Submitted By: Electrical Contracting Service, Inc.

2375 West 77th Street Hialeah, FL 33016

Phone: 305-556-0041

Email:

- A. Key personnel assigned to this project.
 - 1) Charles Floyd Project Manager/Superintendent
 - a) Bachelors degree in Electrical Engineering from F.I.U. in 2001.
 - b) Master electrician since 1999.
 - c) Worked in the electrical trade since 1995 with a focus on sports lighting.
 - d) Owner of Electrical Contracting Service, Inc.
 - 2) Robert Winkler Foreman/Superintendent
 - a) Worked in the electrical trade since 1981, with a focus on sports lighting since 1995.
 - b) Journeyman electrician since 1990.
 - Performed over 200 projects consisting of sport lighting, indoor electrical systems, underground wiring etc.
 - 3. Victor Armendariz Electrician
 - a) Has worked in the electrical trade since 2006
 - b) Well versed in running heavy equipment, and experienced in all aspects of electrical systems.
 - 4. All employees of Electrical Contracting have been with the company a minimum of 12 years. Except for 1.

2:51 PM 08/08/19 Accrual Basis

Electrical Contracting Service, Inc. Profit & Loss

January through December 2018

	Jan - Dec 18
Ordinary Income/Expense	
Income	199.13
601.15 · Fuel Sur-Charge	3,720.00
601.14 · Auger & Set	289,425.50
601.13 · Auger	233,783.50
601.8 • Crane	2,960,118.96
601.1 · Contract Sales 601.2 · Labor Income	156,697.00
602.0 · Interest Income	59.37
603 · Misc Income	286.00
Total Income	3,644,289.46
Gross Profit	3,644,289.46
Expense	
650.0 · Bond Expense	10,802.00
656.0 · Payroll Expenses	
658.1 · P/R ExpGroup Ins.	0.400.00
656.11 • Daniel Oliva	6,109.89
656.10 · Winkler Robert	7,958.31 0,927.05
656.9 · Osorio Louis	9,937.05 4,892.73
656.8 - Munoz Bryan 656.7 - Floyd Charles Jr.	15,887.88
656.4 - Barfield Gerald	5,368.35
656.2 · P/R Expense Group Ins JoAnn	7,314.54
Total 656.1 · P/R ExpGroup ins.	57,468.75
656.5 · P/R Exp401K Benefits	25,488.42
657.0 · Bonuses	180,750.00
657.5 · P/R Exp Gross Wages	458,032.48
Total 656.0 · Payroll Expenses	721,739.65
658.0 · Payroli Taxes 659.0 · P/R ExpFUTA/SUTA/SS	49,154.67
Total 658.0 · Payroll Taxes	49,154.67
675.0 · Subcontractors-Recovery	350,993.10
675.1 • Subs - Auger	·
675.2 · Subs - Crane	26,379.97
675.3 · Subs - Concrete	88,426.75
675.6 · Subs - Cutting Concrete	11,687.50
675.9 · Contract labor	23,981.50
675.90 · Boring	23,500.00
675.92 · Cleanup	56,484.57
675.0 • Subcontractors-Recovery - Other	1,360.00
Total 675.0 - Subcontractors-Recovery	582,813.39
693.5 · Tools & Machinery	3,664.89
701 · Purchases	4 700 00
701.1 • Tiger Mud	1,726.05
702 • Purchases • Other	
702.1 • Misc Exp Charles	E34 00
99 Costa Bravo LLC Quitman 256 LLC	534.00 2.131.72
Total 702.1 · Misc Exp Charles	2,665.72
702 · Purchases - Other - Other	152,363.19
Total 702 · Purchases - Other	155,028.91

2:51 PM 06/06/19 Accrual Basis

Electrical Contracting Service, Inc. Profit & Loss

January through December 2018

	Jan - Dec 18
703 - Purchases - Light Fixtures	527,666.14
704 · Purchases - Switch Gear	9,535.64
705 · Purchases - Poles	134,277.50
708 · Purchases - Wire	21,691.72 16,304.87
707 · Purchases - Conduit 708 · Purchases - Freight In	20,809.35
710 · Sales Tax	43,864.59
701 · Purchases - Other	32.38
Total 701 · Purchases	930,936.95
851 · Accounting & Legal	9,075.00
852 · Alarm & Security	845.30
853 · Auto - Fuel	2,949.40
853.10 · Fuel Dan	2,545.40 2,565.99
853.65 • Troy 853.8 • Toils	4,840.90
853.6 · Victor	1,584.99
853.4 · Bryan	2,414.76
853.3 · Rob	7,215.28 2,223.40
853.2 · JoAnn	2,222.19 6,80 6 .77
853.1 · Chuck 853 · Auto - Fuel - Other	31.899.90
	62,500.18
Total 853 - Auto - Fuel	02,300.10
854 · Auto · Maint 854.4 · Charles & Chuck Trucks	2,910.09
854.3 · Service Vans	7,882.29
854.2 · Cranes	36,801.38
854.1 · Auger Repair	105,241.69
854 · Auto - Maint - Other	55,247.83
Total 854 · Auto - Maint	208,083.28
866 · Promotion	214.00 1.195.00
879 · Donations	6.964.87
880 · Dues & Subscriptions 881 · Education	411.28
882 · Plans & Drafting	1,800.00
883. · Equipment Rental	
883.1 • Equipment Rental Crane	43,531.69 14,882.96
883.2 · Trallers/Storage 883. · Equipment Rental - Other	39,893,45
683. · Equipment Rental · Outer	
Total 883. • Equipment Rental	98,308.10
884 · Meals & Entertainment 885 · Travel	4,670.72
884 - Meals & Entertainment - Other	1,595.96
Total 884 · Meals & Entertainment	6,266.68
903 · Bank Service Charges	120.00
904 · Insurance Prop/Cas/W/C	150,814.89 6,488.01
909 · Permits 910 · Licenses & Taxes	1,914.10
911 · Utilities	7,147.69
916 · Misc. Expense	400.00
917 • Office Supplies	3,860.60
918 · Office Expense	692.51
918.1 · Office Remodel 918 · Office Expense - Other	12,553.87
Total 918 · Office Expense	13,246.38
924 · Postage & Courier	942.88
925 - Professional Fees	2,140.00

2:51 PM 06/08/19 Accrual Basis

Electrical Contracting Service, Inc. Profit & Loss

January through December 2018

	Jan - Dec 18
927 • Payroll Services 928 • Rent 929 • Repairs & Maintenance	5,272.82 32,075.00 6,845.12
941 · Telephone	7,373.59
Total Expense	2,933,216.32
Net Ordinary Income	711,073.14
Net Income	711,073.14

CERTIFICATES AS TO CORPORATE PRINCIPAL

I, Charles Flond, certify that I am the Secretary of the Corporation named as
Principal in the within bond; that On Flord who signed said bond on behalf or
the principal, was then Priside of said corporation; that I know his signature, and his
signature hereto is genuine; and that said bond was duly signed, sealed, and attested for and in behal
of said corporation by authority of its governing body.
$\mathcal{M}\mathcal{M}$
Secretary (Corporate Seal)
STATE OF FLORIDA)) SS:
COUNTY OF MIAMI-DADE)
Before me, a Notary Public duly commissioned, qualified and acting, personally appeared
to be well known, who being by me first duly sworn
upon oath, says that he is the Attorney-in-Fact, for the
and that he has been authorized byto execute the foregoing bond
on behalf of the Contractor named therein in favor of the Owner, the
Sworn and Subscribed to before me this 12 day of Jnc, 2019.
Anumar
Notary Public (Attach Power of Attorney
to original Bid Bond)
(Printed Name) JOANN MORALES SASTOQUE MY COMMISSION # GG 213331 EXPIRES: August 31, 2022 Bonded Thru Netwy Public Underwritars
My commission expires:

END OF SECTION

SECTION 400 BID BOND

STATE OF FLORIDA)) SS.			
COUNTY OF MIAMI-DADE)			
KNOW ALL MEN BY THESE	PRESENTS, that	Electrical (Contracting S	ervice Inc
NGM Insurance Company				, as Surety, a
Corporation chartered and existin	g under the laws	of the State of	Florida	, with its
principal offices in the City of				
Florida are held and firmly bound a	into the Owner,	own of Cutler	Bay	in
the penal sum of 5% of bi	d not to exceed	d twenty thou	sand	Dollars (\$ ^{20,000}
lawful money of the United State	s, for the paymen	t of which sum	will and truly	to be made, we
bind ourselves, our heirs, executor	s, administrators, a	nd successors, j	jointly and seve	erally, firmly by
these presents.				
THE CONDITION OF THIS O	BLIGATION IS S	SUCH, that when	reas the Princip	al has submitted
the accompanying bid, dated	ie 12, 2019	, for:		

CUTLER RIDGE PARK LIGHTING IMPROVEMENTS TOWN OF CUTLER BAY, FLORIDA

NOW, THEREFORE:

A. If the principal shall not withdraw said bid within sixty (60) days after date of opening of the same, and shall within ten (10) days after the prescribed forms are presented to him for signature, enter into a written contract with the Owner in accordance with the bid as accepted, and give bonds with good and sufficient surety or sureties, as may be required, for the faithful performance and proper fulfillment of such contract, then the above obligations shall be void and of no effect, otherwise to remain in full force and effect.

B. In the event of the withdrawal of said bid within the period specified, or the failure to enter into such contract and give such bonds within the time specified, if the principal shall pay the Owner the difference between the amount specified in said bid and the amount for which the Owner may procure the required work and supplies, if the latter amount be in excess of the former, then the above obligations shall be void and of no effect, otherwise to remain in full force and effect.

IN WITNESS WHEREOF, the above bou	nded parties have executed this instrument under
their several seals, this 12 day of June	, 2019, the name and corporate seal of each
corporate party being hereto affixed and thes	se presents duly signed by its undersigned
representative, pursuant to authority of its governing	ng body.
•	or Partnership, two (2) witnesses required) retary Only will attest and affix seal)
WITNESSES: PRIN	CIPAL:
An mos	Electrical Contracting Service Inc
Carina Masta	Name of Firm
	Signature of Authorized (Affix Seal)
	Title 2375 W 77 St
	Business Address Hialeah Fl 33016
	City, State & Zip Code
WHENESSES: SURI	ETY: NGM Insurance Company
	Corporate Surety July
	Attorney-in-Fact (Affix Seal) 4601 Touchton Road East #3300
	Business Address Jacksonville, Fl 32245
	City, State & Zip Code Risk Strategies Company
	Name of Local Insurance Agency



POWER OF ATTORNEY

06-03007707

KNOW ALL MEN BY THESE PRESENTS: That NGM Insurance Company, a Florida corporation having its principal office in the City of Jacksonville, State of Florida, pursuant to Article IV, Section 2 of the By-Laws of said Company, to wit:

"Article IV, Section 2. The board of directors, the president, any vice president, secretary, or the treasurer shall have the power and authority to appoint attorneys-in-fact and to authorize them to execute on behalf of the company and affix the seal of the company thereto, bonds, recognizances, contracts of indemnity or writings obligatory in the nature of a bond, recognizance or conditional undertaking and to remove any such attorneys-in-fact at any time and revoke the power and authority given to them."

does hereby make, constitute and appoint A Hadi Farid, Charlotte Floyd, Harvey Sheldon

its true and lawful Attorneys-in-fact, to make, execute, seal and deliver for and on its behalf, and as its act and deed, bonds, undertakings, recognizances, contracts of indemnity, or other writings obligatory in nature of a bond subject to the following limitation:

1. No one bond to exceed Five Million Dollars (\$5,000,000.00)

and to bind NGM Insurance Company thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of NGM Insurance Company; the acts of said Attorney are hereby ratified and confirmed.

This power of attorney is signed and sealed by facsimile under and by the authority of the following resolution adopted by the Directors of NGM Insurance Company at a meeting duly called and held on the 2nd day of December 1977.

Voted: That the signature of any officer authorized by the By-Laws and the company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof; such signature and seal, when so used being hereby adopted by the company as the original signature of such office and the original seal of the company, to be valid and binding upon the company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, NGM Insurance Company has caused these presents to be signed by its Vice President, General Counsel and Secretary and its corporate seal to be hereto affixed this 8th day of January, 2016.

NGM INSURANCE COMPANY By:

B-RX

Bruce R Fox Vice President, General Counsel and Secretary

State of Florida, County of Duval.

On this January 8, 2016, before the subscriber a Notary Public of State of Florida in and for the County of Duval duly commissioned and qualified, came Bruce R Fox of NGM Insurance Company, to me personally known to be the officer described herein, and who executed the preceding instrument, and he acknowledged the execution of same, and being by me fully sworn, deposed and said that he is an officer of said Company, aforesaid: that the seal affixed to the preceding instrument is the corporate seal of said Company, and the said corporate seal and her signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Company; that Article IV, Section 2 of the By-Laws of said Company is now in force.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Jacksonville, Florida this 8th day of January,

2016.

Tooks Am Pixod

Tooks Am Pixod

NOTARY PUBLIC

STATE OF FLORIDA

Commit FF918117

I, Nancy Giordano-Ramos, Vice President of NGM Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by said Company which is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Company at Jacksonville, Florida this

12 day of JUNE , 2019

WARNING: Any unauthorized reproduction or alteration of this document is prohibited.

TO CONFIRM VALIDITY of the attached bond please call 1-800-225-5646.

TO SUBMIT A CLAIM: Send all correspondence to 55 West Street, Keene, NH 03431 Attn: Bond Claims.



<u>SECTION 620</u> <u>CERTIFICATE OF INSURANCE</u>

THIS IS TO CERTIFY THAT THE $\frac{\gamma_{10}}{\gamma_{10}}$	Strategies Compray
THIS IS TO CERTIFY THAT THE PISK S Address 3250 North 29 Ave	(Insurance Company)
Address 3250 North 21 Hot	
of Hollywood FL 3302	0
has issued policies of insurance, as described below a named below; and to certify that such policies are i that none of these policies will be canceled or chang Cutler Bay (hereinafter sometimes called the Owne such cancellation or change has been delivered to the	n full force and effect at this time. It is agreed ed so as to affect the interest(s) of the Town of er) until thirty (30) days after written notice of
Insured Electrical Contraction	y Sinke De
Address 2375 W. 77 Street,	
Status of Insured:	
Location of Operations Insured 2375 W	77 St HIALYAL FL 330/6
Description of Work:	
CUTLER RIDGE PARK LIGH TOWN OF CUTLER	
INSURANCE POLICIES IN FORCE:	
Forms of Coverage	Policy Number Exp. Date
*Workers Comp./Employers Liability	See Attach Cartificate
+Comprehensive Automobile Liability	
oComprehensive General Liability	<u> </u>
+Excess Liability	
Other (Please specify type:)	

POI	LICY INCLUDES COV	ERAGE FOR:	•	YES	NO
1. 2.	Additional Insured: O				X
2	Longshoremen's and H Compensation Act.	•			X
3.	All owned, hired, or nequipment used in condone for the Owner.	onowned automotive nection with work	ſ	X]	
4. 5.	Contractual Liability Damage caused by exp structural injury, and d		ţ	江	
6. 7.	ground utilities. Products/Completed Completed Complete	perations rs Protective Liability		X X	
8. 9.	Personal Injury Liabili Excess Liability applie (a) Employers Liabili	s excess of: ty		\(\)	X
	(b) Comprehensive G (c) Comprehensive A	•		對	
TYP	ES OF POLICY	FORMS OF COVERAGE	LIMI	TS OF I	JABILITY
Worl	kers' Compensation	Bodily Injury 25-444 cente	\$	Sta	atutory
Emp	loyers Liability	Bodily Injury	\$	Ea	ch cident
		Disease	\$	Ea	
_		Disease	\$		licy nit
Com	prehensive Auto	Combined Single	\$	Ea	ch
	Liability	Limit BI/PD		Ac	cident

Comprehensive Go	eneral	eral Bodily Injury		Each
Liability	Src	Certilocatio	\$	Occurrence Aggregate
į		Property Damage	\$	Each
		OR	\$	OccurrenceAggregate
		Combined Single Limit BI/PD Occurrence	\$	Each
		Cocurono	\$	Aggregate
Excess Liability		Combined Single Limit BI/PD	\$	Aggregate
Other				
The Insurance Corpolicies to the Eng		agrees to deliver, within ten (1 o requested.	10) days, two (2	2) copies of the above
·	n this certifi Representati	cate are limited to the Authove.	orized Agent o	or Insurance
Date 6/12	2019	Send or	iginal and one	copy to:
Issued at Tisk	Strotegie	> Compray (SEAL)		-tilurate
Insurance Agent		-	Charl	Company d Representative

Town of Cutler Bay Attn: Debra E. Eastman, MMC, Town Clerk 10720 Caribbean Blvd., Suite 105 Cutler Bay, Florida 33189

END OF SECTION



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/10/2019

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(8), 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 s	uch endorse	ment(s).			
PRODUCER Risk Strategies Com	pany	CONTACT NAME:				
3250 N. 29th Ave	•	PHONE (A/C, No. Ext):	954-983-6666	FAX (A/C, No):	954-963-9776	
Hollywood, FL 33020	E-MAIL ADORESS:	alucerts@risk-strategies.c	om			
			INSURER(S) AFFORDING COVERA	(GE	NAIC#	
		INSURER A:	10833			
INSURED Electrical Contracting Service, 2375 West 77 Street	ce, Inc.	INSURER B: Commerce and Industry Insurance 194				
		INSURER C : F	hoenix Insurance Company		25623	
Hialeah FL 33016		INSURER D :	American Zurich Insurance Comp	cany	40142	
,		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 49193090		REVISION	NUMBER:		

0	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.								
INSI LTR		TYPE OF INSURANCE	ABBL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYY)	POLICY EXP	LIMIT	s
A	7	COMMERCIAL GENERAL LIABILITY	/		VGGP003035	1/1/2019	1/1/2020		\$ 1000000
	П	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (En occurrence)	s 50000
	7	BI/PD Ded:5.000						MED EXP (Any one person)	s 5000
				ŀ				PERSONAL & ADV INJURY	\$ 1000000
	GEN	YL AGGREGATE LIMIT APPLIES PER:		1				GENERAL AGGREGATE	\$2000000
		POLICY / PRO- LOC		1				PRODUCTS - COMP/OP AGG	\$2000000
		OTKER:		l					\$
٥	AUT	OMOBILE LIABILITY	1	7	BA9053R96718SEL	9/17/2018	9/17/2019	COMBINED SINGLE LIMIT (Ea socidoni)	\$ 1000000
İ	7	ANY AUTO		ľ				BODILY INJURY (Per person)	\$
	Ť	OWNED SCHEDULED AUTOS						BOOKLY INJURY (Per socident)	\$
	7	HIRED NON-OWNED AUTOS ONLY		1				PROPERTY DAMAGE (Per accident)	\$
	Г							Personal Injury Protect	\$10,000
В		UMBRELLA LIAB / OCCUR			EBU061213215	3/26/2019	3/26/2020	EACH OCCURRENCE	\$4000000
	7	EXCESS LIAB CLAIMS-MADE				-		AGGREGATE	s4000000
		DED RETENTIONS						Excess over GL & Auto	S
Г		RKERS COMPENSATION						PER OTH- STATUTE ER	
	ANY	EMPLOYERS' LIABILITY PROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$
	(das	ICER/MEMBER EXCLUDED?	N/A					E.L. DISEASE - EA EMPLOYEE	\$
1	U YO	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	
С	Equ	ipment Floater nted/Leased Equipment ductibles			45471364	1/1/2019	1/1/2020	\$392,346 Covered Equip \$250,000 Aggregate \$1,000 AOP	
		TION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORE				od)	
_CE	CERTIFICATE HOLDER CANCELLATION								

CERTIFICATE HOLDER	CANCELLATION			
Town of Cutler Bay 10720 Carribbean Blvd Suite 105	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
Cutler Bay FL 33189	AUTHORIZED REPRESENTATIVE Michael Christian			

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MINIDDAYYYY)

5/20/2019 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(les) 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 ID: (Decision HR) Cortney Hom FAX IAIC. Not PHONE (A/C. No. Ext): E-MAIL c/o Decision HR 11101 Roosevelt Blvd N 888-828-5511 Certs@DecisionHR.com LODRESS Saint Petersburg, FL 33716 NAIC # INSURER(S) AFFORDING COVERAGE INSURER A: United Wisconsin Insurance Company 29157 INSURED INSURER 8: Decision HR Holdings Inc. ONSURER C: 11101 Roosevelt Blvd. N. Saint Petersburg FL 33716 INSURER D : MRURER E INSURER F : **REVISION NUMBER: CERTIFICATE NUMBER: 48793042** COVERAGES 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. POLICY EFF POLICY EXP ADDL SUBR LIMITS TYPE OF INSURANCE POLICY NUMBER EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Fe occurrence COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY \$ \$ GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG PRO-POLICY \$ OTHER: OMBINED SINGLE LIMIT \$ AUTOMOBILE LIABILITY BODILY INJURY (Per person) \$ ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS CNLY **BODILY INJURY (Per accident)** s OWNED AUTOS ONLY HIRED AUTOS ONLY PROPERTY DAMAGE (Per accident) \$ \$ LIMBORI LA LIAR **EACH OCCURRENCE** OCCUR AGGREGATE EXCESS LIAB CLAIMS-MADE DED RETENTION\$ 6/1/2019 6/1/2020 WC518-00001-019-SZ WORKERS COMPENSATION ✓ STATUTE AND EMPLOYERS' LIABILITY 6/1/2019 6/1/2018 WC518-00001-018 \$1,000,000 ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT N N/A E.L. DISEASE - EA EMPLOYER \$1,000,000 if yes, describe under DESCRIPTION OF OPERATIONS below EL. DISEASE - POLICY LIMIT | \$1,000,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schodule, may be attached if more space is required) Coverage provided for all leased employees but not subcontractors of: Electrical Contracting Service Effective date: 1/1/2018 RE: License #: EC13005149 Electrical Contracting Service, Inc. CANCELLATION **CERTIFICATE HOLDER** 151141 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Town of Cutler Bay Building Department 10720 Caribbean Blvd. Suite 110 THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Cutier Bay FL 33189 **AUTHORIZED REPRESENTATIVE**

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Rick Leonard

AGENCY CUSTOMER ID: ELECO1						
ADDITIONAL REMARKS SCHEDULE Page of						
AGENCY		NAMED INSURED				
Risk Strategies Company		Electrical Contracting Service, Inc. 2375 West 77 Street Histeah FL 33016				
POLICY NUMBER		Fualean FL 33016				
CARRIER	NAIC CODE					
works the same of	I KAIO CODE	EFFECTIVE DATE:				
ADDITIONAL REMARKS						
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM.					
FORM NUMBER: 25 FORM TITLE: Certificate of Liabit	•					
HOLDER: Town of Cutler Bay						
ADDRESS: 10720 Carribbean Blvd Suite 105 Cutler Bay FL 3318						
required by written contract per End and Non-Contributory basis per End #0 in favor of certificate holder under contract per End #CG2404(05/09). Blan	#CG2010(CG2001 (0 General nket Addi	Insured under General Liability Policy when (04/13) and End #CG2037(04/13) on a Primary (4/13). Blanket Waiver of Subrogation applies Liability Policy as required by written tional Insured and Waiver of Subrogation by written contract per End #CAF079(04/07).				
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ACORD 101 (2008/01)

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ANTI-KICKBACK AFFIDAVIT

)

STATE OF FLORIDA

)	SS:
COUNTY OF MIAMI-DADE)	
paid to any employees of the	n, depose and say that no portion of the sum herein bid will be e Town of Cutler Bay, its elected officials, and or its design consultants, as a commission, kickback, reward or my member of my firm or by an officer of the corporation.
	By:
	By:
Sworn and subscribed before this	
12 day of Juc, 2019	
Annual Notary Public	
JOAN Morals Sastofue	
(Printed Name)	
State of Florida at Large (Seal)	JOANN MORALES SASTOQUE MY COMMISSION # GG 213331 EXPIRES: August 31, 2022 Bonded Thru Notary Public Underwriters
My commission expires:	

[SPACE LEFT INTENTIONALLY BLANK]

SWORN STATEMENT ON PUBLIC ENTITY CRIMES SECTION 287.133(3)(a), FLORIDA STATUTES

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

l.	This sworn statement is submitted to the Town of Cutler Bay
	by Charles Floyd - Presidut
	by Charles Flow - President [Print individual's name and title] for Electrical Contraction Service Inc
	[Print name of entity submitting sworn statement]
	whose business address is
	2375 Wot 77 Stort
	Hialral, FL 33016
	and (if applicable) its Federal Employer Identification Number (FEIN) is 59-255210
	(If the entity has no FEIN, include the Social Security Number of the individual
	signing this sworn statement: \mathcal{N}
2.	I understand that a "public entity crime" as defined in Paragraph 287.133(1)9g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or the United States, including, but not limited to, any bid or contract for goods and services to be provided to any public entity or an agency or political subdivision of any other state or of the United States involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3.	I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction or a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

- 4. I understand than an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 - a. A predecessor or successor of a person convicted of a public entity crime; or
 - b. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
- I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an entity.

Based on information and belief, the statement that I have marked below is true in relation to 6. the entity submitting this sworn statement. [Indicate which statement applies.] Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, not any affiliate of the entity, has been charged with and convicted of a public entity crime subsequent to July 1, 1989. This entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. [Attach a copy of the final order]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND HAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES, FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

	M
	Signature of Entity Submitting Sworn Statement
Sworn to and subscribed before n	ne this 12 day of Twc, 2019.
[X] Personally known OR produ	ced identification [] <u> </u>
Notary Public	
(Printed Name)	astogue
State of Florida at Large (Seal)	JOANN MORALES SASTOQUE MY COMMISSION # GG 213331 EXPIRES: August 31, 2022 Bonded Thru Notary Public Underwriters
My commission expires:	

[SPACE LEFT INTENTIONALLY BLANK]

DRUG-FREE WORKPLACE FORM

The undersigned vendor in accordance with Section 287.087, Florida Statutes, hereby certifies that Liectoreal Costonedrus Service Jump does: (Name of Business)
(Name of Business)
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 note 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 this firm complies fully with the above requirements.
Proposer's Signature Jwe 12, 2019 Date
Proposer's Signature Date

END OF SECTION

Local Business Tax Receipt

Miami-Dade County, State of Florida
-THIS IS NOT A BILL -DO NOT PAY

1447937

BUSINESS-NAME/LOCATION ELECTRICAL CONTRACTING SERVICE INC 2375 W 77TH ST HIALEAH, FL 33016 RECEIPT NO. RENEWAL 1447937 LBT

EXPIRESSEPTEMBER 30, 2019

Must be displayed at place of business Pursuant to County Code Chapter 8A – Art. 9 & 10

OWNER
ELECTRICAL CONTRACTING SVC
INC
CIO CHARI FS H FI OYD .IR PRFS
Worker(a)
2

SEC. TYPE OF BUSINESS 198 ELECTRICAL CONTRACTOR

EC13005149

PAYMENT RECEIVED BY TAX COLLECTOR 56.25 01/22/2019 CREDITCARD-19-027360

This Local Business Tax Receipt only continus payment of the Local Business Tax. The Receipt is not a ficense, parmit, or a contilication of the helder's qualifications, to do business. Halder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.



The RECEIPT NO, above must be displayed on all commercial vehicles – Milami–Oado Codo Sec 89–276.

For more information, visit propential propential control lector



City of Hialeah **Business Tax Receipt**

2018-19

Mayor Carlos Hernandez

238210-84

(OLD-1731-68)

Amount: \$ 150.00

The person, firm or curp. listed here has paid the business tax required to engage in or operate the business specified subject to the regulations and restrictions of the City of Hialenh, Florida

Owner: ELECTRICAL CONTRACTI

Type of Business: Electrical Contractors and Other Wiring Installation Contractors

BLECTRICAL CONTRACTING SERVICE, INC.

2375 W 77 ST

HIALEAH, FL 33016

Business Location:

2375 W 77 ST

Validating No.: 0000

· THIS IS NOT A BILL

Expires September 30, 2019







STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS LICENSING BOARD

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

FLOYD, CHARLES HERSHEL JR

ELECTRICAL CONTRACTING ŞERVICE, INC. 2375 WEST 77TH STREET HIALEAH FL 33016

LICENSE NUMBER: EC13005149

EXPIRATION DATE: AUGUST 31, 2020

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

SECTION 350 CONTRACTOR'S QUESTIONNAIRE

QUALIFICATION STATEMENT

Submitted to: The I	Mayor and Town Counci	il of the Town of (Cutler Bay, Flo	orida:	
By Electri	(A) Contraction	y Smile J	ic		
Principal Office 2	375 Wrst 7	Strot, H	Hahal F	FL 33016	
How many years has business name?	s your organization been i	in business as a Ge	eneral Contrac	tor under your present	
Does your organizat	ion have current occupat	ional licenses entit	ling it to do the	work contemplated in	
State of Florida Occ	cupational License (State	type and number): EC 130	005149	
Federal I.D. No:	59-2552102				
Dade County Certif	icate of Competency (Sta Low tractor	ate type and numb	er): 1937		
Town of Cutler Bay	Occupational License (State type and nun	nber):		
Please include cop	ies of above licenses an	d certifications w	ith proposal.		
How many years of	experience in similar we	ork has your organ	ization had?		
(B) As a	General Contractor				
Contract Amount	Class of Work	When Complete		Name & Address of Owner	
427,840-	Sport 20 Ltwo Polis + Frotons	8105 /81/21	. C.	SI NW Jud St. 33	<u>3</u> 324
305.000-	Reductit Old Pol	כה! אנסברונא (ד	Y	CHO WIVESH Dr CHAN. 2 ANDRO DAIL	_8347
245.360-	Sport Lty 3 Pk	3/2018		70/SD 7/ AJE 33	068

How many years has your organization, or you park or commercial lighting improvements		
Years		
List the detailed experience below:		
Name & tel. number of Owner Coty Prototo Judy McBorde 954-585-2360 Tono Montrole 305-3646100 Coty Home Stand Burth Biden Resoller 305-224-4572	Park Varions JO Redd Park	
Are you a Certified Disadvantaged Business	s Enterprise (DBE) with the	State of Florida?
Do		
Have you ever failed to complete any work	awarded to you?	
If so, where and why?		
Has any officer or partner of your organization name?	on ever failed to complete a co	ontract handled in his own
If so, state name of individual, name of own	ner, and reason thereof:	
N/n		
In what other lines of business are you finan	ncially interested or engaged	?
CL C Angerry Ive		

Give ref	erences as t	o experience	, ability an	d financial stand	ling.	
<u>S</u> .	ce AH	adod				
	•					
	· · · · · · · · · · · · · · · · · · ·					
What eq	uipment do	you own tha	at is availab	ole for the propo	sed work and whe	re is it located?
_		-				
	~		100	1	<u> </u>	Velroles
	Hyyr		nx) bh. 4,		
	-411		Brot	rhoe		
	1					
Financia	ıl Statement	Sre	A-44 A0	1.1		
What Ba	ank or Bank	s have you ar	ranged to d	lo business with	during the course o	of the Contract should
B	20 76	+ Amir	100			
	\$					
	-					
	-			are true and co		(Affix Seal)
Name o	f Bidder:	E)ectr	ical Co	Stracting Sr	ruire Ju	·
	0.00	CA	M			
Signatu	re of Office	r: <u> </u>	1. \			
CC*-1 C	000	None	1.)T			

END OF SECTION

SECTION 300 PROPOSAL

CUTLER RIDGE PARK LIGHTING IMPROVEMENTS TOWN OF CUTLER BAY

Town Clerk's Office Town of Cutler Bay 10720 Caribbean Boulevard Suite 105 Cutler Bay, Florida 33189

The undersigned, as Bidder, hereby declares that the only person or persons interested in the Proposal, as principal or principals, is or are named herein and that no other person than herein mentioned has any interest in the Proposal of the Contract to which the work pertains; that this Proposal is made without connection or arrangement with any other person, company, or parties making a bid or proposal and that the Proposal is in all respects fair and made in good faith without collusion or fraud.

The Bidder certifies that the bidder is not a nonresident alien, or a foreign corporation/entity formed under the laws of a country other than the United States.

The Bidder further declares that he has examined the site of the work and that from personal knowledge and experience, or that he has made sufficient observations of the conditions of the proposed Project Site to satisfy himself that such site is a correct and suitable one for this work and he assumes full responsibility therefore, that he has examined the Drawings and Specifications for the work and from his own experience or from professional advice that the Drawings, including bid item quantities, and Specifications are sufficient for the work to be done and he has examined the other Contractual Documents relating thereto, including the Notice of Bid Invitation, Instructions to Bidders, Proposal, Contract, General Conditions, Supplementary Conditions, Special Conditions, Technical Specifications, Drawings and has read all addenda prior to the receipt of bids, and that he has satisfied himself fully, relative to all matters and conditions with respect to the work to which this Proposal pertains.

The Bidder proposes and agrees, if this Proposal is accepted, to contract with the Town of Cutler Bay (Owner), in the form of contract specified, to furnish all necessary materials, all equipment, all necessary machinery, tools, apparatus, means of transportation, and labor necessary to complete the work specified in the Proposal and the Contract, and called for by the Drawings and Specifications and in the manner specified.

NOTE: THIS SCHEDULE OF BID ITEMS IS MERELY ILLUSTRATIVE OF THE MINIMUM AMOUNT/QUANTITY OF WORK TO BE PERFORMED UNDER THE CONTRACT. IN THE CASE OF ANY CONFLICT BETWEEN THIS SCHEDULE OF BID ITEMS AND THE DETAILED SPECIFICATIONS WILL PREVAIL.

The Bidder further proposes and agrees to comply in all respects with the time limits for commencement and completion of the work as stated in the Contract Form.

The Bidder further agrees that the deductions for liquidated damages, as stated in the Contract Form, constitute fixed, agreed, and liquidated damages to reimburse the Owner for additional costs to the Owner resulting from the work not being completed within the time limit stated in the Contract Form.

Payment Bonds each in the amount of one-hundred percent of the Contract price, within ten (10) consecutive calendar days after written notice being given by the Owner of the award of the Contract, and the undersigned agrees that in case of failure on his part to execute the said Contract and Performance and Payment Bonds within the ten (10) consecutive calendar days after the award of the Contract, the cashier's check or Bid Bond accompanying his bid and the money payable thereon shall be paid to the Owner as liquidation of damages sustained by the Owner; otherwise, the check accompanying the Proposal shall be returned to the undersigned after the Contract is signed and the Performance and Payment Bonds are filed.

Bidders Certificate	of Competency No.	<u>C13505149</u>	
Bidders Occupation	nal License No. 149	7937 23821	0-84
Acknowledgment is hereby Manual:	y made of the following	, Addenda received sin	ce issuance of the Project
Addendum No	Dated:	Addendum No	Dated:
Addendum No	Dated:	Addendum No	Dated:
Addendum No	Dated:	Addendum No	Dated:

attached hereto is a cashier's check on the	
or Bid Bond for the sum of 26,000 -	-
Thuy Thousand	Doilars
(\$ 26.000), made payable to the Town of Cutler Bay, Florida. Electrical Control Securce Juc (Name of Bidder) Signature of Officer	L.S. ffix Seal) L.S.
(Title of Officer)	L.S.
Address: 2375 West 77 Street	
City: Hialral State: FL 33016	
The full names and residences of persons and firms interested in the foregoing bas follows: Charles Fland Jr. 12101 Tera Dr. Plantation	
-	
Name of the executive who will give personal attention to the work:	
Charles Floyd J-	
•	·

LIST OF MAJOR SUB CONTRACTORS

Bidders are required to list with the Proposal, on this sheet all major sub-contractors included for the prosecution of the work. Failure to complete the list may be cause for declaring the Proposal irregular.

The successful bidder shall employ the sub-contractors listed hereunder for the class of work indicated, which list shall not be modified in any way without the written consent of the Town of Cutler Bay.

The Bidder expressly agrees that:

- 1. If awarded a contract as a result of this proposal, the major sub-contractors used in the prosecution of the work will be those listed below.
- 2. The Bidder represents that the sub-contractors listed below are financially responsible and are qualified to do the work required.

CATEGORY OF CLASS	NAME OF SUB- CONTRACTOR	ADDRESS OF WORK
NA		
•		

[SPACE LEFT INTENTIONALLY BLANK]

END OF SECTION

BASE BID FORM

Bid unit prices stated in this proposal include all costs and expenses for labor, equipment, materials, contractor's overhead and profit. Prices for the various work items are intended to establish a total price for completing the project in its entirety. The Contractor shall include in the Bid price any work item and materials for which a separate pay item has not been included in the Bid Form. All work and incidental costs shall be included for payment under the several scheduled items of the overall contract, and no separate payment will be made therefore.

ITEM	DESCRIPTION	QNTY	UNIT	UNIT PRICE	AMOUNT
1	General Conditions including Mobilization/Demobilization, bonds, insurance, etc.	1	L.S.	\$4,000 -	\$ 4,000 -
2	Furnish and install all required wiring as shown on the plans and specifications.	1	L.S.	\$ 2,200 -	\$ 22 00 -
3	Remove existing lighting components and furnish and install all new lighting components on existing poles as shown on the plans and specifications.	4	EA.	\$ 28,000—	\$ 112,000-
4	Furnish and install all miscellaneous electrical equipment, controls, panels, etc. as shown on the plans and specifications	1	EA.	s 2,530—	s 2,530—
5	Furnish and install one (1) double sided project sign on 4'x8' plywood with 4x4 wood posts and 2x4 supports.	1	L.S.	\$ 1,000-	s 1,000—
6	Allowances	1	L.S.	\$50,000	\$50,000

GRAND TOTAL IN FIGURES: \$ 171,730-
GRAND TOTAL WRITTEN: _
One Hundred Scroty One Thomand Ston Hundred
and Thurty Dollars

BIDDER:	Electrica)	Costraction	Strille	Juc
	Chn-los Flo	_	MM	
	President			
Teler	ohone: <u>315 - 556</u> -	- <u>004)</u> Fax	:: <i>N/p</i>	

Bid Item Notes

- 1. All Bid Items include all necessary advanced explorations to verify and determine existing site/utility information, material, and locations where conflicts with the proposed work may occur (soft digs). If a conflict is determined or a discrepancy with the plans is found, the Contractor is to notify the Engineer and provide all pertinent field information to assist the resolution of the conflict. This work is to be carried out in advance of construction.
- 2. Contractor shall notify the Engineer if an apparent error or omission is discovered in the contract documents. The Engineer will then make such corrections and interpretations as necessary to reflect the actual spirit and intent of the contract documents.
- 3. The contingency will be used only under previous approval by the Town and after negotiations of price and scope for any additional work as required or requested by the Town.

[SPACE LEFT INTENTIONALLY BLANK]

NON-COLLUSION AFFIDAVIT

STATE OF FI	LORIDA MIAMI-DADE				
Charle	> Flord	("Affiar	nt"), being first	duly sworn, deposes and	d says that:
1.	Affiant is	+C+pireson(of <u>E</u>	retrical Contrad	<u>-13</u> , (the
	"Bidder") and ha	s submitted the att	ached Bid;		
2.	Affiant has perso testify:	nal knowledge of	the matters se	et forth herein and is co	mpetent to
3.		formed respecting circumstances resp		on and contents of the at l;	tached Bid
4.	The Bid is genuir	ne and is not a coll	usive or sham	Bid;	
5.	employees, or proconspired, conniverson to submit sought by agreem Bidder, firm, or proceed Bidder, or to fix a of any other Bidder, agreement agreement of the submit agreeme	arties in interest, yed, or agreed, dire a collusive or shan nent or collusion operson to fix the purple overhead, profiler, or to secure the	including Aftectly or indirect or has in or communicatic or prices in or cost elements and column a	s, owners, agents, repre- friant, has in any way etly with any other Bidd any manner, directly of tion or conference with in the attached Bid or of ent of the Bid price or the lusion, conspiracy, con- wn of Cutler Bay or a	y colluded, ler, firm, or r indirectly, h any other of any other ne Bid price univance or
By:	11 M				
Title: Pe	+6/12				
Subscribed	and sworn be	fore me this	<u>/></u> day	of Jue,	2019, by
Ch m/m	Flord	_, who is per _ as identification	rsonally knov	wn to me or has	produced
	JOANN MORALL MY COMMISSIO EXPIRES: Au Bonded Thru Notary	S SASTOQUE N # GG 213331	Not.	ary Public TO AN MORADO SA	\geq
My commission	n expires:		State	e of Florida at Large (S	eal)

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS PRIMARY COVERED TRANSACTIONS

CFR 24.510 & 24 CFR, Part 24, Appendix "A"

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature:	1 M Project Name: M- Cutler Ridge Park LINTIN Inc	on re on ots
Name:	Project Number: ITS # 19-06	
Firm/Agency: Street Address:	Electrical Contracting Service Juc 2375 West 77 Street Historial FL 33016	

INSTRUCTIONS FOR CERTIFICATION

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Non-procurement List (Telephone Number).

- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntary excluded from participation in this transaction, in addition to other remedies available to the federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

[SPACE LEFT INTENTIONALLY BLANK]

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements
Appendix "A" – 49 CFR Part 20

The undersigned (Contractor) certifies, to the best of his or her knowledge and belief, that:

- 1. No Federal 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 an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- 2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for making lobbying contacts to an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form—LLL, "Disclosure Form to Report Lobbying", in accordance with the instructions {as amended by "Government Wide Guidance for New Restrictions on Lobbying", 61 Fed. Reg. 1413 (1/19/96). Note: Language in paragraph (2) herein has been modified in accordance with Section 10 of the Lobbying Disclosure Act of 1995 (P.L. 104-65, to be codified at 2 U.S.C. 1601, et seq.)}
- 3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995). Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. {{Note: Pursuant to 31 U.S.C. § 1352©(1)-(2)(A), any person who makes a prohibited expenditure or fails to file or amend a required certification or disclosure form shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure or failure}.

The Contractor, Eretored Contractor Seed by Seed The certified or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. A 3801, et seq., apply to this certification and disclosure, if any.
Signature of Contractor's Authorized Official
Name and Title of Contractor's Authorized Official
Date

[SPACE LEFT INTENTIONALLY BLANK]