

FEE SCHEDULE

Service Work Hourly Rate Painter

Group	Description	Unit	Regular Working Hours	Overtime/Emergency Hours
1	Master Painter	Hrs.	\$ 50	\$ 75
2	Journeyman	Hrs.	\$ 40	\$ 60
3	Apprentice	Hrs.	\$ 25	\$ 37.50
4	Pressure Washer Operator	Hrs.	\$ 25	\$ 37.50

This document must be completed and returned with your Submittal

Razorback LLC/Anthony Houllis
Contractor Name/Representative



RAZORBACK LLC | NO LIMIT

177 Anclote Road
Tarpon Springs, FL 34689
(727) 938-9500
info@razorbackllc.com
razorbackllc.com

Firm Qualifications Statement/Introduction Letter

Established in 2008 with over 14+ years of experience, Razorback LLC is an active, Certified General Contractor in the State of Florida. Razorback LLC provides general contracting services with contracts that include access rigging, surface preparation, and painting services for a multitude of government entities on surfaces such as wood, metal, stucco, concrete, masonry, structural steel, etc. These projects have included water towers, lighthouses, smokestacks, administration buildings, municipal structures, and multiple other critical infrastructures, demonstrating that Razorback LLC is qualified to provide the required functions of this RFQ.

Comprised of nationally Certified Safety and Quality Control experts, the Razorback Team utilizes the diverse experience of each employee to develop innovative strategies for each project. Razorback LLC's unique capabilities, such as complex rigging, working at extreme heights, logistical challenge resolution, and working near sensitive receptors, are some of the strong points that have led to recognition as a pioneering company within the industry. We believe utilizing a detailed work plan, which the owner is privy along with continued communication will lead to a successful project.

The approach will address material, preparation, protection, application, and quality control. Each day employees will be briefed on special tasks such as covering hardware, mixing procedures, application techniques, organization, etc. To ensure expectations are communicated during the workday, our Quality Control Inspector will review each completed step for conformance prior to the preceding. These inspections in conjunction with daily tasks-specific meetings have continued to prove successful.

Razorback is also an approved applicator with Sherwin Williams and Thiemec Protective Coatings.

Project Management Team

Project Supervisor - Anthony Houllis

Primary Contact: (727) 938-9500

Anthony will be responsible for supervising the project and quality assurance. Anthony is the founder of Razorback LLC, starting in 2008, and has over 14 years with Razorback LLC. Anthony has over 14 years of experience in the construction industry. Anthony is an active Florida Certified General Contractor as well as a certified SSPC Coating Applicator Specialist and SSPC C-3 Lead Abatement for Industrial Structures.

Senior Project Manager - Dan Dion

Dan will be responsible for managing the project on a daily basis. Dan has been with Razorback LLC for over 2 years and has experience in the construction industry for over 5 years. Dan's experience with similar projects will allow him to not only manage the project but also provide guidance, direction and leadership to ensure successful completion.



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(727) 938-9500
info@razorbackllc.com
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Project Superintendent - John Xipolitas

John will be responsible for quality control, safety management, and overseeing all field operations. John has been with Razorback LLC for 2+ years and has over 15 years of experience in the construction industry. He is also certified through OSHA and holds Competent Person Certifications. John's experience with similar projects makes him an expert in inspecting, testing, and reporting to ensure all requirements of the project are met.

Razorback LLC does not have any prior or pending litigation or investigation, either civil or criminal, involving a governmental agency.



SHERWIN-WILLIAMS.
Protective & Marine Coatings

July 28, 2021

Peter Pappas
Razorback LLC
276 Knollwood Rd.
Tarpon Springs, Fl. 34688
(239) 303-3250

||

Dear Peter,

This letter will serve as certification that Razorback LLC is an approved applicator of the Sherwin-Williams Company Protective, Marine, Architectural, AW Cook Cement, General Polymers, and Control Tech Coating Systems. Razorback LLC is qualified as a warrantied contractor with Sherwin Williams products in accordance with Sherwin Williams and other Engineer's Specifications. If you have any questions or need further information, please don't hesitate to contact me.

Sincerely,

Todd M. Kreitz

Todd Kreitz
Territory Manager, Water & Wastewater
Sherwin-Williams Company
Protective & Marine Coatings Group
Cell: 941-812-4508
Fax: 941-896-3449
Email: todd.kreitz@sherwin.com
NACE Level III Certified Coatings Inspector #11119

FLORIDA PROTECTIVE COATINGS SERVICES, INC.

Independent Representative of Tnemec Company, Inc.

13701 Southwest 24th Street

Davie, FL 33325

TEL: 407-322-1243

www.tnemec.com/fpcs



January 5, 2022

Razorback, LLC
177 Anclote Road
Tarpon Springs, FL 34689

Attn: To Whom it May Concern

Certificate of Applicator Approval

This letter is written in reference to the application of Tnemec coatings, and it is to ensure the great workmanship capabilities of Razorback, LLC. Razorback employs experienced personnel who are qualified to perform applications of Tnemec Protective Coatings to our high expectations.

Razorback, LLC. is an approved applicator of Tnemec products.

If additional information or discussion is required please give me a call or write me an e-mail.

Regards,

A handwritten signature in black ink, appearing to read 'Chad Holmes', with a horizontal line extending to the right.

Chad Holmes
FPCSI / TNEMEC
CHolmes@tnemec.com
(727)201-6706



January 28, 2021

PROJECT: *Surface Prep and Painting of 2 Clarifiers*

OWNER: *City of Dunedin*

DESCRIPTION: *Cleaning, surface preparation and painting of 2 Waste Water Treatment Clarifiers. Paint was applied in confined area and inspected during and upon completion.*

Performance Period: *March 2020- April 2020*

Contract Total: *\$88,900*

RE: RAZORBACK LLC PERFORMANCE

Razorback did an excellent job. Contractor completed a complete white metal blast on all metal in a EIMCO (OVIVO) clarifier 775K gallon tanks X2 and recoated with Tnemec 2 part industrial coating. Razorback was on site daily 7am until dark every day until project was completed. I have never seen a contractor work this hard and dedicated to accomplish task in a timely manner. I highly recommend Razorback LLC.

Brian Antonian
Plant Superintendent
City of Dunedin
Cell 727-831-1289
bantonian@dunedinfl.net



19450 SW 5th PL Dunnellon, FL 34431

Office: (352) 489-8791

Fax: (352) 489-8426

February 14, 2022

Letter of Reference

To Whom It May Concern;

I am writing to provide a positive reference for the work of the Razorback Team and Anthony Houllis. They were always on time, worked in a professional manner, clean, and safety conscious. With their strong work ethic, dedication to accuracy and the drive to provide high-quality, long-lasting work, the Razorback Team has earned their reputation as a leader in quality.

Throughout our collaborations, the Razorback Team has proven to provide superior quality work at competitive prices. The actions of the Razorback Team and the level of work provided ensures that they will be used by me in the future again.

For services delivered with precision and integrity, the Razorback Team is the company to call. I highly recommend their services and know that anyone who utilized their experience, skill and knowledge will not be disappointed in the results of their work.

Justin Stancil

Owner



January 28, 2020

PROJECT: *Palma Ceia Water Tower*

OWNER: *City of Tampa and Royal Bridge Inc.*

DESCRIPTION: *Lead Abatement and Painting of the City of Tampa, FL Palma Ceia 1.5 MG Elevated Water Tank (interior and exterior)*

Performance Period: *August 2019- April 2020*

Contract Total: *\$1,700,000*

RE: RAZORBACK LLC PERFORMANCE

To Whom It May Concern:

Razorback LLC completed our project on time and within budget. They displayed the highest quality of workmanship and were very dependable and thorough. Razorback worked hard to complete the project. Royal Bridge Inc. has worked with Razorback on many past projects and I highly recommend this company.

Sincerely,

A handwritten signature in blue ink that reads 'Tommy Mahinis'.

Tommy Mahinis
Royal Bridge Inc.
3601 Alt Highway 19
Palm Harbor, FL 34683
Office: 727-934-6042



JP Morgan Chase Bank, N.A.
2300 Sunset Point Rd
Clearwater, FL 33765

August 4, 2022

Re: Razorback LLC
177 Anclote Rd
Tarpon Springs, FL 34689-6905

To whom it may concern:

This letter is to certify Razorback LLC has a Chase Business account since 04/18/2012. Razorback LLC is a registered business in the state of Florida since 2008. Razorback LLC have multiple active operating accounts in good standing.

If you need additional information feel free to give me a call at (813) 881-2766 Monday thru Friday 9:00 am – 5:00 pm.

Cordially,

Dalia I Zurinaga

Dalia I Zurinaga
JP Morgan Chase Bank, N.A.
Business Relationship Manager
Office: 813-881-2766
Mobile: 813-679-4452
Email: dalia.i.zurinaga@chase.com

For excellent service log on to www.chase.com/business or
call our Business Platinum Team @ 877-425-8100

RFQ 23Q-005 Pressure Washing & Painting Contract Services

RESUMES OF KEY INDIVIDUALS

Use one page per individual - use additional pages as necessary

Name of Individual: Anthony Houllis

Title and/or Position: MGRM/Quality Control

Indicate if individual is authorized to sign contracts on behalf of the Firm: Yes

Name of Company	Office Location	City of Residence	Years of Experience in Field	Years with this Firm
Razorback LLC	177 Anclote Road Tarpon Springs, FL 34689	Tarpon Springs	14+ years	14+ years

Education / Certifications / Registration

Education - Florida State University: BS Degree 2008

Certification/Registration - Certified General Contractor, SSPC Level 2 Protective Coatings Inspector, SSPC Lead Paint Removal (C3), SSPC Quality Control Supervisor

Describe Related Experience Within the Last 5 Years and your SPECIFIC ROLE This Firm Previous Firm

Project Descriptions –

Preparation and painting the exterior/interior of a 1. million gallon water tower. Surface prep included abrasive blasting per SSPC SP-10 interior and power tool SP-11 exterior. Structural steel and concrete repairs/replacement. Stringent testing was implemented and inspections were conducted on a regular basis throughout the project.
Specific role was PM/Quality Control.

Project Descriptions –

Interior and Exterior surface prep and application of complex industrial coating to masonry of a historic Jupiter Lighthouse. Surface prep included low pressure washing to the exterior and damp rag washing to interior, areas where paint was peeling were scraped and wire brushed prior to applying paint. Interior and exterior masonry repair, tuckpointing and caulking. Inspections and quality control were conducted throughout the duration of the project.
Specific Role was PM/Quality Control.

Project Descriptions –

Surface prep and recoating of 2 reclaimed concrete water ground storage tanks. Surface prep included high pressure water cleaning on all exterior surfaces with cleaning detergent, concrete patching and caulking cracks on walls, containment of debris, striping coat and application of paint at the specified DFT to the walls and domes. Quality control inspections done regularly through the project.
Specified Role was PM/Quality Control.

Description of Equipment/Hardware Software Familiarity and Significant Accomplishments

Equipment/Hardware Software: Laptop, Mobile Devices, MS Office, Adobe, CoConstruct, QuickBooks, and Raken.

Significant Accomplishments: Winner of the Florida Trust Award for Historic Preservation

This document must be completed and returned with your Submittal



IACET Provider # 1003375
Florida Board of Professional Engineers,
Provider #0004326
New York Board of Professional Engineers

CERTIFICATE OF COMPLETION

Anthony Houllis

Has successfully passed the exam for the SSPC: The Society for Protective Coatings'

Protective Coatings Inspector Program (PCI) Level 2 Recertification

Your certification will be updated to a new 4-year term extending from its current expiration date in the SSPC database.

Course Completion Date: November 5, 2019

Location: SSPC eCourse

Instructor: SSPC eCourse

SSPC Executive Director

You will be emailed copies of your updated wallet card and letter within 7 days of course completion. The validity of any extended certification can be verified by visiting www.sspc.org. Please contact training@sspc.org for continued recertification support.



CERTIFICATION OF COMPLETION

Anthony Houllis

MEMBER #: 1278254

*Has Fulfilled the requirements of
SSPC: The Society for Protective Coatings'*

Lead Paint Removal (C3)

And is awarded
3 Continuing Education Units

A handwritten signature in black ink, appearing to read "Helena M. Sealing".

Certification Director



CERTIFICATION OF COMPLETION

Anthony Houllis

MEMBER #: 1278254

*Has Fulfilled the requirements of
SSPC: The Society for Protective Coatings'*

Quality Control Supervisor (QCS)

And is awarded
1.5 Continuing Education Units

A handwritten signature in black ink, appearing to read 'Helma M. Selinger', is positioned above the title 'Certification Director'.

Certification Director

RFQ 23Q-005 Pressure Washing & Painting Contract Services

RESUMES OF KEY INDIVIDUALS

Use one page per individual - use additional pages as necessary

Name of Individual: Daniel Dion

Title and/or Position: Senior Project Manager

Indicate if individual is authorized to sign contracts on behalf of the Firm: No

Name of Company	Office Location	City of Residence	Years of Experience in Field	Years with this Firm
Razorback LLC	177 Anclote Road Tarpon Springs, FL 34689	Tarpon Springs	5+ years	2+ years
Education / Certifications / Registration				
Education - University of Rhode Island: BS Degree 2001				
Describe Related Experience Within the Last 5 Years and your SPECIFIC ROLE <input checked="" type="checkbox"/> This Firm <input type="checkbox"/> Previous Firm				
Project Descriptions – Archway-Gateway surface prep and painting. Repairing damaged archway pillars, surface preparation by pressure wash and hand tool, painting archway to restore to installation specifications using Sherwin Williams primer and finish to structure. Specific Role was Senior Project Manager.				
Project Descriptions – Exterior painting of 2 barns. Work included but not limited to surface treatment, surface repair, priming and application of Sherwin Williams paint coatings. Surface prep included water blasting, hand tool, sanding, caulking, sealants and patching. Specific Role was Senior project Manager.				
Project Descriptions – Pressure washing, sandblasting and industrial coating services for the Pasco County Public Infrastructure Utilities Department on an as needed basis to multiple surfaces. Specific Role was Senior Project Manager.				
Description of Equipment/Hardware Software Familiarity and Significant Accomplishments				
Equipment/Hardware Software: Laptop, Mobile Devices, MS Office, Adobe, CoConstruct, QuickBooks, and Raken.				

This document must be completed and returned with your Submittal

RFQ 23Q-005 Pressure Washing & Painting Contract Services

RESUMES OF KEY INDIVIDUALS

Use one page per individual - use additional pages as necessary

Name of Individual: John Xipolitas

Title and/or Position: Superintendent/Safety Manager

Indicate if individual is authorized to sign contracts on behalf of the Firm: No

Name of Company	Office Location	City of Residence	Years of Experience in Field	Years with this Firm
Razorback LLC	177 Anclote Road Tarpon Springs, FL 34689	Tarpon Springs	15+ years	2+ years

Education / Certifications / Registration

Certification/Registration - OSHA 10 and Competent Person Cerifications

Describe Related Experience Within the Last 5 Years and your SPECIFIC ROLE This Firm Previous Firm

Project Descriptions –

Preparation and painting the exterior/interior of a 1. million gallon water tower. Surface prep included abrasive blasting per SSPC SP-10 interior and power tool SP-11 exterior. Structural steel and concrete repairs/replacement.
Specific Role was Superintendent/Safety Manager

Project Descriptions –

Surface prep and painting of a 500,00 gallon north tank. Project included dust and debris containment, surface prep using abrasive blast and painting using Tnemec coating system.
Specific Role was Superintendent/Safety Manager.

Project Descriptions –

Surface prep and recoating of 2 reclaimed concrete water ground storage tanks. Surface prep included high pressure water cleaning on all exterior surfaces with cleaning detergent, concrete patching and caulking cracks on walls, containment of debris, striping coat and application of paint at the specified DFT to the walls and domes.
Specific Role was Superintendent/Safety Manager

Description of Equipment/Hardware Software Familiarity and Significant Accomplishments

Equipment/Hardware Software: Laptop, Mobile Devices, MS Office, Adobe, CoConstruct, QuickBooks, and Raken.

This document must be completed and returned with your Submittal



15-006191768

This card acknowledges that the recipient has successfully completed:

10-hour Construction Safety and Health

This card issued to:

John Xipolitas

Mr. Paul J. Orvosh

Trainer Name

1/19/2020

Date of Issue

OSHA[®] Training Institute
Education Centers

National Resource Center / CPWR

(301) 495-8524

cpwr.com/training/osha-education-center

OSHA recommends Outreach Training Courses as an orientation to occupational safety and health for workers. Participation is voluntary. Workers must receive additional training on specific hazards of their job. This course completion card does not expire.

Use or distribution of this card for fraudulent purposes, including false claims of having received training, may result in prosecution under 18 U.S.C. 1001. Potential penalties include substantial criminal fines, imprisonment up to 5 years, or both.

To verify **this training**, scan the QR code with your mobile device.



Rev. 1/2016





ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING

COMPETENT PERSON - RESPIRATORY PROTECTION

John Xipolitas

Royal Bridge Inc. has provided training in accordance with 29 CFR 1910.134.
Respiratory Protection which include the following topics:

1. Why the respirator is necessary and how improper fit, usage or maintenance can affect the performance
2. What limitations the respirator has, including cannot provide oxygen, filters are made for a specific use, etc.
3. What to do in emergencies.
4. How to inspect, put on and remove the respirator.
5. Storage and maintenance procedures.
6. How to recognize medical signs and symptoms that may limit or prevent respirator effectiveness.
7. General requirements of 29 CFR 1910.134.
8. Job tasks and work areas at project sites which will require the use of respiratory protection.
9. Fit testing.
10. Manufacturer's recommendations, procedures and inspections of respiratory protection equipment.
11. Respirator issued: Half-Face Air Purifying: 3M 6000 SER

Full-Face Air Purifying: _____

Blast Helmet: NOVA 2000

PAPR: _____

Supplied Air Respirator: _____

Date: 06/24/2020

Trainer's Signature: 



ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING

COMPETENT PERSON - PERMIT REQUIRED CONFINED SPACE

John Xipolitas

Royal Bridge Inc. has provided training in 29 CFR 1910.146
Permit-Required Confined Spaces which include the following topics:

1. What is a confined space - definition.
2. The difference between permit required confined space and a confined space.
3. Controls that may be used such as lockout/tagout and hot work permit.
4. Duties of attendants.
5. Duties of entrants.
6. Duties of the Entry Supervisor
7. Confined Space Permit, how and when to complete the permit.
8. Atmosphere testing
9. Rescue and emergency procedures.
10. Royal Bridge Inc.'s Permit Required Confined Space Program.

Date: 06/24/2020

Trainer's Signature: _____

A handwritten signature in blue ink, appearing to be 'John Xipolitas', is written over a horizontal line.



ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING


COMPETENT PERSON - HAZARD COMMUNICATION

John Xipolitas

Royal Bridge Inc. has provided training in 29 CFR 1926.59 (29 CFR 1910.1200)
Hazard Communication Standard which include the following topics:

1. Hazards of the chemicals at job site.
2. Requirements of 29 CFR 1926.59.
3. Operations where exposure to chemicals may occur.
4. Location of Safety Data Sheets (MSDS).
5. How to read a Safety Data Sheet (SDS).
6. Where on the SDS to determine the proper personal protective clothing and emergency procedures.
7. Project Specific Hazard Communication Program and its location.
8. Proper labeling of all chemical containers.

Date: 06/24/2020

Trainer's Signature: 



ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING

COMPETENT PERSON - FALL PROTECTION

John Xipolitas

Royal Bridge Inc. has provided training in 29 CFR 1926 Subpart M
Fall Protection which include the following topics:

1. The nature of the fall hazards in the work area.
2. The correct procedure for erecting, maintaining, disassembling and inspecting the fall protection system to be used.
3. The use and operation of guardrail systems, personal fall arrest systems, safety net systems, warning line systems, safety monitoring systems, controlled access zones and other protection to be used.
4. The roll of each employee in the safety monitoring system when used.
5. The correct procedures for the handling & storage of equipment and materials, and the creation of overhead protection.
6. The role of employees in fall protection plans.
7. Any pertinent sections of 29 CFR 1926 Subpart M.
8. The manufacturer's recommendations, procedures and inspections of fall protection equipment.
9. Fall protection equipment issued: Harness: 3M
 Lanyard:
 Rope Grab: 3M DRI Dasala 5000 338
 Other:

Date: 06/24/2020

Trainer's Signature: 



ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING


COMPETENT PERSON - PERSONAL PROTECTIVE EQUIPMENT

John Xipolitas

Royal Bridge Inc. has provided training in 29 CFR 1926 Subpart E.
Personal Protective Equipment which include the following topics:

1. Requirements for personal protective clothing and equipment (PPE).
2. Limitations of PPE.
3. Royal Bridge, Inc.'s written PPE programs.
4. Hard hats, when it will be required, use, cleaning, maintenance and limitations.
5. Eye and face protection, when they will be required, use, cleaning, maintenance and limitations.
6. Hand and foot protection, when they will be required, use, cleaning, maintenance and limitations.
7. Fall protection equipment, when they will be required, use, cleaning, maintenance and limitations.
8. Working over water, when U.S. Coast Guard approved life jackets will be used, ring buoys and rescue boat.
9. How to inspect PPE and when to turn damaged PPE in to foreman or competent person.

Date: 06/24/2020

Trainer's Signature: 



ROYAL BRIDGE, INC.

CERTIFICATE OF TRAINING


COMPETENT PERSON - SCAFFOLDS

John Xipolitas

Royal Bridge Inc. has provided training in 29 CFR 1926 Subpart L
Scaffolds which include the following topics:

1. Electrical Hazards
2. Fall Hazards
3. Falling Object Hazards
4. Proper Use of the Scaffold
5. Proper Handling of Materials on the Scaffold
6. Maximum Intended Load
7. Load Carrying Capacity
8. Inspection of Scaffolds
9. Procedure for Handling Damaged Scaffold Components
10. Requirement for Creating and Dismantling Scaffolds
11. Platforms Used On Bridges and Their Hazards
12. Site Specific Scaffolds Used on This Project Include:
 - A. Bisomac Swing Stage
 - B. Basket Stage
 - C. Water Tower Access Stage
13. Rigging
14. Suspended Access

Date: 06/24/2020

Trainer's Signature: 

Provide at least three (3) unique references for similar work that your company has completed.

Entity Name: Pasco County BOCC	
How the scope of work applies to this RFQ: Work included surface prep and painting	
Entity Address: 19420 Central Blvd	
City, State, ZIP: Land O'Lakes, FL 34637	Phone Number: (813) 994-5015
Point of Contact: Brent Ruiz	E-mail: Bruiz@pascocountyfl.net
FOR COUNTY USE ONLY BELOW THIS LINE	
Work completed on-time:	Work completed within contracted budget:
Work completed in accordance with SoW:	Work completed in a professional manner:

Entity Name: Town of Jupiter	
How the scope of work applies to this RFQ: Surface prep and Painting and various locations	
Entity Address: Town Hall 210 Military Trail	
City, State, ZIP: Jupiter, FL 33458	Phone Number: (561) 741-2537
Point of Contact: Amanda Barnes	E-mail: AmandaB@jupiter.fl.us
FOR COUNTY USE ONLY BELOW THIS LINE	
Work completed on-time:	Work completed within contracted budget:
Work completed in accordance with SoW:	Work completed in a professional manner:

Entity Name: Royal Bridge Inc.; City of Tampa	
How the scope of work applies to this RFQ: Work included surface prep and painting	
Entity Address: City of Tampa - 306 E. Jackson Street	
City, State, ZIP: Tampa, FL 33602	Phone Number: (727) 934-6042
Point of Contact: Tommy Mahinis	E-mail: Tommy@royalbridgeinc.com
FOR COUNTY USE ONLY BELOW THIS LINE	
Work completed on-time:	Work completed within contracted budget:
Work completed in accordance with SoW:	Work completed in a professional manner:

This document must be completed and returned with your Submittal



177 Anclote Road
 Tarpon Springs, FL 34689
 (727) 938-9500
 info@razorbackllc.com
 razorbackllc.com

List of References

1.

1.5 Million Gallon Palma Ceia Water Tower Steel Repairs and Painting	
Project Owner	Royal Bridge; City of Tampa
Project Contact Name	Tommy Mahinis
Project Contact Email	tommy@royalbridgeinc.com
Project Contact Phone #	(727) 934-6042
Contract Length of Time	08/26/2019 - 04/01/2021

Scope of Work:

Repairs included, removal and replacing steel catwalk, vent, 400' of steel ladder, safety climb devices, fabrication and installation of riser grating, and pit filling. Painting included surface preparation and painting of exterior and interior of the 1.5-million-gallon water tower. Themec paint used. Stringent testing was implemented and inspections were conducted on a regular basis during the project. Enre interior of the Water Tower is over 45,000 Sq/Ft Abrasive Blasted per SSPC-10 and fully lined with the new NSF approved Themec System. Structural steel and concrete repair/replacement.

2.

Utilities Painting Maintenance Continuing Services	
Project Owner	Town of Jupiter
Project Contact Name	Amanda Barnes
Project Contact Email	AmandaB@jupiter.fl.us
Project Contact Phone #	(561)741-2537
Contract Length of Time	11/4/2020 - Ongoing (Term)

Scope of Work:

Work includes but is not limited to industrial grade coating products, pressure washing, water-blasting, sandblasting, taping, scraping, grinding, wire brushing rust removal, cleaning, priming, crack repair, concrete/stucco repairs, and other surface preparation as needed, and painting. Facilities to be painted under this contract include, but are not limited to, exterior of concrete potable water ground storage tanks, interior and/or exterior of concrete block structures (CBS)/buildings, interior of generator and interior and/or exterior of poured concrete structures. Field painting of interior and exterior concrete, dry wall, structural steel, miscellaneous metals, PVC pipe, ductile/cast iron pipe, valves, mechanical equipment, motors, conduit, fiberglass, ducts, hangers, exposed steel and iron work, tanks, vessels and primed metal surfaces.



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 Tarpon Springs, FL 34689
 (727) 938-9500
 info@razorbackllc.com
 razorbackllc.com

3.

As-Needed Sandblasting and Industrial Coating Services	
Project Owner	Pasco County Board of County Commissioners
Project Contact Name	Brent Ruiz
Project Contact Email	bruiz@pascocountyfl.net
Project Contact Phone #	(813) 994-5015
Contract Length of Time	11/05/2019 - 11/05/2022

Scope of Work:

Surface preparation has involved: Solvent Cleaning (SSPC-SP1) to remove oil, grease, soil, salts, and other soluble contaminants, Hand Tool Cleaning (SSPC-SP2), Power Tool Cleaning (SSPC-SP3), Blast Cleaning as well as Pressure washing to remove loose rust, loose scale, loose paint and other loose detrimental foreign matter. The contract has included the following structures and items to be prepped and painted: cast iron reclaimed pipes on high service pumps and header, pump rooms, pipes, cast iron PVC, steel structural beams, cast-iron pillars, concrete floors and concrete pipe supports, louvers, doors and frames, multiple bypasses that included bypass pumps and manifolds, multiple ground storage tanks, as well as painting generator rooms and generators.

4.

Painting, Water-Proofing and Associated Services	
Project Owner	City of St. Petersburg
Project Contact Name	Robert E. Sparks
Project Contact Email	Robert.Sparks@stpete.org
Project Contact Phone #	(727) 892-5637
Contract Length of Time	09/01/2020 - Ongoing (Term)

Scope of Work:

Interior and exterior painting, exterior pressure washing, water-proofing, caulking and sealant of City facilities on an as-needed basis.

5.

As-Needed Painting and Coating Services (5-Year TERM 12/01/2021 - 12/01/2026)	
Project Owner	Peace River Manasota Regional Water Supply Authority
Project Contact Name	Andrew Greenbaum
Project Contact Email	agreenbaum@regionalwater.org
Project Contact Phone #	(352) 667-4138
Contract Length of Time	12/01/2021 - ONGOING



177 Anclote Road
Tarpon Springs, FL 34689
(727) 938-9500
info@razorbackllc.com
razorbackllc.com

Scope of Work:

As-needed painting and coating services to be provided by Contractor to the Authority from time-to-time, generally consisting of (but are not limited to): painting and coating of various Authority owned and/or managed buildings, infrastructure, facilities and appurtenances.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/02/2022

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 have ADDITIONAL INSURED provisions or 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 Stahl & Associates Insurance Inc. 3939 Tampa Road Oldsmar FL 34677		CONTACT NAME: Maribeth Patino PHONE (A/C, No, Ext): (813) 818-5300 FAX (A/C, No): (813) 818-5396 E-MAIL ADDRESS: maribeth.patino@stahlinsurance.com	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Champlain Specialty Insurance Co	NAIC # 16834
		INSURER B: Auto Owners Insurance Co	18988
		INSURER C: Westchester Surplus Lines Ins Co	10172
		INSURER D:	
		INSURER E:	
		INSURER F:	
INSURED Razorback LLC 177 Anclote Road Tarpon Springs FL 34689			

COVERAGES

CERTIFICATE NUMBER: 22-23 Liab

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			CSARCGL000071101	07/08/2022	07/08/2023	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							MED EXP (Any one person)	\$ 5,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY	\$ 1,000,000	
	OTHER:							GENERAL AGGREGATE	\$ 2,000,000
								PRODUCTS - COMP/OP AGG	\$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			5181816000	06/16/2022	06/16/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/> OTHER:							\$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			CSARCEL000071201	07/08/2022	07/08/2023	EACH OCCURRENCE	\$ 2,000,000	
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 2,000,000	
	DED RETENTION \$								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
C	Contractor's Pollution Liability			G71154920 005	07/08/2022	07/08/2023	Each Pollution Condition	\$2,000,000	
							Aggregate	\$2,000,000	

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

CERTIFICATE HOLDER**CANCELLATION**

FOR PROPOSAL PURPOSES ONLY

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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/17/2022

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 have ADDITIONAL INSURED provisions or 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 SUNZ Insurance Solutions, LLC. c/o TLR of Bonita, Inc 700 Central Ave, Suite 500 St. Petersburg, FL 33701	ID: (TLR) 	CONTACT NAME: Workers' Comp Department
		PHONE (A/C, No, Ext): 727-520-7676 x 3
		FAX (A/C, No): 727-525-3862
		E-MAIL ADDRESS: certs@encorehr.com
		INSURER(S) AFFORDING COVERAGE
		INSURER A: SUNZ Insurance Company
		NAIC # 34762
INSURED TLR of Bonita, Inc EnterpriseHR 700 Central Avenue Suite 500 St. Petersburg FL 33701		INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 68265611

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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	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	WC039-00001-022 WC039-00001-021	6/1/2022 6/1/2021	6/1/2023 6/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000.00 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000.00 E.L. DISEASE - POLICY LIMIT \$ 1,000,000.00

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

Coverage Provided for all leased employees but not subcontractors of: Razorback LLC
 Client Effective: 09/28/2020

CERTIFICATE HOLDER

441
 Razorback LLC
 177 Anclote Road
 Tarpon Spings FL 34689

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

Rick Leonard

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

HOULLIS, ANTHONY MICHAEL

RAZORBACK LLC
177 ANCLOTE RD
TARPON SPRINGS FL 34689

LICENSE NUMBER: CGC1526612

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

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Razorback LLC

Search

[Events](#) No Name History

Detail by Entity Name

Florida Limited Liability Company
RAZORBACK LLC

Filing Information

Document Number	L08000089307
FEI/EIN Number	26-3447303
Date Filed	09/18/2008
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	02/22/2011

Principal Address

177 Anclote Road
TARPON SPRINGS, FL 34689

Changed: 02/08/2021

Mailing Address

177 Anclote Road
TARPON SPRINGS, FL 34689

Changed: 02/08/2021

Registered Agent Name & Address

HOULLIS, ANTHONY M
276 KNOLLWOOD ROAD
TARPON SPRINGS, FL 34688

Authorized Person(s) Detail

Name & Address

Title MGRM

HOULLIS, ANTHONY M
 276 KNOLLWOOD ROAD
 TARPON SPRINGS, FL 34688

Annual Reports

Report Year	Filed Date
2020	01/21/2020
2021	02/08/2021
2022	01/26/2022

Document Images

01/26/2022 -- ANNUAL REPORT	View image in PDF format
02/08/2021 -- ANNUAL REPORT	View image in PDF format
01/21/2020 -- ANNUAL REPORT	View image in PDF format
02/21/2019 -- ANNUAL REPORT	View image in PDF format
01/15/2018 -- ANNUAL REPORT	View image in PDF format
04/05/2017 -- ANNUAL REPORT	View image in PDF format
02/01/2016 -- ANNUAL REPORT	View image in PDF format
01/11/2015 -- ANNUAL REPORT	View image in PDF format
01/16/2014 -- ANNUAL REPORT	View image in PDF format
01/18/2013 -- ANNUAL REPORT	View image in PDF format
01/05/2012 -- ANNUAL REPORT	View image in PDF format
02/22/2011 -- REINSTATEMENT	View image in PDF format
03/04/2009 -- ANNUAL REPORT	View image in PDF format
09/18/2008 -- Florida Limited Liability	View image in PDF format

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Razorback LLC

Search

[Events](#) **No Name History**

State of Florida

Department of State

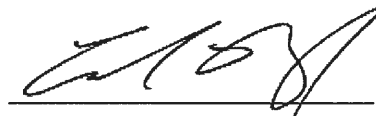
I certify from the records of this office that RAZORBACK LLC is a limited liability company organized under the laws of the State of Florida, filed on September 18, 2008.

The document number of this limited liability company is L08000089307.

I further certify that said limited liability company has paid all fees due this office through December 31, 2022, that its most recent annual report was filed on January 26, 2022, and that its status is active.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Fourth day of August, 2022*




Secretary of State

Tracking Number: 0812220808CU

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

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

My Company Account

My Company Profile

Company Information

Company Name Razorback LLC	Doing Business As (DBA) Name ---
Company ID 1627541	Enrollment Date Jan 13, 2021
Employer Identification Number (EIN) 263447303	Unique Entity Identifier (UEI) ---
DUNS Number 057946214	Total Number of Employees 20 to 99
NAICS Code 236	Sector Construction
Subsector Construction of Buildings	

[Edit Company Information](#)

Employer Category

Employer Category
Federal Contractor without FAR E-Verify Clause

[Edit Employer Category](#)

Company Addresses

Physical Address
177 Anclote Road
Tarpon Springs, FL 34689

Mailing Address
Same as Physical Address

[Edit Company Addresses](#)

Hiring Sites

Number of Sites
1

[Edit Hiring Sites](#)

Company Access and MOU

My Company is Configured to:
Verify Its Own Employees

Memorandum of Understanding
[View Current MOU](#)



Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.	See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. RAZORBACK LLC	
		2 Business name/disregarded entity name, if different from above	
		3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ S Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
		5 Address (number, street, and apt. or suite no.) See instructions. 177 ANCLOTE ROAD	Requester's name and address (optional)
		6 City, state, and ZIP code TARPON SPRINGS, FL 34689	
		7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

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

Social security number									
or									
Employer identification number									
2	6	-	3	4	4	7	3	0	3

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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

Sign Here	Signature of U.S. person ▶	Date ▶ 2-10-21
------------------	----------------------------	-----------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

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

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

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

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

CONFLICT OF INTEREST STATEMENT

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

PART 1.

- I am an employee, public officer, or an advisory board member of the County (LIST).
NAME: _____
- I am the spouse or child of an employee, public officer or advisory board member of the County.
NAME: _____
- An employee, public officer, or advisory board member of the County, 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 five percent (5%) of the total assets or capital stock of any business entity. For the purposes of FS §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 County.
NAME: _____
- Principal or Agent is former employee of MCBCC with less than one (1) year of inactive service.
NAME: _____
- NONE OF THE ABOVE

PART 2.


Are you going to request an advisory board member waiver?

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

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

COMPANY Razorback LLC

PRINTED NAME Anthony Houllis

SIGNATURE 

This document must be completed and returned with your Submittal



Marion County Board of County Commissioners
Procurement Services Department
2631 SE Third St
Ocala, FL 34471
(352) 671-8444 (main)
(352) 671-8451 (fax)
Procurement@MarionFL.org (general e-mailbox)

RFQ 23Q-005: Pressure Washing & Painting Contract Services

TERM: Three (3) years with the option to renew for one (1) additional year.

Marion County Procurement Services will continue to conduct all formal bid openings and Selection Committee Meetings via videoconference on WebEx, and most Pre-Bid/Pre-Award Meetings via teleconference, until further notice. ****Please note that this information may change at any time and with very little notice.**

For questions relating to this solicitation, contact: Jodi Shoemaker | Jodi.shoemaker@marionfl.org

LAST DAY FOR QUESTIONS: October 5, 2022, 12:00PM

*****SUBMITTALS WILL ONLY BE ACCEPTED ELECTRONICALLY THROUGH THE DEMANDSTAR SYSTEM. ALL OTHER SUBMITTALS WILL NOT BE OPENED*****
DUE DATE: October 13, 2022, 3:00PM

It is the responsibility of contractors who receive this Solicitation from sources other than Marion County or DemandStar to contact the Procurement Services Department prior to the due date to ensure any updates/addenda are received in order to submit a responsible and responsive offer. Not submitting a complete and accurate document may deem the offer non-responsive and have your bid rejected.

ADDENDA ACKNOWLEDGMENT: Prior to submitting my offer, I have verified that all addenda issued to date are considered as part of my offer: Addenda received (list all) # _____

Company Name: Razorback LLC
Printed Name: Anthony Houllis Title: MGRM
Primary E-mail address (required): ANTHONY@RAZORBACKLLC.COM
Secondary E-mail address (required): BROOKE@RAZORBACKLLC.COM
Street Address: 177 Anclote Road, Tarpon Springs, FL 34689
Mailing Address (if different): _____
Telephone: (727) 938-9500 FEIN: 26-3447303

Indicate whether your firm accepts Visa for payment award of this contract: (circle) YES / **NO**

My submittal contains pages which are considered proprietary or confidential: YES / **NO**
By noting "yes," firm acknowledges its responsibility to identify pages as such on all sets. Information may be subject to public records request if the notation does not meet FL Statutes 119.07 definition; subject to County Procurement or Legal opinion.

By signing this form, I acknowledge I have read and understand, and my firm complies with all General Conditions and requirements set forth herein:

SIGNATURE OF AUTHORIZED REPRESENTATIVE 

DATE SUBMITTED 10/13/2022

This document must be completed and returned with your Submittal

RFQ 23Q-005
Pressure Washing & Painting Contract Services

DISCLOSURE OF SUBCONTRACTORS AND SUPPLIERS

*****USE ADDITIONAL PAGES, IF NECESSARY*****

Name of Firm Razorback LLC

Please list all subcontractors and suppliers to be used in connection with your performance of the Contract. The County reserves the right to accept or reject any subcontractor based on past performance, location, or any other grounds that may conflict with the best interests of Marion County Board of County Commissioners.

Sub Name: None Anticipated

Point of Contact: _____ Phone Number _____

Physical Office Address: _____

Email Address _____

County in which business is registered as an entity: _____

Firm's % of Workload/Responsibility under this project _____

Firm is a Joint Venturer (partner in this project) Subcontractor* FEID #: _____

*If above is a Subcontractor, the Prime intends to use the proposed firm for the following task(s):

Sub Name: _____

Point of Contact: _____ Phone Number _____

Physical Office Address: _____

Email Address _____

County in which business is registered as an entity: _____

Firm's % of Workload/Responsibility under this project _____

Firm is a Joint Venturer (partner in this project) Subcontractor* FEID #: _____

*If above is a Subcontractor, the Prime intends to use the proposed firm for the following task(s):

Sub Name: _____

Point of Contact: _____ Phone Number _____

Physical Office Address: _____

Email Address _____

County in which business is registered as an entity: _____

Firm's % of Workload/Responsibility under this project _____

Firm is a Joint Venturer (partner in this project) Subcontractor* FEID #: _____

*If above is a Subcontractor, the Prime intends to use the proposed firm for the following task(s):

*Use additional pages in necessary to list ALL Subcontractors and Suppliers

This document must be completed and returned with your Submittal

SIMILAR WORK DETAIL