

## City of Pembroke Pines

# Procurement

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

#### **EVALUATION TABULATION**

IFB No. PSPW-25-10

Academic Village Cooling Tower

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

#### PRIMARY RESPONSE

Vendor	Total
Con-Mech, Inc	\$487,663.85
Carrier Corporation	\$502,959.00
Coltec Engineering, Inc.	\$567,500.00
JCR Mechanical Contractor	\$622,400.00
RGEN Enterprises LLC	\$630,000.00
Blizzard Air Conditioning	\$687,450.00

### ALTERNATE RESPONSE

Vendor	Total
Coltec Engineering, Inc.	\$0.00
Con-Mech, Inc	\$0.00
JCR Mechanical Contractor	\$0.00
Carrier Corporation	\$502,959.00
RGEN Enterprises LLC	\$630,000.00
Blizzard Air Conditioning	\$687,450.00

Primary Response			Con-Mech, Inc	Carrier Corporation	Coltec Engineering, Inc.	JCR Mechanical Contractor	RGEN Enterprises LLC	Blizzard Air Conditioning
Description	Qty	UM	Total	Total	Total	Total	Total	Total
Lump Sum Cost for Turnkey Demolition & Installation	1	Lump Sum	\$487,663.85	\$502,959.00	\$567,500.00	\$622,400.00	\$630,000.00	\$687,450.00
Total			\$487,663.85	\$502,959.00	\$567,500.00	\$622,400.00	\$630,000.00	\$687,450.00

Alternate Response			Coitec Engineering,	Con-Mech, Inc	JCR Mechanical Contractor	Carrier Corporation	RGEN Enterprises LLC	Blizzard Air Conditioning
Description	Qty	UM	Total	Total	Total	Total	Total	Total
Lump Sum Cost for Turnkey Demolition & Installation (Alternate)	1	Lump Sum	\$0.00	\$0.00	\$0.00	\$502,959.00	\$630,000.00	\$687,450.00
Total			\$0.00	\$0.00	\$0.00	\$502,959.00	\$630,000.00	\$687,450.00

	Payment & Performance Bond		Blizzard Air Conditioning	Carrier Corporation	Coltec Engineering, Inc.	Con-Mech, Inc	JCR Mechanical Contractor	RGEN Enterprises LLC
Line Item	Description	UM	Percentage	Percentage	Percentage	Percentage	Percentage	Percentage
3-1	Cost to provide a Payment & Performance Bond for the project, in the form of a percent	Percent	3.%	5.%	1.5%	3.%	5.%	1.%

Question CONFIRMATION TO BIND	Con-Mech, Inc	Carrier Corporation	Coltec Engineering, Inc.	JCR Mechanical Contractor	RGEN Enterprises LLC	Blizzard Air Conditioning
I certify that I have read, understood and agree to the terms in this solicitation, and	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed
that I am authorized to submit this response on behalf of my company.  CERTIFICATION OF INSURANCE COMPLIANCE AND INTENT TO PROCURE REQUIRED						
COVERAGE  I certify that, if awarded this contract, I will be required to obtain and maintain all						
insurance policies as detailed in the INSURANCE REQUIREMENTS Section of this solicitation before any work may commence, and throughout the life of the contract.	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed
Do you confirm that you will only use insurance carriers licensed to do business in the State of Florida and rated no less than "A" as to management, and no less than "Class	Yes	Yes	Yes	Yes	Yes	Yes
VI" as to financial strength by A.M. Best, and that you understand all endorsements required (e.g., Additional Insured, Waiver of Subrogation, etc.) must be included?						
Do you currently carry insurance policies that meet or exceed the minimum requirements outlined in the INSURANCE REQUIREMENTS section of this solicitation?	Yes	Yes	Yes	Yes	Yes	No
Please upload your current certificate(s) of insurance that demonstrate compliance with the insurance requirements outlined in this solicitation.						
Please upload documentation showing that you have obtained a letter from your insurance broker or carrier, such as a Letter of Intent to Insure, Evidence of Insurability, or a Conditional Certificate of Insurance.						
Please upload your current certificate(s) of insurance.	Included	Included	Included	Included	Included	Included
Do you believe you are exempt from one or more insurance requirements (e.g., Workers' Compensation)?	No	No	No	No	No	No
Please upload written documentation requesting an exemption on your company letterhead, subject to City approval.						
Do you plan on using subcontractors for this project?  Do you acknowledge that all subcontractors must also carry the same insurance or be covered	Yes	Yes	Yes	No	Yes	No
under your policy, and that proof of such coverage must be provided to the City?	Yes	Yes	Yes		Yes	
PROJECT DOCUMENTS PROPOSERS BACKGROUND INFORMATION FORM	Included	Included	Included	Included	Included	Included
PROPOSAL SECURITY (BID BOND FORM OR CASHIER'S CHECK)	Included	Included	Included	Included	Included	Included
SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)						
SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM				Included - A. Neither the entity nor any officers who are acitve in management nor any affiliate have been charged		
Public Entity Crimes Status	with a public entity crime.  A) No convictions.	with a public entity crime.  A) No convictions.	with a public entity crime.  A) No convictions.	with a public entity crime.  A) No convictions.	with a public entity crime.  A) No convictions.	with a public entity crime.  A) No convictions.
Did you select option B1 or B2 above?	No	No	No	No	No	No
Please upload a copy of the final order issued by the hearing officer of the State of Florida, Division of Administrative Hearings.						
Did you select option B3 above? Please describe any action taken by or pending with the Department of General	No	No	No No	No No	No	No No
EQUAL BENEFITS CERTIFICATION FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES	Included - Currently Complies	Included - Currently Complies	Included - Currently Complies	Included - Currently Complies	Included - Currently Complies	Included - Currently Complies
EQUAL BENEFITS CERTIFICATION FORM  Equal Benefits Status	A) Contractor currently complies.	A) Contractor currently complies.	A) Contractor currently complies.	A) Contractor currently complies.	A) Contractor currently complies.	A) Contractor currently complies.
Did you select option D2 above?	No	No	No	No	No	No
Please upload a notarized affidavit detailing the reasonable efforts made to provide benefits to employees' Domestic Partners or spouses, along with the amount of the cash equivalent provided.						
DRUG-FREE WORKPLACE CERTIFICATION						
VENDOR DRUG FREE WORKPLACE CERTIFICATION FORM  Drug-Free Status	Complies fully.	Complies fully.	Complies fully.	Complies fully.	Complies fully.	Complies fully.
STANDARD DOCUMENTS						
NON-COLLUSIVE AFFIDAVIT  SCRUTINIZED COMPANY CERTIFICATION	Included Included	Included Included	Included Included	Included Included	Included Included	Included Included
E-VERIFY SYSTEM CERTIFICATION	Included	Included	Included	Included	Included	Included
HUMAN TRAFFICKING AFFIDAVIT	Included	Included	Included	Included	Included	Included
VENDOR REGISTRATION  Do you currently have a City of Pembroke Pines Vendor Number registered in the	Included	Included	Included	Included	Included	Included
PaymentWorks System?	No	Yes We received P.O.# 1500596 in the	No	No	No	No
What is your Vendor Number?		past so assuming YES, need to confirm Vendor number				
VENDOR INFORMATION FORM FORM W-9 (REVISED MARCH 2024)	Included Included	Included Included	Included Included	Included Included (Fail file)	Included Included	Included Included
OPTIONAL DOCUMENTATION	incidued	meidued	incidued	included (Fall file)	incidued	incidded
TRADE SECRETS						
FINANCIAL STATEMENTS						
ALTERNATIVES  ADDITIONAL INFORMATION	Sun Biz	Information Sheet	Annual Report N/A Trade Secret Letter	Annual Report	Annual Report Cool Water Presentation Everify online form	Bid Packet
PROFESSIONAL LICENSES	Mechanical Contractor License		Mechanical Contractor License		State Registration  Mechanical Contractor License	

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Question	Con-Mech, Inc	Carrier Corporation	Coltec Engineering, Inc.	JCR Mechanical Contractor	RGEN Enterprises LLC	Blizzard Air Conditioning
VENDOR CLASSIFICATION	21/2	21/2	21/2	21/2	21/2	21/2
Please indicate your Local Vendor Status	N/A	N/A	N/A	N/A	N/A	N/A
Local Vendor Preference Certification	N/A	N/A	N/A	N/A	N/A	N/A
Local Business Tax Receipts	N/A	N/A	N/A	N/A	Miami Dade - 09-30-25	N/A
Is your firm a Veteran Owned Small Business (VOSB)?	No	No	No	No	No	No
Upload the "Determination Letter" from the United States Department of Veteran						
Affairs Center notifying the business that they have been approved as a Veteran	N/A	N/A	N/A	N/A	N/A	N/A
Owned Small Business (VOSB)	21/2					
Upload Veteran Owned Small Business Certification(s) from any relevant agency(ies)	N/A	N/A	N/A	N/A	N/A	N/A
Is your firm a Minority-Owned Business Enterprise (MBE)?	No	No	Yes	No	Yes	Yes
Please indicate the classification of your Minority-Owned Business Enterprise (MBE)	N/A	N/A	Hispanic-American MBE	N/A	Hispanic-American MBE	Hispanic-American MBE
MBE Certification Documentation	N/A	N/A	Not Included	N/A	MBE Certification	MBE Certification
Is your firm a Woman-Owned Business Enterprise (WBE)?	No	No	No	No	No	No
WMBE Certification Documentation	N/A	N/A	N/A	N/A	N/A	N/A
Is your firm a HubZone Business / Labor Surplus Area Firm?	No	No	No	No	No	No
HubZone Business / Labor Surplus Area Firm Certification Documentation	N/A	N/A	N/A	N/A	N/A	N/A
Is your firm a Broward County Small Business Enterprise (SBE)?	No	No	No	No	No	No
SBE Cerification Documentation	N/A	N/A	N/A	N/A	N/A	N/A
Is your firm a Broward County Business Enterprise (CBE)?	No	No	No	No	No	Yes
CBE Certification Documentation	N/A	N/A	N/A	N/A	N/A	CBE Certification
Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?	No	No	No	No	No	Yes
DBE Certification Documentation	N/A	N/A	N/A	N/A	N/A	DBE Certification
Does your firm have a Vendor Classification that was not listed above?	No	No	No	No	No	No
Other Vendor Classification Certification Documentation	N/A	N/A	N/A	N/A	N/A	N/A
FEDERAL DOCUMENTS						
Certification Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters for Expenditure of Federal Funds	Included	Included	Included	Included	Included	Included
Are you currently registered as an active entity on SAM.gov (System for Award Management)?	Yes	Yes	Yes	No	Yes	Yes
If yes, please provide your Unique Entity ID (UEI)	PCFEMHYZWQS4	P9HAALQBATK6	UN3EE8BZGN45		We are in the process of acquiring this. We will provide ASAP. Spoke with Ivan over the phone 9/2/25.	Y7C5NQ9J6SN1
What is the expiration date of your current SAM.gov registration? (MM/DD/YYYY)	tbd	MAY 20TH, 2026	unknown		We are in the process of acquiring this. We will provide ASAP. Spoke with Ivan over the phone 9/2/25.	06-02-2026
Proof of Registration Upload	Included	Included	Included		Included	Included
Debarment Status - Is your entity currently debarred, suspended, or otherwise excluded from receiving federal contracts or financial assistance?	No	No	No	No	No	No
If yes, please provide an explanation.	N/A	N/A	N/A	N/A	N/A	N/A
If yes, please upload any relevant documentation, if applicable.	N/A	N/A	N/A	N/A	N/A	N/A
I certify that the information provided above is true and correct to the best of my knowledge. I understand that false or misleading statements may disqualify this bid and subject the entity to federal penalties.	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed	Confirmed