country:		
Order From Address	Same as above		
	City:		
	State:		Zip:
	Country:		
Foreign Entity (Yes/No)	No		
Telephone Number	954-522-6868		
Primary Company E-mail	michaelk@advancedroofing.com		
Fax	954-566-2967		
Website	www.advancedroofing.com		
DUNS	11-2954359		
Independent Contractor (Yes/No)	No		
Identification Number	SSN:		FID: 59-2360591

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.
none	none	30 days

CONTACT # 1	
Contact Name (First & Last Name)	Michael Kornahens
Description/Title/Position	Executive Vice President
Phone (Voice)	954-522-6868
Phone (Text)	
Fax	954-566-2967
E-mail	michaelk@advancedroofing.com
	Opt In (Y/N):

STATE REGISTRATION	
Is your company registered with the State of Florida? (Y/N)	Yes
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.)	
	Advanced Roofing, Inc.	
	2 Business name/disregarded entity name, if different from above.	
	dba Advanced Air Systems	
	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) _____		
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.		
1950 NW 22nd Street		
6 City, state, and ZIP code		
Ft Lauderdale, FL 33311		
7 List account number(s) here (optional)		
Requester's name and address (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the 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.

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.

Social security number	
[] [] [] - [] [] - [] [] [] []	
or	
Employer identification number	
5 9 - 2 3 6 0 5 9 1	

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 12/8/25
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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



State License: CMC1251466

Florida's Premiere HVAC Contractor

1950 NW 22nd St, Fort Lauderdale, FL 33311

Toll Free: (84) TO-KEEP-COOL

Office: (954) 332-1418

Web: advancedairsystem.com

Firm's Local Experience / Nature of Services

Over the past three (3) years, our firm has successfully completed multiple HVAC and mechanical renovation projects throughout South Florida that closely match the size, scope, and complexity of the work required under this contract. These projects included chiller replacements, air-handling equipment upgrades, cooling tower installations, chilled-water piping modifications, structural pad construction, electrical service upgrades, and full system commissioning—often performed in active, occupied facilities with strict operational and safety requirements.

Our team has extensive experience working with municipalities, county agencies, and public institutions, delivering projects ranging from \$250,000 to over \$2 million. Typical scopes have included providing and installing air-cooled and water-cooled chillers, DOAS units, packaged rooftop units, variable-speed pumping systems, and major distribution piping. We routinely manage coordination with utility providers such as FPL for service upgrades, perform structural work for new equipment foundations, and self-perform mechanical and piping installations to ensure quality and schedule control.

In addition to HVAC system replacements, our firm has delivered projects involving building automation system integration, TAB services, temporary cooling provisions, and complex shutdown coordination. These projects required detailed phasing plans, active communication with facility staff, and strict adherence to project schedules to minimize downtime.

Our project delivery approach emphasizes safety, quality control, and proactive coordination with engineers, inspectors, and owner representatives. Within the last three years, our firm has maintained a strong record of completing mechanical retrofit projects on time and within budget, while meeting all permitting, inspection, and commissioning requirements. This experience ensures that we are fully capable of performing the work outlined in this contract with a high level of technical competency and operational reliability.



Year	Plaintiff	Defendant	Case No.	County	Court	Status	Comments/Project	Outcome
2015	AMPARO GIRALDO	DOLLAR TREE STORES, et al.	13-29377	Miami-Dade	Circuit	Closed	Slip and Fall (not construction related); claim in excess of \$30,000	Confidential Settlement
2016	Tower VI Condo Assoc.	Advanced Roofing, Inc.	Private Arbitration	Volusia	N/A	Closed	Contract Dispute with Owner; claim in excess of \$30,000	Confidential Settlement
2016	Arlene Freedman	Simon Property Group, Inc, a foreign corporation, Town Center at Boca Raton Trust, a New York Trust, and Advanced Roofing, Inc., a Florida for profit corporation	502016CA009504XXXXMB/AD	Palm Beach	Circuit	Closed	Slip and Fall (not construction related); claim in excess of \$30,000	Confidential Settlement
2017	ADVANCED ROOFING, INC.	KWA Engineers, Inc.	2017-30342-CICI	Volusia	Circuit	Closed	Contract Dispute with Engineer; claim in excess of \$30,000	Confidential Settlement
2017	ADVANCED ROOFING, INC.	Advanced Roofing Technologies of Florida, Inc. and Thomas A. Dieter	2017-005992-CA-01	Miami-Dade County	Circuit	Closed	Intellectual Property (not construction related)	Confidential Settlement
2017	ADVANCED ROOFING, INC.	42nd Street, LLC	Private Arbitration	Palm Beach	N/A	Closed	Non-payment for work performed; claim in excess of \$25,000	Judgment in favor of Advanced Roofing's
2017	ADVANCED ROOFING, INC.	FIRST STANDARD ASSURETY, LLP, KENYON & PARTNERS, INC.	17-CA-001785	Hillsborough	CIRCUIT	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement
2017	Henry and Jonadean Gonzalez	Carrollwood Village Northmeadow Cluster Houses Condominium Association, Inc., Phase II, and, Advanced Roofing	17-CA-1530	Hillsborough	Circuit	Closed	Minor Roof Leak; claim in excess of \$10,000	Confidential Settlement
2017	Habitat II Condo	Advanced Roofing, The Bri-Lan Group, Bromley Cook Engineering, Hillside Services, Glass America, Kimshaw, and Randy Henninger Manufacturing	CACE-17-000342 (03)	Broward	Circuit	Closed	Third party complaint relating to HVAC work; claim in excess of \$30,000	Dismissed
2017	Advanced Roofing, Inc.	Brian Wayne Vanderpool and Advanced Roofing & Renovations LLC	CACE-17-004887	Broward	Circuit	Closed	Intellectual Property (not construction related)	Confidential Settlement
2017	Space Coast Credit Union	Advanced Roofing Inc, Michael Gillis et al.	CACE-17-006192	Broward	Circuit	Closed	Mortgage Foreclosure (not construction related)	Voluntary Dismissal
2018	Nationstar Mortgage LLC d/b/a Champion Mortgage	Joan Streifeld, Advanced Roofing Inc et al.	CACE-18-013822	Broward	Circuit	Reclosed	Mortgage Foreclosure (not construction related)	Final Judgment of Foreclosure in favor of Plaintiff
2018	Dennis Sylvester Bent And Cheri Clarke Bent	Advanced Roofing and Anthony Byron Bullard	CACE-18-019792	Broward	Circuit	Closed	Automobile related (not construction related); claim in excess of \$30,000	Confidential Settlement.
2018	ADVANCED ROOFING, INC.	MARATHON PARADISE, INC.	CACE-18-018788	Broward	County	Closed	Non-payment for work performed; claim in excess of \$20,000	Confidential Settlement
2019	Kathleen Phillips, as curator of the estate of Adam Saad	Advanced Roofing, Inc, and Carlos Varas	CACE-19-005054	Broward	Circuit	Closed	Automobile related (not construction related); claim in excess of \$100,000	Confidential Settlement
2019	ADVANCED ROOFING, INC.	FIDELITY DEPOSIT & DEPOSIT COMPANY OF MARYLAND, et al.	2019-022013-CA-01 (25)	Miami-Dade	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement
2019	ADVANCED ROOFING, INC.	SAND DOLLAR I, INC.	CA19-0785 (Div. 55)	St. Johns	Circuit	Closed	Non-payment for work performed; claim in excess of \$30,000	Confidential Settlement
2019	ADVANCED ROOFING, INC.	VAA ENTERPRISES, LLC	2019 31854 COCI	Volusa	County	Closed	Non-payment for work performed; claim in excess of \$10,000	Confidential Settlement
2019	ADVANCED ROOFING, INC.	MASTRO IMPORTS	COWE-19-005726	Broward	County	Closed	Non-payment for work performed; claim in excess of \$10,000	Confidential Settlement
2019	Advanced Roofing, Inc.	Lake Point Tower Condominium Inc	CACE-19-007636	Broward	Circuit	Closed	Contract Dispute with Owner; claim in excess of \$50,000	Voluntary Dismissal
2019	Wells Fargo Bank, N.A.	Leanne Rose Page, and Advanced Roofing Inc.	CACE19023386	Broward	Circuit	Closed	Mortgage Foreclosure (not construction related)	Dismissed
2019	ADVANCED ROOFING, INC.	ARGONAUT INSURANCE CO.	19-CV-61701-RS/AOV	Southern District of Florida	Federal	Closed	Non-payment for work performed	Confidential Settlement
2019	ADVANCED ROOFING, INC.	VILLAS OF OCEAN DUNES ASSOCIATION, INC.	50-2019-CA-014407-XXXX-MB (AO) (MOVED TO PRIVATE ARBITRATION)	Palm Beach	N/A	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement
2020	ADVANCED ROOFING, INC.	Gator Delay, L.C.	CACE-20-002444(09)	Broward	Circuit	Closed	Non-payment for work performed; claim in excess of \$30,000	Confidential Settlement
2020	ADVANCED ROOFING, INC.	Gator Sheridan, Inc.	COWE-20-003446(83)	Broward	County	Closed	Non-payment for work performed; claim in excess of \$30,000	Confidential Settlement
2020	Eric Yogel	Advanced Roofing Inc	502020CA001593XXXXMB	Palm Beach	Circuit	Closed	Property damage; claim in excess of \$30,000	Confidential Settlement.
2020	Ignacio Diaz and Sara Diaz	Olypus Insurance Company and Advanced Roofing, Inc.	2020-003366-CA-01	Miami-Dade	Circuit	Closed	Roof leak; claim in excess of \$25,000	Confidential Settlement.
2020	Hollywood Comica and Collectibles, Inc.	Citrus Park Mall Owner LLC, and Advanced Roofing, Inc. and Ramirez Roofing, Inc.	20-CA-1799 DIV K	Hillsborough	Circuit	Closed	Property damage; claim in excess of \$30,000	Confidential Settlement.
2020	ADVANCED ROOFING, INC.	Burke Construction, Inc. et al.	2020-006234-CA-01 (32)	Miami-Dade	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement.
2020	Olden McKinnis	Advanced Roofing, Inc.	CACE-20-005571 (14)	Broward	Circuit	Closed	Alleged employment discrimination (not construction related); claim in excess of \$20,000	Confidential Settlement.
2020	Carmen Hernandez and Matthew Hernandez	Advanced Roofing, Inc and Darwing Silva	2020-005630-CA-01	Miami-Dade	Circuit	Closed	Automobile related (not construction related); claim in excess of \$30,000	Confidential Settlement.
2020	Reinaldo Carbonell Delgado	Juan Carlos Navarro and Advanced Roofing Inc.	2020-016780-CA-01	Miami-Dade	Circuit	Closed	Automobile related (not construction related); claim in excess of \$30,000	Confidential Settlement.
2020	Dave Bell	Kerlot Saintsurin and Advanced Roofing Inc.	50-2020-CA-005847-MB	Palm Beach	Circuit	Closed	Automobile related (not construction related); claim in excess of \$30,000	Confidential Settlement.
2020	Mauricio Solis	Advanced Roofing Inc.	2020-026387-CA-01	Miami-Dade	Circuit	Closed	Alleged retaliation (not construction related); claim in excess of \$30,000	Confidential Settlement.
2020	Universal Property Casualty Insurance Company	Advanced Roofing Inc, and Key Islander Condominium Association Inc.	2020-027854-SP-05	Miami-Dade	County	Closed	Minor Water Damages; claim in excess of \$5,000	Confidential Settlement.
2020	Advanced Roofing, Inc.	Travelers Casualty	CACE-20-015449 (14)	Palm Beach	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement.
2020	Joshua Robbins	Advanced Roofing, Inc.	CACE-20-014775 (08)	Broward	Circuit	Closed	Employment related (not construction related)	Dismissed
2021	Park Place Condo	Advanced Roofing, Inc.	CACE-21-002028	Broward	Circuit	Closed	Expansion joint leaks and repairs; claim in excess of \$50,000	Confidential Settlement.
2021	ADVANCED ROOFING, INC.	Advanced Roofing South, LLC	21-CA-000013-P	Monroe	Circuit	Open	Intellectual Property (not construction related)	Pending

Year	Plaintiff	Defendant	Case No.	County	Court	Status	Comments/Project	Outcome
2021	Everett and Mary Sprigler	Regatta at Vanderbilt Condo; T-Mobile; Betacom; Advanced Roofing, Inc.	11-2019-CA-004703-001	Collier	Circuit	Closed	Condo unit owner leak claim; claim in excess of \$30,000	Confidential Settlement.
2021	ADVANCED ROOFING, INC.	Concorde Group Holdings, LLC	CACE-21-005191 (12)	Broward	Circuit	Closed	Non-payment for work performed; claim in excess of \$30,000	Confidential Settlement.
2021	Prudes Wig Studio	Advanced Roofing, Inc.	2020-007824-CA-01 (05)	Miami-Dade	Circuit	Closed	Tenant propety damage; claim in excess of \$5,000	Confidential Settlement.
2021	Castle Key Insurance	Advanced Roofing, Inc.	CC21-3510	St. Johns	County	Closed	Unit owner property damage; claim in excess of \$5,000	Confidential Settlement
2022	ADVANCED ROOFING, INC.	Federal Insurance Company	2022-007776-CA-01	Miami-Dade	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Voluntary Dismissal
2022	ADVANCED ROOFING, INC.	Bandes Construction, Inc.	22-003605-CI (13)	Pinellas	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Confidential Settlement
2022	ADVANCED ROOFING, INC.	Tucker Outdoor Services, Inc.	COWE-22-003403 (82)	Broward	County	Closed	Breach of Contract Materials Supplier; claim in excess of \$25,000	Judgment in favor of Advanced Roofing's
2022	Jasmine Nicole Johnson Noel	Advanced Roofing, Inc.	CACE22012668	Broward	Circuit	Closed	Auto Negligence (not construction related); claim in excess of \$50,000	Confidential Settlement
2023	RENE OBREGON DIEPPA	Advanced Roofing, Inc.	23-CA-001718 Division I	Hillsborough	Circuit	Closed	Auto Negligence (not construction related); claim in excess of \$50,000	Voluntary Dismissal
2023	MISLEYDIS MARRERO CARRILLO	Advanced Roofing, Inc.	23-CA-001720 Division J	Hillsborough	Circuit	Closed	Auto Negligence (not construction related); claim in excess of \$50,000	Voluntary Dismissal
2023	MICHELLE BUITENMAN-ALICEA	Advanced Roofing, Inc.	CACE-23-010851	Broward	Circuit	Open	Slip and Fall (not construction related); claim in excess of \$50,000	Pending
2023	ADVANCED ROOFING, INC.	Investments SWK, LLC	CACE-23-018201	Broward	Circuit	Stayed	Non-payment for work performed; claim in excess of \$50,000	Pending/Stayed Investments SWK filed Bankruptcy
2023	Anthony and Barbara Scarpo	Advanced Roofing, Inc., et al.	23-CA-014275	Hillsborough	Circuit	Closed	Injunctive Relief (not construction related)	Dismissed
2023	Presidente Check Cashing	Advanced Roofing, Inc. et al.	23-011728-SP-23	Miami-Dade	Small Claims	Closed	Stop payment on a check (not construction related); claim in excess of \$1000	Confidential Settlement
2023	TF North Run, LLC	Advanced Roofing, Inc. et al.	23-027927-CA-01	Miami-Dade	Circuit	Open	Contract Dispute; claim in excess of \$50,000	Pending
2023	Guerami	Advanced Roofing, Inc. et al.	23-025797-CA-01	Miami-Dade	Circuit	Open	Condo unit owner leak claim; claim in excess of \$30,000	Confidential Settlement
2024	ADVANCED ROOFING, INC.	Harbourage Condominium	CACE-24-001012 (14)	Broward County	Circuit	Closed	Non-payment for work performed; claim in excess of \$50,000	Voluntary Dismissal
2024	Harbourage Condominium	Advanced Roofing, Inc.	CACE-24-005176 (14)	Broward County	Circuit	Closed	Contract Dispute; claim in excess of \$50,000	Confidential Settlement
2024	ADVANCED ROOFING, INC.	Jack Hudlow and Core Roofing	CACE-24-001249 (13)	Broward County	Circuit	Closed	Breach of Non-Solicitation (not construction related)	Voluntary Dismissal
2024	ADVANCED ROOFING, INC.	Pure Safety Group, Inc. d/b/a Guardian Fall Protection	16-2024-CA-004284-AXXX-MA	Duval County	Circuit	Open	Negligence (engineering disopute); claim in excess of \$50,000	Pending
2024	Universal Property a/s/o Kevin Wall	Advanced Roofing, Inc.	2024-CA-007240-O	Orange County	Circuit	Closed	Townhome owner leak claim; claim in excess of \$50,000	Confidential Settlement
2024	Victor Ghersi	Advanced Roofing, Inc.	502024CA008321XXXAMB	Palm Beach	Circuit	Closed	Condo unit owner leak claim; claim in excess of \$30,000	Confidential Settlement
2024	Magdalena Cuprys	Advanced Roofing, Inc.	2024-017186-CA-01	Miami-Dade	Circuit	Open	Slip and Fall (not construction related); claim in excess of \$10,000	Confidential Settlement
2024	Steven Balram	Advanced Roofing, Inc., et al.	COCE-24-032593	Broward County	County	Closed	Condo unit owner leak claim; claim in excess of \$30,000	Confidential Settlement
2024	Lissett and Mohammed Fathi individually and on behalf of their minor children	Advanced Roofing, Inc., et al.	2024-023006-CA-01	Miami-Dade	Circuit	Open	Negligence (premissis liability); claim in excess of \$50,000	Pending
2024	CDB Consulting Group	Advanced Roofing, Inc., et al.	2024-022493-CA-01	Miami-Dade	Circuit	Closed	Condo unit owner leak claim; claim in excess of \$50,000	Confidential Settlement
2024	William Dean Church	Advanced Roofing, Inc., et al.	CACE-24-015792	Broward County	Circuit	Closed	Condo unit owner leak claim; claim in excess of \$30,000	Confidential Settlement
2024	Luis Virgilio Amert	Advanced Roofing, Inc., et al.	2024-CA-007441	Palm Beach	Circuit	Open	Slip and Fall; claim in excess of \$50,000	Pending
2025	The Islander	Advanced Roofing, Inc.		Broward County	Circuit	Open	Condo unit owner leak claim; claim in excess of \$50,000	Pending
2025	ADVANCED ROOFING, INC.	Latour Enterprises, Inc.	CACE-25-005762	Broward County	Circuit	Open	Breach of Contract; claim in excess of \$50,000	Pending
2025	Kujwondae Butler	Advanced Roofing, Inc. et al.	CACE-25-002146	Broward County	Circuit	Open	Auto Negligence (not construction related); claim in excess of \$50,000	Pending
2025	The Islander, Inc.	Advanced Roofing, Inc.	CACE-25-001169	Broward County	Circuit	Open	Condo unit owner leak claim; claim in excess of \$50,000	Pending
2025	Daquane Simmons	Avenues Mall, LLC, et al.	2025-CA-000208	Duval	Circuit	Open	Slip and Fall; claim in excess of \$50,000	Pending
2025	Shelton O'Brian	Advanced Roofing, Inc.	25-014536	Broward	Circuit	Open	Slip and Fall; claim in excess of \$50,000	Pending
2025	Kenndy House Condominium	Advanced Roofing, Inc.	25-015958	Broward	Circuit	Open	Contract Dispute; claim in excess of \$50,000	Pending
2025	Kiya Herron	Advanced Roofing, Inc.	25-cv-62221-MD	Broward	Federal	Open	Employment Discrimination; claim in excess of \$20,000	Pending



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

MURPHY, PAUL JAMES

ADVANCED ROOFING, INC.
1950 NW 22ND ST
FORT LAUDERDALE FL 33311

LICENSE NUMBER: CMC1251466

EXPIRATION DATE: AUGUST 31, 2026

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

ISSUED: 11/13/2024

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.





LOCAL VENDOR PREFERENCE CERTIFICATION

SECTION 1 GENERAL TERM

LOCAL PREFERENCE

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

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

OR;

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

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

COMPARISON OF QUALIFICATIONS

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

SECTION 2 AFFIRMATION

LOCAL PREFERENCE CERTIFICATION:

Place a check mark here only if affirming bidder meets requirements above as a Local Pembroke Pines Vendor. In addition, the business must attach a current business tax receipt from the City of Pembroke Pines along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.

Place a check mark here only if affirming bidder meets requirements above as a Local Broward County Vendor. In addition, the business must attach a current business tax receipt from the Broward County or the city within Broward County where the business resides along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.

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

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

COMPANY NAME: Advanced Roofing, Inc dba Advanced Air Systems.

PRINTED NAME / AUTHORIZED SIGNATURE: 
Robert P. Kornahrens, President

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026

Business Name: ADVANCED ROOFING INC

Receipt #: 183-281157
Business Type: HEATING/AIRCONDITION CONTRACTR
(MECHANICAL CONTRACTOR)

Owner Name: PAUL J MURPHY/QUAL
Business Location: 1950 NW 22ND ST
FT LAUDERDALE
Business Phone: 9545226868

Business Opened: 12/12/2016
State/County/Cert/Reg: CMC1251466
Exemption Code:

Rooms **Seats** **Employees** **Machines** **Professionals**
350

For Vending Business Only						
Number of Machines:			Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
150.00	0.00	0.00	0.00	0.00	0.00	150.00

Receipt Fee 150.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

ADVANCED ROOFING INC
1950 NE 22 ST
FORT LAUDERDALE, FL 33311

Receipt # WWW-24-00294316
Paid 08/29/2025 150.00

2025 - 2026

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026

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Exemption Code:

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350

For Vending Business Only						
Number of Machines:			Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
150.00	0.00	0.00	0.00	0.00	0.00	150.00

Receipt # WWW-24-00294316
Paid 08/29/2025 150.00

Preliminary Construction Schedule

Description	Duration	Timeline
Pre-Construction & Submittals	3 Weeks	1/5/2026 - 1/23/2026
Procurement and Chiller Lead Time	12 Weeks	1/26/2026 - 4/17/2026
Demolition & Site Prep	1 week	4/20/2026 -5/24/2026
Concrete Pad Construction	1 Week	4/27/2026 - 5/1/2026
Mechanical Installation	1 week	5/4/2026 - 5/8/2026
Electrical Installation	1 Week	5/11/2026 - 5/15/2026
Startup, Testing & Balancing	1 week	5/18/2026 - 5/22/2026
Closeout	1 week	5/25/2026 - 5/29/2026

ADVANCED ROOFING, INC. Response

Pricing unsealed at Dec 9, 2025 2:31 PM

CONTACT INFORMATION

Company

ADVANCED ROOFING, INC.

Email

debbieg@advancedroofing.com

Contact

Debbie Giuliani

Address

1950 NW 22nd Street

Ft. Lauderdale, FL 33311

Phone

(954) 522-6868

Website

www.advancedroofing.com

Submission Date

Dec 9, 2025 10:53 AM (Eastern Time)

ADDENDA CONFIRMATION

Addendum #1

Confirmed Dec 8, 2025 12:47 PM by Debbie Giuliani

Addendum #2

Confirmed Dec 8, 2025 12:47 PM by Debbie Giuliani

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

[For Bidding Purposes Only Advanced Roofing Inc 2025 dba Adv Air without forms 4-11-2025 421540456.pdf](#)

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

Pass Fail

No

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

Pass Fail

Yes

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?*

Pass Fail

Yes

3. 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.

3.1. Reference Contact Information - Name of Firm, City, County or Agency*

Pass Fail

Orange County Utilities, Field Services Division

3.2. Reference Contact Information - Reference's Business Address*

Pass Fail

9150 Curry Ford Road, Orlando, FL 32825

3.3. Reference Contact Information - Reference's Contact Name & Title*

Pass Fail

Terra L. Reffitt & Chief Inspector

3.4. Reference Contact Information - Reference's E-mail Address*

Pass Fail

terra.reffitt@ocfl.net

3.5. Reference Contact Information - Reference's Phone Number*

Pass Fail

407-254-9796 / 407-947-9802

3.6. Project Information - Was your firm the prime contractor for the listed project?*

Pass Fail

Yes

3.7. Project Information - Name of Contactor Performing the Work*

Pass Fail

Advanced Roofing Inc dba Advanced Air Systems

3.8. Project Information - Name and location of the project*

Pass Fail

- Eastern Regional Water Supply Facility Laboratory Building Air Handlers and

Chillers Emergency Replacement & 9150 Curry Ford Road, Orlando, Florida 32825.

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

Pass Fail

Removal and replacement of air handling units (AHUs) and chillers at the Eastern Regional Water Supply Facility. This included removing five air-handling units, chilled water circulation pumps, heat recovery loop circulation pumps, two 130-ton nominal capacity air-cooled chillers, and associated piping. New installations included updated AHUs, glycol-water circulation pumps, chilled water circulation pumps, AHU controls, and electrical services. The project also encompassed system testing, adjusting, and balancing, along with all necessary cutting, patching, and surface restoration.

3.10. Project Information – Project Duration* 16 Months	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
3.11. Project Information – Completion (Anticipated) Date* July 4, 2023	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
3.12. Project Information – Size of Project* 42,000 s/f	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
3.13. Project Information – Cost of Project* \$2,053,258.32	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4. REFERENCE # 2	
4.1. Reference Contact Information – Name of Firm, City, County or Agency* Riverside Hotel	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.2. Reference Contact Information – Reference's Business Address* 600 Sagamore Road, Fort Lauderdale, FL 33301	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.3. Reference Contact Information – Reference's Contact Name & Title* Michael Weymouth & President	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.4. Reference Contact Information – Reference's E-mail Address* mike@lasolas.co	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.5. Reference Contact Information – Reference's Phone Number* 954-444-3130	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.6. Project Information – Was your firm the prime contractor for the listed project?* Yes	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.7. Project Information – Name of Contactor Performing the Work* Advanced Roofing, Inc. dba Advanced Air Systems	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.8. Project Information – Name and location of the project* Riverside Hotel HVAC Upgrades & 620 E Las Olas Blvd, Fort Lauderdale, FL 33301	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for* Replacement of two 110-ton chillers with upgraded systems designed to enhance cooling efficiency. The scope included removal of old units, installation of new chillers, reconnections of all associated piping and electrical systems, and commissioning of the updated system	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.10. Project Information – Project Duration* 10 Months	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.11. Project Information – Completion (Anticipated) Date* November 8, 2024	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.12. Project Information – Size of Project* 32,000 Sqft.	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
4.13. Project Information – Cost of Project* \$821,900.00	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5. REFERENCE # 3	
5.1. Reference Contact Information – Name of Firm, City, County or Agency*	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail

5.2. Reference Contact Information – Reference's Business Address* 600 SE 3rd Ave, Fort Lauderdale, FL 33301	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.3. Reference Contact Information – Reference's Contact Name & Title* Steve Starke & Project Manager	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.4. Reference Contact Information – Reference's E-mail Address* Sstarke-pmor@browardschools.com	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.5. Reference Contact Information – Reference's Phone Number* 954-275-8306	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.6. Project Information – Was your firm the prime contractor for the listed project?* Yes	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.7. Project Information – Name of Contactor Performing the Work* Advanced Roofing, Inc. dba Advanced Air Systems	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.8. Project Information – Name and location of the project* McNab Elementary School – Smart Program Renovations & 1350 SE 9th Ave, Pompano Beach, FL 33060	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for* Replacement of two water cooled chillers, six air handling units, forty-seven fan coil units, one packaged unit, five pumps, electrical, building controls and structural reinforcement.	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.10. Project Information – Project Duration* 24 Months	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.11. Project Information – Completion (Anticipated) Date* November, 2023	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.12. Project Information – Size of Project* 58,000 Sqft.	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5.13. Project Information – Cost of Project* \$700,000.00	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6. REFERENCE # 4	
6.1. Reference Contact Information – Name of Firm, City, County or Agency n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.2. Reference Contact Information – Reference's Business Address n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.3. Reference Contact Information – Reference's Contact Name & Title n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.4. Reference Contact Information – Reference's E-mail Address n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.5. Reference Contact Information – Reference's Phone Number n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.6. Project Information – Was your firm the prime contractor for the listed project?* No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.7. Project Information – Name of Contactor Performing the Work n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail


6.8. Project Information – Name and location of the project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.10. Project Information – Project Duration n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.11. Project Information – Completion (Anticipated) Date n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.12. Project Information – Size of Project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
6.13. Project Information – Cost of Project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7. REFERENCE # 5	
7.1. Reference Contact Information – Name of Firm, City, County or Agency n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.2. Reference Contact Information – Reference's Business Address n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.3. Reference Contact Information – Reference's Contact Name & Title n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.4. Reference Contact Information – Reference's E-mail Address n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.5. Reference Contact Information – Reference's Phone Number n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.6. Project Information – Was your firm the prime contractor for the listed project? No	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.7. Project Information – Name of Contactor Performing the Work n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.8. Project Information – Name and location of the project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.9. Project Information – Nature of the firm's responsibility on the project and work for which staff was responsible for n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.10. Project Information – Project Duration n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.11. Project Information – Completion (Anticipated) Date n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.12. Project Information – Size of Project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
7.13. Project Information – Cost of Project n/a	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail


8. PROJECT DOCUMENTS

8.1. 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 \(1\).xlsx](#)

 [Proposers Background Information Form \(1\)_\(3\).xlsx](#)

 [firms_Experience.pdf](#)

 [litigation.pdf](#)

8.2. PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)

Pass Fail

1. In the event that your total cumulative base proposal amount exceeds \$200,000, a Proposal Security shall be in an amount not less than of 5% of the total cumulative base amount proposed.
2. Therefore, proposal should be accompanied by a certified or cashier's check or by a Bid Bond made payable to the City of Pembroke Pines on an approved form, duly executed by the Proposer as principal and having as surety thereon a surety company acceptable to CITY and authorized to write such Bond under the laws of the State of Florida.
3. Contingency is not to be counted in the total amount the proposal security is based on.
4. Proposers must submit a scanned copy of their bid security (bid bond form or cashier's check) with their bid submittal through OpenGov.
5. Proposers should also submit their original bid security (bid bond form or cashier's check) at time of the bid due date, or they may be deemed as non-responsive.
6. The original Bid Bond or Cashier's Check should be in a sealed envelope, plainly marked "**BID SECURITY - RE-25-07 New Chiller for Studio 18** and sent to the City of Pembroke Pines, City Clerk's Office, 4th Floor, 601 City Center Way, Pembroke Pines, Florida, 33025.
7. Please see [SPECIAL TERMS & CONDITIONS](#) of this document for additional information.

 [Bid_Bond.pdf](#)

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

9.1. 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](#)

 [Public_Entity_Crimes.pdf](#)

9.2. 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.

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

Pass Fail

No

9.4. Did you select option B3 above?*

Pass Fail


No


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

10.1. 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.pdf](#)

10.2. 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.

10.3. Did you select option D2 above?*

Pass Fail

No

11. DRUG-FREE WORKPLACE CERTIFICATION

11.1. VENDOR DRUG FREE WORKPLACE CERTIFICATION FORM*

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](#)

 [Drug_Free.pdf](#)

11.2. Drug-Free Status*

Pass Fail

Complies fully.

12. 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).

12.1. 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.pdf](#)

12.2. 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.pdf](#)

12.3. 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](#)

[Everify.pdf](#)

12.4. 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.pdf](#)

13. VENDOR REGISTRATION

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

Pass Fail

- The City of Pembroke Pines utilizes OpenGov as its e-Procurement platform for 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

13.2. 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](#)

13.3. 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](#)

[W9.pdf](#)

14. OPTIONAL DOCUMENTATION

14.1. 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

14.2. 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

14.3. 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

14.4. 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

14.5. PROFESSIONAL LICENSES

Pass Fail

1. If applicable, please upload any professional licenses that may be required to perform the services outlined in the solicitation. The following licensing requirements shall apply when the applicable Florida statute mandates specific licensing for Contractors engaged in the type of work covered by this solicitation.
 - A. State of Florida, Department of Professional Regulation, Construction Industries Licensing Board and licensed by other federal, state, regional, county or municipal agencies having jurisdiction over the specified construction work.
 - B. Said licenses shall be in the Firm's name as it appears on the OpenGov registration and as appropriately registered with the applicable licensing entity. Proposer shall supply appropriate license numbers, with expiration dates, as part of their bid. Failure to hold and provide proof of proper licensing, certification and registration may be grounds for rejection of the bid.
 - C. Subcontractors contracted by the Prime Contractor shall be licensed in their respective fields to obtain construction permits as necessary. Said licenses must be in the name of the subcontractor.

 [Paul Murphy - State Mechanical License.pdf](#)

15. VENDOR CLASSIFICATION

15.1. Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?*

Pass Fail

1. The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:
 1. "**Local Pembroke Pines Vendor**" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines, **OR**;
 2. "**Local Broward County Vendor**" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.

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

Yes

15.1.1. Please indicate your Local Vendor Status*


Pass Fail


Local Broward County Vendor (LBCV)

15.1.2. Local Vendor Preference Certification*

Pass Fail

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


 [Local_Vendor_Preference_Certification.pdf](#)

 [Local_Vendor_Preference.pdf](#)

15.1.3. Local Business Tax Receipts*

Pass Fail

1. If claiming Local Vendor Preference, please upload any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.

 [Broward_County_137934_BTR_2025-2026.pdf](#)

15.2. 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

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

Pass Fail

No

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

Pass Fail

No

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

Pass Fail

No

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

Pass Fail

No

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

Pass Fail

No

15.8. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?*

Pass Fail

No

15.9. Does your firm have a Vendor Classification that was not listed above?*

Pass Fail

No

16. Supporting Documentation

Documents requested per Section 4.3 of the scope of work.

16.1. Please upload Schedule of Values and Mechanical Schedule*

Pass Fail

 [Pembroke_Pines_-_Preliminary_Schedule.pdf](#)

17. Post Award Requirements

This is an optional section per section 4.4 of the scope of work.

17.1. Optional - Please upload the requested documents below if available at time of bid.

If your company is awarded, the following documents will be required for processing and contract compliance.

- Manufacturer spec sheets
- Chilled/condenser water pump motor submittal
- System peak load profile/chiller manufacturer spec sheet
- AHRI certificate

No response submitted

PRICE TABLES

Primary Response

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N...
1-1	Chiller Cost	1	Lump Sum	\$142,986.00	\$142,986.00	
1-2	Installation cost	1	Lump Sum	\$69,939.00	\$69,939.00	
1-3	Materials Costs	1	Lump Sum	\$60,002.00	\$60,002.00	
1-4	Concrete Slab Costs	1	Lump Sum	\$8,789.00	\$8,789.00	
1-5	Additional Considerations	1	Lump Sum	\$18,364.00	\$18,364.00	
Total					\$300,080.00	

Alternate Response

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N...
1-1	Chiller Cost	1	Lump Sum	\$0.00	\$0.00	n/a
1-2	Installation cost	1	Lump Sum	\$0.00	\$0.00	n/a
1-3	Materials Costs	1	Lump Sum	\$0.00	\$0.00	n/a
1-4	Concrete Slab Costs	1	Lump Sum	\$0.00	\$0.00	n/a
1-5	Additional Considerations	1	Lump Sum	\$0.00	\$0.00	n/a
Total					\$0.00	

Payment & Performance Bond

Line Item	Description	Unit of Measure	Percentage
3-1	Cost to provide a Payment & Performance Bond for the project, in the form of a percent	Percent	1.5%