

VENDORS MUST COMPLETE THE FOLLOWING

VENDORS ARE CAUTIONED THAT THE POLICY OF THE BOARD OF COUNTY COMMISSIONERS, PINELLAS COUNTY, IS TO ACCEPT THE LOWEST RESPONSIVE AND RESPONSIBLE SUBMITTAL RECEIVED MEETING SPECIFICATIONS. NO CHANGES REQUESTED BY A VENDOR DUE TO AN ERROR IN PRICING WILL BE CONSIDERED AFTER THE SOLICITATION OPENING DATE AS ADVERTISED. BY SIGNING THIS SUBMITTAL FORM, VENDORS ARE ATTESTING TO THEIR AWARENESS OF THIS POLICY AND ARE AGREEING TO ALL OTHER SOLICITATION TERMS AND CONDITIONS, INCLUDING ANY INSURANCE REQUIREMENTS CONTAINED HEREIN.

VENDOR NAME: Clarke Mosquito Control Products, Inc. (As shown on W-9)
DBA: _____ (If applicable)
MAILING ADDRESS: 675 Sidwell Court (As shown on W-9)
CITY / STATE / ZIP: St. Charles, IL 60174 (As shown on W-9)
VENDOR EMAIL: rsantana@clarke.com (Primary Company Email Address)
REMIT TO NAME: Clarke Mosquito Control Products, Inc. (As Shown on Vendor Invoice)
FEIN#: 36-3672438 (As shown on W-9)

PAYMENT TERMS: 100 % DAYS, NET 45 (PER F.S. 218.73)


DEPOSIT, IF REQUIRED, IS ATTACHED IN THE AMOUNT OF \$ NA

Proper Corporate Identity is needed when you submit your quote, especially how your firm is registered with the Florida Division of Corporations. Please visit dos.myflorida.com/sunbiz/ for this information. It is essential to return a copy of your W-9 with your quote. Thank you.

VENDOR CONTACT INFORMATION

CONTACT NAME: Robert Santana
PHONE NUMBER: 407-944-0520 or 561-420-9079
FAX NUMBER: 407-944-0709
EMAIL ADDRESS: rsantana@clarke.com

I HEREBY AGREE TO ABIDE BY ALL CONDITIONS OF THIS SOLICITATION, INCLUDING ALL INSURANCE REQUIREMENTS, AND CERTIFY THAT I AM AUTHORIZED TO SIGN THIS SOLICITATION FOR THE VENDOR.

AUTHORIZED SIGNATURE: 

PRINT NAME: Robert Santana

TITLE: Regional Sales Lead

SEE SECTION F FOR PRICING SUMMARY

THIS FORM MUST BE RETURNED WITH YOUR RESPONSE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/28/2022

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 HUB International Midwest Limited 55 East Jackson Boulevard Chicago IL 60604	CONTACT NAME: CSU Chicago - Midwest PHONE (A/C, No, Ext): 312-922-5000 E-MAIL ADDRESS: CSUChicago@hubinternational.com	FAX (A/C, No):	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Clarke Mosquito Control Products, Inc. Clarke Environmental Mosquito Management, Inc. 159 N. Garden Ave. Roselle IL 60172	INSURER A : National Union Fire Insurance Company of Pittsburg		19445
	INSURER B : Navigators Specialty Insurance Company		36056
	INSURER C : Navigators Insurance Company		42307
	INSURER D :		
	INSURER E :		
INSURER F :			

COVERAGES **CERTIFICATE NUMBER:** 992235530 **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	
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Pollution Legal Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:			CH22NP3Z03944IC	3/1/2022	3/1/2023	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 25,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
							Pollution Legal Liab	\$ 1,000,000
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			FA19NCP02119202	3/1/2022	3/1/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			CH22NP3Z03944IC	3/1/2022	3/1/2023	EACH OCCURRENCE	\$ 10,000,000
							AGGREGATE	\$ 10,000,000
								\$
A	<input checked="" type="checkbox"/> 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	WC012-05-6817 WC012-05-6818	3/1/2022 3/1/2022	3/1/2023 3/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Pollution Legal Liability includes coverage for Third Party On-site, Third Party Off-site, Hostile Fire and Building Equipment, Products Pollution, Contractors Pollution and Transportation Cargo.
PINELLAS COUNTY BOARD OF COUNTY COMMISSIONERS ARE INCLUDED AS ADDITIONAL INSURED BUT ONLY WITH RESPECT TO LIABILITY ARISING OUT OF SERVICES OR OPERATIONS AGREED TO BE PERFORMED BY THE INSURED, SUBJECT TO ACTUAL INSURANCE POLICY, TERMS AND CONDITIONS. WAIVER OF SUBROGATION IN FAVOR OF THE ADDITIONAL INSURED UNDER THE GENERAL LIABILITY COVERAGES.

CERTIFICATE HOLDER

PINELLAS COUNTY
 BOARD OF COUNTY COMMISSIONERS ANNEX
 BUILDING - 6T
 CLEARWATER FL 33756

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

© 1988-2015 ACORD CORPORATION. All rights reserved.

SECTION D – SPECIFICATIONS

SECTION D – CONTRACTOR REFERENCES

THE FOLLOWING INFORMATION IS REQUIRED IN ORDER THAT YOUR PROPOSAL MAY BE REVIEWED AND PROPERLY EVALUATED.

COMPANY NAME: Clarke Mosquito Control Products, Inc.

LENGTH OF TIME COMPANY HAS BEEN IN BUSINESS: 75+ years

BUSINESS ADDRESS: 3036 Michigan Ave, Kissimmee, FL 34744

HOW LONG IN PRESENT LOCATION: 23 years

TELEPHONE NUMBER: 407-944-0520

FAX NUMBER: 407-944-0709

TOTAL NUMBER OF CURRENT EMPLOYEES: 175 FULL TIME 130 PART TIME

NUMBER OF EMPLOYEES YOU PLAN TO USE TO SERVICE THIS CONTRACT: Up to 25

All references will be contacted by a County Designee via email, fax or phone call to obtain answers to questions, as applicable before an evaluation decision is made.

Bidders must have experience in work of the same or similar nature and must provide references that will satisfy the County. Proposer must furnish a reference list of at least four (4) customers for whom they have performed similar services.

EITHER LOCAL COMMERCIAL OR GOVERNMENTAL REFERENCE(S) (PINELLAS COUNTY GOVERNMENT REFERENCES WILL NOT BE ACCEPTED) THAT YOU HAVE PREVIOUSLY PERFORMED SIMILAR CONTRACT SERVICES FOR:

1.	2.
COMPANY: Pasco County Mosquito Control	COMPANY: Citrus County Mosquito Control
ADDRESS: 2308 Marathon Rd, Odessa, FL 33556	ADDRESS: 968 North Lecanto Hwy, Lecanto, FL 34461
TELEPHONE/FAX: 727-376-4568	TELEPHONE/FAX: 352-527-7478
CONTACT: Adriane Rogers	CONTACT: George Deskins
CONTACT EMAIL: arogers@pascomosquito.org	CONTACT EMAIL: gedskins@citrusmosquito.org
COMPANY EMAIL ADDRESS:	COMPANY EMAIL ADDRESS:
3.	4.
COMPANY: Lee County Mosquito Control District	COMPANY: Manatee County Mosquito Control
ADDRESS: 15191 Homestead Road, Lehigh Acres, FL 33971	ADDRESS: 2317 2nd Ave West, Palmetto, FL 34221
TELEPHONE/FAX: 239-694-2174	TELEPHONE/FAX: 941-722-3720
CONTACT: David Hoel	CONTACT: Chris Lesser
CONTACT EMAIL: hoel@lcmcd.org	CONTACT EMAIL: christopher.lessner@manateemosquito.com
COMPANY EMAIL ADDRESS:	COMPANY EMAIL ADDRESS:

SECTION F – BID SUMMARY

SECTION F – BID SUMMARY

See Attachment Titled Section F Bid Submittal and Summary (Excel). Pricing must be submitted on Section F Bid Submittal and Summary.

DELIVERY 24hrs - 5 days DAYS AFTER RECEIPT OF ORDER

An award may not be issued without proof that your firm is registered with the Florida Division of Corporations, as per Florida Statute §607.1501 www.flsenate.gov/Laws/Statutes/2011/607.1501.

A foreign corporation (foreign to the State of Florida) may not transact business in this state until it obtains a certificate of authority from the Department of State. Please visit dos.myflorida.com/sunbiz/ for this information on how to become registered.

Clarke Mosquito Control Products, Inc.

Company Name

ELECTRONIC PAYMENT (EPAYABLES)

ELECTRONIC PAYMENT (EPAYABLES)

The Board of County Commissioners (County) is offering faster payments. The County would prefer to make payment using credit card through the ePayables system. See above.

Would your company accept to participate in the ePayables credit card program?

Yes No

For more information about ePayables credit card program please visit Purchasing Department website www.pinellascounty.org/purchase/

Company Name

Clarke Mosquito Control Products, Inc.

Signature



Printed Signature

Robert Santana

Phone Number

407-944-0520

Email

accountsreceivable@clarke.com

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.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Clarke Mosquito Control Products, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
675 Sidwell Court

6 City, state, and ZIP code
St. Charles, IL 60174

7 List account number(s) here (optional)

Requester's name and address (optional)

See Specific Instructions on page 3.

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

3	6	-	3	6	7	2	4	3	8
---	---	---	---	---	---	---	---	---	---

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 ▶ *Carrie Petian* Date ▶ *2022*

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.

State of Florida

Department of State

I certify from the records of this office that CLARKE MOSQUITO CONTROL PRODUCTS, INC. is an Illinois corporation authorized to transact business in the State of Florida, qualified on August 19, 1992.

The document number of this corporation is P40110.

I further certify that said corporation has paid all fees due this office through December 31, 2022, that its most recent annual report/uniform business report was filed on January 3, 2022, and that its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

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



Randy R. ...
Secretary of State

Tracking Number: 6104676081CU

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

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

SECTION G - ADDENDUM

SECTION G - ADDENDUM

PLEASE ACKNOWLEDGE RECEIPT OF ADDENDA FOR THIS SOLICITATION BY SIGNING AND DATING BELOW:

ADDENDA NO.	SIGNATURE/PRINTED NAME	DATE RECEIVED
1	<i>R. Santana</i> / Robert Santana	5/24/22

Note: Prior to submitting the response to this solicitation, it is the responsibility of the firm submitting a response to confirm if any addenda have been issued. If such document(s) have been issued, acknowledge receipt by signature and date in section above. Failure to do so may result in response being considered non-responsive or result in lowering the rating of a firm's proposal.

Information regarding addenda issued is available on the Pinellas ePro website, www.ebids.pinellas.gov/bsol, listed under the bid attachments.

APPENDIX 1 – E-VERIFY AFFIDAVIT

APPENDIX 1 – E-VERIFY AFFIDAVIT

I hereby certify that Clarke Mosquito Control Products, Inc. [insert contractor company name] does not employ, contract with, or subcontract with an unauthorized alien, and is otherwise in full compliance with Section 448.095, Florida Statutes.

All employees hired on or after January 1, 2021 have had their work authorization status verified through the E-Verify system.

A true and correct copy of Clarke Mosquito Control Products, Inc. [insert contractor company name] proof of registration in the E-Verify system is attached to this Affidavit.

Signature: R. Santana

Print Name: Robert Santana

Date: 5/25/22

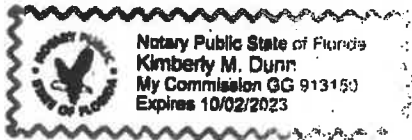
Federal Work Authorization User Identification No.: 036367243

Name of Pinellas County Contract and Contract No.: Mosquito Abatement Products 22-0466-B

STATE OF FLORIDA COUNTY OF Osceola

The foregoing instrument was acknowledged before me by means of 1) physical presence ___ or 2) online notarization X, this 5/25/22 (date) by Robert Santana, Regional Sales Lead (name of officer or agent, title of officer or agent) of Clarke Mosquito Control Products, Inc. (name of contractor company acknowledging), a Illinois (state or place of incorporation) corporation, on behalf of the corporation. He/she is personally known to me or has produced _____ (type of identification) as identification.

[Notary Seal]



Notary Public: Kimberly M. Dunn

Name typed, printed, or stamped: Kimberly M. Dunn

My Commission Expires: 10/2/23

Company Information

Company Name
Clarke Mosquito Control
Products, Inc.

Company ID Number
212520
DUNS Number
--

Doing Business As (DBA) Name
--

Physical Location

Address 1
675 Sidwell Court

Address 2
--

City
St Charles

State
IL

Zip Code
60174

County
KANE

Mailing Address

Address 1
--

Address 2
--

City
--

State
--

Zip Code
--

Additional Information

Employer Identification Number
036367243

Administrator
--

Total Number of Employees
20 to 99

Parent Organization
--

Organization Designation

Employer Category
None of these categories
apply

[View / Edit](#)

NAICS Code
325 - CHEMICAL
MANUFACTURING

[View / Edit](#)

Total Hiring Sites
1

[View / Edit](#)

Total Points of Contact
2

[View / Edit](#)

[View Original MOU Template](#)

[View MOU](#)



**THE E-VERIFY
MEMORANDUM OF UNDERSTANDING
FOR EMPLOYERS**

**ARTICLE I
PURPOSE AND AUTHORITY**

The parties to this agreement are the Department of Homeland Security (DHS) and the Clarke Mosquito Control Products, Inc. (Employer). The purpose of this agreement is to set forth terms and conditions which the Employer will follow while participating in E-Verify.

E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of Form I-9, Employment Eligibility Verification (Form I-9). This Memorandum of Understanding (MOU) explains certain features of the E-Verify program and describes specific responsibilities of the Employer, the Social Security Administration (SSA), and DHS.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). The Federal Acquisition Regulation (FAR) Subpart 22.18, "Employment Eligibility Verification" and Executive Order 12989, as amended, provide authority for Federal contractors and subcontractors (Federal contractor) to use E-Verify to verify the employment eligibility of certain employees working on Federal contracts.

**ARTICLE II
RESPONSIBILITIES**

A. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the following notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system:
 - a. Notice of E-Verify Participation
 - b. Notice of Right to Work
2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted about E-Verify. The Employer also agrees to keep such information current by providing updated information to SSA and DHS whenever the representatives' contact information changes.
3. The Employer agrees to grant E-Verify access only to current employees who need E-Verify access. Employers must promptly terminate an employee's E-Verify access if the employer is separated from the company or no longer needs access to E-Verify.

Company ID Number: 212520

4. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.
 5. The Employer agrees that any Employer Representative who will create E-Verify cases will complete the E-Verify Tutorial before that individual creates any cases.
 - a. The Employer agrees that all Employer representatives will take the refresher tutorials when prompted by E-Verify in order to continue using E-Verify. Failure to complete a refresher tutorial will prevent the Employer Representative from continued use of E-Verify.
 6. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:
 - a. If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.
 - b. If an employee presents a DHS Form I-551 (Permanent Resident Card), Form I-766 (Employment Authorization Document), or U.S. Passport or Passport Card to complete Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The Employer will use the photocopy to verify the photo and to assist DHS with its review of photo mismatches that employees contest. DHS may in the future designate other documents that activate the photo screening tool.
- Note: Subject only to the exceptions noted previously in this paragraph, employees still retain the right to present any List A, or List B and List C, document(s) to complete the Form I-9.
7. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.
 8. The Employer agrees that, although it participates in E-Verify, the Employer has a responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures.
 - a. The following modified requirements are the only exceptions to an Employer's obligation to not employ unauthorized workers and comply with the anti-discrimination provision of the INA: (1) List B identity documents must have photos, as described in paragraph 6 above; (2) When an Employer confirms the identity and employment eligibility of newly hired employee using E-Verify procedures, the Employer establishes a rebuttable presumption that it has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of that employee; (3) If the Employer receives a final nonconfirmation for an employee, but continues to employ that person, the Employer must notify DHS and the Employer is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) If the Employer continues to employ an employee after receiving a final nonconfirmation, then the Employer is subject to a rebuttable presumption that it has knowingly

employed an unauthorized alien in violation of section 274A(a)(1)(A); and (5) no E-Verify participant is civilly or criminally liable under any law for any action taken in good faith based on information provided through the E-Verify.

b. DHS reserves the right to conduct Form I-9 compliance inspections, as well as any other enforcement or compliance activity authorized by law, including site visits, to ensure proper use of E-Verify.

9. The Employer is strictly prohibited from creating an E-Verify case before the employee has been hired, meaning that a firm offer of employment was extended and accepted and Form I-9 was completed. The Employer agrees to create an E-Verify case for new employees within three Employer business days after each employee has been hired (after both Sections 1 and 2 of Form I-9 have been completed), and to complete as many steps of the E-Verify process as are necessary according to the E-Verify User Manual. If E-Verify is temporarily unavailable, the three-day time period will be extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability.

10. The Employer agrees not to use E-Verify for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use that this MOU or the E-Verify User Manual does not authorize.

11. The Employer must use E-Verify for all new employees. The Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. Employers who are Federal contractors may qualify for exceptions to this requirement as described in Article II.B of this MOU.

12. The Employer agrees to follow appropriate procedures (see Article III below) regarding tentative nonconfirmations. The Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify case. The Employer agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer agrees to provide written referral instructions to employees and instruct affected employees to bring the English copy of the letter to the SSA. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending. Further, when employees contest a tentative nonconfirmation based upon a photo mismatch, the Employer must take additional steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

13. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo mismatch, does not establish, and should not be interpreted as, evidence that the employee is not work authorized. In any of such cases, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status

(including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, withholding pay, refusing to assign the employee to a Federal contract or other assignment, or otherwise assuming that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo mismatch or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 (customer service) or 1-888-897-7781 (worker hotline).

14. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA as applicable by not discriminating unlawfully against any individual in hiring, firing, employment eligibility verification, or recruitment or referral practices because of his or her national origin or citizenship status, or by committing discriminatory documentary practices. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the immigration-related unfair employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

15. The Employer agrees that it will use the information it receives from E-Verify only to confirm the employment eligibility of employees as authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords), to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

16. The Employer agrees to notify DHS immediately in the event of a breach of personal information. Breaches are defined as loss of control or unauthorized access to E-Verify personal data. All suspected or confirmed breaches should be reported by calling 1-888-464-4218 or via email at E-Verify@dhs.gov. Please use "Privacy Incident – Password" in the subject line of your email when sending a breach report to E-Verify.

17. The Employer acknowledges that the information it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)). Any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

18. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, which includes permitting DHS, SSA, their contractors and other agents, upon

Company ID Number: 212520

reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a prompt and accurate manner to DHS requests for information relating to their participation in E-Verify.

19. The Employer shall not make any false or unauthorized claims or references about its participation in E-Verify on its website, in advertising materials, or other media. The Employer shall not describe its services as federally-approved, federally-certified, or federally-recognized, or use language with a similar intent on its website or other materials provided to the public. Entering into this MOU does not mean that E-Verify endorses or authorizes your E-Verify services and any claim to that effect is false.

20. The Employer shall not state in its website or other public documents that any language used therein has been provided or approved by DHS, USCIS or the Verification Division, without first obtaining the prior written consent of DHS.

21. The Employer agrees that E-Verify trademarks and logos may be used only under license by DHS/USCIS (see [M-795 \(Web\)](#)) and, other than pursuant to the specific terms of such license, may not be used in any manner that might imply that the Employer's services, products, websites, or publications are sponsored by, endorsed by, licensed by, or affiliated with DHS, USCIS, or E-Verify.

22. The Employer understands that if it uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its participation in E-Verify according to this MOU.

B. RESPONSIBILITIES OF FEDERAL CONTRACTORS

1. If the Employer is a Federal contractor with the FAR E-Verify clause subject to the employment verification terms in Subpart 22.18 of the FAR, it will become familiar with and comply with the most current version of the E-Verify User Manual for Federal Contractors as well as the E-Verify Supplemental Guide for Federal Contractors.

2. In addition to the responsibilities of every employer outlined in this MOU, the Employer understands that if it is a Federal contractor subject to the employment verification terms in Subpart 22.18 of the FAR it must verify the employment eligibility of any "employee assigned to the contract" (as defined in FAR 22.1801). Once an employee has been verified through E-Verify by the Employer, the Employer may not create a second case for the employee through E-Verify.

a. An Employer that is not enrolled in E-Verify as a Federal contractor at the time of a contract award must enroll as a Federal contractor in the E-Verify program within 30 calendar days of contract award and, within 90 days of enrollment, begin to verify employment eligibility of new hires using E-Verify. The Employer must verify those employees who are working in the United States, whether or not they are assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within three business days after the hire date. Once enrolled in E-Verify as a Federal contractor, the Employer must begin verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

b. Employers enrolled in E-Verify as a Federal contractor for 90 days or more at the time of a contract award must use E-Verify to begin verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within three business days after the date of hire. If the Employer is enrolled in E-Verify as a Federal contractor for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within three business days after the date of hire. An Employer enrolled as a Federal contractor in E-Verify must begin verification of each employee assigned to the contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.

c. Federal contractors that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), state or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency under a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. Employers in this category must begin verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

d. Upon enrollment, Employers who are Federal contractors may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only those employees assigned to a covered Federal contract. After enrollment, Employers must elect to verify existing staff following DHS procedures and begin E-Verify verification of all existing employees within 180 days after the election.

e. The Employer may use a previously completed Form I-9 as the basis for creating an E-Verify case for an employee assigned to a contract as long as:

- i. That Form I-9 is complete (including the SSN) and complies with Article II.A.6,
- ii. The employee's work authorization has not expired, and
- iii. The Employer has reviewed the Form I-9 information either in person or in communications with the employee to ensure that the employee's Section 1, Form I-9 attestation has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen).

f. The Employer shall complete a new Form I-9 consistent with Article II.A.6 or update the previous Form I-9 to provide the necessary information if:

- i. The Employer cannot determine that Form I-9 complies with Article II.A.6,
- ii. The employee's basis for work authorization as attested in Section 1 has expired or changed, or
- iii. The Form I-9 contains no SSN or is otherwise incomplete.

Note: If Section 1 of Form I-9 is otherwise valid and up-to-date and the form otherwise complies with

Company ID Number: 212520

Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired after completing Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.A.5, subject to any additional or superseding instructions that may be provided on this subject in the E-Verify User Manual.

g. The Employer agrees not to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU or to authorize verification of any existing employee by any Employer that is not a Federal contractor based on this Article.

3. The Employer understands that if it is a Federal contractor, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.

C. RESPONSIBILITIES OF SSA

1. SSA agrees to allow DHS to compare data provided by the Employer against SSA's database. SSA sends DHS confirmation that the data sent either matches or does not match the information in SSA's database.

2. SSA agrees to safeguard the information the Employer provides through E-Verify procedures. SSA also agrees to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security numbers or responsible for evaluation of E-Verify or such other persons or entities who may be authorized by SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).

3. SSA agrees to provide case results from its database within three Federal Government work days of the initial inquiry. E-Verify provides the information to the Employer.

4. SSA agrees to update SSA records as necessary if the employee who contests the SSA tentative nonconfirmation visits an SSA field office and provides the required evidence. If the employee visits an SSA field office within the eight Federal Government work days from the date of referral to SSA, SSA agrees to update SSA records, if appropriate, within the eight-day period unless SSA determines that more than eight days may be necessary. In such cases, SSA will provide additional instructions to the employee. If the employee does not visit SSA in the time allowed, E-Verify may provide a final nonconfirmation to the employer.

Note: If an Employer experiences technical problems, or has a policy question, the employer should contact E-Verify at 1-888-464-4218.

D. RESPONSIBILITIES OF DHS

1. DHS agrees to provide the Employer with selected data from DHS databases to enable the Employer to conduct, to the extent authorized by this MOU:

a. Automated verification checks on alien employees by electronic means, and

- b. Photo verification checks (when available) on employees.
2. DHS agrees to assist the Employer with operational problems associated with the Employer's participation in E-Verify. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.
3. DHS agrees to provide to the Employer with access to E-Verify training materials as well as an E-Verify User Manual that contain instructions on E-Verify policies, procedures, and requirements for both SSA and DHS, including restrictions on the use of E-Verify.
4. DHS agrees to train Employers on all important changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual. Even without changes to E-Verify, DHS reserves the right to require employers to take mandatory refresher tutorials.
5. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in E-Verify. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.
6. DHS agrees to issue each of the Employer's E-Verify users a unique user identification number and password that permits them to log in to E-Verify.
7. DHS agrees to safeguard the information the Employer provides, and to limit access to such information to individuals responsible for the verification process, for evaluation of E-Verify, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security numbers and employment eligibility, to enforce the INA and Federal criminal laws, and to administer Federal contracting requirements.
8. DHS agrees to provide a means of automated verification that provides (in conjunction with SSA verification procedures) confirmation or tentative nonconfirmation of employees' employment eligibility within three Federal Government work days of the initial inquiry.
9. DHS agrees to provide a means of secondary verification (including updating DHS records) for employees who contest DHS tentative nonconfirmations and photo mismatch tentative nonconfirmations. This provides final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

ARTICLE III

REFERRAL OF INDIVIDUALS TO SSA AND DHS

A. REFERRAL TO SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the notice as directed by E-Verify. The Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify

case. The Employer also agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer agrees to provide written referral instructions to employees and instruct affected employees to bring the English copy of the letter to the SSA. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending.

2. The Employer agrees to obtain the employee's response about whether he or she will contest the tentative nonconfirmation as soon as possible after the Employer receives the tentative nonconfirmation. Only the employee may determine whether he or she will contest the tentative nonconfirmation.

3. After a tentative nonconfirmation, the Employer will refer employees to SSA field offices only as directed by E-Verify. The Employer must record the case verification number, review the employee information submitted to E-Verify to identify any errors, and find out whether the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security number, or any other corrected employee information that SSA requests, to SSA for verification again if this review indicates a need to do so.

4. The Employer will instruct the employee to visit an SSA office within eight Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary.

5. While waiting for case results, the Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees not to ask the employee to obtain a printout from the Social Security Administration number database (the Numident) or other written verification of the SSN from the SSA.

B. REFERRAL TO DHS

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify case. The Employer also agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending.

2. The Employer agrees to obtain the employee's response about whether he or she will contest the tentative nonconfirmation as soon as possible after the Employer receives the tentative nonconfirmation. Only the employee may determine whether he or she will contest the tentative nonconfirmation.

3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will instruct the

Company ID Number: 212520

employee to contact DHS through its toll-free hotline (as found on the referral letter) within eight Federal Government work days.

5. If the Employer finds a photo mismatch, the Employer must provide the photo mismatch tentative nonconfirmation notice and follow the instructions outlined in paragraph 1 of this section for tentative nonconfirmations, generally.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo mismatch, the Employer will send a copy of the employee's Form I-551, Form I-766, U.S. Passport, or passport card to DHS for review by:

- a. Scanning and uploading the document, or
- b. Sending a photocopy of the document by express mail (furnished and paid for by the employer).

7. The Employer understands that if it cannot determine whether there is a photo match/mismatch, the Employer must forward the employee's documentation to DHS as described in the preceding paragraph. The Employer agrees to resolve the case as specified by the DHS representative who will determine the photo match or mismatch.

8. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary.

9. While waiting for case results, the Employer agrees to check the E-Verify system regularly for case updates.

ARTICLE IV SERVICE PROVISIONS

A. NO SERVICE FEES

1. SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access E-Verify, an Employer will need a personal computer with Internet access.

ARTICLE V MODIFICATION AND TERMINATION

A. MODIFICATION

1. This MOU is effective upon the signature of all parties and shall continue in effect for as long as the SSA and DHS operates the E-Verify program unless modified in writing by the mutual consent of all parties.

2. Any and all E-Verify system enhancements by DHS or SSA, including but not limited to E-Verify checking against additional data sources and instituting new verification policies or procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes.

B. TERMINATION

1. The Employer may terminate this MOU and its participation in E-Verify at any time upon 30 days prior written notice to the other parties.
2. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU, and thereby the Employer's participation in E-Verify, with or without notice at any time if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established E-Verify procedures and/or legal requirements. The Employer understands that if it is a Federal contractor, termination of this MOU by any party for any reason may negatively affect the performance of its contractual responsibilities. Similarly, the Employer understands that if it is in a state where E-Verify is mandatory, termination of this by any party MOU may negatively affect the Employer's business.
3. An Employer that is a Federal contractor may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such cases, the Federal contractor must provide written notice to DHS. If an Employer that is a Federal contractor fails to provide such notice, then that Employer will remain an E-Verify participant, will remain bound by the terms of this MOU that apply to non-Federal contractor participants, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.
4. The Employer agrees that E-Verify is not liable for any losses, financial or otherwise, if the Employer is terminated from E-Verify.

ARTICLE VI PARTIES

- A. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.
- B. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.
- C. The Employer may not assign, directly or indirectly, whether by operation of law, change of control or merger, all or any part of its rights or obligations under this MOU without the prior written consent of DHS, which consent shall not be unreasonably withheld or delayed. Any attempt to sublicense, assign, or transfer any of the rights, duties, or obligations herein is void.
- D. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.
- E. The Employer understands that its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to,

Company ID Number: 212520

Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

F. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively. The Employer understands that any inaccurate statement, representation, data or other information provided to DHS may subject the Employer, its subcontractors, its employees, or its representatives to: (1) prosecution for false statements pursuant to 18 U.S.C. 1001 and/or; (2) immediate termination of its MOU and/or; (3) possible debarment or suspension.

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

To be accepted as an E-Verify participant, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 1-888-464-4218.

Company ID Number: 212520

Approved by:

Employer Clarke Mosquito Control Products, Inc.	
Name (Please Type or Print) Reiter Julie	Title
Signature Electronically Signed	Date 05/11/2009
Department of Homeland Security – Verification Division	
Name (Please Type or Print) USCIS Verification Division	Title
Signature Electronically Signed	Date 05/11/2009

Company ID Number: 212520

Information Required for the E-Verify Program

Information relating to your Company:

Company Name	Clarke Mosquito Control Products, Inc.
Company Facility Address	675 Sidwell Court St Charles, IL 60174
Company Alternate Address	
County or Parish	KANE
Employer Identification Number	036367243
North American Industry Classification Systems Code	325
Parent Company	
Number of Employees	20 to 99
Number of Sites Verified for	1

Company ID Number: 212520

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

ILLINOIS

1 site(s)

Company ID Number: 212520

Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name Kim Schulke
Phone Number (630) 671 - 3031
Fax Number
Email Address kschulke@clarke.com

Name Reiter Julie
Phone Number (630) 671 - 3148
Fax Number
Email Address jreiter@clarke.com

Page intentionally left blank

Wellmark International DBA



1501 E. Woodfield Road, Suite 200W
Schaumburg, IL 60173
847 330 5300

November 4, 2021

To: Altosid®, Zenivex®, Duplex®, Strike®, Perm-X® and Pyronyl® Purchasers

Wellmark International (DBA Central Life Sciences) is the sole manufacturer of above referenced mosquito control product brands and markets direct to all U.S. end use customers via Agency Agreement or directly through authorized distribution. The Agency Agreement and distribution agreements we have in place for 2021 & 2022 allows Central Life Sciences to sell to end-use public agencies through 6 authorized Agent/distributor companies.

During calendar year 2021 & 2022, the following companies are authorized Central Life Sciences Agent/distributors allowed to advertise, promote, solicit, and sell ALTOSID®, ZENIVEX®, DUPLEX®, Strike®, PERM-X and PYRONYL products.

- Clarke
- Target Specialty Products
- Vesperis
- Van Diest Supply Company
- Helena
- Winfield

Agent/Distributor specific authorizations:

- *Clarke, Target Specialty Products, Vesperis and Van Diest are authorized to sell Altosid®, Zenivex®, Duplex®, Strike®, Perm-X® and Pyronyl® in the US.*
- *Helena and Winfield are only authorized to sell Perm-X® and Pyronyl® in the US.*

All inquiries and/or purchases of ALTOSID®, ZENIVEX®, DUPLEX®, STRIKE®, PERM-X® or PYRONYL® products can be made through the above cited companies with footnoted specific authorizations.

Regards,

A handwritten signature in black ink, appearing to read "John Neberz".

John Neberz
Business Manager
847-330-5385
JNeberz@Central.com

JN/smc enclosure



675 Sidwell Court
St. Charles, IL 60174
630.894.2000 P
630.443.3070 F
www.clarke.com

January 3, 2022

To Whom It May Concern:

This letter serves to confirm that **Cocobear®** larvicidal oil is exclusively manufactured by Clarke, labeled for Public Health mosquito control use. There is no like competitive product source in the U.S.

Please let us know if we can be of further assistance.

Cordially,

Miranda Schield
Director, Marketing



December 16, 2021

Dear Sir or Madam:

This letter serves as confirmation that Clarke Mosquito Control is MGK's exclusive distributor for the following products in the United States for the year 2022:

AquaDuet™	EPA Reg. No. 1021-2562-8329
DUET™	EPA Reg. No. 1021-1795-8329
DUET™ HD	EPA Reg. No. 8329-105

These products contain proprietary active ingredient(s) and unique formulation technology that give the products superior performance. We have a long history of working with Clarke in this market. We find this arrangement gives us the best chance to reach customers with the support necessary to serve this market. Please let me know should you need further details.

Sincerely,

A handwritten signature in blue ink that reads "Merris Greiber".

Merris Greiber
Sr. Director of Marketing



Agriculture Division of DowDuPont™

Corteva Agrisciences
Agriculture Division of DowDuPont
9330 Zionsville Road Indianapolis, IN 46268 USA Tel 317 337 4337

www.corteva.com

December 8, 2021

To whom it may concern,

Please allow this letter to confirm that Corteva has granted Clarke Mosquito Control Products, Inc. exclusive rights to market its active ingredient spinosad for mosquito larval control products in the US territories, Caribbean and Cayman Islands for 2022. Corteva understands that spinosad is utilized in Clarke's Natular G, Natular G30, Natular G30 WSP, Natular T30, Natular XRT, Natular 2EC, Natular SC, and Natular DT products.

Please let me know if you need further details.

Yours sincerely,

A handwritten signature in black ink that reads "Lisa Bostock".

Lisa Bostock
Global Business Development Leader
Corteva Agrisciences
lisa.bostock@corteva.com
317-670-4408



December 16, 2021

Dear Sir or Madam:

This letter serves as confirmation that MGK has granted Clarke Mosquito Control an exclusive right to formulate and distribute its own products containing MGK's PyGanic® compound (EPA Reg. No. 1021-1805) in the United States' vector control market for the year **2022**. The following is one example of a Clarke product containing MGK's PyGanic compound:

MERUS™ 3.0 EPA Reg. No. 8329-108

This product contains a proprietary active ingredient and unique formulation technology that gives the product superior performance. We have a long history of working with Clarke in this market. We find this arrangement gives us the best chance to reach customers with the support necessary to serve this market. Please let me know should you need further details.

Sincerely,

A handwritten signature in blue ink that reads "Merris Greiber". The signature is written in a cursive, flowing style.

Merris Greiber
Sr. Director of Marketing

**Exhibit A - PRODUCT LIST
MOSQUITO ABATEMENT
PRODUCTS Bid No. 22-0466-B**

PRODUCT 1	Annual Estimate
1,2-Dibromo-2,2-dichloroethyl dimethyl phosphate <i>Naled</i> 87.4% (Dibrom® concentrate)	30 gallons
Product No.: 0000003962	Manufacturer: AMVAC
EPA Registration: 5481-480	Packaging: 30-gallon drum
A professional strength organophosphate insecticide used to control adult mosquito populations and is solely used for widespread emergency outbreaks. Applied by aerial application.	
PRODUCT 2	Annual Estimate
<i>Bacillus thuringiensis</i> subspecies <i>israelensis</i> <i>Bti</i> (Bactimos Briquet)	1,000 Briquettes
Product No.:	Manufacturer: Summit Chemical
EPA Registration: 6218-47	Typical Packaging: Case of 100 Briquettes
A professional strength product that is a floating sustained-release mosquito larvicide for long-term control. Used in mosquito breeding areas such as standing pools of water, water collection areas, applied by conventional ground operations or aerial application.	
PRODUCT 3	Annual Estimate
<u>Piperonyl butoxide and permethrin (Biomist® 31+66 ULV)</u>	550 gallons
Product No.: 11108	Manufacturer: Clarke Mosquito Control Products, Inc.
EPA Registration: 8329-43	Packaging: 275-gallon reusable tote
A professional strength adulticide used to control adult mosquitoes. Applied at various outdoor settings by handheld and truck mounted foggers.	
PRODUCT 4	Annual Estimate
White Mineral Oil (10% w/w) (CocoBear™)	300 gallons
Product No.:	Manufacturer: Clarke Mosquito Control Products, Inc.
EPA Registration: 8329-93	Packaging: 2.5 Gallon
A larvicidal oil used to control mosquito larvae and pupae. Applied to ditch areas, drainage areas, standing pools of water, marshes, swamps, settling ponds, typically by conventional ground application and aerial application.	
PRODUCT 5	Annual Estimate
<i>BVA2 Mosquito Larvicide Oil</i>	300 gallons
Product No.:	Manufacturer: BV Associates, Inc.
EPA Registration:	2.5-gallon jug
A larvicidal oil used to control mosquito larvae and pupae. Applied to ditch areas, drainage areas, standing pools of water, marshes, swamps, settling ponds, typically by conventional ground application and aerial application.	

Exhibit A - PRODUCT LIST
 MOSQUITO ABATEMENT PRODUCTS
 Bid No. 22-0466-B

PRODUCT 6	Annual Estimate
Piperonyl butoxide, phenothrin, prallethrin (Duet®)	165 gallons
Product No.: 11723	Manufacturer: Clarke Mosquito Control Products, Inc
EPA Registration: 1021-1795-8329	Packaging: 275-gallon reusable tote (liquid form)
A professional strength dual action adulticide used to eliminate adult mosquitoes. Applied in various outdoor settings using handheld and truck mounted foggers.	
PRODUCT 7	Annual Estimate
Spinosad (mix of spinosyn A and spinosyn D) (Natular™ G)	15,000 lbs.
Product No.:	Manufacturer: Clarke Mosquito Control Products, Inc
EPA Registration: 8329-80	Packaging: 40-pound bag
A professional strength product used to eliminate mosquito and midge larvae. Applied to ditch areas, standing pools of water, stormwater ponds, intertidal water and salt marsh areas, typically by conventional ground application and aerial application.	
PRODUCT 8	Annual Estimate
Spinosad (mix of spinosyn A and spinosyn D) (Natular™ G30) (Extended Release Granule)	15,000 lbs.
Product No.:	Manufacturer: Clarke Mosquito Control Products, Inc
EPA Registration: 8329-83	Packaging: 40-pound bag
A professional strength product used to eliminate mosquito and midge larvae. Applied to ditch areas, standing pools of water, stormwater ponds, intertidal water and salt marsh areas, typically by conventional ground application and aerial application.	
PRODUCT 9	Annual Estimate
Spinosad (mix of spinosyn A & spinosyn D) (Natular™ T30)	8,000 tablets
Product No.: 11840	Manufacturer: Clarke Mosquito Control Products, Inc
EPA Registration: 8329-85	Typical Packaging: Case of 400 tablets
A professional strength product used to eliminate mosquito larvae. Applied to ditch areas, standing pools, stormwater ponds, tidal water and salt marsh areas, typically by hand.	
PRODUCT 10	Annual Estimate
Spinosad (mix of spinosyn A & spinosyn D) (Natular™ XRT)	660 tablets
Product No.: 11850	Manufacturer: Clarke Mosquito Control Products, Inc
EPA Registration: 8329-84	Typical Packaging: Case of 220 tablets
A professional strength product used to eliminate mosquito larvae. Applied to ditch areas, standing pools, stormwater ponds, tidal water and salt marsh areas, typically by hand.	

	Annual Estimate
PRODUCT 11 <u>Spinosad (mix of spinosyn A & spinosyn D) (Natular™ DT)</u> Product No.: 11860 EPA Registration: 8329-602	15,200 tablets Manufacturer: Clarke Mosquito Control Products, Inc Typical Packaging: Case 4,000 tablets (16 pouches of 250 each)
A professional strength product used to eliminate and control breeding mosquito larvae. Applied to artificial water holding areas such as unused ornamental ponds, bird baths, old tires, flowerpots, urns, water gardens, floor drains and roof gutters, typically applied by hand.	
PRODUCT 12	Annual Estimate 6,000 lbs.
S-Methoprene 4.25% (MetaLarv® S-PT) Product No.: 05765 EPA Registration: 73049-475	Manufacturer: Valent BioSciences Corporation Packaging: 40-pound bag (30 bags/pallet)
A professional strength growth regulator that prevents mosquito larvae growth into adults used for quick control and residual control at floodwater sites, freshwater swamps, salt and tidal marshes, stormwater ponds and residential areas. Applied by hand and aerial application.	
PRODUCT 13	Annual Estimate 25,000 lbs.
Bacillus thuringiensis subsp israelensis strain AM 65-52 (VectoBac® GS) Product No.: EPA Registration: 73049-10	Manufacturer: Valent BioSciences Corp. Packaging: 40-pound bags
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, tidal water and salt marsh areas, typically applied using conventional ground and aerial equipment.	
PRODUCT 14	Annual Estimate 10 gallons
Bacillus thuringiensis subspecies israelensis strain AM65-52 (VectoBac® 12AS) Product No.:	Manufacturer: Valent BioSciences Corp.
EPA Registration: 275-102	Packaging: 2.5-gallon (10 liter) HDPE plastic jugs, packaged 2 per case
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, woodlands, tidal water and salt marsh areas, typically applied using conventional ground and aerial equipment.	

PRODUCT 15	Annual Estimate
Bacillus thuringiensis subsp israelensis strain AM 65-52 (VectoBac® WDG)	24 lbs.
Product No.: 60215	Manufacturer: Valent BioSciences Corp.
EPA Registration: 73049-56	Packaging: case of 24 single pound containers
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, woodlands, tidal water and salt marsh areas, typically applied using conventional ground and aerial equipment.	
PRODUCT 16	Annual Estimate
Bacillus thuringiensis subspecies israelensis strain AM 65-52 (VectoBac® WDG)	500 lbs. (Twenty 25 lbs. drums)
Product No.: 60215	Manufacturer: Valent BioSciences Corp.
EPA Registration: 73049-56	Packaging: 25-pound drum
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, woodlands, tidal water and salt marsh areas, typically applied using conventional ground equipment.	
PRODUCT 17	Annual Estimate
Bacillus sphaericus Serotype H5a5b strain 2362 (VectoLex® FG)	45,600 lbs. (1,140 forty-lbs. bags)
Product No.: 11549	Manufacturer: Valent BioSciences Corporation
EPA Registration: 73049-20	Packaging: 40-pound bag (granular) (30 bags per pallet)
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, typically applied using conventional ground or aerial application equipment.	
PRODUCT 18	Annual Estimate
Bacillus sphaericus 2362 (strain ABTS-1743) VectoLex® WDG)	500 lbs. (Twenty 25 lbs. drums)
Product No.:	Manufacturer: Valent BioSciences Corporation
EPA Registration: 73049-57	Packaging: 25-pound drum
A professional strength product used to eliminate mosquito larvae. Applied at ditch areas, standing pools, stormwater ponds, woodlands, tidal water and salt marsh areas, typically applied using conventional ground and aerial equipment.	
PRODUCT 19	Annual Estimate
Bacillus sphaericus 2362, serotype H5a5b, strain ABTS 1743 (VectoLex® WSP)	2,400 10-gram packets
Product No.: 05722	Manufacturer: Valent BioSciences Corporation
EPA Registration: 73049-20	Typical Packaging: Case of 800 (10-gram packets) (granular water-soluble
A professional strength product used to eliminate mosquito larvae. Applied at aquatic areas, ditch areas, standing pools, storm drains, retention ponds, by hand.	

PRODUCT 20	Annual Estimate
<i>Bacillus sphaericus</i> 2362, Serotype H5a5b, strain ABTS 1743 2.7%; <i>Bacillus thuringiensis</i> Subsp. <i>israelensis</i> Serotype H-14 Strain AM65-52 4.5% (VectoMax® FG)	30,000 lbs.
Product No.: 05750	Manufacturer: Valent BioSciences Corporation
EPA Registration: 73049-429	Packaging: 40-pound bags (fine granule) (30 bags/pallet)
A professional strength product used to control mixed-brood mosquito larvae used in ditch areas, tidal water, salt marshes, ponds, Applied by hand and aerial application.	
PRODUCT 21	Annual Estimate
Etofenprox 4% (Zenivex E4 RTU)	5 gallons
Product No.:	Manufacturer: Wellmark International
EPA Registration: 2724-807	Packaging: 2.5-gallon jug x 2
A professional strength adulticide used to control adult mosquitoes. Applied at various outdoor settings by handheld and truck mounted foggers.	
PRODUCT 22	Annual Estimate
<i>Bacillus thuringiensis</i> subsp. <i>israelensis</i> , strain AM 65-52 6.07%, methoprene 10% (VectoPrime® FG)	30,000 lbs.
Product No.: 05725	Manufacturer: Valent BioSciences Corporation
EPA Registration: 73409-501	Packaging: 40-pound bags (fine granule) (30 bags/pallet)
A professional strength product used to eliminate and control mosquito larvae used in storm water retention areas and other wetland areas. Applied by ground equipment or aerial application.	
PRODUCT 23	Annual Estimate
<i>Permanone 31-66</i>	550 gallons
Product No.:	Manufacturer: Bayer Environmental Science
EPA Registration: 432-1235	Packaging: 275-gallon tote
Permanone is a pyrethroid based mosquito adulticide.	
PRODUCT 24	Annual Estimate
<i>Fyfanon ULV</i>	275 gallons
Product No.:	Manufacturer: Cheminova, Inc.
EPA Registration: 67760-34	Packaging: 275-gallon tote
Fyfanon is an organophosphate based mosquito adulticide	

PRODUCT 25	Annual Estimate
MERUS® 3.0	275 gallons
Product No.: 05725	Manufacturer: Clarke Mosquito Control Products, Inc.
EPA Registration: 73409-501	Packaging: 275-gallon tote
A professional strength adulticide used to control adult mosquitoes. Applied at various outdoor settings by handheld and truck mounted foggers.	
PRODUCT 26	Annual Estimate
BVA13	10 gallons
Product No.:	Manufacturer: BV Associates, Inc.
EPA Registration: 55206-2	Packaging: 5-gallon jug
Oil required to mix with chemical for delivery in hand foggers	
PRODUCT 27	Annual Estimate
Deltamethrin 2.0%, a Type II pyrethroid. (DeltaGard®)	270 gallons
Product No.: 81015694	Manufacturer: Bayer Environmental Science
EPA Registration: 432-1534	Packaging: 30-gallon returnable container
A professional strength product used to control flying and resting adult mosquitoes in residential, industrial, urban, recreational areas at utility tunnels, sewers, storm drains, catch basins, parks, woodlands, roadsides, swamps, marshes, tidal areas. Typically applied using conventional ground methods.	
PRODUCT 28	Annual Estimate
Methoprene 2.1% (Altosid® XR Briquettes)	660 Briquettes
Product No.:	Manufacturer: Wellmark International
EPA Registration: 2724-421	Typical Packaging: Case of 220 Briquettes
A professional strength sustained-released product to prevent adult mosquito emergency. Applied to areas such as ditches, storm drains, catch basins, pools, tires, swamps and salt marshes by conventional ground method.	
PRODUCT 29	Annual Estimate
Methoprene 8.62% (Altosid® 30-Day Briquettes)	4,800 Briquettes
Product No.:	Manufacturer: Wellmark International
EPA Registration: 2724-375	Typical Packaging: Case of 400 Briquettes
A professional strength sustained-release mosquito growth regulator to prevent adult mosquito emergency. Used in small bodies of water such as storm drains, ditches, waste treatment, pools, tires, swamps and salt marshes by conventional ground method.	

PRODUCT 30	Annual Estimate
<i>Methoprene 1.5% (Altosid® XR-G)</i>	6,000 lbs.
Product No.:	Manufacturer: Wellmark International
EPA Registration: 2724-451	Packaging: 40-pound bags
A professional strength extended residual granular product that prevents adult mosquito emergence. Used in mosquito breeding areas such as standing pools of water, water collection areas, applied by conventional ground operations or aerial application.	
PRODUCT 31	Annual Estimate
<i>Methoprene 4.25% (Zoecon® Altosid® P35 (Altosid® P35))</i>	4,800 lbs.
Product No.:	Manufacturer: Wellmark International
EPA Registration: 89459-95, RF2258 SCR Granules	Packaging: 30 bags of 40 lbs. each (1,200 lbs. Palletized)
A professional strength extended residual granular product that prevents adult mosquito emergence. Used in mosquito breeding areas such as standing pools of water, water collection areas, applied by conventional ground operations or aerial application.	
PRODUCT 32	Annual Estimate
<i>Methoprene .2% (Altosid® SBG II)</i>	48,000 lbs.
Product No.:	Manufacturer: Wellmark International
EPA Registration: 2724-489	Packaging: 40-pound bags (30 bags/pallet)
A professional strength insect growth regulator for applications to single broods of mosquito larvae to prevent adult mosquito emergence. Used in mosquito breeding areas such as standing pools of water, water collection areas, applied by conventional ground operations or aerial application.	

Exhibit B - Value Added Services Checklist
 (NOT be used to determine award) Submit with Section F Bid Submittal & Summary (If applicable)
 MOSQUITO ABATEMENT PRODUCTS
 Bid No. 22-0466-B

VALUE-ADDED SERVICES For all Yes responses, provide a written outline describing services per Section E, Item 4. Bidder should include any historical examples as appropriate, and clearly communicate the specific service, training, Continuing Education Units (CEU's), etc., being offered	WILL PROVIDE (Y / N)
A. Contract Management Staffing	Y
B. Delivery Timeframe	Y
C. Product Safety Training	Y
D. Technical Training	Y
E. Field Product Evaluation	Y
F. Product Samples	Y
G. Technical / Professional Assistance	Y
H. Resistance Testing	Y
I. Off-Site Storage	Y
J. Formulation Verification	Y
K. Complimentary Equipment	Y



May 26, 2022

Pinellas County Board of County Commissioners
400 S. Ft. Harrison Avenue
Annex Building – 6th Floor
Clearwater, FL 33756

Re: ITB22-0466-B, Mosquito Abatement Products – Section E

Thank you for the opportunity to submit a response to ITB22-0466-B, Mosquito Abatement Products. Altosid products are part of an “Agency” pricing distribution agreement. All “agents” must bid the same price for all products and must be approved agents. The goal of this system is to allow the customer to select the agent that is providing the value-added services to the customer and industry.

Clarke Mosquito Control Products would like to request Pinellas County BOCC to consider the following value-added services provided to the County:

- i. **Contract Management:** Pinellas County will have access to subject matter experts in regulatory, product development, equipment optimization, packaging and logistics, and product experts. Pinellas County will be assigned to a direct account manager, a customer care specialist, and a technical field staff member.

Clarke has 160 full time employees dedicated to the vector control industry. At least 25 employees will be involved in providing service to Pinellas County. For this contract, key Clarke personnel from at least the following departments will participate in servicing this contract:

- Sales: Bobby Santana - Regional Sales Lead, Kim Dunn - FL Sales Coordinator, Mike Muldoon – VP of Domestic Sales, Frank Clarke – VP of Key Accounts
- Supply Chain: Mike Gaither – Director of Manufacturing and Supply Chain
- Warehouse: Jeff Larson - Supply Chain Manager, Andrew Gentes – Regional Operations Manager
- Shipping: Bill Gooch- Warehouse Supervisor, Crystal Challacombe - Kissimmee Office Manager
- Research & Development: Yemi Bullen-McClain - Product Development Director
- Technical Support: Derek Drews – Field Science Manager, Kattie Morris – Regional Field Science Supervisor, Victoria Hyczyk – Associate Field Biologist, Madeline Schmitz – Associate Field Biologist

- ii. **Delivery Response:** For the past several years, Clarke has worked closely with the County to provide timely deliveries to ensure smooth, uninterrupted operations. Since Clarke has a warehouse in Kissimmee, FL, we will work with the County staff to inventory certain products for quick delivery. Often, shipments will arrive the next day due to local warehouse. For the past several years, Clarke has been providing custom packaging for Altosid and Natular products that best fits the County’s operation and storage requirements. An example is custom packaged 1,200 lb pallets instead of the standard 1,600 lb pallets. This custom packaging best fits the County’s storage, inventory system and use patterns.
- iii. **Product Safety Training:** A minimum of Clarke’s Annual Workshop is dedicated to safety and regulatory training. Training is approved for 1 x core CEU Credit. Please see Clarke Workshop information for additional information.

As part of our commitment to Pinellas County and industry stewardship, Clarke can provide a customized 4-6 hour product safety training course for all of the Pinellas County Mosquito Control. This course will be offered up to twice per year or as directed by Pinellas County Mosquito Control. The course will provide DACS CEU credits for your staff. The course will include:



- Review of product specific handling requirements
- Product specific safety tips
- Product specific personal protective equipment requirements
- Product specific calibration practice
- Review of general spill containments and clean-up requirements
- Review of product specific spill containment
- Demonstration of spill container procedures
- Detailed review of product labels
- Detailed review of product Material Safety Data Sheets
- Overview of product specific mode of action
- Overview of product specific carrier and delivery systems

iv. **Technical Training:** Clarke has long been the leader in providing ‘Stewardship through Education’. Annually, Clarke provides over 70 educational workshops to mosquito control professionals nationwide. Clarke Mosquito Control is your host for the annual ½ day training workshop. This is helpful for those on your mosquito control staff choosing to continue their education as well as helping them achieve their required CEU credits for their Public Health Pest Control Applicator licenses. Clarke Workshop is approved for a total of 5 CEUs. (4 Public Health and 1 Core CEU). Clarke has provided the below Workshops for Pinellas County:

Pinellas County Workshop Dates	Pinellas County Workshop Dates
9/17/2003	2/20/2013
3/24/2004	3/12/2014
3/23/2005	4/8/2015
4/18/2006	3/15/2016
3/12/2007	3/7/2017
2/21/2008	4/18/2018
3/24/2009	4/17/2019
3/23/2010	3/11/2020
3/10/2011	5/14/2021 (Virtual)
3/15/2012	3/17/2022 (Virtual)

v. **Field Product Evaluation:** Pinellas County will have direct access to our three (3) field biologist located in close proximity to provide product consultation, field trial support, resistance testing, etc. Most recently, Clarke provided staff and equipment for field trial conducted on May 5th, 2021. Clarke has an additional efficacy trial scheduled for May 31st to June 2nd, 2022.

Good product efficacy begins with product and application training. Clarke will provide written protocols for all field product evaluations. Protocols will include input from the manufacturers, input from the County, as well as input from Clarke’s team of scientists in our Global Support and Environmental Services research and development department. A detailed, onsite review by a member of our technical support team will be conducted prior to a product field evaluation. This review will include, but is not limited to:

- Review of protocol
- Review of application equipment
- Calibration of application equipment



- Review of application site
- Unique environmental conditions of the site
- Onsite witness of application
- Assistance of efficacy monitoring
- Assist in and/or provide a written report documenting efficacy

Clarke will provide, via the manufacturer, the original certificate of analysis documenting the potency of the product. In addition, Clarke will, on an as needed basis, send a sample of the product to our Research & Development Diagnostic lab or an independent lab to verify product potency.

- vi. **Product Samples:** Clarke will provide at no cost adequate amounts of each product formulation to calibrate both aerial and ground-based equipment. This is a service we have provided to Pinellas County in the past. As part of our stewardship program, Clarke's technical support staff working together with Pinellas County staff and the Manufacturer's staff will characterize both aerial and ground equipment to meet EPA, industry and FDACS standards. As requested by the County, Clarke will utilize WRK Granule Calibration System to ensure the usable swath and application rate are determined and are consistent. Wellmark staff members, the manufacturer of Altosid, will always be welcome to participate in equipment calibration. The equipment characterization and calibration process is recommended and will be available as needed twice per year or as requested by the County. Clarke Technical Support staff will also be simultaneously training Pinellas staff members on calibration techniques and providing hands on training and assistance throughout the process as requested by the County.
- vii. **Technical/Professional Assistance:** For all awarded products, Pinellas County will have direct access to our three (3) field biologist located in close proximity to provide product consultation, field trial support, resistance testing, etc. Clarke offers Pinellas County the annual on-site calibration and particle testing of equipment to meet state regulations.

Clarke has the only research and development department that is dedicated solely to the Vector Industry. Part of that department includes a mobile technical support team. The mission of the technical support team is to provide professional onsite technical assistance. This assistance includes equipment and application modifications. Clarke has long been an innovator in application equipment performance. One such modification greatly improved the effective swath of the Isoaire Granular application equipment that we utilize on our Bell 47 helicopters. This type of information has been and will continue to be shared with the Pinellas County Mosquito Control staff.

- viii. **Resistance Testing:** To assure proper stewardship of the products supplied by Clarke, we will provide onsite assistance via our Field Science technical support staff. We also will involve the manufacturer and their scientific staff to assist in any resistance testing. Clarke's technical staff will follow a written protocol to monitor any suspected resistance to an active ingredient. Clarke also will, on an as needed basis, provide via our in house diagnostic lab/scientist confirmation tolerance to an active ingredient. Product application verification will be determined by utilizing our WRK granular calibration system to verify application rates. Product application rates will be verified as part of any resistance testing protocol. Water samples from the treated site may be taken to determine the amount of active ingredient present in the site.
- ix. **Off -Site Storage:** In 2021, Clarke acquired a 40,000+ SF warehouse that can provide off-site storage capacity for Pinellas County. Clarke has four (6) offices in the State of Florida. The closest office to Pinellas County, Kissimmee has ample climate-controlled warehouse storage available should the County deem necessary to store products offsite. We also have product warehouses in Arkansas and Illinois to store additional inventory. In addition, Clarke has worked closely with our manufacturers to provide storage options for Pinellas County. One such solution was to provide climate controlled semi-truck trailers onsite at no charge to the County. This type of commitment and value-added service has allowed the County to take advantage of quantity purchase savings.



Additionally, should the County need product on an urgent need basis, Clarke will facilitate a Fed Ex type delivery. In an emergency, Clarke may elect to supply the County from our service business inventory until the manufacturer can provide product (basically borrow product from our service company inventory).

- x. **Formulation Verification:** Clarke will provide a copy of the original certificate of analysis for each lot number for each product delivered. This will be supplied via the manufacturer and on a per request basis. Should there appear to be a potency problem, Clarke will, at no charge to the County, provide product potency testing via our in-house diagnostic lab or an independent laboratory. Certificate of Analysis reports will verify odor, appearance, density, and % of active ingredient.
- xi. **Complimentary Equipment:** In the recent past, as part of high-volume purchases by the County of Clarke manufactured products and or certain Clarke distributed products, Clarke has provided various mosquito control related equipment to the County at no charge. In one such example, Clarke provided a new Isolaire Aerial Granule Spreader for your helicopter. This piece of equipment helped the County expand their larviciding program and deliver a more timely and effective service to the residents of Pinellas County. Recently, Clarke provided a credit/rebate that the County utilized to purchase various mosquito control equipment such as sprayers, backpacks, dippers, etc. Clarke will, from time to time, offer such programs on Clarke manufactured products and certain Clarke distributed products.

The Central Life Sciences Agency Agreement to distribute Altosid products requires that all Authorized Agents bid the required published pricing and that discounts via free equipment are prohibited per the distribution agreement. Central Life Sciences does, from time to time, offer various manufacturers rebate programs. As a value-added service and to help Pinellas to maximize your Central Life Sciences rebates, Clarke will track your purchases and provide the documentation required to submit for your rebate.

- xii. **Annual Droplet Testing:** Clarke offers Pinellas County the annual on-site calibration and particle testing of equipment to meet state regulations.
- xiii. **Rebate Tracking:** Central Life Sciences (manufacturer of Altosid and Duplex formulations) offers an annual rebate program. Clarke will track the County's purchases and provide documentation/receipts/invoices to maximize your rebate. Referenced form is attached.

We hope that you will incorporate these value-added services along with our commitment to customer service when deciding your supplier for Agency or equivalent products. Thank you for your consideration. Please let us know if any other additional information is required.

Best Regards,

Robert "Bobby" Santana
Regional Sales Lead
rsantana@clarke.com
Mobile: (561) 420-9079

**EXHIBIT C - ALTERNATE PRODUCT DATA SHEET
MOSQUITO ABATEMENT PRODUCTS**

Bid No. 22-0466-B

(Submitted with Section F Bid Submittal and Summary if applicable)

If additional pages are needed, copies will be accepted.

Proposed ALTERNATE PRODUCT INFO	
(Corresponding PRODUCT #1-32) (SEE SECTION F - Bid Submittal and Summary Column A)	Product # 5
Product No.: 11575-2.5	Manufacturer: Clarke
EPA Registration: n/a (product not EPA regulated)	Packaging: 2.5gal
References 1: Seminole County Mosquito Contol	
References 2: City of Everglades City	
Proposed ALTERNATE PRODUCT INFO	
(Corresponding PRODUCT #1-32) (SEE SECTION F - Bid Submittal and Summary Column A)	Product # 12
Product No.: 11012B	Manufacturer: Central Life Sciences
EPA Registration: 89459-95	Packaging: 40lb bag
References 1: Hillsborough County Mosquito Control - Ronald Montgomery	
References 2: Pasco County Mosquito Control District - Adriane Rogers	
Proposed ALTERNATE PRODUCT INFO	
(Corresponding PRODUCT #1-32) (SEE SECTION F - Bid Submittal and Summary Column A)	Product #
Product No.:	Manufacturer:
EPA Registration:	Packaging:
References 1:	
References 2:	
Proposed ALTERNATE PRODUCT INFO	
(Corresponding PRODUCT #1-32) (SEE SECTION F - Bid Submittal and Summary Column A)	Product #
Product No.:	Manufacturer:
EPA Registration:	Packaging:
References 1:	
References 2:	
Proposed ALTERNATE PRODUCT INFO	
(Corresponding PRODUCT #1-32) (SEE SECTION F - Bid Submittal and Summary Column A)	Product #
Product No.:	Manufacturer:
EPA Registration:	Packaging:
References 1:	
References 2:	

Bid No.: 22-0466-B(DG)									
Bid Title : Mosquito Abatement Products									
Date & Time Due: Tuesday, May 31st, 2022									

***Unit Pricing shall be inclusive of all shipping, fuel, off-loading, insurance and any other cost or fee incurred. Bidders are encouraged to pay special attention to the Container Unit Size. For example: 600 gallon, 15 cases, briquettes, tablets etc.**

****Any Equivalent products offered below shall meet the Criteria identified in EXHIBIT A - PRODUCT LIST See Section E Item 3.**Please complete the EXHIBIT C - ALTERNATE PRODUCT DATA SHEET for all PROPOSED ALTERNATE PRODUCTS in Column (D)**

Product No. (A)	Product Info		**PROPOSED PRODUCT ALTERNATE (D)	Estimated Annual (12 month) Quantity		Container Size (G)	*PROPOSED ALTERNATE Container Size (Complete if different from Column (G)) (H)	*Unit Price Per UOM (I)	Annual Total (E) x (I) = (J)	Two (2) Year Total (K) (J) x (2) = (K)
	Description (B)	Manufacturer (C)		Quantity (E)	UOM (F)					
1	1,2-Dibromo-2,2-dichloroethyl dimethyl phosphate Naled 87.4% (Dibrom® concentrate)	Manufacturer: AMVAC	No bid	30	gallon	Packaging: 30-gallon drum		\$ -	\$ -	\$ -
2	Bacillus thuringiensis subspecies israelensis Bti (Bactimos Briquet)	Manufacturer: Summit Chemical		1000	briquettes	Typical Packaging: Case of 100 Briquettes		\$ 1.00	\$ 1,000.00	\$ 2,000.00
3	Piperonyl butoxide and permethrin (Biomist® 31+66 ULV)	Manufacturer: Clarke Mosquito Control Products, Inc.	No bid	550	gallon	Packaging: 275-gallon reusable tote		\$ -	\$ -	\$ -
4	White Mineral Oil (10% w/w) (CocoBear™)	Manufacturer: Clarke Mosquito Control Products, Inc		300	gallon	Packaging: 2.5 Gallon		\$ 40.00	\$ 12,000.00	\$ 24,000.00
5	BVA2 Mosquito Larvicide Oil	Manufacturer: BV Associates, Inc.	Envirotech Oil	300	gallon	Packaging: 2.5-gallon jug		\$ 65.93	\$ 19,779.00	\$ 39,558.00
6	Piperonyl butoxide, phenothrin, prallethrin (Duet®)	Manufacturer: Clarke Mosquito Control Products, Inc		165	gallon	Packaging: 275 gallon reusable tote (liquid form)		\$ 221.31	\$ 36,516.15	\$ 73,032.30
7	Spinosad (mix of spinosyn A and spinosyn D) (Natular™ G)	Manufacturer: Clarke Mosquito Control Products, Inc		15,000	lbs.	Packaging: 40 pound bag		\$ 8.01	\$ 120,150.00	\$ 240,300.00
8	Spinosad (mix of spinosyn A and spinosyn D) (Natular™ G30) (Extended Release Granule)	Manufacturer: Clarke Mosquito Control Products, Inc		15,000	lbs.	Packaging: 40 pound bag		\$ 18.01	\$ 270,150.00	\$ 540,300.00
9	Spinosad (mix of spinosyn A & spinosyn D) (Natular™ T30)	Manufacturer: Clarke Mosquito Control Products, Inc		8,000	tablets	Typical Packaging: Case of 400 tablets		\$ 1.99	\$ 15,920.00	\$ 31,840.00
10	Spinosad (mix of spinosyn A & spinosyn D) (Natular™ XRT)	Manufacturer: Clarke Mosquito Control Products, Inc		660	tablets	Typical Packaging: Case of 220 tablets		\$ 4.89	\$ 3,227.40	\$ 6,454.80
11	Spinosad (mix of spinosyn A & spinosyn D) (Natular™ DT)	Manufacturer: Clarke Mosquito Control Products, Inc		15,200	tablets	Typical Packaging: Case 4,000 tablets (16 pouches of 250 each)	50x50ct cards (2,500 tablets) or 50x1	\$ 0.55	\$ 8,360.00	\$ 16,720.00

Bid No.: 22-0466-B(DG)									
Bid Title : Mosquito Abatement Products									
Date & Time Due: Tuesday, May 31st, 2022									

***Unit Pricing shall be inclusive of all shipping, fuel, off-loading, insurance and any other cost or fee incurred. Bidders are encouraged to pay special attention to the Container Unit Size. For example: 600 gallon, 15 cases, briquettes, tablets etc.**

****Any Equivalent products offered below shall meet the Criteria identified in EXHIBIT A - PRODUCT LIST See Section E Item 3.**Please complete the EXHIBIT C - ALTERNATE PRODUCT DATA SHEET for all PROPOSED ALTERNATE PRODUCTS in Column (D)**

Product No. (A)	Product Info		**PROPOSED PRODUCT ALTERNATE (D)	Estimated Annual (12 month) Quantity		Container Size (G)	*PROPOSED ALTERNATE Container Size (Complete if different from Column (G)) (H)	*Unit Price Per UOM (I)	Annual Total (E) x (I) = (J)	Two (2) Year Total (K) (J) x (2) = (K)
	Description (B)	Manufacturer (C)		Quantity (E)	UOM (F)					
12	S-Methoprene 4.25% (MetaLarv® S-PT)	Manufacturer: Valent BioSciences Corporation	Altosid P35 (S-Methoprene 4.25%)	6,000	lbs.	Packaging: 40 pound bag (30 bags/pallet)		\$ 18.72	\$ 112,320.00	\$ 224,640.00
13	Bacillus thuringiensis subsp israelensis strain AM 65-52 (VectoBac® GS)	Manufacturer: Valent BioSciences Corp.	No bid	25,000	lbs.	Packaging: 40 pound bag		\$ -	\$ -	\$ -
14	Bacillus thuringiensis subspecies israelensis strain AM65-52 (VectoBac® 12AS)	Manufacturer: Valent BioSciences Corp.	No bid	10	gallon	Packaging: 2.5 gallon (10 liter) HDPE plastic jugs, packaged 2 per case		\$ -	\$ -	\$ -
15	Bacillus thuringiensis subsp israelensis strain AM 65-52 (VectoBac® WDG)	Manufacturer: Valent BioSciences Corp.	No bid	24	lbs.	Packaging: case of 24 single pound containers		\$ -	\$ -	\$ -
16	Bacillus thuringiensis subspecies israelensis strain AM 65-52 (VectoBac® WDG)	Manufacturer: Valent BioSciences Corp.	No bid	500	lbs.	Packaging: 25 lbs. drum		\$ -	\$ -	\$ -
17	Bacillus sphaericus Serotype H5a5b strain 2362 (VectoLex® FG)	Manufacturer: Valent BioSciences Corporation	No bid	45,600	lbs.	Packaging: 40 pound bag (granular) (30 bags per pallet)		\$ -	\$ -	\$ -
18	Bacillus sphaericus 2362 (strain ABTS-1743) (VectoLex® WDG)	Manufacturer: Valent BioSciences Corporation	No bid	500	lbs.	Packaging: 25 pound drum		\$ -	\$ -	\$ -
19	Bacillus sphaericus 2362, serotype H5a5b, strain ABTS 1743 (VectoLex® WSP)	Manufacturer: Valent BioSciences Corporation	No bid	2,400	10 gram packets	Typical Packaging: Case of 800 (10 gram packets) (granular water soluble packet)		\$ -	\$ -	\$ -
20	<i>Bacillus sphaericus</i> 2362, Serotype H5a5b, strain ABTS 1743 2.7%; <i>Bacillus thuringiensis</i> Subsp. <i>israelensis</i> Serotype H-14 Strain AM65-52 4.5% (VectoMax® FG)	Manufacturer: Valent BioSciences Corporation	No bid	30,000	lbs.	Packaging: 40 pound bags (fine granule) (30 bags/pallet)		\$ -	\$ -	\$ -
21	Etofenprox 4% (Zenivex E4 RTU)	Manufacturer: Wellmark International		5	gallon	Packaging: 2.5 gallon jug x 2		\$ 92.52	\$ 462.60	\$ 925.20
22	<i>Bacillus thuringiensis</i> subsp. <i>israelensis</i> , strain AM 65-52 6.07%, methoprene10% (VectoPrime® FG)	Manufacturer: Valent BioSciences Corporation	No bid	30,000	lbs.	Packaging: 40 pound bags (fine granule) (30 bags/pallet)		\$ -	\$ -	\$ -

Bid No.: 22-0466-B(DG)									
Bid Title : Mosquito Abatement Products									
Date & Time Due: Tuesday, May 31st, 2022									

***Unit Pricing shall be inclusive of all shipping, fuel, off-loading, insurance and any other cost or fee incurred. Bidders are encouraged to pay special attention to the Container Unit Size. For example: 600 gallon, 15 cases, briquettes, tablets etc.**

****Any Equivalent products offered below shall meet the Criteria identified in EXHIBIT A - PRODUCT LIST See Section E Item 3.**Please complete the EXHIBIT C - ALTERNATE PRODUCT DATA SHEET for all PROPOSED ALTERNATE PRODUCTS in Column (D)**

Product No. (A)	Product Info		**PROPOSED PRODUCT ALTERNATE (D)	Estimated Annual (12 month) Quantity		Container Size (G)	*PROPOSED ALTERNATE Container Size (Complete if different from Column (G)) (H)	*Unit Price Per UOM (I)	Annual Total (E) x (I) = (J)	Two (2) Year Total (K) (J) x (2) = (K)
	Description (B)	Manufacturer (C)		Quantity (E)	UOM (F)					
23	Permanone 31-66	Manufacturer: Bayer Environmental Science	No bid	550	gallon	Packaging: 275 gallon tote		\$ -	\$ -	\$ -
24	Fyfanon ULV	Manufacturer: Cheminova, Inc.	No bid	275	gallon	Packaging: 275 gallon tote		\$ -	\$ -	\$ -
25	MERUS® 3.0	Manufacturer: Clarke Mosquito Control Products, Inc.		275	gallon	Packaging: 275 gallon tote		\$ 317.37	\$ 87,276.75	\$ 174,553.50
26	BVA 13	Manufacturer: BV Associates, Inc.	No bid	10	gallon	5 gallon jug		\$ -	\$ -	\$ -
27	Deltamethrin 2.0%, a Type II pyrethroid. (DeltaGard®)	Manufacturer: Bayer Environmental Science	No bid	270	gallon	Packaging: 30 gallon returnable container		\$ -	\$ -	\$ -
28	Methoprene 2.1% (Altosid® XR Briquettes)	Manufacturer: Wellmark International		660	briquettes	Typical Packaging: Case of 220 Briquettes		\$ 3.58	\$ 2,362.80	\$ 4,725.60
29	Methoprene 8.62% (Altosid® 30-Day Briquettes)	Manufacturer: Wellmark International		4,800	briquettes	Typical Packaging: Case of 400 Briquettes		\$ 1.25	\$ 6,000.00	\$ 12,000.00
30	Methoprene 1.5% (Altosid® XR-G)	Manufacturer: Wellmark International		6,000	lbs.	Packaging: 40 pound bags		\$ 9.40	\$ 56,400.00	\$ 112,800.00
31	Methoprene 4.25% (Zoecon® Altosid® P35 (Altosid® P35))	Manufacturer: Wellmark International		4,800	lbs.	Packaging: 30 bags of 40 lbs. each (1,200 lbs. Palletized)		\$ 18.72	\$ 89,856.00	\$ 179,712.00
32	Methoprene .2% (Altosid® SBG II)	Manufacturer: Wellmark International		48,000	lbs.	Packaging: 40 pound bags (30 bags/pallet)		\$ 3.38	\$ 162,240.00	\$ 324,480.00
Two (2) Year Total									\$	2,008,041.40

Bid No.: 22-0466-B(DG)									
Bid Title : Mosquito Abatement Products									
Date & Time Due: Tuesday, May 31st, 2022									

***Unit Pricing shall be inclusive of all shipping, fuel, off-loading, insurance and any other cost or fee incurred. Bidders are encouraged to pay special attention to the Container Unit Size. For example: 600 gallon, 15 cases, briquettes, tablets etc.**

****Any Equivalent products offered below shall meet the Criteria identified in EXHIBIT A - PRODUCT LIST See Section E Item 3.**Please complete the EXHIBIT C - ALTERNATE PRODUCT DATA SHEET for all PROPOSED ALTERNATE PRODUCTS in Column (D)**

Product No. (A)	Product Info		**PROPOSED PRODUCT ALTERNATE (D)	Estimated Annual (12 month) Quantity		Container Size (G)	*PROPOSED ALTERNATE Container Size (Complete if different from Column (G)) (H)	*Unit Price Per UOM (I)	Annual Total (E) x (I) = (J)	Two (2) Year Total (K) (J) x (2) = (K)
	Description (B)	Manufacturer (C)		Quantity (E)	UOM (F)					

MANUFACTURER DISCOUNTS - List Manufacturer Name, MSRP published price website and % discount offered for other related mosquito abatement products. **THIS ITEM WILL NOT BE USED TO DETERMINE AWARD.**

Item	Manufacturer	MSRP Price Website	Discount %
1			
2			
3			

BULK ORDER PRICING - List any other bulk order sizes and pricing that can be offered at a savings. **THIS ITEM WILL NOT BE USED TO DETERMINE AWARD.**

Item	Product	Order Size	Pricing
1			
2			
3			
