

145-0474-CP(DF)

SUBMIT TO:

PINELLAS COUNTY BOARD OF **COUNTY COMMISSIONERS** 400 S. FT. HARRISON AVENUE ANNEX BUILDING – 6TH FLOOR CLEARWATER, FL 33756



Page 1 of 65

BID NUMBER: 145-0474-

CP(DF)

INVITATION TO BID

ISSUE DATE:

August 28, 2015

TITLE:

UV Facility Modifications - SCBWRF (PID No. 002473A)

SUBMITTAL DUE: September 29, 2015 @ 3:00 P.M.

AND MAY NOT BE WITHDRAWN FOR 120 DAYS FROM DATE LISTED ABOVE. BID SUBMITTALS RECEIVED AFTER SUBMITTAL DATE & TIME WILL NOT BE ACCEPTED AND WILL BE RETURNED

DEADLINE FOR WRITTEN QUESTIONS: September 18, 2015 BY 3:00 P.M. SUBMIT QUESTIONS TO: David Fechter AT dfachter@pinellascounty.org

Phone: 727-464-3154 Fax: 727-464-3925

September 10, 2015 at 1:00 P.M. South Cross Bayou Water Reclamation Facility Control Building 7401 54th Avenue N St Petersburg, Florida 33709

NON-MANDATORY SITE VISIT

Engineering Estimate \$404,000,00

Pians Prepared by: Parsons & Arcadis

Engineer/Project Manager is: Nestor Sotelo Torres, Engineering

THE MISSION OF PINELLAS COUNTY

Pinellas County Government is committed to progressive public policy, superior public service, courteous public contact, judicious exercise of authority and sound management of public resources to meet the needs and concerns of our citizens today and tomorrow.

JOSEPH LAURO. **CPPO/CPPB**

Director of Purchasing

NOTE: BIDS ARE TO BE SUBMITTED IN DUPLICATE. THIS FORM MUST BE RETURNED WITH YOUR BID

Awards of bids for construction services with an engineering estimate in excess of \$100,000 will only be made to Bidders who have pre-qualified with Pinellas County for Water and Sanitary Sewer type category construction, or those that are prequalified by the Florida Department of Transportation (FDOT) in an equivalent category, in the amount that equals or exceeds their bid. Only those bids from Bidders that meet the pre-qualification requirements from either Pinellas County or FDOT prior to a bid opening will be considered.

BIDDER MUST COMPLETE THE FOLLOWING

Bidders are cautioned that the policy of the Board of County Commissioners, Pinellas County, is to accept the lowest responsible bid received meeting Specifications. No changes requested by a Bidder due to an error in pricing will be considered after bid opening date as advertised. By signing this proposal form Bidders are attesting to their awareness of this policy and are agreeing to all other bid terms and conditions including all insurance requirements.

PAYMENT TERMS: 0 % 30 DAYS, NET PER F.S. 218.735

TLC Diversified, Inc.				
BIDDER (COMPANY NAME):	D/B/A			
2719 17th Street East		etto, FL 3422	21	
Malling Address	City, State Z	lip qi		
tlamberson@tlcdiv.com	(941) 7	722-0621 /	(941) 722-1382	
Company Email Address	Phone		Fax	
TLC Diversified, Inc.			t/Tlamberson@tlcdiv.	.com
Remit To Name (as Shown on Company Invoice	Printed Con	tact Represent	tative/Title/Email	

Proper Corporate Identity is needed when you submit your bid, especially how your firm is registered with the Florida Division of Corporations. Please visit www.sunblz.org for this information. It is essential to return a copy of your W-9 with your bid. Thank you.

I HEREBY AGREE TO ABIDE BY ALL THE TERMS AND CONDITIONS OF THIS BID INCLUDING INSURANCE REQUIREMENTS &

CERTIFY I AM AUTHORIZED TO SIGN THIS BID FOR THE BIDDER.

Dalas Lamberson/VP Operations

REVISED: 04/15/2015

PRINT NAME & TITLE

We, the above signed, hereby declare that no person or persons, firm or corporation, other than the above signed, are interested in this proposal, as principals, and this Proposal is made without collusion with any person, firm or corporation, and we have carefully to our full satisfaction examined the Special Provisions and form of Agreement and Bond, together with approved Plans and Specifications for the above described Project, and we have made a full examination of the location of the proposed Work and source of supply of materials, and we hereby agree to furnish all necessary labor, equipment, and materials, fully understanding that quantities shown herewith are approximate only, and we will fully complete ell necessary Work in accordance with Plans and, Specifications and requirements under the terms of the Design Professional/Engineer, within the Agreement Amount and Agreement Period specified in this Proposal for the following unit values.

AUTHORIZED SIGNATURE

SECTION EL BID SUBMITTAL FORM ADDENDUM NOME.

SECTION E-BID SUBMITTAL FORM;

Bid Title: UV Facility Modifications - SCBWRF (PID # 002473A) Bid Number: 145-0474-CP(DF)

(Schedule of Values)

NO CHANGES SHALL BE MADE TO THE PAY ITEM QUANTITIES CONTAINED HEREIN. ANY CORRECTIONS TO BIDDER ENTRIES SHALL BE MADE IN INK AND SHALL BE INITIALED BY BIDDER.

Item No.	Description	Unit of Measure	Approximate Quantities	Unit Price	Extended Total
1	Mobilization/Demobilization	LS	1	\$ 18,000	\$ 18,000
2	Addition of a Motorized Slide Gate and Controls for the UV Facility	LS	1	\$ 98,000	\$ 98,000
3	Addition of Solid Covers on Existing UV Facility Grating	LS	1	\$ 82,000	\$ 82,000
4	New Ladders and Building Sign	LS	1	\$ 8,000	\$ 8,000
5	Removal of Debris, Equipment and Materials in ABW Filter Bays 4, 5, 6 and 7 and Associated Electrical Equipment	LS	1		\$ 146,000
6	Removal of Mixing Equipment and Materials in the EQ Tank and Associated Electrical Equipment and Replacement of LCP-1400 Door	LS	1	\$ 12,000	\$ 12,000
7	Testing and Verification of Drainage in Basins 4 through 7	LS	1	\$4,000	\$ 4,000
8	Grouting Floors in Basins 4 through 7 to Slope to Existing Drains	SF	5,120	\$5	\$ 25,600
9	Rehabilitation of Slab	LS	1	\$7,000	\$7,000
10	Contingency (includes Permit Allowance)				\$50,000.00
_			TOTA	L BASE BID	\$450,600
11	Optional Bid Item – PLC Programming	LS	1	\$ 28,000	\$ 28,000

Reduce Completion Time Incentive

The County may be interested in optional pricing if the project can be completed in less time. Bidders at an option may provide alternate cost for expediting the project completion time. All other terms and conditions shall remain the same. This information may be used to determine award.

Reduction In Consecutive Calendar Days To Period of Agreement on Page 14 Item 2	Lump Sum Cost Increase	Lump Sum Cost Decrease
30	s N/A	s N/4
60	s N/A	s N/A
90	s N/A	s N/A

SECTION 00 75 00

SPECIAL PROVISIONS

These Special Provisions provide additional information and modify the Invitation to Bid and the Pinellas County Utilities Standard Technical Specifications (PCU-STS) for Utilities Construction. Unless noted herein, all conditions of the (STS) apply.

ARTICLE SP-0 MODIFICATIONS TO THE INVITATION TO BID

A. SECTION B - SPECIAL CONDITIONS

1. Paragraph 42 Laboratory Testing - Replace the first sentence with the following: "Cost of all required laboratory testing shall be borne by the CONTRACTOR and the cost of all re-testing due to defective materials or construction shall also be borne by the CONTRACTOR."

B. SECTION E - BID SUBMITTAL FORM

 Contractor shall provide the following list of major suppliers/subcontractors with their Bid for Bid evaluation purposes only.

LIST OF MAJOR SUPPLIERS / SUBCONTRACTOR

Item No.	Description	Supplier/Manufacturer/Subcontractor
1	Slide Gate	Rodney Hunt
2	Gate Actuator	Rodney Hunt
3	System Integrator	Rocha Controls

ARTICLE SP-1 SUMMARY OF WORK

- A. Work provided by the Contractor includes, but is not limited to, providing all equipment, material, and labor for the installation and completion of the following:
 - 1. Installation of a stainless steel motorized gate and controls in the common effluent bypass channel for the UV facility.

THE AMERICAN INSTITUTE OF ARCHITECTS

Executed in 1 Counterpart



AIA Document A310

Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we TLC Diversified, Inc.

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

2719 17th St. East, Palmetto, FL 34221

as Principal, hereinafter called the Principal, and Westfield Insurance Company

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

PO Box 5001, Westfield Center, OH 44251-5001

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

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

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

400 South Fort Harrison, 6th Floor, Clearwater, FL 33756

as Obligee, hereinafter called the Obligee, in the sum of Five Percent of Amount Bid

Dollars (\$ ---5%---

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

WHEREAS, the Principal has submitted a bid for

(Here insert full name, address and description of project)

UV Facility Modifications - SCBWRF (PID # 002473A) Bid Number: 145-0474-DP(DF),

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

Signed and sealed this

29th

day of

September

2015

(Seal)

(Seal)

TLC Diversified, Inc.

(Witness)

Tiffany Taylor, Asst. Secretary-

Diversified, Inc.

(Principal)

Dalas Lamberson (Title) VP Operations

Westfield Insurance Company

(Surety)

-/6

Don Bramlage, Attorney-in-Fact

and Florida Licensed Resident Agents

AIA DOCUMENT A310 · BID BOND · AIA ® · FEBRUARY 1970 ED · THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 N.Y. AVE., N.W., WASHINGTON, D. C. 20006

1

General Power of Attorney POWER NO. 0990992 00

Westfield Insurance Co. Westfield National Insurance Co. **Ohio Farmers Insurance Co.**

CERTIFIED COPY

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these

presents make, constitute and appoint

DON BRAMLAGE, JEFFREY W. REICH, LESLIE M. DONAHUE, SUSAN L. REICH, PATRICIA L. SLAUGHTER, GLORIA A.

RICHARDS, TERESA L. DURHAM, CHERYL FOLEY, LISA ROSELAND, KIM E. NIV, SONJA HARRIS, JOINTLY OR SEVERALLY

and State of FL its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, of MAITLAND place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of suretyship-----

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for

and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact. may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be it Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate relating thereto by facsimile, and any power of attorney or certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile

seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000).

in Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 25th day of AUGUST A.D., 2015 .

Corporate Seals Affixed

San to the same

WINDING WS

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By Dennis P. Baus, National Surety Leader and Senior Executive

A.D., 2015, before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial Seal Affixed

State of Ohio

County of Medina

State of Ohio County of Medina

35.:



David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 29th day of A.D., 2015





Secretary

Frank A. Carrino, Secretary

SECTION E - BID SUBMITTAL FORM

Substitute Request for Taxpayer Give form to the Form **Identification Number and Certification** requester. Do not send to the IRS. Name (as shown on your income tax return) TLC Diversified, Inc. page Business name, if different from above 5 Instructions Check appropriate box: Individual/Sole proprietor Corporation Partnership Exempl ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ P Other (see instructions) Print Address (number, street, and apt, or suite no.) Requester's name and address (optional) 2719 17th Street East City, state, and ZIP code Palmetto, FL 34221 List account number's) here (optional) Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid Social security number backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3. Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose Employer identification number number to enter. 2513308 Part II Certification Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayor identification number (or I am waiting for a number to be issued to me), and 1 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

3. I am a U.S. citizen or other U.S. person (defined in the instructions). 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 on page 4.

Sign Here

Signature of U.S. person

Date -

September 21, 2015

REVISED: 04/15/2015

Dalas Lamberson/VP Operations orm W-9 available upon request. *Instructions to Form

Detach on the perforation

Section 119.071(5), Florida Statutes Notice:

Your Tax Identification Number (which for individuals is your social security number) is collected on Form W9 for use in filing information returns with the IRS as described more fully below. Collection of the tax identification number (or social security number as applicable) is mandatory pursuant to Section 6109 of the Internal Revenue Code (26 U.S.C § 6109).

Privacy Act Notice:

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

145-0474-CP(DF)	Page 43 of 65
SECTION E - BID SUBMITTAL	FORM
ELECTRONIC PAYMENT (EPAYABLES):	
The Board of County Commissioners (County) is offering faster payments. The Cou	nty would prefer to make payment using credit card.
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 I	Department website <u>www.pinellascounty.org/purchase</u> .

Company Name	TLC Diversified, Inc.	
Signature X		
Printed Signature	Dalas Lamberson/VP Operations	

SECTION E - BID SUBMITTAL FORM

BID SUBMITTAL OFFICERS FORM

BID TITLE: UV Facility Modifications - SCBWRF (PID No. 002473A)

BID NUMBER: 145-0474-CP(DF)

Each Bid by an individual or firm shall state the name and address of each person who owns an interest therein, and, if any corporation, the name and addresses of its officers, or if an LLC, the name and address of its members. Bids shall be signed by the person or member of the firm making the same, and if a corporation, by an authorized officer or agent, subscribing the name of the corporation, together with his own name and the corporate seal.

The Bidder further agrees to execute the Agreement within ten (10) calendar days after receipt of notice of award, and within the time frame of Section H – Agreement.

The Bidder further agrees to bear the full cost of maintaining all Work until the final acceptance.

Accompanying the Bid is a Bid Guarantee, meeting the requirements described in the Instruction to Bidders.

The Contractor's address and principal place of business is:

	TLC Diver	rsified, Inc.
	2719 17th	Street East
	Palmetto,	FL 34221
If Contractor is a	Corporation, list the names, titles and but	siness addresses of its President, Secretary and Treasurer.
PRESIDENT	Thurston Lamberson	ADDRESS:
	Printed Name	2719 17th Street East
		Palmetto, FL 34221
SECRETARY	Joanne Lamberson Printed Name	ADDRESS: 2719 17th Street East Palmetto, FL 34221
TREASURER	Joanne Lamberson Printed Name	ADDRESS: 2719 17th Street East Palmetto, FL 34221

145-0474-CP(DF)	Page 45 of 65
SECTION E – B	ID SUBMITTAL FORM
Said Corporation is qualified to do business in the State of Florida.	
TLC Diversified, Inc.	By
Corporation Name	Vice President Operations/Dalas Lamberson
	CORPORATE SEAL
	N/A
	Qualifying Agent
	CGC041816 / CUC053963
	Contractor's Registration or Certificate No. issued by the State of Florida
If Contractor is not a corporation, list the name(s) and business add	
Name	ADDRESS:
Printed Name	
	
Name	ADDRESS:
Printed Name	-
/	
Name	ADDRESS:
Printed Name	-
The said company or business entity is a sole proprietorship, partner	ship, or joint venture and is trading and doing business as
	Company Name
By:	
	Name of Firm or Qualifying Agent
	Contractor's Registration or Certification No. issued by the State of Florida

SECTION E - BID SUBMITTAL FORM

FLORIDA TRENCH SAFETY ACT

CERTIFICATION AND DISCLOSURE STATEMENT

The undersigned acknowledges the requirements of the Florida Trench Safety Act (Section 553.60 et. seq. Florida Statutes),

- A. The Bidder further acknowledges that the Florida Trench Safety Act, (the Act) establishes the Federal excavation safety standards set forth at 29 C.F.R. Section 1926.650 Subpart P, as the interim state standard until such time as the state of Florida, through its Department of Labor and Employment Security, or any successor agency, adopts, updates, or revises said interim standard. This State of Florida standard may be supplemented by special shoring requirements established by the State of Florida or any of its political subdivisions.
- The Bidder, as Contractor, shall comply with all applicable excavation/trench safety standards.
- C. The contractor shall consider the geotechnical data available from the County, if any, the Contractor's own sources, and all other relevant information in its design of the trench safety system to be employed on the subject Project. The Contractor acknowledges sole responsibilities for the selection of the data on which it relies in designing the safety system, as well as for the system itself.
- D. The amounts that the Bidder has set forth for pipe installation includes the following excavation/trench safety measures and the linear feet of trench excavated under each safety measure. These units, costs, and unit values shall be disclosed solely for the purpose of compliance with procedural requirements of the Act. No adjustment to the Agreement Time or price shall be made for any difference in the actual number of linear feet of trench excavation, except as may be otherwise provided in these Contract Documents.

	Trench Safety Measure (Description)	Units of Measure (LF, SF)	Unit (Quantity)	Unit Cost	Extended Cost
1.	Slope	LS	1	\$ 200	\$ 200
2.			and the second s	\$	\$
3				\$	\$
١				\$	\$
5.				\$	s

For Information Only, Not for Payment Purposes

\$ 200.00

Bidder may use additional sheets as necessary to extend this form. Failure to complete the above may result in the bid being declared non-responsive.

- E. The amount disclosed as the cost of compliance with the applicable trench safety requirements does not constitute the extent of the Contractor's obligation to comply with said standards. The Contractor shall extend additional sums at no additional cost to the County, if necessary, to comply with the Act (except as otherwise be provided).
- F. Acceptance of the bid to which this certification and disclosure applies in no way represents that the County or its representatives has evaluated and thereby determined that the above costs are adequate to comply with the applicable trench safety requirements nor does it in any way relieve the Contractor of its sole responsibility to comply with the applicable trench safety requirements.

TLC Diversified, Inc.		
Company Name		
*		
Name and Title Datas Lamberson/VP Operations		
	(941) 7 22 -0621 / (941) 722-1382	
Address:	Telephone/Fax	
TLC Diversified, Inc.	59-2513308	
2719 17th Street East	Federal Employee ID NO. (FEIN)	
Palmetto, FL 34221	tlamberson@tlcdiv.com	
	Email of Account Representative	

SECTION F ADDENDA ACKNOWLEDGEMENT FORM

SECTION F - ADDENDA ACKNOWLEDGEMENT FORM:

Bid Title: UV Facility Modifications - SCBWRF (PID No. 002473A)

Bid No: 145-0474-CP(DF)

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

SIGNATURE/PRINTED NAME	DATE RECEIVED
X Dalas L VP Ope	amberson/ 09/24/2015
	Dalas L

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 addendum(s) has been issued, acknowledge receipt by signature and date in this section. Failure to do so may result in being considered non-responsive.

Information regarding Addenda issued is available on the Purchasing Department's website at, www.pinellascounty.org/purchase/Current_Bids1.htm, listed under category 'Current Bids'.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/23/2015

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

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

Certificate notice in fied of such endorsell	ieniųs).				
PRODUCER	1-813-229-8021	CONTACT NAME:	Diana Defreeuw		
M. E. Wilson Co., Inc.		PHONE (A/C. No. Ext):	813-229-8021	FAX (A/C, No): 813-2	29-2795
300 W. Platt St.		E-MAIL ADDRESS:	ddefreeuw@mewilson.com	<u> </u>	
Ste 200			INSURER(S) AFFORDING COVERAGE		NAIC#
Tampa, FL 33606		INSURER A:	WESTFIELD INS CO		24112
INSURED		INSURER B :	FCCI INS CO		10178
TLC Diversified, Inc.		INSURER C :			
2719 17th Street East		INSURER D :			
		INSURER E :			
Palmetto, FL 34221		INSURER F:			

COVERAGES CERTIFICATE NUMBER: 43325057 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 S	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
A	х	COMMERCIAL GENERAL LIABILITY			TRA3972460	04/01/15	04/01/16	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
		CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	\$ 500,000
	X							MED EXP (Any one person)	\$ 10,000
	X	X \$500 Prop Dmg Ded						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO-							PRODUCTS - COMP/OP AGG	\$ 2,000,000
<u></u>	OTHER:								\$
A	AUT	OMOBILE LIABILITY	1		TRA3972460	04/01/15	04/01/16	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X AUTOS X AUTOS X AUTOS X AUTOS X AUTOS AUTOS							BODILY INJURY (Per person)	\$
								BODILY INJURY (Per accident)	\$
								PROPERTY DAMAGE (Per accident)	\$
									\$
A	х	UMBRELLA LIAB X OCCUR			TRA3972460	04/01/15	04/01/16	EACH OCCURRENCE	\$ 5,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
l	DED X RETENTION \$ 0								\$
В	WORKERS COMPENSATION				001WC15A61661	04/01/15	04/01/16	X PER STATUTE ER	
								E.L. EACH ACCIDENT	\$ 1,000,000
				JN/A				E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
<u>L</u>									\$ 1,000,000
A	A Installation Floater				TRA3972460	04/01/15	04/01/16	\$1,000 Ded	1,000,000
ĺ								Transit & Storage:	Included
								Deductible:	1,000

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

CERTIFICATE HOLDER	CANCELLATION					
For Informational Purposes Only	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	AUTHORIZED REPRESENTATIVE					
	Sanet J. Dayton					

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DRUG FREE WORKPLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087, as amended from

TLC Diversified, Inc. does:

time to time, hereby certifies that

(Name	of Business)								
1.	. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited								
	in the workplace and specifying the actions that will be taken against employees								
	for violation of such prohibition.								
2.	Inform employees about the dangers of drug abuse in the workplace, the								
	business's policy of maintaining a drug-free workplace, any available drug								
	counseling, rehabilitation, and employee assistance programs, and the penalties								
	that may be imposed upon employees for drug abuse violations.								
3.	Give each employee engaged in providing the commodities or contractual								
	services that are under bid a copy of the statement specified in subsection (1).								
4.	In the statement specified in subsection (1), notify the employees that, as a								
	condition of working on the commodities, or contractual services that are under								
	bid, the employee will abide by the terms of the statement, and will notify the								
	employer of any conviction of, or plea of guilty, or nolo contendere to any								
	violation of chapter 893, Florida Statutes, as amended from time to time, or of any controlled substance law of the United States, or any State, for a violation								
	occurring in the workplace no later than five (5) days after such conviction.								
5.	Impose a sanction on, or require the satisfactory participation in a drug abuse								
	assistance, or rehabilitation program, if such is available in the employee's								
	community, by any employee who is so convicted.								
6.	Make a good faith effort to continue to maintain a drug-free workplace through								
	implementation of this section.								
٨٥	the person authorized to sign the statement, I certify that this firm complies fully								
	the above requirements.								
VV 11	TLC Diversified, Inc.								
	X								
	Bidders Signature								
	Dalas Lamberson, VP Operations								
	August 24, 2015								

Date

PUBLIC ENTITY CRIME FORM

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

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

1. This sworn statement is submitted to Pinellas County, FL by:

<u>Dalas Lamberson</u>, <u>Vice President Operations</u> (print individual's name and title)

for

TLC Diversified, Inc.

(print name of entity submitting sworn statement)

whose business address is

2719 17th St. E., Palmetto, FL 34221

and (if applicable its Federal Employer Identification Number (FEIN) is

59-2513308

- 2. I understand that a "public entity crime" as defined in Para. 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
- 3. I understand that "convicted" or "conviction" as defined in Para. 287.133(1)(b), Florida Statutes means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment of information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.
- 4. I understand that an "affiliate" as defined in Para. 287.133(1)(a), Florida Statutes means:

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

<u>X</u>	_Neither	the	entity	submitting	this	sworn	statement,	nor	any	officers,
directo	rs, execu	tives	, partne	ers, sharehol	ders,	employ	yees, memb	ers, o	or age	ents who
are act	ive in ma	anage	ement o	of the entity	, nor	any af	filiate of the	e ent	ity h	ave been
charge	d with an	d cor	nvicted	of a public	entity	crime	subsequent	to Ju	ly 1.	1989.

The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place

the entity submitting this sworn statement on the convicted vendor list (attach a copy of the final order).

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

TLC Diversified, Inc.

(Signature)

Dalas Lamberson, Vice President Operations

Sworn to and subscribed before me this 16thday of September , 2015

Personally known to me.



Notary Public - State of Florida

Signature of Notary Linda K. Moore

Notary Stamp:



TLC Diversified, Inc.

Keeping Water Moving

Environmental Construction
Professionals Serving the Water
& Wastewater Industry

CG C041816 CU C053963

Corporate Resolution

December 04, 2014

RE: Authority to Sign Legal Documents

TO WHOM IT MAY CONCERN:

TLC Diversified, Inc., being a legal Corporation organized under the Laws of the State of Florida in April, 1985, Mr. Thurston Lamberson and Mrs. Joanne R. Lamberson and having 100% of the outstanding shares of said Corporation owned since March of 1989 declares the following as a matter of record.

Mr. Dalas Lamberson, Vice President Operations, and Mrs. Tiffany Taylor, Assistant Secretary, shall have full power and authority to sign any and all Legal and Binding Documents and make all commitments of whatever nature for TLC Diversified, Inc.

Signed this 4th day of December, 2014

Thurston Lamberson

President

Joanne R. Lamberson Senior Vice-President

Sworn to and subscribed before me Thurston Lamberson, and Joanne R Lamberson whom I know this 4th day of December, 2014.

Linda Kay Moork

Notary Public

My

LINDA KAY MOORE

Notary Public - State of Florida

My Comm. Expires Mar 20, 2016

Commission # EE 168648

My Commission Expires:

March 20, 2016



STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

LAMBERSON, THURSTON T L C DIVERSIFIED INC 2719 17TH STREET EAST PALMETTO FL 34221

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



DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CGC041816

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



LAMBERSON, THURSTON T L C DIVERSIFIED INC 2719 17TH STREET EAST PALMETTO FL 34221





STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD 1940 NORTH MONROE STREET TALLAHASSEE FL 32399-0783 (850) 487-1395

LAMBERSON, THURSTON T L C DIVERSIFIED INC 2719 17TH STREET EAST PALMETTO FL 34221

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

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



DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CUC053963

The UNDERGROUND UTILITY & EXCAVATION CO Named below IS CERTIFIED Under the provisions of Chapter 489 FS. Expiration date: AUG 31, 2016

LAMBERSON, THURSTON TLC DIVERSIFIED INC 2719 17TH STREET EAST PALMETTO FL 34221

ISSUED: 07/27/2014



DISPLAY AS REQUIRED BY LAW

SEQ # L1407270002721

State of Florida Department of State

I certify from the records of this office that T.L.C. DIVERSIFIED, INC. is a corporation organized under the laws of the State of Florida, filed on April 4, 1985.

The document number of this corporation is H51364.

I further certify that said corporation has paid all fees due this office through December 31, 2015, that its most recent annual report/uniform business report was filed on January 12, 2015, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twelveth day of January, 2015



Secretary of State

Authentication ID: CC2573931257

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

https://efile.sunbiz.org/certauthver.html