

**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 (Instructions to Bidders, General Provisions, Special Conditions and Technical Provisions, Permits, Inspections Reports, Surveys, Insurance Requirements and all City Forms).

- THIS CHECKLIST, complete and sign
- 1. Fill out and sign **Bid Form (acknowledge addenda, bond information, subcontractors and suppliers, and Qualifications/Reference Form** if applicable)
- 2. Fill out and sign **Bid Price Schedule (unit prices must be filled in every block where applicable)** (EXCEL SPREADSHEET, DO NOT PDF ON USB DRIVE).
- 3. Fill out **Statement of Organization** and have it properly notarized.
- 4. Provide **State of Florida Registration** (<http://www.sunbiz.org/search.html>)
- 5. 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 and sign **Public Entity Crime Information**
- 9. Fill out and Sign the **Drug Free Workplace Form**.
- 10. Fill out and sign the **"Local Business Affidavit" or "North Port Local Business Affidavit"**
- 11. Fill out and sign and notarize the **Scrutinized Company Certification Form**
- 12. Fill out and sign **No Lobbying Affidavit**
- 13. Fill out and sign the **SWORN STATEMENT: THE FLORIDA TRENCH SAFETY ACT**
- 14. W-9
- 15. Provide **any additional documentation** requested within the Bid Document.
- 16. **Submit ONE (1) Original AND ONE (1) Copy of submittal AND Provide USB drive** (pdf of submittal and excel version of the Bid Schedule, if applicable)
- 17. Review **"SAMPLE CONTRACT"**.
- 18. Clearly mark the sealed bid with the **BID NUMBER AND BID NAME** on the outside of the package **AND YOUR COMPANY NAME**.

**COPY**

**BID BOND (INCLUDED IN SUBMITTAL)**

**YES**     **NO**

**PERFORMANCE BOND IS ONLY TO BE SUPPLIED BY THE AWARDED VENDOR AT TIME OF PRE CONSTRUCTION MEETING.**

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

RFB NO. 2020-43 S. BISCAYNE DR. AND PAN AMERICAN BLVD. BRIDGE PIPELINE REPLACEMENTS Date: 8/11/2020

Signed (Person authorized to bind the company): Patricia A Sunquist  
 Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

**BID FORM**

Name of Bidder: Spectrum Underground, Inc.

Business Address: 5802 Bee Ridge Road Ste 101 Sarasota, FL 34233

Telephone Number: 941-342-6708 Fax Number: 941-342-6710

E-mail Address: estimating@spectrumunderground.com

Contractor License #: CGC008435

FEID #: 65-0669771

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, and any other reports or documentation for: **S. BISCAYNE DR. AND PAN AMERICAN BLVD. BRIDGE PIPELINE REPLACEMENTS** and further agrees to furnish all items listed on the attached Bid Form in accordance with the unit price 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:

Two Hundred Fifty-five Thousand Six Hundred Frty-seven Dollars.

\$ 255,647.00

(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: August 11, 2020

Signed (Person authorized to bind the company):

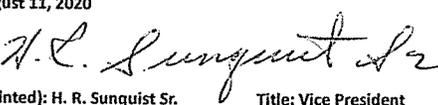
Patricia A Sunquist

Name (printed): Patricia A Sunquist

Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

**South Biscayne Drive & Pan American Boulevard Water Main Pipeline Replacements  
Bid Form (revised Addendum No. 2)**

No.	Description	Quantity	Unit	Unit Cost	Item Cost
<b>General</b>					
1	MOBILIZATION AND DEMOBILIZATION	1	LS	10,265.00	10,265.00
2	MAINTENANCE OF TRAFFIC	1	LS	8,425.00	8,425.00
3	UTILITIES LOCATION, STAKEOUT AND SURVEY	1	LS	2,400.00	2,400.00
4	AS-BUILT SURVEY AND DRAWINGS	1	LS	4,800.00	4,800.00
<b>Connection to Existing Water Main at South Biscayne Drive</b>					
5	CONNECTION TO EXISTING WM WITH A 45-DEG BEND & AN 8" X 10" TEE (E & W)	1	LS	5,335.00	5,335.00
6	8" GATE VALVE	2	EA	2,203.00	4,406.00
7	2" AIR RELEASE VALVE	1	EA	5,035.00	5,035.00
8	8" X 8" TEE	1	EA	1,093.00	1,093.00
9	10" X 8" REDUCER	2	EA	883.00	1,766.00
10	8" 90-DEGREE BEND	1	EA	765.00	765.00
11	8" 45-DEGREE BEND	1	EA	744.00	744.00
12	10" 45-DEGREE BEND	2	EA	942.00	1,884.00
13	10" 11.25-DEGREE BEND	2	EA	978.00	1,956.00
14	10" PVC C-900 CL-200 DR-14 WATER MAIN - OPEN CUT	120	LF	180.35	21,642.00
15	10" HDPE DR-9 WATER MAIN - HORIZONTAL DIRECTIONAL DRILL (HDD)	500	LF	56.80	28,400.00
16	PAVEMENT RESTORATION	400	SF	12.25	4,900.00
17	REMOVAL/ABANDONED OF EXISTING 8" WATER MAIN	1	LS	13,257.00	13,257.00
18	LANDSCAPE RESTORATION	1	LS	1,400.00	1,400.00
19	EROSION CONTROL PROGRAM	1	LS	10,572.00	10,572.00
20	TESTING	1	LS	4,050.00	4,050.00
<b>Connection to Existing Water Main at Pan American Boulevard</b>					
21	CONNECTION TO EXISTING WM WITH TWO (2) 10" 90-DEG BENDS (E & W)	1	LS	5,340.00	5,340.00
22	10" GATE VALVE	2	EA	2,098.00	4,196.00
23	6" GATE VALVE	1	EA	1,890.00	1,890.00
24	2" AIR RELEASE VALVE	1	EA	5,042.00	5,042.00
25	12" X 10" REDUCER	2	EA	1,197.00	2,394.00
26	10" 90-DEGREE BEND	2	EA	1,055.00	2,110.00
27	10" 45-DEGREE BEND	4	EA	941.00	3,764.00
28	12" 11.25-DEGREE BEND	2	EA	1,217.00	2,434.00
29	10" X 6" TEE	1	EA	1,357.00	1,357.00
30	6" PVC C-900 CL-200 DR-14 WATER MAIN - OPEN CUT	100	LF	60.00	6,000.00
31	10" PVC C-900 CL-200 DR-14 WATER MAIN - OPEN CUT	50	LF	728.00	36,400.00
32	12" HDPE DR-9 WATER MAIN - HORIZONTAL DIRECTIONAL DRILL (HDD)	300	LF	83.75	25,125.00
33	PAVEMENT RESTORATION	500	SF	12.50	6,250.00
34	REMOVAL/ABANDONED OF EXISTING 10" WATER MAIN	1	LS	11,610.00	11,610.00
35	LANDSCAPE RESTORATION	1	LS	900.00	900.00
36	EROSION CONTROL PROGRAM	1	LS	4,645.00	4,645.00
37	TESTING	1	LS	3,095.00	3,095.00
<b>TOTAL CONSTRUCTION COST</b>					<b>\$255,647.00</b>
Date: August 11, 2020 Signed  Name (printed): H. R. Sunquist Sr. Title: Vice President					

**ADDENDA AND BOND FORM**

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

<b>Addendum No.</b>	1	Dated	7/23/2020	<b>Addendum No.</b>		Dated	
<b>Addendum No.</b>	2	Dated	7/30/2020	<b>Addendum No.</b>		Dated	
<b>Addendum No.</b>	3	Dated	8/05/2020	<b>Addendum No.</b>		Dated	
<b>Addendum No.</b>		Dated		<b>Addendum No.</b>		Dated	

**BID BOND AND PERFORMANCE/PAYMENT BOND**

**BID BOND: ACCOMPANYING THIS PROPOSAL IS** 5%

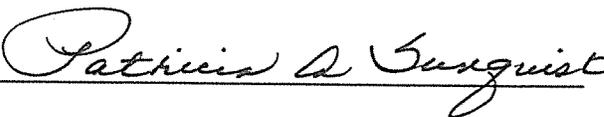
(insert: "cash", "bidder's bond", or "certified check", as the case may be) in an amount equal to at least 5% of the total amount of the bid, payable to the City of North Port. Cashier's checks will be returned to all bidders after award of bid. If supplying a bid bond please use the attached bid bond 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: August 10/2020

Signed (Person authorized to bind the company): 

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

**BID SCHEDULE - SUMMARY OF PAYITEMS**

It is understood that the estimated summary of pay item quantities are approximate only and are solely for the purpose of facilitating the comparison of bids, and that the Contractor's compensation shall be computed upon the basis of the actual quantities in the completed work, whether they be more or less than those shown.

**Preparation of Bid Schedules:** Contractor MUST use the City provided excel spreadsheet, if provided with the solicitation. **DO NOT RECREATE THIS FORM.** All blank spaces in the Bid Form must be filled in legibly. *Bidder should not reference the words "No Charge, N/A, included, dash, etc." in any of the blocks. Bidder must identify a monetary amount for each UNIT COST and EXTENDED COST (unless the unit price is "x" out by the City). UNIT COST prevails over EXTENDED COST. Failure to identify a monetary amount in any of the UNIT COST line items shall cause bidder to be deemed non-responsive and bid response be rejected.* In case of discrepancy between unit price and extended price, the unit price will govern. Apparent errors in extension will be corrected.

Date: August 11, 2020

Signed (Person authorized to bind the company): Patricia A Sunquist

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

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**EQUIPMENT AND SUBCONTRACTOR/SUPPLIER LIST**

Equipment is located at: Sarasota, Florida

The following is a listing of your equipment, inclusive of manufacturer, year and condition. List the condition of equipment/vehicles utilized for this project 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)
See Attachment "A"				

**SOURCE OF SUPPLY AND SUBCONTRACTOR FORM**

The following sources of supply and subcontractors shall be used for the RFB NO. 2020-XX S. BISCAYNE DR. AND PAN AMERICAN BLVD. BRIDGE PIPELINE REPLACEMENTS. 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)**

1. Sylvester Excavating - 571 Paul Morris Dr. Englewood 34223 941-475-3388 Jimsylexc@gmail.com
2. MSB Surveying - 31 Sarasota Center Blvd Sarasota 34240 941-341-9935 msb@msbsurveying.com
3. \_\_\_\_\_

**SUPPLIER(S)**

1. Ferguson Enterprises - 1601 Sarasota, FL 34240 941-379-8989 Mark.Grandusky@ferguson.com
2. \_\_\_\_\_
3. \_\_\_\_\_

Date: August 11, 2020

Signed (Person authorized to bind the company): *Patricia A Sunquist*

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

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

**QUALIFICATIONS AND REFERENCES**

The Bidder (Company) shall have been in Commercial Construction Business with experience in projects involving water main installation, connections to existing water mains, and all associated testing, miscellaneous work, restoration, and clean-up. Bidder shall demonstrate successful completion of a minimum of Three (3) projects completed within the past five (5) years of similar size and scope to the S. BISCAYNE DR. AND PAN AMERICAN BLVD. BRIDGE PIPELINE REPLACEMENTS

1. Business/Customer Name: City of North Port / N Salford Bridge WM Replacement

Name of Contact Person/Title: Jennifer Fehrs, PE

Telephone# 941-240-8008 Fax 941--240-8022 E-mail jfehrrs@cityofnorthport.com

Address 6644 W Price Boulevard North Port, FL

Phone Number \_\_\_\_\_

Duration of Contract or business relationship 3 years

Type of Services Provided Water Main Replacement

Contract Period: FROM 10/22/19 TO 4/22/20

Contract Price \$ 118,967.00 Contract Price at Completion of the Project \$ 109,890.49

2. Business/Customer Name: City of North Port

Name of Contact Person/Title: Jennifer Fehrs, PE

Telephone# 941-240-8008 Fax 941-240-8022 E-mail jfehrrs@cityofnorthport.com

Address 6644 W Price Boulevard North Port, FL

Phone Number \_\_\_\_\_

Duration of Contract or business relationship 3 years

Type of Services Provided \_\_\_\_\_

Contract Period: FROM 3/19/19 TO 8/5/2019

Contract Price \$ 136,505.00 Contract Price at Completion of the Project \$ 140,781.80

Date: August 10, 2020

Signed (Person authorized to bind the company): Patricia A Sunquist

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

3. Business/Customer Name: City of North Port / Bobcat Trail

Name of Contact Person/Title: Jennifer Fehrs, P.E.

Telephone# 941-240-8008 Fax 941-240-8022 E-mail jfehrrs@cityofnorthpiort.com

Address 6644 W Price Boulevard North Port, FL 34291

Contract Period: FROM 10/22/2019 TO In Progress

Contract Price \$ 301,784.00 Contract Price at Completion of the Project \$ 359,664.95

Phone Number \_\_\_\_\_

Duration of Contract or business relationship 3 years

Type of Services Provided Water Main Replacement

Contract Period: FROM \_\_\_\_\_ TO \_\_\_\_\_

Contract Price \$ \_\_\_\_\_ Contract Price at Completion of the Project \$ \_\_\_\_\_

4. Business/Customer Name: \_\_\_\_\_

Name of Contact Person/Title: \_\_\_\_\_

Telephone# \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Duration of Contract or business relationship \_\_\_\_\_

Type of Services Provided \_\_\_\_\_

Contract Period: FROM \_\_\_\_\_ TO \_\_\_\_\_

Contract Price \$ \_\_\_\_\_ Contract Price at Completion of the Project \$ \_\_\_\_\_

Date: August 10, 2020

Signed (Person authorized to bind the company): 

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

**STATEMENT OF ORGANIZATION**

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 Spectrum Underground, Inc.

941-342-6708                      estimating@spectrumunderground.com                      941-342-6710

Telephone #    E-Mail    Fax #

5802 Bee Ridge Road, Suite 101

Main Office Address

Sarasota    Florida    34233

City    State    Zip Code

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

Office Address

City    State    Zip Code

Telephone #    E-mail    Fax #

Patricia A Sunquist, Secretary/Treasurer

Name & Title of Firm Representative

Federal Identification Number: 65-0669771

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.: P95000087090

Does it use a registered fictitious name:  Yes or  No

Names of Officers:

President: H.R. Sunquist, Jr. Secretary: Patricia A Sunquist

Vice President: H.R. Sunquist, Sr. Treasurer: Patricia A Sunquist

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

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

Name of Corporation (As used in Florida):

Spectrum Underground, Inc.

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

Corporate Address:

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

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

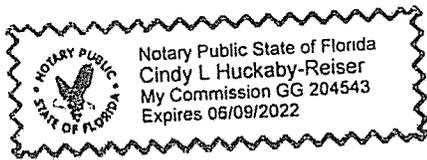
Street Address: 5802 Bee Ridge Road, Suite 101

City, State, Zip: Sarasota, FL 34233

STATE OF Florida

COUNTY OF Sarasota

Sworn to and subscribed before me this 10th day of August, 2020, by Patricia A Sunquist who  is personally known to me or  has produced his/her driver's license as identification.



*Cindy L. Huckaby-Reiser*

Notary Public - State of Florida

Print Name: Cindy L. Huckaby-Reiser

Commission No: \_\_\_\_\_

Date: August 10, 2020

Signed (Person authorized to bind the company): Patricia A Sunquist

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

NON-COLLUSIVE AFFIDAVIT

State of Florida  
County of Sarasota } SS.

Before me, the undersigned authority, personally appeared:

Patricia A Sunquist who, being first duly sworn, deposes and says that:

1. He/She is the Secretary/Treasurer (Owner, Partner, Officer, Representative or Agent) of Spectrum Underground, Inc., 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.

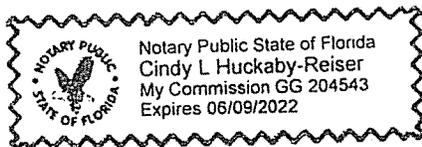
Signed, sealed and delivered this 10th day of August, 2020.

By: Patricia A Sunquist Patricia A Sunquist  
(Printed Name)  
Secretary/Treasurer  
(Title)

STATE OF Florida  
COUNTY OF Sarasota

Sworn to and subscribed before me this 10th day of August, 2020, by Patricia A Sunquist who  is personally known to me or  has produced his/her driver's license as identification.

Notary Seal:



Cindy L Huckaby-Reiser  
Notary Public - State of Florida  
Print Name: Cindy I Huckaby-Reiser  
Commission No: GG204543

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

**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: August 10, 2020

Signed (Person authorized to bind the company):

Patricia A Sunquist

Name (printed): Patricia A Sunquist

Title: Secretary/Treasurer

(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, Patricia A Sunquist, being an authorized representative of the Respondent Spectrum Underground, Inc.

Located at: 5802 Bee Ridge Road, Suite 101

City: Sarasota State: Florida Zip Code: 34233, 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: Patricia A Sunquist Date: 8/10/2020

Telephone #: 941-342-6708 Fax #: 941-342-6710

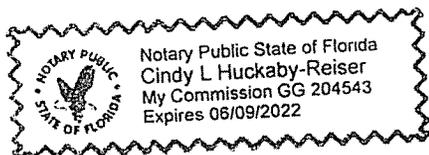
Federal ID #: 65-0669771 E-mail: psunquist@spectrumunderground.com

State of Florida

County of Sarasota

Sworn to and subscribed before me this 10 day of August, 2020, by Patricia A Sunquist who  is personally known to me or  has produced his driver's license as identification.

NOTARY SEAL:



Cindy L. Huckaby-Reiser  
Notary Public - State of Florida

Print Name: Cindy L Huckaby-Reiser

Commission No: GG204543

Date: August 10, 2020

Signed (Person authorized to bind the company): Patricia A Sunquist

Name (printed): Patricia A Sunquist Title: Secretary/Treasurer

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**DRUG FREE  
WORKPLACE FORM**

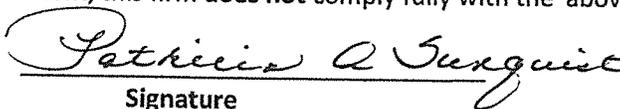
The undersigned Respondent in accordance with Florida Statute §287.087 hereby certifies that:  
Spectrum Underground, Inc. does:  
(Company Name)

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

Patricia A Sunquist

Print Name

August 10, 2020

Date

(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.

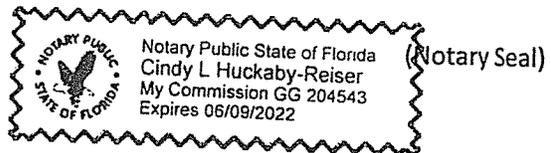
1. This Sworn Statement is submitted with Bid No. 2020-43 for the construction of Biscayne Dr. & Pan American Blvd Bridge Pipeline Replacements
2. This Sworn Statement is submitted by Spectrum Underground, Inc. whose business address is 5802 Bee Ridge Road, Ste 101 Sarasota, FL 34233 and (if applicable) its Federal Employer Identification Number (FEIN) is 65-0669771.
3. My name is Patricia A Sunquist  
(PRINTED OR TYPED NAME OF INDIVIDUAL SIGNING) and hold the position of Sec/Treas. 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 \$ N/A 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:  
N/A
7. The undersigned has appropriated \$ N/A per square foot for compliance with shoring safety requirements and intends to comply by instituting the following procedures:
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.

Patricia A Sunquist Sec/Treas.  
Authorized Signature/Title

Sworn to and subscribed before me  
this August 10, 2020  
(date)

Cindy L. Huckaby-Reiser  
Notary Public Signature

My Commission Expires: 6/09/2022



(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

Scrutinized Company Certification Form

Company Name: Spectrum Underground, Inc.  
Authorized Representative Name and Title: Patricia A Sunquist, Secretary/Treasurer  
Address: 5802 Bee Ridge Rd., Ste 101 City: Sarasota State: Florida ZIP: 34233  
Phone Number: 941-342-6708 Email Address: psunquist@spectrumunderground.com

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: Patricia A Sunquist  
AUTHORIZED REPRESENTATIVE SIGNATURE

Print Name and Title: Patricia A Sunquist, Secretary/Treasurer

Date Certified: August 10, 2020

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 Sarasota

This 10th day of August of 2020 Patricia A Sunquist, being first duly sworn, deposes and says that he or she is the authorized representative of Spectrum Underground, Inc. (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 10th day of August, 2020.

By: Patricia A Sunquist

Patricia A Sunquist

(Printed Name)

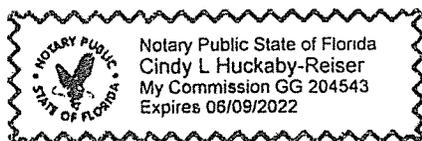
Secretary/Treasurer

(Title)

STATE OF Florida

COUNTY OF Sarasota

Sworn to and subscribed before me this 10th day of August, 2020, by Patricia A Sunquist who  is personally known to me or  has produced his/her driver's license as identification.



Cindy L. Huckaby-Reiser

Notary Public - State of Florida

Print Name: Cindy L. Huckaby-Reiser

Commission No: GG204543

(THIS PAGE MUST BE COMPLETED AND SUBMITTED)

# *State of Florida*

## *Department of State*

I certify from the records of this office that SPECTRUM UNDERGROUND, INC. is a corporation organized under the laws of the State of Florida, filed on November 13, 1995.

The document number of this corporation is P95000087090.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on January 16, 2020, 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 Sixteenth day of January, 2020*



*Ronald R. Lee*  
*Secretary of State*

Tracking Number: 7797401659CC

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

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

# 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.  
**SPECTRUM UNDERGROUND, INC.**

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.  
**5802 BEE RIDGE ROAD, SUITE 101**

6 City, state, and ZIP code  
**SARASOTA, FL 342433**

7 List account number(s) here (optional)

Requester's name and address (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.

Social security number								
			-					
or								
Employer identification number								
6	5	-	0	6	6	9	7	7

## Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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

Sign Here Signature of U.S. person ▶ *Patricia A. Sunquist* Date ▶ *8-10-2020*

## 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-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.*

## Attachment "A"

Description	Manufacturer	Year	Condition	Leased/Owned (If leased, date of expiration)
632 Volvo CE Compact Excavator; Model ECR58D; w/ 24" pin-on trenching bucket	Volvo	2018	1	Own
637 Komatsu PC300 LC-7	Komatsu	2002	1	Own
638 Komatsu PC128 US-2	Komatsu	2006	1	Own
639 Volvo Compact Mini Excavator, # ECR58D, w/ 36" WainRoy bucket	Volvo	2014	1	Own
641 Komatsu PC50 MR-2 (compact excavator)	Komatsu	2004	1	Own
662 Case CX 135 SR	Case	2006	1	Own
678 Komatsu PC 228 US LC	Komatsu	2010	1	Own
684 Hyundai Robex 450LC-3 Excavator	Hyundai	2000	1	Own
686 Komatsu PC138LC-10 Excavator	Komatsu	2013	2	Own
687 Komatsu PC 78US-8 Excavator	Komatsu	2013	1	Own
691 Komatsu PC 360LC-10	Komatsu	2013	1	Own
696 Caterpillar 305 Excavator	Caterpillar	2014	1	Own
701 Komatsu PC 210 LC-10	Komatsu	2014	1	Own
704 Volvo EC380EL Track Excavator w/ 66" VCE P/O HD Bucket	Volvo	2015	1	Own
645 Komatsu WA250 3MC w/ cab	Komatsu	2004	1	Own
649 Komatsu WA320	Komatsu	2005	1	Own
654 Komatsu WA200 L-5	Komatsu	2006	1	Own
655 Komatsu WA320 5L	Komatsu	2006	1	Own
656 Komatsu WA470-8	Komatsu	2015	1	Own
669 Komatsu W380-6	Komatsu	2007	1	Own
689S Komatsu WA270-7	Komatsu	2013	1	Own
695 Komatsu WA 200 Loader	Komatsu	2014	1	Own
697 Komatsu 470-3	Komatsu	2000	1	Own
706 Komatsu WA270-8 Wheel Loader w/72" forks & 3.0cy bucket	Komatsu	2017	1	Own

710 Volvo 70	Volvo	2019	1	Own
634 Komatsu D31 PX-21	Komatsu	2002	1	Own
Komatsu D39PX	Komatsu	2016	1	Own
623 Multi-Quip 36" double drum roller	Caterpillar	2005	1	Own
642 Caterpillar CB244C double drum roller	Caterpillar	2005	1	Own
651 Bomag BW172D Vibratory Roller	Bomag	2007	1	Own
663 Hamm 3410 Vibratory roller	Hamm	2007	1	Own
560 Graco Line Laser IV 3400, Single Gun Striping Machine	Graco	2017	1	Own
Flex Die		N/A	1	Own
624 Bobcat 753 Skid-Steer		SOLD	1	Own
652 CAT 289-D, Track Loader w/forks & bucket	Caterpillar	2018	1	Own
685 Ditch Witch - Walk Behind Trencher		N/A	1	Own
688 Caterpillar 289C2 Track Loader	Caterpillar	2017	1	Own
952 6' Box blade		N/A	1	Own
958 Land Pride RB3784, straight blade attachment for Massey Ferguson	Massey	N/A	1	Own
960 Massey Ferguson tractor,	Massey Ferguson		1	Own
671 Swebster Sweeper Model ST72GP			2	Own
622 Terramite Sweeper			1	Own
954 Swebster Hydraulic Broom			1	Own
673 New Holland Broom Tractor (Sweeper)			1	Own
950 CAT BA118C HYD Hydraulic Broom (Attachment for Skid Steers)		N/A	1	Own
670 Raygo Gator Soil Stabilizer			1	Own
674 Volvo, G930B Motor Grader			1	Own
680 Gomaco Asphalt Mill 36"			1	Own

690 Cold Planer Attachment			1	Own
1172 Wacker Rammer BS70-2i			1	Own
1164 Wacker Rammer BS60-2i			1	Own
1165 Wacker Rammer BS60-2i			1	Own
1178 Multiquip, Rammer Jumping Jack Plate Compactor			1	Own
1179 Multiquip, Rammer Jumping Jack Plate Compactor			1	Own
1180 Multiquip, Rammer Jumping Jack Plate Compactor			1	Own
1182 Wacker, Rammer Jumping Jack			1	Own
1185 Wacker, Rammer Jumping Jack			1	Own
1186 Wacker, Plate Compactor			1	Own
1187 Wacker, Plate Compactor			1	Own
1196 Wacker, Plate Compactor			1	Own
1197 Wacker, Plate Compactor			1	Own
1198 Wacker, Rammer Jumping Jack			1	Own
1199 Wacker, Rammer Jumping Jack			1	Own
619 D&D Hydraulic Pump			1	Own
627 Honda Centrifugal 2in Gas Pump			1	Own
657 Thompson 8" rotary wellpoint			1	Own
660 Thompson 4" double diaphragm pump			1	Own
665 Sykes GP100M Water Pump			1	Own
693 Smallline 4" Double Dia. Pump			1	Own
694 Smallline 4" Double Dia. Pump			1	Own
1124 Wacker 3" Mud Hog #1			1	Own
1125 Wacker 3" Mud Hog #2			1	Own
1126 Wacker 3" Mud Hog #3			1	Own
1127 Wacker 3" Mud Hog #4			1	Own
1128 Wacker 3" Mud Hog #5			1	Own
1129 Wacker PT3A Trashy Pump			1	Own
1158 Wacker PDT3A Mud Hog			1	Own

1159 Wacker PDT3A Mud Hog			1	Own
1134 Rice Hydrostatic Test Pump			1	Own
2011 10' trench box			1	Own
2012 16' trench box			2	Own
2013 20' trench box			1	Own
2012 Aluminum trench box			1	Own
1168 Ingersoll-Rand (Towable)			1	Own
1176 Sullair Towable Compressor			1	Own
1119 Stihl TS420 cut-off saw 14"			1	Own
1155 Stihl TS420 cut-off saw 14"			1	Own
1162 Stihl TS420 cut-off saw 14"			1	Own
1188 Stihl TS420 cut-off saw 14"			1	Own
1189 Stihl TS420 cut-off saw 14"			1	Own
1183 Stihl, Concrete Cutoff Saw			1	Own
1184 Stihl, Concrete Cutoff Saw			1	Own
1166 K970 Husqvarna Saw K970			1	Own
1167 K760 Husqvarna Saw K760			1	Own
1191 Stihl TS420 cut-off saw 14"			1	Own
1194 Stihl TS420 cut-off saw 14"			1	Own
1195 Stihl TS420 cut-off saw 14"			1	Own
1169 Multiquip Light Tower 4,000 Watt			1	Own
1171 Genie Light Tower			1	Own
410 Mack Water Truck			1	Own
417 Kenworth T800 Semi-tractor			1	Own
419 International 4700 Flatbed (yellow)			1	Own
445 International 4900 Fuel Service truck			1	Own
459 Sterling Flatbed			1	Own

233 Ford F-350 Crew Cab		2013	1	Own
234 Ford F-350 crew cab		2013	1	Own
235 Ford F-150 super cab		2014	2	Own
236 Ford F-350 super duty		2016	1	Own
237 Dodge Ram 1500 crew cab, silver		2016	1	Own
238 Dodge Ram 1500 crew cab, silver		2016	1	Own
239 Dodge Ram 3500 crew cab, white		2016	1	Own
240 Ford F-150, silver, 2wd		2016	1	Own
241 GMC Sierra, White, crew cab		2017	1	Own
242 Chevy Silverado, White, crew cab		2018	2	Own
243 Chevy Silverado, White, Crew Cab		2018	1	Own

460 Peterbilt Tri-Axle Dump Truck			1	Own
461 Mack Tri-Axle Dump Truck			1	Own
462 Ford F-650 Water Truck			1	Own
463 Freightliner Semi-tractor			1	Own
464 Mack CH613 Semi-tractor			1	Own
465 Mack CV700 Dump Truck (white)			1	Own
466 International 8600 (roll-off)			1	Own
467 International 7500 (roll-off)			1	Own
468 Freightliner FL 70, Utility truck			1	Own
644 Leeboy T250 Tack Trailer			1	Own
901 Rogers Dump Trailer			1	Own
904 Heavy Black Equip. Trailer (Hammerhead)			1	Own
909 Bame 10-ton Equip. Trailer (white)			1	Own
910 Witzco Challenger 50-ton Lowboy			1	Own
913 Hard Dump Trailer			1	Own
914 MAXXD Car Hauler, w/ equip. hauler			1	Own
915 Load Trail DT8314			1	Own
916 Trail King, Transport Trailer			1	Own
219 Ford F-450 Super Duty	Ford	2003	1	Own
226 Chevrolet 3500 4door flatbed	Chevrolet	2006	1	Own
227 Chevrolet 3500 4door flatbed		2006	1	Own
228 Ford F-450 Super duty crew cab		2008	1	Own
231 Ford F-150 Red & Tan		2010	1	Own
232 Ford F-450 Xtra Cab		2012	1	Own



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 Spectrum Underground, Inc. a General contractor in the State of Florida, as Principal, and The Ohio Casualty 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 Boston, MA, 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 8/11/2020, for (S. BISCAYNE DR. AND PAN AMERICAN BLVD. BRIDGE PIPELINE REPLACEMENTS, RFB 2020-43).

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 8/11/2020, 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:

Signature of Patricia A. Sunquist
PATRICIA A. SUNQUIST
(By)

Spectrum Underground, Inc.

Signature of H.R. Sunquist, Jr. (SEAL)

(Principal)

H.R. SUNQUIST, JR., PRESIDENT

Witness as to Surety:

Signature of Carol McManus
Carol McManus

Printed Name
The Ohio Casualty
Insurance Company (SEAL)

(Surety's Name)
Signature of Jared Hawkins

(By) As Attorney-in-Fact, Surety
Jared Hawkins, Attorney-in-Fact and
Licensed Florida Resident Agent/W034875
Phone (941) 366-8424



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Liberty Mutual Insurance Company
The Ohio Casualty Insurance Company
West American Insurance Company

Certificate No: 8201618-985340

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Jared Hawkins; Thomas W. Kochis; Stacy Baier; Michelle Barrow; Robert W. Brown; Carol McManus

all of the city of Sarasota state of FL each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 25th day of July, 2019.



Liberty Mutual Insurance Company
The Ohio Casualty Insurance Company
West American Insurance Company

By: David M. Carey

David M. Carey, Assistant Secretary

State of PENNSYLVANIA
County of MONTGOMERY ss

On this 25th day of July, 2019 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public
Upper Merion Twp., Montgomery County
My Commission Expires March 28, 2021
Member, Pennsylvania Association of Notaries

By: Teresa Pastella
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 11th day of August, 2020.



By: Renee C. Llewellyn

Renee C. Llewellyn, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.