Exhibit "B"

Tee Renovations		SSS Down to Eartl	h Opco, LLC
Line Item Description	Quantity Unit of Measure	Unit Cost	Total
Hole 1 - White Tee - Price is inclusive of all work per			
1 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 6 - White Tee - Price is inclusive of all work per			
2 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 6 - Green Tee - Price is inclusive of all work per			
3 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 11 - White Tee - Price is inclusive of all work			
4 per the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 12 - Gold Tee - Price is inclusive of all work per			
5 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 16 - Gold Tee - Price is inclusive of all work per			
6 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Hole 18 - Gold Tee - Price is inclusive of all work per			
7 the scope	1 Lump Sum	\$9,753.00	\$9,753.00
Total		\$68,271.00	\$68,271.00

Bunker Sand Replacement		SSS Down to Earth O	pco, LLC
Line Item Description	Quantity Unit of Measure	Unit Cost To	tal
1 Hole # 1 Right Bunker	1940 Square Feet	\$2.47	\$4,791.80
2 Hole # 2 Left Bunker	4000 Square Feet	\$2.47	\$9,880.00
Hole # 3 - First Left, Second Left, First Right, Second			
3 Right, Third Right	22835 Square Feet	\$2.47	\$56,402.45
4 Hole # 5 Right Bunker	3275 Square Feet	\$2.47	\$8,089.25
5 Hole # 6 Left Bunker	2845 Square Feet	\$2.47	\$7,027.15
6 Hole # 8 First Right, Second Right	6375 Square Feet	\$2.47	\$15,746.25
7 Hole # 9 First Left, Second Left	4540 Square Feet	\$2.47	\$11,213.80
Hole # 10 First Left, Second Left, First Right, Second			
8 Right	7615 Square Feet	\$2.47	\$18,809.05
9 Hole # 11 Left Bunker	1600 Square Feet	\$2.47	\$3,952.00
10 Hole # 12 Left Bunker	2550 Square Feet	\$2.47	\$6,298.50
11 Hole # 16 Left Bunker, Right Bunker	4650 Square Feet	\$2.47	\$11,485.50
Hole # 17 Left Bunker, First Right, Second Right,			
12 Third Right	8075 Square Feet	\$2.47	\$19,945.25
13 Hole # 18 Left Bunker	1400 Square Feet	\$2.47	\$3,458.00
Total			\$177,099.00

Payment & Performance Bonds			SSS Down to Earth Opco, LLC
Line Item	Description	Unit of Measure	Percentage
1	Payment & Performance	Percentage	0.%
	Total		

### 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.	BRUCE COPSEY	BRUCE.COPSEY@DOWN2EARTHINC.COM 407-595-3962 CONSTRUCTION MANAGER	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.	TOM LAZZARO	TOM:LAZZARO@DOWN2EARTHINC.COM 321-291-8050 CHIEF EXECUTIVE OFFICER	Complete
Organiza	tion Background			
1.2.1	Please state the year that you company started its business.	2016		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	2016		Complete
1.2.3	What State is your Company Registered In?	он		Complete
Former E	Business			
1.3.1	Under what former name has your business operated? Include a description of the business.	N/A		Complete
1.3.2	At what address was that business located?	N/A		Complete
Past Fail	ure			
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspecte	d			
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subcont	racting			ĺ
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.)	No		Complete
Bankrup	tcy Petitions			
1.7.1	List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.	N/A		Complete
Bond Cla	aims			
1.8.1	List and describe all successful Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).	N/A		Complete
Claims, A	Arbitrations, Administrative Hearings and Lawsuits			
1.9.1	List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last (10) years. The list shall include all case names; case, arbitration or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.	N/A		Complete
Criminal	Proceedings or Hearings			

1.10.1	List and describe all criminal proceedings or hearings concerning business related offenses in which the Proposer, its principals or officers or predecessor organization(s) were defendants.	N/A		Complete
Compan	y Classification			
1.11.1	In regards to the commodities/services proposed, which of the following best classifies your firm? If you selected any options besides \"Original Provider\" please explain.	Original Provider		Complete
Debarme	ent/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 E	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.	YES	WE HAVE EXTENSIVE EXPERIENCE IN GOLF MAINTENANCE AND CONTRUCTION. PLEASE REVIEW REFERENCES	Complete
Professi	onal License Information			
1.14.1	Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your company has that are required to provide these services.	Applicable	PLEASE SEE ATTACHED LICENSES AND CERTIFICATIONS	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	

### Document A310<sup>™</sup> – 2010

440 Lincoln Street

Same as Above

Worcester, MA 01653

**Mailing Address for Notices** 

**Conforms with The American Institute of Architects AIA Document 310** 

(Name, legal status and principal place of business) The Hanover Insurance Company

### **Bid Bond**

CONTRACTOR: (Name, legal status and address)

SSS Down To Earth OPCO LLC dba Down to Earth 500 Winderley Place #Suite 222 Maitland, FL 32751

OWNER: (Name, legal status and address)

The City of Pembroke Pines 8300 South Palm Drive Pembroke Pines, FL 33025

BOND AMOUNT: 5%

Five Percent of Amount Bid

SURETY:

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

#### **PROJECT:**

(Name, location or address, and Project number, if any)

RFP # RE-25-02 Bunker and Sand Replacement and Tee Renovation

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 28th day of April, 2025.

(Witness)

(Witness) Mary Brenner-Miller

SSS Down To Earth OPCO LLC dba Down to Earth (Seal) (Principal)

(Seal)

By (Title)

(Surety)

The Hanover Insurance Company

Stein, Attorney-in-Fact Tille

#### THE HANOVER INSURANCE COMPANY MASSACHUSETTS BAY INSURANCE COMPANY CITIZENS INSURANCE COMPANY OF AMERICA

#### POWER OF ATTORNEY

THIS Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

#### KNOW ALL PERSONS BY THESE PRESENTS:

That THE HANOVER INSURANCE COMPANY and MASSACHUSETTS BAY INSURANCE COMPANY, both being corporations organized and existing under the laws of the State of New Hampshire, and CITIZENS INSURANCE COMPANY OF AMERICA, a corporation organized and existing under the laws of the State of Michigan, (hereinafter individually and collectively the "Company") does hereby constitute and appoint,

#### **Todd Stein**

Of Cleveland, OH individually, if there be more than one named, as its true and lawful attorney(s)-in-fact to sign, execute, seal, acknowledge and deliver for, and on its behalf, and as its act and deed any place within the United States, any and all surety bonds, recognizances, undertakings, or other surety obligations. The execution of such surety bonds, recognizances, undertakings or surety obligations. The execution of such surety bonds, recognizances, undertakings or surety obligations, in pursuance of these presents, shall be as binding upon the Company as if they had been duly signed by the president and attested by the secretary of the Company, in their own proper persons. Provided however, that this power of attorney limits the acts of those named herein; and they have no authority to bind the Company except in the manner stated and to the extent of any limitation stated below:

Any such obligations in the United States, not to exceed Forty Million and No/100 (\$40,000,000) in any single instance That this power is made and executed pursuant to the authority of the following Resolutions passed by the Board of Directors of said Company, and said Resolutions remain in full force and effect:

Surety Bond Number: Bid Bond Principal: SSS Down To Earth OPCO LLC dba Down to Earth Obligee: The City of Pembroke Pines

RESOLVED: That the President or any Vice President, in conjunction with any Vice President, be and they hereby are authorized and empowered to appoint Attorneys-in-fact of the Company, in its name and as it acts, to execute and acknowledge for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company in their own proper persons.

RESOLVED: That any and all Powers of Attorney and Certified Copies of such Powers of Attorney and certification in respect thereto, granted and executed by the President or Vice President in conjunction with any Vice President of the Company, shall be binding on the Company to the same extent as if all signatures therein were manually affixed, even though one or more of any such signatures thereon may be facsimile. (Adopted October 7, 1981 – The Hanover Insurance Company: Adopted April 14, 1982 – Massachusetts Bay Insurance Company; Adopted September 7, 2001 – Citizens Insurance Company of America and affirmed by each Company on March 24, 2014)

IN WITNESS WHEREOF, THE HANOVER INSURANCE COMPANY, MASSACHUSETTS BAY INSURANCE COMPANY and CITIZENS INSURANCE COMPANY OF AMERICA have caused these presents to be sealed with their respective corporate seals, duly attested by two Vice Presidents, this 6<sup>th</sup> day of April, 2023



The Hanover Insurance Company Massachusetts Bay Insurance Company Citizens Insurance Company of America

Kanel H. Kawiecki, Vice President

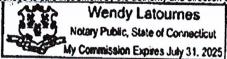
STATE OF CONNECTICUT COUNTY OF HARTFORD

) \$5.

The Hanover Insurance Company Methachusetts Bay Insurance Company Oktorns Insurance Company of America

Na I. Mendoza, Vice President

On this 6<sup>th</sup> day of April 2023 before me came the above named Executive Vice President and Vice President of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, to me personally known to be the individuals and officers described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, respectively, and that the said corporate seals and their signatures as officers were duly affixed and subsorbed to said instrument by the authority and direction of said Corporations.



)

Wendy Latouries, Notary Public My commission expires July 31, 2025

I, the undersigned Vice President of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, hereby certify that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Powers of Attorney are still in force and effect.

GIVEN under my hand and the seals of said Companies, at Worcester, Massachusetts, this \_28th\_day of \_\_\_\_\_April \_\_\_\_\_2025

John Rowedder, Vice President





### State of Florida

INSURANCE DEPARTMENT TALLAHASSEE, FLORIDA

CHOUSC

COMPANY LICENSE AND CERTIFICATE OF AUTHORITY

HANOVER INSURANCE COMPANY 100 NORTH PARKWAY ADRCESTER, MA 01605-1396

<b>U6</b> 0	)1	90	10	01	01386	78046401	200.00	01386	05	31	91	
ISSL	JEDA	TE	TYPE	CLASS	LICENSE OR PERMIT NUMBER	APPLICATION	TAXES & FEES	A A 1 / B 1 1 / / /	EXI	DATE		

HAVING FILED & SATISFACTORY FINANCIAL STATEMENT IN ACCORDANCE WITH THE LAWS GOVERNING SUCH COMPANY, OR ASSOCIATION, IS HEREBY AUTHORIZED TO WRITE THE FOLLOWING COVERAGES IN THE STATE OF FLORIDA, SUBJECT TO COMPLIANCE BY SAID COMPANY WITH ALL APPLICABLE LAWS OF FLORIDA.

CIU FIRE 020 ALLIED LINES 040 HUMEDWNERS MULTI PERIL 050 COMMERCIAL MULTI PERIL 080 UCEAN MARINE 090 INLAND MARINE 160 WORKMENS COMPENSATION 170 UTHER LIABILITY 192 PRIVATE PASSENGER AUTO LIABILITY 194 COMMERCIAL AUTO LIABILITY 211 PRIVATE PASSENGER AUTO PHYSICAL DAMAGE 212 COMMERCIAL AUTO PHY DAMAGE AIRCRAFT RATES UNCONTROLLED 220 230 FIDELITY 240 SURETY 250 GLASS 200 JURGLARY AND THEFT 270 BUILER AND MACHINERY 280 CREDIT



#### The Hanover Insurance Company, Bedford, New Hampshire Assets and Liabilities as of December 31, 2023

#### ASSETS

Cash in Banks (Including Short-Term Investments)	\$	32,062,993
Bonds and Stocks	S	7,841,064,550
Other Admitted Assets	s _	2,732,676,511
Total Admitted Assets	\$	10,605,804,054

### LIABILITIES, CAPITAL AND SURPLUS

Reserve for Unearned Premiums	\$	2,421,153,400
Reserve for Loss and Loss Expense	S	5,031,008,441
Reserve for Taxes	\$	8,445,951
Funds Held Under Reinsurance Treaties	\$	2,790,158
Reserve for all Other Liabilities	\$	509,684,414
Capital Stock - \$1.00 Par \$ 5,000,000		
Net Surplus \$ 2,627,721,690		
Policyholders' Surplus	\$	2,632,721,690
Total Liabilities, Capital and Surplus	\$	10,605,804,054

### COMMONWEALTH OF MASSACHUSETTS COUNTY OF WORCESTER

I, Jeffrey Farber, Assistant Treasurer of The Hanover Insurance Company, being duly sworn deposes and says that he is the above described officer of said Company, and certifies that the forgoing statement is a true statement of the condition and affairs of the said Company on December 31, 2023.

Janu Jaime Hawley Notary Public COMMONWEALTH OF MASSACHUSETTS

Jeffrey Farber Assistant Treasurer

hanover.com

My Commission Expires November 29, 2030

> The Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653



### NON-COLLUSIVE AFFIDAVIT

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

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

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

- Neither the said BIDDER nor any of its officers, partners, owners, agents, representative, employees or parties in interest, including this affidavit, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other BIDDER, firm or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any BIDDER, firm, or person to fix the price or prices in the attached Bid or any other BIDDER, or to fix any overhead, profit, or cost element of the Bid Price or the Bid Price of any other BIDDER, or to secure through any collusion conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Contract;
- The price of items quoted in the attached Bid are fair and proper and are not tainted by collusion, conspiracy, connivance, or unlawful agreement on the part of the BIDDER or any other of its agents, representatives, owners, employees or parties in interest, including this affidavit.

Printed Name/Signature	Tom Lazzaro	70m Japparo
Title	CEO	
Name of Company	SSS DOWN TO EA	RTH OPCO, LLC



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

- 1.
   This sworn statement is submitted SSS DOWN TO EARTH OPCO, LLC (name of entity submitting sworn statement) whose business address is 500 WINDERLEY PLACE #222 MAITLAND, FL 32751

   and (if applicable) its Federal Employer Identification Number (FEIN) is 38-4006336

   . (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: \_\_\_\_\_\_.)
- 2. My name is TOM LAZZARO and my (Please print name of individual signing)

relationship to the entity named above is <u>CHIEF EXECUTIVE OFFICER</u>

- 3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), <u>Florida</u> <u>Statutes</u>, 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), <u>Florida Statutes</u>, 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), <u>Florida Statutes</u>, 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), <u>Florida Statutes</u>, 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.)

 $\checkmark$  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, <u>AND</u> (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.)

Tom Joyas

SSS DOWN TO EARTH OPCO, LLC

04/28/2025

Bidder's Name/Signature

Company

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: SSS DOWN TO EARTH OPCO, LLC

AUTHORIZED OFFICER NAME / SIGNATURE:

70m Joypano



### 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 <u>complies fully</u> with the above requirements for a Drug-Free Workplace.

Place a check mark here only if affirming bidder **<u>does not</u>** 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 <u>WILL NOT</u> qualify for Drug-Free Workplace Preference based on their sub-contractors' qualifications.

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TOM LAZZARO

SSS DOWN TO EARTH OPCO, LLC

Authorized Signature

Authorized Signer Name

Company Name

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

I, TOM	LAZZARO-CEO	, on behalf of,
-	Print Name and Title	Company Name
certify that	SSS DOWN TO	EARTH OPCO, LLC
		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.

SSS DOWN TO EARTH OPCO, LLC

**Company Name** 

70m Joppars Print Name / Signature

CFO

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.

SSS DOWN TO EARTH OPCO, LLC

COMPANY NAME: \_

TOM LAZZARO

70m Joypers

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: 04/28/2025

SSS DOWN TO EARTH OPCO, LLC

SIGNATURE:	70m Loyparo	
_		

NAME: TOM LAZZARO



### VENDOR INFORMATION FORM

MAIN CONTACT INFORMATION				
Company Name				
(Legal Name as filed with IRS)				
Doing Business As (DBA)				
Primary Business Address				
	City:			
	State:		Zip:	
	Count	ry:		
Remit To Address				
	City:			
	State:		Zip:	
	Count	ry:		
Order From Address				
	City:			
	State:		Zip:	
	Count	ry:		
Foreign Entity (Yes/No)				
Telephone Number				
Primary Company E-mail				
Fax				
Website				
DUNS				
Independent Contractor (Yes/No)				
Identification Number	SSN:		FID:	

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

	CONTACT # 1	
Contact Name (First & Last Name)		
Description/Title/Position		
Phone (Voice)		
Phone (Text)	Opt In (Y/N):	
Fax		
E-mail		

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

Please attach the print out from <u>https://dos.myflorida.com/sunbiz/</u> 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.

Befor	e y	ou begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.		•	
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the o entity's name on line 2.)	wner's name on line	1, and enter the business/disregarded	
	SS	SS Down To Earth Opco, LLC			
	2	Business name/disregarded entity name, if different from above.			
	Do	own To Earth			
page 3	За	Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	on line 1. Check	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
uo		Individual/sole proprietor C corporation S corporation Partnership	Trust/estate	see instructions on page 3).	
e. ns c		$\checkmark$ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)	<u>P</u>	Exempt payee code (if any)	
Print or type. Specific Instructions		<ul> <li>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check box for the tax classification of its owner.</li> <li>Other (see instructions)</li> </ul>	for the tax ck the appropriate	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 and you are providing this form to a partnership, trust, or estate in which you have an ownership i this box if you have any foreign partners, owners, or beneficiaries. See instructions		(Applies to accounts maintained outside the United States.)	
See	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name a	and address (optional)	
0)	50	0 Winderley Place, Suite 222			
	6	City, state, and ZIP code			
	Ma	aitland, FL 32751			
	7	List account number(s) here (optional)			
Par	t I	Taxpayer Identification Number (TIN)			
backu reside	pv nta s, i	ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to av vithholding. For individuals, this is generally your social security number (SSN). However, f alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other t is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	t a <b>or</b>	identification number	

**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

### Part II Certification

Under penalties of perjury, I certify that:

- 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.

-	Signature of U.S. person	70m Joyparo
Here	U.S. person	1 or popping

Date	01/03/2025
Date	01/05/2025

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0 0

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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/FormW*9.

### 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

3

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3

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Department of State / Division of Corporations / Search Records / Search by Entity Name /

### **Detail by Entity Name**

Foreign Limited Liability Company SSS DOWN TO EARTH OPCO LLC

**Filing Information** 

Document Number	M16000004740
FEI/EIN Number	38-4006336
Date Filed	06/13/2016
State	ОН
Status	ACTIVE
Principal Address	
7887 Safeguard Circle	
Valley View, OH 44125	
Changed: 02/10/2025	
Mailing Address	

7887 Safeguard Circle Valley View, OH 44125

Changed: 02/10/2025

**Registered Agent Name & Address** CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

Authorized Person(s) Detail

#### Name & Address

**Title Managing Member** 

Season Service Select, LLC 7887 Safeguard Circle Valley View, OH 44125

**Title Managing Partner** 

Jaffa, Alan 7887 Safeguard Circle Valley View, OH 44125 **Title Managing Director** 

lafigliola, Joseph 7887 Safeguard Circle Valley View, OH 44125

**Title Secretary** 

Erkkila, Linda 7887 Safeguard Circle Valley View, OH 44125

Title CEO

Lazzaro , Thomas 7887 Safeguard Circle Valley View, OH 44125

#### Annual Reports

Report Year	Filed Date
2024	02/12/2024
2024	03/13/2024
2025	02/10/2025

#### **Document Images**

02/10/2025 ANNUAL REPORT	View image in PDF format
11/30/2024 AMENDED ANNUAL REPORT	View image in PDF format
03/14/2024 AMENDED ANNUAL REPORT	View image in PDF format
03/13/2024 AMENDED ANNUAL REPORT	View image in PDF format
02/12/2024 ANNUAL REPORT	View image in PDF format
02/23/2023 ANNUAL REPORT	View image in PDF format
04/24/2022 ANNUAL REPORT	View image in PDF format
09/23/2021 AMENDED ANNUAL REPORT	View image in PDF format
03/24/2021 ANNUAL REPORT	View image in PDF format
03/16/2020 AMENDED ANNUAL REPORT	View image in PDF format
02/05/2020 ANNUAL REPORT	View image in PDF format
01/24/2019 ANNUAL REPORT	View image in PDF format
02/15/2018 ANNUAL REPORT	View image in PDF format
04/20/2017 ANNUAL REPORT	View image in PDF format
06/13/2016 Foreign Limited	View image in PDF format

Florida Department of State, Division of Corporations

# Licenses, Certifications, & Insurance Bonds



# To deliver the very best customer service, we currently hold the following licenses, certifications, and insurance bonding:

- BMP Certified– Florida Green Industries
- Florida Department of Agriculture and Consumer Services, Certificate of Nursery Registration
- Florida Department of Agriculture and Consumer Services Certified Pest Control Operator
- Florida Department of Agriculture and Consumer Services Registered Pest Control Firm for Down to Earth Lawn Care
- Florida Department of Agriculture and Consumer Services, License as Dealer in Agriculture Products
- Florida Department of Environmental Protection
- Florida Irrigation Society, Completion Irrigation Auditing Training Course
- Florida Nursery, Growers and Landscape Association (FNGLA) Certified Horticulture Professional (FCHP)
- FNGLA Certified Horticulturalists Florida Nursery, Growers and Landscape Association (FNGLA) Florida Certified Landscape Contractor (FCLC)
- International Society of Arboriculture (ISA), Certified Arborist
- Irrigation Association (CLIA) Certified Landscape Irrigation Auditor
- John Deere Green Tech, Completion Rain Master Eagle iCentral Control System
- Paige Irrigation, Certificate of Completion Irrigation Wires & Cables and Proper Splicing Methods
- Professional Lawn Care Association of America, Certified Turfgrass Professional
- Rain Bird Certified Maxicom Operator, Maxicom Software Level 1 and 2, Maxicom Hardware Level 1 & 2

### \*All certificates & licenses are available upon request.

\*Prices subject to change





### **Bunker Sand Replacement and Tee Renovation at Pembroke Lakes Golf Course**

### **INVITATION FOR BID # RE-25-02**

Golf Sports Turf Golf Renovation Irrigation

### **Prepared For:**

David Gamez **Procurement** 

8300 South Palm Drive Pembroke Pines, FL 33025 Phone: (954) 518-9020 Email: purchasing@ppines.com Proposal issued:

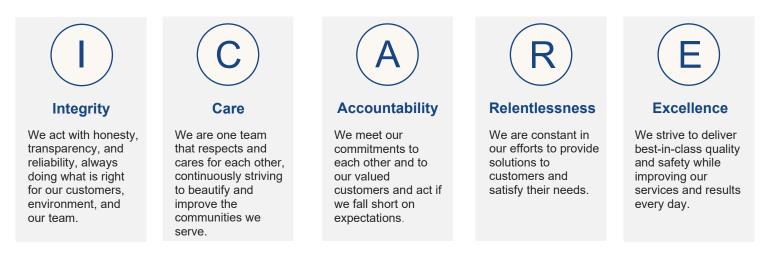
29 April 2025

### 04/29/2025 Invitation For Bid # RE-25-02 8300 South Palm Drive RE: Bunker Sand Replenishment and Tee Renovation at Pembroke Lakes Golf Course

David,

I personally want to thank you for considering Down To Earth as your Golf Course Renovation partner. We are confident that the following information will help to make the best decision and appreciate all the time you have taken to ensure we are submitting the most accurate proposal that reflects the expectations of the community.

Down To Earth has been in business for more than 30 years and we pride ourselves on providing superior service that brings "Natural Joy" to our customers. We understand the high standards our customers require and constantly seek to be the "Service Provider of Choice" in the green industry by delivering uncompromising quality that will exceed your expectations. There are many choices for your landscape management services, but what makes Down To Earth different is our ICARE values.



Thank you for your consideration and we look forward to the opportunity of working with you to achieve your landscape vision and experiencing the Down To Earth Difference!

Respectfully,

Nathan Branz-Business Development Manager

904-229-1166

Nathan.Branz@down2earthinc.com



## **Company Overview**

Down To Earth is a premier, full-service landscape company proudly providing maintenance, irrigation, design, and construction services serving multiple regions across Florida.

Specializing in large-scale commercial, residential, and resort services, we deliver unparalleled service and unmatched quality from design and installation to ongoing maintenance.





## Our Goal

Our goal for all three divisions is to approach it with the same business strategy and principles that have made the company a success for 30+ years:

Surround yourself with great people that demonstrate "ICARE" values and offer a service that brings "Natural Joy" to our customers.





An Overview of What We Do & How We Do It



We are driven by bringing natural joy to every client and property we service.



# **Core Competencies**

- Professional Golf Course Maintenance
- Professional Golf Course Renovations
- Full-Service Irrigation Services
- Full-Service Fertilization & Pest Control
- Professional Sport Turf Maintenance



# Service Technology

### **SKIM Turf Management**

SKIM is satellite-based turf management plan for golf courses, which includes monthly automated diagnostics of turf performance, nutrient measurements, and soil moisture monitoring. It offers detailed assessments of turf condition, including stress zones, growth intensity, density, color, and photosynthesis activity. Features include automatic mapping of course areas, real-time data access, cloud storage, and customizable alerts. The plan also includes a course diary, task management system, a knowledge database (Ask SKIM), and both web and mobile applications, all supported by their technical assistance.

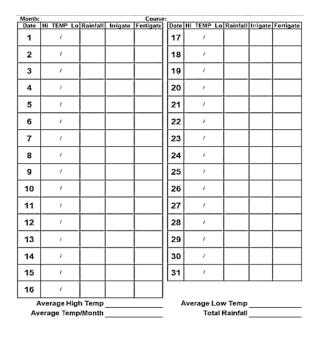






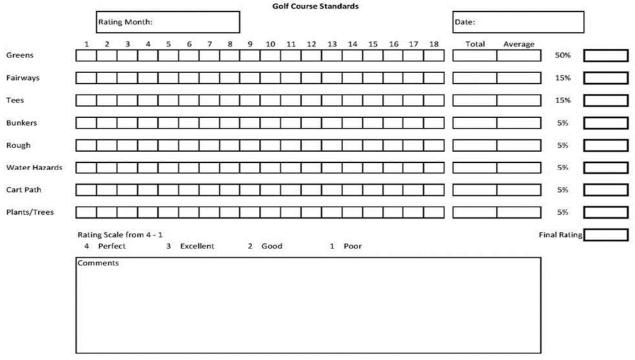
# Service Reports

### **Fertilization and Pest Control Report**



		Golf Course Name				
Name of Certified Supervisor			Registration No.			
1. Date 2. Start Time 3. End Time	Actual Applicator Name	1. Location/Description of Target Treatment Site 2. Turf/Crop	Total Size of Treatment Area	1. Pesticide Brand Name 2. EPA Registration Number	Total Amount of Pesticie Applied Gallons/Pounds	Application Method
Wetting Agent		Rate		Other Material	-	
Target Pest (s)	_					
Extent and Type	of Plant Injury					
	e of Plant Injury			Pressure Maintained		_
Nozzle Size				Pressure Maintained		_
Nozzle Size		Wind Velocity		Pressure Maintained		-

Down to Earth

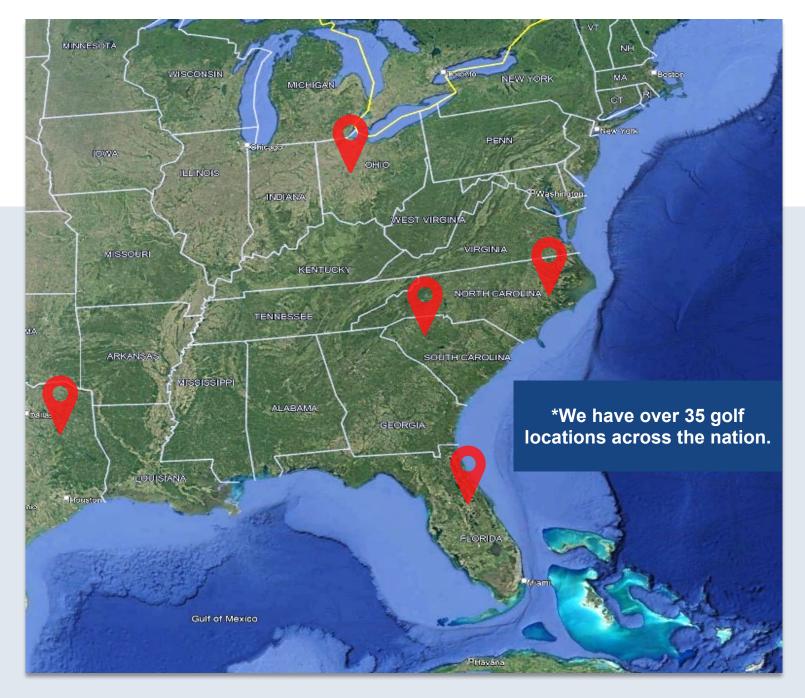




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# Locations

DTE Golf is continuously expanding in Florida, with additional locations in North Carolina, South Carolina, Texas and Ohio.





## **COMPANY SAFETY PLAN**

### **OUR NUMBER ONE PRIORITY**



Mandatory drug screening prior to

employment - zero-tolerance policy.

that focuses on the safe operation of

• Participate in weekly "toolbox talks" to

review the correct maintenance procedures and inspect current

Each new employee must complete our "**Green Vest Training**" program

all equipment and machinery.

**PREVENTIVE MAINTENANCE** 

### THE TEAM THAT CARES

Down To Earth understands that safety is the number one priority for both you and our employees. All personnel wear the following necessary protective equipment during the performance of their duties:

- DTE branded protective clothing, reflective, high visibility shirts, and safety vests.
- Protective eye wear or face shields.
- Respiratory protection
- Gloves
- Ear/Hearing protection

Down To Earth personnel will adhere to all local, state, and federal safety guidelines and will observe all safety precautions when performing services on property, roadways and rights-of- way. The following measures will be employed when active in these areas:

- Safe location of parked vehicles
- Use of safety cones/signage
- Flag personnel as necessary

### SAFETY TRAINING PROGRAM

- Employees participate in scheduled equipment training programs demonstrating the correct way to operate machinery and tools utilized for day-to-day job activities.
- Fertilizer/Pest Control Applicators take the Florida Best Management Practices Class and stay current on all continuing education units.
- Weekly Safety topic as well as scheduled Safety bulletins to raise awareness and reinforce training.
- Equipment is cleaned and maintained daily which includes sharpening mower blades and servicing equipment to ensure proper working order.
- Weekly **Vehicle Condition Report** to ensure that all repairs and maintenance have been completed.
- Monthly **Branch & Site Audits** to ensure compliance.

**PROGRAM** 

equipment.

HIRING PROGRAM



# **Organizational Chart**

One of the keys To Down to Earth's success is the ability to provide the care and attention of a local company but with the scale and resources of a larger enterprise.

This alignment from the CEO down to the individual crew members is critical to **delivering our vision to be the** *"Service Provider of Choice".*  Tom Lazzaro Chief Executive Officer

> Kris Chambrot Vice President of Golf

Tray Maltby Regional Superintendent

Superintendent

Equipment Mechanic Equipment Operators

Irrigation Technician

Spray Technician



# Your Dedicated Leadership Team

Every golf course maintained by DTE has a dedicated Superintendent who reports to one of our 5 regional superintendents.

### Vice President of Golf

- Kris Chambrot
- Leads the region and provides support and resources to branch teams.

Golf Construction Manager

- Bruce Copsey
- Leads multiple field teams and is responsible for the operations on your property.

### **Director of Golf Operations**

- Travis Anderson
- Oversees all operations and provides support to the entire golf division.





### Kris Chambrot

Vice President of Golf

### SUMMARY

Experience - Your Team's Background

Results-driven leader with over 20 years of experience in golf course maintenance. Proven ability to provide championship golf conditions for high profile tournaments, recognized by several known publications such as Golf Digest, Golf Magazine, and Golfweek, amongst others. Track record of success delivering employee equipment safety training.

### QUALIFICATIONS

- GCSAA Class A Member
- Certificate in Principles of Turfgrass Management from University of Georgia
- Ornamental and Turf Commercial Applicator License
- Advanced knowledge of agronomy and warm/cool season turfgrass practices
- Strong irrigation and chemical background
- Executive ability in problem solving and decision making.

### EXPERIENCE

Down To Earth – VP of Golf Providence Golf Club, Davenport, FL – Golf Superintendent Ginn Reunion Resort, Davenport, FL – Director of Golf

2010 - Present 2009 - 2010 2003 - 2009

### **Travis Anderson** Director of Operations-Golf Division

### **SUMMARY**

Proven leader with over 20 years of experience specializing in golf course maintenance, golf turf management, and environmental quality. Offering skills in the development and implementation of agronomic plans for 171 holes of golf.

### **QUALIFICATIONS**

- Recipient of 2018 North Florida PGA East Central Chapter Superintendent of the Year
- GCSAA Class A Member
- Certified in Best Management Practices of the Florida Green Industries by the FL Department of Environmental Protection and the University of Florida Institute of Food and Agricultural Services
- Certified in Best Management Practices for Enhancement of Environmental Quality on Florida Golf Courses
- Licensed Ornamental and Turf Commercial Pesticide Applicator

### **EXPERIENCE**

Down To Earth – Regional Golf Course Superintendent	2019 - Present
Down To Earth – Golf Superintendent	2012 - 2019
Candler Hills Golf Course, Ocala, FL – Assistant Golf Superintendent	2007 - 2012
Oconee Course at Reynolds Plantation, Greensboro, GA	2006 – 2007
Second Assistant Superintendent	



### **David Cimini**

**Regional Golf Course Superintendent** 

### SUMMARY

Over 15 years of experience in golf course maintenance with demonstrated management skills that guide teams to success while developing meaningful relationships with clients to sustain business operations. Expertise in daily operations oversight and budget administration with a strong agronomic background and work ethic.

### **QUALIFICATIONS**

- GCSAA Class A Member
- Licensed Ornamental and Turf Commercial Applicator
- Working knowledge of construction principles, practices, and methods
- Knowledgeable in irrigation and pesticides

### EXPERIENCE

**Down To Earth** – Regional Golf Course Superintendent **Ginn Reunion Resort, Orlando, FL**  2009 - Present 2006 - 2009

### Matt Barrow Regional Golf Course Superintendent

### SUMMARY

Dedicated professional with demonstrated ability to lead and manage multiple courses by identifying and solving issues to achieve mission-critical results. Performance and results-driven team player with over 15 years of experience managing golf courses.

### **QUALIFICATIONS**

- Golf Course Operations Lake City Community College Degree in progress.
- Highly Skilled in irrigation systems operations.
- Expertise in Best Practices and application of fertilizers and pest control.

#### **EXPERIENCE**

Down To Earth – Regional Golf Course Superintendent2023 – PresentThe Claw at USF Tampa – Tampa, FL – Assistant Golf Course Superintendent2010 – 2011Grand Cypress Resort, Orlando, FL – Senior Irrigation Technician2009 – 2010Valley Crest Landscape, Orlando, FL – Irrigation Technician2008 – 2009Seven Hills Golfers Club, Spring Hill, FL – Equipment Operator2005 – 2007



# Justin Martinjak Regional Golf Course Superintendent

# SUMMARY

Over 10 years Management experience in the Golf and Landscape Maintenance Industry including successful development and oversight of fertilizer and pest control applications. Real team builder passionate about helping employees with technical, operational, and safety coaching.

# **QUALIFICATIONS**

- Florida Green Industries: Certified Best Management Practices
- State of Florida Licensed Turf and Ornamental Restricted use Pesticide Applicator
- Oversight of chemical applications in compliance with State regulations and industry best practices

## EXPERIENCE

Down To Earth – Regional Golf Course Superintendent	2021 - Present
Down To Earth – Branch Manager	2018 – 2021
Davey Management at Silver Dollar Golf Club, Tampa, FL – Superintendent	2013 – 2018

# **Nick Dunleavy**

# **Regional Golf Club Manager**

# SUMMARY

Business administrator with over 30 years of experience in golf course management and accounting. Proven record of improving club financials through revenue generation and expense control with strong multi-tasking skills and ability to simultaneously manage various projects.

# **QUALIFICATIONS**

- PGA of America member
- Canadian PGA member
- Highly experienced in managing food and beverage for clubs and special events.
- Knowledge of laws and regulations to ensure permits are current and courses comply with local authorities.
- Successful oversight of multiple Golf courses in Central Florida and South Carolina
- Focus on creating a welcoming and fun environment at the clubs.

# EXPERIENCE

Down To Earth – Regional Golf Club Manager	2016 - Present
Mystic Dunes Golf Club, Celebration, FL – General Manager	2013 -2016
Rio Pinar Country Club, Orlando, FL – General Manager	2007 - 2013



# Tray Maltby

**Regional Golf Course Superintendent** 

# SUMMARY

Dedicated professional with over 25 years of experience in start-up, renovation, and maintenance phases of top tier golf courses. Proven ability to meet and exceed individual and team objectives through effective communication skills and collaborative approach to understand customer needs.

# **QUALIFICATIONS**

- Vice President of Seven Rivers Golf Course Superintendent's Association since 2020.
- Recipient of 2013 North Florida PGA East Central Chapter Superintendent of the Year.
- Awarded Golf Digest's America's Best New Courses 2007 Conservatory Golf Club.
- Florida Licensed Commercial Pesticide Applicator.
- GCSAA Class A Member.
- Certified in Best Management Practices by FDEP.

# **EXPERIENCE**

Down To Earth – Regional Golf Course Superintendent	2023 – Present
The Villages – The Villages, FL – Golf Course Maintenance Administrator	2021 - 2023
BrightView – The Villages, FL – Executive Area Director Brightview Golf	2015 - 2020
Reunion Resort and Club – Reunion, FL – Director of Golf Course Maintenance	2010 – 2015
Brays Island Plantation Golf Club – Beaufort, SC - Head Superintendent	2008 - 2010
Ginn Clubs and Resorts - Orlando & Palm Coast, FL - Head Superintendent	2001 – 2008
Palm Coast Golf Resort – Palm Coast, FL – Head Superintendent	1996 - 2001

# **Andrew Kisner**

# **Regional Golf Course Superintendent**

# SUMMARY

Customer-focused leader with almost 20 years of experience in golf course management. Highly skilled at managing Tifdwarf and Ultra dwarf Bermuda greens with a proven track record of enhancing quality by implementing sound agronomic chemical and fertilization practices.

# **QUALIFICATIONS**

- Certified Rainbird IC Irrigation System
- Certified GCSAA Class A Member
- Member of the Florida Turf Grass Association
- Florida Licensed Commercial Pesticide Applicator.
- Working knowledge of Spanish

# EXPERIENCE

Down to Earth - Regional Golf Course Superintendent	2023 - Present
Bonds and Associates – Jackson, MS – Landscape Division Manager	2019 –2023
Down To Earth – Golf Course Superintendent	2012 - 2019
Boca Raton Resort and Club – Boca Raton, FL – Golf Course Superintendent	2008 - 2012
Laurel Oak Country Club – Sarasota, FL – Assistant Superintendent	2007 -2008
The Club at Mediterra – Naples, FL - Summer Internship	2004 - 2004
Highlands Plantation Golf Club – Starkville, MS – Renovation/Construction	2002-2006



# **Bruce Copsey**

**Project Manager-Golf Construction** 

# **SUMMARY**

Strong project manager with 30+ years of experience in golf course construction, landscape, and maintenance. Proven ability to oversee all aspects of new projects, including design, estimating, subcontractor management, and customer service.

## QUALIFICATIONS

- B.S. in Landscape Architecture, Ohio State University
- 30+ years construction & maintenance experience
- Golf course construction experience throughout the US

# **EXPERIENCE**

<b>Down To Earth</b> – Golf Division, Project Manager-Construction	2023 - Present
Dick's Sporting Goods-Golf Department Manager	2020-2023
Millennium Grounds & Waters, Winter Garden, FI-Operations Manager	2008-2020
Mobile Modular Mgmt. Corp, Auburndale, FI-Branch Project Coordinator	2006-2008
Millennium Grounds & Waters, Orlando, FI- Landscape Manager	2002-2005



# Municipal Courses



# **Highland Park Golf Course**

- •c/o City of Cleveland Department of Public Works
- •Time: 2020 Current
- •We offer full-service golf course maintenance for their 36-Hole Champion Course



# **Tarpon Springs Golf Course**

- •c/o City of Tarpon Springs
- •Time: 2020 Current
- •We offer full-service golf course maintenance for their 18-Hole Golf Facility



# The Wellman Club

- •c/o City of Johnsonville, SC
- •Time: 2022 Current
- •We offer full-service golf course maintenance for their 18-Hole Champion Course



# **Twin Rivers Golf Club**

- •c/o City of Oviedo
- •Time: 2017 Current
- •We offer full-service golf course management for their 18-Hole Golf Facility



# **UCF Golf Practice Facility**

- •c/o University of Central Florida
- •Time: 2017 Current
- •We offer full-service golf course maintenance for their practice facility.



# OVER TWENTY YEARS OF EXPERTISE GOLF COURSE CONSTRUCTION PROJECTS

**Barksdale AFB** Boca West Golf club **Caguas Real Golf Course** Calusa Lakes Golf Club Cayo Largo Resort & Golf Club Cog Hill Dubsdread Course **Continental Country Club** Covered Bridge Gol Club De La Vista Diplomat Resort and Country Club Ella Sharp Park Golf Course Four Streams Gol fClub Franconia Golf Course Glen Arbor Golf Club Greywood Plantation Gol fClub Hacienda Hills Heritage Pines Golf Course Highlands Reserve Golf club Hillcrest Country Club Imperial Country Club Kissimmee Bay Country Club Lamington Farms Golf club Legends Golf and Country Club Melbourne Golf Course Musket Ridge Gol fClub New Albany Country Club Pine Ridge Golf Course Pompano Beach Golf Course **Ridgeway Golf Club** Summer Grove Golf Club Suntree Country Club The Groves Golf and Country Club Twin Rivers Golf Course Vi at Bentley Villages Waterford golf club West Orange Country Club

Bossier City, LA Boca Raton, FL Caguas, Puerto Rico Nokomis, FL Fajardo, Puerto Rico Lemont, IL Wildwood, FL New Albany, IN Villages, FL Hollywood, FL Jackson, MI Beallsville, MD Springfield, MA Bedford Hills, NY Lake Charles, LA Villages, FL Hudson, FL Davenport, FL Hollywood, FL Naples, FL Kissimmee, FL Lamington, NJ Clermont, FL Melbourne, FL Frederick, MD New Albany, OH Beverly Hills, FL Pompano Beach, FL White Plains, NY Newnan, GA Melbourne, FL Land O'Lakes, FL Oviedo, FL Naples, FL Venice, FL Windermere, FL

Steve Newgent Architect Ward Northrup Architect Sanford & Associates Architects Design build Ron Garl Architect Joe Lee Architect Design build Fuzzy Zoeller & Clyde Johnston Architect Design build Joe Lee Architect Local Government design Nick Price & Steven Smyers - Architects Armstrong Associates Architect Gary Player Architect **Rocky Roquemore Architect** Design build STOP) Design build Design build Joe Lee Architect Ward Northrup Architect Design build Tom Fazio Architect Design build Jeff Myers Architect Joe Lee Architect Jack Nicklaus Architect Design build **Jeff Myers Architect** Jeff Myers Architect **Rocky Roquemore Architect** Design Build Design Build Design build Design build Design build Design build



CONTACT US TODAY **321-263-2700** www.dte.golf/contact

# Championship Courses



NANCY LOPEZ LEGACY •27-Hole Champion Course •Villages, Fl	THE LINKS AT BRICKS LANDING •18-Hole Champion Course Ociean Isle Beach, NC	CONTINENTAL COUNTRY CLUB •18-Hole Champion Course •Wildwood, FL •April 2019 - Present	THE GROVES GOLF & COUNTRY CLUB •18-Hole Champion Course •Land O' Lakes, FL •September 2018 - Present
VI AT BENTLEY VILLAGE •18-Hole Champion Course •Naples, FL •January 2016 - Present	HACIENDA HILLS GOLF AND COUNTRY CLUB •27-Hole Champion Course •The Villages, FL •November 2014 - Present	HERITAGE PINES GOLF COURSE •18-Hole Champion Course •Hudson, FL •May 2018 - Present	KISSIMMEE BAY COUNTRY CLUB •18-Hole Champion Course •Kissimmee, FL •November 2017 - Present
LEGENDS GOLF & COUNTRY CLUB •18-Hole Champion Course •Clermont, FL •June 2020 - Present	GLENVIEW COUNTRY CLUB •18-Hole Champion Course •Venice, FL	PALMER LEGENDS COUNTRY CLUB •27-Hole Champion Course •The Villages, FL •November 2014 - Present	BROAD STRIPES GOLF AND SOCIAL CLUB AT STONECREST 18 hole in Summerfield FL
TIERRA DEL SOL GOLF COURSE •27-Hole Champion Course •The Villages, FL •November 2014 - Present	HOLLYTREE COUNTRY CLUB • 18 Hole Private Golf Club in Tyler, TX	WESTCHESTER COUNTRY CLUB • 27 Holes in Boynton Beach, FL	WEKIVA GOLF CLUB •18-Hole Champion Course •Longwood, FL •2022- Present





# Licenses, Certifications, & Insurance Bonds



# To deliver the very best customer service, we currently hold the following licenses, certifications, and insurance bonding:

- BMP Certified– Florida Green Industries
- Florida Department of Agriculture and Consumer Services, Certificate of Nursery Registration
- Florida Department of Agriculture and Consumer Services Certified Pest Control Operator
- Florida Department of Agriculture and Consumer Services Registered Pest Control Firm for Down to Earth Lawn Care
- Florida Department of Agriculture and Consumer Services, License as Dealer in Agriculture Products
- Florida Department of Environmental Protection
- Florida Irrigation Society, Completion Irrigation Auditing Training Course
- Florida Nursery, Growers and Landscape Association (FNGLA) Certified Horticulture Professional (FCHP)
- FNGLA Certified Horticulturalists Florida Nursery, Growers and Landscape Association (FNGLA) Florida Certified Landscape Contractor (FCLC)
- International Society of Arboriculture (ISA), Certified Arborist
- Irrigation Association (CLIA) Certified Landscape Irrigation Auditor
- John Deere Green Tech, Completion Rain Master Eagle iCentral Control System
- Paige Irrigation, Certificate of Completion Irrigation Wires & Cables and Proper Splicing Methods
- Professional Lawn Care Association of America, Certified Turfgrass Professional
- Rain Bird Certified Maxicom Operator, Maxicom Software Level 1 and 2, Maxicom Hardware Level 1 & 2

# \*All certificates & licenses are available upon request.

\*Prices subject to change



# Proposal Pricing



Based on our discussions and goals you've outlined for your golf course, please see proposed services and pricing.





Down to Earth Landscape & Irrigation PO Box 72701 Cleveland, Ohio 44192-0002 (321) 263-2700

# Estimate: #115358

<u>Customer Address</u> David Gamez 10500 Taft St. Pembroke Pines, 33026	Billing	<u>Address</u>	F	Physical Jol Pembroke Lakes 10500 T Pembroke Pine	GC Golf Reno aft St.
<u>Job</u> Bunkers & Tees	<u>Estimated Job Start Date</u> May 22, 2025	<u>Propos</u> Bruce C	-	D	ue Date
	<u>Estimate</u>	<u>Details</u>			
Description of Services & Material	s	Unit	Quantity	Rate	Amount
Bunkers & Tees					
Labor Included		Each	1800	\$0.00	\$0.00
Hole 1 - white tee		Each	1	\$7,560.00	\$7,560.00
Hole 6 - white tee		Each	1	\$7,560.00	\$7,560.00
Hole 6 - green tee		Each	1	\$7,560.00	\$7,560.00
Hole 11 - white tee		Each	1	\$7,560.00	\$7,560.00
Hole 12 - white tee		Each	1	\$7,560.00	\$7,560.00
Hole 16 - gold tee		Each	1	\$7,560.00	\$7,560.00
Hole 18 - gold tee		Each	1	\$7,560.00	\$7,560.00
Hole 1 - rt. bunker		Square Foot	1940	\$2.47	\$4,791.80
Hole 2 - left bunker		Square Foot	4000	\$2.47	\$9,880.00
Hole 3 - 5 bunkers		Square Foot	22835	\$2.47	\$56,402.45
Hole 5 - left bunker		Square Foot	3275	\$2.47	\$8,089.25
Hole 6 - 2 right bunkers		Square Foot	2845	\$2.47	\$7,027.15
Hole 8 - 2 right bunkers		Square Foot	6375	\$2.47	\$15,746.25
Hole 9 - 2 left bunkers		Square Foot	4540	\$2.47	\$11,213.80
Hole 10 - 4 bunkers		Square Foot	7615	\$2.47	\$18,809.05
Hole 11 - left bunker		Square Foot	1600	\$2.47	\$3,952.00
Hole 12 - left bunker		Square Foot	2550	\$2.47	\$6,298.50
Hole 16 - 2 bunkers		Square Foot	4650	\$2.47	\$11,485.50
Hole 17 - 4 bunkers		Square Foot	8075	\$2.47	\$19,945.25
Hole 18 - left bunker		Square Foot	1400	\$2.47	\$3,458.00
80/20 mix		Ton	100	\$153.52	\$15,352.00
				Subtotal	\$245,371.00
				Job Total	\$245,371.00

We hereby propose to provide all labor, materials and equipment necessary to complete the following work as per plans and specifications, including the installation of the above, for all other Terms & Conditions please visit <a href="https://dtelandscape.com/terms-and-conditions/">https://dtelandscape.com/terms-and-conditions/</a>.

Remove and replace bunker sand in all fairway bunkers @ 3" compacted depth - sod surrounds with Platinum Paspalum.

Strip, reshape, laser level and sod 7 various tees with Platinum Paspalum rolls.

Estimates require a 50% deposit to order and schedule any approved work.

Proposed By:

Agreed & Accepted By:

Bruce Copsey Down to Earth Landscape & Irrigation 04/11/2025 Date

Pembroke Lakes GC Golf Reno

Date

# **Certificate of Insurance**

ACORD <sup>®</sup> CI	ERTIF	ICATE OF LIA	BILITY INS	JRANC	E		5/2025
THIS CERTIFICATE IS ISSUED AS A I CERTIFICATE DOES NOT AFFIRMATI BELOW. THIS CERTIFICATE OF INS REPRESENTATIVE OR PRODUCER, AN	URANCE	R NEGATIVELY AMEND, DOES NOT CONSTITUT CERTIFICATE HOLDER.	EXTEND OR ALT	ER THE CO	VERAGE AFFORDED E HE ISSUING INSURER	SY THE (S), AU	POLICIES
IMPORTANT: If the certificate holder i If SUBROGATION IS WAIVED, subject this certificate does not confer rights t	to the te	erms and conditions of th	ne policy, certain p	olicies may i			
RODUCER	o are oer	andate notaer in nea or s	CONTACT Susanne F				
he Baldwin Group Southeast			PHONE (A/C, No, Ext): 239-73		FAX	239-931	5804
211 W. Boy Scout			E-MAIL ADDRESS: Certificate			200-001	-0004
uite 800 ampa FL 33607			S 850	A REAL PROPERTY AND A REAL	IDING COVERAGE		NAIC #
			INSURER A : Greenwi				22322
URED		License#: L002281 SEASSER-01	INSURER B : XL Spec				37885
SS Down to Earth Opco, LLC			INSURER C : Westche				10172
a Down to Earth			INSURER D: Gemini I			-	10833
0 Winderley Place Suite 222 aitland FL 32751			INSURER E: CNA Ins		ipally		35289
			INSURER F: Steadfas		Company		26387
VERAGES CER	TIEICAT	E NUMBER: 1476977646	INSURER F: Oteaulas		REVISION NUMBER: M	ACTED	
THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RE CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	QUIREME PERTAIN,	THE INSURANCE AFFORD	OF ANY CONTRACT	OR OTHER I S DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO V	HICH TH
R TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	(MM/DD/YYY)	POLICY EXP (MM/DD/YYYY)	UMD	18	
X COMMERCIAL GENERAL LIABILITY		RGD3002006-01	1/1/2025	1/1/2026	EACH OCCURRENCE	\$ 2,000,	000
CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,00	0
					MED EXP (Any one person)	\$ 5,000	
					PERSONAL & ADV INJURY	\$ 2,000,	000
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 4,000,	000
POLICY X PRO-					PRODUCTS - COMP/OP AGG	\$ 4,000, \$	000
OTHER: AUTOMOBILE LIABILITY	- 2 - 2	RAD9438300-01	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT	\$ 2,000,	000
X ANY AUTO		10.03430300-01	1112020	1112020	(Ea accident) BODILY INJURY (Per person)	5	
OWNED SCHEDULED					BODILY INJURY (Per accident)	* 5	
AUTOS ONLY AUTOS X HIRED X NON-OWNED					PROPERTY DAMAGE (Per accident)	\$	
AUTOS ONLY AUTOS ONLY					(Per accident)	* 5	
X UMBRELLALIAB X OCCUR		AEC416850300	1/1/2025	1/1/2026			
V sussesses		140002274	1/1/2025	1/1/2026	EACH OCCURRENCE	\$ 5,000,	
V			1.		AGGREGATE	\$ 5,000,	000
DED A RETENTION \$ 0 WORKERS COMPENSATION		RWD3002005-01	1/1/2025	1/1/2026	X PER OTH	\$	
AND EMPLOYERS' LIABILITY Y/N		11400002000-01	11/2020	11112020		- 1 000	000
ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A				E.L. EACH ACCIDENT	\$ 1,000,	
(Mandatory In NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE		
DESCRIPTION OF OPERATIONS below Pollution Coverage		G7444748A 001	2/28/2024	2/28/2025	E.L. DISEASE - POLICY LIMIT Each Occum/Aggregate	\$ 1,000,	000/20000
Professional Coverage Inland Marine		VNPL013755 7018535549	7/31/2024 2/28/2024	2/28/2025 2/28/2025	Each Occum/Aggregate Leased/Rented Equip		000/2,0000
scription of operations / Locations / Vehici icess Liability Layer \$3,000,000 over the oof of Insurance	LES (ACOR Primary \$	 0 101, Additional Remarks Sohedu 2,000,000 - 140002274 - Q	IBE Insurance Comp	e space is requir any NAIC# 30	ed) 92217	<u> </u>	
ERTIFICATE HOLDER			CANCELLATION				
*For Informational Purpose	es Only*			TH THE POLIC	ESCRIBED POLICIES BE C EREOF, NOTICE WILL Y PROVISIONS.		
			1	.1			
			Kim L. Owar	16			





# Thank You!

We look forward to working with your golf course.

**Down To Earth** 

500 Winderley Place, #222 Maitland, FL 32751 (321) 263-2700

Visit our golf website @ <u>dte.golf</u> Visit our landscape & irrigation website @ <u>dtelandscape.com</u>

# SSS Down to Earth Opco, LLC Response

Pricing unsealed at Apr 29, 2025 2:31 PM

#### CONTACT INFORMATION

Company SSS Down to Earth Opco, LLC

\_\_\_\_\_

Email

nathan.branz@down2earthinc.com

Contact

Nathan Branz

Address 500 Winderley Place #222 Maitland, FL 32751

Phone (904) 229-1166

Website https://DTE.GOLF

Submission Date Apr 29, 2025 8:28 AM (Eastern Time)

#### ADDENDA CONFIRMATION

Addendum #1 Confirmed Apr 28, 2025 10:51 AM by Nathan Branz

Addendum #2 Confirmed Apr 28, 2025 10:52 AM by Nathan Branz

Addendum #3 Confirmed Apr 28, 2025 10:52 AM by Nathan Branz

Addendum #4 Confirmed Apr 28, 2025 10:52 AM by Nathan Branz

#### 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. 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.

Willingness to serve as a reference.	
2.1. Reference Contact Information - Name of Firm, City, County or Agency*	🗹 Pass 🗌 Fail
Continental Country Club	
2.2. Reference Contact Information - Reference's Business Address*	🗹 Pass 🗌 Fail
50 Continental Blvd, Wildwood, FL 34785	
2.3. Reference Contact Information - Reference's Contact Name & Title*	🗹 Pass 🗌 Fail
Mike Roberts-General Manager	
2.4. Reference Contact Information - Reference's E-mail Address*	🗹 Pass 🗌 Fail
gm@continentalcountryclub.com	
2.5. Reference Contact Information - Reference's Phone Number*	🗹 Pass 🗌 Fail
317-730-1102	
2.6. Project Information - Was your firm the prime contractor for the listed project?*	🗹 Pass 🗌 Fail
Yes	
2.7. Project Information - Name of Contactor Performing the Work*	🗹 Pass 🗌 Fail
DTE Golf	
2.8. Project Information - Name and location of the project*	🗹 Pass 🗌 Fail
Continental Country Club	
50 Continental Blvd, Wildwood, FL	
34785	
2.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*	🗹 Pass 🗌 Fail
Greens Renovation/Re-Shaping	
Championship Bermuda & Provide Full	
Golf Maintenance	
2.10. Project Information - Project Duration*	🗹 Pass 🗌 Fail
06/2023-07/2023	
2.11. Project Information - Completion (Anticipated) Date*	🗹 Pass 🗌 Fail
Completed	
2.12. Project Information - Size of Project*	🗹 Pass 🗌 Fail
Greens Renovation/Re-Shaping	
Championship Bermuda & Provide Full Golf Maintenance	
2.42 Project Information Cost of Project	
2.13. Project Information - Cost of Project* \$489,000	🖌 Pass 🔲 Fail
3. REFERENCE # 2	
3.1. Reference Contact Information - Name of Firm, City, County or Agency*	🗹 Pass 🗌 Fail
Legends Golf & Country Club	
3.2. Reference Contact Information - Reference's Business Address*	🗹 Pass 🔲 Fail
1690 Legendary Blvd, Clermont, FL 34711	
3.3. Reference Contact Information - Reference's Contact Name & Title*	🗹 Pass 🗌 Fail

703-887-2944       7         3.8. Project Information - Was your firm the prime contractor for the listed project?*       ?         Yes       ?         3.7. Project Information - Name and location of the project*       ?         Legends Golf & Country Club       ?         1960 Legendary Bird, Clermont, FL       ?         3.1. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*       ?         ?       ?         3.1. Project Information - Project Duration*       ?         ?       ?         3.1. Project Information - Completion (Anticipated) Date*       ?         ?       ?         3.1. Project Information - Completion (Anticipated) Date*       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?         ?       ?      <		<b>V</b> F
703-887-2944       703-887-2944         3.8. Project Information - Was your firm the prime contractor for the listed project?"       Image: Contractor Performing the Work*       Image: Contractor Performation - Name and location of the project*       Image: Contractor Performation - Name and location of the project*       Image: Contractor Performance       Image: Co	Roger@legendsclermont.com	
36. Project Information - Was your firm the prime contractor for the listed project?*       Image: Contractor Performing the Work*         37. Project Information - Name of Contactor Performing the Work*       Image: Contractor Performance       Image: Contractor Performing the Work*       Image: Contractor Performance       Image: Contractor Perfore       Image: Contractor Performance	3.5. Reference Contact Information - Reference's Phone Number*	<b>V</b> F
Yes       Image: Contractor Performing the Work*       Image: Contractor Performing the Work*         DTE Golf       Image: Contract Contract Information - Name of Contactor Performing the Work*       Image: Contract Contact Information - Reference's E-mail Address*         3.8. Project Information - Name on Iboration of the project*       Image: Contract Contact Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*       Image: Contract Contact Information - Name of Firm, City, County or Agency*         3.10. Project Information - Size of Project*       Image: Contact Contact Information - Name of Firm, City, County or Agency*       Image: Contact Information - Reference's E-mail Address*         4.4. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*         4.5. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*         4.5. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*       Image	/03-887-2944	
3.7. Project Information - Name of Contactor Performing the Work*       Image: Contactor Performing the Work*         DTE Conf       Image: Contactor Performing the Work*       Image: Contactor Performing the Work*         1.8. Project Information - Name and location of the project*       Image: Contactor Performant, FL         1.8. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*       Image: Contactor Performant         3.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*       Image: Contactor Performant         3.10. Project Information - Project Duration*       Image: Contactor Performant       Image: Contactor Performant         3.10. Project Information - Size of Project*       Image: Contactor Performant       Image: Contactor Performant       Image: Contactor Performant         3.10. Project Information - Size of Project*       Image: Contactor Performant       Imag	3.6. Project Information - Was your firm the prime contractor for the listed project?*	<b>V</b>
DTE Golf  3.8. Project Information - Name and location of the project* Legends Golf & Country Club  3.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for* 3.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for* 3.10. Project Information - Project Duration* 3.10. Project Information - Completion (Anticipated) Date* Completed 3.12. Project Information - Completion (Anticipated) Date* Completed 3.13. Project Information - Cost of Project* 3.13. Project Information - Cost of Project* 3.14. Reference Contact Information - Name of Firm, City, County or Agency* Calusa Lakes 4.2. Reference Contact Information - Reference's Contact Name & Title* Rob McCoy 4.4. Reference Contact Information - Reference's Phone Number* 3.15. Project Information - Reference's Phone Number* 3.16. Reference Contact Information - Reference's Phone Number* 3.16. Reference Contact Information - Reference's Phone Number* 3.15. Project Information - Reference's Phone Number* 3.15. Reference Contact Information - Reference's Phone Number* 3.15. Reference Contact Information - Reference's Phone Number* 3.15. Reference Contact Information - Reference's Phone Number* 3.16. Reference Contact Information - Reference's Phone Number* 3.17. Project Information - Reference's Phone Number* 3.18. Reference Contact Information - Reference's Phone Number* 3.19. Project Information - Reference's Phone Number* 3.19. Proje	/es	
3.3. Project Information - Name and location of the project"       Image: Complete Comple	3.7. Project Information - Name of Contactor Performing the Work*	<b>V</b>
Legends Golf & Country Club       1690 Legendary Blvd, Clermont, FL         3711       33. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*       Image: Clermont, FL         3711       33. Provide Full Golf       Image: Clermont, FL         3711       Sereens, Tee Box, Fairway, and Bunker       Image: Clermont, FL         Renovation & Provide Full Golf       Image: Clermont, FL       Image: Clermont, FL         310. Project Information - Project Duration*       Image: Clermont, FL         311. Project Information - Completion (Anticipated) Date*       Image: Clermont, FL         312. Project Information - Size of Project*       Image: Clermont, FL         Greens, Tee Box, Fairway, and Bunker       Image: Clermont, FL         81.12. Project Information - Size of Project*       Image: Clermont, FL         Greens, Tee Box, Fairway, and Bunker       Image: Clermont, FL         81.31. Project Information - Cost of Project*       Image: Clermont, FL         81.31. Project Information - Name of Firm, City, County or Agency*       Image: Clermont, FL         81.41. Reference Contact Information - Reference's Business Address*       Image: Clermont, FL         82. Reference Contact Information - Reference's Contact Name & Title*       Image: Clermont, FL         82. Reference Contact Information - Reference's E-mail Address*       Image: Clermont, FL </td <td>DTE Golf</td> <td></td>	DTE Golf	
1680 Legendary Bivd, Clermont, FL         3471         39. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*         Sreens, Tee Box, Fairway, and Bunker         Renovation & Provide Full Golf         Waintenance         3.10. Project Information - Project Duration*         08/2020-02/2021         3.11. Project Information - Completion (Anticipated) Date*         Completed         3.12. Project Information - Completion (Anticipated) Date*         Completed         3.12. Project Information - Size of Project*         Greens, Tee Box, Fairway, and Bunker         Renovation & Provide Full Golf         Waintenance         3.13. Project Information - Cost of Project*         S1.4. Reference Contact Information - Name of Firm, City, County or Agency*         Calusa Lakes         4.1. Reference Contact Information - Reference's Business Address*         1195 Calusa Lakes Bivd, Nokomis, FL 34275         4.3. Reference Contact Information - Reference's Contact Name & Title*         Rob MicCoy         4.4. Reference Contact Information - Reference's Phone Number*         4.5. Reference Contact Information - Reference's Phone Number*         4.6. Reference Contact Information - Reference's Phone Number*         4.7. Reference Contact Information - Reference's P	3.8. Project Information - Name and location of the project*	
34711       Image: Second	egends Golf & Country Club	
3.3. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for       ?         3.10. Project Information - Project Duration*       ?         3.10. Project Information - Project Duration*       ?         3.11. Project Information - Completion (Anticipated) Date*       ?         Completed       ?         3.12. Project Information - Size of Project*       ?         Greens, Tee Box, Fairway, and Bunker       ?         Renovation & Provide Full Golf       ?         Aniteneance       ?         3.13. Project Information - Cost of Project*       ?         Greens, Tee Box, Fairway, and Bunker       ?         Renovation & Provide Full Golf       ?         Aniteneance       ?         3.13. Project Information - Cost of Project*       ?         St 1.6 Million       ?         4. REFERENCE # 3       ?         4.1. Reference Contact Information - Name of Firm, City, County or Agency*       ?         Calusa Lakes       ?         1195 Calusa Lakes Blvd, Nokomis, FL 34275       ?         4.3. Reference Contact Information - Reference's E-mail Address*       ?         rob@@calusalakes.com       ?         4.5. Reference Contact Information - Reference's Phone Number*       ?         941		
Greens, Tee Box, Fairway, and Bunker       Image: Second Sec	94711	
Renovation & Provide Full Golf   Maintenance   3.10. Project Information - Project Duration*   08/2020-02/2021   3.11. Project Information - Completion (Anticipated) Date*   Completed   3.12. Project Information - Size of Project*   Greens, Tee Box, Fairway, and Bunker   Renovation & Provide Full Golf   Maintenance   3.13. Project Information - Cost of Project*   Greens, Tee Box, Fairway, and Bunker   Renovation & Provide Full Golf   Maintenance   3.13. Project Information - Cost of Project*   S1.6 Million   4. REFERENCE # 3   4.1. Reference Contact Information - Name of Firm, City, County or Agency*   Calusa Lakes   4.2. Reference Contact Information - Reference's Business Address*   1195 Calusa Lakes Blvd, Nokomis, FL 34275   4.3. Reference Contact Information - Reference's E-mail Address*   rob@calusalakes.com   4.3. Reference Contact Information - Reference's Phone Number*   4.3. Reference Contact Information - Reference's Phone Number*		
Maintenance   3.10. Project Information - Project Duration*   08/2020-02/2021   3.11. Project Information - Completion (Anticipated) Date*   Completed   3.12. Project Information - Size of Project*   Greens, Tee Box, Fairway, and Bunker   Renovation & Provide Full Golf   Maintenance   3.13. Project Information - Cost of Project*   St.6 Million   4. REFERENCE # 3   4.1. Reference Contact Information - Name of Firm, City, County or Agency*   Calusa Lakes   21.195 Calusa Lakes Blvd, Nokomis, FL 34275   4.3. Reference Contact Information - Reference's E-mail Address*   code Contact Information - Reference's Phone Number*   4.5. Reference Contact Information - Reference's Phone Number*		
3.10. Project Information - Project Duration*       2         08/2020-02/2021       2         3.11. Project Information - Completion (Anticipated) Date*       2         Completed       2         3.12. Project Information - Size of Project*       2         Greens, Tee Box, Fairway, and Bunker       2         Renovation & Provide Full Golf       2         Maintenance       2         3.13. Project Information - Cost of Project*       2         S.16. Million       2         4. REFERENCE # 3       2         4.1. Reference Contact Information - Name of Firm, City, County or Agency*       2         Calusa Lakes       2         4.2. Reference Contact Information - Reference's Business Address*       2         4.3. Reference Contact Information - Reference's Contact Name & Title*       2         Rob McCoy       2         4.4. Reference Contact Information - Reference's E-mail Address*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2		
DB/2020-02/2021         3.11. Project Information - Completion (Anticipated) Date*         Completed         3.12. Project Information - Size of Project*         Greens, Tee Box, Fairway, and Bunker         Renovation & Provide Full Golf         Waintenance         3.13. Project Information - Cost of Project*         8.16. Million         4. REFERENCE # 3         4.1. Reference Contact Information - Name of Firm, City, County or Agency*         Calusa Lakes         1195 Calusa Lakes Bivd, Nokomis, FL 34275         4.3. Reference Contact Information - Reference's Business Address*         1195 Calusa Lakes Bivd, Nokomis, FL 34275         4.4. Reference Contact Information - Reference's Contact Name & Title*         Rob McCoy         4.4. Reference Contact Information - Reference's E-mail Address*         109 Calusa Lakes.com         4.5. Reference Contact Information - Reference's Phone Number*         200 Calusalakes.com	Aantenance	
3.11. Project Information - Completion (Anticipated) Date*       2         Completed       2         3.12. Project Information - Size of Project*       2         Greens, Tee Box, Fairway, and Bunker       2         Renovation & Provide Full Golf       2         3.13. Project Information - Cost of Project*       2         3.13. Project Information - Cost of Project*       2         3.14. Reference Contact Information - Name of Firm, City, County or Agency*       2         4.1. Reference Contact Information - Name of Firm, City, County or Agency*       2         4.2. Reference Contact Information - Reference's Business Address*       2         4.3. Reference Contact Information - Reference's Contact Name & Title*       2         4.3. Reference Contact Information - Reference's E-mail Address*       2         4.4. Reference Contact Information - Reference's E-mail Address*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2         4.5. Reference Contact Information - Reference's Phone Number*       2 </td <td>8.10. Project Information - Project Duration*</td> <td><ul><li>✓</li></ul></td>	8.10. Project Information - Project Duration*	<ul><li>✓</li></ul>
Completed       Image: Completed Information - Size of Project*       Image: Completed Information - Size of Project*       Image: Completed Information - Cost of Project*       Image: Cost of Cost of Contact Information - Reference's Contact Name & Title*       Image: Cost of Contact Information - Reference's Phone Number*       Image: Cost of Contact Information - Reference's Phone Number*       Image: Cost of Contact Information - Reference's Phone Number*       Image: Cost of Contact Information - Reference's Phone Number*       Image: Cost of Contact Information - Reference's Phone Number*	)8/2020-02/2021	
3.12. Project Information - Size of Project*       Image: Comparison of Comparison of Project and State an	3.11. Project Information - Completion (Anticipated) Date*	<b>~</b>
Greens, Tee Box, Fairway, and Bunker   Renovation & Provide Full Golf   Maintenance   3.13. Project Information - Cost of Project*   \$1.6. Million   4. REFERENCE # 3   4.1. Reference Contact Information - Name of Firm, City, County or Agency*   Calusa Lakes   4.2. Reference Contact Information - Reference's Business Address*   1195 Calusa Lakes Blvd, Nokomis, FL 34275   4.3. Reference Contact Information - Reference's Contact Name & Title*   Rob McCoy   4.4. Reference Contact Information - Reference's E-mail Address*   2   4.5. Reference Contact Information - Reference's Phone Number*   941-356-1794	Completed	
Renovation & Provide Full Golf   Maintenance   3.13. Project Information - Cost of Project*   \$1.6 Million   4. REFERENCE # 3   4.1. Reference Contact Information - Name of Firm, City, County or Agency*   Calusa Lakes   4.2. Reference Contact Information - Reference's Business Address*   1195 Calusa Lakes Blvd, Nokomis, FL 34275   4.3. Reference Contact Information - Reference's Contact Name & Title*   Rob McCoy   4.4. Reference Contact Information - Reference's E-mail Address*   colusa Lakes.com	8.12. Project Information - Size of Project*	
Maintenance 3.13. Project Information - Cost of Project* \$1.6 Million 4. REFERENCE # 3 4.1. Reference Contact Information - Name of Firm, City, County or Agency* Calusa Lakes 4.2. Reference Contact Information - Reference's Business Address* 4.2. Reference Contact Information - Reference's Susiness Address* 4.3. Reference Contact Information - Reference's Contact Name & Title* Rob McCoy 4.4. Reference Contact Information - Reference's E-mail Address* rob@calusalakes.com 4.5. Reference Contact Information - Reference's Phone Number* 941-356-1794	Greens, Tee Box, Fairway, and Bunker	
3.13. Project Information - Cost of Project*       Image: Cost of Project*         \$1.6 Million       Image: Cost of Project*         4. REFERENCE # 3       Image: Cost of Project*         4.1. Reference Contact Information - Name of Firm, City, County or Agency*       Image: Cost of Project*         Calusa Lakes       Image: Cost of Project*         4.2. Reference Contact Information - Reference's Business Address*       Image: Cost of Project*         4.3. Reference Contact Information - Reference's Contact Name & Title*       Image: Cost of Project*         4.3. Reference Contact Information - Reference's E-mail Address*       Image: Cost of Project*         4.4. Reference Contact Information - Reference's E-mail Address*       Image: Cost of Project*         4.5. Reference Contact Information - Reference's Phone Number*       Image: Cost of Project*         4.5. Reference Contact Information - Reference's Phone Number*       Image: Cost of Phone Number*         941-356-1794       Image: Cost of Phone Number*	Renovation & Provide Full Golf	
\$1.6 Million   4. REFERENCE # 3   4.1. Reference Contact Information - Name of Firm, City, County or Agency*   Calusa Lakes   4.2. Reference Contact Information - Reference's Business Address*   1195 Calusa Lakes Blvd, Nokomis, FL 34275   4.3. Reference Contact Information - Reference's Contact Name & Title*   Rob McCoy   4.4. Reference Contact Information - Reference's E-mail Address*   vob@calusalakes.com	<i>l</i> aintenance	
4. REFERENCE # 3         4.1. Reference Contact Information - Name of Firm, City, County or Agency*       2         Calusa Lakes       2         4.2. Reference Contact Information - Reference's Business Address*       2         1195 Calusa Lakes Blvd, Nokomis, FL 34275       2         4.3. Reference Contact Information - Reference's Contact Name & Title*       2         Rob McCoy       2         4.4. Reference Contact Information - Reference's E-mail Address*       2         rob@calusalakes.com       2         4.5. Reference Contact Information - Reference's Phone Number*       2         941-356-1794       2	3.13. Project Information - Cost of Project*	
4.1. Reference Contact Information - Name of Firm, City, County or Agency*       Image: Calusa Lakes         4.2. Reference Contact Information - Reference's Business Address*       Image: Calusa Lakes Blvd, Nokomis, FL 34275         4.3. Reference Contact Information - Reference's Contact Name & Title*       Image: Calusa Lakes Blvd, Nokomis, FL 34275         4.3. Reference Contact Information - Reference's Contact Name & Title*       Image: Calusa Lakes Blvd, Nokomis, FL 34275         4.4. Reference Contact Information - Reference's E-mail Address*       Image: Calusa Lakes Com         4.5. Reference Contact Information - Reference's Phone Number*       Image: Calusa Lakes Com	51.6 Million	
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4.2. Reference Contact Information - Reference's Business Address*       Image: Contact Information - Reference's Contact Name & Title*       Image: Contact Information - Reference's Contact Name & Title*       Image: Contact Information - Reference's Contact Name & Title*       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's Phone Number*       Image: Contact Informatic Phone Number*       Image: Contact Phone Number* </td <td>I.1. Reference Contact Information - Name of Firm, City, County or Agency*</td> <td></td>	I.1. Reference Contact Information - Name of Firm, City, County or Agency*	
1195 Calusa Lakes Blvd, Nokomis, FL 34275 <b>4.3. Reference Contact Information - Reference's Contact Name &amp; Title*</b> Rob McCoy <b>4.4. Reference Contact Information - Reference's E-mail Address*</b> rob@calusalakes.com <b>4.5. Reference Contact Information - Reference's Phone Number* 9</b> 41-356-1794	Calusa Lakes	
4.3. Reference Contact Information - Reference's Contact Name & Title*       Image: Contact Information - Reference's E-mail Address*         Rob McCoy       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*         4.4. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's Phone Number*         4.5. Reference Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*	I.2. Reference Contact Information - Reference's Business Address*	
Rob McCoy   4.4. Reference Contact Information - Reference's E-mail Address*   rob@calusalakes.com   4.5. Reference Contact Information - Reference's Phone Number* 941-356-1794	195 Calusa Lakes Blvd, Nokomis, FL 34275	
4.4. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*         4.5. Reference Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*         941-356-1794       Image: Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*	I.3. Reference Contact Information - Reference's Contact Name & Title*	
4.4. Reference Contact Information - Reference's E-mail Address*       Image: Contact Information - Reference's E-mail Address*         4.5. Reference Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*         941-356-1794       Image: Contact Information - Reference's Phone Number*       Image: Contact Information - Reference's Phone Number*	Rob McCoy	
rob@calusalakes.com 4.5. Reference Contact Information - Reference's Phone Number* 941-356-1794		_
4.5. Reference Contact Information - Reference's Phone Number* ✓ 941-356-1794		
941-356-1794	ob@calusalakes.com	
4.6. Project Information - Was your firm the prime contractor for the listed project?*	I.5. Reference Contact Information - Reference's Phone Number*	

**4.7. Project Information - Name of Contactor Performing the Work\*** DTE Golf 🗌 Fail

🗹 Pass 🗌 Fail

<ul> <li>4.8. Project Information - Name and location of the project*</li> <li>Calusa Lakes</li> <li>1195 Calusa Lakes Blvd, Nokomis, FL</li> <li>34275</li> </ul>	🗹 Pass 🗌 Fail
4.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for* Complete Greens and Bunker Renovation	🗹 Pass 🗌 Fail
4-5 Months	🗹 Pass 🗋 Fail
4.11. Project Information - Completion (Anticipated) Date* Completed	🗹 Pass 🗌 Fail
4.12. Project Information - Size of Project* Complete Greens and Bunker Renovation	🗹 Pass 🗌 Fail
4.13. Project Information - Cost of Project* \$1.4 Million	🗹 Pass 🗌 Fail
5. REFERENCE # 4	
5.1. Reference Contact Information - Name of Firm, City, County or Agency The Groves Golf & Country Club	🗹 Pass 🗌 Fail
5.2. Reference Contact Information - Reference's Business Address 7924 Melogold Cir, Land O' Lakes, FL 34637	🗸 Pass 🗌 Fail
5.3. Reference Contact Information - Reference's Contact Name & Title Nico Maggi-General Manager	🗹 Pass 🗌 Fail
5.4. Reference Contact Information - Reference's E-mail Address Nmagi@thegrovesgolf.com	🗹 Pass 🗌 Fail
5.5. Reference Contact Information - Reference's Phone Number 813-996-0161	🗹 Pass 🗌 Fail
5.6. Project Information - Was your firm the prime contractor for the listed project? Yes	🗹 Pass 🗋 Fail
5.7. Project Information - Name of Contactor Performing the Work DTE Golf	🗹 Pass 🗌 Fail
5.8. Project Information - Name and location of the project Complete Greens renovation and bunker renovation to include, grading, leveling, shaping, drainage, and multiple other enhancements to playing experience.	✓ Pass □ Fail improve overall
<b>5.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for</b> Complete Greens renovation and bunker renovation to include, grading, leveling, shaping, drainage, and multiple other enhancements to playing experience.	✓ Pass □ Fail improve overall
5.10. Project Information - Project Duration 07/2023-12/2023	🗹 Pass 🗌 Fail
5.11. Project Information - Completion (Anticipated) Date Completed	🗹 Pass 🗋 Fail
5.12. Project Information - Size of Project	🗹 Pass 🗌 Fail

Complete Greens renovation and bunker renovation to include, grading, leveling, shaping, drainage, and multiple other enhancements to improve overall playing experience.

5.13. Project Information - Cost of Project \$521,180.00	🗹 Pass 🗌 Fail
6. REFERENCE # 5	
6.1. Reference Contact Information - Name of Firm, City, County or Agency Twin Rivers Golf Club-City of Oviedo	🗹 Pass 🗌 Fail
6.2. Reference Contact Information - Reference's Business Address 2100 Ekana Dr, Oviedo, FL 32765	🗹 Pass 🗌 Fail
6.3. Reference Contact Information - Reference's Contact Name & Title Patrick Kelly-Assistant City Manager	🗹 Pass 🗌 Fail
6.4. Reference Contact Information - Reference's E-mail Address pkelly@cityofoviedo.net	🗹 Pass 🗌 Fail
6.5. Reference Contact Information - Reference's Phone Number 407-971-55008	🗹 Pass 🗌 Fail
6.6. Project Information - Was your firm the prime contractor for the listed project? Yes	🗹 Pass 🗌 Fail
6.7. Project Information - Name of Contactor Performing the Work Complete Greens Renovation of 18 Hole Championship Golf Course	🗹 Pass 🗌 Fail
6.8. Project Information - Name and location of the project Complete Greens Renovation of 18 Hole Championship Golf Course	🗹 Pass 🗌 Fail
6.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for Complete Greens Renovation of 18 Hole Championship Golf Course	🗹 Pass 🗌 Fail
6.10. Project Information - Project Duration 07/2024-10/2024	🗹 Pass 🗌 Fail
6.11. Project Information - Completion (Anticipated) Date Completed	🗹 Pass 🗌 Fail
6.12. Project Information - Size of Project Complete Greens Renovation of 18 Hole Championship Golf Course	🗹 Pass 🗌 Fail
6.13. Project Information - Cost of Project \$700,000.00	🗹 Pass 🗌 Fail
7. PROJECT DOCUMENTS	
<ul> <li>7.1. PROPOSERS BACKGROUND INFORMATION FORM*</li> <li>1. Please download the attached document, complete all required fields, and upload the completed form here.</li> </ul>	🗹 Pass 🗌 Fail
Display the second seco	
x Proposers_Background_Information_Form_(1).xlsx	
7.2. PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)	🗹 Pass 🗌 Fail
<ol> <li>In the event that your total cumulative base proposal amount exceeds \$200,000, a Proposal Security shall be than of 5% of the total cumulative base amount proposed.</li> <li>Therefore, proposal should be accompanied by a certified or cashier's check or by a Bid Bond made payable to the</li> </ol>	

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

#### SSS Down to Earth Opco, LLC Response

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-25-02 Bunker Sand Replacement and Tee Renovation at Pembroke Lakes Golf Course** 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\_Security-Final.pdf

#### 8. 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).

8.1. NON-COLLUSIVE AFFIDAVIT*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
Affidavit.pdf	
凶 <u>Non-Collusive_Affidavit-Final.pdf</u>	
8.2. 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.	
A Sworn Statement on Public Entity Crimes.pdf	
B Sworn_Statement_on_Public_Entity_Crimes-Final.pdf	
8.3. EQUAL BENEFITS CERTIFICATION FORM*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
Equal_Benefits_Certification_Form.pdf	
□ Equal_Benefits_Certification_Form-Final.pdf	
8.4. VENDOR DRUG FREE WORKPLACE CERTIFICATION*	🗹 Pass 🔲 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
A Vendor_Drug-Free_Workplace_Certification_Form.pdf	
Vendor_Drug-Free_Workplace_Certification_Form-Final.pdf	
8.5. SCRUTINIZED COMPANY CERTIFICATION*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
Scrutinized_Company_Certification.pdf	
Scrutinized_Company_Certification-Final.pdf	
8.6. E-VERIFY SYSTEM CERTIFICATION*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
<ol> <li>Effective January 1, 2021, pursuant to Section 448.095. Florida Statues, 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 s</li> </ol>	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, subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract with a subcontract with an unauthorized alien.	
A <u>E-Verify System Certification Statement.pdf</u>	

E-Verify\_System\_Certification\_Statement-Final.pdf

#### 8.7. HUMAN TRAFFICKING AFFIDAVIT\*

🗹 Pass 🗌 Fail

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

Human\_Trafficking\_Affidavit.pdf

#### Human\_Trafficking\_Affidavit-Final.pdf

#### 8.8. VENDOR INFORMATION FORM\*

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

B Vendor\_Information\_Form.pdf

Vendor Information Form.pdf

#### 8.9. FORM W-9 (REVISED MARCH 2024)\*

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

Form\_W-9 (Rev\_March\_2024).pdf

W-9\_Down\_To\_Earth\_2025\_(1).pdf

#### 9. OPTIONAL DOCUMENTATION

#### 9.1. TRADE SECRETS

- 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

#### 9.2. FINANCIAL STATEMENTS

- The City is <u>NOT</u> 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

#### 9.3. ADDITIONAL INFORMATION

🗹 Pass 🗌 Fail

🗸 Pass 🗌 Fail

🗸 Pass 🗌 Fail

🗸 Pass 🗌 Fail

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.

#### Pembroke Lakes Golf Course-Proposal.pdf

#### 9.4. PROFESSIONAL LICENSES

- 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.

#### DTE\_Golf\_Licenses.pdf

#### **10. VENDOR CLASSIFICATION**

#### 10.1. 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).

#### No

No

#### 10.2. 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. A veteran owned small business shall be defined as:
  - 1. **"Veteran Owned Small Business"** shall mean a business entity which has received a "Determination Letter" from the United States Department of Veteran Affairs Center for Verification and Evaluation notifying the business that they have been approved as a Veteran Owned Small Business (VOSB).
- 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).

10.3. Is your firm a Minority-Owned Business Enterprise (MBE)?*	🗸 Pass 🗌 Fail
No	
10.4. Is your firm a Woman-Owned Business Enterprise (WBE)?*	🗹 Pass 🗌 Fail
No	
10.5. Is your firm a HubZone Business / Labor Surplus Area Firm?*	🗹 Pass 🗌 Fail
No	
10.6. Is your firm a Broward County Small Business Enterprise (SBE)?*	🗹 Pass 🗌 Fail
No	
10.7. Is your firm a Broward County Business Enterprise (CBE)?*	🗹 Pass 🗌 Fail
No	
10.8. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?*	🗹 Pass 🗌 Fail

#### No

## 10.9. Does your firm have a Vendor Classification that was not listed above?\*

#### PRICE TABLES

#### **Tee Renovations**

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N
1	Hole 1 - White Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
2	Hole 6 - White Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
3	Hole 6 - Green Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
4	Hole 11 - White Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
5	Hole 12 - Gold Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
6	Hole 16 - Gold Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
7	Hole 18 - Gold Tee - Price is inclusive of all work per the scope	1	Lump Sum	\$9,753.00	\$9,753.00	
	Total				\$68,271.00	

### Bunker Sand Replacement

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N
1	Hole # 1 Right Bunker	1940	Square Feet	\$2.47	\$4,791.80	
2	Hole # 2 Left Bunker	4000	Square Feet	\$2.47	\$9,880.00	
3	Hole # 3 - First Left, Second Left, First Right, Second Right, Third Right	22835	Square Feet	\$2.47	\$56,402.45	
4	Hole # 5 Right Bunker	3275	Square Feet	\$2.47	\$8,089.25	
5	Hole # 6 Left Bunker	2845	Square Feet	\$2.47	\$7,027.15	
6	Hole # 8 First Right, Second Right	6375	Square Feet	\$2.47	\$15,746.25	
7	Hole # 9 First Left, Second Left	4540	Square Feet	\$2.47	\$11,213.80	
8	Hole # 10 First Left, Second Left, First Right, Second Right	7615	Square Feet	\$2.47	\$18,809.05	

#### SSS Down to Earth Opco, LLC Response

	Total				\$177,099.00	
13	Hole # 18 Left Bunker	1400	Square Feet	\$2.47	\$3,458.00	
12	Hole # 17 Left Bunker, First Right, Second Right, Third Right	8075	Square Feet	\$2.47	\$19,945.25	
11	Hole # 16 Left Bunker, Right Bunker	4650	Square Feet	\$2.47	\$11,485.50	
10	Hole # 12 Left Bunker	2550	Square Feet	\$2.47	\$6,298.50	
9	Hole # 11 Left Bunker	1600	Square Feet	\$2.47	\$3,952.00	

### Payment & Performance Bonds

Payment & Performance Percentage Bonds	Line Item	Description	Unit of Measure	Percentage	
	1		Percentage		0%