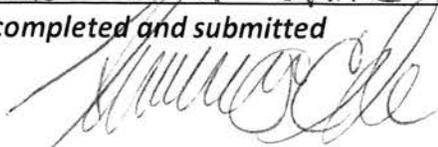


BIDDER CHECKLIST

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.

ITEM #	SUBMITTAL	BIDDERS RESPONSE		
		INCLUDED		
		YES	NO	N/A or OTHER
1	Bidder has completed, signed and/or notarized all required and included this checklist with bid submittal	✓		
2	State of Florida Registration: Proposer shall be registered with the State of Florida to perform the professional services required for this proposal. A copy of Registration must be included with submission. If Other, explain on a separate sheet.	✓		
3	Bid Form: Totals provided and signed by Binding authority	✓		
	Acknowledge addenda signed by Binding authority	✓		
	Bid Schedule: Completed (entered an amount in every line item) signed by Binding authority	✓		
4	Statement of Organization: completed, signed and notarized	✓		
5	References: Completed and signed	✓		
6	Conflict of Interest: Completed and signed	✓		
7	Equipment and Source of Supply/Subcontractors: Completed			
8	<ul style="list-style-type: none"> • 'Affidavit Claiming 'Local Business' OR • 'North Port Local Business' OR • If neither 'X-through the documents' 	✓		
		✓		
		✓		
9	Drug-Free Workplace (If Applicable): Completed and signed	✓		
	Florida Trench and Safety Affidavit (If Applicable): Completed and signed	✓		
10	Public Entity Crime Information: Completed, signed and notarized	✓		
11	Non-Collusive Affidavit: Completed, signed and notarized	✓		
12	No Lobbying Affidavit: Completed, signed and notarized	✓		
13	Bid Bond (Attached)	✓		
14	Number of Originals: 1 (signed)	✓		
15	Number of copies: 1 (signed)	✓		
16	CD or USB Flash Drive: One (1) electronic version in Portable Document Format (PDF) or Flash Drive containing the entire submittal.	✓		
17	Insurance Certificate Bidder has reviewed all the insurance requirements and is able to provide a certificate	✓		
18	Credit Cards Does your company accept Credit Card Payments	✓		
19	LABEL FOR SEALED BID: RFB NO. 2016-33 ASR TEMPORARY FACILITIES FOR CYCLE TEST 5 City of North Port Purchasing Division Alla V. Skipper, CPPB, Contract Specialist 4970 City Hall, Suite 337 North Port, Florida 34286	✓		

NAME/TITLE OF PERSON AUTHORIZED TO BIND: Thomas H. Clarke - President
 This page must be completed and submitted



BID FORM

Name of Bidder: Florida Design Contractors, Inc.
Business Address: 1326 So. Killian Drive
Lake Park, FL 33403
Telephone Number: 561-845-1233 Fax Number: 561-848-5992
E-mail Address: tclarke@floridadesigncontractors.com
Contractor License #: CGC040304
FEID #: 65-0306966

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.

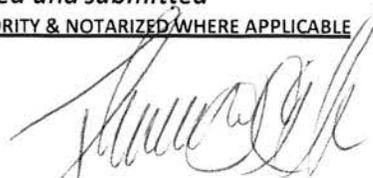
The undersigned, as bidder, does hereby declare that he has read the Request for Bids, Instructions to Bidders, General Provisions, Special Provisions, Technical Specifications & Conditions, Insurance Requirements, Bid Form, Permit Fees, M.O.T., Plan Revisions, Plans and any other documentation for: **ASR TEMPORARY FACILITIES FOR CYCLE TEST 5** and further agrees to furnish all items listed on the attached Bid Form in accordance with the Lump Sum price 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:
THREE HUNDRED THIRTY-THREE THOUSAND DOLLARS & NO CENTS \$ 333,000.00
(TYPE/PRINT) (NUMERIC)

COMPANY: Florida Design Contractors, Inc.
PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted
ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE



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.

Enclosed is a cashier's check or bid bond in the amount of \$ 5⁰⁰0 (insert the word(s) "Bidder's Bond", or "Cashier's Check", as the case may be) in an amount equal and not less than 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. **Note: Failure to submit a 5% bid bond will be cause for rejection of bid.**

The undersigned deposits the above-named security as a bid 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.

PERFORMANCE AND PAYMENT BOND: 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 Department 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".

The successful bidder shall be responsible for furnishing all equipment, labor, materials and tools required for the Neighborhood Expansion Pilot Program in accordance with the plans and specifications so entitled, prepared by the Utilities Department.

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

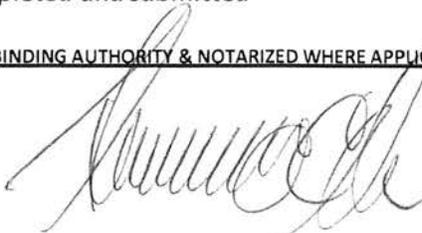
Addendum No. 1 Dated 12/30/15
Addendum No. 2 Dated 1/20/16
Addendum No. _____ Dated _____

Addendum No. _____ Dated _____
Addendum No. _____ Date _____
Addendum No. _____ Dated _____

COMPANY: Florida Design Contractors, Inc.
PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted

ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE


49 | Page



City of North Port
FINANCE DEPARTMENT/PURCHASING DIVISION

Office: 941.429.7170

Fax: 941.429.7173

Email: purchasing@cityofnorthport.com



January 20, 2016

ADDENDUM 2

TO: PROSPECTIVE BIDDERS

RE: REQUEST FOR BID NO. 2016-33 ASR TEMPORARY FACILITIES FOR CYCLE TEST 5

DUE DATE: JANUARY 25, 2015 AT 2:00 PM (EST)

City Hall, Room 302 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 302 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above proposal are issued to modify, and/or clarify the proposal and contract documents (the deletions are as ~~strikethroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and proposals to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

ITEM #1: QUESTIONS/ANSWERS:

Q1: Pertaining to Florida Statute 218.80 "Public Bid Disclosure Act," please provide the permits and fees required for this project.

A1: See attached City building fees. A building permit will be required for construction of the concrete pad and canopy. The permit application shall be submitted by the Contractor. Utilities will cover the City's building permit fees. According to the City's contact with Sarasota County Department of Health (DOH), the Work of this Contract does *not* require a permit through DOH.

Q2: No electrical or I&C drawings or specifications are provided, however the skids and strainers will need power and controls. Please provide.

A2: Electrical will be installed by others, i.e. one of the City's electrical contractors. The Contractor shall coordinate with the City and the City's electrical contractor with respect to coordinating location, schedule, and access for installation of electrical facilities. It is probable that the electrical facilities may not be installed until the concrete pad location is finalized. As noted on the Plan Sheet M-1, six (6) plugs will be provided.

With respect to controls, all equipment is scheduled to be run manually; therefore, no I&C drawings or specifications for this project at this time.

Q3: Who is responsible for supplying the chemical totes? Will the City be paying for these?

A3: The Contractor is responsible for supplying one chemical tote for each of the three chemicals. The Technical Specification Section 11261, Paragraph 2.06, states that the chemical totes to be provided shall have 275 gallon capacity. The Contractor shall provide one full tote (275 gallons) for each of the three required chemicals. Payment for provision of chemical totes is covered under Bid Item #4, Chemical Injection System. As stated in Technical Specification Section 01150, Paragraph 3.04, Bid Item #4 includes supplying and installing the chemical totes and chemicals.

Additional information on the chemicals is provided under both Item #2 Clarifications and Item #3 Additional Information.

ITEM #2: CLARIFICATIONS:

C1: On Plan Sheet M-1, in Note: 1. Delete "~~16 FT x 38 FT~~" and Replace with "18 FT x 40 FT." This change is being made to account for a 12-inch overhang beyond the limits of the concrete pad. The concrete pad is specified as 16 FT x 38 FT.

C2: On Plan Sheet M-1, Note 2: DELETE, "~~SHELL~~" and REPLACE with "SHALL".

C3: The order of chemical injection illustrated on Plan Sheet G-7 is not the order of installation. The order of installation of chemical injection is as presented on Plan Sheet M-1.

C4: In addition to the portable pump, the City will also be providing a temporary 500 gallon diesel fuel tank for the pump. The City will have the supplier of the pump and diesel fuel tank make the connection between the fuel tank and the pump. The Contractor shall coordinate with the City and the supplier of pump and fuel tank, the location, schedule, and access for placement of the pump and fuel tank. Although a 500 gallon diesel fuel tank is provided by the City, the Contractor is not responsible for filling the 500 gallon diesel fuel tank. As noted in Special Provision 43 (SP-43), the Contractor shall provide sufficient volume of diesel fuel for the pump to perform equipment testing. However, the City has changed this requirement as follows:

DELETE Special Provision 43 in its entirety and **REPLACE** with the following:

SP-43 DIESEL FUEL FOR PORTABLE BOOSTER PUMP: Provided the Contractor is not negligent in performing start-up and testing of equipment, the City will provide the diesel fuel for the portable booster pump to perform the start-up and testing required to reach Final Completion of these Contract Document.

C5: In Technical Specification Section 11261, **ADD** the following Paragraph 2.07. B.

2.07. B. Hydrochloric Acid – All hydrochloric acid supplied under the Contract shall conform to the following specification:

Potable Grade for pH reduction in drinking water

% content HCL – 31% Min

Content Fe – 5 ppm Max

Content Pb – 1 ppm Max

Content Total Organic Compounds – 5 ppm Max

Content Non-Volatile Residue – 0.5 % Max

Content Sulfate (SO4) – 0.5% Max

Specific Gravity (at 600 F) – 1.16

C6: In Technical Specification Section 11261, **ADD** the following Paragraph 2.07. C.

2.07. C. Sodium Hydrosulfide – All sodium hydrosulfide supplied under the Contract must be 42% to 47% by weight aqueous solution. It may have the following other chemical compounds – Na₂S 2% by weight max, Na₂CO₃ 2% by weight max. The sodium hydrosulfide shall have a specific gravity of 1.20 to 1.32, and a pH of 11.0 – 13.0.

C7: In Technical Specification Section 11261, in both Paragraphs 2.02.A and 2.02.B, under Pump Capacity (GPH), **DELETE**, “~~99.1 (maximum)~~” and **REPLACE** with “13.2 (maximum)”. In Technical Specification Section 11261, Paragraph 2.02.C, under Pump Capacity (GPH), **DELETE**, “~~10 (maximum)~~” and **REPLACE** with “13.2 (maximum)”.

C8: Plan Sheet C-1 calls for “Install 164-LF 4” PIPE”. This pipe is the backwash pipe from the filters. From the new concrete pad to approximately 15 feet prior to the settling pond discharge location, the 4-inch diameter pipe shall be installed below ground surface. Three (3) feet of cover above the pipe should be provided. As indicated on Sheet M-1, the pipe installed below ground shall be 4-inch Class 125 PVC. The Contractor shall provide and install locate wire on top of pipe. Prior to installation of the pipe, the Contractor shall confirm City staff have performed location of utilities within the proposed alignment. There are existing pipes within approximately 15 feet of the settling pond discharge location. Beginning at approximately 15 to 20 feet prior to the settling ponds, the pipe shall be installed above ground to discharge into the settling pond. At this location adjacent to the settling ponds, the pipe above ground shall be 4-inch Schedule 80 PVC. The above-ground PVC pipe shall be painted in accordance with Section 09000 – Painting and Protective Coatings. Pipe above ground shall be staked as described in Special Provision 49. The Work of this pipe is paid under Bid Item No. 3, Filters.

C9: In Technical Specification Section 01150, **DELETE** Paragraph 3.04.B in its entirety and **REPLACE** with the following Paragraph 3.04.B.

3.04. B. Measurement: The quantity to be paid for under this item shall be measured as a unit price for each complete chemical injection system.

C10: In Technical Specification Section 01150, Paragraph 3.03.A, at the end of the paragraph, **ADD** the following sentence. “The Work of this Bid Item shall include, but not be limited to, provision and installation of the 4-inch filter backwash discharge pipe that is to be installed between the filters and the discharge location into one of the existing settling ponds. The length of the pipe provided on Plan Sheet C-1 is approximate. As applicable, Special Provision 49 applies to the filter backwash discharge pipe.”

C11: To clarify, Bid Item No. 7, ASR Discharge Piping and Connections, includes, but is not limited to, provision and installation of the pipe connecting the two connection points presented on Plan Sheet M-3.

C12: To clarify, Bid Item No. 2, Raw Water Pump Station #2 Modifications, includes, but is not limited to, provision and installation of pipe connecting Raw Water Pump Station #2 to the portable pump provided by the City; and, from the portable pump to the filter manifold. This item shall include all necessary coordination with the City and the supplier of the portable pump and fuel tank. This item shall include connection to the portable pump including required fittings specified on Plan Sheet M-1.

ITEM #3: ADDITIONAL INFORMATION:

AI1: A chemical representative for sodium bisulfide that meets the specifications is as follows:

TDC Rep:

Michael Ourso

Account Executive

(225) 921-5179

<http://www.genesisenergy.com/index.cfm?md=pagebuilder&tmp=home&oid=24&pnid=3&nid=19>

AI2: Special Provision 42 identified the specified portable booster pump for the project as a Model CD 140M, size 4-inch, as manufactured by GODWIN PUMPS, Bridgeport, New Jersey, or approved equal. The City is currently examining use of a Thompson Pump Model 4JSCD-DJD-45HF115-MC, 4" Skid-Mounted, Sound Attenuated, High Efficiency, Dry Priming, booster pump.

ITEM #4: ATTACHMENTS:

1. CS3 Waterworks request for VAF Filtration Systems be included as an approved manufacturer for the coarse screens and 10 micron fine screens for this project.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Alla V. Skipper

Alla V. Skipper, CPPB
Senior Contract Specialist
Purchasing Department
4970 City Hall Blvd.
North Port, Florida 34286

Tel: 941.429.7172

Fax: 941.429.7173

E-mail: purchasing@cityofnorthport.com

Receipt of Addendum No. 2 shall be noted within the Bid Form in the appropriate section.
End of Addendum No. 2



City of North Port
 FINANCE DEPARTMENT/PURCHASING DIVISION
 Office: 941.429.7170
 Fax: 941.429.7173
 Email: purchasing@cityofnorthport.com



December 30, 2015

ADDENDUM 1

TO: PROSPECTIVE BIDDERS

RE: REQUEST FOR BID NO. 2016-33 ASR TEMPORARY FACILITIES FOR CYCLE TEST 5

DUE DATE: JANUARY 25, 2015 AT 2:00 PM (EST)
City Hall, Room 302 (Bids need to be delivered to Room 337 so they can be date and time stamped on or before 2:00 PM. Bid opening will commence in Room 302 shortly thereafter)

Bidders are hereby notified that this addendum shall be made part of the above-named bid and contract documents. The following changes to the above proposal are issued to modify, and/or clarify the proposal and contract documents (the deletions are as ~~strikethroughs~~ and additions as underlined). These items shall have the same force and effect as the original documents, and proposals to be submitted on the specified date shall conform with the additions, deletions and revisions as listed herein.

ITEM #1: QUESTIONS/ANSWERS:

REVISED "BID SCHEDULE/SUMMARY OF PAY ITEMS" to reflect the above referenced changes/corrections.

DELETE BID FORM provided with the original specifications package and REPLACE with the REVISED BID FORM BELOW. BID FORM ALSO PROVIDED IN EXCEL FORMAT AS A SEPARATE DOCUMENT. NOTE TO BIDDERS: Please make sure to use the REVISED FORMS when submitting the bid. Otherwise bid shall be deemed non-responsive for incorrect bid form submittal.

Please note the following adjustments have been made to the original bid schedule; the revised spreadsheet will only contain the revised quantity.

Firms are required to acknowledge receipt of this addendum on their proposal forms. All other terms and conditions of the original proposal and contract documents remain the same.

Alla V. Skipper

Alla V. Skipper, CPPB
 Senior Contract Specialist
 Purchasing Department
 4970 City Hall Blvd.
 North Port, Florida 34286

Tel: 941.429.7172
 Fax: 941.429.7173

E-mail: purchasing@cityofnorthport.com

N/A

REQUEST FOR CHANGE/EXCEPTION/BRAND NAMES/APPROVED EQUAL FORM

THIS FORM MUST BE USED FOR REQUESTED CLARIFICATIONS, CHANGES, EXCEPTIONS, SUBSTITUTES OR APPROVAL OF ITEMS EQUAL TO ITEMS SPECIFIED WITH A BRAND NAME AND MUST BE SUBMITTED ADDENDA DUE DATE, AS SPECIFIED IN "QUESTIONS, CLARIFICATIONS, ALTERNATES AND OMISSIONS." PROS/CONS AND OTHER JUSTIFICATIONS SHALL BE EXPLAINED BELOW. TECHNICAL AND ALL OTHER SUPPORTING INFORMATION SHALL BE ATTACHED.

Brand names where used in the technical specifications, are intended to denote the standard of quality and performance required of the particular material or product. The term "equal" or "equivalent", when used in connection with brand names, shall be interpreted to mean a material or product that is similar and equal in type, quality, size, capacity, composition, finish, color and other applicable characteristics to the material or product specified by trade name, and that is suitable for the same use and capable of performing the same function, in the opinion of the City's Engineer of Record, as the material or product so specified. The City's Engineer of Record must approve proposed equal items before they are purchased or incorporated in the Work.

SPECIFIED ITEM:

Section: _____ Page: _____ Paragraph: _____

QUESTION/CLARIFICATION, EXCEPTION/DEVIATION OR APPROVED EQUAL:

Description: _____
(Use additional sheets, if necessary)

Submitted by: _____ (Print Name)  (Signature)
_____ (Firm Name) _____ (Telephone)
_____ (E-mail)

Attach product description, specifications, drawings, photographs, performance and test data for evaluation of the request with applicable portions of the data clearly identified.

AGENCY ACTION (For use by ENGINEER/CONSULTANT):

REQUEST #: _____

Accepted _____ Not Accepted: _____ Received Too Late: _____

See Addendum _____ See Response Below: _____

"REVISED" 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: Bids must be submitted on the Bid Schedule included in this specification. All blank spaces in the Bid Form must be filled in legibly and correctly in ink. *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 PRICE line item and the extended price. If vendor is not providing a bid price for an item, zero (0) must be designated on that line item. Failure to identify a monetary amount in any of the UNIT PRICE line items may cause bidder's 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.

BID ITEM	DESCRIPTION	UOM	EST QTY	UNIT PRICE	EXTENDED TOTAL AMOUNT
2	Raw Water Pump Station # 2 Modifications	LS	1	5,000-	\$ 5,000-
3	Filters	LS	1	119,000-	\$ 119,000-
4	Chemical Injection System	EA	3	28,000-	\$ 84,000-
5	Concrete Pad	LS	1	38,000-	\$ 38,000-
6	Aluminum Canopy	LS	1	28,000-	\$ 28,000-
7	ASR Discharge Piping and Connections	LS	1	39,000-	\$ 39,000-
8	ASR Well Manifold Modifications	LS	1	8,000-	\$ 8,000-
SUB-TOTAL					\$ 321,000-
1	MOBILIZATION/DEMOBILIZATION (shall not exceed five percent (5%) of the sub-total of bid items 2-8 above (excluding this item))	LS	1	12,000-	12,000-
TOTAL					\$ 333,000-

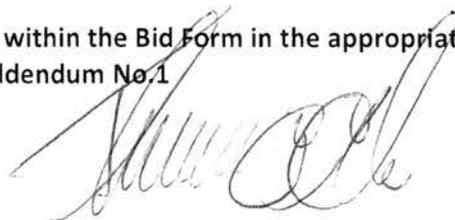
COMPANY: Florida Design Contractors, Inc
 PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted

ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE

Receipt of Addendum No. 1 shall be noted within the Bid Form in the appropriate section.

End of Addendum No.1



EQUIPMENT

Equipment is located at: 1326 So. Killian Dr. + 12467 62nd St., Ste. A-102
Lake Park, FL 33403 Largo, FL 33773

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.)

Equipment	Manufacturer	Year	Condition	Leased/Owned (If leased, date of expiration)
See Attached "Equipment List"				

SOURCE OF SUPPLY AND SUBCONTRACTOR FORM

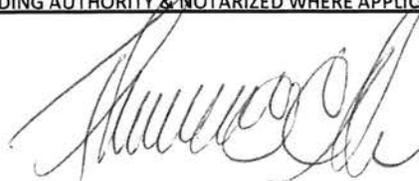
The following sources of supply and subcontractors shall be used for the ASR TEMPORARY FACILITIES FOR CYCLE TEST 5. If bidder does not have a source of supply or subcontractor, insert "to be determined". When a source or subcontractor is determined, selection will be subject to City approval. (If not applicable, state N/A).

- SUPPLIER(S)**
1. Trinova - Chemical Pumps
 2. Orival Filters - Orival Filters
 3. _____
 4. _____

COMPANY: Florida Design Contractors, Inc.

PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted
ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE

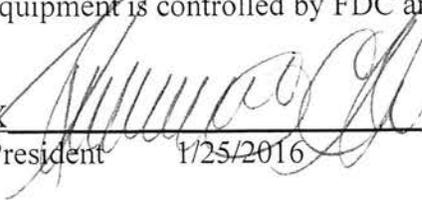




Equipment List

<u>Year & Equip. #</u>	<u>Equip. Type</u>	<u>Condition</u>	<u>Own or Lease</u>
13-310K	Combo	Excellent	Own
10-WB146	Combo	Good	Own
07-WB140	Combo	Good	Own
05-WB140	Combo	Fair	Own
07-WA200	Loader	Fair	Own
99-WA180	Loader	Fair	Own
03-PC228	Excavator	Fair	Own
07-PC200	Excavator	Fair	Own
05-T190	Bobcat	Fair	Own
09-T250	Bobcat	Good	Own
15-ms35	Mini Excavator	Excellent	Own
06-crane	Truck	Good	Own

I Thomas H. Clarke, President of Florida Design Contractors confirms that the above listed equipment is controlled by FDC and is available for performing work to be done in this bid.

X 

President 1/25/2016

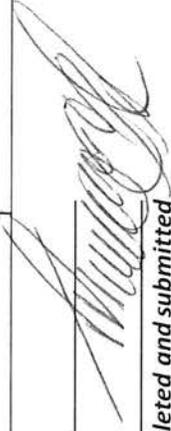
N/A

SUBCONTRACTOR FORM – PART A

The following subcontractors shall be used for the ASR TEMPORARY FACILITIES FOR CYCLE TEST 5. If bidder does not have a subcontractor, insert "to be determined." When determined, selection will be subject to City approval. All subcontractors are subject to City approval. (If not applicable, state N/A).

Subcontractor Name	Subcontract to Whom	Work Description	Total Amount Sublet	Percent of total contract

Subcontractor Name	Address	Contact Name	Contact Number	Contact email

COMPANY: Florida Design Contractors, Inc
 PRINT NAME/TITLE: Thomas H. Clarke - President 

This page must be completed and submitted
 ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE.

QUALIFICATIONS AND REFERENCES

The Bidder (Company) shall have been in **COMMERCIAL CONSTRUCTION BUSINESS WITH EXPERIENCE** in projects involving water distribution 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 ASR TEMPORARY FACILITIES FOR CYCLE TEST 5.**

1. Business/Customer Name: See Attached Highlighted "Project Experience"

Name of Contact Person: _____ Position _____

E-mail Address: _____ Telephone# _____

Project Description/Location: _____

Contract Term: From _____ TO _____

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

2. Business/Customer Name: _____

Name of Contact Person: _____ Position _____

Email Address: _____ Telephone# _____

Project Description/Location: _____

Contract Term: From _____ TO _____

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

3. Business/Customer Name: _____

Name of Contact Person: _____ Position _____

Email Address: _____ Telephone# _____

Project Description/Location: _____

Contract Term: From _____ TO _____

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

4. Business/Customer Name: _____

Name of Contact Person: _____ Position _____

Email Address: _____ Telephone# _____

Project Description/Location: _____

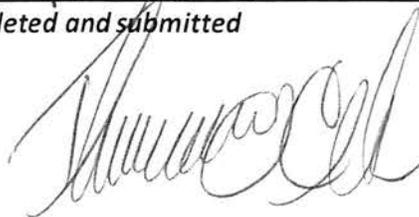
Contract Term: From _____ TO _____

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

COMPANY: Florida Design Contractors, Inc.

PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted



Florida Design Contractors
Project Experience
As of December 2015

Project #	Project Name	Owner	Engineer	Scope	Contract \$	Started	Completed	County
1055	DelLand 1.0 MGD ASR System & Chemical Bldg	City of Deland 1102 S. Garfield Ave Deland, FL 32724 Keith D. Riger, P.E. 386-626-7197 Fax 386-736-5366 ktriker@deland.org	KLG Engineering Michael Waldron 8401 Lake Worth Rd, Suite 117 Lake Worth, FL 33467 (O) 561-847-2871 Ext 1475 (C) 561-719-2421 System. mike.waldron@klgeng.com	Construct a 1.0 MGD Aquifer Storage and Recovery System, including one vertical turbine well pump, four chemical storage and feed systems, chemical building, one connection to the existing City of Deland Potable Water System.	\$1,135,984.00	2010		Volusia
1050	Lehigh Acres WWTP Reclaimed Water Storage, Pumping, and Deep Injection Well Conveyance System	Florida Governmental Utility Authority 280 Wekiva Springs Road, Suite 2000 Longwood, FL 32779 Rob Dickson 407-629-6900 rdickson@govmserv.com	PBS&J 482 South Keller Road Orlando, FL 32810 407-647-7275 Fax 407-647-0595	Partial abandonment of existing sludge drying beds, sludge piping, gravity piping and the installation of reclaimed water storage, pumping, transmission piping, valves, meters and connection to existing lines and wells.	\$2,066,100.00	2009		Lee
975	Hollywood Seminole Indian Reservation - Water Treatment Facility	Seminole Tribe of Florida 6300 Stirling Road Hollywood, FL 33024	AECOM W. Sunrise Blvd. FL 33323 954-410-1786 rich.ukkus@aecom.com	13450 Mechanical Contractor subcontracted to engineer for installation of all mechanical equipment. Including water supply wells, aeration tower, nanofiltration, RO treatment equipment and all chemical piping.	\$2,260,000.00	2008		Broward
955	Wellhead Equipment for Floridian Aquifer Well No F-1 and F-2	City of Lake Worth 1900 Second Ave North Lake Worth, FL 33461	Mock Roos & Associates 5720 Corporate Way West Palm Beach, FL 33407 John Leemon, 561-683-3113 john.leemon@mockroos.com	Construction of two separate Floridian well sites. Electrical control buildings, back-up generators, site work, testing and start-up.	\$1,282,131.00	2007		Palm Beach
1230	IT Shelters Replacement	South Florida Water Management Dist 3301 Gun Club Road West Palm Beach, FL 33406 Jery Flynn - jflynn@sfwmd.gov (P) 561-682-2609 (C) 561-603-3140	South Florida Water Management Dist 3301 Gun Club Road West Palm Beach, FL 33406 Jery Flynn - jflynn@sfwmd.gov (P) 561-682-2609 (C) 561-603-3140	Construction of four (4) secure Microwave communication sites and shelters replacement. Construction includes preparation of the sites and installation of new precast concrete microwave equipment shelters, provide new electrical connection and communication cables to the new buildings; and demolish existing building at some of the sites. Construction of access roadway and drainage improvements.	\$2,344,000.00	15-Feb	15-Dec	Palm Beach & Hendry
1220	FGUA Lehigh Acres WWTP Headworks	Florida Governmental Utility Authority 280 Wekiva Springs Road, Suite 2000 Longwood, FL 32779 Rob Dickson 407-629-6900	King Engineering 4921 Memorial Highway Tampa, FL 33634 Loc Truong 813-860-8881	Construction of new concrete headworks complete with mechanical screen, manual bar screen, grit removal system and ancillary equipment, new splitter box, new influent flow meter assembly. Construction on In-plant RCW pumps & yard pipe and valves. Modifications to the existing contact stabilization plant(s), electrical instrumentation and controls. Construction of new concrete headworks complete with mechanical screen, manual bar screen, grit removal system and ancillary equipment. Construction of new splitter box. Construction of new influent flow meter assembly; Construction on In-plant RCW pump and piping. Yard pipe and valves; Modifications to the existing contact stabilization plant(s). Electrical instrumentation and controls.	\$3,097,000.	14-Nov	15-Oct	Lee
1215	Seville Water Treatment Facility Modifications	Board of County Commissioners Hernando County, Florida 20 North Main Street, Room 131 Brooksville, FL 34601 352-754-4020	Arcadis 14055 Riveredge Drive Tampa, FL 33637 2090	Construction of water plant to include a .75 MG pre-stressed concrete ground storage tank, a high service pump station building with high service pumps and separate chlorine room with liquid chlorine and pump skid system, a 16" potable well pump and casing, all associated yard piping, site work, drainage retention areas, electrical asphalt paving and lighting, and all other associated appurtenances and improvements	\$2,787,250.00	14-Oct	15-Oct	
1195	Mullins Water Booster Station	City of Coral Springs 9551 West Sample Road Coral Springs, FL 33065	Eckler Engineering, Inc. 4700 Riverside Drive, Ste 110 Coral Springs, FL 33067 Doug Hammann, 954-510-4700 dhammann@ecklereengineering.com	Miscellaneous Architectural and Structural improvements to the booster station. Furnished and installed four horizontal split case pumps, yard piping, process instrumentation and controls, electrical work and installation of 300 KW generator system. Installation of a new access gate system complete with all accessories including sitework and restoration.	\$1,391,000	14-Jul	15-Nov	Broward
1185	WTP 2, 3 & 8 New Production Wells	Palm Beach County Water Utilities Dept. 8100 Forest Hill Blvd West Palm Beach, FL 33416 Joe Tancredi 561-493-6088 Fax 561-493-6113	MWH 100 South Dixie Highway West Palm Beach, FL 33401 561-650-0070	Furnished all labor, equipment & materials necessary to construct 8 surficial aquifer production wells and associated raw water main piping & directional drilling in the vicinity of System 2 WTP in West Palm Beach, System 3 in Boynton Beach and System 8 in West Palm Beach.	\$3,447,780	14-Jul	15-Apr	Palm Beach

STATEMENT OF ORGANIZATION

Name of Business: Florida Design Contractors, Inc.

DBA (if any): N/A

Type of Entity (Sole Proprietor, Corporation, LLC, LLP, Partnership, etc): Corporation

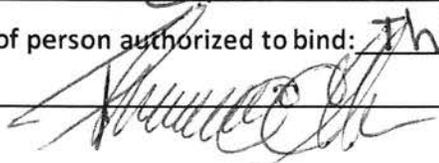
Business Address: 1326 So. Killian Drive,
Lake Park, FL 33403

Mailing Address (If applicable): Same as above

Phone: 561-845-1233 Fax: 561-848-5992

E-Mail: tclarke@floridadesigncontractors.com

Name/Title of person authorized to bind: Thomas H. Clarke - President

Signature: 

Are you registered with the State of Florida Department of State? Yes or No

If yes, what is your State document number? CGC 040304

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

STATE OF Florida
COUNTY OF Palm Beach

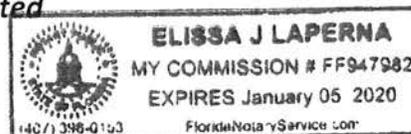
Sworn to and subscribed before me this 25th day of January, 2016, by Thomas H. Clarke
who is personally known to me or has produced his/her driver's license as identification.


Notary Public - State of Florida

Print Name: _____

Commission No: _____

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:

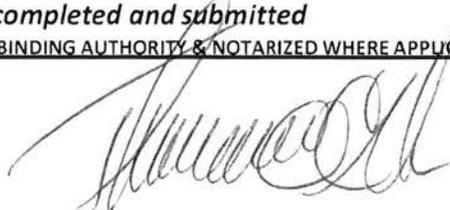
Are you going to request an advisory board member waiver?

- 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.

COMPANY: Florida Design Contractors, Inc.
PRINT NAME/TITLE: Thomas H. Clarke - President

This page must be completed and submitted
ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE



AFFIDAVIT
Claiming Status as a LOCAL BUSINESS

N/A

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

State of _____ }
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 _____, 2016, 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.

AFFIDAVIT

N/A

Claiming Status as a North Port Local Business

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

State of _____ }
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 _____, 2016, 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.

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, Florida Design Contractors, Inc., being an authorized representative of the Respondent, located at 1326 South Killian Drive, Lake Park, FL 33403

City: Lake Park State: FL Zip Code: 33403, 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: [Handwritten Signature] Date: 1/25/16

Telephone #: 561-845-1233 Fax #: 561-848-5992

Federal ID #: 65-0306966

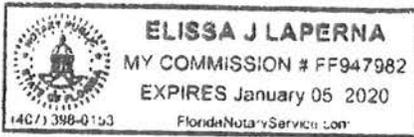
STATE OF Florida
COUNTY OF Palm Beach

Sworn to and subscribed before me this 25th day of January, 2016
by Thomas H. Clarke

who is personally known to me or has produced his/her driver's license as identification.

Elissa J. Laperna
Notary Public - State of Florida

Print Name: _____
Commission No: _____



NON-COLLUSIVE AFFIDAVIT

State of Florida
County of Palm Beach

SS. }
}

Before me, the undersigned authority, personally appeared: Thomas H. Clarke
who, being first duly sworn, deposes and says that:

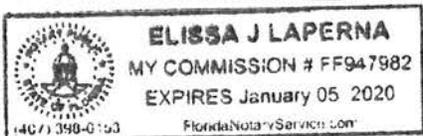
1. He/She is the President (Owner, Partner, Officer, Representative or Agent) of Florida Design Contractors, Inc., the Respondent that has submitted the attached reply;
2. He/She is fully informed respecting the preparation and contents of the attached reply and of all pertinent circumstances respecting 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 25th day of January, 2016.

By: [Signature]
Thomas H. Clarke
(Printed Name)
President
(Title)

STATE OF Florida
COUNTY OF Palm Beach

Sworn to and subscribed before me this 25th day of January, 2016, by Thomas H. Clarke who is personally known to me or has produced his/her driver's license as identification.



Elissa J. Laperna
Notary Public - State of Florida
Print Name: _____
Commission No: _____

COMPANY: Florida Design Contractors, Inc.
PRINT NAME/TITLE: Thomas H. Clarke - President

DRUG FREE WORKPLACE FORM

The undersigned Respondent in accordance with Florida Statute §287.087 hereby certifies that Florida Design Contractors, 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.

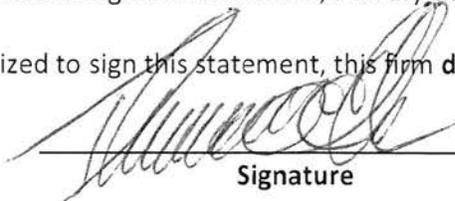
Check one:



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

Thomas H. Clarke

Print Name

1/25/16

Date

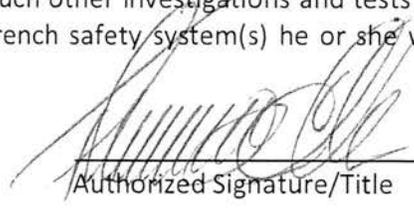
This page must be completed and submitted

ALL BID PAGES MUST BE EXECUTED BY A CORPORATE/BINDING AUTHORITY & NOTARIZED WHERE APPLICABLE

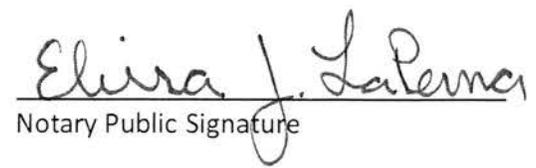
SWORN STATEMENT: THE FLORIDA TRENCH SAFETY ACT
(Complete if applicable)

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

- This Sworn Statement is submitted with Bid No. 2016-33 for the construction of ASR Temporary Facilities for Cycle Test 5.
- This Sworn Statement is submitted by Florida Design Contractors, Inc. whose business address is 1326 So. Killian Drive, Lake Park, FL and (if applicable) its Federal Employer Identification Number (FEIN) is 65-0306966. 33403
- My name is Thomas H. Clarke
(PRINTED OR TYPED NAME OF INDIVIDUAL SIGNING) and hold the position of President with the above entity.
- 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.
- The undersigned assures that the entity will comply with the applicable Trench Safety Standards and agrees to indemnify and hold harmless the City, and any of their agents or employees from any claims arising from the failure to comply with said standard.
- The undersigned has appropriated \$ \$10.00 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: _____
- The undersigned has appropriated \$ \$10.00 per square foot for compliance with shoring safety requirements and intends to comply by instituting the following procedures: _____
- 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.

 - President
Authorized Signature/Title

Sworn to and subscribed before me
this 1/25/16
(date)


Notary Public Signature

My Commission Expires: 1/5/2020

(Notary Seal)



LOBBYING CERTIFICATION

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

STATE OF Florida
COUNTY OF Palm Beach

This 25th day January of 2016 Thomas H. Clarke, being first duly sworn, deposes and says that he or she is the authorized representative of Florida Design Contractors (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.

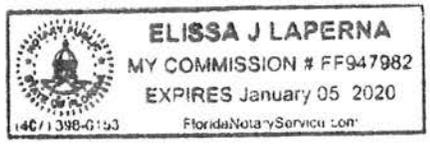
Signed, sealed and delivered this 25th day of January, 2016.

By: [Signature]
Thomas H. Clarke
(Printed Name)
President
(Title)

STATE OF Florida
COUNTY OF Palm Beach

Sworn to and subscribed before me this 25th day of January, 2016, by Thomas H. Clarke who is personally known to me or has produced his/her driver's license as identification.

[Signature]
Notary Public - State of _____
Print Name: _____
Commission No: _____



THIS PAGE MUST BE SUBMITTED WITH BID



TriNova Inc.
4110 South Florida Avenue, Suite 200
Lakeland, Florida 33813

P: 863.682.4500
F: 863.687.0077
www.trinovainc.com

January 18, 2016

Finance Department / Purchasing Division

City of North Port

4970 City Hall Boulevard

North Port, FL 34286

RE: Request for Bid 2016-33

ASR Temporary Facilities for Cycle Test 5

Reference Letter for Chemical Pump Installation

To Whom it May Concern,

Please accept this letter as a formal reference for Florida Design Contractors with respect to ProMinent chemical metering pump installations.

Over the past decade Florida Design Contractors has been responsible for a multitude of successful ProMinent chemical metering pump installations in water plants across the state of Florida. The scope of work included purchasing, submittal review, coordination with other trades, (electrical, instrumentation, etc.), installation, start up, and warranty. The current staff of Florida Design was also responsible for the installation of the ProMinent metering pumps at the City of North Port Reverse Osmosis Plant.

Should you have any questions or require additional information, please feel free to call.

Thank you,

Ted Penland

Project Development Driver



TriNova - Florida



TriNova Inc.
4110 South Florida Avenue, Suite 200
Lakeland, Florida 33813

P: 863.682.4500
F: 863.687.0077
www.trinovainc.com

4110 S. Florida Ave Suite 200 | Lakeland, FL 33813

863-738-2009 Cell | 863-808-0249 Office

ted.penland@trinovainc.com | www.trinovainc.com



FLORDES-02 LGLEASON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/27/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Collinsworth, Alter, Lambert, LLC 23 Eganfuskee Street Suite 102 Jupiter, FL 33477	CONTACT NAME: Lori B. Gleason	FAX (A/C, No): (561) 427-6730	
	PHONE (A/C, No, Ext): (561) 776-9001	E-MAIL ADDRESS:	
INSURED Florida Design Contractors, Inc. 1326 South Killian Drive West Lake Park, FL 33403	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Amerisure Mutual Ins Co		23396
	INSURER B : Amerisure Insurance Co		19488
	INSURER C : North River Insurance Company		21105
	INSURER D : Travelers Casualty Ins Co of America		
	INSURER E :		
INSURER F :			

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU & Contractual <input checked="" type="checkbox"/> Broad Form Prop. Dam GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPP2052271060014	03/01/2015	03/01/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			CA20523030601	03/01/2015	03/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP Coverage \$ 10,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			5811043365	03/01/2015	03/01/2016	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 10,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC205227206	03/01/2015	03/01/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Rented/Leased Equip.			QT6607132P826TIL14	03/01/2015	03/01/2016	Limit 250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is named as additional Insured including products and completed operations for general liability per CG7048, auto liability, and umbrella liability when required by written contract. General Liability is primary and non contributory when required by written contract. Waiver of subrogation applies to General Liability, Auto, Umbrella, and Workers' Compensation coverages for the additional insureds when required by written contract. Should any of the above described policies be cancelled, notice will be delivered in accordance with the policy provisions.

CERTIFICATE HOLDER

CANCELLATION

Florida Design Contractors, Inc.
1326 South Killian Drive W
Lake Park, FL 33403

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



ANNE M. GANNON
 CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

1326 S KILLIAN DRIVE
 LAKE PARK, FL 33403-1919

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0102 CW GENERAL CONTRACTOR	CLARKE THOMAS H	CGC040304	B15.848687 - 07/23/15	\$369.80	B40155446

This document is valid only when received by the Tax Collector's Office.

**STATE OF FLORIDA
 PALM BEACH COUNTY
 2015/2016 LOCAL BUSINESS TAX RECEIPT**

B1 - 228

FLORIDA DESIGN CONTRACTORS INC
 FLORIDA DESIGN CONTRACTORS INC
 1326 S KILLIAN DR
 LAKE PARK, FL 33403-1919



**LBTR Number: 199602411
 EXPIRES: SEPTEMBER 30, 2016**

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



ANNE M. GANNON
 CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

1326 S KILLIAN DRIVE
 LAKE PARK, FL 33403-1919

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0051 GENERAL CONTRACTOR	CLARKE THOMAS H	CGC040304	B15.848686 - 07/23/15	\$27.50	B40155447

This document is valid only when received by the Tax Collector's Office.

**STATE OF FLORIDA
 PALM BEACH COUNTY
 2015/2016 LOCAL BUSINESS TAX RECEIPT**

B3 - 227

FLORIDA DESIGN CONTRACTORS INC
 FLORIDA DESIGN CONTRACTORS INC
 1326 S KILLIAN DR
 LAKE PARK, FL 33403-1919



**LBTR Number: 199602410
 EXPIRES: SEPTEMBER 30, 2016**

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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



LICENSE NUMBER
CGC040304

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

CLARKE, THOMAS HARMAN
FLORIDA DESIGN CONTRACTORS INC
1326 S KILLIAN DR
LAKE PARK FL 33403



ISSUED: 06/29/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1406290001315

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we
Florida Design Contractors, Inc. (Here insert full name and address or legal title of Contractor)

1326 S. Killian Drive, Lake Park, FL 33403
as Principal, hereinafter called the Principal, and (Here insert full name and address or legal title of Surety)
Fidelity and Deposit Company of Maryland

1400 American Lane, Tower 1, Schaumburg, IL 60196

a corporation duly organized under the laws of the State of Maryland
as Surety, hereinafter called the Surety, are held and firmly bound unto
City of North Port

4970 City Hall Blvd., North Port, FL 34286
as Obligee, hereinafter called the Obligee, in the sum of ---- Five Percent of the Amount Bid -----
Dollars (\$ 5%)

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind
ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by
these presents.

WHEREAS, The Principal has submitted a bid for (Here insert full name, address and description of project)
RFB No 2016-33 ASR Temporary Facilities for Cycle Test 5

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract with
the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding
or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt
payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter
such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the
penalty hereof between the amount specified in said bid and such larger amount for which the Obligee may in good faith
contract with another party to perform the Work covered by said bid, then this obligation shall be null and void, otherwise
to remain in full force and effect.

Signed and sealed this 25th day of January, 2016

Elisa Salerna (Witness)

(Witness)

Florida Design Contractors, Inc. (Principal) (Seal)

Thomas H. Clarke (Title) President

Fidelity and Deposit Company of Maryland (Surety) (Seal)

Allyson Foss (Title) Attorney-In-Fact & Florida Licensed Resident Agent

Inquiries: (321) 800-6594

**ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Maryland, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Maryland (herein collectively called the "Companies"), by **MICHAEL BOND, Vice President**, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint **Allyson FOSS and Jorge BRACAMONTE, both of Winter Park, Florida, EACH** its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: **any and all bonds and undertakings**, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said **ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND**, this 24th day of February, A.D. 2015.

ATTEST:

**ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND**



By: *Eric D. Barnes*
Secretary
Eric D. Barnes

Michael Bond
Vice President
Michael Bond

State of Maryland
County of Baltimore

On this 24th day of February, A.D. 2015, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, **MICHAEL BOND, Vice President, and ERIC D. BARNES, Secretary**, of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, deposed and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.

Maria D. Adamski



Maria D. Adamski, Notary Public
My Commission Expires: July 8, 2019