

**BIDDER CHECKLIST**

This checklist is provided to assist each Bidder in the preparation of their bid response. Included in this checklist are important requirements, which is the responsibility of each Bidder to submit with their response in order to make their response fully compliant. This checklist is only a guideline it is the responsibility of each Bidder to read and comply with the Invitation to Bid in its entirety.

1. Carefully read and become familiar with the Instructions to Bidders, General Provisions, Special Conditions and Technical Provisions, Permits, Inspections Reports, Surveys and Insurance Requirements.
2. Fill out and sign **Bid Form (acknowledge addenda, bond information, subcontractors and suppliers, if applicable).**
3. Fill out **Bid Price Schedule (unit prices must be filled in every block).** Excel Spreadsheet, do not PDF on USB Drive.
4. Fill out and sign the **Statement of Organization** and have it properly notarized.
5. Provide **State of Florida Registration (<http://www.sunbiz.org/search.html>)**
6. Fill out and sign the **Non-Collusive Affidavit** and have it properly notarized.
7. Fill out and sign the **Conflict of Interest Form**
8. Fill out the **Reference Form**
9. Fill out and Sign the **Vendor Drug Free Workplace Form.**
10. Fill out and Sign the **ONE (1) of the Local Preferences, if applicable, Read Completely**
11. Fill out and sign **Public Entity Crime Information**
12. Fill out and sign **No Lobbying Affidavit**
13. Provide **USB drive (pdf of submittal and excel spreadsheet of Bid Price Schedule)**
14. Fill out and sign the **SWORN STATEMENT: THE FLORIDA TRENCH SAFETY ACT**
15. Fill out, sign and notarize the **Scrutinized Company Certification Form**
16. Provide **any additional documentation requested** within the Bid Document.
17. Provide **BID BOND with Bid Packet. Use the City of North Port Form.**
18. **Submit ONE (1) Original AND ONE (1) Copy of submittal.**
19. **CREDIT CARDS** Does your company accept Credit Card Payments? (Credit card payments will be processed upon the City's inspection and acceptance of goods/services and receipt of invoice for payment. The City will not pay fees for credit card transactions).  
 YES     NO
20. Clearly mark the sealed bid with the **BID NUMBER AND BID NAME** on the outside of the package.

City of North Port  
 Finance Department/Purchasing Division  
 Keith Raney, Contract Administrator II  
 4970 City Hall, Suite 337  
 North Port, Florida 34286

RFB NO. 2020-39 2019 LIFT STATION REHABILITATION PROJECT

Date: 2/28/2020Signed (Person authorized to bind the company): Edward MitchellName (printed): Edward Mitchell Title: Vice President**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**BID FORM**  
**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

Name of Bidder: U.S. Water Services Corporation

Business Address: 4939 Cross Bayou Boulevard, New Port Richey, FL 34652

Telephone Number: (727) 848 8292 x 222 Fax Number: (727) 849 8860

E-mail Address: ccrego@uswatercorp.net

Contractor License #: CGC003307 (General Contractor) CUC1223914 (Underground Utility) copies attached

FEID #: 20-0008821

To the City Commission of the City of North Port pursuant to and in compliance with your notice inviting sealed bids (Invitation to Bid), Instructions to Bidders, and the other documents relating thereto, the undersigned bidder, having familiarized himself/herself with the terms of the Contract documents, local conditions affecting the performance of the Contract, and the cost of the work at the place where the work is to be done, hereby proposes and agrees to perform within the time stipulated in the Contract, including all of its component parts and everything required to be performed, and to provide and furnish any and all of the labor, material, tools, expendable equipment, and all utility and transportation services and design of certain items necessary to perform the Contract and complete in a workmanlike manner, all of the work required in connection with the construction of said work all in strict conformity with the plans and specifications and other Contract documents for the prices hereinafter set forth.

The undersigned, as bidder, does hereby declare that he has read the Request for Bids, Instructions to Bidders, General Provisions, Special Provisions, Technical Specifications & Conditions, Insurance Requirements, Bid Form, Permit Fees, Plan Revisions, Plans, grants, geotechnical reports and any other documentation for: RFB #2020-39 **2019 LIFT STATION REHABILITATION PROJECT** and further agrees to furnish all items listed on the attached Bid Form in accordance with the Lump Sum line items as indicated on the bid schedule form submitted. The above specified documents are herein incorporated into the Bid Form.

The undersigned as bidder, declares that the only persons or parties interested in this submittal as principals are those named herein; that this submittal is made without collusion with any person, firm, or corporation; and he/she proposes and agrees, if the proposal is accepted, that he/she will execute a Contract with the City in the form set forth in the Contract documents and that he/she will accept in full payment thereof the following prices, to wit:

**TOTAL BID PRICE:**  
 SEVEN HUNDRED THIRTY SEVEN THOUSAND THIRTY DOLLARS AND 08/100 \$ 737,030.08  
 (TYPE/PRINT) (NUMERIC)

Through the signing of this Bid Form, Bidder attests his/her bid is guaranteed for a period of not less than **NINETY (90) DAYS** from the date of the official bid opening.

Date: 2/28/2020

Signed (Person authorized to bind the company): 

Name (printed): Edward Mitchell Title: Vice President

The undersigned acknowledges receipt of the following addenda, and the cost, if any, of such revisions has been included in the bid price.

Addendum No.	1	Dated	1/28/2020	Addendum No.	2	Dated	1/30/2020
Addendum No.	3	Dated	2/3/2020	Addendum No.	4	Dated	2/13/2020
Addendum No.	5	Dated	2/18/2020	Addendum No.	6	Dated	2/25/2020
Addendum No.	7	Dated	2/26/2020	Addendum No.		Dated	

**BID BOND AND PERFORMANCE/PAYMENT BOND**

**BID BOND: ACCOMPANYING THIS PROPOSAL IS** "Bidder's Bond"  
 (insert: "cash", "bidder's bond", or "certified check", as the case may be) in an amount equal to at least 5% of the total amount of the bid, payable to the City of North Port. Cashier's checks will be returned to all bidders after award of bid. When supplying a bid bond please use the attached bid bond form.  
**Note: Failure to submit a bid bond will be cause for rejection of bid.**

The undersigned deposits the above-named security as a proposal guarantee and agrees that it shall be forfeited to the City as liquidated damages in case this proposal is accepted by the City and the undersigned fails to execute a contract with the City as specified in the contract documents accompanied by the required labor and material and faithful performance bonds with sureties satisfactory to the City, and accompanied by the required certificates of insurance coverage. Should the City be required to engage the services of an attorney in connection with the enforcement of this bid, bidder promises to pay City's reasonable attorneys' fees incurred with or without suit.

The undersigned agrees, if awarded this bid, to furnish a Performance and Payment Bond in the amount of 100% of the total project price within ten (10) calendar days after notification of award to the Purchasing Department. The undersigned shall be responsible and bear all costs associated to record Performance and Payment Bond with Sarasota County Clerk's Office. Receipt of said recording and a certified copy of the Bond shall be furnished to the Purchasing Division at the time of the pre-construction meeting.

**All contract documents (i.e.; performance and payment bond, cashier's check, bid bond) shall be in the name of "City of North Port".**

Date: February 28, 2020  
 Signed (Person authorized to bind the company): Edward Mitchell  
 Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**BID SHEET**  
**CITY OF NORTH PORT RFB NO. 2020-39 2019 LIFT STATION REHABILITATION PROJECT**

ITEM	DESCRIPTION	EST. QTY.	UNIT	UNIT PRICE	EXTENDED PRICE	
<b>LIFT STATION REHABILITATION</b>						
<b>2</b>	<b>Lift Station #8</b>	<b>SUBTOTAL</b>				
a.	Demolish and core existing valve vault	1	LS	5964.46	5964.40	
b.	Discharge piping, fittings and valves replacement	1	LS	27432.24	27432.24	
c.	Pump installation, including new discharge elbows	1	LS	11030.99	11030.99	
d.	Remove and replace guide rails	1	LS	2110.17	2110.17	
e.	Wetwell lining	1	LS	13229.00	13229.00	
<b>3</b>	<b>Lift Station #16</b>	<b>SUBTOTAL</b>				59766.79
a.	Demolish and core existing valve vault	1	LS	5964.40	5964.40	
b.	New pump installation, including discharge elbows	1	LS	8600.75	8600.75	
c.	Discharge piping, fittings and valves replacement	1	LS	27064.32	27064.32	
d.	New Pump Control Panel installation	1	LS	13365.00	13365.00	
e.	Remove and replace guide rails	1	LS	600.00	600.00	
f.	Wetwell lining	1	LS	14523.63	14523.63	
<b>4</b>	<b>Lift Station #25</b>	<b>SUBTOTAL</b>				70118.11
a.	Remove and replace access cover to wet well	1	LS	14557.90	14557.90	
b.	Pump installation, including new discharge elbows	1	LS	12201.20	12201.20	
c.	Demolish and core existing valve vault	1	LS	5964.40	5964.40	
d.	Discharge piping, fittings and valves replacement	1	LS	32698.78	32698.78	
e.	Wetwell lining	1	LS	21860.00	21860.00	
<b>5</b>	<b>Lift Station #40</b>	<b>SUBTOTAL</b>				87302.28
a.	Demolish and core existing valve vault	1	LS	5964.40	5964.40	
b.	Pump installation, including new discharge elbows	1	LS	8600.75	8600.75	
c.	Discharge piping, fittings and valves replacement	1	LS	25276.75	25276.75	
d.	Remove and replace guide rails	1	LS	2109.18	2109.18	
e.	Wetwell lining	1	LS	11960.50	11960.50	
<b>6</b>	<b>Lift Station #42</b>	<b>SUBTOTAL</b>				53911.59
a.	Demolish and core existing valve vault	1	LS	5964.40	5964.40	
b.	Pump installation, including new discharge elbows	1	LS	12159.36	12159.36	
c.	Discharge piping, fittings and valves replacement	1	LS	32620.03	32620.03	
d.	Remove and replace guide rails	1	LS	2109.18	2109.18	
e.	Wetwell lining	1	LS	15008.00	15008.00	
<b>7</b>	<b>Lift Station #82</b>	<b>SUBTOTAL</b>				67860.97
a.	Pump installation, including new discharge elbows	1	LS	25239.35	25239.35	
b.	Discharge piping, fittings and valves replacement	1	LS	55939.57	55939.57	
c.	Wetwell lining	1	LS	37126.12	37126.12	
<b>8</b>	<b>Lift Station #89</b>	<b>SUBTOTAL</b>				118305.04
a.	Pump installation, including new discharge elbows	1	LS	11072.83	11072.83	
b.	Discharge piping replacement	1	LS	15580.62	15580.62	
c.	Wetwell lining	1	LS	16303.79	16303.79	
<b>9</b>	<b>Lift Station #90</b>	<b>SUBTOTAL</b>				42957.23
a.	New pump installation, including discharge elbows	1	LS	11030.99	11030.99	
b.	Discharge piping replacement	1	LS	12617.02	12617.02	
c.	New Pump Control Panel installation	1	LS	13365.00	13365.00	
d.	Wetwell lining	1	LS	15232.85	15232.85	
<b>10</b>	<b>Lift Station #12</b>	<b>SUBTOTAL</b>				52245.86
a.	Demolish and remove existing concrete block building	1	LS	22839.50	22839.50	
b.	Install new ten (10') foot diameter wetwell riser section	1	LS	9551.00	9551.00	
c.	Furnish and install new wetwell concrete top and aluminum access cover	1	LS	10955.28	10955.28	

**BID SHEET**  
**CITY OF NORTH PORT RFB NO. 2020-39 2019 LIFT STATION REHABILITATION PROJECT**

ITEM	DESCRIPTION	EST. QTY.	UNIT	UNIT PRICE	EXTENDED PRICE
d.	Pump installation, including new discharge elbows	1	LS	11961.86	11961.86
e.	Remove and replace guide rails	1	LS	480.00	480.00
f.	Discharge piping, fittings and valves replacement	1	LS	28813.90	28813.90
g.	New Pump Control Panel installation	1	LS	48699.90	48699.90
h.	Wetwell lining	1	LS	16303.79	16303.79
1	<b>Mobilization/Demobilization (shall not exceed five percent (5%) of the sub-total of bid of Items 2-10)</b>			<b>SUBTOTAL</b>	133301.43
				<b>TOTAL:</b>	737030.08

**BID SHEET**  
**CITY OF NORTH PORT RFB NO. 2020-39 2019 LIFT STATION REHABILITATION PROJECT**

ITEM	DESCRIPTION	EST. QTY.	UNIT	UNIT PRICE	EXTENDED PRICE
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Date: Edward Mitchell 2/25/2020

Signed (Person authorized to bind the company):  
Edward Mitchell, Vice President

Name (printed):

**EQUIPMENT LIST**

Equipment is located at: U.S. Water Services Corporation, Fort Myers Office

The following is a listing of your equipment, inclusive of manufacturer, year and condition. Condition shall be listed in accordance with the following scale: **1-Excellent; 2-Good; 3-Fair; 4-Poor.** (Attach additional sheets, if required.)

Description	Manufacturer	Year	Condition	Leased/Owned (If leased, date of expiration)
Crane Truck	Auto Crane	2007	2	Owned
Mini Excavator	Bobcat	2007	2	Owned
Utility Trailer	Big Tex	2010	2	Owned

**SOURCE OF SUPPLY AND SUBCONTRACTOR FORM**

The following sources of supply and subcontractors shall be used for the **2020-39 2019 LIFT STATION REHABILITATION PROJECT**. If bidder does not have a source of supply or subcontractor, insert "to be determined". When a source or subcontractor is determined, selection will be subject to City approval. (If not applicable, state N/A).

**SUBCONTRACTOR(S)**

**(PLEASE INCLUDE ADDRESS/TELEPHONE NUMBER & E-MAIL)**

- BJ ENTERPRISES, 6581 SLATER PINES DR, N. FT. MYERS, FL 33917/239-731-2333  
*MIKE.FARRAR@BJENTERPRISES.COM*
- GML COATINGS, 10315 TECHNOLOGY TERRACE, LAKEWOOD RANCH, FL 34211/941-266-7761  
*MIKE@GMLCOATINGS.COM*
- MGE, 6130 NEAL RD, FT MYERS, FL 33905/239-841-3122 / MGELECTRICALDEVELOPERS@GMAIL.COM  
*MGELECTRICALDEVELOPERS@GMAIL.COM*
- \_\_\_\_\_

**SUPPLIER(S)**

- PASCO PIPE SUPPLY, INC. HUDSON FL 727-863-4339
- XYLEM WATER SYSTEM SOLUTIONS FT MYERS FL 239-693-5226
- \_\_\_\_\_
- \_\_\_\_\_

Date: February 28, 2020

Signed (Person authorized to bind the company): *Edward Mitchell*

Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**QUALIFICATIONS AND REFERENCES****(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

The Bidder (Company) shall have been in **COMMERCIAL CONSTRUCTION BUSINESS WITH EXPERIENCE** in projects involving waste water collection infrastructure or other similar structures. Bidder shall demonstrate successful completion of a minimum of four (4) projects completed within the past five (5) years of similar size and scope to the **2019 LIFT STATION REHABILITATION PROJECT**.

1. Business/Customer Name: City of North Port - City of North Port 2017 Lift Station Rehabilitation Project

Name of Contact Person/Title: Michael Acosta, P.E.

Telephone# (941) 240 8013 Fax (941) 240 8022 E-mail macosta@cityofnorthport.com

Address 644 Price Blvd., North Port FL 34291

Phone Number (941) 240 8013

Duration of Contract or business relationship 3/19/2018 - 02/04/2019  
 Type of Services Provided Construction work for eleven (11) sewer/wastewater lift stations and includes the rehabilitation of the piping, electrical/SCADA and pumps.

Contract Period: FROM 03/19/2018 TO 02/04/2019

Contract Price \$ 945,164.79 Contract Price at Completion of the Project \$ 974,250.97

2. Business/Customer Name: St Johns County BOCC - Ocean Gate, Atlantic Oaks, and Marsh Creek Lift Station Improvements

Name of Contact Person/Title: Scott Trigg, Engineering Dept.

Telephone# (904) 209 2614 Fax N/A E-mail strigg@sjcfl.us

Address 1205 SR 16, St. Augustine FL 32084

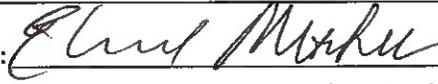
Phone Number (904) 209 2614

Duration of Contract or business relationship 09/18/2017 - 01/31/2019  
 Type of Services Provided Mobilization/demobilization, site work, force main piping, bypass pumping, rehabilitation of each lift station, all instrumentation and electrical, testing and all permits  
 Original Contract Price: \$410,514.00 Final Contract Price: \$420,104.94

3. Business/Customer Name: City of Cape Coral - City of Cape Coral Refurbishment of Lift Station 106, 112, 114, 124, 214 & 304

Name of Contact Person/Title: Tyler Wainright, P.E.

Date: 2/28/2020

Signed (Person authorized to bind the company): 

Name (printed): Edward Mitchell Title: Vice President

Telephone# (239) 277 5155 Fax N/A E-mail Tyler.wainright@tetrattech.com

Address 3501 Del Prado Blvd., Suite 210 Cape Coral FL 33904

Contract Period: FROM 10/3/2016 TO 03/22/2018

Contract Price \$ 1,008,077.69 Contract Price at Completion of the Project \$ 1,078,348.67

Phone Number (239) 277 5155

Duration of Contract or business relationship 10/3/2016 - 3/22/2018

Type of Services Provided Refurbishment of 6 Lift Station

Contract Period: FROM 10/3/2016 TO 3/22/2018

Contract Price \$ 1,008,077.69 Contract Price at Completion of the Project \$ 1,078,348.67

4. Business/Customer Name: City of North Port - Lift Station Rehabilitation Project 2017 Phase 1

Name of Contact Person/Title: Michael Vuolo, PM

Telephone# (941) 240 8001 Fax (941) 240 8022 E-mail mvuolo@cityofnorthport.com

Address 6644 Price Blvd., North Port FL 34291

Phone Number (904) 240 8001

Duration of Contract or business relationship 05/16/2017 - 08/14/2017

Type of Services Provided Rehabilitation of Multiple Lift Stations

Contract Period: FROM 5/16/2017 TO 08/14/2017

Contract Price \$ 175,594.07 Contract Price at Completion of the Project \$ 176,389.66

Date: 2/28/2020

Signed (Person authorized to bind the company) 

Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**STATEMENT OF ORGANIZATION**

**(Information Sheet for Transactions and Conveyances Corporation Identification)**

The following information will be provided to the City of North Port for incorporation in legal documents. It is; therefore, vital all information is accurate and complete. Please be certain all spelling, and capitalization is exactly as registered with the state or federal government.

**Company Name** U.S. Water Services Corporation

(727) 848 8292 x 222                      ccrego@uswatercorp.net                      (727) 849 8860

**Telephone #**    **E-Mail**    **Fax #**

4939 Cross Bayou Boulevard

**Main Office Address**

New Port Richey    FL    34652

**City**    **State**    **Zip Code**

**Address of Office Servicing City of North Port, if different than above:**  SAME AS ABOVE

5301 Dr Martin Luther King Jr. Blvd Unit 1

**Office Address**

Fort Myers    FL    33905

**City**    **State**    **Zip Code**

(239) 209 6120                      sstanton@uswatercorp.net                      (239) 543 2226

**Telephone #**    **E-mail**    **Fax #**

Edward Mitchell, Vice President

**Name & Title of Firm Representative**

**Federal Identification Number:** 20-0008821

Bidder shall submit proof that it is authorized to do business in the State of Florida unless registration is not required by law.

(Please Check One)

**Is this a Florida Corporation:**                       Yes                      or                       No

**If not a Florida Corporation,**  
In what state was it created: \_\_\_\_\_

Name as spelled in that State: \_\_\_\_\_

**What kind of corporation is it:**                       "For Profit"                      or                       "Not for Profit"

Is it in good standing:  Yes or  No

Authorized to transact business in Florida:  Yes or  No

State of Florida Department of State Certificate of Authority Document No.: 9754

Does it use a registered fictitious name:  Yes or  No

**Names of Officers:**

President: Gary Deremer Secretary: Edward Mitchell

Vice President: Edward Mitchell Treasurer: \_\_\_\_\_

Director: \_\_\_\_\_ Director: \_\_\_\_\_

Other: \_\_\_\_\_ Other: \_\_\_\_\_

**Name of Corporation (As used in Florida):**

U.S. Water Services Corporation

(Spelled exactly as it is registered with the state or federal government)

**Corporate Address:**

Post Office Box: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

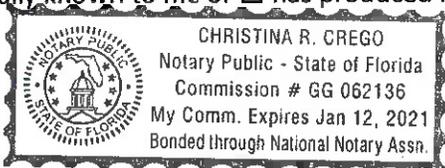
Street Address: 4939 Cross Bayou Boulevard

City, State, Zip: New Port Richey FL 34652

STATE OF FLORIDA

COUNTY OF PASCO

Sworn to and subscribed before me this 28<sup>th</sup> day of February, 2020, by Edward Mitchell who  is personally known to me or  has produced his/her driver's license as identification.



Christina R. Crego  
 Notary Public - State of Florida  
 Print Name: Christina R. Crego  
 Commission No: GG062136

Date: 2/28/2020

Signed (Person authorized to bind the company): Edward Mitchell

Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

# *State of Florida*

## *Department of State*

I certify from the records of this office that U.S. WATER SERVICES CORPORATION is a corporation organized under the laws of the State of Florida, filed on April 30, 2003, effective April 28, 2003.

The document number of this corporation is P03000047833.

I further certify that said corporation has paid all fees due this office through December 31, 2018, that its most recent annual report/uniform business report was filed on March 2, 2018, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Third day of April, 2018*



*Ken DeFina*  
*Secretary of State*

Tracking Number: CU6202381690

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



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Entity Name Search

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## Detail by Entity Name

Florida Profit Corporation

U.S. WATER SERVICES CORPORATION

### Filing Information

<b>Document Number</b>	P03000047833
<b>FEI/EIN Number</b>	20-0008821
<b>Date Filed</b>	04/30/2003
<b>Effective Date</b>	04/28/2003
<b>State</b>	FL
<b>Status</b>	ACTIVE
<b>Last Event</b>	AMENDMENT
<b>Event Date Filed</b>	09/25/2019
<b>Event Effective Date</b>	NONE

### Principal Address

4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Changed: 03/31/2004

### Mailing Address

4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Changed: 05/09/2005

### Registered Agent Name & Address

DEREMER, GARY A.  
4939 CROSS BAYOU BLVD.

NEW PORT RICHEY, FL 34652

Name Changed: 03/02/2018

Address Changed: 04/29/2009

**Officer/Director Detail**

**Name & Address**

Title CEO

DEREMER, GARY  
4939 CROSS BAYOU BLVD.  
NEW PORT RICHEY, FL 34652

Title VP

DELCHER, CECIL  
4939 CROSS BAYOU BLVD.  
NEW PORT RICHEY, FL 34652

Title VP

AMIOTT, RALPH  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP

KADER, MOHAMMED  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP, Secretary

Mitchell, Edward  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title CFO

RUPE, KAYCEE  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP

SALIBA, CHRIS  
4939 CROSS BAYOU BOULEVARD

NEW PORT RICHEY, FL 34652

Title VP

RENDELL, WILLIAM TROY  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP

DUPONT, JEFFREY  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP

VOSS, AARON  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

Title VP

SMITH, CARL  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY, FL 34652

### **Annual Reports**

<b>Report Year</b>	<b>Filed Date</b>
2017	04/24/2017
2018	03/02/2018
2019	04/04/2019

### **Document Images**

<a href="#">09/25/2019 -- Amendment</a>	<a href="#">View image in PDF format</a>
<a href="#">04/04/2019 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/02/2018 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/24/2017 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/15/2016 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">02/19/2015 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">02/26/2014 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/18/2013 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/19/2012 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
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	<a href="#">View image in PDF format</a>

<a href="#">04/02/2010 -- ANNUAL REPORT</a>	
<a href="#">04/29/2009 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/31/2008 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/30/2007 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/30/2006 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">05/09/2005 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/31/2004 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">08/07/2003 -- Amendment</a>	<a href="#">View image in PDF format</a>
<a href="#">06/09/2003 -- Off/Dir Resignation</a>	<a href="#">View image in PDF format</a>
<a href="#">04/30/2003 -- Domestic Profit</a>	<a href="#">View image in PDF format</a>

[Previous On List](#)   
 [Next On List](#)   
 [Return to List](#)

Entity Name Search

[Events](#)   
**No Name History**

**CONFLICT OF INTEREST FORM**

F.S. §112.313 places limitations on public officers (including advisory board members) and employees' ability to contract with the City either directly or indirectly. Therefore, please indicate if the following applies:

**PART I.**

- I am an employee, public officer or advisory board member of the City  
\_\_\_\_\_ (List Position Or Board)
- I am the spouse or child of an employee, public officer or advisory board member of the City  
Name: \_\_\_\_\_
- An employee, public officer or advisory board member of the City, or their spouse or child, is an officer, partner, director, or proprietor of Respondent or has a material interest in Respondent. "Material interest" means direct or indirect ownership of more than 5 percent of the total assets or capital stock of any business entity. For the purposes of [§112.313], indirect ownership does not include ownership by a spouse or minor child.  
Name: \_\_\_\_\_
- Respondent employs or contracts with an employee, public officer or advisory board member of the City  
Name: \_\_\_\_\_
- None of The Above

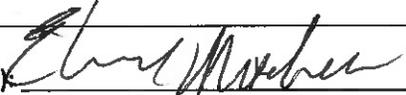
**PART II:**

Are you going to request an advisory board member waiver?

- I will request an advisory board member waiver under §112.313(12)
- I will NOT request an advisory board member waiver under §112.313(12)
- N/A

The City shall review any relationships which may be prohibited under the Florida Ethics Code and will disqualify any bidders whose conflicts are not waived or exempt.

Date: 2/28/2020

Signed (Person authorized to bind the company): 

Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**PUBLIC ENTITY CRIME INFORMATION**

As provided by F.S. §287.133, a person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a Contractor, supplier, Subcontractor, or Consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

I, Edward Mitchell, being an authorized representative of the Respondent U.S. Water Services Corporation,

Located at: 4939 Cross Bayou Boulevard

City: New Port Richey State: FL Zip Code: 34652, have read and understand the contents above. I further certify that Respondent is not disqualified from replying to this solicitation because of F.S. §287.133.

Signature: *Edward Mitchell* Date: 2/28/2020

Telephone #: (727) 848 8292 Fax #: (727) 849 8860

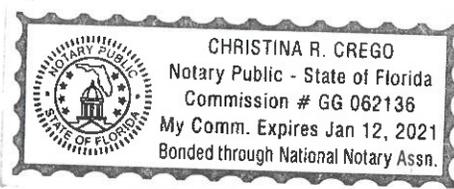
Federal ID #: 20-0008821 E-mail: ccrego@uswatercorp.net

State of FLORIDA

County of PASCO

Sworn to and subscribed before me this 28<sup>th</sup> day of February, 2020 by Edward Mitchell who  is personally known to me or  has produced his driver's license as identification.

NOTARY SEAL:



*Christina R. Crego*  
Notary Public - State of Florida  
Print Name: Christina R. Crego  
Commission No: GG062136

Date: 2/28/2020

Signed (Person authorized to bind the company): *Edward Mitchell*

Name (printed): Edward Mitchell Title: Vice President

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**DRUG FREE WORKPLACE FORM**

The undersigned Respondent in accordance with Florida Statute §287.087 hereby certifies that U.S. Water Services Corporation does:  
(Company Name)

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 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 Respondent complies fully with the above requirements.

**Check one:**

- As the person authorized to sign this statement, I certify that this firm complies fully with above requirements.
- As the person authorized to sign this statement, this firm **does not** comply fully with the above requirements.



Signature

Edward Mitchell, VP

Print Name

2/28/2020

Date

**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**AFFIDAVIT  
Claiming Status as a LOCAL BUSINESS**

**\*\*CONTRACTOR MUST MEET ALL 4 REQUIREMENTS BELOW TO CLAIM LOCAL BUSINESS STATUS\*\***

State of NOT APPLICABLE }  
County of \_\_\_\_\_ } SS.

Before me, the undersigned authority, personally appeared:

\_\_\_\_\_

who, being first duly sworn, deposes and says that:

1. I am the \_\_\_\_\_ (Owner, Partner, Officer, Representative or Agent) of \_\_\_\_\_, the Bidder that has submitted the attached proposal;

**AND**

2. I am fully informed respecting the operation and employees of the Bidder;

**AND**

3. I affirm that the Bidder has maintained a physical business address located within the limits of Sarasota County, Charlotte County or Desoto County for a period of six (6) months or more before submitting this bid, from which the Bidder operates or performs business. The qualifying local address is \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**AND**

4. I affirm that at least fifty percent (50%) of the Bidder's employees are residents of the City of North Port. If requested by the City, the bidder will be required to provide documentation substantiating the information given in this affidavit. City of North Port reserves the right to request supporting documentation as evidence to substantiate the information given in this affidavit. Failure to do so will result in the bidder's submission being deemed non-responsive.

**Any bidder that misrepresents its status as a local business or North Port local business shall be barred from receiving any City contracts for a period of three (3) years.**

State of Florida  
County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who  is personally known to me or  has produced his driver's license as identification.

NOTARY SEAL:

\_\_\_\_\_  
Notary Public - State of Florida  
Print Name: \_\_\_\_\_  
Commission No: \_\_\_\_\_

**This page to be returned ONLY if Contractor is claiming a Local Business Status.  
{THIS PAGE MUST BE COMPLETED AND SUBMITTED}**

**AFFIDAVIT**

**Claiming Status as a North Port Local Business**

**\*\*CONTRACTOR MUST MEET ALL 4 REQUIREMENTS BELOW TO CLAIM NORTH PORT BUSINESS STATUS\*\***

State of NOT APPLICABLE }  
County of \_\_\_\_\_ } SS.

Before me, the undersigned authority, personally appeared:

\_\_\_\_\_

who, being first duly sworn, deposes and says that:

1. I am the \_\_\_\_\_ (Owner, Partner, Officer, Representative or Agent) of \_\_\_\_\_, the Bidder that has submitted the attached bid;

**AND**

2. I am fully informed respecting the operation and employees of the Bidder;

**AND**

3. I affirm that the Bidder has maintained its primary physical business address within the limits of the City of North Port for a period of six (6) months or more before submitting this bid, from which the Bidder operates or performs business. The qualifying local address is

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AND**

4. I affirm that at least fifty percent (50%) of the Bidder's employees are residents of the City of North Port.

If requested by the City, the bidder will be required to provide documentation substantiating the information given in this affidavit. City of North Port reserves the right to request supporting documentation as evidence to substantiate the information given in this affidavit. Failure to do so will result in the bidder's submission being deemed non-responsive.

**Any bidder that misrepresents its status as a local business or North Port local business shall be barred from receiving any City contracts for a period of three (3) years.**

State of Florida  
County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who  is personally known to me or  has produced his driver's license as identification.

NOTARY SEAL:

\_\_\_\_\_  
Notary Public - State of Florida  
Print Name: \_\_\_\_\_  
Commission No: \_\_\_\_\_

This page to be returned ONLY if Contractor is claiming a North Port Local Business Status.  
**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**SWORN STATEMENT: THE FLORIDA TRENCH SAFETY ACT**  
(Complete if applicable)

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC BY AN OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This Sworn Statement is submitted with Bid No. 2020-39 for the construction of 2019 Lift Station Rehabilitation Project
2. This Sworn Statement is submitted by U.S. Water Services Corporation whose business address is 4939 Cross Bayou Blvd., New Port Richey FL 34652 and (if applicable) its Federal Employer Identification Number (FEIN) is 20-0008821.
3. My name is Edward Mitchell  
(PRINTED OR TYPED NAME OF INDIVIDUAL SIGNING) and hold the position of Vice President with the above entity.
4. The Trench Safety Standards that will be in effect during the construction of this Project are Florida Statute Section 553.60-55.64, Trench Safety Act, and OSHA Standard.
5. The undersigned assures that the entity will comply with the applicable Trench Safety Standards and agrees to indemnify and hold harmless the County and ENGINEER, and any of their agents or employees from any claims arising from the failure to comply with said standard.
6. The undersigned has appropriated \$ 50.00 per linear foot of trench to be excavated over 5' deep for compliance with the applicable standards and intends to comply by instituting the following procedures: Standard Trench Box
7. The undersigned has appropriated \$ 100.00 per square foot for compliance with shoring safety requirements and intends to comply by instituting the following procedures: Standard Shoring
8. The undersigned, in submitting this Bid, represents that he or she has reviewed and considered all available geotechnical information and made such other investigations and tests as he or she may deem necessary to adequately design the trench safety system(s) he or she will utilize on this Project.

Edward Mitchell Vice President  
Authorized Signature/Title

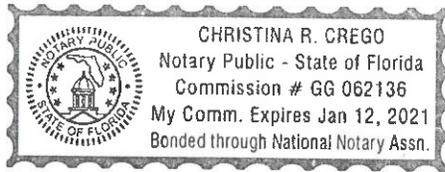
Sworn to and subscribed before me

this 28<sup>th</sup> day of February 2020  
(date)

Christina R. Crego  
Notary Public Signature

(Notary Seal)

My Commission Expires: January 12, 2021



**(THIS PAGE MUST BE COMPLETED AND SUBMITTED)**

**Scrutinized Company Certification Form**

Company Name: U.S. Water Services Corporation  
 Authorized Representative Name and Title: Edward Mitchell, Vice President  
 Address: 4939 Cross Bayou Blvd City: New Port Richey State: FL ZIP: 34652  
 Phone Number: (727) 848 8292 Email Address: ccrego@uswatercorp.net

A company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a contract with the City of North Port for goods or services of any amount if, at the time of bidding on, submitting a proposal for, or entering into or renewing such contract, the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Florida Statutes, section 215.4725, or is engaged in a boycott of Israel.

A company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a contract with the City of North Port for goods or services of \$1 million or more if, at the time of bidding on, submitting a proposal for, or entering into or renewing such contract, the company is on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to Florida Statutes, section 215.473, or with companies engaged in business operations in Cuba or Syria.

**CHOOSE ONE OF THE FOLLOWING**

This bid, proposal, contract or contract renewal is for goods or services of less than \$1 million. As the person authorized to sign on behalf of the above-named company, and as required by Florida Statutes, section 287.135(5), I hereby certify that the above-named company is not participating in a boycott of Israel.

This bid, proposal, contract or contract renewal is for goods or services of \$1 million or more. As the person authorized to sign on behalf of the above-named company, and as required by Florida Statutes, section 287.135(5), I hereby certify that the above-named company is not participating in a boycott of Israel, is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and it does not have business operations in Cuba or Syria.

I understand that pursuant to Florida Statutes, section 287.135, the submission of a false certification may result in the termination of the contract if one is entered into, and may subject the above-named company to civil penalties, attorney's fees and costs.

Certified By: *Edward Mitchell*  
 AUTHORIZED REPRESENTATIVE SIGNATURE

Print Name and Title: Edward Mitchell, Vice President

Date Certified: 2/28/2020

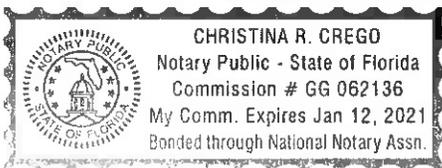
State of FLORIDA  
 County of PASCO

The foregoing instrument was acknowledged before me this 28<sup>th</sup> day of February, 2020 by Edward Mitchell who is personally known to me or who has produced \_\_\_\_\_ as identification.

*Christina R. Crego*  
 Notary Public

Solicitation/Contract/PO Number (Completed by Purchasing): \_\_\_\_\_

**THIS PAGE MUST BE COMPLETED AND SUBMITTED**



LOBBYING CERTIFICATION

"The undersigned hereby certifies, to the best of his or her knowledge and belief, that":

STATE OF FLORIDA

COUNTY OF PASCO

This \_\_\_\_\_ day \_\_\_\_\_ of 2020 Edward Mitchell, being first duly sworn, deposes and says that he or she is the authorized representative of U.S. Water Services Corporation (Name of the contractor, firm or individual), and that the vendor and any of its agents agree to have no contact or communication with, or discuss any matter related in any way to any active City of North Port solicitation, with any City of North Port elected officials, officers, their appointees or their agents or any other staff or outside individuals working with the city in respect to this request other than the designated Procurement Official Contact and to abide by the restrictions outlined in the General Terms and Conditions of the Solicitation. Technical questions directed to the project manager, is prohibited. These persons shall not be lobbied, either individually or collectively, regarding any questions for bid, proposal, qualification and/or any other solicitations released by the city. To do so is grounds for immediate disqualification from the selection process. The selection process is not considered final until such a time as the Commission has made a final and conclusive determination.

(a) No City appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence either directly or indirectly an officer or employee of the City, City Commission in connection with the awarding of any City Contract.

(b) If any funds other than City appropriated funds have been paid or will be paid to any person for influencing or attempting to influence a member of City Commission or an officer or employee of the City in connection with this contract, the undersigned shall complete and submit Standard Form-L "Disclosure Form to Report Lobbying", in accordance with its instructions.

Signed, sealed and delivered this 28th day of February, 2020.

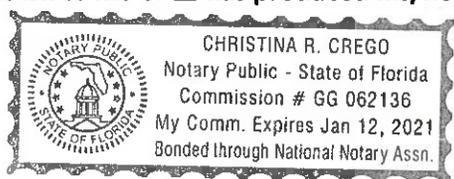
By [Signature]

Edward Mitchell  
(Printed Name)  
Vice President  
(Title)



STATE OF FLORIDA  
COUNTY OF PASCO

Sworn to and subscribed before me this 28th day of February, 2020, by Edward Mitchell who  is personally known to me or  has produced his/her driver's license as identification.



[Signature]  
Notary Public - State of FLORIDA  
Print Name: Christina R. Crego  
Commission No: GG062136

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

NON-COLLUSIVE AFFIDAVIT

State of FLORIDA

County of PASCO

} SS.

Before me, the undersigned authority, personally appeared:

Edward Mitchell

who, being first duly sworn, deposes and says that:

1. He/She is the Vice President (Owner, Partner, Officer, Representative or Agent) of U.S. Water Services Corporation, the Respondent that has submitted the attached reply;
2. He/She is fully informed respecting the preparation and contents of the attached reply and of all pertinent circumstances respecting such reply;
3. Such reply is genuine and is not a collusive or sham reply;
4. Neither the said Respondent 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 Respondent, firm, or person to submit a collusive or sham reply in connection with the work for which the attached reply has been submitted; or have in any manner, directly or indirectly sought by agreement or collusion, or communication or conference with any Respondent, firm, or person to fix the price or prices in the attached reply or of any other Respondent, or to fix any overhead, profit, or cost elements of the reply price or the reply price of any other Respondent, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the reply work.

Signed, sealed and delivered this 28th day of February, 2020.

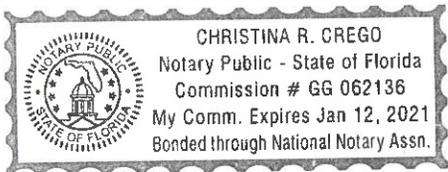
By: *Edward Mitchell*  
Edward Mitchell  
 (Printed Name)  
Vice President  
 (Title)



State of Florida  
County of PASCO

Sworn to and subscribed before me this 28th day of February, 2020 by Edward Mitchell who  is personally known to me or  has produced his driver's license as identification.

NOTARY SEAL:



*Christina R. Grego*  
 Notary Public - State of Florida  
 Print Name: Christina R. Grego  
 Commission No: GG062136

Date: 2/28/2020

Signed (Person authorized to bind the company): \_\_\_\_\_

Name (printed): Edward Mitchell Title: Vice President

CITY OF NORTH PORT

BID BOND

In Compliance with F.S. Chapter 255.051

STATE OF FLORIDA, CITY OF NORTH PORT

KNOW ALL BY THESE PRESENTS, that U. S. Water Services Corporation, authorized by law to do business as a General / Underground Utility & Excavation contractor in the State of Florida, as Principal, and North American Specialty Insurance Company, a Corporation chartered and existing under the laws of the State of New Hampshire, as Surety, with its principal offices in the City of Kansas City, MO, and authorized to do business in the State of Florida, and in accordance with Section 255.051, Florida Statutes, are held and firmly bound unto the City of North Port, Florida, in the full and just sum of 5% of the Total Bid Price, in good and lawful money of the United States of America, to be paid upon demand by the City of North Port, to which payment well and truly to be made, we bind ourselves, our heirs, executors, administrators, and assigns, joint and severally and firmly by these presents. The condition of the obligation is such, that whereas the Principal has submitted the attached Bid, dated February 26, 2020 for (2019 LIFT STATION REHABILITATION, RFB 2020-39).

NOW, THEREFORE, if the Principal shall withdraw said bid prior to the date of opening the same, or shall within 10 days after the prescribed forms are presented to him for signature enter into a written Contract with City of North Port, Florida, in accordance with the bid as accepted and give a Performance and Payment Bond with good and sufficient surety or sureties as may be required for the faithful performance and proper fulfillment of such Contract and for the prompt payment of all persons furnishing labor or materials in connection therewith or, in the event of failure to enter into such Contract and give such bond within the time specified, if the Principal shall pay the City the difference between the amount specified in said bid and the amount for which the City may procure the required work and/or supplies provided the latter amount to be excess of the amount specified in said bid, then the above obligations shall be void; otherwise, to remain in full force and effect.

IN THE WITNESS WHEREOF, the above written parties have executed this instrument under their several seals dated February 26, 2020, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

Witness as to Principal:

(By) [Signature]

Witness as to Surety:

[Signature]

U. S. Water Services Corporation (SEAL) (Principal)

[Signature]

Printed Name Edward Mitchell North American Specialty Insurance Company (SEAL) (Surety's Name)

[Signature]

(By-As Attorney-in-Fact, Surety) April L. Lively, Florida Licensed Resident Agent



Affix Corporate Seals and attach proper Power of Attorney for Surety. Inquiries: (407) 834-0022

SWISS RE CORPORATE SOLUTIONS

NORTH AMERICAN SPECIALTY INSURANCE COMPANY
WASHINGTON INTERNATIONAL INSURANCE COMPANY
WESTPORT INSURANCE CORPORATION GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, THAT North American Specialty Insurance Company, a corporation duly organized and existing under laws of the State of New Hampshire, and having its principal office in the City of Kansas City, Missouri and Washington International Insurance Company a corporation organized and existing under the laws of the State of New Hampshire and having its principal office in the City of Kansas City, Missouri, and Westport Insurance Corporation, organized under the laws of the State of Missouri, and having its principal office in the City of Kansas City, Missouri does hereby make, constitute and appoint:

J.W. GUIGNARD, BRYCE R. GUIGNARD, PAUL J. CIAMBRIELLO, APRIL L. LIVELY, JENNIFER L. HINDLEY, MARGIE L. MORRIS, DEBORAH ANN MURRAY, M. GARY FRANCIS, CHRISTINE MORTON, KELLY PHELAN and ALLYSON FOSS WING JOINTLY OR SEVERALLY

Its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its act and deed, bonds or other writings obligatory in the nature of a bond on behalf of each of said Companies, as surety, on contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract or suretyship executed under this authority shall exceed the amount of: ONE HUNDRED TWENTY FIVE MILLION (\$125,000,000.00) DOLLARS

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of North American Specialty Insurance Company and Washington International Insurance Company at meetings duly called and held on March 24, 2000 and Westport Insurance Corporation by written consent of its Executive Committee dated July 18, 2011.

RESOLVED, that any two of the President, any Senior Vice President, any Vice President, any Assistant Vice President, the Secretary or any Assistant Secretary be, and each or any of them hereby is authorized to execute a Power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings and all contracts of surety, and that each or any of them hereby is authorized to attest to the execution of any such Power of Attorney and to attach therein the seal of the Company; and it is

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be binding upon the Company when so affixed and in the future with regard to any bond, undertaking or contract of surety to which it is attached.



By Steven P. Anderson, Senior Vice President of Washington International Insurance Company & Senior Vice President of North American Specialty Insurance Company & Senior Vice President of Westport Insurance Corporation

By Mike A. Ito, Senior Vice President of Washington International Insurance Company & Senior Vice President of North American Specialty Insurance Company & Senior Vice President of Westport Insurance Corporation



IN WITNESS WHEREOF, North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation have caused their official seals to be hereunto affixed, and these presents to be signed by their authorized officers this 21st day of OCTOBER, 2019.

North American Specialty Insurance Company
Washington International Insurance Company
Westport Insurance Corporation

State of Illinois
County of Cook ss:

On this 21st day of OCTOBER, 2019, before me, a Notary Public personally appeared Steven P. Anderson, Senior Vice President of

Washington International Insurance Company and Senior Vice President of North American Specialty Insurance Company and Senior Vice President of Westport Insurance Corporation and Michael A. Ito Senior Vice President of Washington International Insurance Company and Senior Vice President of North American Specialty Insurance Company and Senior Vice President of Westport Insurance Corporation, personally known to me, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as officers of and acknowledged said instrument to be the voluntary act and deed of their respective companies.



M. Kenny, Notary Public

I, Jeffrey Goldberg, the duly elected Vice President and Assistant Secretary of North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney given by said North American Specialty Insurance Company, Washington International Insurance Company and Westport Insurance Corporation which is still in full force and effect.

IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Companies this 26th day of February, 2020.

Jeffrey Goldberg

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
 See Specific Instructions on page 3.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**U.S. Water Services Corporation**

**2** Business name/disregarded entity name, if different from above

**3** Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC      C Corporation      S Corporation      Partnership      Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ \_\_\_\_\_

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ \_\_\_\_\_

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.) See instructions.     Requester's name and address (optional)

**4939 Cross Bayou Boulevard**

**6** City, state, and ZIP code

**New Port Richey, FL 34652**

**7** List account number(s) here (optional)

## Part 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 *How to get a TIN*, later.

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

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									
2	0	-	0	0	0	8	8	2	1

## 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.

<b>Sign Here</b>	Signature of U.S. person	Date ▶ <b>02/28/2019</b>
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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/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



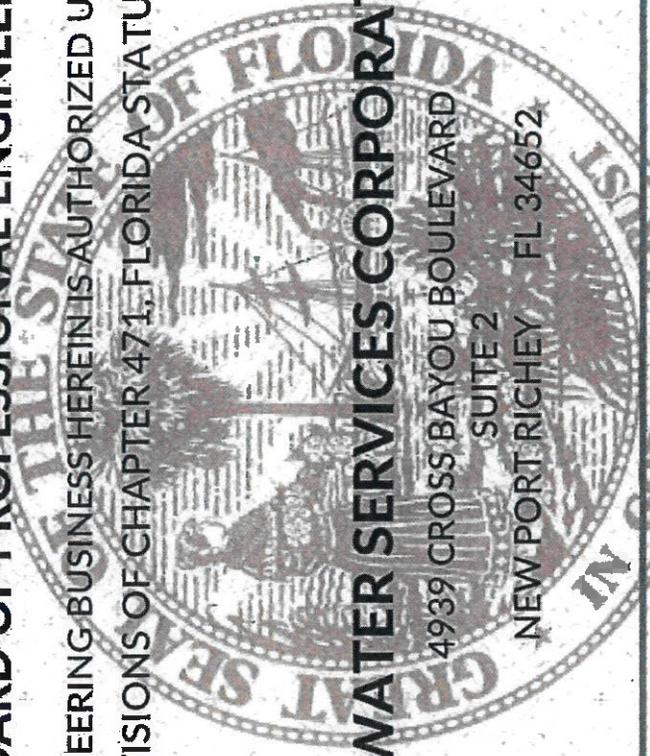
Ron DeSantis, Governor



## STATE OF FLORIDA

### BOARD OF PROFESSIONAL ENGINEERS

THE ENGINEERING BUSINESS HEREIN IS AUTHORIZED UNDER THE PROVISIONS OF CHAPTER 471, FLORIDA STATUTES



### U.S. WATER SERVICES CORPORATION

4939 CROSS BAYOU BOULEVARD  
SUITE 2  
NEW PORT RICHEY FL 34652

LICENSE NUMBER: CA9754

EXPIRATION DATE: FEBRUARY 28, 2021

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RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



**STATE OF FLORIDA**  
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**  
**CONSTRUCTION INDUSTRY LICENSING BOARD**

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE  
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

**DELCHER, CECIL R**

U S WATER SERVICES CORPORATION  
4939 CROSS BAYOU BOULEVARD  
NEW PORT RICHEY FL 34652

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**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**  
**CONSTRUCTION INDUSTRY LICENSING BOARD**

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**DEREMER, GARY ANDREW**

US WATER SERVICES CORPORATION  
4821 US HWY 19 STE 2  
NEW PORT RICHEY FL 34652

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