Exhibit "B"

Line			Unit of			
Item	Description	Quantity	Measure	Unit Cost	Total	Vendor Notes
	1 LED Ellipsoidal Fixture	14	Each	\$1,298.00	\$18,172.00	Ovation E-910FC
	2 LED Wash Fixture 18 LEDS	15	Each	\$568.00	\$8,520.00	ColorDash Par H12X IP
	3 LED Batten Stage Lighting Fixture 40" to 50" RGBAW	12	Each	\$988.00	\$11,856.00	Colorado Batten 72X
	4 LED moving yoke spot fixture, lightweight	4	Each	\$2,788.00	\$11,152.00	Rogue R3E Spot
	5 ETC Brand current Constant Current Modules	24	Each	\$260.00	\$6,240.00	ETC CC20
	6 Clamp medium duty	16	Each	\$8.50	\$136.00	Chauvet Lighting
	7 Half Coupler Clamp for spots	8	Each	\$18.50	\$148.00	Chauvet Lighting
	8 Data Stream	1	Each	\$158.00	\$158.00	Data Stream 4
	9 10' 5 pin DMX Cable shielded	40	Each	\$13.00	\$520.00	Chauvet Lighting
1	0 25' 5 pin DMX cable shielded	8	Each	\$22.50	\$180.00	Chauvet Lighting
1	1 100' 5 pin DMX cable shielded	1	Each	\$56.00	\$56.00	Chauvet Lighting
1	2 20 amp Stage pin male connector	45	Each	\$38.00	\$1,710.00	LEX A5016
1	3 Removal of Existing Fixtures and Accessories	1	Lump Sum	\$0.00	\$0.00	This work is included in the price of labor to install. Includes removal, cleaning and
1	4 Installation of New Fixtures and Accessories	1	Lump Sum	\$6,800.00	\$6,800.00	calibration. Also includes lift rental This work is included in the price
1	5 Calibration/Testing Total	1	Lump Sum	\$0.00	\$0.00 \$65,648.00	of the installation.

Exhibit "B"

Line			Unit of			
Item	Description	Quantity		Unit Cost	Total	Vendor Notes
1	. LED Ellipsoidal Fixture	14	Each	\$1,298.00	\$18,172.00	ElektraLite Stingray RGBW
2	LED Wash Fixture 18 LEDS	15	Each	\$498.00	\$7,470.00	Elektralite Ocular RGBWA
3	LED Batten Stage Lighting Fixture 40" to 50" RGBAW	12	Each	\$798.00	\$9,576.00	Elektralite Elektrabar
4	LED moving yoke spot fixture, lightweight	4	Each	\$2,788.00	\$11,152.00	Elektralite Aero
5	ETC Brand current Constant Current Modules	24	Each	\$260.00	\$6,240.00	ETC CC20
6	Clamp medium duty	16	Each	\$8.50	\$136.00	Chauvet Lighting
7	' Half Coupler Clamp for spots	8	Each	\$18.50	\$148.00	Chauvet Lighting
8	Data Stream	1	Each	\$158.00	\$158.00	Data Stream 4
g	10' 5 pin DMX Cable shielded	40	Each	\$13.00	\$520.00	Chauvet Lighting
10	25' 5 pin DMX cable shielded	8	Each	\$22.50	\$180.00	Chauvet Lighting
11	100' 5 pin DMX cable shielded	1	Each	\$56.00	\$56.00	Chauvet Lighting
12	20 amp Stage pin male connector	45	Each	\$38.00	\$1,710.00	LEX A5016
						This work is included with the
13	Removal of Existing Fixtures and Accessories	1	Lump Sum	\$0.00	\$0.00	installation
						Includes removal and calibration.
						Also includes the lift rental and
14	Installation of New Fixtures and Accessories	1	Lump Sum	\$6,800.00	\$6,800.00	additional hardware needed.
						This work is included with the
15	Calibration/Testing	1	Lump Sum	\$0.00	\$0.00	installation
	Total				\$62,318.00	

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.	James Watson / President James@asfproductions. net 786 488 6937		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.	James Watson / President James@asfproductions. net 786 488 6937		Complete
Organiza	tion Background			
1.2.1	Please state the year that you company started its business.	2012		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	2012		Complete
1.2.3	What State is your Company Registered In?	Florida		Complete
Former E	Business			
1.3.1	Under what former name has your business operated? Include a description of the business.	None		Complete
1.3.2	At what address was that business located?	N/A		Complete
Past Fail	ure	-		
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspecte	d			
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subcont	racting			
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.)			Complete
Bankrup	tcy Petitions			
1.7.1	List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.	None		Complete
Bond Cla	aims	i 		
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
Clai <u>ms,</u> /	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			

Exhibit "B"

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
Compan	y Classification			
1.11.1	In regards to the commodities/services proposed, which of the following best classifies your firm? If you selected any options besides \"Original Provider\" please explain.	Original Provider		Complete
Debarme	ent/Suspension			
1.12.1	Have you ever been debarred or suspended from doing business with any governmental agency? If you have been debarred or suspended from doing business with any governmental agency, please explain.	No		Complete
Similar Experience & Contracts				
1.13.1	Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.	FBC Lighing upgrade Calvary Christian technology insall		Complete
Professional License Information				
1.14.1	Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your company has that are required to provide these services.	Not Applicable		Complete
Conflict	of Interest	-		
1.15.1	Do you need to disclose any conflicts of interest? The award of any contract hereunder is subject to the provisions of Chapter 112, Florida Statutes. Proposers must disclose with their Proposal the name of any officer, director, partner, proprietor, associate or agent who is also an officer or employee of CITY or any of its agencies. Further, all Proposers must disclose the name of any officer or employee of CITY who owns, directly or indirectly, an interest of five percent (5%) or more in the Proposer's firm or any of its branches or affiliate companies.	No		Complete
	19 Questions	-	100.00% Complete	



NON-COLLUSIVE AFFIDAVIT

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

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

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

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

Printed Name/Signature

Title President

Name of Company ASF Productions, Inc.





and (if applicable) its Federal Employer Identification Number (FEIN) is _______. (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: ______.)

2. My name is ______ and my (Please print name of individual signing)

relationship to the entity named above is _____

- 3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), <u>Florida</u> <u>Statutes</u>, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
- 4. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), <u>Florida Statutes</u>, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
- 5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), <u>Florida Statutes</u>, means:
 - 1. A predecessor or successor of a person convicted of a public entity crime: or
 - 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Cityship by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a



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

- 6. I understand that a "person" as defined in Paragraph 287.133(1)(e), <u>Florida Statutes</u>, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
- 7. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

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

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

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

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

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

James Watson

Bidder's Name/Signature

Company

Date



EQUAL BENEFITS CERTIFICATION FORM FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

Except where federal or state law mandates to the contrary, a Contractor awarded a Contract pursuant to a competitive solicitation shall provide benefits to Domestic Partners and spouses of its employees, irrespective of gender, on the same basis as it provides benefits to employees' spouses in traditional marriages.

The Contractor shall provide the City and/or the City Manager or his/her designee, access to its records for the purpose of audits and/or investigations to ascertain compliance with the provisions of this section, and upon request shall provide evidence that the Contractor is in compliance with the provisions of this section upon each new bid, contract renewal, or when the City Manager has received a complaint or has reason to believe the Contractor may not be in compliance with the provisions of this section. Records shall include but not be limited to providing the City and/or the City Manager or his/her designee with certified copies of the Contractor's records pertaining to its benefits policies and its employment policies and practices.

The Contractor must conspicuously make available to all employees and applicants for employment the following statement:

"During the performance of a contract with the City of Pembroke Pines, Florida, the Contractor will provide Equal Benefits to its employees with spouses, as defined by Section 35.39 of the City's Code of Ordinances, and its employees with Domestic Partners and all Married Couples".

The posted statement must also include a City contact telephone number and email address which will be provided to each contractor when a covered contract is executed.

SECTION 1 DEFINITIONS

- 1. Benefits means the following plan, program or policy provided or offered by a contractor to its employees as part of the employer's total compensation package which may include but is not limited to sick leave, bereavement leave, family medical leave, and health benefits.
- 2. Cash Equivalent mean the amount of money paid to an employee with a domestic partner or spouse in lieu of providing benefits to the employee's domestic partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee for his or her spouse from a traditional marriage.
- **3.** Covered Contract means a contract between the City and a contractor awarded subsequent to the date when this section becomes effective valued at over \$25,000 or the threshold amount required for competitive bids as required in section 35.18(A) of the Procurement Code.
- 4. Domestic Partner shall mean any two (2) adults of the same or different sex who have registered as domestic partners with a governmental body pursuant to state or local law authorizing such registration, or with an internal registry maintained by the employer of at



least one of the domestic partners. A contractor may institute an internal registry to allow for the provision of equal benefits to employees with domestic partners who do not register their partnerships pursuant to a governmental body authorizing such registration, or who are located in a jurisdiction where no such governmental domestic partnership registry exists. A contractor that institutes such registry shall not impose criteria for registration that are more stringent than those required for domestic partnership registration by the City of Pembroke Pines.

- 5. Equal benefits means the equality of benefits between employees with spouses and/or dependents of spouses and employees with domestic partners and/or dependents of domestic partners, and/or between spouses of employees and/or dependents of spouses and domestic partners of employees and/or dependents of domestic partners.
- 6. **Spouse** means one member of a married pair legally married under the laws of any state within the United States of America or any other jurisdiction under which such marriage is legally recognized, irrespective of gender.
- 7. Traditional marriage means a marriage between one man and one woman.

SECTION 2 CERTIFICATION OF CONTRACTOR

The firm providing a response, by virtue of the signature below, certifies that it is aware of the requirements of Section 35.39 "City Contractors providing Equal Benefits for Domestic Partners and all Married Couples" of the City's Code of Ordinances, and certifies the following (**Check only one box below**):

- A. Contractor currently complies with the requirements of this section; or
- **B.** Contractor will comply with the conditions of this section at the time of contract award; or
- **C.** Contractor will not comply with the conditions of this section at the time of contract award: or
- **D.** Contractor does not comply with the conditions of this section because of the following allowable exemption (Check only one box below):

1. The Contractor does not provide benefits to employees' spouses in traditional marriages;

2. The Contractor provides an employee the cash equivalent of benefits because the Contractor is unable to provide benefits to employees' Domestic Partners or spouses despite making reasonable efforts to provide them. To meet this exception, the Contractor shall provide a notarized affidavit that it has made reasonable efforts to provide such benefits. The affidavit shall state the efforts taken to provide such benefits and the amount of the cash equivalent. Cash equivalent means the amount of money paid to an employee with a Domestic Partner or spouse rather than providing benefits to the employee's Domestic Partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee's spouse;



3. The Contractor is a religious organization, association, society, or any non-profit charitable or educational institution or organization operated supervised or controlled by or in conjunction with a religious organization, association, or society;

4. The Contractor is a governmental agency;

The certification shall be signed by an authorized officer of the Contractor. Failure to provide such certification (by checking the appropriate boxes above along with completing the information below) shall result in a Contractor being deemed non-responsive.

COMPANY NAME: _____

AUTHORIZED OFFICER NAME / SIGNATURE:



VENDOR DRUG-FREE WORKPLACE CERTIFICATION FORM

SECTION 1 GENERAL TERM

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

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

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

SECTION 2 AFFIRMATION

✓ Place a check mark here only if affirming bidder <u>complies fully</u> with the above requirements for a Drug-Free Workplace.

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

(mb



ASF Productions, Inc.

Authorized Signature

Authorized Signer Name

Company Name



SCRUTINIZED COMPANY CERTIFICATION PURSUANT TO FLORIDA STATUTE § 287.135.

I,	, on beh	alf of
,	Print Name and Title	Company Name
certify that		

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.

Company Name

Print Name / Signature

Title



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.

COMPANY NAME:

PRINTED NAME / AUTHORIZED SIGNATURE:

mo



AFFIDAVIT OF COMPLIANCE WITH HUMAN TRAFFICKING LAWS

In accordance with section 787.06 (13), Florida Statutes, the undersigned, on behalf of the entity listed below ("Entity"), hereby attests under penalty of perjury that:

1. The Affiant is an officer or representative of the Entity entering into an agreement with the City of Pembroke Pines.

The Entity does not use coercion for labor or services as defined in Section 787.06,
 Florida Statutes, entitled "Human Trafficking".

3. The Affiant is authorized to execute this Affidavit on behalf of the Entity.

4. I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

5. Pursuant to Sec. 92.525(2), Fla. Stat., under penalties of perjury, I declare that I have read the foregoing affidavit of compliance with Human Trafficking Laws and that the facts stated in it are true.

FURTHER AFFIANT SAYETH NAUGHT.

DATE:_____

ENTITY:_____

NAME:_____

TITLE:_____



VENDOR INFORMATION FORM

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

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

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

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

Please attach the print out from <u>https://dos.myflorida.com/sunbiz/</u> or the appropriate state showing your active registration and any applicable fictitious names that are registered.

Exhibit "B"

Form W-9
(Rev. March 2024)
Department of the Treasur
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Befor	e yo	ou be	gin.	Fo	r g	uic	lan	се	rela	ated	to	the	pu	rpos	se of	Fo	rm V	/-9	, see	e Ρι	ırpo	se	of	Foi	m,	be	low			

Business name/disregarded entity name if different from above

1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded
	entity's name on line 2.)

	-							
page 3.	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	on line 1. Check	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):				
l no		Individual/sole proprietor C corporation S corporation Partnership	Trust/estate	see instructions on page of.				
Print or type. c Instructions	Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.							
un Ins	Other (see instructions) code (if any)							
Specifi	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions							
See	5 Address (number, street, and apt. or suite no.). See instructions. Requester's name and address (optional)							
	6	City, state, and ZIP code						
	7	List account number(s) here (optional)						
Par	t I	Taxpayer Identification Number (TIN)						

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid					
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other					
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> . later.					
<i>m</i> , aco.	En	nplo			

later. For other r, see <i>How to get a</i>	or	
	Employer identification number]
llso What Name and]

security number

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

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Signature of U.S. person	Jon let
-------------------------------	---------

Date	2/24/2025
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW*9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification. New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000003905

Entity Name: ASF PRODUCTIONS, INC.

Current Principal Place of Business:

14250 SW 136 STREET SUITE # 19 MIAMI, FL 33186

Current Mailing Address:

1700 NW 97 AVE #228653 MIAMI , FL 33222 US

FEI Number: 45-4254480

Name and Address of Current Registered Agent:

WATSON, JAMES MICHAEL 14250 SW 136 STREET SUITE # 19 MIAMI, FL 33186 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	JAMES MICHAEL WATSON	04/02/2024
	Electronic Signature of Registered Agent	Date

Officer/Director Detail :

Title	PRESIDENT
Name	WATSON, JAMES MICHAEL
Address	14250 SW 136 STREET SUITE # 19
City-State-Zip:	MIAMI FL 33186

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: JAMES WATSON

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/02/2024 Date

OVERVIEW

Product Name Aero

Model Number AERO

Product Family Aero

Product Type(s) Moving Head

Applications Education, Entertainment, House of Worship, Live Events, Theater



Description

A professional-grade moving light fixture, the Aero is perfect for any environment requiring a mover at a competitive price point—from churches and schools to theaters, performing arts centers, and more—it is a full-featured tool that is compact enough for tight spaces but bright enough for large stages where strong intensity, reliability, and diversity are necessary.

SOURCE

Light Source

Number of Cells Single source

Light Engine Single 400W COB LED module Liquid-cooled engine Near-silent operation for quiet spaces

COLOR

Color Variations Cool White

Color Mixing CMY Color Mixing – 3 Dichroic Color Wheels: 1 for Deep Blues, 1 for Deep Reds, 1 for Greens

CRI or TM-30 98 CRI

Color Temperature CW = 9,000k Separate CTO Filter Channel = 3,200k

OPTICAL

Zoom Range Variable PC lensing range 4° to 35°

Pan and Tilt Pan (540°) and Tilt (270°) With Fine Tuning Channels, can be locked

Lens Options Zoom lens, frosted lens enabled via DMX

Effects Zoom, Focus, Frost Filter, Iris, Strobe, Five-Way Prism with Rotation

ELECTRICAL

Total Power Consumption (*This is not the in-rush current*) 600 watts (5 amps) @ 120v circuit

Voltage Range AC 100-250V – 50/60Hz

Input Method PowerCon for both in and through

CONTROL

DMX Profile & Manual Control *Please <u>email us</u> to request DMX Profiles and Photometrics*

Input Method DMX-512 (in and thru) via 3-pin or 5-pin XLR Built-in wireless DMX

RDM

Yes, Remote Device Management (RDM) and Micro C socket for an external power source, such as a mobile phone or external battery, also allow lighting designers and operators to set DMX channel assignments and set up menus without AC power.

Refresh Rate Adjustable PWM in 0.1K increments Local Control Yes

Display LCD with text display Lithium battery to set menus without AC power

UI Type 4-button navigation control

Dimming 16 bit, DMX controlled

PHYSICAL

Housing

Steel H frame chassis with ABS plastic outer surround

Materials

Steel, aluminum, and ABS plastic

Yoke

Standard U clamps with quarter turn cam locks

Dimensions

	Length	Width	Height	Weight
Fixture Only (Vertical)	16.1" (41 cm)	17" (43.2 cm)	27" (68.6 cm)	50 lbs / 22.7 Kgs
Fixture Only (Horizontal)	16.1" (41 cm)	19" (48.3 cm)	21" (53.3 cm)	50 lbs / 22.7 Kgs
Shipping Box	25" (63.5 cm)	23" (58.4 cm)	33" (84 cm)	50 lbs / 22.7 Kgs

REGULATORY

IP Rating IP20 (Indoor)

OPTIONS

Accessories

- (9) Interchangeable Static Gobos
- (7) Interchangeable Rotating Gobos with Fine Tuning (indexing included for rotating gobos, dimming, focus, pan, and tilt)

Fixture Color

Black (Other colors available by request)

elektraLite



ElektraBar

ELE792-10/25 (18) 12W RGBWAI LED Linear Strip

GENERAL INFORMATION

A powerful, full-featured linear strip fixture, the elektraLite **ElektraBar** is ready to bring rich vibrant color at a professional level. At the heart of the elektraLite **ElektraBar** are eighteen powerful 12-watt 6-in-1 LED's, consisting of a red, green, blue, white, amber, and indigo component.

The elektraLite **ElektraBar** is designed to deliver rich, vibrant colors you expect from an LED fixture, while still providing true, brilliant, tunable white. By mixing color internally, the **ElektraBar**'s sophisticated diffraction lensing system provide true, blended, single-color output. Because of this, the white is tunable with the amber and white LED components, and the color range for pastel and deep blues and purples is intensified with the indigo component. Ideal for all large surfaces, the **ElektraBar** is ready for action and performance reliability in any environment.

FEATURES

- LED technology; utilizing eighteen 12-watt 6-IN-1 LED's
- rich, vivid red, blue, green and white, with added amber for true white color toning, and indigo for pastel blending and well-rounded color saturation
- flicker-free on camera operation
- trunnions allow for floor mount as well as surface mounting with adjustable 120 degree swivel
- variable speed strobe effect from 1 to 25 fps
- sophisticated diffraction lensing system provide true, blended, single-color output
- up to six fixtures can be connected on one 20A circuit, and can be run in stand-alone or master/slave configuration, all with or without a control source, for fast, effective, and efficient operation
- available glare shield for beam control and focusing

ORDERING INFORMATION

ELE792-10 ELE792-25	ElektraBar Linear Strip 10° LM (black) ElektraBar Linear Strip 25° LM (black)
ELE796	4" adjustable Glare Shield / Beam Flange

Exhibit "B"

elektraLite

SPECIFICATIONS

Power Consumption	- 260 watts (2.0A)
Electrical	- multi-voltage; AC 100-240V – 50/60Hz
Housing	- gloss gray aluminum
Materials	- corrosion resistant hardware
Yoke	- rigid flat steel
Light Engine	- eighteen 12-watt LED emitters
Refresh Rate	- >800Hz
CRI	- 92
Optics / Lensing(s)	- Diffraction Lensing
Control	- DMX-512A (in and thru) via 5-pin XLR
Ratings / Certifications	 - IP65 (wet location) - pending ETL listing to UL1573

PHOTOMETRICS

Photometric data was taken with all channels at full, and reflects the output of the fixture with the lens installed as noted. Comparisons between fixtures should only be made with photometric data that incorporates the lensing system to be used.

Lens	Beam Angle	Field Angle	Candela (cd)	Field Lumens	Lumens per Watt
25°	29°	64°	87,993	2884	27.5

Lens	Beam Size at	Beam Size at	Beam Size at
	10' Throw (d)	20' Throw (d)	30' Throw (d)
25°	4'-9" X 9'-10"	12'-2" X 19'-8"	19'-2" X 25'-10"

To determine illumination in footcandles (fc) at any distance, divide candlepower (cd) by distance squared (fc=cd/(d^2). For Lux, multiply footcandles (fc) by 10.76.

DIMENSIONS CHART

Physi	cal Dimer	nsions	Shipping Dimensions				
Height	Length	Width	Height	Length	Width		
6"	39″	4″	7″	41"	8″		

ElektraBar

ELE792-10/25 (18) 12W RGBWAI LED Linear Strip

ACCESSORIES

Accessories Included with each ElektraBar are as follows:

(2) 120° swivel trunnion / mounting foot / wall bracket

(1) 12" power in cable

DMX PROFILE

From version 5 of **Elektrabar**, depending on personality chosen, the **ElektraBar** can be set for operation using either 6 or 10 channels of DMX. Consult the User Manual for further details.

	6 Channel Mode									
СН	ACTION DESCRIPTION	VALUE								
1	Red LED's	0-255								
2	Green LED's	0-255								
3	Blue LED's	0-255								
4	White LED's	0-255								
5	Amber LED's	0-255								
6	Indigo LED's	0-255								

WEIGHTS CHART

Wei	ght	Shipping Weight				
lbs	kgs	lbs	kgs			
17.0	7.7	18.0	8.2			

elektraLite ∞ Professional LED Lighting								
70 Sea Lane ∞ Farmingdale, New York ∞ 11735 ∞ 631.396.0184 ∞ MyElektraLite.com								
In a policy of continual improvement, specifications are subject to chanae. 9/16								

OVERVIEW

Product Name elektraLite Ocular

Model Numbers

OCULAR RGBW OCULAR RGBWA OCULAR WW OCULAR CW

Product Family eyeBall

Product Type(s) LED, Wash

Applications HOW, Live Events, Entertainment, Theater, Education

Description

The fixture utilizes a 100-watt COB led and is available as CW, WW, RGBW or RGBWA. The power input is by way of PowerCon in and through. Control is via 5-pin XLR in and through. The fixture has a manual zoom whose range is from 24.4 to 63.6 degrees. LCD display provides information concerning the menus, profiles and channel assignments for the fixture. Choices for mounting the fixture are many due to the fixture's 2-piece yoke system. The fixture features liquid cooling with a small near silent fan providing air movement to reduce dust build up internally. The body length is just 9 3/8" and the front lens diameter is a full 4 3/8" for maximum light output. The fixture's light can also be controlled via the optional barn door accessory.

SOURCE

Light Source

Number of Cells

Quad (RGBW) 5-in-1 (RGBWA) Single (Warm White) Single (Cool White)

Light Engine 100W COB LED

COLOR

Color Variations RGBW RGBWA WW CW

Color Mixing Available for all except WW & CW

CRI or TM-30 95 CRI

Color Temperature W= 3200k for WW

OPTICAL

Zoom Range 24.4 – 63.6

Lens Options Manual Zoom

Effects

Strobe, Multiple Built-in Shows (w/ Speed and Fade Adjustments), 3 Dimming Curves and 4 inbuilt Dimming fade controls

ELECTRICAL

Total Power Consumption Max 275 watts

Voltage Range 100-240V 50-60 Hz

Input Method PowerCon for both in and through

CONTROL

DMX Profile & Manual Control Please contact us at elektralitesupport@g1limited.com for DMX Profiles and Photometrics

Input Method DMX (5-pin) for both in and through

RDM Yes

Local Control Yes

Display LCD with text display

UI Type 4-button navigation control

SPECIFICATIONS

Angles

	Minimum	Maximum
Beam angle	24.4 degrees	51.0 degrees
Field angle	30.6 degrees	63.6 degrees

PHYSICAL

Dimensions

Front Lens Diameter 4 3/8"

	Length	Width	Height	Weight
Body Only	9 ¾"	10"	7 1⁄2"	7 LBS
Body + Yoke	13 ½"	10"	12"	8 LBS

OUTPUT

(All Lux figures are max output all colors)

RGBW

Minimum beam angle: 3500 Lux Maximum beam angle: 700 Lux

RGBWA

Minimum beam angle: 962 Lux Maximum beam angle: 250 Lux

WW

Minimum beam angle: 6700 Lux Maximum beam angle:1418 Lux

CW

Minimum beam angle: 6700 Lux Maximum beam angle:1418 Lux

OPTIONS

Accessories Barn doors

Fixture Color Black (Other colors available by request)

REGULATORY

IP Rating IP20 (Indoor)





LLIA002305-010

Indoor Distribution Photometry Test Report

Catalog Number: Stingray 350W RGBW Yoke mounted, black formed aluminum housing with sealed adjustable optical assembly, formed black aluminum snoot. Unknown number and type of LEDs. Proprietary LED driver, client states driver operating at 100% output.



Prepared For: Group One Ltd 70 Sea Lane Farmingdale, NY 11735, USA

Performance Summary										
Input Vo		Luminous Flux	3453.9 Lumens							
Input Cu	•	Total Efficacy								
Input Po		, Downward Flux	•							
Frequ	ency 60.00 Hz	Downward Flux	100.0 % of Total							
Power Fa	actor 0.992									
Current	THD 8.7 %									

This test report was issued by LightLab International Allentown, LLC without alterations or erasures.

Page 1 of 9

Test date: 02/09/2024 Report date: 02/19/2024

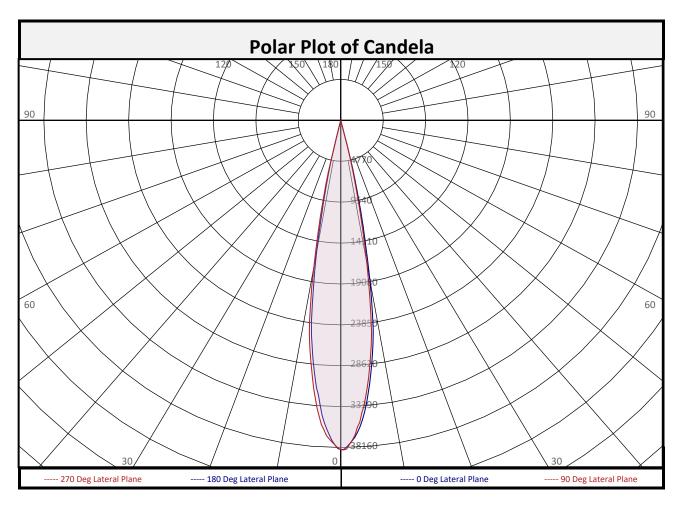
Signed:

Australasia & S.E. Asia LightLab International 50 Redcliffe Gardens Drive Clontarf - Queensland, 4019, Australia





LLIA002305-010



	Zonal Flux Summary												
Zone (Deg Vert)	Flux (Lumens)	Percent of Total		Zone (Deg Vert)	Flux (Lumens)	Percent of Total		Zone (Deg Vert)	Flux (Lumens)	Percent of Total			
0-10	2629	76.1%		90-100	0.0	0.0%		0-20	3454	100.0%			
10-20	824.5	23.9%		100-110	0.0	0.0%		0-30	3454	100.0%			
20-30	0.0	0.0%		110-120	0.0	0.0%		0-40	3454	100.0%			
30-40	0.0	0.0%		120-130	0.0	0.0%		0-60	3454	100.0%			
40-50	0.0	0.0%		130-140	0.0	0.0%		0-80	3454	100.0%			
50-60	0.0	0.0%		140-150	0.0	0.0%		10-90	824.5	23.9%			
60-70	0.0	0.0%		150-160	0.0	0.0%		20-50	0.0	0.0%			
70-80	0.0	0.0%		160-170	0.0	0.0%		40-90	0.0	0.0%			
80-90	0.0	0.0%		170-180	0.0	0.0%		60-90	0.0	0.0%			
0-90	3454	100.0%		90-180	0.0	0.0%		0-180	3454	100.0%			

North America (issuing laboratory) LightLab International Allentown, LLC 905 Harrison Street, Suite 135 Allentown, PA 18103 USA

Ph: +1 484-273-0705 Fx: +1 484-209-5779 www.lightlaballentown.com

Australasia & S.E. Asia LightLab International 50 Redcliffe Gardens Drive Clontarf - Queensland, 4019, Australia





LLIA002305-010

	Lateral (C-Plane) Angles									
		0	22.5	45	67.5	90	112.5	135	157.5	180
	0	38416	38416	38416	38416	38416	38416	38416	38416	38416
	2.5	36964	37161	37098	36900	36771	36452	36246	36033	36048
	5	33184	33113	33057	32767	32338	32006	31531	31314	31298
	7.5	27376	27342	27127	26797	26385	25973	25574	25278	25230
	10	18822	18423	18080	17712	17016	16170	15726	15580	15666
2.5° increments shown.	12.5	8878	8849	8477	7921	7547	7159	6463	6184	6379
sho	15	1	2	3	0	0	3	0	0	0
its :	17.5	0	0	0	0	0	0	0	0	0
ner	20	0	0	0	0	0	0	0	0	0
crer	22.5	0	0	0	0	0	0	0	0	0
inc	25	0	0	0	0	0	0	0	0	0
2.5°	27.5	0	0	0	0	0	0	0	0	0
	30	0	0	0	0	0	0	0	0	0
Data was acquired in 0.5° increments,	32.5	0	0	0	0	0	0	0	0	0
ren	35	0	0	0	0	0	0	0	0	0
inc	37.5	0	0	0	0	0	0	0	0	0
ت	40	0	0	0	0	0	0	0	0	0
0 u	42.5	0	0	0	0	0	0	0	0	0
edi	45	0	0	0	0	0	0	0	0	0
luir	47.5	0	0	0	0	0	0	0	0	0
aco	50	0	0	0	0	0	0	0	0	0
/as	52.5	0	0	0	0	0	0	0	0	0
s S	55	0	0	0	0	0	0	0	0	0
Dat	57.5	0	0	0	0	0	0	0	0	0
Vertical (Gamma) Angles -	60	0	0	0	0	0	0	0	0	0
Jgle	62.5	0	0	0	0	0	0	0	0	0
IA (65	0	0	0	0	0	0	0	0	0
ma	67.5	0	0	0	0	0	0	0	0	0
am	70	0	0	0	0	0	0	0	0	0
1 (G	72.5	0	0	0	0	0	0	0	0	0
cica	75	0	0	0	0	0	0	0	0	0
/ert	77.5	0	0	0	0	0	0	0	0	0
	80	0	0	0	0	0	0	0	0	0
	82.5	0	0	0	0	0	0	0	0	0
	85	0	0	0	0	0	0	0	0	0
	87.5	0	0	0	0	0	0	0	0	0
	90	0	0	0	0	0	0	0	0	0
			16 lateral half	-planes of dat	a were acquir	ed, 22.5 degr	ee increment	s shown.		





LLIA002305-010

	Lateral (C-Plane) Angles									
		0	22.5	45	67.5	90	112.5	135	157.5	180
	90	0	0	0	0	0	0	0	0	0
	92.5	0	0	0	0	0	0	0	0	0
	95	0	0	0	0	0	0	0	0	0
	97.5	0	0	0	0	0	0	0	0	0
	100	0	0	0	0	0	0	0	0	0
2.5° increments shown.	102.5	0	0	0	0	0	0	0	0	0
sho	105	0	0	0	0	0	0	0	0	0
its :	107.5	0	0	0	0	0	0	0	0	0
ner	110	0	0	0	0	0	0	0	0	0
crer	112.5	0	0	0	0	0	0	0	0	0
inc	115	0	0	0	0	0	0	0	0	0
2.5°	117.5	0	0	0	0	0	0	0	0	0
	120	0	0	0	0	0	0	0	0	0
เมอบ	122.5	0	0	0	0	0	0	0	0	0
ren	125	0	0	0	0	0	0	0	0	0
incı	127.5	0	0	0	0	0	0	0	0	0
.5	130	0	0	0	0	0	0	0	0	0
0 u	132.5	0	0	0	0	0	0	0	0	0
ed i	135	0	0	0	0	0	0	0	0	0
Juir	137.5	0	0	0	0	0	0	0	0	0
aco	140	0	0	0	0	0	0	0	0	0
/as	142.5	0	0	0	0	0	0	0	0	0
k K	145	0	0	0	0	0	0	0	0	0
Dat	147.5	0	0	0	0	0	0	0	0	0
Vertical (Gamma) Angles - Data was acquired in 0.5° increments,	150	0	0	0	0	0	0	0	0	0
ngle	152.5	0	0	0	0	0	0	0	0	0
) Ar	155	0	0	0	0	0	0	0	0	0
ma	157.5	0	0	0	0	0	0	0	0	0
am	160	0	0	0	0	0	0	0	0	0
I (G	162.5	0	0	0	0	0	0	0	0	0
cica	165	0	0	0	0	0	0	0	0	0
/ert	167.5	0	0	0	0	0	0	0	0	0
	170	0	0	0	0	0	0	0	0	0
	172.5	0	0	0	0	0	0	0	0	0
	175	0	0	0	0	0	0	0	0	0
	177.5	0	0	0	0	0	0	0	0	0
	180	0	0	0	0	0	0	0	0	0
		1	L6 lateral half	planes of dat	a were acquir	ed, 22.5 degr	ee increment	s shown.		





LLIA002305-010

					Latera	I (C-Plane)	Angles			
		180	202.5	225	247.5	270	292.5	315	337.5	0
	0	38416	38416	38416	38416	38416	38416	38416	38416	38416
	2.5	36048	36208	36333	36552	36809	36930	36996	36907	36964
	5	31298	31538	31879	32214	32603	32964	33298	33307	33184
	7.5	25230	25448	25668	26206	26595	27053	27281	27460	27376
	10	15666	15417	15900	16573	17289	18044	18409	19164	18822
۸n.	12.5	6379	6493	6640	7294	7857	8521	8744	8880	8878
2.5° increments shown.	15	0	2	0	0	2	2	0	1	1
its :	17.5	0	0	0	0	0	0	0	0	0
ner	20	0	0	0	0	0	0	0	0	0
rer	22.5	0	0	0	0	0	0	0	0	0
inc	25	0	0	0	0	0	0	0	0	0
2.5°	27.5	0	0	0	0	0	0	0	0	0
	30	0	0	0	0	0	0	0	0	0
lent	32.5	0	0	0	0	0	0	0	0	0
rem	35	0	0	0	0	0	0	0	0	0
incr	37.5	0	0	0	0	0	0	0	0	0
°.	40	0	0	0	0	0	0	0	0	0
n 0	42.5	0	0	0	0	0	0	0	0	0
Vertical (Gamma) Angles - Data was acquired in 0.5° increments,	45	0	0	0	0	0	0	0	0	0
uin	47.5	0	0	0	0	0	0	0	0	0
acq	50	0	0	0	0	0	0	0	0	0
/as	52.5	0	0	0	0	0	0	0	0	0
a v	55	0	0	0	0	0	0	0	0	0
Dat	57.5	0	0	0	0	0	0	0	0	0
- Si	60	0	0	0	0	0	0	0	0	0
gle	62.5	0	0	0	0	0	0	0	0	0
) Ar	65	0	0	0	0	0	0	0	0	0
ma	67.5	0	0	0	0	0	0	0	0	0
am	70	0	0	0	0	0	0	0	0	0
l (G	72.5	0	0	0	0	0	0	0	0	0
ica	75	0	0	0	0	0	0	0	0	0
/ert	77.5	0	0	0	0	0	0	0	0	0
	80	0	0	0	0	0	0	0	0	0
	82.5	0	0	0	0	0	0	0	0	0
	85	0	0	0	0	0	0	0	0	0
	87.5	0	0	0	0	0	0	0	0	0
	90	0	0	0	0	0	0	0	0	0
		-	16 lateral half	-planes of dat	a were acquir	ed, 22.5 degr	ee increment	s shown.		





LLIA002305-010

	Lateral (C-Plane) Angles									
		180	202.5	225	247.5	270	292.5	315	337.5	0
	90	0	0	0	0	0	0	0	0	0
	92.5	0	0	0	0	0	0	0	0	0
	95	0	0	0	0	0	0	0	0	0
	97.5	0	0	0	0	0	0	0	0	0
	100	0	0	0	0	0	0	0	0	0
NN.	102.5	0	0	0	0	0	0	0	0	0
sho	105	0	0	0	0	0	0	0	0	0
2.5° increments shown.	107.5	0	0	0	0	0	0	0	0	0
ner	110	0	0	0	0	0	0	0	0	0
rer	112.5	0	0	0	0	0	0	0	0	0
inc	115	0	0	0	0	0	0	0	0	0
2.5°	117.5	0	0	0	0	0	0	0	0	0
	120	0	0	0	0	0	0	0	0	0
Data was acquired in 0.5° increments,	122.5	0	0	0	0	0	0	0	0	0
ren	125	0	0	0	0	0	0	0	0	0
inc	127.5	0	0	0	0	0	0	0	0	0
.5	130	0	0	0	0	0	0	0	0	0
0 u	132.5	0	0	0	0	0	0	0	0	0
ed i	135	0	0	0	0	0	0	0	0	0
luir	137.5	0	0	0	0	0	0	0	0	0
aco	140	0	0	0	0	0	0	0	0	0
/as	142.5	0	0	0	0	0	0	0	0	0
k K	145	0	0	0	0	0	0	0	0	0
Dat	147.5	0	0	0	0	0	0	0	0	0
Angles -	150	0	0	0	0	0	0	0	0	0
ngle	152.5	0	0	0	0	0	0	0	0	0
) Ai	155	0	0	0	0	0	0	0	0	0
Vertical (Gamma)	157.5	0	0	0	0	0	0	0	0	0
iam	160	0	0	0	0	0	0	0	0	0
1 (G	162.5	0	0	0	0	0	0	0	0	0
tica	165	0	0	0	0	0	0	0	0	0
/erl	167.5	0	0	0	0	0	0	0	0	0
-	170	0	0	0	0	0	0	0	0	0
	172.5	0	0	0	0	0	0	0	0	0
	175	0	0	0	0	0	0	0	0	0
	177.5	0	0	0	0	0	0	0	0	0
	180	0	0	0	0	0	0	0	0	0
			16 lateral half-	planes of dat	a were acquir	ed, 22.5 degr	ee increment	s shown.		





LLIA002305-010

Coef	Coefficients of Utilization/Room Utilization - Zonal Cavity Method																			
Effec	Effective Floor Cavity Reflectance 0.20																			
RC		8	0				7	0				50			30			10		0
RW	70	50	30	10		70	50	30	10		50	30	10	50	30	10	50	30	10	0
RCR																				
0	119	119	119	119		116	116	116	116		111	111	111	106	106	106	102	102	102	100
1	116	115	113	112		114	112	111	110		109	108	107	105	104	104	102	101	101	99
2	114	111	109	107		112	109	108	106		106	105	104	104	103	101	101	100	99	98
3	112	108	106	104		110	107	105	103		105	103	101	103	101	100	101	99	98	97
4	110	106	103	101		108	105	103	101		103	101	100	101	100	98	100	99	97	96
5	108	104	101	99		107	103	101	99		102	100	98	100	99	97	99	98	97	96
6	107	102	100	98		106	102	99	97		101	98	97	100	98	96	99	97	96	95
7	105	101	98	96		104	101	98	96		100	97	96	99	97	95	98	96	95	94
8	104	100	97	95		103	99	97	95		99	96	95	98	96	95	97	95	94	94
9	103	99	96	94		102	98	96	94		98	95	94	97	95	94	96	95	94	93
10	102	98	95	94		101	97	95	93		97	95	93	96	94	93	96	94	93	92

For absolute test reports, RUs are expressed as a percentage of total lumen output. For relative test reports, CUs are expressed as a percentage of total lamp output. Calculations were based on published IES procedures, and are based on the zonal cavity method. Basic assumptions: 1) Room surfaces are lambertian reflectors. 2) Incident flux on each surface is uniformly distributed. 3) The room is spectrally neutral. When luminaires are not evenly distributed throughout the room, or do not exhibit lateral symmetry, CU values may differ from actual performance.

Circl	e of Light Plot				Spacing Criterion
		Illuminance		vel distance to illuminance (ft)	
	Height(ft)	at Nadir (fc)	0-180 deg	90-270 deg	0 deg: 0.3
	6.0	1067.1	1.96	1.97	90 deg: 0.3
	8.0	600.2	2.62	2.63	180 deg: 0.3
	10.0	384.2	3.27	3.29	270 deg: 0.3
	12.0	266.8	3.93	3.95	
	14.0	196.0	4.58	4.60	
	16.0	150.1	5.24	5.26	

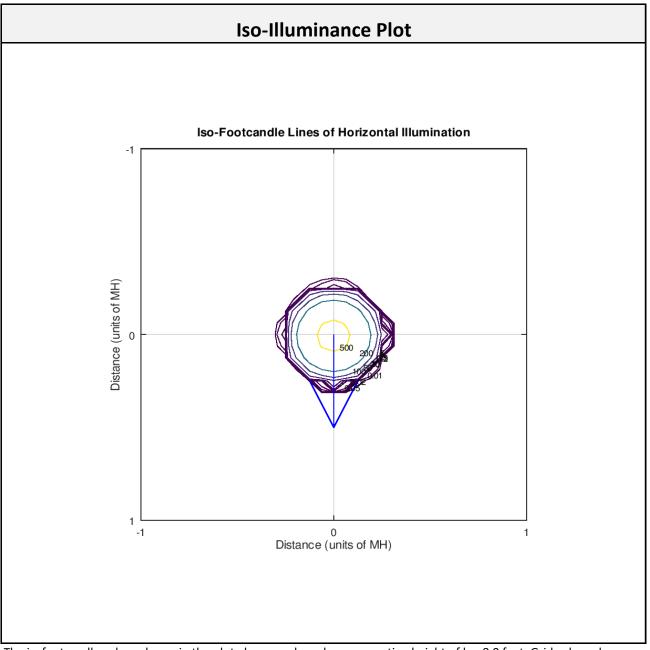
Average L	uminance (cd/	m²)		
	0 deg Plane	45 deg Plane	90 deg Plane	
0	3032574	3032574	3032574	
45	0	0	0	
55	0	0	0	
65	0	0	0	
75	0	0	0	
85	0	0	0	

Beam and Field Angle	
0-180 Degree Plane	
Beam Angle:	19.0°
Field Angle:	27.1°
90-270 Degree Plane	
Beam Angle:	19.1°
Field Angle:	27.0°





LLIA002305-010



The isofootcandle values shown in the plot above are based on a mounting height of h = 8.0 feet. Grid values show multiples of mounting height. The isoilluminance contour lines are expressed in units of footcandles. The values expressed are based on the direct light from a single unit without the contribution of room reflections.





LLIA002305-010

Test Distance	9.5 m
Ambient Temperature	25.6 °C

Notes

The laboratory has not participated in the selection of samples to be tested. All testing is performed on the understanding that the significance of the report is limited to the extent that the test sample is representative of production units.

Tested in accordance with the applicable sections of IES LM-79-19. Format of reports and angular increments based on IES LM-41-20 and LM-46-20.

The luminous intensity values, and other derived quantities, contained in this report are based on the absolute data, as measured.

Prorating the performance of the sample for the use of other component combinations (such as lamp / LED / Ballast / driver), or for use in different environmental conditions than that tested, may produce erroneous results.

This report is free of erasures and corrections.

Photometric intensity values are reported using the CIE C-Gamma coordinate system as defined in CIE publication number 121.

This report may contain data that are not covered by the NVLAP accreditation. Quantities marked with $\frac{1}{2}$ are not covered.

This report must not be used by the customer to claim product certification, approval or endorsement by NVLAP, NIST, or any agency of the Federal Government.

ASF Productions, Inc. Response

Pricing unsealed at Feb 25, 2025 2:30 PM

CONTACT INFORMATION

Company

ASF Productions, Inc.

Email

james@asfproductions.net

Contact

James Watson

Address

1700 NW 97 Ave. # 228653 Miami, FL 33222

Phone

(954) 653-8611

Website www.asfproductions.net

Submission Date Feb 25, 2025 11:54 AM (Eastern Time)

ADDENDA CONFIRMATION

Addendum #1 Confirmed Feb 18, 2025 3:01 PM by James Watson

Addendum #2 Confirmed Feb 19, 2025 7:44 PM by James Watson

Addendum #3 Confirmed Feb 24, 2025 11:40 PM by James Watson

QUESTIONNAIRE

1. CONFIRMATION TO BIND

1.1. I certify that I have read, understood and agree to the terms in this solicitation, and that I am authorized to submit this response on behalf of my company.*

Confirmed

2. REFERENCE # 1

The minimum experience for this project is **five (5) years**. Provide specific examples of similar experience conducting licensed work of equal or similar scope of work, preferably delivered by the proposed team members. A **minimum of 3** references should be from the last **five years** and should be capable of explaining and confirming your firm's capacity to successfully complete the scope of work outlined herein. As part of the proposal evaluation process, the City may conduct an investigation of references, including a record check or consumer affairs complaints. Proposers' submission of a proposal constitutes acknowledgment of the process and consent to investigate. The City is the sole judge in determining Proposers qualifications. In this section you will have the ability to enter information for 5 different references including their contact details and specific project information.

Please note that the City prefers references who are not current employees of the City of Pembroke Pines, as we generally do not contact our own employees for reference checks.

Proposers are advised to confirm that:

- 1. Each reference provided by the Respondent has up to date contact persons and contact information;
- 2. The contact person provided for each reference is someone who has personal knowledge of the Proposer's performance during the referenced project; and

🗸 Pass 🗌 Fail

 willingness to serve as a reference. 21. Reference Contact Information - Name of Firm, City, County or Agency* First Baptist Church at Weston, Weston, Broward County 22. Reference Contact Information - Reference's Business Address* 1420 Indian Trace, Weston, FL 33326 23. Reference Contact Information - Reference's Contact Name & Title* Joe Hill, Administrative Pastor 24. Reference Contact Information - Reference's E-mail Address* phill@firstbaptistweston.com 25. Reference Contact Information - Reference's Phone Number* (954) 389 4555 26. Project Information - Was your firm the prime contractor for the listed project?* Yes 27. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 28. Project Information - Name and location of the project* Lighting upgrade in main church building at Weston Florida. 	 Pass F
1420 Indian Trace, Weston, FL 33326 2.3. Reference Contact Information - Reference's Contact Name & Title* Joe Hill, Administrative Pastor 2.4. Reference Contact Information - Reference's E-mail Address* jhill@firstbaptistweston.com 2.5. Reference Contact Information - Reference's Phone Number* (954) 389 4555 2.6. Project Information - Was your firm the prime contractor for the listed project?* Yes 2.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	 Pass Pass Pass Pass Pass Pass Pass Fass Pass Fass Pass
Joe Hill, Administrative Pastor 2.4. Reference Contact Information - Reference's E-mail Address* jhill@firstbaptistweston.com 2.5. Reference Contact Information - Reference's Phone Number* (954) 389 4555 2.6. Project Information - Was your firm the prime contractor for the listed project?* Yes 2.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	 Pass F Pass F Pass F Pass F
jhill@firstbaptistweston.com 2.5. Reference Contact Information - Reference's Phone Number* (954) 389 4555 2.6. Project Information - Was your firm the prime contractor for the listed project?* Yes 2.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	 ✓ Pass □ F ✓ Pass □ F ✓ Pass □ F
(954) 389 4555 2.6. Project Information - Was your firm the prime contractor for the listed project?* Yes 2.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	✓ Pass □ F✓ Pass □ F
Yes 2.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	✓ Pass □ F
ASF Productions, Inc. 2.8. Project Information - Name and location of the project*	
	🗹 Pass 🗌 F
2.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for* Upgrade the old lighting system to a new lighting system. Taking sown the old lighting fixtures and replacing them with new LED fixtures. H point for new lighting connect everything with DMX, set up and program all the new lighting.	✓ Pass □ F Hang new hang
2.10. Project Information - Project Duration* 2 days	🗹 Pass 🗌 F
2.11. Project Information - Completion (Anticipated) Date* 06/07/2024	🗹 Pass 🗌 F
2.12. Project Information - Size of Project* Medium to large project this project took three guys two days to complete.	🗸 Pass 🗌 F
2.13. Project Information - Cost of Project* \$33,000.00	🗹 Pass 🗌 F
3. REFERENCE # 2	
3.1. Reference Contact Information - Name of Firm, City, County or Agency* Calvary Christian Academy Ft Lauderdale, Hollywood Broward County	🗹 Pass 🗌 F
3.2. Reference Contact Information - Reference's Business Address* 2401 W. Cypress Creek Rd. Ft Lauderdale FL 33309	🗹 Pass 🗌 F
3.3. Reference Contact Information - Reference's Contact Name & Title* Rick Geyer Head of IT	🗹 Pass 🗌 F
3.4. Reference Contact Information - Reference's E-mail Address* rickg@ccaeagles.org	🗹 Pass 🗌 F
3.5. Reference Contact Information - Reference's Phone Number* (954) 905-5163	🗹 Pass 🗌 F

ASF Productions, Inc. Response

Exhibit "B"

3.6. Project Information - Was your firm the prime contractor for the listed project?* Yes	V F	Pass	🗌 Fail
3.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc.	V F	Pass	🗌 Fail
3.8. Project Information - Name and location of the project* Smartboard Installation Ft Lauderdale / Hollywood Florida	V F	Pass	🗌 Fail
3.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*	V F	Pass	🗌 Fail
Sales and Installation of smartboards in classrooms. Mount brackets on walls at a specific height and level in classrooms, hang panels make is set up and operational.	sure	eve	rything
3.10. Project Information - Project Duration* 3 weeks	Z F	Pass	🗌 Fail
3.11. Project Information - Completion (Anticipated) Date* 8/10/2022	V F	Pass	🗌 Fail
3.12. Project Information - Size of Project* Large project mounting over 100 86" panels in classrooms in several building on two campuses.	V F	Pass	🗌 Fail
3.13. Project Information - Cost of Project* 265,000.00	V F	Pass	🗌 Fail
4. REFERENCE # 3			
4.1. Reference Contact Information - Name of Firm, City, County or Agency* USPS United States Postal Service Ft Lauderdale Broward County	V F	Pass	🗌 Fail
4.2. Reference Contact Information - Reference's Business Address* 1900 W Oakland Park Blvd. Ft Lauderdale FL 33310	V F	Pass	🗌 Fail
4.3. Reference Contact Information - Reference's Contact Name & Title* Jose Puig / Head of IT	V F	Pass	🗌 Fail
4.4. Reference Contact Information - Reference's E-mail Address* jose.r.puig@usps.gov	V F	Pass	🗌 Fail
4.5. Reference Contact Information - Reference's Phone Number* (954) 527-2901	V F	Pass	🗌 Fail
4.6. Project Information - Was your firm the prime contractor for the listed project?* Yes	V F	Pass	🗌 Fail
4.7. Project Information - Name of Contactor Performing the Work* ASF Productions, Inc.	V F	Pass	🗌 Fail
4.8. Project Information - Name and location of the project* Projector Installation at the main post of in Ft Lauderdale	V F	Pass	🗌 Fail
4.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for*	V F	Pass	🗌 Fail
Hang large projectors from the ceiling in a large breakout conference room. Position the projectors to screens around the room run all the dat commission the projectors to fit the image in the screens	a ca	bles	and
4.10. Project Information - Project Duration* 3 Days	V F	Pass	🗌 Fail
4.11. Project Information - Completion (Anticipated) Date*	V F	Pass	🗌 Fail

06/07/2022

Exhibit "B"

4.12. Project Information - Size of Project* Medium project three guys for three days	🗹 Pass 🗌 Fa
4.13. Project Information - Cost of Project* 26,000.00	🗹 Pass 🗌 Fa
5. REFERENCE # 4	
5.1. Reference Contact Information - Name of Firm, City, County or Agency	
No response submitted	
5.2. Reference Contact Information - Reference's Business Address	
No response submitted	
5.3. Reference Contact Information - Reference's Contact Name & Title	
No response submitted	
5.4. Reference Contact Information - Reference's E-mail Address	
No response submitted	
5.5. Reference Contact Information - Reference's Phone Number	
No response submitted	
5.6. Project Information - Was your firm the prime contractor for the listed project?	
No response submitted	
5.7. Project Information - Name of Contactor Performing the Work	
No response submitted	
5.8. Project Information - Name and location of the project	
No response submitted	
5.9. Project Information - Nature of the firm's responsibility on the project and work for which staff was responsible for	
No response submitted	
5.10. Project Information - Project Duration	
No response submitted	
5.11. Project Information - Completion (Anticipated) Date	
No response submitted	
5.12. Project Information - Size of Project	
No response submitted	
5.13. Project Information - Cost of Project	
No response submitted	
6. REFERENCE # 5	
6.1. Reference Contact Information - Name of Firm, City, County or Agency	
No response submitted	

6.2. Reference Contact Information - Reference's Business Address

No response submitted

6.3. Reference Contact Information - Reference's Contact Name & Title

No response submitted

6.4. Reference Contact Information - Reference's E-mail Address

No response submitted

6.5. Reference Contact Information - Reference's Phone Number

No response submitted

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

No response submitted

6.7. Project Information - Name of Contactor Performing the Work

No response submitted

6.8. Project Information - Name and location of the project

No response submitted

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

No response submitted

6.10. Project Information - Project Duration

No response submitted

6.11. Project Information - Completion (Anticipated) Date

No response submitted

6.12. Project Information - Size of Project

No response submitted

6.13. Project Information - Cost of Project

No response submitted

7. PROJECT DOCUMENTS

7.1. PROPOSERS BACKGROUND INFORMATION FORM*

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

Proposers Background Information Form (1).xlsx

x Proposers_Background_Information_Form_(1)_ROG.xlsx

8. STANDARD DOCUMENTS

The following documents are standard documents that the City generally requires for every solicitation. As a result, we recommend vendors to keep these documents updated and readily available so that they can be easily uploaded for each project that the vendor would like to participate in. In the event that the City does not have one of the forms or documents listed below for your company, the City may reach out to your company after the bid has closed to obtain the document(s).

8.1. NON-COLLUSIVE AFFIDAVIT*

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

Affidavit.pdf

🗹 Pass 🗌 Fail

🗸 Pass 🗌 Fail

Non-Collusive_Affidavit_ROG.pdf

Exhibit "B"

8.2. SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
Sworn_Statement_on_Public_Entity_Crimes.pdf	
B Sworn_Statement_on_Public_Entity_Crimes_(2)_ROG_(2).pdf	
8.3. EQUAL BENEFITS CERTIFICATION FORM*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
<u>Equal Benefits Certification Form.pdf</u>	
Equal_Benefits_Certification_Form_(4)_ROG_(1).pdf	
8.4. VENDOR DRUG FREE WORKPLACE CERTIFICATION*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
A Vendor Drug-Free Workplace Certification Form.pdf	
Vendor_Drug-Free_Workplace_Certification_Form.pdf	
8.5. SCRUTINIZED COMPANY CERTIFICATION*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
A Scrutinized Company_Certification.pdf	
Scrutinized_Company_Certification_(3)_ROG.pdf	
8.6. E-VERIFY SYSTEM CERTIFICATION*	🗹 Pass 🗌 Fail
 Please download the attached document, complete all required fields, and upload the completed form here. Effective January 1, 2021, pursuant to Section 448.095. Florida Statues, the City may not enter into a contract with a vendor/contractor/subcontractor unless that vendor/contractor/subcontractor is registered with and uses the E- Verify by the U.S. Department of Homeland Security ("DHS"). Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the 	y system administered by, contract with, or
<u>E-Verify_System_Certification_Statement.pdf</u>	
E-Verify_System_Certification_Statement_(5)_ROG.pdf	
8.7. HUMAN TRAFFICKING AFFIDAVIT*	🗹 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
A Human Trafficking Affidavit.pdf	
Human_Trafficking_Affidavit.pdf	
8.8. VENDOR INFORMATION FORM*	🗸 Pass 🗌 Fail
1. Please download the attached document, complete all required fields, and upload the completed form here.	
Vendor Information Form.pdf	
<u> Vendor_Information_Form_ROG_3.pdf</u>	
8.9. FORM W-9 (REVISED MARCH 2024)*	🗹 Pass 🗌 Fail
 Please download the attached document, complete all required fields, and upload the completed form here. Note - Please use the March 2024 version of the form as previously dated versions of this form may delay the procest to the selected vendor. 	ssing of any payments
B Form W-9 (Rev March 2024).pdf	

B Form_W-9_(Rev_March_2024)_(1).pdf

9. OPTIONAL DOCUMENTATION



9.1. TRADE SECRETS

- The Proposer's response to this solicitation is a public record pursuant to Florida law, which is subject to disclosure by the City under the State of Florida Public Records Law, Florida Statutes Chapter 119.07 ("Public Records Law"). The City shall permit public access to all documents, papers, letters or other material submitted in connection with this solicitation and the Contract to be executed for this solicitation, subject to the provisions of Chapter 119.07 of the Florida Statutes.
- 2. Any language contained in the Proposer's response to the solicitation purporting to require confidentiality of any portion of the Proposer's response to the solicitation, except to the extent that certain information is in the City's opinion a Trade Secret pursuant to Florida law, shall be void. If a Proposer submits any documents or other information to the City which the Proposer claims is Trade Secret information and exempt from Florida Statutes Chapter 119.07 ("Public Records Laws"), the Proposer shall clearly designate that it is a Trade Secret and that it is asserting that the document or information is exempt. The Proposer must specifically identify the exemption being claimed under Florida Statutes 119.07. The City shall be the final arbiter of whether any information contained in the Proposer's response to the solicitation constitutes a Trade Secret.
- 3. EXCEPT FOR CLEARLY MARKED PORTIONS THAT ARE BONA FIDE TRADE SECRETS PURSUANT TO FLORIDA LAW, DO NOT MARK YOUR RESPONSE TO THE SOLICITATION AS PROPRIETARY OR CONFIDENTIAL. DO NOT MARK YOUR RESPONSE TO THE SOLICITATION OR ANY PART THEREOF AS COPYRIGHTED. ALL DOCUMENTS THAT THE FIRM PURPORTS TO BE CONFIDENTIAL, PROPRIETARY OR A TRADE SECRET SHALL BE UPLOADED TO THE OPENGOV WEBSITE AS A SEPARATE ATTACHMENT, IN THIS SECTION, CLEARLY IDENTIFYING THE EXEMPTION BEING CLAIMED UNDER FLORIDA STATUTES 119.07.
- 4. The city's determination of whether an exemption applies shall be final, and the proposer agrees to defend, indemnify, and hold harmless the city and the city's officers, employees, and agent, against any loss or damages incurred by any person or entity as a result of the city's treatment of records as public records.

No response submitted

9.2. FINANCIAL STATEMENTS

- 1. The City is **NOT** requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
- 2. Any claim of confidentiality on financial statements must be asserted at the time of submittal. The firm must identify the specific statute that authorizes the exemption from the Public Records Law. Please note that the financial statement exemption provided for in Section 119.071(1)c, Florida Statutes only applies to submittals in response to a solicitation for a "public works" project.

No response submitted

9.3. ALTERNATIVES

🗹 Pass 🗌 Fail

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

elektraLite_Aero-Product-Specs_2024.pdf

- elektraLite_Ocular-Product-Specs.pdf
- ElektraBar-Data-Sheet-V2.pdf
- Elektralite_LLIA002305-010.pdf

9.4. ADDITIONAL INFORMATION

🗹 Pass 🗌 Fail

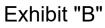
1. Please provide any additional information that you deem necessary to complete your proposal in this section, if it has not been requested in another section.

ASF_Annual_Report.pdf_2024.pdf

9.5. PROFESSIONAL LICENSES

- 1. If applicable, please upload any professional licenses that may be required to perform the services outlined in the solicitation. The following licensing requirements shall apply when the applicable Florida statute mandates specific licensing for Contractors engaged in the type of work covered by this solicitation.
 - A. State of Florida, Department of Professional Regulation, Construction Industries Licensing Board and licensed by other federal, state, regional, county or municipal agencies having jurisdiction over the specified construction work.

ASF Productions, Inc. Response



- B. Said licenses shall be in the Firm's name as it appears on the OpenGov registration and as appropriately registered with the applicable licensing entity. Proposer shall supply appropriate license numbers, with expiration dates, as part of their bid. Failure to hold and provide proof of proper licensing, certification and registration may be grounds for rejection of the bid.
- C. Subcontractors contracted by the Prime Contractor shall be licensed in their respective fields to obtain construction permits as necessary. Said licenses must be in the name of the subcontractor.

No response submitted

10. VENDOR CLASSIFICATION

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

🗸 Pass 🗌 Fail

- 1. The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:
 - 1. "Local Pembroke Pines Vendor" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines, **OR**;
 - 2. "Local Broward County Vendor" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.
- 2. A preference of five percent (5%) of the total evaluation point, or five percent (5%) of the total price, shall be given to the Local Pembroke Pines Vendor(s); A preference of two and a half percent (2.5%) of the total evaluation point for local, or two and a half percent (2.5%) of the total price, shall be given to the Local Broward County Vendor(s).

No

No

10.2. Is your firm a Veteran Owned Small Business (VOSB)?*

🗹 Pass 🗌 Fail

- 1. The evaluation of competitive bids is subject to section 35.37 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to veteran owned small businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with the following objective criteria as of the bid or proposal submission date stated in the solicitation. A veteran owned small business shall be defined as:
 - 1. **"Veteran Owned Small Business"** shall mean a business entity which has received a "Determination Letter" from the United States Department of Veteran Affairs Center for Verification and Evaluation notifying the business that they have been approved as a Veteran Owned Small Business (VOSB).
- 2. A preference of two and a half percent (2.5%) of the total evaluation point, or two and a half percent (2.5%) of the total price, shall be given to the Veteran Owned Small Business (VOSB).

10.3. Is your firm a Minority-Owned Business Enterprise (MBE)?* No	🗹 Pass 🗌 Fail
10.4. Is your firm a Woman-Owned Business Enterprise (WBE)?* No	🗹 Pass 🗌 Fail
10.5. Is your firm a HubZone Business / Labor Surplus Area Firm?* No	🗹 Pass 🗌 Fail
10.6. Is your firm a Broward County Small Business Enterprise (SBE)?* No	🗹 Pass 🗌 Fail
10.7. Is your firm a Broward County Business Enterprise (CBE)?* No	🗹 Pass 🗌 Fail
10.8. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?* No	🗹 Pass 🗌 Fail
10.9. Does your firm have a Vendor Classification that was not listed above?* No	🗹 Pass 🗌 Fail

Exhibit "B"

PRICE TABLES

Primary Responses

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N
1.	LED Ellipsoidal Fixture	14	Each	\$1,298.00	\$18,172.00	Ovation E- 910FC
2.	LED Wash Fixture 18 LEDS	15	Each	\$568.00	\$8,520.00	ColorDash Par H12X I
3.	LED Batten Stage Lighting Fixture 40" to 50" RGBAW	12	Each	\$988.00	\$11,856.00	Colorado Batten 72X
4.	LED moving yoke spot fixture, lightweight	4	Each	\$2,788.00	\$11,152.00	Rogue R3E Spot
5.	ETC Brand current Constant Current Modules	24	Each	\$260.00	\$6,240.00	ETC CC20
6.	Clamp medium duty	16	Each	\$8.50	\$136.00	Chauvet Lighting
7.	Half Coupler Clamp for spots	8	Each	\$18.50	\$148.00	Chauvet Lighting
8.	Data Stream	1	Each	\$158.00	\$158.00	Data Stream 4
9.	10' 5 pin DMX Cable shielded	40	Each	\$13.00	\$520.00	Chauvet Lighting
10.	25' 5 pin DMX cable shielded	8	Each	\$22.50	\$180.00	Chauvet Lighting
11.	100' 5 pin DMX cable shielded	1	Each	\$56.00	\$56.00	Chauvet Lighting
12.	20 amp Stage pin male connector	45	Each	\$38.00	\$1,710.00	LEX A5016
13	Removal of Existing Fixtures and Accessories	1	Lump Sum	\$0.00	\$0.00	This work i included ir
14	Installation of New Fixtures and Accessories	1	Lump Sum	\$6,800.00	\$6,800.00	Includes removal,
15	Calibration/Testing	1	Lump Sum	\$0.00	\$0.00	This work i included ir
	Total				\$65,648.00	

Alternate Responses

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N
1.	LED Ellipsoidal Fixture	14	Each	\$1,298.00	\$18,172.00	ElektraLite Stingray
2.	LED Wash Fixture 18 LEDS	15	Each	\$498.00	\$7,470.00	Elektralite Ocular
3.	LED Batten Stage Lighting Fixture 40" to 50" RGBAW	12	Each	\$798.00	\$9,576.00	Elektralite Elektrabar
4.	LED moving yoke spot fixture, lightweight	4	Each	\$2,788.00	\$11,152.00	Elektralite Aero
5.	ETC Brand current Constant Current Modules	24	Each	\$260.00	\$6,240.00	ETC CC20
6.	Clamp medium duty	16	Each	\$8.50	\$136.00	Chauvet Lighting
7.	Half Coupler Clamp for spots	8	Each	\$18.50	\$148.00	Chauvet Lighting

ASF Productions, Inc. Response

Exhibit "B"

	Total				\$62,318.00	
5	Calibration/Testing	1	Lump Sum	\$0.00	\$0.00	This work i included
4	Installation of New Fixtures and Accessories	1	Lump Sum	\$6,800.00	\$6,800.00	Includes removal
3	Removal of Existing Fixtures and Accessories	1	Lump Sum	\$0.00	\$0.00	This work i included
2.	20 amp Stage pin male connector	45	Each	\$38.00	\$1,710.00	LEX A5016
1.	100' 5 pin DMX cable shielded	1	Each	\$56.00	\$56.00	Chauvet Lighting
0.	25' 5 pin DMX cable shielded	8	Each	\$22.50	\$180.00	Chauvet Lighting
).	10' 5 pin DMX Cable shielded	40	Each	\$13.00	\$520.00	Chauvet Lighting
•	Data Stream	1	Each	\$158.00	\$158.00	Data Stream 4