



INVITATION TO BID

The City of North Miami Beach



ITB NO:	2018-10
TITLE:	PORTABLE TRAFFIC SIGNAL
ADVERTISEMENT:	March 20, 2018
DEADLINE FOR QUESTIONS:	March 27, 2018 TIME: 5:00 PM
SUBMISSION DUE DATE:	April 3, 2018 TIME: 2:00PM EST
SUBMIT TO:	CITY OF NORTH MIAMI BEACH PROCUREMENT MANAGEMENT DIVISION ATTN: PROCUREMENT MANAGEMENT DIVISION 17011 NORTH EAST 19TH AVENUE ROOM 315 NORTH MIAMI BEACH, FL 33162
CITY COMMISSION RESOLUTION TO AWARD:	JUNE 2018

*DATES ARE TENTATIVE AND SUBJECT TO CHANGE

SECTION 4.0 BID SUBMITTAL – REQUIRED FORMS

NAME OF COMPANY:

Horizon Signal Technologies

(Name of company submitting bid)

SIGNATURE:

No.: 23-2851564
(Sign in Ink)

3/22/18

(date)

Matt Stubblefield Tax ID

(Print Name)

TITLE: Regional Manager E-MAIL ADDRESS:

mstubblefield@horizonsignal.com

ADDRESS:

5 Corporate Blvd. Reading, PA 19608

TELEPHONE NO.: 404. 782. 7765

FAX NO.: 717. 405. 3961

Do you give prompt payment discounts?

☐ Yes, Percentage of discount _____ % Term _____

☐ No

I certify that this Bid is made without prior understanding, agreement or connection with any corporation, firm, or person submitting a bid for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid and certify that I am authorized to sign this Bid for the Bidder.

(Signature)
(Sign in Ink)

Matt Stubblefield
(Print Name)

BID FORM 4.1

Item	Description of Item	Estimated Quantity	Unit of Measure	Unit Price	Extended Price
1	Trailer Mounted solar charged Portable Emergency Traffic Signal Systems, and associated equipment, Horizon Signal Technology SQ4 or approved equal.	2	each	\$26,000 \$25,000	\$52,000 \$50,000
	TOTAL BID AMOUNT				\$52,000 \$50,000

Firm's Name:

Horizon Signal Technologies

Authorized Signature:



Printed Name:

Matt Stubblefield

Title:

Regional Manager

THIS FORM IS REQUIRED.

SECTION 5.0 REQUIRED FORMS

5.1 STATEMENT OF “NO” BID

If your company will **not** be submitting a Bid in response to Invitation to Bid, please complete this Statement of “No” Bid Sheet and return, prior to the ITB Due Date established within, to:

**The City of North Miami Beach
Procurement Management Division, Room 315
17011 NE 19th Avenue
North Miami Beach, Florida 33162**

This information will help the City of North Miami Beach in the preparation of future Bids and RFP's.

Bid/RFP/RFQ Number: _____ Title _____

Company Name: _____

Contact: _____

Address: _____

Telephone: _____ Facsimile: _____

√	Reasons for “NO” Bid:
	Unable to comply with product or service specifications.
	Unable to comply with scope of work.
	Insufficient time to respond to the Bid.
	Our schedule would not permit us to perform.
	Unable to meet insurance requirements.
	Other (Specify below)

Comments:

5.2 ACKNOWLEDGEMENT OF ADDENDA

INSTRUCTIONS: COMPLETE PART I OR PART II, WHICHEVER APPLIES

PART I:

LIST BELOW THE DATES OF ISSUE FOR EACH ADDENDUM RECEIVED IN CONNECTION WITH THIS ITB.

Addendum #1, Dated _____

Addendum #2, Dated _____

Addendum #3, Dated _____

Addendum #4, Dated _____

Addendum #5, Dated _____

Addendum #6, Dated _____

Addendum #7, Dated _____

Addendum #8, Dated _____

PART II:

☒ NO ADDENDUM WAS RECEIVED IN CONNECTION WITH THIS ITB.

FIRM NAME: _____

AUTHORIZED SIGNATURE: _____ **DATE:** _____

TITLE OF OFFICER: _____

5.3 BID SIGNATURE PAGE FOR CORPORATION

The officers of the Corporation are as follows:

	NAME	ADDRESS
President	David Krahulec	5 Corporate Blvd. Reading, PA 19608
Vice-President	Jay Hunter	5 Corporate Blvd. Reading, PA 19608
Secretary	Al Voehringer	5 Corporate Blvd. Reading, PA 19608
Treasurer	Al Voehringer	5 Corporate Blvd. Reading, PA 19608
Registered Agent		

The full names and residences of stockbrokers, persons, or firms interested in the foregoing Bid, as principals, are as follows:

none

Post Office Address

BIDDER:

Horizon Signal Technologies
(CORPORATE NAME)

[Signature] dkrahulec@horizonsignal.com
PRESIDENT'S SIGNATURE AND E-MAIL ADDRESS

Is this corporation incorporated in the State of Florida? no

ATTEST: [Signature]
SECRETARY

YES [] NO [X]

If no, give address of principal place of business: 5 Corporate Blvd.
Reading, PA 19608

5.4 BID SIGNATURE PAGE FOR SOLE PROPRIETOR OR PARTNERSHIP


The full names and residences of persons, partners or firms interested in the foregoing Bid, as principals, are as follows:

none

BIDDER

Horizon Signal Technologies
(FIRM NAME)

Witnesses:

 (SEAL)
mstubblefield@horizonsignal.com
SIGNATURE AND E-MAIL ADDRESS
Matt Stubblefield
PRINT NAME

Title (Sole Proprietor or Partner)

Post Office Address:

5 Corporate Blvd
Reading, PA 404.782.7765 / 717.405.3961
TELEPHONE

CITY in which fictitious name is registered.

Attach a copy of proof of registration

5.5 DRUG-FREE WORKPLACE PROGRAM

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which 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 drug-free 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 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 employee 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 such 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.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

	
VENDOR'S SIGNATURE	PRINTED NAME
	
NAME OF COMPANY	

5.6 SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. - "No Public officer, employee of an agency, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the public officer, employee, or candidate would be influenced thereby." "... The term 'public officer' includes any person elected or appointed to hold office in any agency, including any person serving on an advisory body."

The City of North Miami Beach policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City does business. Only advertising office stationery or supplies of small value are exempt from this policy - e.g. calendars, note pads, pencils.


The State of Florida definition of "gifts" includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate of terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements

Services provided by persons pursuant to a professional license or certificate. Other personal services for which a fee is normally charged by the person providing the services. Any other similar service or thing having an attributable value not already provided for in this section. To this list, the City of North Miami Beach has added food, meals, beverages, and candy.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.

 _____ SIGNATURE	<u>Matt Stubblefield</u> _____ PRINTED NAME
<u>Horizon Signal Technologies</u> _____ NAME OF COMPANY	<u>Regional Manager</u> _____ TITLE

Failure to sign this page shall render your bid non-responsive.

5.7 SOURCE OF INFORMATION

How did you find out about this solicitation? Check all that applies.

- | | | |
|--------------------------------------|--|-----------------------|
| 1. www.Citynmb.com | <input checked="checked" type="checkbox"/> | |
| 2. www.demandstar.com | <input type="checkbox"/> | |
| 3. Daily Business Review | <input type="checkbox"/> | |
| 4. The Miami Herald | <input type="checkbox"/> | |
| 5. Referral/word-of-mouth | <input type="checkbox"/> | Specify Source: _____ |
| 6. Search Engine/Internet search | <input type="checkbox"/> | |
| 7. E-mail, newsgroup, online chat | <input type="checkbox"/> | Specify Source: _____ |
| 8. Banner or Link on another website | <input type="checkbox"/> | |
| 9. Flyer, newsletter, direct mail | <input type="checkbox"/> | Specify Source: _____ |
| Other | <input type="checkbox"/> | Specify Source: _____ |

Please note: This survey form is used for internal Procurement purposes only.

5.8 INDEMNIFICATION CLAUSE

The Contractor shall indemnify, defend and hold harmless the City Commission, the City of North Miami Beach and their agents and employees from and against all claims, damages, losses and expenses (including attorney's fees) arising out of or resulting from the contractor's performance of the work, provided that any such claim, damage, loss or expense (1) is attributable to bodily injury, sickness, disease or death, or to injury to or damage to or destruction of property including the loss of use resulting there from, and (2) is caused in whole or in part by any breach or default by Contractor or negligent act or omission of the Contractor, any Subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder.

Matt Stubblefield [Signature] 3/22/18
Bidder's Name Signature Date

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

SWORN TO AND SUBSCRIBED before me, the under signed authority,

Matt Stubblefield who, after first being sworn by me, affixed his/her
[name of individual signing]
signature in the space provided above on this 22 day of March, 20 18

[Signature]
NOTARY PUBLIC

Commonwealth of Pennsylvania

Notarial Seal
SCOTT A HEYDT - Notary Public
SOUTH HEIDELBERG TWP, BERKS COUNTY
My Commission Expires Apr 29, 2021

5.9 SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a), FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted to the **CITY OF NORTH MIAMI BEACH, FLORIDA**

By: Matt Stubblefield Regional Manager
(print individual's name and title)

For: Horizon Signal Technologies
(print name of entity submitting sworn statement)

whose business address is: 5 Corporate Blvd. Reading, PA 19608

and (if applicable) its Federal Employer Identification Number (FEIN) is: 23-2851564
(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: _____ - _____ - _____).

2. I understand that a "public entity crime" as defined in Paragraph 287.133 (1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentations.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133 (1) (b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or non contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
1. A predecessor or successor of a person convicted of a public entity crime; or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers' directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership 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.
5. I understand that a "person" as defined in Paragraph 287.133(1) (e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, and partners, shareholders, employees, members, and agents who are active in management of an entity.
6. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Indicate which statement applies).

City of North Miami Beach
ITB No. 2018-10
PORTABLE TRAFFIC SIGNAL

- ☐ Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.
- ☐ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the 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.
- ☐ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the 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. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list (attach a copy of the final order).

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.


Signature

Sworn to and subscribed before me this 22nd day March, 2018

Personally known X Scott A Heydt
OR _____ Name of Notary
Produced Identification _____ Notary Public - State of PA

5.10 ANTI-KICKBACK AFFIDAVIT

STATE OF FLORIDA }
 } SS:
COUNTY OF }

I, the undersigned, hereby duly sworn, depose and say that no portion of the sum herein bid will be paid to any employees of the City of North Miami Beach, as a commission, kickback, reward or gift, directly or indirectly by me or any member of my firm or by an officer of the corporation.

By: Matt Stubblefield
Title: Regional Manager

Sworn and subscribed before this

22 day of March, 2018

Scott A. Heydt
Notary Public, State of ~~Florida~~ Pennsylvania

Scott A. Heydt
(Printed Name)

My commission expires: April 29, 2021

Commonwealth of Pennsylvania

Notarial Seal
SCOTT A HEYDT - Notary Public
SOUTH HEIDELBERG TWP, BERKS COUNTY
My Commission Expires Apr 29, 2021

5.11 NON-COLLUSIVE AFFIDAVIT

Pennsylvania
STATE OF ~~FLORIDA~~ }
COUNTY OF Berks } SS:

Matthew Stubblefield being first duly sworn, deposes and says that:

- a) He/she is the Representative (Owner, Partner, Officer, Representative or Agent) of Horton Signal Tech. the Bidder that has submitted the attached Bid;
- b) He/she is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid;
- c) Such Bid is genuine and is not collusive or a sham Bid;
- d) Neither the said Bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, 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 Work for which the attached Bid has been submitted; or to refrain from proposing in connection with such work; or have in any manner, directly or indirectly, sought by person to fix the price or prices in the attached Bid or of any other Bidder, or to fix any overhead, profit, or cost elements 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 work;
- e) The price or prices quoted in the attached Bid are fair and proper and are not tainted by any 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 affiant.

Signed, sealed and delivered
in the presence of:

[Signature]
Witness

[Signature]
Witness

By: [Signature]

Scott Heydt
(Printed Name)

Director of Marketing
(Title)

ACKNOWLEDGMENT

STATE OF FLORIDA }
 } SS:
COUNTY OF }

BEFORE ME, the undersigned authority personally appeared
Matthew Stubblefield to me well known and known by me to be the person
described herein and who executed the foregoing Affidavit and acknowledged to and before me that
Matthew Stubblefield executed said Affidavit for the purpose therein
expressed.

WITNESS, my hand and official seal this 26th day of March, 2018.

My Commission Expires: April 29, 2021

Scott A Heydt
Notary Public State of Florida at Large
Pennsylvania

Commonwealth of Pennsylvania

Notarial Seal
SCOTT A HEYDT - Notary Public
SOUTH HEIDELBERG TWP, BERKS COUNTY
My Commission Expires Apr 29, 2021

5.12 BIDDER QUESTIONNAIRE

1. Today's Date: 3/23/2018
2. Name of Company Submitting Bidder: Horizon Signal Technologies
3. How many years has your firm been in business under its present business name? 29
3. Under what other former name(s) has your firm operated? none
4. Have any similar agreements held by Bidder for a similar project to the proposed project ever been canceled? Circle one: ☒ No Yes If yes, please explain: _____
5. Has the Bidder or any principals of the firm failed to qualify as a responsible Bidder, refused to enter into a contract after an award has been made, failed to complete a contract during the past five (5) years, or been declared to be in default in any contract in the last five (5) years? Circle one: ☒ No Yes
If yes, please explain: _____
6. Has the Bidder or any principals of the firm ever been declared bankrupt or reorganized under Chapter 11 or put into receivership? Circle one: ☒ No Yes
If yes, please explain and give date, court jurisdiction, action taken, and any other explanation deemed necessary: _____
7. Indicate registration, license numbers or certificate numbers for the businesses or professions, which are the subject of this ITB. Please attach certificate of competency and/or State registration. not applicable, FEIN: 23-2851564
Cert. of Insurance provided:
8. List the pertinent experience of the key individuals of your firm (continue on insert sheet if necessary):
Our firm has been
9. State the name and title of the individual who will have personal management of the work: Matt
Dave
Jay
10. State the name and address of attorney, if any, for the firm: Monica Reynolds
Connor-Weber + Oberlies
171 West Lancaster Ave Ste. 100
Paoli, PA 19301 (610) 640-3309

11. State the names and addresses of all businesses and/or individuals who own an interest of more than five percent (5%) of the Bidder's business and indicate the percentage owned of each such business and/or individual: Dave Krahulec 49%

Al Voe

12. State the names, addresses and the type of business of all firms that are partially or wholly owned by Bidder: Super Quartz LLC

5 Corporate

13. Bank references:

BANK NAME	ADDRESS (CITY, STATE, ZIP)	PHONE NUMBER
<u>Meridian Bank</u>	<u>9 Old Lincoln Hwy</u> <u>Malvern, PA 19355</u>	<u>866.327.9199</u>

14. Firm has attached a current Certificate of Liability Insurance? Yes No

15. Litigation/Judgements/Settlements/Debarments/Suspensions – Submit information on any pending litigation and any judgements and settlements of court cases relative to providing the services requested herein that have occurred within the last three (3) years. Also indicate if your firm has been debarred or suspended from bidding or proposing on a procurement project by any government entity during the last five (5) years. none

16. Disclosure of Conflict of Interest

VENDOR SHALL DISCLOSE BELOW, TO THE BEST OF HIS OR HER KNOWLEDGE, ANY CITY OF NORTH MIAMI BEACH OFFICER OR EMPLOYEE, OR ANY RELATIVE OF ANY SUCH OFFICER OR EMPLOYEE AS DEFINED IN SECTION 112.3135, FLORIDA STATUTES, WHO IS AN OFFICER, PARTNER, DIRECTOR OR PROPRIETOR OF, OR HAS A MATERIAL INTEREST IN THE VENDOR'S BUSINESS OR ITS PARENT COMPANY, ANY SUBSIDIARY, OR AFFILIATED COMPANY, WHETHER SUCH CITY OFFICIAL OR EMPLOYEE IS IN A POSITION TO INFLUENCE THIS PROCUREMENT OR NOT.

Name Relationship

none

Horizon Signal Technologies

FIRM NAME

[Signature]

SIGNATURE OF AUTHORIZED AGENT

Regional Manager

NAME & TITLE, TYPED OR PRINTED

City of North Miami Beach
ITB No. 2018-10
PORTABLE TRAFFIC SIGNAL

STATE OF Pennsylvania)
COUNTY OF Berks) SS

The foregoing instrument was sworn to and subscribed before me this 26th day of March, 2018 by
Matthew Stubblefield who is personally known to me or produced
_____ as identification.

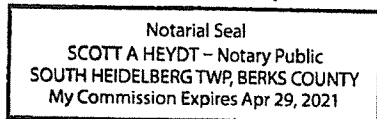
NOTARY PUBLIC, State of PA
Print Name: Scott Heydt

Commission No.: 1248783
Commission Expires: Apr 29 2021

SEAL

(if Corporation)

Commonwealth of Pennsylvania



5.13 BIDDER EXPERIENCE

Submit one form for each client reference. Understand that each client may be contacted to verify the validity of the partnership between the Bidder / Sub vendor and the client. If deemed necessary, a possible site visit will be conducted, at the sole expense of the City, to affirm the validity of the recommended vendor or solution desired.

Prime Bidder/Sub Vendor:

Horizon Signal Technologies- Prime Bidder

Client Name:

Address:

Client Contact name:

Title:

Phone number:

Email:

Duration of Client Relationship:

Date Started: _____ Date Ended: _____ for _____ Total Years.

Additional information (attach pages as necessary):

Describe the services provided; provide total value of the contract, result of the project and vendors role in the project, difficulties experienced during implementation or ongoing operations. If contract was terminated, state the reason for termination.