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Detail by Entity Name

Florida Profit Corporation

MRT LAWN & GARDEN CENTER, INC.

Filing Information

Document Number P04000147290
FEI/EIN Number 20-1830261
Date Filed 10/25/2004
State FL
Status ACTIVE

Principal Address

5175 ENGLEWOOD ROAD
VENICE, FL 34293

Changed: 03/25/2009

Mailing Address

779 COMMERCE DRIVE
SUITE 2
VENICE, FL 34292

Changed: 02/28/2014

Registered Agent Name & Address

HINES, CHARLES D
200 Sunrise Drive
Nokomis, FL 34275

Name Changed: 04/12/2005

Address Changed: 04/08/2015

Officer/Director Detail

Name & Address

Title PST

TAYLOR, JAMES D
779 COMMERCE DRIVE, SUITE 2
VENICE, FL 34292

Title VP

TAYLOR, ELIZABETH E
779 COMMERCE DRIVE, SUITE 2
VENICE, FL 34292

Annual Reports

Report Year	Filed Date
2014	02/28/2014
2015	04/08/2015
2016	02/12/2016

Document Images

02/12/2016 -- ANNUAL REPORT	View image in PDF format
04/08/2015 -- ANNUAL REPORT	View image in PDF format
02/28/2014 -- ANNUAL REPORT	View image in PDF format
02/21/2013 -- ANNUAL REPORT	View image in PDF format
04/20/2012 -- ANNUAL REPORT	View image in PDF format
03/31/2011 -- ANNUAL REPORT	View image in PDF format
04/16/2010 -- ANNUAL REPORT	View image in PDF format
03/25/2009 -- ANNUAL REPORT	View image in PDF format
03/18/2008 -- ANNUAL REPORT	View image in PDF format
04/17/2007 -- ANNUAL REPORT	View image in PDF format
04/11/2006 -- ANNUAL REPORT	View image in PDF format
04/12/2005 -- ANNUAL REPORT	View image in PDF format
10/25/2004 -- Domestic Profit	View image in PDF format

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. <u>#1</u>	Dated <u>10/21/2016</u>	Addendum No. <u>#4</u>	Dated <u>11/09/2016</u>
Addendum No. <u>#2</u>	Dated <u>11/01/2016</u>	Addendum No. <u>#5</u>	Dated <u>11/14/2016</u>
Addendum No. <u>#3</u>	Dated <u>11/04/2016</u>	Addendum No. _____	Dated _____


BID BOND AND PERFORMANCE/PAYMENT BOND

BID BOND: ACCOMPANYING THIS PROPOSAL IS "BIDDER'S BOND"
(insert: "cash", "bidder's bond", or "certified check", as the case may be) in an amount equal to at least 5% of the total amount of the bid, payable to the City of North Port. Cashier's checks will be returned to all bidders after award of bid.

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".

COMPANY NAME: MRT LAWN AND GARDEN CENTER INC.
SIGNATURE:  J. DAVID TAYLOR PRESIDENT

This page must be completed and submitted

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

MRT ORIGINAL

**SOUTH BISCAYNE DRIVE MEDIAN LANDSCAPING AND IRRIGATION PROJECT
REQUEST FOR BID NO. 2017-09**

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 <u>this</u> checklist with bid submittal	X		
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 <u>must</u> be included with submission. If Other, explain on a separate sheet.	X		
3	Bid Form: Totals provided and signed by Binding authority	X		
	Acknowledge addenda signed by Binding authority	X		
	Bid Schedule: Completed (entered an amount in every line item) signed by Binding authority	X		
4	Statement of Organization: completed, signed and notarized	X		
5	References: Completed and signed	X		
6	Conflict of Interest: Completed and signed	X		
7	Equipment and Source of Supply/Subcontractors: Completed	X		
8	<ul style="list-style-type: none"> • 'Affidavit Claiming 'Local Business' OR • 'North Port Local Business' OR • If neither 'X-through the documents' 			
11	Drug-Free Workplace (If Applicable): Completed and signed	X		
	Florida Trench and Safety Affidavit (If Applicable): Completed and signed	X		
12	Public Entity Crime Information: Completed, signed and notarized	X		
13	Non-Collusive Affidavit: Completed, signed and notarized	X		
14	No Lobbying Affidavit: Completed, signed and notarized	X		
15	Bid Bond (Attached)	X		
16	Number of Originals: 1 (signed)	X		
17	Number of copies: 1 (signed)	X		
18	CD or USB Flash Drive: One (1) electronic version in Portable Document Format (PDF) or Flash Drive containing the entire submittal.	X		
19	Insurance Certificate Bidder has reviewed all the insurance requirements and is able to provide a certificate within ten (10) days of award.	X		
20	Credit Cards Does your company accept Credit Card Payments	X		
21	LABEL FOR SEALED BID: RFB NO. 2015-28 Biscayne Landscaping and Irrigation City of North Port Purchasing Division Alla V. Skipper, CPPB, Senior Contract Specialist 4970 City Hall, Suite 337 North Port, Florida 34286			

NAME/TITLE OF PERSON AUTHORIZED TO BIND: J. DAVID TAYLOR PRESIDENT MRT

This page must be completed and submitted

**SOUTH BISCAYNE DRIVE MEDIAN LANDSCAPE AND IRRIGATION PROJECT
FROM EAST STAFORD TERRACE TO ELYTON DRIVE**

"REVISED" BID SCHEDULE

PAY ITEM NO.	SYM.	DESCRIPTION	SIZE	UNIT	EST. QTY	UNIT COST	TOTAL COST
		LANDSCAPE INSTALLATION					
		TREES					
1	ED	Japanese Blueberry Tree - <i>Elaeocarpus decipiens</i> TM	10' Ht, 4' Spr, 2" Cal, standard	EA	3	\$ 437.50	\$ 1,312.50
2	LS	Queen's Crape Myrtle - <i>Lagerstroemia speciosa</i>	10' Ht, 4' Spr, 2" Cal, B&B, std	EA	4	\$ 437.50	\$ 1,750.00
3	LI	Japanese Privet - <i>Ligustrum japonicum</i>	10' Ht, 4' Spr, 2" Cal, B&B, multi	EA	1	\$ 875.00	\$ 875.00
4	LS2	Sweet Gum - <i>Liquidambar styraciflua</i>	10' Ht, 4' Spr, 2" Cal, B&B	EA	4	\$ 437.50	\$ 1,750.00
5	LD	<u>Ribbon Palm - <i>Livistona decipiens</i></u>	<u>12' Ct. 4' Spr, B&B</u>	<u>EA</u>	<u>3</u>	\$ 1,120.00	\$ 3,360.00
6	PR	<u>Pygmy Date Palm - <i>Phoenix roebelenii</i></u>	<u>10' OA, B&B, triple trunk</u>	<u>EA</u>	<u>2</u>	\$ 437.50	\$ 875.00
7	QV	<u>Cathedral Live Oak - <i>Quercus virginiana</i> 'Cathedral'</u>	<u>12'-14' Ht, 5.5' Spr, 3.5" Cal, B&B</u>	<u>EA</u>	<u>4</u>	\$ 1,050.00	\$ 4,200.00
8	UA	American Elm - <i>Ulmus americana</i>	10' Ht, 4' Spr, 2" Cal, B&B	EA	4	\$ 437.50	\$ 1,750.00
SUB-TOTAL TREES							\$ 15,872.50

		SHRUBS					
9	AA	Lily of the Nile - <i>Agapanthus africanus</i>	1 gal	EA	154	\$ 8.75	\$ 1,347.50
10	CE	Emerald Blanket Carissa - <i>Carissa macrocarpa</i> 'Emerald Blanket'	3 gal, 10" Ht	EA	154	\$ 14.88	\$ 2,291.52
11	DR	Gold Mound Duranta - <i>Duranta repens</i> 'Gold Mound Dewdrop'	3 gal, 16" Ht	EA	272	\$ 15.75	\$ 4,284.00
12	ES	Purple Love Grass - <i>Eragrostis spectabilis</i>	1 gal, 14" Ht	EA	289	\$ 7.88	\$ 2,277.32
13	HP	Dwarf Firebush - <i>Hamelia patens</i> 'Compacta'	3 gal, 24" Ht	EA	250	\$ 15.75	\$ 3,937.50
14	IV	Dwarf Yaupon - <i>Ilex vomitoria</i> 'Stokes Dwarf'	3 gal, 12" Ht	EA	36	\$ 17.50	\$ 630.00
15	MC	Muhly Grass - <i>Muhlenbergia capillaris</i>	3 gal, 30" Ht	EA	192	\$ 14.88	\$ 2,856.96
16	MF2	Dwarf Simpson's Stopper - <i>Myrcianthes fragrans</i> 'compacta'	3 gal, 30" Ht	EA	215	\$ 17.50	\$ 3,762.50
17	ST	Schefflera - <i>Schefflera arboricola</i> 'Trinette'	7 gal, 36" Ht	EA	153	\$ 70.00	\$ 10,710.00
18	TU	Yellow Alder - <i>Turnera ulmifolia</i>	3 gal, 24" Ht	EA	76	\$ 17.50	\$ 1,330.00
19	VO	Dwarf Walter's Viburnum - <i>Viburnum obovatum</i> 'Mrs. Shillers Delight'	3 gal, 18" Ht	EA	27	\$ 4.75	\$ 128.25
SUB-TOTAL SHRUBS							\$ 33,555.11

		GROUND COVER					
20	AG	Perennial Peanut - <i>Arachis glabrata</i>	4" pot	EA	13036	\$ 3.50	\$ 45,626.00
21	DT	Twin Flower - <i>Dyschoriste oblongifolia</i>	1 gal, 6" Ht	EA	4809	\$ 6.50	\$ 31,258.50
22	JC	Shore Juniper - <i>Juniperus conferta</i> 'compacta'	3 gal, 12" Spr	EA	1490	\$ 17.50	\$ 26,075.00
23	JH	Blue Rug Horizontal Juniper - <i>Juniperus horizontalis</i> 'Wiltonii'	3 gal, 12" Spr	EA	875	\$ 15.75	\$ 13,781.25
24	LM	Lily Turf - <i>Liriope muscari</i> 'Big Blue'	1 gal	EA	3910	\$ 6.50	\$ 25,415.00
25	RC	Carolina Wild Petunia - <i>Ruellia caroliniensis</i>	1 gal	EA	4524	\$ 6.50	\$ 29,406.00
SUB-TOTAL GROUND COVER							\$ 171,561.75

BY: J. DAVID TAYLOR PRES MGT

		MULCH					
26	PB	PINE BARK NUGGETS	3" DEPTH	CY	852	\$ 54.00	\$ 46,008.00
SUB-TOTAL MULCH							\$ 46,008.00
A	LANDSCAPE INSTALLATION SUBTOTAL						\$ 266,996.36 <i>AVS</i>
<i>266,997.80</i>							
		IRRIGATION INSTALLATION					
27	C	SPPED-ENC PEDESTAL MOUNTED SL1600 CONTROLLER WITH SLM48DM DECODER MODULE (INCLUDING MISC. ELECTRICAL)	(CONTRACTOR PROVIDED)	EA	1	\$ 3,427.50	\$ 3,427.50
28	RS	SLW1 WIRED RAIN SENSOR	(CONTRACTOR PROVIDED)	EA	1	\$ 200.00	\$ 200.00
29	FS	SLFSI-T20 2" TEE TYPE INSERT FLOW SENSOR WITH RAIN BIRD 200-PESBR-PRS-D MASTER VALVE	(CONTRACTOR PROVIDED)	EA	1	\$ 925.00	\$ 925.00
30	AC	SL-AIRCARDFLOW3W-GSM AIR CARD W/ FLOW, 3 YR SERVICE PLAN & WARRANTY FOR GZM CELL NETWORK	(CONTRACTOR PROVIDED)	EA	1	\$ 2,500.00	\$ 2,500.00
31	D	WEATHERMATIC SLDEC1 VALVE DECODER	(CONTRACTOR PROVIDED)	EA	27	\$ 190.00	\$ 5,130.00
32	W	SMARTLINE - SLWIRE (2 PATH WIRE)	(CONTRACTOR PROVIDED)	LF	7940	\$ 0.78	\$ 6,193.20
34	SV	RAIN BIRD 100-PESBR-PRS-D (INCLUDES VALVE BOX, GRAVEL, BRICKS, FABRIC, ETC.)	(CONTRACTOR PROVIDED)	EA	15	\$ 75.00	\$ 1,125.00
35	SV	RAIN BIRD 150-PESBR-PRS-D (INCLUDES VALVE BOX, GRAVEL, BRICKS, FABRIC, ETC.)	(CONTRACTOR PROVIDED)	EA	12	\$ 75.00	\$ 900.00
38	LL	1" CLASS 200 PURPLE	(CONTRACTOR PROVIDED)	LF	6380	\$ 0.43	\$ 2,743.40
39	LL	1-1/2" CLASS 200 PURPLE	(CONTRACTOR PROVIDED)	LF	260	\$ 0.95	\$ 247.00
40	LL	2" CLASS 200 PURPLE	(CONTRACTOR PROVIDED)	LF	40	\$ 1.55	\$ 62.00
42	GR	LIGHTENING ARRESTER - SLGDT	(CONTRACTOR PROVIDED)	EA	28	\$ 134.28	\$ 3,759.84
44	NZ	HUNTER FIXED ARC NOZZLE ON PROS-12-CV-R SPRAY BODY - 5' RADIUS NOZZLE	(CONTRACTOR PROVIDED)	EA	451	\$ 24.88	\$ 11,220.88
45	NZ	HUNTER FIXED ARC NOZZLE ON PROS-12-CV-R SPRAY BODY - 10' RADIUS NOZZLE	(CONTRACTOR PROVIDED)	EA	367	\$ 24.88	\$ 9,130.96
47	F	NETAFIM FILTER POC-TF20918-100RW	(CONTRACTOR PROVIDED)	EA	1	\$ 875.00	\$ 875.00
B	SUB-TOTAL IRRIGATION						\$ 48,439.78 <i>✓</i>
		SITE WORK					
48	SP	SOIL PREP., HERBACIDE APP., FERT.		SF	92012	\$ 0.03	\$ 2,760.36 <i>2,300.30 AVS</i>
49	TS	TREE SUMPS (AS NEEDED)		EA	25	\$ 150.00	\$ 3,750.00
50	MOB	MOBILIZATION		LS	1	\$ 5,000.00	\$ 5,000.00
51	MOT	MAINTENANCE OF TRAFFIC		LS	1	\$ 5,000.00	\$ 5,000.00
52	SF	SILT FENCE AROUND DRAINS		EA	4	\$ 250.00	\$ 1,000.00
53	AB	CERTIFIED AS-BUILT SURVEYS		LS	1	\$ 2,500.00	\$ 2,500.00
C	SITE WORK SUBTOTAL						\$ 19,550.30 <i>AVS</i>
<i>2610.36</i>							
A	LANDSCAPE INSTALLATION SUBTOTAL						\$ 266,996.36 <i>266,997.80</i>
B	IRRIGATION INSTALLATION SUBTOTAL						\$ 48,439.78
C	SITE WORK SUBTOTAL						\$ 19,550.30 <i>19,550.36</i>
GRAND TOTAL							\$334,986.44 <i>AVS</i>

Name/Title of person authorized to bind: _____

DAVID TAYLOR

I DAVID TAYLOR PRESIDENT

STATEMENT OF ORGANIZATION

Name of Business: MRT LAWN AND GAREN CENTER INC

DBA (if any): MRT

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

Business Address: 5175 ENGLEWOOD ROAD (S.R. 776)
VENICE FLORIDA 34293

Mailing Address (if applicable): SAME

Phone: 941-493-1293 Fax: 941-493-99362

E-Mail: DTAYLOR@MRTCOMPANIES.COM

Name/Title of person authorized to bind: J.DAVID TAYLOR PRESIDENT

Signature: [Signature]

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

If yes, what is your State document number? P04000147290

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 SARASOTA

Sworn to and subscribed before me this 15TH day of NOVEMBER, 2016, by J. DAVID TAYLOR
who ☒ is personally known to me or ☐ has produced his/her driver's license as identification.



[Signature]
Notary Public - State of Florida

Print Name: ZOE M. BASS

Commission No: MAR 27, 2017

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REFERENCES AND QUALIFICATIONS AND EXPERIENCE – PART I

The City reserves the right to contact references. (Attach additional sheets, if required.)

- A). The Bidder shall be experienced installing irrigation and landscaping in southern Florida and provide minimum of three (3) recent references of projects similar size and scope with completion dates within the last five (5) years.
- B). The Contractor shall have at least five (5)-years of successful experience of a scope similar to that required for the work, including the handling, planting and irrigation on similar projects.
- C). Contractor shall maintain a full time supervisor on site having five (5) years successful experience of a similar scope (both irrigation and landscaping) who can communicate in English with the Owner's Representative while work is in progress.
- D). The foreman directing the landscaping maintenance during the warranty period shall have five years of similar experience.

1. Business/Customer Name: CHARLOTTE COUNTY

Name of Contact Person: GREG O'CONNOR Position LANDSCAPE PROJECT MGR

E-mail: GREGG.OCONNOR@CHARLOTTECOUNTYFL.GOV Telephone# 941-575-3658

Project Description/Location: TOLEDO BLADE MEDIAN FROM US 41 TO HILLSBOROUGH BLVD
INSTALL 4,500 FEET OF IRRIGATION AND LANDSCAPING

Contract Price \$ \$146,310 Contract Price at Completion of the Project \$ \$148,740

Completion Date: 8/30/2016

2. Business/Customer Name: SARASOTA COUNTY

Name of Contact Person: PATRICK FOSLIN Position COMPLIANCE MAINTENANCE SPECIALIST 2

E-mail: PFOSLIN@SCGOV.NET Telephone# 941-315-5997

Project Description/Location: INTERSECTION LANDSCAPE HONORE AND LAUREL RD

Contract Price \$ \$27,825 Contract Price at Completion of the Project \$ \$27,825

Completion Date: 10/10/2016

NAME/TITLE OF PERSON AUTHORIZED TO BIND:



J. DAVID TAYLOR PRESIDENT

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3. Business/Customer Name: CITY OF SARASOTA "MOTE MARINE LANDSCAPING"

Name of Contact Person: AMANDA MCPHEE Position OFFICE MGR

E-mail: amandam@stagedoortwo.com Telephone# 941-371-1951

Project Description/Location: WE SUBCONTRACTED TO INSTALL LANDSCAPING AND IRRIGATION
FOR MOTE MARINE THROUGH STAGE DOOR TWO, INC.

Contract Price \$ \$45,240 Contract Price at Completion of the Project \$ \$45,240

Completion Date: 5/01/2016

4. Business/Customer Name: CITY OF NORTH PORT

Name of Contact Person: RYAN PIEPER Position ARBORIST

E-mail: RPIEPER@CITYOFNORTHPORT.COM Telephone# 941-429-7055

Project Description/Location: INSTALL TREES AND SYLVESTER PALMS ON SUMPTER BLVD

Contract Price \$ \$55,000 Contract Price at Completion of the Project \$ \$55,000

Completion Date: 10/10/2016

NAME/TITLE OF PERSON AUTHORIZED TO BIND: 

J. DAVID TAYLOR PRESIDENT

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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 NAME: MRT LAWN AND GARDEN CENTER INC

SIGNATURE: J. DAVID TAYLOR PRESIDENT

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EQUIPMENT LIST

Equipment is located at: 5175 ENGLEWOOD ROAD VENICE FLORIDA 34293

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

Description	Manufacturer	Year	Condition	Leased/Owned (If leased, date of expiration)
5025 TELEHANDLER	JCB	2016	EXCELLENT	OWNED
MINI SKID STEER	VERMEER	2016	EXCELLENT	OWNED
F-350 DUMP	FORD	2015	EXCELLENT	OWNED
TRENCHER	BARBANCO	2010	EXCELLENT	OWNED

SOURCE OF SUPPLY AND SUBCONTRACTOR FORM

The following sources of supply and subcontractors shall be used for the **SOUTH BISCAYNE DRIVE MEDIAN LANDSCAPE AND IRRIGATION PROJECT**. If bidder does not have a source of supply or subcontractor, insert "to be determined". When a source or subcontractor is determined, selection will be subject to City approval. (If not applicable, state N/A).

SUBCONTRACTOR(S)


(PLEASE INCLUDE ADDRESS/TELEPHONE NUMBER)

1. A & M ELECTRIC 160 Rich St, Venice, FL 34292 Phone: (941) 488-6602
2. _____
3. _____
4. _____

SUPPLIER(S)

1. TWC DISTRIBUTORS 1061 Interchange Ave, North Port, FL 34289 Phone: (941) 423-325
2. BUCKHORN NURSERY 475 Lambert Rd, Zolfo Springs, FL 33890 Phone: (863) 773-6662
3. OLDCASTLE MULCH SUPPLY 6681 N Co Road 663, Bowling Green, FL 33834 Phone:(863) 375-2600
4. PALMCO 14401 Harbor Dr, Bokeelia, FL 33922 Phone: (239) 283-1329

COMPANY NAME: MRT LAWN AND GARDEN CENTER INC.

SIGNATURE:  J DAVID TAYLOR PRESIDENT

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N/A

AFFIDAVIT

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 _____, 20____, by _____
_____ who ☐ is personally known to me or ☐ has produced his driver's license as identification.

NOTARY SEAL:

Notary Public - State of Florida

Print Name: _____

Commission No: _____

This page to be returned **ONLY** if Contractor is claiming a **North Port Local Business Status**.

N/A

AFFIDAVIT
Claiming Status as a LOCAL BUSINESS

****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 _____, 20____, by _____ who ☐ is personally known to me or ☐ has produced his driver's license as identification.

NOTARY SEAL:

Notary Public - State of Florida

Print Name: _____

Commission No: _____

This page to be returned ONLY if Contractor is claiming a Local Business Status.

DRUG FREE WORKPLACE FORM

The undersigned Respondent in accordance with Florida Statute §287.087 hereby certifies that
MRT LAWN AND GARDEN CENTER 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

J. DAVID TAYLOR

Print Name

11/15/2016

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.

1. This Sworn Statement is submitted with Bid No. _____ for the construction of BISCAYNE BLVD MEDIAN PROJECT
2. This Sworn Statement is submitted by J. DAVID TAYLOR whose business address is MRT LAWN AND GARDEN CENTER INC and (if applicable) its Federal Employer Identification Number (FEIN) is 20-1830261.
3. My name is J. DAVID TAYLOR
(PRINTED OR TYPED NAME OF INDIVIDUAL SIGNING) and hold the position of PRESIDENT with the above entity.
4. The Trench Safety Standards that will be in effect during the construction of this Project are Florida Statute Section 553.60-55.64, Trench Safety Act, and OSHA Standard.
5. The undersigned assures that the entity will comply with the applicable Trench Safety Standards and agrees to indemnify and hold harmless the County and ENGINEER, and any of their agents or employees from any claims arising from the failure to comply with said standard.
6. The undersigned has appropriated \$ 0.00 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: NO TRENCH OVER 4 FEET BEING BID
7. The undersigned has appropriated \$ 0.00 per square foot for compliance with shoring safety requirements and intends to comply by instituting the following procedures:
N/A
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.



Authorized Signature/Title

Sworn to and subscribed before me
this 15TH OF NOVEMBER 2016
(date)



Notary Public Signature

My Commission Expires: 3/27/17

(Notary Seal)



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, J. DAVID TAYLOR, being an authorized representative of the
Respondent MRT LAWN AND GARDEN CENTER INC,
Located at: 5175 ENGLEWOOD ROAD (S.R. 776)
City: VENICE State: FL Zip Code: 34293, 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: [Signature] Date: 11/15/2016
Telephone #: 941-493-1923 Fax #: 941-493-9362
Federal ID #: 20-1830261

State of Florida
County of SARASOTA

Sworn to and subscribed before me this 15TH day of NOVEMBER, 2016, by J. DAVID TAYLOR
who ☒ is personally known to me or ☐ has produced his driver's license as identification.

NOTARY SEAL:



[Signature]
Notary Public - State of Florida
Print Name: ZOE M. BASS
Commission No: 3/27/17
EE879342

THIS PAGE MUST BE SUBMITTED

NON-COLLUSIVE AFFIDAVIT

State of FLORIDA
County of SARASOTA } SS.

Before me, the undersigned authority, personally appeared:

J. DAVID TAYLOR PRESIDENT MRT LAWN AND GARDEN CENTER INC

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

1. He/She is the PRESIDENT / OWNER (Owner, Partner, Officer, Representative or Agent) of MRT LAWN AND GARDEN CENTER 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 15TH day of NOVEMBER, 2016.

By: [Signature]

J. DAVID TAYLOR

(Printed Name)

PRESIDENT

(Title)

State of Florida
County of SARASOTA

Sworn to and subscribed before me this 15TH day of NOVEMBER, 2016, by J. DAVID TAYLOR
who ☒ is personally known to me or ☐ has produced his driver's license as identification.

NOTARY SEAL:



[Signature]
Notary Public - State of Florida

Print Name: ZOE M. BASS

Commission No: EE 879342

COMPANY NAME: MRT LAWNA AND GARDEN CENTR INC

SIGNATURE: J. DAVID TAYLOR PRESIDENT

This page must be completed and submitted

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

LOBBYING CERTIFICATION

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

STATE OF FLORIDA

COUNTY OF SARASOTA

This 15TH day NOVEMBER of 2016, being first duly sworn, deposes and says that he or she is the authorized representative of MRT LAWN AND GARDEN CENTER 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 15TH day of NOVEMBER, 2016.

By: [Signature]

J. DAVID TAYLOR

(Printed Name)

PRESIDENT

(Title)

STATE OF FLORIDA

COUNTY OF SARASOTA

Sworn to and subscribed before me this 15TH day of NOVEMBER, 2016, by J. DAVID TAYLOR who ☒ is personally known to me or ☐ has produced his/her driver's license as identification.



Notary Public - State of FL
Print Name: ZOE M. BASS
Commission No: EE879342

THIS PAGE MUST BE SUBMITTED WITH BID

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we

MRT LAWN AND GARDEN CENTER INC 5175 ENGLEWOOD ROAD VENICE, FL 34293

(Here insert full name and address or legal title of Contractor)

as Principal, hereinafter called Principal, and,

FCCI Insurance Company, 6300 University Parkway, Sarasota, FL 34240-8424

(Here insert full name and address or legal title of Surety)

a corporation duly organized under the laws of the State of Florida

as Surety, hereinafter called the Surety, are held and firmly bound unto

CITY OF NORTH PORT 4970 CITY HALL BLVD NORTH PORT, FL 34286

(Here insert full name and address or legal title of Corporation)

as Obligee, hereinafter called the Obligee, in the sum of

5% OF 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.

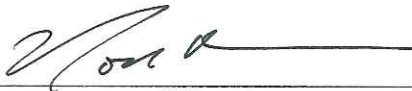
WHEREAS, the Principal has submitted a bid for

SOUTH BISCAYNE DRIVE MEDIAN LANDSCAPING AND IRRIGATION PROJECT # 2017-09

(Here insert full name and address description of project)

NOW THEREFORE, if the obligee shall accept the bid of the principal and the principal shall enter into 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 15TH day of NOVEMBER, 20 16



(Witness)

MRT LAWN AND GARDEN CENTER INC

(Principal)

(Seal)



JAMES DAVID TAYLOR (Title)

PRESIDENT



(Witness)

FCCI Insurance Company

(Surety)



JERRY W BROWN

Attorney-In-Fact





More than a policy. A promise.

GENERAL POWER OF ATTORNEY

Know all men by these presents: That the FCCI Insurance Company, a Corporation organized and existing under the laws of the State of Florida (the "Corporation") does make, constitute and appoint:

Jerry W Brown

Each, its true and lawful Attorney-In-Fact, to make, execute, seal and deliver, for and on its behalf as surety, and as its act and deed in all bonds and undertakings provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed the sum of (not to exceed \$5,000,000): \$5,000,000.00

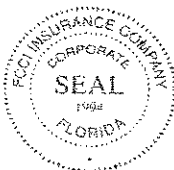
This Power of Attorney is made and executed by authority of a Resolution adopted by the Board of Directors. That resolution also authorized any further action by the officers of the Company necessary to effect such transaction.

The signatures below and the seal of the Corporation may be affixed by facsimile, and any such facsimile signatures or facsimile seal shall be binding upon the Corporation when so affixed and in the future with regard to any bond, undertaking or contract of surety to which it is attached.

In witness whereof, the FCCI Insurance Company has caused these presents to be signed by its duly authorized officers and its corporate Seal to be hereunto affixed, this 22ND day of September, 2011.

Attest:

Craig Johnson
Craig Johnson, President
FCCI Insurance Company



Thomas A. Koval
Thomas A. Koval Esq., EVP, Chief Legal Officer,
Government Affairs and Corporate Secretary
FCCI Insurance Company

State of Florida
County of Sarasota

Before me this day personally appeared Craig Johnson, who is personally known to me and who executed the foregoing document for the purposes expressed therein.

My commission expires: 9/25/2020

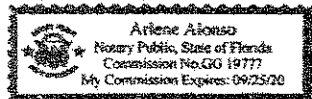


Arlene Alonso
Notary Public

State of Florida
County of Sarasota

Before me this day personally appeared Thomas A. Koval, Esq., who is personally known to me and who executed the foregoing document for the purposes expressed therein.

My commission expires: 9/25/2020



Arlene Alonso
Notary Public

CERTIFICATE

I, the undersigned Secretary of FCCI Insurance Company, a Florida Corporation, DO HEREBY CERTIFY that the foregoing Power of Attorney remains in full force and has not been revoked; and furthermore that the February 24, 2011 Resolution of the Board of Directors, referenced in said Power of Attorney, is now in force.

Dated this _____ day of _____

Thomas A. Koval
Thomas A. Koval, Esq., EVP, Chief Legal Officer,
Government Affairs and Corporate Secretary

COMMERCIAL PEST CONTROL APPLICATOR – PART II

1. The successful Contractor, or his subcontractor, shall be required to hold the mandatory Commercial Pest Control license from the State of Florida, and provide proof of same at the time of bid submission, along with proof of pesticide applicator liability insurance.
2. The Bureau of Entomology rules that when a subcontractor is employed for this purpose, that subcontractor shall be named and shall be the only person(s) to apply chemicals (the Contractor shall not work on behalf of the subcontractor by applying chemicals).
3. Only a licensed person or those covered by a chemical applicator's license are allowed to apply chemicals.

The contractor shall provide the following with his submittal for his firm or on the part of an approved subcontractor:

- ✓ • FDACS Right of Way Pest Control certification
- ✓ • Commercial Lawn & Ornamental pesticide application certification
- ✓ • City of North Port Fertilizer Ordinance/FDEP Green Industries BMP's certification
- ✓ • FDOT Intermediate Maintenance of Traffic certification

Bidder not demonstrating minimum similar and acceptable experience shall be deemed non-responsible. Documentation demonstrating that bidder meets this minimum requirement shall be stated in the below along with reference contact information and additional documentation may be submitted with your Submittal Package (attach additional sheets if necessary).

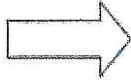
NAME/TITLE OF PERSON AUTHORIZED TO BIND:



J. DAVID TAYLOR PRESIDENT

This page must be completed and submitted

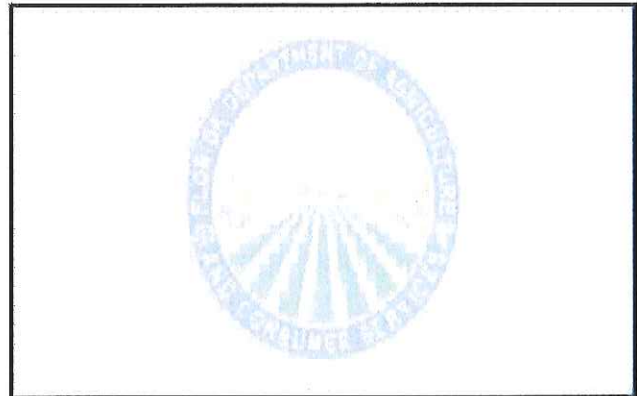
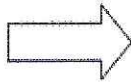
This card is your license. It authorizes you, the license holder, to purchase and apply Restricted Use Pesticides (RUPs). Please sign your card and keep it with you when applying or purchasing RUPs.



Florida Department of Agriculture and Consumer Services Pesticide Certification Office Commercial Applicator License License # CM24522	
VENEZIO, JOSEPH 11854 GRANITE WOODS LOOP VENICE, FL 34292	Categories 5A, 6
Issued: November 3, 2016	Expires: November 30, 2020
Signature of Licensee	 ADAM H. PUTNAM, COMMISSIONER
<small>The above individual is licensed under the provisions of Chapter 487, F.S. to purchase and apply restricted use pesticides.</small>	

To renew a pesticide applicator license, applicators must first become recertified. Recertification is accomplished by either retaking the certification exams or accumulating Continuing Education Units (CEUs). See Table 2 in the Pesticide Applicator Certification and Licensing in Florida handbook located at <http://pested.ifas.ufl.edu/pdfs/Pesticide-Applicator-Cert-Licensing.pdf> for information on Recertification.

The bottom two cards are for your Authorized Purchasing Agents (APAs). Please sign the card in the space provided and give to your APA to sign. APAs are authorized to purchase RUPs.



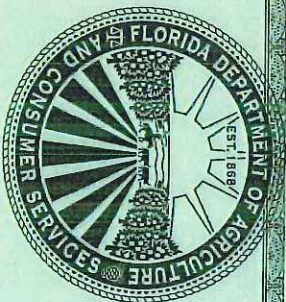
"RIGHT OF WAY" SPRAY CARD

For questions, comments or concerns,
Contact us at:

Florida Department of Agriculture and
Consumer Services
Pesticide Certification Office
3125 Conner Blvd, Bldg 8
Tallahassee, FL 32399-1650

Phone: (850) 617-7870
Fax: (850) 617-7895

State of



Florida

Department of Agriculture and Consumer Services
Bureau of Licensing and Enforcement

PEST CONTROL LICENSE

Number: JB250793

MRT LAWN & GARDEN CENTER INC
5175 ENGLEWOOD ROAD, VENICE, FL 34293

This is to Certify that the Pest Control Firm named above is licensed by the State of Florida, Department of Agriculture and Consumer Services for the Year Ending October 31, 2017 as prescribed by Law.

Adam H. Putnam
Commissioner of Agriculture

Issue Date: October 5, 2016



Department of Environmental Protection

2600 Blair Stone Road, M.S. 3570
Tallahassee, Florida 32399-2400

UNIVERSITY OF
FLORIDA
IFAS EXTENSION

March 26, 2008

Congratulations on successfully completing the Florida Green Industries Best Management Practices Training Program. We greatly appreciate your participation in and successful completion of this course. We hope that it has helped you to better understand Florida's nonpoint source pollution problems and the importance of proper design, construction, irrigation, fertilization, pest control, and maintenance of lawns and landscapes, in order to assure minimal adverse environmental effects while achieving customer expectations.

Attached you will find your numbered certificate and wallet card. Please let me know if there are any errors in the certificate or card, or in the grading of your exam. If we can be of further assistance, please do not hesitate to contact Dr. Trenholm at 352/392-1831x374 or via email: letr@ufl.edu.

David Taylor
400 N. River Road
Venice, FL 34293

State of Florida
DEPARTMENT OF
ENVIRONMENTAL PROTECTION

David Taylor

GV2401-1

Certificate #

GV2401

Trainee ID #

GREEN INDUSTRIES BEST MANAGEMENT PRACTICES
TRAINING PROGRAM



GV2401-1

Certificate #

GV2401

Trainee ID #

Certificate of Training Best Management Practices Florida Green Industries

UNIVERSITY OF
FLORIDA
IFAS EXTENSION

The undersigned hereby acknowledges that

David Taylor

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.

Dr. L.E. Trenholm

Issuer

Rainey

Instructor

3/3/2008

Date of Class

John Churchill
DEP Program Administrator

Not valid without seal

Certificate of Completion

Joseph Venezia

Has Completed a Florida Department of Transportation
Approved Maintenance of Traffic (MOT) Advanced
Course.

09/15/2020

Expiration Date

37

FDOT Provider #

Tom Ervin

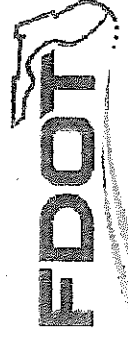
Instructor

21270

Certificate #

ATSSA
15 Riverside Parkway Ste. 100
Fredericksburg, VA, FL
www.atssa.com
donna.clark@atssa.com

SAFER ROADS SAVE LIVES



For more information about Maintenance of
Traffic (MOT) or to verify this certificate visit
www.motadmin.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/5/2016

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 Member Insurance Agency, Inc. 800 Hart Road Suite 200 Barrington, IL 60010	CONTACT NAME: PHONE (A/C, No, Ext): (800) 323-0131 E-MAIL ADDRESS:	FAX (A/C, No): (847) 277-2600
INSURED MRT Lawn and Garden Center, Inc. MRT Lawn Service, Inc. Interstate Wholesale, Inc. 779 Commerce Drive Venice, FL 34292-1729	INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Casualty Insurance Company INSURER B: Property & Casualty Ins Co of Hartford INSURER C: Hartford Fire Insurance Company INSURER D: INSURER E: INSURER F:	
	NAIC # 29424 34690 19682	

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	X COMMERCIAL GENERAL LIABILITY					
	CLAIMS-MADE X OCCUR		83UUNSY0138	08/22/2016	08/22/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	X POLICY	PRO-JECT	LOC			
	OTHER:					
	AUTOMOBILE LIABILITY					
B	X ANY AUTO		83UUNSY0138	08/22/2016	08/22/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	ALL OWNED AUTOS	SCHEDULED AUTOS				
	HIRED AUTOS	NON-OWNED AUTOS				
	UMBRELLA LIAB	OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	CLAIMS-MADE				AGGREGATE \$
	DED	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N				E.L. EACH ACCIDENT \$
	if yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Equipment Floater		20MSPY7940	08/22/2016	08/22/2017	Scheduled 425,972

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

CERTIFICATE HOLDER Proof Of Insurance	CANCELLATION 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
---	--



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/28/2016

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 Stonehenge Insurance Solutions, Inc. 300 Avenue of the Champions Suite 222 Palm Beach Gardens, FL 33418	CONTACT NAME: Risk Management Department	
	PHONE (A/C, No., Ext): (888) 925-2990 x20834	FAX (A/C, No): (877) 637-8949
INSURED Progressive Employer Management Company, Inc. Alt. Emp: MRT LAWN & GARDEN CENTER, INC. dba: MRT LAWN & GARDEN CENTER, INC. 6407 Parkland Dr Sarasota, FL 34243	E-MAIL ADDRESS: Certs@ProgressiveEmployer.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: American Zurich Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 16FL085923889 **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
	COMMERCIAL GENERAL LIABILITY						
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
							PRODUCTS - COMP/OP AGG \$
							\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						\$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A	WC 01-10-484-00	10/01/2016	10/01/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
				Location Coverage Period:	10/01/2016	10/01/2017	Client# 435742-FL

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Coverage is provided for only those co-employees of, but not subcontractors to: MRT LAWN & GARDEN CENTER, INC. dba: MRT LAWN & GARDEN CENTER, INC. 5175 Englewood Rd Venice, FL 342936019

CERTIFICATE HOLDER	CANCELLATION
Sarasota County Government Attn: Risk Management 1660 Ringling Blvd. Sarasota, FL 34236	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

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Sarasota County Business Tax Receipt**2016-17**

THIS TAX DOES NOT ASSURE QUALITY OF WORK OR CONFIRM THAT REGULATORY OR ZONING REQUIREMENTS HAVE BEEN MET, IT IS THE OWNER'S RESPONSIBILITY TO ENSURE COMPLIANCE.

Account No.
4001120005302

Business Type:**RETAIL****Business Address:**

MRT LAWN AND GARDEN CENTER
5175 ENGLEWOOD RD
VENICE uninc FL 34293

PAID: 160854.3262 8/2/2016 \$73.50

TAYLOR DAVID

5175 ENGLEWOOD RD
VENICE FL 34293

All businesses in Sarasota County are responsible for complying with the Sarasota County mandatory recycling ordinance.

Valid until 9/30/2017

Sarasota County Tax Collector
Barbara Ford-Coates
101 S. Washington Blvd., Sarasota, FL 34236
(941) 861-8300, option 3
www.SarasotaTaxCollector.com
Info@SarasotaTaxCollector.com

**CONTRACTOR'S OPERATING CERTIFICATE
SARASOTA COUNTY**

Registered Landscape Contractor

EXPIRES :9/30/18

LICENSE# RGLAN - SL-07

TAYLOR, JAMES D

MRT LAWN SERVICE INC.

400 N RIVER RD

VENICE FL 34293

NAME, ADDRESS OR STATUS CHANGE MUST BE
SENT TO THIS OFFICE WITHIN 30 DAYS

MAIL TO: PLANNING AND DEVELOPMENT SERVICES
BUSINESS CENTER

1001 SARASOTA CENTER BLVD

SARASOTA, FLORIDA 34240

(941) 861-5214

Signature: _____



WALLET CARD- TEAR HERE

FOLD HERE

CUT HERE

**IMPORTANT REMINDER
TO CERT./REG CONTRACTORS**

Chapter 489, Pt. 1 requires:

- 1) That the state registration or certification number of each contractor shall appear in any ADVERTISING MEDIUM used by contractor.
- 2) That a contractor may only d/b/a his name as it appears on his state registration / certification card(s) and that all contract forms shall comply accordingly.

(OFFICE USE ONLY)

Registered Landscape Contractor

LICENSE # RGLAN - SL-07

TAYLOR, JAMES D

MRT LAWN SERVICE INC.

400 N RIVER RD

VENICE FL 34293

16 136234000 00 LR

**PLANNING & DEVELOPMENT SERVICES
BUSINESS CENTER
SARASOTA COUNTY**

**CONTRACTOR'S OPERATING CERTIFICATE
SARASOTA COUNTY**

Registered Irrigation Contractor

EXPIRES :9/30/18

LICENSE# RGLAIR - SIS-05

TAYLOR, JAMES D

MRT LAWN SERVICE INC.

400 N RIVER RD

VENICE FL 34293

NAME, ADDRESS OR STATUS CHANGE MUST BE
SENT TO THIS OFFICE WITHIN 30 DAYS
MAIL TO: PLANNING AND DEVELOPMENT SERVICES
BUSINESS CENTER
1001 SARASOTA CENTER BLVD
SARASOTA, FLORIDA 34240
(941) 861-5214

Signature: _____



WALLET CARD- TEAR HERE

FOLD HERE

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**IMPORTANT REMINDER
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- 2) That a contractor may only d/b/a his name as it appears on his state registration / certification card(s) and that all contract forms shall comply accordingly.

(OFFICE USE ONLY)

Registered Irrigation Contractor

LICENSE # RGLAIR - SIS-05

TAYLOR, JAMES D

MRT LAWN SERVICE INC.

400 N RIVER RD

VENICE FL 34293

16 136235000 00 LR

**PLANNING & DEVELOPMENT SERVICES
BUSINESS CENTER
SARASOTA COUNTY**



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

WALTIMYER, TODD H
BRITE-HOUR CONSTRUCTION INC
6038 TROPICAIRE BLVD
NORTH PORT FL 34291

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CBC035143

ISSUED: 07/20/2014

CERTIFIED BUILDING CONTRACTOR
WALTIMYER, TODD H
BRITE-HOUR CONSTRUCTION INC

IS CERTIFIED under the provisions of Ch.489 FS.
Expiration date : AUG 31, 2016 L1407200001414

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CBC035143	

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

WALTIMYER, TODD H
BRITE-HOUR CONSTRUCTION INC
6038 TROPICAIRE BLVD
NORTH PORT FL 34291



Florida Department of Agriculture and Consumer
Services

Division of Marketing and Development
Mayo Building M-38
Tallahassee, Florida 32308

68417

Business Mailing Address:

MRT LAWN SERVICE, INC.
DBA: MRT LAWN AND GARDEN CENTER
779 COMMERCE DR STE 2
VENICE, FL 34293-1728

Location Address:

MRT LAWN AND GARDEN CENTER
5175 ENGLEWOOD RD.
VENICE, FL 34293-6019

Your official license appears below. This license should be detached along
the dotted line and posted in a conspicuous area at your place of business, along
with any other permits issued by this department.

Cut Here



POST LICENSE
CONSPICUOUSLY

State of Florida
Department of Agriculture and Consumer Services

Division of Marketing and Development/Bureau of Agricultural Dealer's Licenses
850-617-7150
Tallahassee, Florida

Issue Date: 09/20/2016

Fee Amt Paid: \$300

FEIN: 52-2370499

Effective Date: 10/14/2016

License as Dealer in Agriculture Products
GOOD FOR ONE LOCATION

This license is issued under authority of Section 604.15-604.34, Florida Statutes, to:

Commodity Code: 1 8 11

Bonding Company: FOCI INSURANCE CO.

Bond Amount: \$100,000 Bond effective from 10/14/2016 through 10/13/2017

License # 68417 -

MRT LAWN SERVICE, INC.

DBA: MRT LAWN AND GARDEN CENTER

5175 ENGLEWOOD RD.

VENICE, FL 34293-6019

Field Representatives WILLIAM MOORE

ADAM H. PUTNAM
COMMISSIONER OF AGRICULTURE

This is to certify that the dealer in agricultural products whose name and address are shown above, has paid the required
fee and has made an approved surety bond to the Commissioner of Agriculture as required by Sections 604.15-604.34, Florida
Statutes, and is hereby granted this license as Dealer in Agricultural Products as defined in Section 604.15, Florida
Statutes. This license is for a one year period.

INSTALLER'S FIELD SUPERVISOR – PART III

Installer's field supervisor shall have a minimum of five years' experience as a field supervisor installing plants and irrigation systems of the quality and scale of the proposed project, and can communicate in English with the Owner's Representative. (Attach additional sheets, if required.)

FOR DAVID TAYLOR'S QUALIFICATIONS AS AN FIELD SUPERVISOR

1. Business/Customer Name: TAYLOR RANCH INC DEVELOPER OF VENETIA COMMUNITY ASSOCIATION

Name of Contact Person: TOM TAYLOR JR Position VICE PRESIDENT

E-mail: TOMJR@TAYLORRANCHINC.COM Telephone# 941-716-2222

Project Description/Location: 600 ACRE SINGLE FAMILY DEVELOPMENT WITH \$1,000,000 IN COMMON LANDSCAPE AND IRRIGATION OVER A 10 YEAR PERIOD

Contract Term: From 1997 To 2007

2. Business/Customer Name: TAYLOR RANCH INC. DEVELOPER OF MYAKKA RIVER TRAILS

Name of Contact Person: TOM TAYLOR JR Position VICE PRESIDENT

E-mail: TOMJR@TAYLORRANCHINC.COM Telephone# 941-716-2222

Project Description/Location: 600 ACRE DEVELOPMENT WITH \$400,000 IN COMMON LANDSCAPE AND IRRIGATION

Contract Term: From 1997 To 2008

3. Business/Customer Name: BELLA VILLINO SARASTOA

Name of Contact Person: ELIZABETH TAYLOR Position VICE PRESIDENT

E-mail: JDTAYLOR5@AOL.COM Telephone# 941-232-6115

Project Description/Location: 348 UNIT CONDO COMPLEX IN SARASOTA

Contract Term: From 2001 To 2012

This page must be completed and submitted