



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

EVALUATION TABULATION
IFB No. PSPW-25-11
Roof Replacement of City Wide Roofs
RESPONSE DEADLINE: September 30, 2025 at 2:00 pm

SELECTED VENDOR TOTALS

Vendor	Total
Paletz Roofing and Inspections Inc.	\$509,940.00
Grace Roofing & Sheet Metal Enterprise	\$553,683.60
EARL W. JOHNSTON ROOFING, LLC	\$641,948.52
Pinnacle A. Pinnacle *	\$648,092.38
CMM Roofing, Inc.	\$695,688.00
Bowhead Roofing	\$710,000.00
Atlas Apex Roofing, LLC	\$870,000.00
Nailed it Roofing Solutions, LLC	\$944,000.00
LaPorta Contracting *	\$138,537.00

* = Incomplete Bid

EVALUATION TABULATION

IFB No. PSPW-25-11 Roof Replacement of City Wide Roofs

LOCATIONS (Table 1 of 3)

Total Cost P&P Bond Included	Paletz Roofing and Inspections Inc.			Grace Roofing & Sheet Metal Enterprise			EARL W. JOHNSTON ROOFING, LLC		
Items	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost
Rose G. Price Park Total	\$ 111,500.00	\$ 2,230.00	\$ 113,730.00	\$ 134,798.30	\$ 3,369.96	\$ 138,168.26	\$ 154,259.48	\$ 7,712.97	\$ 161,972.45
R&R Village Total	\$ 29,290.00	\$ 585.80	\$ 29,875.80	\$ 35,873.34	\$ 896.83	\$ 36,770.17	\$ 37,112.92	\$ 1,855.65	\$ 38,968.57
West Campus Building I Total	\$ 132,350.00	\$ 2,647.00	\$ 134,997.00	\$ 129,337.32	\$ 3,233.43	\$ 132,570.75	\$ 160,794.84	\$ 8,039.74	\$ 168,834.58
Central Campus Building Y Total	\$ 129,250.00	\$ 2,585.00	\$ 131,835.00	\$ 129,337.32	\$ 3,233.43	\$ 132,570.75	\$ 157,835.05	\$ 7,891.75	\$ 165,726.80
FSU Building C Total	\$ 107,550.00	\$ 2,151.00	\$ 109,701.00	\$ 124,337.32	\$ 3,108.43	\$ 127,445.75	\$ 131,946.23	\$ 6,597.31	\$ 138,543.54
Total	\$ 509,940.00	\$ 10,198.80	\$ 520,138.80	\$ 553,683.60	\$ 13,842.09	\$ 567,525.69	\$ 641,948.52	\$ 32,097.43	\$ 674,045.95

LOCATIONS (Table 2 of 3)

Total Cost P&P Bond Included	Pinnacle A. Pinnacle			CMM Roofing, Inc.			Bowhead Roofing		
Items	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost
Rose G. Price Park Total	\$ 109,306.27	\$ 5,465.31	\$ 114,771.58	\$ 170,340.00	\$ 5,110.20	\$ 175,450.20	\$ 153,900.00	\$ 2,308.50	\$ 156,208.50
R&R Village Total	\$ -	\$ -	\$ -	\$ 28,000.00	\$ 840.00	\$ 28,840.00	\$ 37,050.00	\$ 555.75	\$ 37,605.75
West Campus Building I Total	\$ 200,061.04	\$ 10,003.05	\$ 210,064.09	\$ 177,588.00	\$ 5,327.64	\$ 182,915.64	\$ 184,350.00	\$ 2,765.25	\$ 187,115.25
Central Campus Building Y Total	\$ 203,288.76	\$ 10,164.44	\$ 213,453.20	\$ 177,588.00	\$ 5,327.64	\$ 182,915.64	\$ 185,332.00	\$ 2,779.98	\$ 188,111.98
FSU Building C Total	\$ 135,436.31	\$ 6,771.82	\$ 142,208.13	\$ 142,172.00	\$ 4,265.16	\$ 146,437.16	\$ 149,368.00	\$ 2,240.52	\$ 151,608.52
Total	\$ 648,092.38	\$ 32,404.62	\$ 680,497.00	\$ 695,688.00	\$ 20,870.64	\$ 716,558.64	\$ 710,000.00	\$ 10,650.00	\$ 720,650.00

LOCATIONS (Table 3 of 3)

Total Cost P&P Bond Included	Nailed it Roofing Solutions, LLC			Atlas Apex Roofing, LLC			LaPorta Contracting		
Items	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost	Cost Without P&P Bonds	Cost for P&P Bond	Total Cost
Rose G. Price Park Total	\$ 390,000.00	\$ 11,700.00	\$ 401,700.00	\$ 58,000.00	\$ 870.00	\$ 58,870.00	\$ 138,537.00	\$ 3,463.43	\$ 142,000.43
R&R Village Total	\$ 29,000.00	\$ 870.00	\$ 29,870.00	\$ 220,000.00	\$ 3,300.00	\$ 223,300.00	\$ -		\$ -
West Campus Building I Total	\$ 194,000.00	\$ 5,820.00	\$ 199,820.00	\$ 213,000.00	\$ 3,195.00	\$ 216,195.00			\$ -
Central Campus Building Y Total	\$ 194,000.00	\$ 5,820.00	\$ 199,820.00	\$ 213,000.00	\$ 3,195.00	\$ 216,195.00			\$ -
FSU Building C Total	\$ 137,000.00	\$ 4,110.00	\$ 141,110.00	\$ 166,000.00	\$ 2,490.00	\$ 168,490.00			\$ -
Total	\$ 944,000.00	\$ 28,320.00	\$ 972,320.00	\$ 870,000.00	\$ 13,050.00	\$ 883,050.00	\$ 138,537.00	\$ 3,463.43	\$ 142,000.43

EVALUATION TABULATION

Invitation For Bid - Roof Replacement of City Wide Roofs

EVALUATION TABULATION
IFB No. PSPW-25-11 Roof Replacement of City Wide Roofs

PAYMENT & PERFORMANCE BOND (Table 1 of 3)

Payment & Performance Bond			Paletz Roofing and Inspections Inc.		Grace Roofing & Sheet Metal Enterprise		EARL W. JOHNSTON ROOFING, LLC	
Line Item	Description	Unit of Measure	Percentage	Vendor Notes	Percentage	Vendor Notes	Percentage	Vendor Notes
1	Cost to provide a payment & performance bond for this project, in the form of a percent	Percent	2%		2.50%	Grace Roofing & Sheet Metal Enterprise	5%	

PAYMENT & PERFORMANCE BOND (Table 2 of 3)

Payment & Performance Bond			Pinnacle A. Pinnacle		CMM Roofing, Inc.		Bowhead Roofing	
Line Item	Description	Unit of Measure	Percentage	Vendor Notes	Percentage	Vendor Notes	Percentage	Vendor Notes
1	Cost to provide a payment & performance bond for this project, in the form of a percent	Percent	5%		3%		1.50%	

PAYMENT & PERFORMANCE BOND (Table 3 of 3)

Payment & Performance Bond			Atlas Apex Roofing, LLC		Nailed it Roofing Solutions, LLC		LaPorta Contracting	
Line Item	Description	Unit of Measure	Percentage	Vendor Notes	Percentage	Vendor Notes	Percentage	Vendor Notes
1	Cost to provide a payment & performance bond for this project, in the form of a percent	Percent	1.50%		3%		2.50%	

EVALUATION TABULATION

IFB No. PSPW-25-11 Roof Replacement of City Wide Roofs

ADDITIONAL WORK (Table 1 of 3)

Additional Work				Paletz Roofing and Inspections Inc.		Grace Roofing & Sheet Metal Enterprise		EARL W. JOHNSTON ROOFING, LLC	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	Steel Deck Repair	1	Per Square Foot	\$25.00	\$25.00	\$6.00	\$6.00	\$30.00	\$30.00
2	5/8 Plywood Replacement	1	Per Square Foot	\$4.50	\$4.50	\$3.60	\$3.60	\$5.00	\$5.00
3	3/8 Finished Plywood Soffit	1	Per Square Foot	\$25.00	\$25.00	\$3.00	\$3.00	\$15.00	\$15.00
4	Light Weight Repair	1	Per Square Foot	\$20.00	\$20.00	\$1.00	\$1.00	\$35.00	\$35.00
5	Stucco Repair	1	Per Square Foot	\$30.00	\$30.00	\$4.00	\$4.00	\$0.00	\$0.00
6	2x4	1	Per Linear Foot	\$6.00	\$6.00	\$4.00	\$4.00	\$6.50	\$6.50
7	2x6	1	Per Linear Foot	\$12.00	\$12.00	\$5.50	\$5.50	\$7.35	\$7.35
8	2x8	1	Per Linear Foot	\$12.00	\$12.00	\$7.00	\$7.00	\$8.95	\$8.95
9	2x10	1	Per Linear Foot	\$14.00	\$14.00	\$8.00	\$8.00	\$9.50	\$9.50
10	2x12	1	Per Linear Foot	\$16.00	\$16.00	\$10.00	\$10.00	\$10.00	\$10.00

ADDITIONAL WORK (Table 2 of 3)

Additional Work				Pinnacle A. Pinnacle		CMM Roofing, Inc.		Bowhead Roofing	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	Steel Deck Repair	1	Per Square Foot	\$6.00	\$6.00	\$12.00	\$12.00	\$20.00	\$20.00
2	5/8 Plywood Replacement	1	Per Square Foot	\$18.00	\$18.00	\$6.00	\$6.00	\$8.00	\$8.00
3	3/8 Finished Plywood Soffit	1	Per Square Foot	\$13.00	\$13.00	\$14.00	\$14.00	\$10.00	\$10.00
4	Light Weight Repair	1	Per Square Foot	\$12.00	\$12.00	\$18.00	\$18.00	\$15.00	\$15.00
5	Stucco Repair	1	Per Square Foot	\$8.00	\$8.00	\$14.00	\$14.00	\$20.00	\$20.00
6	2x4	1	Per Linear Foot	\$10.00	\$10.00	\$6.00	\$6.00	\$8.00	\$8.00
7	2x6	1	Per Linear Foot	\$10.00	\$10.00	\$6.50	\$6.50	\$9.00	\$9.00
8	2x8	1	Per Linear Foot	\$10.00	\$10.00	\$7.00	\$7.00	\$10.00	\$10.00
9	2x10	1	Per Linear Foot	\$10.00	\$10.00	\$8.00	\$8.00	\$11.00	\$11.00
10	2x12	1	Per Linear Foot	\$15.00	\$15.00	\$9.00	\$9.00	\$12.00	\$12.00

EVALUATION TABULATION

Invitation For Bid - Roof Replacement of City Wide Roofs

EVALUATION TABULATION

IFB No. PSPW-25-11 Roof Replacement of City Wide Roofs

ADDITIONAL WORK (Table 3 of 3)

Additional Work				Nailed it Roofing Solutions, LLC		Atlas Apex Roofing, LLC		LaPorta Contracting	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	Steel Deck Repair	1	Per Square Foot	\$28.00	\$28.00	\$18.00	\$18.00	\$0.00	\$0.00
2	5/8 Plywood Replacement	1	Per Square Foot	\$10.00	\$10.00	\$9.00	\$9.00	\$3.00	\$3.00
3	3/8 Finished Plywood Soffit	1	Per Square Foot	\$15.00	\$15.00	\$6.00	\$6.00	\$5.25	\$5.25
4	Light Weight Repair	1	Per Square Foot	\$0.00	\$0.00	\$8.00	\$8.00	\$0.00	\$0.00
5	Stucco Repair	1	Per Square Foot	\$0.00	\$0.00	\$25.00	\$25.00	\$28.00	\$28.00
6	2x4	1	Per Linear Foot	\$2.00	\$2.00	\$2.00	\$2.00	\$3.00	\$3.00
7	2x6	1	Per Linear Foot	\$3.00	\$3.00	\$5.00	\$5.00	\$3.50	\$3.50
8	2x8	1	Per Linear Foot	\$4.00	\$4.00	\$7.00	\$7.00	\$4.00	\$4.00
9	2x10	1	Per Linear Foot	\$6.00	\$6.00	\$10.00	\$10.00	\$6.95	\$6.95
10	2x12	1	Per Linear Foot	\$12.00	\$12.00	\$14.75	\$14.75	\$9.50	\$9.50

EVALUATION TABULATION

Invitation For Bid - Roof Replacement of City Wide Roofs

R&R VILLAGE (OPTIONAL ADDITIONAL WORK) (Table 1 of 3)

R&R Village (Optional Additional Work)				Paletz Roofing and Inspections Inc.		Grace Roofing & Sheet Metal Enterprise		EARL W. JOHNSTON ROOFING, LLC	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	1/2 Plywood overlay over existing wood deck	1	Per Square Foot	\$6,100.00	\$6,100.00	\$3.00	\$3.00	\$287.00	\$287.00

R&R VILLAGE (OPTIONAL ADDITIONAL WORK) (Table 2 of 3)

R&R Village (Optional Additional Work)				Pinnacle A. Pinnacle		CMM Roofing, Inc.		Bowhead Roofing	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	1/2 Plywood overlay over existing wood deck	1	Per Square Foot	\$0.00	\$0.00	\$7.00	\$7.00	\$6.50	\$6.50

R&R VILLAGE (OPTIONAL ADDITIONAL WORK) (Table 3 of 3)

R&R Village (Optional Additional Work)				Nailed it Roofing Solutions, LLC		Atlas Apex Roofing, LLC		LaPorta Contracting	
Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Unit Cost	Total	Unit Cost	Total
1	1/2 Plywood overlay over existing wood deck	1	Per Square Foot	\$7.00	\$7.00	\$6.50	\$6.50	\$2.81	\$2.81

Question	LaPorta Contracting	Paletz Roofing and Inspections Inc.	Grace Roofing & Sheet Metal Enterprise
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.			
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.	Included	Included	Included
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	No	No
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?			
PROJECT DOCUMENTS			
PROPOSERS BACKGROUND INFORMATION FORM	Included	Included	Included
PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)	N/A	Included	Included(Check)
SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)			
SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM	Included	Included	Included
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			
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.			

Question	LaPorta Contracting	Paletz Roofing and Inspections Inc.	Grace Roofing & Sheet Metal Enterprise
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	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	Yes
What is your Vendor Number?			6445
VENDOR INFORMATION FORM	Included	Included	Included
FORM W-9 (REVISED MARCH 2024)	Included	Included	Included
OPTIONAL DOCUMENTATION			
TRADE SECRETS			
FINANCIAL STATEMENTS			
ALTERNATIVES			
ADDITIONAL INFORMATION	SunBiz		State Registration Litigations
PROFESSIONAL LICENSES	General Contractor License	Roofing Contractor License	General Contractor License Roofing Contractor License
VENDOR CLASSIFICATION			
Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?	Yes	Yes	No
Please indicate your Local Vendor Status	Local Broward County Vendor (LBCV)	Local Broward County Vendor (LBCV)	N/A
Local Vendor Preference Certification	Meet Requirements	Meet Requirements	N/A
Local Business Tax Receipts	LBTR-Broward-09-30-25	LBTR-Broward-09-30-25	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)?	No	No	Yes
Please indicate the classification of your Minority-Owned Business Enterprise (MBE)	N/A	N/A	African-American MBE
MBE Certification Documentation	N/A	N/A	MBE Certification
Is your firm a Woman-Owned Business Enterprise (WBE)?	No	Yes	Yes
WMBE Certification Documentation	N/A	WBENC Certification	WBE Certification
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	Yes
DBE Certification Documentation	N/A	N/A	DBE Certification
Does your firm have a Vendor Classification that was not listed above?	No	No	No
Other Vendor Classification Certification Documentation	N/A	N/A	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

Question	EARL W. JOHNSTON ROOFING, LLC	Pinnacle A. Pinnacle	CMM Roofing, Inc.
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	No	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.			
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.	Included	Included	Included
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?	Yes	No	No
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		
PROJECT DOCUMENTS			
PROPOSERS BACKGROUND INFORMATION FORM	Included	Included	Included
PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)	Included	Included	Included
SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)			
SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM	Included	Included	Included
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			
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.			

Question	EARL W. JOHNSTON ROOFING, LLC	Pinnacle A. Pinnacle	CMM Roofing, Inc.
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	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		SunBiz	
PROFESSIONAL LICENSES			Roofing Contractor License
VENDOR CLASSIFICATION			
Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?	No	No	No
Please indicate your Local Vendor Status	N/A	N/A	N/A
Local Vendor Preference Certification	N/A	N/A	N/A
Local Business Tax Receipts	N/A	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)?	No	No	No
Please indicate the classification of your Minority-Owned Business Enterprise (MBE)	N/A	N/A	N/A
MBE Certification Documentation	N/A	N/A	N/A
Is your firm a Woman-Owned Business Enterprise (WBE)?	No	No	No
WMBE Certification Documentation	N/A	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?	No	No	No
Other Vendor Classification Certification Documentation	N/A	N/A	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

Question	Bowhead Roofing	Atlas Apex Roofing, LLC	Nailed it Roofing Solutions, LLC
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.			
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.	Included	Included	Included
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	No	No
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?			
PROJECT DOCUMENTS			
PROPOSERS BACKGROUND INFORMATION FORM	Included	Included	Included
PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)	Included	Included	Included
SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)			
SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM	Included	Included	Included
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			
EQUAL BENEFITS CERTIFICATION FORM			
Equal Benefits Status	A) Contractor currently complies.	A) Contractor currently complies.	D1) Does not comply due to an exemption: No spousal benefits for anyone.
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.			

Question	Bowhead Roofing	Atlas Apex Roofing, LLC	Nailed it Roofing Solutions, LLC
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	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	Florida Building Code Ruberoid 30 granule FR Membrane Coma 3300 data sheet Coma 044 Data Sheet Fixed Price Proposal	SunBiz List of Completed Projects Propossal	
PROFESSIONAL LICENSES	General Contractor License Roofing Contractor License	Roofing Contractor License	
VENDOR CLASSIFICATION			
Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?	No	Yes	No
Please indicate your Local Vendor Status	N/A	Local Broward County Vendor (LBCV)	N/A
Local Vendor Preference Certification	N/A	Meet Requirement	N/A
Local Business Tax Receipts	N/A	Broward - 09-30-26	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	No
Please indicate the classification of your Minority-Owned Business Enterprise (MBE)	Hispanic-American MBE	N/A	N/A
MBE Certification Documentation	MBE Certificate	N/A	N/A
Is your firm a Woman-Owned Business Enterprise (WBE)?	No	No	No
WMBE Certification Documentation	N/A	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?	No	No	No
Other Vendor Classification Certification Documentation	N/A	N/A	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