

Exhibit "B"

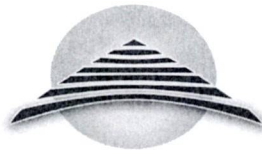
| Line Item | Description     | Quantity | Unit of Measure | Unit Cost   | Total       | No Bid | Vendor Notes              |
|-----------|-----------------|----------|-----------------|-------------|-------------|--------|---------------------------|
| 1         | Maxwell Park    | 1        | Lump sum        | \$23,670.00 | \$23,670.00 | FALSE  | Industrial Shadeports Inc |
| 2         | Josias Dog Park | 1        | Lump sum        | \$29,842.00 | \$29,842.00 | FALSE  | Industrial Shadeports Inc |
|           | Total           |          |                 |             | \$53,512.00 |        |                           |

| Line Item | Description     | Quantity | Unit of Measure | Unit Cost | Total  | No Bid | Vendor Notes           |
|-----------|-----------------|----------|-----------------|-----------|--------|--------|------------------------|
| 1         | Maxwell Park    |          | Lump sum        |           |        | TRUE   | No Additional Response |
| 2         | Josias Dog Park |          | Lump sum        |           |        | TRUE   | No Additional Response |
|           | Total           |          |                 |           | \$0.00 |        |                        |

# 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.                                                                                                                                                                                                                                                                                                                                                                               | Chip Breitweiser 954-755-0661<br>sales@shadeports.com |                                                                                                                                                                                                                                               | 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.                                                                                                                                                                                                                                                                                                                                                                       | Chip Breitweiser 954-755-0661<br>admin@shadeports.com |                                                                                                                                                                                                                                               | Complete |
| Organization Background                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.2.1                                                      | Please state the year that you company started its business.                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1993                                                  |                                                                                                                                                                                                                                               | Complete |
| 1.2.2                                                      | Please state the year that your company started providing service under your current business name.                                                                                                                                                                                                                                                                                                                                                                                                                    | 1993                                                  | Industrial Shadeports has been providing new shadeports, replacement service, covers, repairs, etc since our incorporation in 1993. While our incorporated name has changed over the years we have always had a dba as Industrial Shadeports. | Complete |
| 1.2.3                                                      | What State is your Company Registered In?                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Florida                                               |                                                                                                                                                                                                                                               | Complete |
| Former Business                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.3.1                                                      | Under what former name has your business operated? Include a description of the business.                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                       | Industrial Shadeports USA dba Industrial Shadeports. Sun Shade Inc dba Industrial Shadeports. Industrial Shadeports Inc. current since 11/1/2016                                                                                              | Complete |
| 1.3.2                                                      | At what address was that business located?                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                       | Pompano Beach, FL . Deerfield Beach, FL. Coral Springs, FL.                                                                                                                                                                                   | Complete |
| Past Failure                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.4.1                                                      | Have you ever failed to complete work awarded to you. If so, when, where and why?                                                                                                                                                                                                                                                                                                                                                                                                                                      | No                                                    |                                                                                                                                                                                                                                               | Complete |
| Inspected                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.5.1                                                      | Have you personally inspected the proposed WORK and do you have a complete plan for its performance?                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes                                                   |                                                                                                                                                                                                                                               | Complete |
| Subcontracting                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.6.1                                                      | Will you subcontract any part of this WORK? If you will be subcontracting any part of this work, provide details including a list of each sub-contractor(s) that will perform work in excess of ten percent (10%) of the contract amount and the work that will be performed by each subcontractor(s). (Note: The proposed list of subcontractor(s) may not be amended after award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.) | No                                                    |                                                                                                                                                                                                                                               | Complete |
| Bankruptcy Petitions                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.7.1                                                      | List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.                                                                                                                                                                                                                                      | None                                                  |                                                                                                                                                                                                                                               | Complete |
| Bond Claims                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.8.1                                                      | List and describe all successful Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).                                                                                                                                                                                                                                                                                            | None                                                  |                                                                                                                                                                                                                                               | Complete |
| Claims, Arbitrations, Administrative Hearings and Lawsuits |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |
| 1.9.1                                                      | List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last (10) years. The list shall include all case names; case, arbitration or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.                                                                                                                                       | None                                                  |                                                                                                                                                                                                                                               | Complete |
| Criminal Proceedings or Hearings                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                       |                                                                                                                                                                                                                                               |          |

|                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1.10.1                                    | List and describe all criminal proceedings or hearings concerning business related offenses in which the Proposer, its principals or officers or predecessor organization(s) were defendants.                                                                                                                                                                                                                                                                                                                                                                                         | None              |                                                                                                                                                                                      | Complete |
| <b>Company Classification</b>             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
| 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 |
| <b>Debarment/Suspension</b>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
| 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 |
| <b>Similar Experience &amp; Contracts</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | Over the past 3 years we have manufactured and installed structures for over 100 individual customers with approximately 75% of the customers being municipalities in South Florida. | Complete |
| <b>Professional License Information</b>   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
| 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        | CGC #:CGC1525577 CPSI #: 60331-327. RISC #: 2023-1649                                                                                                                                | Complete |
| <b>Conflict of Interest</b>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                                                                                                                                                                      |          |
| 1.15.1                                    | Do you need to disclose any conflicts of interest?<br>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 |
| <b>19 Questions</b>                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   | <b>100.00% Complete</b>                                                                                                                                                              |          |



**Industrial  
Shadeports**

## Sample Government Agency Reference List

### **REFERENCE ONE**

*Company/Entity Name: **City of Coral Springs***

*Address: 1300 Coral Springs Drive*

*City, State & Zip Code: Coral Springs, FL*

*Contact Person: Justin Ellis*

*Telephone: 954-344-1839*

*Email Address: [jellis@coralsprings.gov](mailto:jellis@coralsprings.gov)*

*Dates of Service: 1993-Present*

*Project Name: Multiple*

*Type of Service: Design, New Installations, Maintenance, Repair/Replacement, Replacement Parts and Service*

*Additional Comments: Current multi-year contract in place.*

### **REFERENCE TWO**

*Company Name: **School District of Palm Beach County***

*Address: 3300 Summit Blvd*

*City, State & Zip Code: West Palm Beach, FL*

*Contact Person: Dan Hughes*

*Telephone: 561-688-7526*

*Email Address: [dan.hughes@palmbeachschools.org](mailto:dan.hughes@palmbeachschools.org)*

*Dates of Service: 1998 - Present*

*Project Name: Multiple*

*Type of Service: Design, New Installations, Maintenance, Repair/Replacement, Replacement Parts and Service*

*Additional Comments: Current multi-year contract in place.*

### **REFERENCE THREE**

*Company Name: **City of Coconut Creek***

*Address: 4900 W. Copans Road*

*City, State & Zip Code: Coconut Creek, FL 33063*

*Contact Person: Brian Rosen*

*Telephone: 954-545-6614*

*Email Address: [BRosen@coconutcreek.net](mailto:BRosen@coconutcreek.net)*

*Dates of Service: 2000 - Present*

*Project Name: Multiple*

*Type of Service: Design, New Installations, Maintenance, Repair/Replacement, Replacement Parts and Service*

*Additional Comments: Current multi-year contract in place.*



**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

STANLEY BREITWEISER

Title

President

Name of Company

Indsutrial Shadeports





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

1. This sworn statement is submitted Industrial Shadeports  
(name of entity submitting sworn statement) whose business address is  
6600 NW 12th Ave Suite 220 Ft. Lauderdale, FL 33309  
and (if applicable) its Federal Employer Identification Number (FEIN) is  
81-4247013. (If the entity has no FEIN, include the Social Security  
Number of the individual signing this sworn statement: \_\_\_\_\_.)
2. My name is Stanley Breitwesier and my  
(Please print name of individual signing)  
relationship to the entity named above is President.
3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
4. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
  1. A predecessor or successor of a person convicted of a public entity crime: or
  2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Cityship by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a



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

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

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

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

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

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

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

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

STANLEY BREITWEISER

Bidder's Name/Signature

Industrial Shadeports

Company

9/20/2024

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;



City of Pembroke Pines

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☐ 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: Industrial Shadeports

AUTHORIZED OFFICER NAME / SIGNATURE: STANLEY BREITWEISER

A handwritten signature in blue ink, appearing to read "Stanley Breitweiser", written over a horizontal line.





## VENDOR DRUG-FREE WORKPLACE CERTIFICATION FORM

### SECTION 1 GENERAL TERM

Preference may be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

**IDENTICAL TIE BIDS** - Preference may be given to businesses with drug-free workplace programs. Whenever two or more bids that are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drugfree workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

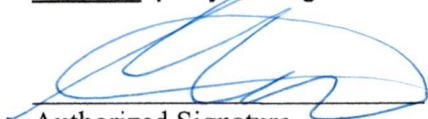
1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after each conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

### SECTION 2 AFFIRMATION

☒ Place a check mark here only if affirming bidder **complies fully** with the above requirements for a Drug-Free Workplace.

☐ Place a check mark here only if affirming bidder **does not** meet the requirements for a Drug-Free Workplace.

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

  
Authorized Signature

Stanley Breitweiser

Authorized Signer Name

Industrial Shadeports

Company Name



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

I, Stanley Breitweiser, on behalf of Industrial Shadeports,  
Print Name and Title Company Name  
certify that Industrial Shadeports:  
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.

Industrial Shadeports

Company Name

STANLEY BREITWEISER

Print Name / Signature

President

Title





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

1. Definitions:

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

2. Effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security’s E-Verify System to verify the employment eligibility of:

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

3. Contract Termination

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

Industrial Shadeports

COMPANY NAME: \_\_\_\_\_

Stanley Breitweiser

PRINTED NAME / AUTHORIZED SIGNATURE: \_\_\_\_\_



## VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE CERTIFICATION

### SECTION 1 GENERAL TERM

#### VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE

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).

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)**. This shall mean that if a **VOSB** submits a bid/quote that is within 2.5% of the lowest price submitted by any vendor, the **VOSB** shall have an option to submit another bid which is at least 1% lower than the lowest responsive bid/quote. If the **VOSB** submits a bid which is at least 1% lower than that lowest responsive bid/quote, then the award will go to the **VOSB**. If not, the award will be made to the vendor that submits the lowest responsive bid/quote. If the lowest responsive and responsible bidder is a "**Local Pembroke Pines Vendor**" (**LPPV**) or a "**Local Broward County Vendor**" (**LBCV**) as established in Section 35.36 of the City's Code of Ordinances, entitled "Local Vendor Preference", then the award will be made to that vendor and no other bidders will be given an opportunity to submit additional bids as described herein.

If there is a **LPPV**, a **LBCV**, and a **VOSB** participating in the same bid solicitation and all three vendors qualify to submit a second bid, the **LPPV** will be given first option. If the **LPPV** cannot beat the lowest bid received by at least 1%, an opportunity will be given to the **LBCV**. If the **LBCV** cannot beat the lowest bid by at least 1%, an opportunity will be given to the **VOSB**. If the **VOSB** cannot beat the lowest bid by at least 1%, then the bid will be awarded to the lowest bidder.

If multiple **VOSBs** submit bids/quotes which are within 2.5% of the lowest bid/quote and there are no **LPPV** or **LBCV** as described in Section 35.36 of the City's Code of Ordinance, entitled "Local Vendor Preference", then all **VOSBs** will be asked to submit a **Best and Final Offer (BAFO)**. The award will be made to the **VOSB** submitting the lowest **BAFO** providing that that **BAFO** is at least 1% lower than the lowest bid/quote received in the original solicitation. If no **VOSB** can beat the lowest bid/quote by at least 1%, then the award will be made to the lowest responsive bidder.

#### COMPARISON OF QUALIFICATIONS

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

### SECTION 2 AFFIRMATION

#### VETERAN OWNED SMALL BUSINESS (VOSB) PREFERENCE CERTIFICATION:

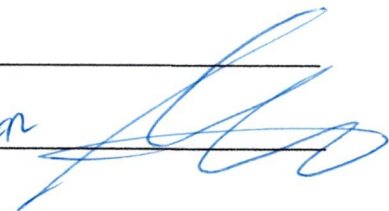
☐ Place a check mark here only if affirming bidder meets requirements above as a Veteran Owned Small Business. In addition, the bidder must attach the "Determination Letter" from the U.S. Dept. of Veteran Affairs Center.

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

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

COMPANY NAME: Industrial Shadeports

PRINTED NAME / AUTHORIZED SIGNATURE: STANLEY BREITWEIN







## LOCAL VENDOR PREFERENCE CERTIFICATION

### SECTION 1 GENERAL TERM

#### LOCAL PREFERENCE

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

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

OR;

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

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

#### COMPARISON OF QUALIFICATIONS

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

### SECTION 2 AFFIRMATION

#### LOCAL PREFERENCE CERTIFICATION:

- ☐ Place a check mark here only if affirming bidder meets requirements above as a Local Pembroke Pines Vendor. In addition, the business must attach a current business tax receipt from the City of Pembroke Pines along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- ☒ Place a check mark here only if affirming bidder meets requirements above as a Local Broward County Vendor. In addition, the business must attach a current business tax receipt from the Broward County or the city within Broward County where the business resides along with any previous business tax receipts to indicate that the business entity has maintained a permanent place of business for a minimum of one (1) year.
- ☐ Place a check mark here only if affirming bidder does not meet the requirements above as a Local Vendor.

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

COMPANY NAME: Industrial Shadeports

PRINTED NAME / AUTHORIZED SIGNATURE: STANLEY BREITWEISER

# BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

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

**VALID OCTOBER 1, 2023 THROUGH SEPTEMBER 30, 2024**

**DBA:**  
**Business Name:** INDUSTRIAL SHADEPORTS INC

**Receipt #:** 180-287741  
**Business Type:** GENERAL CONTRACTOR (GENERAL CONTRACTOR)

**Owner Name:** STANLEY BREITWEISER  
**Business Location:** 6600 NW 12 AVE STE 220  
FT LAUDERDALE  
**Business Phone:** 9547550661

**Business Opened:** 11/30/2017  
**State/County/Cert/Reg:** CGC1525577  
**Exemption Code:**

**Rooms**                      **Seats**                      **Employees**                      **Machines**                      **Professionals**  
4

| For Vending Business Only |              |         |         |               |                 |            |
|---------------------------|--------------|---------|---------|---------------|-----------------|------------|
| Number of Machines:       |              |         |         | Vending Type: |                 |            |
| Tax Amount                | Transfer Fee | NSF Fee | Penalty | Prior Years   | Collection Cost | Total Paid |
| 27.00                     | 0.00         | 0.00    | 0.00    | 0.00          | 0.00            | 27.00      |

Receipt Fee 27.00  
Packing/Processing/Canning Employees 0.00

**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS**

**THIS BECOMES A TAX RECEIPT**

**WHEN VALIDATED**

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

**Mailing Address:**

INDUSTRIAL SHADEPORTS INC  
6600 NW 12 AVE STE 220  
FORT LAUDERDALE, FL 33309

**Receipt #** 04A-22-00004591  
**Paid** 07/11/2023 27.00

**2023 - 2024**





**AFFIDAVIT OF COMPLIANCE WITH ANTI-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. 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.
4. The Affiant is authorized to execute this Affidavit on behalf of the Entity.

FURTHER AFFIANT SAYETH NAUGHT.

DATE: SEPT 23, 2024

ENTITY: INDUSTRIAL SHADPOOTS INC

NAME: STANLEY BREITWEISER

TITLE: PRESIDENT

STATE OF FLORIDA

COUNTY OF BROWARD

SWORN TO (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 23<sup>rd</sup> day of September 2024, by Stanley Breitweiser in his/her capacity as President for Industrial Shadpoats (name of Entity).

☒ Personally Known OR  
☐ Produced Identification

Type of Identification Produced

NOTARY PUBLIC



DANIELLE SHAW  
Notary Public  
State of Florida  
Comm# HH417471  
Expires 10/9/2027

Industrial Shadeports, Inc. Response

Pricing unsealed at Sep 24, 2024 2:31 PM

CONTACT INFORMATION

Company

Industrial Shadeports, Inc.

Email

sales@shadeports.com

Contact

Industrial Shadeports

Address

6600 NW 12th Ave

Unit 220

Fort Lauderdale, FL 33309

Phone

(954) 755-0661

Website

[www.Shadeports.com](http://www.Shadeports.com)

Submission Date

Sep 23, 2024 1:01 PM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

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. Project Documents

2.1. Proposers Background Information Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Proposers\\_Background\\_Information\\_Form.xlsx](#)

 [Proposers\\_Background\\_Information\\_Form\\_Industrial\\_Shadeports.xlsx](#)

2.2. References Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [References\\_Form.pdf](#)

 [References\\_Industrial\\_Shadeports.pdf](#)

2.3. Proposal Security (Bid Bond Form or Cashier's Check)

No response submitted

3. 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).

3.1. Non-Collusive Affidavit\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Non-Collusive\\_Affidavit.pdf](#)

 [Non-Collusive\\_Industrial\\_Shadeports.pdf](#)

### 3.2. Sworn Statement on Public Entity Crimes\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Sworn\\_Statement\\_on\\_Public\\_Entity\\_Crimes.pdf](#)

 [Sworn\\_Statement\\_Industrial\\_Shadeports.pdf](#)

### 3.3. Equal Benefits Certification Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Equal\\_Benefits\\_Certification\\_Form.pdf](#)

 [Equal\\_Benefits\\_Industrial\\_Shadeports.pdf](#)

### 3.4. Vendor Drug-Free Workplace Certification Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Vendor\\_Drug-Free\\_Workplace\\_Certification\\_Form.pdf](#)

 [Drug\\_Free\\_Industrial\\_Shadeports.pdf](#)

### 3.5. Scrutinized Company Certification\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Scrutinized\\_Company\\_Certification.pdf](#)

 [Scrutinized\\_Industrial\\_Shadeports.pdf](#)

### 3.6. E-Verify System Certification Statement\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [E-Verify\\_System\\_Certification\\_Statement.pdf](#)

 [E-Verify\\_Industrial\\_Shadeports.pdf](#)

### 3.7. Veteran Owned Small Business (VOSB) Preference Certification\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Veteran\\_Owned\\_Small\\_Business\\_\(VOSB\)\\_Preference\\_Certification.pdf](#)

 [Veteren\\_Owned\\_Industrials\\_Shadeports.pdf](#)

### 3.8. Determination Letter from the United States Department of Veteran Affairs Center

If claiming Veteran Owned Small Business Preference Certification, business must attach the "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).

*No response submitted*

### 3.9. Local Vendor Preference Certification\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Local\\_Vendor\\_Preference\\_Certification.pdf](#)

 [Local\\_Vendor\\_Industrial\\_Shadeports.pdf](#)

### 3.10. Local Business Tax Receipts

☒ Pass ☐ Fail

 [2024\\_Broward\\_Business\\_Tax\\_Receipt.pdf](#)

 [2023\\_Broward\\_Business\\_Tax\\_Receipt.pdf](#)

### 3.11. Anti-Human Trafficking Affidavit\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Anti-Human\\_Trafficking\\_Affidavit.pdf](#)

 [Human\\_Trafficking\\_Industrial\\_Shadeports.pdf](#)

## 4. Optional Documentation

### 4.1. Trade Secrets



- a. 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.
- b. 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.
- c. 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.
- d. 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

#### 4.2. Financial Statements

- a. The City is not requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
- b. 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

#### 4.3. Alternatives

- a. If you are submitting an alternative product, please upload any related information in this section (such as specification sheets, etc.).
- b. In addition, pursuant to **Section 3.7 "Brand Names,"** if and wherever in the specifications a brand name, make, name of manufacturer, trade name, or vendor catalog number is mentioned, it is for the purpose of establishing a grade or quality of material only. Since the City does not wish to rule out other competition and equal brands or makes, the phrase "OR EQUAL" is added. However, if a product other than that specified is bid, Proposers shall indicate on their proposal and clearly state the proposed substitution and deviation. It is the vendor's responsibility to provide any necessary documentation and samples within their bid submittal to prove that the product is equal to that specified. Such samples are to be furnished before the date of bid opening, unless otherwise specified. Additional evidence in the form of documentation and samples may be requested if the proposed brand is other than that specified. The City retains the right to determine if the proposed brand shall be considered as an approved equivalent or not.

No response submitted

#### 4.4. Additional Information

☒ Pass ☐ Fail

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.

 [Shadeports\\_Overview.pdf](#)

 [Cert\\_of\\_Ins - CITY OF PEMBROKE PINES.PDF](#)

 [City\\_of\\_Pembroke\\_Pines\\_WC\\_2025.pdf](#)

#### 4.5. Professional Licenses

No response submitted

#### 5. Vendor Classification

##### 5.1. Is your firm a Minority-Owned Business Enterprise (MBE)?\*

☒ Pass ☐ Fail

No, not a Minority Business Enterprise

##### 5.2. Is your firm a Woman-Owned Business Enterprise (WBE)?\*

☒ Pass ☐ Fail

No

##### 5.3. Is your firm a HubZone Business / Labor Surplus Area Firm?\*

☒ Pass ☐ Fail

No

##### 5.4. If you selected "yes" to any of the above questions, please provide current certificates from the agency(ies) that certified your vendor classification.

No response submitted

#### PRICE TABLES

## Primary Responses

| Line Item    | Description     | Quantity | Unit of Measure | Unit Cost   | Total              | No Bid | Vendor N...           |
|--------------|-----------------|----------|-----------------|-------------|--------------------|--------|-----------------------|
| 1.           | Maxwell Park    | 1        | Lump sum        | \$23,670.00 | \$23,670.00        |        | Industrial Shadeports |
| 2.           | Josias Dog Park | 1        | Lump sum        | \$29,842.00 | \$29,842.00        |        | Industrial Shadeports |
|              |                 |          |                 |             |                    |        |                       |
| <b>Total</b> |                 |          |                 |             | <b>\$53,512.00</b> |        |                       |

## Additional Responses

| Line Item    | Description     | Quantity | Unit of Measure | Unit Cost | Total         | No Bid | Vendor N...   |
|--------------|-----------------|----------|-----------------|-----------|---------------|--------|---------------|
| 1.           | Maxwell Park    |          | Lump sum        |           |               | ✓      | No Additional |
| 2.           | Josias Dog Park |          | Lump sum        |           |               | ✓      | No Additional |
|              |                 |          |                 |           |               |        |               |
| <b>Total</b> |                 |          |                 |           | <b>\$0.00</b> |        |               |

Industrial Shadeports, Inc. Response

Pricing unsealed at Sep 24, 2024 2:31 PM

CONTACT INFORMATION

Company

Industrial Shadeports, Inc.

Email

sales@shadeports.com

Contact

Industrial Shadeports

Address

6600 NW 12th Ave

Unit 220

Fort Lauderdale, FL 33309

Phone

(954) 755-0661

Website

[www.Shadeports.com](http://www.Shadeports.com)

Submission Date

Sep 23, 2024 1:01 PM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

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. Project Documents

2.1. Proposers Background Information Form\*

☒ Pass ☐ Fail

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 [Proposers\\_Background\\_Information\\_Form\\_Industrial\\_Shadeports.xlsx](#)

2.2. References Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

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 [References\\_Industrial\\_Shadeports.pdf](#)

2.3. Proposal Security (Bid Bond Form or Cashier's Check)

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3.1. Non-Collusive Affidavit\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Non-Collusive\\_Affidavit.pdf](#)



 [Non-Collusive\\_Industrial\\_Shadeports.pdf](#)

### 3.2. Sworn Statement on Public Entity Crimes\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

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 [Sworn\\_Statement\\_Industrial\\_Shadeports.pdf](#)

### 3.3. Equal Benefits Certification Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Equal\\_Benefits\\_Certification\\_Form.pdf](#)

 [Equal\\_Benefits\\_Industrial\\_Shadeports.pdf](#)

### 3.4. Vendor Drug-Free Workplace Certification Form\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Vendor\\_Drug-Free\\_Workplace\\_Certification\\_Form.pdf](#)

 [Drug\\_Free\\_Industrial\\_Shadeports.pdf](#)

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☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Scrutinized\\_Company\\_Certification.pdf](#)

 [Scrutinized\\_Industrial\\_Shadeports.pdf](#)

### 3.6. E-Verify System Certification Statement\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [E-Verify\\_System\\_Certification\\_Statement.pdf](#)

 [E-Verify\\_Industrial\\_Shadeports.pdf](#)

### 3.7. Veteran Owned Small Business (VOSB) Preference Certification\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Veteran\\_Owned\\_Small\\_Business\\_\(VOSB\)\\_Preference\\_Certification.pdf](#)

 [Veteren\\_Owned\\_Industrials\\_Shadeports.pdf](#)

### 3.8. Determination Letter from the United States Department of Veteran Affairs Center

If claiming Veteran Owned Small Business Preference Certification, business must attach the "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).

*No response submitted*

### 3.9. Local Vendor Preference Certification\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Local\\_Vendor\\_Preference\\_Certification.pdf](#)

 [Local\\_Vendor\\_Industrial\\_Shadeports.pdf](#)

### 3.10. Local Business Tax Receipts

☒ Pass ☐ Fail

 [2024\\_Broward\\_Business\\_Tax\\_Receipt.pdf](#)

 [2023\\_Broward\\_Business\\_Tax\\_Receipt.pdf](#)

### 3.11. Anti-Human Trafficking Affidavit\*

☒ Pass ☐ Fail

Please download the below documents, complete, and upload.

 [Anti-Human\\_Trafficking\\_Affidavit.pdf](#)

 [Human\\_Trafficking\\_Industrial\\_Shadeports.pdf](#)

## 4. Optional Documentation

### 4.1. Trade Secrets

- a. 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.
- b. 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.
- c. 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.
- d. 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

#### 4.2. Financial Statements

- a. The City is not requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
- b. 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

#### 4.3. Alternatives

- a. If you are submitting an alternative product, please upload any related information in this section (such as specification sheets, etc.).
- b. In addition, pursuant to **Section 3.7 "Brand Names,"** if and wherever in the specifications a brand name, make, name of manufacturer, trade name, or vendor catalog number is mentioned, it is for the purpose of establishing a grade or quality of material only. Since the City does not wish to rule out other competition and equal brands or makes, the phrase "OR EQUAL" is added. However, if a product other than that specified is bid, Proposers shall indicate on their proposal and clearly state the proposed substitution and deviation. It is the vendor's responsibility to provide any necessary documentation and samples within their bid submittal to prove that the product is equal to that specified. Such samples are to be furnished before the date of bid opening, unless otherwise specified. Additional evidence in the form of documentation and samples may be requested if the proposed brand is other than that specified. The City retains the right to determine if the proposed brand shall be considered as an approved equivalent or not.

No response submitted

#### 4.4. Additional Information

☒ Pass ☐ Fail

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.

 [Shadeports\\_Overview.pdf](#)

 [Cert\\_of\\_Ins - CITY OF PEMBROKE PINES.PDF](#)

 [City\\_of\\_Pembroke\\_Pines\\_WC\\_2025.pdf](#)

#### 4.5. Professional Licenses

No response submitted

#### 5. Vendor Classification

##### 5.1. Is your firm a Minority-Owned Business Enterprise (MBE)?\*

☒ Pass ☐ Fail

No, not a Minority Business Enterprise

##### 5.2. Is your firm a Woman-Owned Business Enterprise (WBE)?\*

☒ Pass ☐ Fail

No

##### 5.3. Is your firm a HubZone Business / Labor Surplus Area Firm?\*

☒ Pass ☐ Fail

No

##### 5.4. If you selected "yes" to any of the above questions, please provide current certificates from the agency(ies) that certified your vendor classification.

No response submitted

#### PRICE TABLES

## Primary Responses

| Line Item    | Description     | Quantity | Unit of Measure | Unit Cost   | Total              | No Bid | Vendor N...           |
|--------------|-----------------|----------|-----------------|-------------|--------------------|--------|-----------------------|
| 1.           | Maxwell Park    | 1        | Lump sum        | \$23,670.00 | \$23,670.00        |        | Industrial Shadeports |
| 2.           | Josias Dog Park | 1        | Lump sum        | \$29,842.00 | \$29,842.00        |        | Industrial Shadeports |
|              |                 |          |                 |             |                    |        |                       |
| <b>Total</b> |                 |          |                 |             | <b>\$53,512.00</b> |        |                       |

## Additional Responses

| Line Item    | Description     | Quantity | Unit of Measure | Unit Cost | Total         | No Bid | Vendor N...   |
|--------------|-----------------|----------|-----------------|-----------|---------------|--------|---------------|
| 1.           | Maxwell Park    |          | Lump sum        |           |               | ✓      | No Additional |
| 2.           | Josias Dog Park |          | Lump sum        |           |               | ✓      | No Additional |
|              |                 |          |                 |           |               |        |               |
| <b>Total</b> |                 |          |                 |           | <b>\$0.00</b> |        |               |