



City of Pembroke Pines
Procurement
Mark Gomes, Procurement Director
601 City Center Way, Pembroke Pines, FL 33025

EVALUATION TABULATION

IFB No. TS-25-14

Fiber Installation

RESPONSE DEADLINE: September 9, 2025 at 2:00 pm

VENDOR TOTALS

Vendor	Total
Unitec Inc.	\$106,942.61
MIAMI BUSINESS TELEPHONE CORP	\$146,841.44
Allstate Power	\$168,117.00

				Unitec Inc.	MIAMI BUSINESS TELEPHONE CORP	Allstate Power
Line Item	Description	Qty	UM	Total	Total	Total
1-1	Lump Sum Cost for Fiber Installation - Fire Station 79 to Soccer Park	1	Lump Sum	\$50,862.99	\$74,477.02	\$82,823.00
	Total			\$50,862.99	\$74,477.02	\$82,823.00

				Unitec Inc.	MIAMI BUSINESS TELEPHONE CORP	Allstate Power
Line Item	Description	Qty	UM	Total	Total	Total
2-1	Lump Sum Cost for Fiber Installation - Fire Station 89 to Pines Art Center	1	Lump Sum	\$56,079.62	\$72,364.42	\$85,294.00
	Total			\$56,079.62	\$72,364.42	\$85,294.00

Question	Unitec Inc.	MIAMI BUSINESS TELEPHONE CORP	Allstate Power
CONFIRMATION TO BIND			
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	Confirmed	Confirmed
CERTIFICATION OF INSURANCE COMPLIANCE AND INTENT TO PROCURE REQUIRED COVERAGE			
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	Confirmed	Confirmed
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	Yes	Yes
Do you currently carry insurance policies that meet or exceed the minimum requirements outlined in the INSURANCE REQUIREMENTS section of this solicitation?	Yes	Yes	Yes
Please upload your current certificate(s) of insurance that demonstrate compliance with the insurance requirements outlined in this solicitation.	Included	Included	Included
Please upload documentation showing that you have obtained a letter from your insurance broker or carrier, such as a Letter of Intent to Insure, Evidence of Insurability, or a Conditional Certificate of Insurance.			
Please upload your current certificate(s) of insurance.			
Do you believe you are exempt from one or more insurance requirements (e.g., Workers' Compensation)?	No	No	No
Please upload written documentation requesting an exemption on your company letterhead, subject to City approval.			
Do you plan on using subcontractors for this project?	No	Yes	Yes
Do you acknowledge that all subcontractors must also carry the same insurance or be covered under your policy, and that proof of such coverage must be provided to the City?		Yes	Yes
PROJECT DOCUMENTS			
PROPOSERS BACKGROUND INFORMATION FORM	Included	Included	Included
SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)			
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.	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.	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.
Public Entity Crimes Status	A) No convictions.	A) No convictions.	A) No convictions.
Did you select option B1 or B2 above?	No	No	No
Please upload a copy of the final order issued by the hearing officer of the State of Florida, Division of Administrative Hearings.			
Did you select option B3 above?	No	No	No
Please describe any action taken by or pending with the Department of General Services.			
EQUAL BENEFITS CERTIFICATION FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES			

Question	Unitec Inc.	MIAMI BUSINESS TELEPHONE CORP	Allstate Power
EQUAL BENEFITS CERTIFICATION FORM			
Equal Benefits Status	A) Contractor currently complies.	A) Contractor currently complies.	A) Contractor currently complies.
Did you select option D2 above?	No	No	No
Please upload a notarized affidavit detailing the reasonable efforts made to provide benefits to employees' Domestic Partners or spouses, along with the amount of the cash equivalent provided.			
DRUG-FREE WORKPLACE CERTIFICATION			
VENDOR DRUG FREE WORKPLACE CERTIFICATION FORM			
Drug-Free Status	Complies fully.	Complies fully.	Complies fully.
STANDARD DOCUMENTS			
NON-COLLUSIVE AFFIDAVIT	Included	Included	Included
SCRUTINIZED COMPANY CERTIFICATION	Included	Not Included	Included
E-VERIFY SYSTEM CERTIFICATION	Included	Included	Included
HUMAN TRAFFICKING AFFIDAVIT	Included	Included	Included
VENDOR REGISTRATION	Included	Included	Included
Do you currently have a City of Pembroke Pines Vendor Number registered in the PaymentWorks System?	No	No	No
What is your Vendor Number?			
VENDOR INFORMATION FORM	Included	Included	Included
FORM W-9 (REVISED MARCH 2024)	Included	Included	Included
OPTIONAL DOCUMENTATION			
TRADE SECRETS			
FINANCIAL STATEMENTS			
ALTERNATIVES			
ADDITIONAL INFORMATION	Annual Report State Registration	State Registration	
PROFESSIONAL LICENSES	Underground Utility & Excavation License General Contractor License Specialty Electrical Contractor License Certified Fiber Optic Technician Certified Fiber Optic Specialist in Testing Course Certified Fiber Optic Specialist in Splicing Course Certified and Troubleshooting Premises Cabling Systems Act II Certified and Troubleshooting Premises Cabling Systems Act I Recertification Structured Cabling Infrastructure Design ACT III Certificate HDBaseT Installer Expert Design Principles and Installation Practices course Osha Certifications 3M Fire Protection	Specialty Electrical Contractor License	

Question	Unitec Inc.	MIAMI BUSINESS TELEPHONE CORP	Allstate Power
VENDOR CLASSIFICATION			
Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?	Yes	No	No
Please indicate your Local Vendor Status	Local Broward County Vendor (LBCV)	N/A	N/A
Local Vendor Preference Certification	Meet Requirement	N/A	N/A
Local Business Tax Receipts	LBTR - Broward - 09-30-26 LBTR - Miami Dade - 09-30-26	N/A	N/A
Is your firm a Veteran Owned Small Business (VOSB)?	No	No	No
Upload the "Determination Letter" from the United States Department of Veteran Affairs Center notifying the business that they have been approved as a Veteran Owned Small Business (VOSB)	N/A	N/A	N/A
Upload Veteran Owned Small Business Certification(s) from any relevant agency(ies)	N/A	N/A	N/A
Is your firm a Minority-Owned Business Enterprise (MBE)?	Yes	No	Yes
Please indicate the classification of your Minority-Owned Business Enterprise (MBE)	Hispanic-American MBE	N/A	Hispanic-American MBE
MBE Certification Documentation	MBE Certification	N/A	MBE Certificate
Is your firm a Woman-Owned Business Enterprise (WBE)?	Yes	No	No
WMBE Certification Documentation	WBE Certification	N/A	N/A
Is your firm a HubZone Business / Labor Surplus Area Firm?	No	No	No
HubZone Business / Labor Surplus Area Firm Certification Documentation	N/A	N/A	N/A
Is your firm a Broward County Small Business Enterprise (SBE)?	No	No	No
SBE Certification Documentation	N/A	N/A	N/A
Is your firm a Broward County Business Enterprise (CBE)?	No	No	No
CBE Certification Documentation	N/A	N/A	N/A
Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?	No	No	No
DBE Certification Documentation	N/A	N/A	N/A
Does your firm have a Vendor Classification that was not listed above?	Yes	Yes	No
Other Vendor Classification Certification Documentation	N/A	CSBE Certificate	N/A
If yes, please provide your Unique Entity ID (UEI)	N/A	N/A	N/A
What is the expiration date of your current SAM.gov registration? (MM/DD/YYYY)	N/A	N/A	N/A
Proof of Registration Upload	N/A	N/A	N/A
If yes, please provide an explanation.	N/A	N/A	N/A
If yes, please upload any relevant documentation, if applicable.	N/A	N/A	N/A